# Report on the Project to Establish the Professional Competencies of a European Psychotherapist

## February 2013

**Appendix 6: Report of the Expert Panel:**

The 3 members of the Expert Panel are:

* **Distinguished Research Professor Emeritus Leslie Greenberg (LG)** Dept. of Psychology, York University, Toronto, Canada

* **Dr Jaap van Lakerfeld (JvL**) Head of Social Sciences, Research Dept. (Plato), University of Leiden, Netherlands.

* **Dr. Ken Evans (KE**), Visiting Professor Psychotherapy University South East Europe.

Their reports are included in this document. Because of his familiarity and expertise in this area, with the holidays and time factors, Ken Evans was asked to report specifically on the 'level' of the the competencies: whether they were appropriate to 'psychotherapy' or more appropriate to (say) 'counselling'.

They were all given the set of 'draft' Core Competencies, a Questionnaire to complete, if they wanted to (an example of which is contained in Lesley Greenberg's report); and they all had access to the Project's website: www.psychotherapy-competency.eu

# Appendix 6a: The Report of Prof. Leslie Greenberg

Leslie Greenberg
Distinguished Research Professor Emeritus,
Dept. of Psychology York University

 I congratulate the committee on a job well done.[1]

I have one content related comment on core competencies with reference to item **2.1.3: Identify and start working towards mutually agreed and achievable aims or goals**

I think it is important to mention "form an alliance" and  "collaboration"  as aspects of the relationship : These terms don't  seem to appear. You have the goals component of the alliance in this item. Under teh relationship I dont see any mention of agreement on tasks or more generally on development of collaboration involving both agreement on goals and perceived relevance of task. I see that later you have "form an alliance" under  techniques and intervention but to me this seems misplaced . As I see it the alliance is essentially establishing collaboration and includes both relational and technical factors and should not be treated predominantly as a technique factor

In one draft I saw the term detachment  referring to the relationship but on re reading I couldn't find it in the final draft so maybe it has been eliminated.  If it is in the document I  don't think detachment is a good choice of wording and I see a contradiction between  it and  empathy and understanding. I would drop detachment or replace with " appropriate degree of involvement"  or" maintains a therapeutic degree of involvement" or some improved phrasing

I answer the questions below

1) Is the work of the Project to date reasonably comprehensive, appropriate, of sufficient depth?  ………YES
……………………………………………………………………………...
Do you have any comments to make about the scope and depth of the Project?

……VERY COMPREHENSIVE AND THOROUGH …………………………………

2) With respect to the website section on the Project, there are 8 main sub-sections: do you have any comments about any of these?
ALL ARE GOOD
   a. Project Outline          ………………………………………………………………..
   b. The Background of the Project ………………………………………………………..
   c. The Process of the Project ……………………………………………………………..
   d. Rationale …………………………………………………………………………..
   e. Political Background …………………………………………………………………'
   f. Scientific Background …………………………………………………………………
   g. Literature Review ……………………………………………………………………..
   h. Definitions ……………………………………………………………………………

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**3)** With respect to the 13 'Domains' of the Competencies, have you any comments?
…ELEMENTS OF THE RESARCH DOMAIN AND THE MANAGING PRACTICE DOMAIN COULD MAYBE BE DE-ELEVATED: IN GENERAL THESE DOMAINS, AS THEY ARE CURRENTLY PRESENTED, ARE, IN MY VIEW, NOT AS IMPORTANT AS THE EST AS CORE COMPETENCIES. I THINK BEING ABLE TO UNDERSTAND AND EVALUATE RESEARCH IS NECESSARY (ie: BEING A CONSUMER OF RESEARCH), BUT NOT NECESSARILY BEING COMPETENT TO CONDUCT IT. HAVING CONDUCTED AT LEAST ONE STUDY ALTHOUGH A GOOD EXCERCISE IS NO ASSURANCE OF BEING ABLE TO READ AND EVALUATE STUDIES AND DIFFERENT TRAINNIG PROGRAMMES MIGHT ACHIEVE COMPETENCE AS A CONSUMER OF RESEARCH WITHOUT ACTUALLY CONDUCTING A STUDY …………………………………………………

**4)** With respect to the section on Competencies: there are 4 sub-sections: any comments?
  **a.** Outline …………………………………………………………………….
  **b.** Core Competencies ……………………………………………………………….
  **c.** Specific Competencies …………………………………………………………
  **d.** Specialist Competencies …………………………………………………..
  Any other comments? ……………. NO COMMENTS………………………………………..

