



## **IRT BOOK of REGULATIONS for REALITY THERAPY PSYCHOTHERAPY TRAINING**

### **1. INTRODUCTION**

#### **1.1**

Based on article 5 of the Statute of the Institute for Reality Therapy (IRT) and EART Book of Regulations for Reality Therapy Psychotherapy Training this document defines educational standards, conditions and ways of obtaining the title of Reality Therapy Psychotherapist (RTP).

#### **1.2**

This Book of Regulations upholds the mission of the William Glasser Institute (WGI), the European Association for Reality Therapy (EART) and the Institute for Reality Therapy (IRT). It provides educational standards, conditions and ways of obtaining the title of RT Psychotherapist (RTP) in accordance with the standards and criteria of WGI, EART and of the European Association for Psychotherapy (EAP).

#### **1.3**

The training for a Reality Therapy Psychotherapist lasts for a minimum of 5 years. It is divided into two phases: Phase One lasts for 2 years and Phase Two lasts for 3 years. The whole programme includes a minimum of 1489 hours of training. When the required education to degree level (or equivalent) is included, the training takes 3289 hours (minimum).

#### **1.4.**

Faculty in both phases of the training are trained in accordance with the educational standards of WGI and EART, who maintain a list of accredited faculty.

### **2. ENTRY REQUIREMENTS**

The entry requirements are as follows:

- a) **A minimum of a Bachelor's degree in human sciences** (medical, psychological, social, educational, etc) or equivalence. If the degree is missing content areas necessary for a foundation in psychotherapy study, these will be identified and IRT will help the candidate to find a way to cover the missing content during Phase Two of the training.

If the candidate has a degree in a non-humanistic discipline, then s/he is obliged to compensate for the gaps that are identified in his/her required knowledge in an individual program arranged by the IRT and the candidate. This individual programme

should be completed before Phase Two. An undergraduate trainee can exceptionally become a candidate for RTP if s/he graduates with a humanistic degree before Phase Two of the training.

#### **b) Completion of Phase One of RT training**

Phase One of the training is open also to individuals who wish to learn Reality Therapy, but are not interested in progressing to full RTP training.

#### **c) Entry Interview**

Before beginning Phase Two of the training programme the candidate is required to attend an entry interview based on the recommendation of one of his previous teachers from Phase One, and on a written self-evaluation. In the written self-evaluation the candidate explains his/her motivation and personal potential for the psychotherapist's profession. The Entry Interview Board is composed of at least two faculty members who teach in Phase Two. The aim of the interview is to review entry requirements with the candidate and through cooperative self-evaluation to assess if the candidate is suited to psychotherapy training.

#### **d) Accepting the Conditions of Training and Ethical Principles**

If the Board and the candidate agree that s/he is suited to psychotherapy training, s/he needs to sign an agreement that accepts both the conditions of the training programme and the EART Code of Ethics. Before the candidate signs the agreement s/he needs to receive and read the relevant documentation: The Book of Regulations for Reality Therapy Psychotherapy Training, the Code of Ethics and the Complaints and Appeals Procedures.

#### **e) Clinical practice under regular supervision**

Before commencing Phase Two it is the candidate's responsibility to find clinical practice placement either within a mental or social health setting, or equivalent, either with individual clients, families or groups, under regular supervision. Institutions that offer clinical practice to candidates should have organised, regular supervision of the therapeutic work. If not, the candidate can choose for that purpose one of his/her training supervisors.

### **3. CURRICULUM**

#### **3.1 COMPONENTS OF THE CURRICULUM**

Training for RTP is balanced between theory, practice and personal experience. These three components of the programme are:

##### **a) THEORETICAL STUDY**

- Choice Theory, Reality Therapy and conventional psychopathology
- Reality Therapy and other approaches: different epistemologies, different understanding of life, personality and behaviour
- RT and theories of change
- Assessment and intervention in RT
- Multicultural dimension of RT and understanding of social and cultural issues in relation to psychotherapy and
- Multiple applications of Choice Theory

### b) REALITY THERAPY PRACTICE

- Practicing RT in training settings under Faculty supervision
- Practicing RT either within mental or social health setting or equivalent – either with individual clients, families, or groups under regular supervision, not necessarily by a Reality Therapy psychotherapist.

