

EMDRIA Approved Consultant™

STANDARDS

A photograph of two women in a professional setting. On the left, a woman with blonde hair tied back in a bun, wearing a green top, is seen from the side, gesturing with her hands. On the right, a woman with curly brown hair, wearing a maroon top, is smiling and looking towards the first woman. They appear to be in a meeting or consultation. In the background, there are potted plants and a white cabinet.

emdria™
**Approved
Consultant™**

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Table of Contents

Table of Contents.....	2
Executive Summary.....	4
Introduction	6
Clinical and Instructional Focus.....	6
Purpose and Scope	7
Process of Developing the Standards.....	8
Goals and Review Process	13
Definitions	14
General Terms.....	14
Roles of Consultants	19
Types of Consultation.....	23
Core Competencies.....	26
Therapeutic/Consultation Alliance.....	27
Cultural Humility and Ethics	28
Knowledge	28
Skills—Actions, Behaviors, Abilities	33
Attitudes/Dispositions – Sense of Self and Others	39
Practice Expectations.....	41
Consultation Process.....	41
Consultant and Consultee Expectations.....	42
Consultation Types, Roles and Responsibilities.....	44
Developing Contracts.....	50
Documentation and Reports	51
Facilitating Consultation Groups.....	52
Supporting Growth and Development.....	59
Ongoing Assessment.....	60

Providing Feedback with Deliberate Practice	61
Evaluation and Recommendation	62
Conclusion	65
References	67

Executive Summary

This document describes updated standards and best practices for EMDR (Eye Movement Desensitization and Reprocessing) consultation. This information is designed to promote excellence, inclusivity and consistency in the preparation and ongoing development of EMDRIA Approved Consultants™. These guidelines build upon the foundational principles of EMDR therapy while aligning with current evidence, adult learning theory and culturally responsive knowledge, skills and attitudes in supervision/consultation models.

The standards clarify the purpose and scope of EMDR consultation, outlining expectations for both consultants and consultees across developmental stages of competence. They emphasize reflective and deliberative practice, ethical responsibility and trauma-informed relationships that foster safety, growth and professional identity. The standards describe the simultaneous roles of the consultant as an educator, motivator and evaluator.

Through this framework, the EMDR International Association (EMDRIA™) affirms its commitment to maintaining high professional standards, strengthening consultation pathways and nurturing a collaborative community of EMDR practitioners. The document serves as both a guide for current consultants and a foundation for future training, evaluation and credentialing processes that advance the quality and integrity of EMDR consultation.

This update of consultant standards is part of a multi-year initiative from EMDRIA™ to review and enhance all credentialing programs offered by the Association. The process begins with the EMDRIA Approved Consultant™ credential because consultants are uniquely positioned to influence every stage of the professional journey—from clinicians in basic training, to those pursuing certification, to practitioners preparing to become consultants and trainers themselves. By shaping learning, modeling best practices and cultivating professional standards, consultants play a vital role in sustaining the quality, coherence and growth of the EMDR community.

For the purpose of this document,

- Certified = EMDRIA Certified Therapist™
- Certification = EMDRIA™ Certification

- Consultant = EMDRIA Approved Consultant™ or EMDRIA Approved Consultant in Training™
- Clinician = Therapist or Practitioner

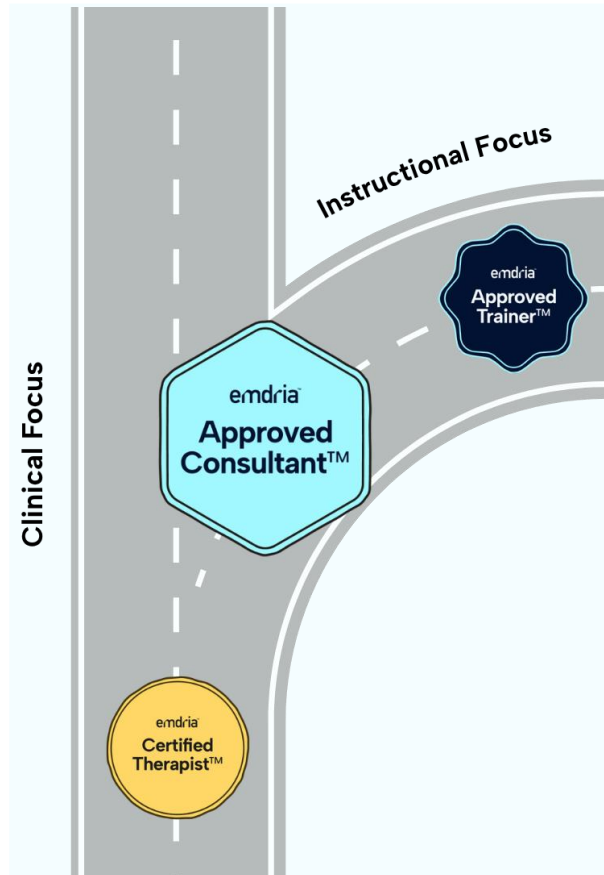
Introduction

Clinical and Instructional Focus

As EMDR therapists develop their professional journey, their paths may differ, each supporting different goals and roles within the field. One path focuses more on clinical material and application, deepening direct client work with different populations and settings. In the clinical focus, therapists move toward certification, refining therapeutic knowledge and skills, focusing on hands-on experience, case conceptualization and mastery of EMDR treatment to provide the highest level of clinical care.