**5)** In your opinion, is the Working Group reasonably competent and does it seem to have done its work reasonably well, fairly & transparently? Any comments?
………YES DEFINITELY…………………………………………………………………...

**6)** With respect to the Practice Analysis Surveys for each Domain, do these seem reasonable and fit-for-purpose? Any comments?
…………………YES……………………………………………………………………...

**7)** There are several Appendices? Currently 8 in total: Any comments?
……………NO…………………………………………………………………...

**8)** There is a section on 'Participation': with 3 sub-sections: Any comments?
  **a.** Participate ……………………………………………………………………
  **b.** Participant's List ……………………………………………………………
  **c.** Participants' Comments.…………………………………………………….
  ……………………………NO…………………………………………………………...

**9)** Any other comments?
………………………NO…………………………………………………………...

**10)** Anything else that you would have liked to have seen on the website? …………………..
………………………………NO…………………………………………………………...

**11)** Anything that you would <u>not</u> have liked to have seen on the website? ……………………
………………………………NO…………………………………………………………...

**12)** Anything else about the presentation of the Project and the website:
……………………………NO…………………………………………………………...

**PART C: Questions for the Expert Panel about the results back from the Practice Analysis Survey forms:**

13) Having looked at the PAS forms, and considered the complexities, can you think of a better way of getting feed-back from Participants? Comments, please:
MAYBE GIVE SURVEY AT CONFERENCES OR DISTIBUTE THRU TRAINING ORGANISATIONS …………………………………………………………………...
*N.B.: A 'SurveyMonkey' type internet survey form was considered, but – at the time – costs (and the complexities of the PAS form) just did not permit this.*

14) Given that only about 42 complete sets of forms were received back from the Participants, and given the 'spread' of organizations and individuals, do you think that this gives a reasonably representative and a sufficient representation?
…… NO: I THINK THIS IS THE ONLY WEAKNESS OF THE WHOLE EFFORT. THE SMALL NUMBER DOES NOT PROVIDE MUCH FACE VALIDITY IN RESPONSES TO ANY CHALLENGES THAT MAY ARISE.

15) Given the Analysis Report (created by an M.Sc. Psychology graduate) on the quantitative (statistical) results from the PAS forms, do you think that the research work done was reasonably comprehensive, detailed and informative?
…… YES…………………………………………………………………………...

16) Given the Analysis Report (created by a different M.Sc. Psychology graduate) on the qualitative (textual analysis) results from the comments on the PAS forms, do you think that the research work done was reasonably comprehensive, detailed and informative?
……………YES…………………………………………………………………...

17) Any other comments about the quantitative or qualitative analysis work of the research persons and/or their report?
………… GET A LARGER N[UMBER SET] AND IT SEEMS TO ME GENDER AND AGE AND COUNTRY  COULD BE ASKED FOR, AND STILL MAINTAIN ANONIMITY TO SEE IF ANY DIFFERENCES [EXIST] IN THESE GROUPS. THIS MAY BE TOO LATE GIVEN [THE] DATA [IS] ALREADY COLLECTED
…………………………………………………………………………………..

**PART D: Questions for the Expert Panel about the interpretation of the results**

*N.B. In this section, cut-off points for relevance of 44% (Low) and 78% (Moderate) are mentioned: these are just suggested cut-off points, below which a Competency might not be relevant, and above which it might be considered as 'Core': the Expert Panel may wish to set different cut-off points for relevance. This can be done from considering the Mean values.*

18) From the quantitive (statistical) analysis, does it appear that any of the (draft) Core Competencies should not be included at all: i.e. either they fall below a particular relevance (maybe <44% agreement or **Low**), or they are duplicated sufficiently elsewhere? …………….………NO…………………………………………………………………...

19) Should any of these (<44% **Low**) have been phrased or listed differently, so that they might be included at a later time? …………………………………………………NO………………………………………...