### c) PERSONAL PSYCHOTHERAPEUTIC EXPERIENCE

- Continuous self-evaluation of personal beliefs and behaviour during the training;
- Experience of and reflection on the relationships amongst learning group members and between individual and trainer;
- Personal development through a process of making and implementing plans for raising the quality of life, journaling, peer group experiences, portfolios, etc.
- Personal psychotherapy

## 3.2 METHOD

The main philosophy of teaching and personal development in our training is experiential. During the training candidates are continuously encouraged to evaluate the application of the concepts of CT and RT in their own lives before starting practicing them with clients. The core principle is that the concepts need to be internalised by the RTP candidates before s/he can ethically or effectively use them with others.

### a) HOW WE TEACH THEORY

We use comprehensive and diverse theoretical and didactic lectures.

- Instructors' lectures combined with group discussion
- Lectures by Dr. William Glasser, the author of CT and RT, and other successful RTP on videotapes and audiotapes combined with group discussion;
- Candidates' presentations combined with group discussions
- Analysing filmed materials on the topics related to the course
- Critical essays written by participants on suggested psychotherapy literature
- Discussions initiated by participants
- Recommending the lectures of other psychotherapy schools
- Recommending relevant literature
- Teaching by modelling.

### b) HOW WE TEACH PSYCHOTHERAPEUTIC SKILLS

We train candidates' therapeutic skills through:

- Role play settings with various clients and analysis including self-evaluation, peer feedback and supervisor's feed back
- Self-evaluation of demonstrated skills and evaluation of feedback from others has a central role in continuous quality development in RTP training
- Demonstrations of RT with various clients by the instructor/supervisor and analysis of process
- Helping participants to improve their skills through written case studies with various clients
- From their effective clinical practice by giving them feed back
- Individual supervision
- Group supervision
- Candidates improve their skills by practicing RT in their own clinical practice

### c) HOW WE SUPPORT PERSONAL DEVELOPMENT

During the training we encourage the participants to use CT ideas and insights, and through a process of self evaluation:

- To improve the quality of relationship with other group members
- To improve the quality of the relationships in his/her personal life
- To do written work (self-evaluation, diary, portfolio, extracts from the readings)
- To make co-operative self-evaluation with supervisor and group members
- To experience client's role during the role-play;
- To experience psychotherapy as a client during personal psychotherapy
- To review his/her life stories and experiences from the CT perspective and to deepen personal insight and understanding.

### 3.3 STRUCTURE OF TRAINING

#### Phase One (RTC)

##### Organised training

Basic Intensive Training	4 days –	30 hours	} Phase One
Basic Practicum	8 practicum sessions –	60 hours	
Advanced Intensive Training	4 days –	30 hours	} 210 hours
Advanced Practicum	8 practicum sessions –	60 hours	
Certification Process (RTC)	4 days –	30 hours	

#### Phase Two (PCP)

##### Organised training

Post-Certification Programme I. (PCP I)			
Workshop: CT/RT and psychological problems I.	4 days –	30hours	} Phase Two
Practicum I.	4 practicum sessions –	30hours	
Workshop: CT/RT and psychological problems II.	4 days –	30hours	
Practicum II.	4 practicum sessions –	30hours	
Post-Certificate Programme II. (PCP II)			
Workshop: CT/RT and working with group I.	4 days –	30hours	} 300 – 360 hours
Practicum I. –	4 practicum sessions –	30hours	
Workshop: CT/RT and group psychotherapy II.	4 days –	30hours	
Practicum II. –	4 practicum sessions –	30hours	
Post-Certificate Programme III. (PCP III)			
Workshop: CT/RT specific contents I.	(optional) 4 days –	30hours	} 300 – 360 hours
Workshop: CT/RT specific contents II.	(optional) 4 days –	30hours	
Group Supervision Sessions:	10 sessions –	60hours	

#### Required Additional Activities – both phases

Written examples – 6 at BP (3h / 1example)	18 hours	} I.+II. Phase 509 hours
Written examples – 6 at AP (5 hours / 1 example)	30 hours	
Supervised case studies – 6 at PCPP I. (10 hours / 1 case study)	60 hours	
Supervised case studies – 6 at PCPP II. (10 hours / 1 case study)	60 hours	
Analysing literature and preparing the presentations	150 hours	
Peer (supervision) review (16 hours yearly / 5 year)	80 hours	
Individual sessions with supervisor (9 hours yearly /4 year)	36 hours	
Personal therapy (within 5 years)	25 hours	
Other personal experiences: (journal, portfolio, plan of personal development)	50 hours	