After becoming certified, some EMDR therapists may decide to focus on an instructional path. This path involves expanding their roles beyond individual client work to teaching, consulting and supporting other clinicians in their growth and development. The focus of this instructional path is fostering leadership in the EMDR community, helping shape professional standards and advancing the practice of EMDR through teaching and consultation. Both paths are complementary and essential to the growth and sustainability of EMDR therapy.

EMDRIA Approved Consultants™ play a vital role in supporting the ongoing development and effectiveness of EMDR therapists. Consultants provide guidance, mentorship and oversight to fellow therapists, helping them refine their skills, navigate complex cases and adhere to ethical and professional standards. Their role encompasses a range of responsibilities, from offering individual or group consultation to contributing to professional education and training programs. By bridging clinical practice and education, consultants ensure that therapists are well-equipped to deliver safe, effective and trauma-informed care, while also fostering the growth and integrity of the broader EMDR community.



Purpose and Scope

The purpose of this document is to describe clear standards and best practices for EMDRIA Approved Consultants™, as well as outline the knowledge, skills and attitudes expected in a consultant's professional practice.

EMDR consultation is a distinct professional practice that has both facilitative and evaluative components in a collaborative relationship (Falender & Shafranske, 2004). The consultant plays different roles, including those of an Educator, Motivator and Evaluator to effectively support the growth, competence and confidence of EMDR therapists in a trauma-informed and ethically sound manner. The goal of EMDR consultation is to help clinicians enhance their professional competencies and ensure their practice aligns with established best practices.

EMDR consultation is essential for ensuring the effectiveness and integrity of EMDR therapy. Through consultation, EMDR therapists receive guidance, support and feedback from experienced consultants in order to enhance knowledge, skills and attitudes. Also, consultants promote the discipline of staying current with the latest research and best practices. Additionally, consultation offers a platform for addressing complex cases, ethical dilemmas and personal challenges that may arise when working with clients, with an emphasis on delivering effective and safe EMDR. Effective EMDR consultation is a collaborative environment where practitioners can share insights, ask questions and engage in ongoing professional development.

EMDRIA Approved Consultants™ are committed to assure the highest standards of excellence and integrity in EMDR and to comply with the [EMDR International Association Policies](#). In addition, EMDRIA Approved Consultants™ are committed to uphold the ethical standards in compliance with their licensing boards and adhere to state and federal regulations as applied to their place(s) of practice. Additional assumptions about EMDR consultation are that:

- It is a distinct professional engagement that requires education and training (Falender, C. A., & Shafranske, E. P., 2004);
- Its priority is the care of clients and the protection of the public;
- It is anchored in current evidence about EMDR therapy and consultation;
- It intentionally broaches all elements of Inclusion, Diversity, Equity, and Accessibility (IDEA);
- It is conducted in adherence with the legal and ethical standards of regulating bodies;
- It requires reflective practice and self-assessment; and
- It entails responsibilities for and incorporates bi-directional feedback between the consultant and consultee.

The purpose of articulating these standards is to provide a framework that supports consultants in their endeavor to provide high quality consultation. This document discusses issues pertaining to the needs of individual consultees, specific clinical cases and the timing of consultation interactions.

Process of Developing the Standards

The information in this document has been intentionally compiled from various sources to ensure a comprehensive and evidence-informed perspective on EMDR

consultation. Input was gathered from current EMDRIA Approved Consultants™ and EMDRIA Approved Consultants in Training™ through surveys and focus groups, capturing a range of experiences, insights and professional perspectives. In addition, the document integrates findings from current literature on EMDR consultation and mental health supervision as well as from adult education to better synthesize research, best practices and conceptual frameworks. By drawing on these diverse sources, the standards reflect both the lived experience of consultees and consultants and the current understanding of effective, trauma-informed consultation practice. The timeline graphic below shows the development of this document:



Survey

EMDRIA™ conducted surveys from December 2022 through January 2023, and in April 2025. Survey results provided valuable insight into the perspectives and experiences of consultants, consultants in training and consultees. Respondents highlighted common practices, challenges and areas of strength in consultation, as well as the knowledge, skills and attitudes most valued in effective consultants. The data helped identify trends in how consultation is delivered, including approaches to trauma-informed care, case review and professional development. These findings informed the development of the standards, ensuring they reflect real-world experiences and the needs of the EMDR community.