20) Are there any of these (<44% **Low**) seemingly 'rejected' Core Competencies that – in your expert opinion – should still be included in some way or for some reason? ……………NOTHING WAS REJECTED AS FAR AS I COULD SEE

21) Are there some of these (<44% **Low**) seemingly rejected 'Core' Competencies that – in your expert opinion – should be retained for some Specific or Specialist Competencies? ……………………????…………………………………………………………………...
*N.B.: Please make a separate list of these, or identify them in some way, so that they can now be excluded or transferred. This 'sorting out process' is essential for us.*

22) From the quantitive (statistical) analysis, does it appear that any of the (draft) Core Competencies should not be included as 'core competencies: i.e. either they fall between the point of rejection (maybe **Low** 44%), but are sufficiently supported by a significant grouping (maybe up to **Moderate** 78% agreement), so that they can be considered valid as some form of Competency and should therefore be 'offered' to the Specific and/or Specialist Competency groups. ………………………………………NO…………………………………………...

23) Should any of these (44%=>…**Moderate**…<=78%) have been phrased or listed differently, so that they might be included at a later time? …………………………………NO………………………………………………...

24) Any other comments or recommendations on this group (44%=>…**Moderate**…<=78%) within the (draft) Core Competencies? ………………………………………NO…………………………………………...
*N.B.: Please make a separate list of these, or identify them in some way, so that they can now be excluded or transferred. This 'sorting out process' is essential for us.*

25) Any other comments or recommendations about the residual group of 'Core Competencies' (>78% **High** agreement)? If this were the resulting set of Professional 'Core Competencies' for a European Psychotherapist to be accepted by the EAP, would you have any further comments or recommendations, or any other Competencies? …………NO………………………………………………………………………...

26) As an Expert Panel, do you have any other comments or recommendations to the EAP Governing Board, the European Training Standards Committee (ETSC), the Training and

Accreditation Committee (TAC) for the European Accredited Psychotherapy Training Institutes (EAPTIs), and/or the Project Working Group about the rest of the Project:

a. Phase 2 (Specific Competencies)
b. Phase 3 (Specialist Competencies)
c. Phase 4 (Developing a Knowledge & Skills Framework and Assessment Criteria & Methods)
d. Phase 5 (Implementation by ETSC, TAC => EAPTIs).

……… NO…………………………………………………………………………………...

27) As psychotherapists, we are also interested in the 'process' as well as the results: so how has this process of being on the Expert Panel been for you?

A BIT AMBIGUOUS AND UNSTRUCTURED IN TERMS OF THE PROCESS OF BEING ASKED TO DO THIS. ONCE ENGAGED, THE QUESTIONS ABOVE HELPED STRUCTURE IT.

*Thank You very much, we look forward to hearing from you soon.*

# Appendix 6b: The Report of Prof. Jaap van Lakerfeld

**PLATO**

Platform Opleiding, Onderwijs en
Organisatie B.V.

Universiteit Leiden

**Feedback report regarding: The Professional Competencies of a European Psychotherapist**

Ingeborg Tönis Tonis@Plato.Leidenuniv.nl
Jaap van Lakerveld (Laker@Plato.Leidenuniv.nl

At first we would like to compliment the members of the working group for the thorough research and developing work they carried out. Everything seems to have been done to establish a set of competencies based on theory and empirical data. We especially value the use of the rating scale which makes the distinction between relevancy, importance and frequency. Our comments to the documents we will give from an educational perspective. We have studied the documents asking ourselves the question whether the competences are defined in such a way that they provide all information needed for curriculum developers, trainers, assessors to either provide adequate professional training, or set up adequate assessments to test and select therapists. In doing our analysis we used the following definition of competence

## Definition of competences

Competences as defined by European bodies, as well as by educational experts throughout and beyond Europe, consist of three interrelated ingredients: 1. a knowledge component, a behavioural component and a value component (including values, beliefs and attitudes). Competences consist of a combination of skills, knowledge, attitudes required for effective performance of a task or activity. A competence is defined as the holistic synthesis of these components.

At another level a competence again may be divided in three components. It is the ability of a person to show:

1. a particular behaviour in
2. a particular context and with
3. a particular quality.