<b>Clinical practice</b>	
Clinical practice begins during year 2: Advanced Practicum	450 hours
<b>Demonstration of psychotherapeutic competency</b>	20 hours
<b>Summation</b>	
Theory and training of therapeutic skills	540
Supervision	216
Personal psychotherapeutic experience	263
Clinical practice	450
Demonstration of the psychotherapeutic competency	20
<b>Total</b>	<b>1489 hours</b>

### 3.4 CONTENT OF TRAINING

<b>PHASE ONE</b>
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#### FIRST YEAR

#### MODULE – I

Module One is designed to familiarise trainees with the basic concepts of Choice Theory (CT) and Reality Therapy (RT). During this Module, there is a combination of lectures, demonstration role-plays, practice, experiential exercises, and discussions:

#### BASIC INTENSIVE TRAINING

- a) **The history and development of Reality Therapy (RT) and Choice Theory (CT)**
- b) **Basic concepts of CT including the understanding of personality in CT:**
- c) **CT compared to other main psychological theories** about human behaviour, theory of the human being, of mental health, of the therapeutic relationship, the similarities and main differences with other theories of human development, personality, theories of psychopathology, assessment, diagnosis, intervention, theory of change.
- d) **Origin of ineffective behaviour in the Choice Theory model**
- e) **The meaning and importance of the client's connectedness in his/her everyday life.**
- f) **Application of Choice Theory to understanding self and relationships;**
- f) **CT as the theoretical basis for: Psychotherapy, Counselling, Well-being and Mental Health, Lead Management, Quality Schools**
- g) **Introduction to W. Glasser Institute, EART, National RT institutes, EAP**
- h) **Practical training: exercises, role-plays, demonstrations, discussions.**

The training is conducted throughout using Lead Management principles.

## **MODULE – II**

### **BASIC PRACTICUM SESSIONS (8)**

The purpose of the eight Basic Practicum Sessions is to assist the trainee to test out his/her knowledge and understanding of CT and to become more familiar and comfortable with choice theory, reality therapy and lead-management. Emphasis is placed on trainee's personal experience.

### **REQUIRED ADDITIONAL ACTIVITIES (See Appendix A)**

- a) **Written Examples (6)**
- b) **Individual Sessions with Supervisor**
- c) **Peer Group Work**
- d) **Other Personal Experiences**
- e) **Literature Review**

## **SECOND YEAR**

### **MODULE – III**

#### **ADVANCED INTENSIVE TRAINING**

The Advanced Intensive Training programme is designed primarily to afford the trainee an opportunity to study Dr. Glasser's concepts in socio/psychological problems in much greater depth and to develop professional skills for psychotherapy. There is more time allotted to role-playing and processing of the role-plays. During this training, trainees increase their knowledge of the interrelationship of the various components of the process. The content of the training:

- a) **Reality Therapy (RT):**  
 Understanding CT principles helps the Therapist to lead effective therapy;  
 Diagnosis and assessment in Reality Therapy (RT);  
 The meaning and role of connectedness between the therapist and his client;  
 Procedures, methods and techniques in RT;  
 Metaphors, paradox and humour in RT.
- b) **RT applied to different groups of clients**  
 Participants participate fully in role-playing as both the therapist and the client and explore the utilisation of reality therapy concepts with a wide variety of client populations.
- c) **Understanding RT compared to other approaches**  
 Comparisons: CT, Psychodynamic, Humanistic-Existential Cognitive-behaviour approach.
- d) **Applications of CT in diverse contexts**  
 Therapy, Education, Mental Health and Management
- e) **Guidance in counselling and psychotherapy**  
 Theoretical, Practical and Ethical issues
- f) **Multicultural dimensions of CT and RT**
- g) **Ethics in psychotherapy and counselling**
- h) **Practical training: exercises, role-plays, demonstrations, discussions**

## **MODULE – IV**

### **ADVANCED PRACTICUMS SESSIONS (8)**

Advanced Practicum Sessions offer the opportunity to trainees to deal with various clients. Emphasis is placed on trainee's personal experience and the therapeutic work using the method of role-playing.

In this Module more time is allotted to role-playing and processing of the role-plays. The final written assignment is profound self-evaluation of the whole training in Phase One and of the plan for changes in an important relationship which has been made at the beginning of Phase One.