Focus Group

We conducted focus groups with consultants and consultants in training to gain deeper insight into consultation practices and experiences. These numerous discussions explored challenges, effective strategies and the skills and approaches that most support professional growth. The findings complemented survey data, providing rich, qualitative perspectives that continued to inform the development of the consultant standards.

Related Literature

Supervision in mental health and EMDR consultation share many commonalities in purpose and process. Both provide structured, relationship-based support that promotes the professional development, competence and confidence of clinicians. They involve observation, feedback, case review, reflective practice and guidance on clinical decision-making. In addition, ethical practice, trauma-informed care and the use of professional judgment are central to both. While supervision tends to cover a broader range of clinical approaches and has different legal and ethical implications, there is some overlap of supervision principles with EMDR consultation.

The models of supervision described below were reviewed to guide the development of this document:

- **Developmental Models:** These models view supervisees as evolving through stages of competence, requiring supervision that adapts to their

- growing skills and experiences. The focus is on fostering autonomy and professional development (Stoltenberg & McNeill, 2010).
- **Competency-Based Models:** Emphasizing the acquisition and demonstration of specific competencies, these models assess supervisees against predefined standards to ensure they meet professional practice requirements (Falender & Shafranske, 2004).
 - **Integrative Models:** Combining elements from various theoretical orientations, these models offer a flexible approach to supervision, allowing supervisors to tailor their methods to the supervisee's needs and the context of practice (Leddick, 1994).
 - **Reflective Practice Models:** Encouraging self-awareness and critical thinking, these models promote the supervisee's ability to reflect on their clinical work, enhancing personal and professional growth (Rankine, 2017).

Since one of EMDRIA's™ four pillars is to foster an inclusive community, the development of these standards and best practices included a review of inclusive models and frameworks for supervision (see table below). This review aimed to ensure that the principles guiding EMDR consultation reflect cultural responsiveness and humility. By integrating these, EMDRIA™ affirms its commitment to creating learning environments and professional relationships that honor diversity and promote belonging across all members of the EMDR community.

Framework	Focus	Key Contribution to Supervision
ASK (Sue & Sue, 2022)	Attitudes, skills, knowledge	Defines core domains of multicultural competence
RESPECTFUL (Sutherland & Peterkin, 2024)	Multicultural identity factors	Encourages comprehensive identity exploration
ADDRESSING (Hays, 2008)	Privilege & marginalization	Promotes self-awareness and reflection on power
Liberatory Supervision (Brown, 2016; Kortegast, Teso, & Jaekel, 2024; Rivera, Maldonado & Alarcon, 2013)	Social justice & critical consciousness	Integrates equity and advocacy into supervision
4 I's of Oppression (Bell, 2016)	Systemic layers of oppression	Provides lens for analyzing inequity in supervision
Cultural Humility (Zhang et al., 2022)	Lifelong reflection & power balance	Shifts focus from "competence" to relational awareness
Decolonial Practice (Roche, 2022)	CRAL (Critically Reflective Action Learning)	Promotes criticality and radical compassion in the context of supervision

For the development of these standards and best practices for consultation, it was also necessary to review research and practices for adult education within the context of mental health practice. Engaging this literature ensures that the consultation process is focused on a learning experience that is relevant, engaging and responsive to the needs of various consultees, clients and settings of practice. Effective adult education emphasizes experiential learning, reflection and application to real-world clinical situations. Aligning EMDR consultation with these standards helps promote meaningful skill integration, professional competence and ethical practices, supporting lifelong learning and the delivery of high-quality, trauma-informed care.

Goals and Review Process

The EMDRIA Approved Consultant™ Standards is a “living document” in terms of the necessity to evolve over time to meet the developing needs of consultants. As such, the goals for the EMDRIA Approved Consultant™ Standards include:

1. By December 2025, finalize the updated EMDRIA Approved Consultant™ Standards document – integrating competencies, evaluation criteria and role expectations.
2. By January 2026, send EMDRIA Approved Consultant™ Standards document to pilot reviewers. Collect and analyze feedback from pilot reviewers around the standards document, evaluation framework and process changes. Discuss and include feedback as appropriate.
3. During the first half of 2026, deliver at least three informational sessions (webinar series) to introduce the updated standards.