This is the formal way of describing competences. In more down to earth language this implies that what matters is not only what we know about things, but also, more importantly, what we are able to do with this knowledge, and whether we are able to go on developing our abilities. "Does education make learners knowledgeable, or does it make them competent?" that is the question.
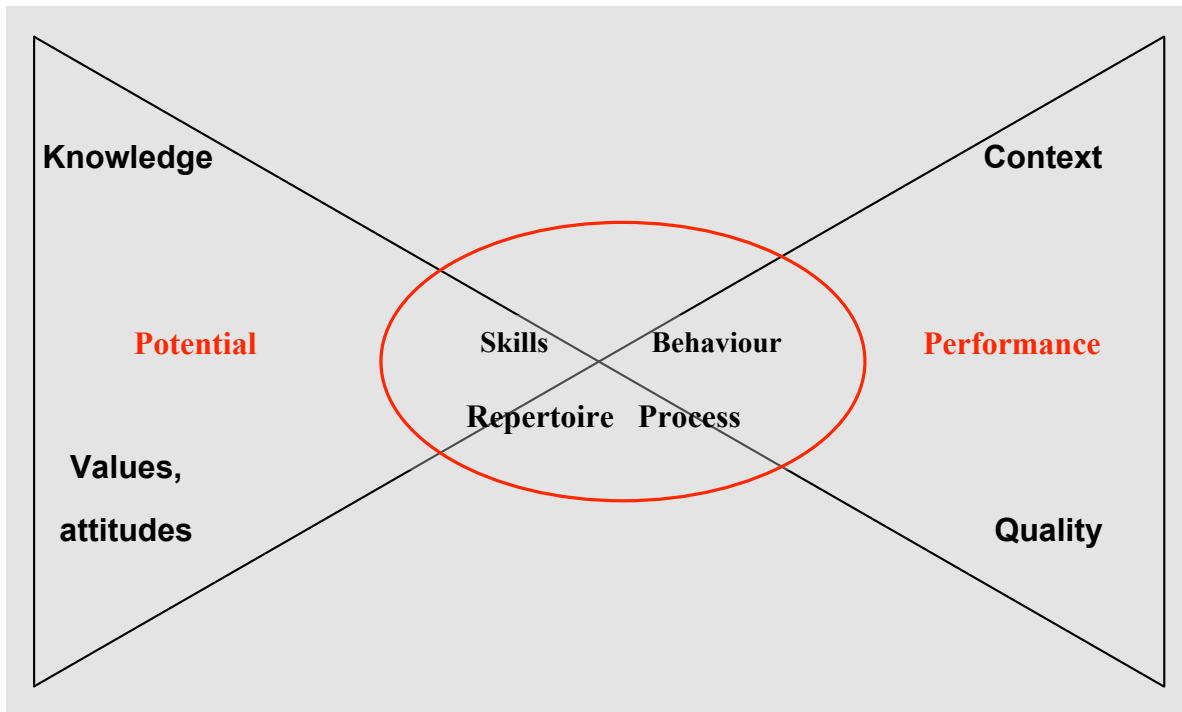
 **The components of competence**

The ellipse in the middle of the diagram includes the actual behavioural process of the person, which shows the level of control he, or she has of a particular competence. The components in the left triangle, or rather one's potential, allows a person to demonstrate the intended behaviour, the performance, in the right triangle.

We studied the competencies of a European Psychotherapist from the perspective of this definition. The word chosen in the EAP document is competencies. In the literature we find both the word competence and the word competency. Competency usually is used when the focus is on tasks, skills and behaviour. The word competence is used when a more holistic concept is meant.

Again we would like to stress our appreciation of the work done to identify the competencies as listed in the document. The competencies as described in the Draft core competencies of a European Psychotherapist focus on the central part of the model presented above. The competencies are formulated as actions. Together all the domains with all the competencies included in each of them form a rich basis for curriculum developers and assessors.  However, we think that a next step might be to specify in somewhat further also the following aspects of the competence:

- What would be a necessary knowledge base for a good therapist? (domains of study rather than particular books or theories)?
- What kinds of professional values/attitudes, or beliefs would be essential for being a therapist?
- In what kinds of contexts will therapists have to be able to do their work (what kinds of clients, in what kinds of settings, in what kind of organizational structures etc.)
- What is it that would make their work of a sufficient quality?