### **REQUIRED ADDITIONAL ACTIVITIES (See Appendix A)**

- a) **Written Examples and Case Studies (6)**
- b) **Individual Sessions with Supervisor (6)**
- c) **Peer Group Work**
- d) **Personal Psychotherapy**
- e) **Other Personal Experiences**
- f) **Literature Review**

## **MODULE – V**

### **CERTIFICATION PROCESS AT THE END OF PHASE ONE**

After the successful completion of the Advanced Practicum Sessions, the trainee is recommended by the teaching faculty to attend a Certification Process. The emphases of The Certification Process are:

#### **PRESENTATION**

Certification Process is for the trainee an opportunity to demonstrate knowledge and to expand learning. Each trainee makes a presentation on an aspect of RT/CT and accepts feedback from his/her peers and from Faculty.

#### **DEMONSTRATION OF RT SKILLS**

Each trainee is involved in role-play so s/he can demonstrate his/her skill in using reality therapy to deal with familiar and unfamiliar clients.

#### **GROUP SUPERVISION – DEALING WITH FEED-BACK**

Each trainee demonstrates his/her skills in using choice theory to deal with any feed back from colleagues and trainers.

#### **CO-VERIFICATION**

The trainee participates maturely in co-operative self-evaluation with the Faculty Trainer and realistically assesses his/her strengths in knowledge and skills and the areas that s/he has additionally to work on.

Reality Therapy Certification at the end of Phase One is the recognition that a trainee has demonstrated basic knowledge and skill in choice theory, reality therapy, and lead-management.

**PHASE TWO****THIRD YEAR**

Modules VI, VII, VIII, and IX (workshops, practicum sessions and additional activities) are designed to develop psychotherapeutic skills with as many different individual clients as possible and to deepen candidates theoretical knowledge of CT/RT and its position among psychotherapy theories and in the helping professions.

**MODULE – VI****PCP I. WORKSHOP: CT/RT – PSYCHOLOGICAL PROBLEMS I**

- a) **Role of psychotherapist in Reality Therapy (RT)**
- b) **RT with individual client in comparison to other important approaches**
- c) **Reality Therapy, Choice Theory diagnostic approaches and treatment plans.**
- d) **RT treatment of conventionally diagnosed psychopathological human behaviour: anxiety disorders, mood disorders, psychotic disorders, personality disorders, psychosomatic and eating disorders, sexual dysfunctions, addiction, trauma.**
- e) **Choice Theory and RT and specific contents requested by participants**
- f) **Ethical questions in Reality Psychotherapy.**
- g) **Preparation for practicum: role-plays, demonstrations, analysis, discussions**

**MODULE – VII****PRACTICUM SESSIONS (4)**

The module is designed to give the candidates, through exercises, role-plays, demonstrations, analysis, and discussions, the opportunity to experience the psychotherapeutic relationship with clients and the treatment of those who are conventionally diagnosed as having psychosomatic, eating, anxiety, psychotic, addicting disorders, or some behaviour related to these diagnoses.

**REQUIRED ADDITIONAL ACTIVITIES (see Appendix A)**

- a) **Supervised, Written Case Studies (3)**
- b) **Individual Sessions with Supervisor (3)**
- c) **Peer Group Work**
- d) **Personal Psychotherapy**
- e) **Other Personal Experiences**
- f) **Literature Review**

**MODULE – VIII****PCP I. WORKSHOP: CT/RT – PSYCHOLOGICAL PROBLEMS II**

- a) **Choice Therapy and Reality Therapy (CT/RT) and problems of raising children**
- b) **CT and relationships including marriage and family problems**
- c) **Reality Therapy with couples**
- d) **Reality Therapy with family**
- e) **Reality Therapy with involuntary clients**
- f) **Ethical questions in Reality Therapy**
- g) **Preparation for practical training: role-plays, demonstrations, analysis, discussions**



## **MODULE – IX**

### **PRACTICUM SESSIONS (4)**

The module is designed to give the candidates, through exercises, role-plays, demonstrations, analysis and discussions, the opportunity to experience the psychotherapeutic relationship and skills with clients coming, or being sent, to psychotherapy because of unsatisfying social relationships.

### **REQUIRED ADDITIONAL ACTIVITIES (see Appendix A)**

#### **Supervised Case Studies (3)**

#### **Individual Sessions with Supervisor (3)**

#### **Peer Group Work (4)**

#### **Personal Psychotherapy**

#### **Other Personal Experiences**

#### **Literature Review**

## **FOURTH YEAR**

The Fourth Year Modules X, XI, XII, XIII (workshops, practicum sessions and additional activities) are designed to teach candidates how to deal with groups using CT and RT. Emphasis is on personal experience as well as on group therapy skills.

Candidates develop sensitivity for individual distress in groups and group development. They gain skills to lead different groups. Through role-plays with groups of clients they gain skills for group RT.

## **MODULE – X**

### **PCP II. WORKSHOP: CT/RT -- AND WORKING WITH GROUPS I**

- a) General theories about leading and facilitating groups
- b) The Choice Theory approach to the understanding of group development and dynamics, and comparisons to other approaches
- c) Using Choice Theory with groups: The development of the group through sequential phases and recurrent crises and the way participants satisfy their basic needs
- d) Characteristics of different kind of groups and different participants in a group
- e) Training in leading and participation in the 'Choice Theory Focus Group' as self-help group designed to improve public mental health and well-being
- f) Ethical questions in working with groups

## **MODULE – XI**

### **PRACTICUM SESSIONS (4)**

Through demonstrations, exercises, role-plays, feed-back, analysis and discussions the candidates get the experience and skills to lead different kind of groups including the 'Choice Theory Focus Group'. Candidates develop sensitivity for the growth of the group through sequential phases and recurrent crises and the way group participants satisfy their basic needs.

**REQUIRED ADDITIONAL ACTIVITIES** (see Appendix A)

- a) **Supervised Case Studies (3)**
- b) **Individual Sessions with Supervisor (3)**
- c) **Peer Group Work**
- d) **Personal Psychotherapy**
- e) **Other Personal Experiences**
- f) **Literature Review**

**MODULE – XII****PCP II. WORKSHOP: CT/RT – AND WORKING WITH GROUPS II**

- a) **General theories about the group psychotherapy**
- b) **Conventional psychopathology in group from the standpoint of Choice Theory**
- c) **Theory of change in Reality Therapy**
- d) **Reality Therapy with couples**
- e) **Reality Therapy with families**
- f) **Training in leading Group Reality Therapy with clients with a variety of psychological problems**

**MODULE – XIII****PRACTICUM SESSIONS (4)**

Through demonstrations and experience of Group Reality Therapy, exercises, role-plays, feed-back, analysis and discussions the candidates get the experience and skills to offer therapeutic help to different groups of clients. The candidates get the opportunity to experience how to connect with clients, how to support the connectedness among the clients in the group and how to help them to resolve inner conflicts and frustrations. Candidates develop sensitivity for individual distress in the group and for group development. Through role-plays with group of clients they gain skills for group psychotherapy.

**REQUIRED ADDITIONAL ACTIVITIES** (see Appendix A)

- a) **Supervised Case Studies (3)**
- b) **Individual Sessions with Supervisor (3)**
- c) **Peer Group Work**
- d) **Personal Psychotherapy**
- e) **Other Personal Experiences**
- f) **Literature Review**

## **FIFTH YEAR**

Fifth Year comprises Modules XIV, XV and XVI (workshops, group supervision sessions, demonstration of psychotherapeutic competency)

### **MODULE XIV**

#### **PCP III WORKSHOPS**

SPECIFIC CONTENTS I (optional)

Workshops offer topics that candidates perhaps did not go over enough in the previous education or training programme and need to study more intensively.

SPECIFIC CONTENT II (optional)

Continuation workshop offers additional topics that candidates perhaps did not go over enough in the previous training programme and need to study more intensively.

### **MODULE – XV**

#### **GROUP SUPERVISION SESSIONS (10)**

Ten Group Supervision Sessions offer to candidates the supervision of their clinical practice.

### **MODULE – XVI**

#### **DEMONSTRATION OF PSYCHOTHERAPEUTIC COMPETENCY**

To demonstrate the psychotherapeutic competency candidate need to send to EIRT Application for a demonstration of psychotherapeutic competences .

Application for demonstration of psychotherapeutic competences include: notification of the candidate that has completed all the standards of education for becoming PRT, the name of the chosen mentor / consultant for the final thesis , candidate's anticipation of the time frame for final thesis and attending the demonstration.