We think that the richness of the list as composed so far is enormous, but it seems as if the person of the therapist remains undefined. Maybe it would enrich the competencies when more person and value-oriented competences would be included.  Not to replace any of the competencies that have been so carefully identified, but to add a "flavour" to them

Our evaluation of the documents studied is that we feel that the way in which the competencies have been derived, identified and organized is of high quality. It is a high quality list of competencies. The list however, may be enriched by adding more and broader information about the necessary background of therapists and of the key qualities a therapist would need as a person.
The work as described in this EAP document impresses us as the most elaborate and rich document. Our comments are to be considered as possible ways to further enrich document, or as guidelines for those who wish to work with the document (such as teachers, trainers recruiters and selectors, assessors, validators, in the field of Psychotherapy)

Jaap van Lakerveld
Ingeborg Tonis

## Appendix 6c: The Report of Dr Ken Evans

Response to the EAP Working Group on Draft Psychotherapy Competencies

Dr Ken Evans, F.R.S.A

Visiting Professor of Psychotherapy USEE

First I want to express my appreciation for the hard work, determination and patience of the Working Group in undertaking such an ambitious and demanding project for the benefit of the profession of psychotherapy in Europe.

On 18 December 2012 Courtenay Young wrote to the Expert Panel and reminded us that the EAP 's main goal was to establish an independent profession of psychotherapy. In pursuing this goal, professional competencies could play a significant role.

Projects of this kind have already been undertaken in several countries where they have produced strong and polarized reactions from within and without the profession. I am sure there is significantly more angst to come as the EAP move forward from this creative phase to implementation. In my experience it is in this latter stage that people really wake up to the implications of a new direction and both resistance and support begin to crystalise.

The difficult and ongoing struggle over many years to achieve a *level playing field* for the wide range of psychotherapy modalities continues unabated. Entire modalities have been accused of a lack of knowledge, understanding and sophistication regarding a number of areas of competence e.g., models of the mind, psychopathology, unconscious process, and consequently they have been denigrated as simplistic or mere counselling approaches and excluded from access to public funding/private insurance. Sociologists have long recognised this as a form of <u>social closure</u> by dominant groups with vested interests. It is not only psychotherapists who suffer but the general public are denied access and choice, unless they can afford to pay!

I am supportive of the Working Group but concerned that the issue of the level or depth at which psychotherapy competencies should be applied has not yet been addressed. This is a serious issue which unless tackled could unwittingly undermine the EAP goal of an independent profession of psychotherapy. It must not be assumed that the competencies will be widely acknowledge as psychotherapy competencies, in their current format. Indeed the current format could equally be claimed to be a set of counselling competencies. This will be the main focus of my feedback.

I will draw attention to the issue of level/depth with regard to three specific areas and suggest ways to address them and with practical suggestions and examples.

**Post Graduate Criteria**

University descriptors of level/depth of knowledge range along a continuum along the following lines:

- Describe and evaluate (First degree level)
- Critically evaluate with some evidence of original thinking (Masters level)
- Critically evaluate and demonstrate original thinking and a contribution to new knowledge (Doctoral level)

I suggest the competencies be published with a Headline Foreword to include a general statement something like:

Psychotherapy competencies are practised at a level commensurate with Masters level or equivalent emphasising the psychotherapists capacity for *critical reflection and evaluation* of professional practice.

I further advise that each competency includes frequent reference to *critically assess* (e.g. the clients capacity for psychotherapy.....) *critically evaluate* ( e.g. the clients level of self support or ego strength.....)

An increasingly used description of a contemporary psychotherapist is that he/she is a 'reflexive practitioner' and the above suggestions would help to convey this to the general public.

**Knowledge and Understanding *and* Performance Criteria**

In the Working Group draft competencies the content of each competency tends to mix together, somewhat haphazardly, what *we need to know* with *what we need to do*. The result looks rather like the curriculum content of a training programme and appears messy and confusing. In my view it would be much more helpful to write the current competencies in such a way that knowledge and understanding *and* performance are equally addressed, but not mixed up together. That is, what we need to know should be followed by what we need to do in order to demonstrate what we claim we know. In the absence of such performance criteria (and at Masters level) anyone can claim to be a psychotherapist!

Highly regarded competency templates already exist which are fundamentally similar to the EAP draft competencies but written in a format such that *what we need to know and understand* (knowledge and understanding) is clearly set out and then followed by *what we must be able to do* (performance) to enable us to apply this knowledge in clinical practice. *See appendix 1 example.*

Furthermore, when knowledge and performance/outcome are linked in this sequential way training institutes/university validated programmes can relatively easily establish a range of modes of assessment (essay, case study, oral presentation, other) and assessment /evaluation criteria to further ensure the level of performance is *at post graduate level.* It is essential to that assessment criteria are at the level of Masters or equivalent. In *appendix 2* please see the Masters level set of assessment criteria for the evaluation of students written coursework that we use in our training centre and *Appendix 2a* is the same criteria in a format that assists the tutor in the marking of coursework. I am sure similar criteria are used by most EAP training centres. The point is that the criteria of assessment support Masters level knowledge, understanding and application and are to be distinguished from basic counselling application.