Upon check-in candidate must submit all required documentation in electronic form :

- a) folder with the document of the third year of the training,
- b) folder with the document of the fourth year of the training,
- c) an updated electronic index
- d) a duly completed forms to graduate PRT by EART ,
- e) a duly completed forms to obtain the ECP by the EAP ,
- f) Training Record provided with signatures of the faculty

For the demonstration the candidate prepares a final thesis , which must contain the following elements :

- A. Personal information of the candidate
- B. Self-evaluation of personal development during the reality therapy training
  - The motivation for choosing the program to obtain the title PRT*
  - Personal experience during the training*
  - Personal characteristics for practicing psychotherapy*
- C. Case Study:
  - Introduction*
  - Description of work with client including dialogue*
  - Conclusion*
- D. Literature

The demonstration of psychotherapeutic competency is done in public, where the candidate presents to the Demonstration Panel:

- a) His/her professional development in Reality Therapy
- b) A Case Study: Complete description and analysis of work with one client from beginning to end of the therapy.

## **4. EVALUATION and ASSESSMENT**

### **4.1. ASSESSMENT PROCEDURE**

Training in reality therapy psychotherapy is based on the trainee's self-evaluation and co-verification with the supervisor and group members. At the end of each year of the training process, the trainee is also involved in an extensive co-verification process with his/her supervisor. This means that the trainee discusses his/her progress with the supervisor and gets a recommendation for continuation of training. If he/she is not ready to move to the next stage of training, the supervisor will help him/her to make a plan to get ready. In that case he/she will make a self-evaluation again after the required work is done and progress is evident, and with the supervisor will engage in a co-verification process.

There is particular emphasis on co-verification before starting Phase Two of training, and before Final Demonstration of Psychotherapeutic Competency.

### **4.2 STAGES OF ASSESSMENT PROCEDURE**

There is significant assessment in the RT psychotherapy training program between specific levels of the program, and in particular at the end of Phase One and Phase Two.

#### **PHASE ONE:**

**Basic Intensive Training:** Self evaluation, co-verification, recommendation by supervisor

**Advanced Intensive Training:** Self evaluation, co-verification, recommendation by supervisor

**Certification Process:** Demonstration, self-evaluation, co-verification, recommendation by instructor,

#### **PHASE TWO:**

##### **Pre-entry:**

Written self evaluation,

Recommendation from Faculty member from Phase One Training Programme

Entry Interview – co-verification process

##### **Post-Certification Programme:**

At the completion of each stage of training there is a process of self-evaluation, co-verification with Instructor/practicum supervisor, and recommendation by instructor/practicum supervisor. Successful completion of this process is required for continuation to the next stage.

#### **FINAL DEMONSTRATION OF PSYCHOTHERAPEUTIC COMPETENCY:**

Following the successful completion of Module XV of the Training Programme the candidate chooses a consultant from amongst EIRT Faculty to help the candidate prepare for the Final Demonstration. This is again a process of self-evaluation, co-verification and

recommendation by the consultant and the Nomination board. Nomination board is selected among the members of the Faculty board by the head of Faculty board for each candidate separately.

V The role and tasks of the Nomination board:

- a) Review of all documents sent to the candidate when applying
- b) Review the final thesis of the candidate
- c) In collaboration with consultant give a the feedback on final thesis and the recommend candidate to present psychotherapeutic competency at the demonstration

When the candidate, the consultant and Nomination board concur that the candidate is ready, he/she receive the invitation for demonstration of psychotherapeutic competency as outlined in Module XVI above.

Demonstration of psychotherapeutic competency demonstration takes place before the Demonstrational Panel. Demonstrational Panel appoints the Director EIRT and it's consists of two members EIRT faculty members and one representative of some other psychotherapeutic modalities.

### **4.3 CONTINUAL PROFESSIONAL DEVELOPMENT (CPD)**

All RTP are required to support quality and ethical practice with obligatory 'Continual Professional Development' (CPD). They are required to complete an average of 50 hours per year of CPD (total of 250 hours over a period of the last 5 years).

This CPD can be taken in the following forms:

- a) advanced or additional professional psychotherapy courses;
- b) professional supervision for psychotherapy practice / clinical / group work and peer supervision
- c) psychotherapy conference / symposium attendance
- d) professional activities in psychotherapy (e.g. being elected to a board or a committee and attending meetings)
- e) participation in extra psychotherapy training as a supervisor / instructor / researcher

Minimum 250 hours shall consist of no more than 75 hours from any one category.

## **APPENDIX - A**

### **SHORT DESCRIPTION OF REQUIRED ADDITIONAL ACTIVITIES**

#### **Written examples at Basic Practicum Sessions (BP)**

There are 6 written assignments at BP. The first two of these are based on Dr. Glasser's books "Control Theory" and "Choice Theory" which should be read before basic practicum starts. Participants write about their understanding of Glasser's ideas in these books, personal experience they were thinking about while reading and dilemmas and questions regarding the reading material. Three of the written assignments are based on everyday life frustrations in relationships by trying to analyse them using CT. The final one is profound self-evaluation based on the whole year's work in training and the plan for personal change which has been set at the beginning of the practicum. Participants usually send one example to the supervisor

before each practicum session by e-mail. This is an opportunity for the supervisor to improve the relationship with the participant and to model CT principles. The supervisor reviews the participant's written examples and prepares a written answer to it by sharing his/her comments, suggestions, personal experience and ideas.

### **Written examples and case studies at Advanced Practicum Sessions (AP)**

There are 6 written assignments at AP. The first two of them are based on Dr. Glasser's books "Reality Therapy in Action" and "Warning: Psychiatry Can Be Hazardous to Your Mental Health" which should be read before advanced practicum starts .

Candidates write about understanding Glasser's ideas in these books, personal experience they were thinking about while reading and dilemmas and questions regarding the reading material.

Three of the assignments are case studies based on work with clients. Candidates analyse the client's situation using CT and describe how they use CT in therapy – the New Reality Therapy. The final assignment is profound self-evaluation based on the whole year's work in training and the plan for personal change which has been set at the beginning of the practicum. Candidates usually send one example before each practicum session by e-mail. The supervisor reviews the candidate's written examples and prepares a written answers to it by sharing his/her comments, suggestions, personal experience and ideas.

### **Supervised case studies at Phase II**

There are 6 written case studies at PCP I. and 6 of them at PCP II. Unlike case studies at AP candidates choose the client for the case study in consultation with the supervisor. A case study at this level is much more profound. It consists of the description of the client's situation, analysis of it using CT and a short review of several sessions so that progress can be evident. During the preparation of a case study the supervisor offers his/her help and support.

After the case study is prepared the candidate discusses it with the supervisor individually (see individual supervision).

### **Analysing literature and preparing the presentations**

Beside the books- already mentioned, all other publications from the CT/RT field are recommended to be read as well as books and written material regarding specific topics in PCP I., II. and III. (psychosomatics, psychosis, addiction, etc; group work, ethics, review of different psychotherapy approaches, etc.)

Candidates usually prepare their presentations for the practicum from CT/RT publications. If they decide to use books from any other field the presentation should be adjusted and explained through CT.

### **Peer (supervision) review**

At the beginning of training candidates are asked to put in some extra effort and to meet without the supervisor between practicum sessions. We call it peer supervision or peer review.

It is an opportunity for candidates to share experiences, learn from each other focused on CT and improve their relationships. It helps them sometimes to identify and later address with the supervisor some important questions. Peer review is very important personal experience.

### **Individual sessions with supervisor**

Individual supervision begins at the same time as BP and lasts until Fourth Year. Candidates have an opportunity to work with the supervisor individually and discuss whatever they want. They can choose to do individual supervision with the supervisor who runs the practicum or may choose any other practicum supervisor who is willing to do it. During the practicum at Phase Two candidates choose the supervisor and have individual sessions based on case studies. For every case study participants have 1.5 hours of individual supervision.

### **Personal therapy**

All our training demands deep personal change from the participant. This leads to transformative change in beliefs, in ways of thinking and of perceiving self and the world, which directly impacts on the participant's mental health. This means that the training itself invites a process of self-therapy. We also require our trainees to attend personal therapy of 25 hours duration during the 5 years of training. Participants decide for themselves when to start with therapy. Candidates should choose a personal therapist who has to be a Reality Therapy Psychotherapist and/or ECP holder.

### **Other personal experiences:**

In addition to the personal experiences already mentioned, the candidate at the beginning of the training programme sets out a plan of personal change which focuses on at least two important relationships that the candidate evaluates to be in need of improvement in his/her life. The candidate makes a plan to improve those relationships using CT. S/he writes about the plan and its realisation in a diary so s/he can follow up her/his own personal development. The candidate uses the diary to take other relevant notes as well as collect important documents for a portfolio. All of this is used for the final self-evaluation and co-verification.