**Greater content regarding the psychotherapy relationship**

My concern about the level or standard of application of the competencies is further reflected in the <u>range of titles</u> of the 13 draft competencies which, taken as a whole, appear strongly oriented toward a set of counselling competencies. For example there is a title '<u>Various Techniques and Interventions</u>' and then equal space given to the one reference to the '<u>Psychotherapy Relationship</u>'.

The lack of emphasis on the therapeutic relationship looks quite dated in that it largely ignores the significant growth and development in recent years, across several psychotherapy modalities, of the importance of the therapeutic relationship and the use of the self of the therapist. In the content of the single competency the 'Psychotherapy Relationship' there is little reference to unconscious process and I could find no reference to the <u>co-created</u> nature of the therapeutic endeavour.

In at least one other highly regarded set of competencies there are no less than <u>FIVE</u> separate competencies that address the therapeutic relationship, each with its own sets of knowledge and understanding followed by performance criteria:

- Develop a therapeutic relationship
- Maintain authenticity in the therapeutic relationship
- Enable the client to understand their relational difficulties through immediate experiences in therapy
- Enable the client to become aware of unconscious aspects of their experience
- Make a conclusion of the therapeutic relationship

The above competencies include all the recent developments in thinking about transference, counter transference, co-transference, co creation of the therapeutic relationship, etc. <u>And these are not exclusive but written in an inclusive format acceptable to a wide range of modalities.</u>

## Conclusion

I support the Working Group in their purpose to develop the profession of psychotherapy for the wide range modalities but urge them to reflect on ways in which the competencies could be more clearly <u>identified</u> as <u>psychotherapy</u> competencies through the:

1. acknowledgement and publication of the <u>post graduate level</u> of psychotherapy competencies.
2. separation of knowledge and performance.
3. increasing the number of competencies regarding the psychotherapy relationship.

Post script

1. We are often informed that competency is not about level but function. It is important we are not seduced by such notions which are inevitably reductionist. As a profession we can decide how we want to write the competencies and how we present them to the public. Other professions may choose to do it differently. The short history of occupational standards confirm is there is no universally agreed 'right way'. A set of competencies that combine both function and level affords the greatest protection and opportunity at this point in the history of our profession.
2. 47 people out of an alleged 120,000 psychotherapists is but a tiny sample and on its own stretches credibility as a satisfactory research basis for the draft competencies. So it will be necessary for the EAP to really get behind this project, own it and deliver it.

Warm regards

Dr. Ken Evans

**Manage the conclusion of the therapeutic relationship**

**OVERVIEW**

This standard is about working collaboratively and constructively with the client in ending therapy, enabling the client to engage positively with the ending phase. The ending may come about for reasons that may be planned or unplanned.

The standard requires the therapist to work sensitively with their own and the client's responses to endings to the benefit of the client. The therapist also supports the client in reviewing the outcomes of therapy, the effectiveness of the therapeutic process and relationship and in planning what comes next.

**KNOWLEDGE AND UNDERSTANDING**

A psychotherapist will need to know and understand:

1.  phenomena associated with endings of therapy and their meaning

2.  evidence of effective approaches to managing endings

3.  accounts of endings from the client and therapist perspective

4.  critically assess when the client may be ready to end therapy

5.  critically evaluate the factors associated with the emergence, development and maintenance of any mental health difficulties

*Additional generic knowledge*

6.  models of mental distress

7.  the ways in which mental health difficulties can impact on personal and interpersonal functioning

8.  the rationale for responding empathically to the client and being warm, open, non-judgmental, genuine and transparent

9.  critically evaluate how to employ the specific methodology, key concepts and relevant components of the modality being used when working through an ending

10. the critical assessment of risks to the client and the risks they pose to others in a range of settings

11. critically evaluate the impact of social context on psychological wellbeing

13. critically assess the role that emotional experiencing has in an individual's awareness of how an action contributes to growth

14. the role of relationship in the development of self-experience

**PERFORMANCE CRITERIA**

In order to demonstrate your capacity to apply your knowledge and understanding at post-graduate level you must be able to do the following:

Facilitate the client to experience an end to therapy with you that is:

1.  negotiated

2.  at a time when therapy is sufficient for them

3.  initiated in a manner that protects them from risk or harm

4.  critically evaluate the extent to which you are free of the influence of your own responses to loss and endings

5.  sufficient space to allow unfinished business to emerge and for closure to unfold in an unforced manner

6.  work collaboratively with the client to critically assess and identify when they may be ready to end therapy

7.  be alert to indicators that the client may be ready to end therapy or that it would be beneficial for them

8.  enable the client to come to terms with loss at the end of therapy, including the possible emergence of unprocessed experiences from other relationships that have ended

9.  critically reflect on how to make use of the client's thoughts and feelings about the ending of therapy to help them learn about themselves

10. facilitate the client to identify themes and experiences relating to other endings in the client's life and how they relate to this ending

11. enable the client to express thoughts and feelings connected to endings

12. enable the client to review:

    their progress over the course of therapy

    their plans for the future

13. if requested, enable the client to develop strategies for change and plans for action that take into account their current social context and relationships

14. where the client does not have a valid choice about the ending, discuss its timing and process with them in a way that best supports their progress

15. explore with the client options for referral, ongoing support and information and future therapeutic interventions should the need arise

16. critically reflect on and discuss the implications and process of planned and unplanned endings

17. maintain clinical records in accordance with ethical practice, local protocols, codes of confidentiality and the client's explicit consent

18. critically reflect on your experience of the ending and evaluate your practice


*Please note the above structure is adapted from Skills for Health National Occupational Standards for Psychological Therapies and some of the content modified to accommodate the wide range of psychotherapy modalities.*    Ken Evans January 2013.

## Assessment Criteria for Written Work

The assessment criteria for essays and other written projects are based on standard European wide university criteria for Masters level, as follows:

- Issues in the title are addressed in a lucid, relevant, rigorous and coherent way.

- The work is well structured; themes/ideas/issues are developed in a logical and consistent way.

- There is evidence of use of personal experience and views. There is evidence of reading of relevant literature, and of practical implications.

- Syntheses of personal insight, theory(ies) and practice should be developed.

- References and quotations are acknowledged in a consistent and approved style.

- Clear use is made of appropriate concepts, theories, models, to analyse own and others' experience and to explore issues analytically and critically.

- There is awareness of the influence of own and others' values and beliefs on ideas and practice.

- Unsupported generalizations are to be avoided, and clear distinctions between evidence and opinion should be maintained.

- Original ideas, connections, developments are demonstrated.

- Awareness of the cultural and political contexts of theories, beliefs and practices should be demonstrated.

- Further implications of the issues are indicated, which there may not have been space to develop.

- The conclusion draws together the main arguments in a way which enables the reader to appreciate why these conclusions are reached.

**Trainer Assessment**

**Assessment Criteria For Essay Work**

| | A | B | C | D | E | F | F- | I | NR |
|---|---|---|---|---|---|---|---|---|---|
| 1. Issues in the title are addressed in a lucid, relevant, rigorous and coherent way. | | | | | | | | | |
| 2. The work is well structured, themes/ideas/issues developed in logical and consistent way. | | | | | | | | | |
| 3. Evidence of personal experience and views. | | | | | | | | | |
| 4. Reading of relevant literature. | | | | | | | | | |
| 5. Synthesis of personal insight, theory(ies) and practice. | | | | | | | | | |
| 6. Use and accuracy of references and quotations. | | | | | | | | | |
| 7. Clear use mad of appropriate concepts, theories, models, to analyse own and others' experience and to explore issues analytically and critically. | | | | | | | | | |
| 8. Awareness of the influence of self and others' values and beliefs on ideas and practice. | | | | | | | | | |
| 9. Clear distinction between evidence and opinion. | | | | | | | | | |
| 10. Original ideas, connections, developments are demonstrated. | | | | | | | | | |
| 11. Awareness of cultural/political contexts of theories, beliefs and practices. | | | | | | | | | |
| 12. Further implications of the issues are indicated, which there may not have been spaced to develop. | | | | | | | | | |
| 13. Conclusions drawn in a way that enables reader to appreciate why their conclusions are reaches. May include further issues which have been raised. | | | | | | | | | |