While foundational aspects of consultation remain consistent, EMDRIA™ has established a systematic plan for periodically reviewing and revising this document to reflect developments in education, training and clinical practice that happens over time. The data collected from the above goals help to inform the review process. Formal review of this document will be every five years. Comments, suggestions and feedback on the EMDRIA Approved Consultant™ Standards are welcomed at any time via the [EMDRIA Approved Consultant™ Standards Feedback Survey](#).

Definitions

General Terms

Clear and concise definitions of key terms and concepts used throughout this document are included in this section.

Consultant

The person providing the consultation. For the purposes of this document, the term consultant may refer to either an EMDRIA Approved Consultant™ or EMDRIA Approved Consultant in Training™.

Consultee

The person receiving the consultation.

Consultation

EMDR consultation refers to the process where an EMDRIA Approved Consultant™ or EMDRIA Approved Consultant in Training™ engages with a consultee to review and enhance their use of EMDR with actual clients in practice. This consultation typically involves discussing case specifics, reviewing clinical techniques, addressing challenges, problem solving and discussion of clinical decision making within the EMDR therapy framework. The goal of EMDR consultation is to support the consultee's ongoing professional development (knowledge, skills and attitudes), improve therapeutic effectiveness and ensure the delivery of high-quality care to clients undergoing EMDR therapy.

EMDRIA™ considers consultation to be developmental in nature, recognizing and building on the strengths of each consultee. Consultation is also a collaborative relationship between the consultant and therapist that includes observation, evaluation, self-assessment and feedback (Falender & Shafranske, 2004). This process enhances the focus and deliberative practice of specific competences.

Consultation of Consultation

EMDR consultation of consultation refers to the process where an EMDRIA Approved Consultant™ engages with an EMDRIA Approved Consultant in Training™ to review and enhance their practice of providing consultation for

EMDR with actual consultees in practice. This type of consultation typically involves discussing how the EMDRIA Approved Consultant in Training™ supports and provides feedback to their consultees. The EMDRIA Approved Consultant™ provides feedback to the EMDRIA Approved Consultant in Training™ to ensure that their consultees' practice case conceptualization and treatment planning consistent with the AIP model and adhere to the EMDR protocol. This consultation might include reviewing a variety of clinical and educational techniques to support the ongoing professional development of both, the consultant in training and their consultees. This process supports the enhancement to deliver high-quality care to clients undergoing EMDR therapy. This process enhances the focus and deliberative practice of specific competences.

In cases where an EMDRIA Approved Consultant in Training™ provides EMDR case consultation during a group or individual session to another EMDR trained therapist and the EMDRIA Approved Consultant™ observes the session without needing a separate explanation of the consultation being delivered, a portion of that observation time may be counted toward the EMDRIA Approved Consultant in Training™ required consultation of consultation hours.

Because EMDRIA™ expects the EMDRIA Approved Consultant in Training™ to receive consultation on the consultation they provide to their consultees, only half of the time spent observing the EMDRIA Approved Consultant in Training™ providing consultation may be counted toward their consultation of consultation requirement. Further explanation can be found further down in the EMDRIA Approved Consultant™ Standards document.

Deliberate Practice

Deliberate practice is a structured, goal-directed approach to skill development in which specific areas of growth are intentionally identified, practiced with focused attention and refined through feedback and reflection. In EMDR consultation, deliberate practice involves targeted application of EMDR knowledge, skills and attitudes to strengthen competence and support continuous professional growth.

EMDRIA™ Approved Basic Training

An EMDRIA™ Approved Basic Training provides clinicians with the foundational knowledge and skills to use EMDR therapy. It provides therapists with a foundational understanding of case conceptualization and treatment planning, and a baseline to integrate EMDR therapy into their clinical practice. An EMDRIA™ Approved Basic Training provides, at a minimum, instruction in the current explanatory model, methodology and underlying mechanisms of EMDR through lecture, practice and integrated consultation. EMDRIA™ recognizes consultation as a critical component of training, as it supports the integration of EMDR therapy into clinical practice with fidelity to the standard protocol. Consultation facilitates the development of clinical competence by allowing clinicians to apply EMDR therapy with clients under the guidance of an EMDRIA Approved Consultant™, receive case-specific feedback, address clinical challenges and refine procedural accuracy and clinical judgment.

EMDRIA Approved Consultant in Training™

An EMDRIA Certified Therapist™ who informs EMDRIA™ of their intent and begins working toward the EMDRIA Approved Consultant™ credential. A consultant in training (CIT) receives consultation of consultation from an EMDRIA Approved Consultant™. During this process, the EMDRIA Approved Consultant™ provides direction and input regarding the CIT's skills and abilities as a consultant.

EMDRIA Certified Therapist™

A mental health clinician who is fully licensed to engage in private, independent practice, has completed an EMDRIA™ Approved EMDR Basic Training, and has completed the EMDRIA™ requirements for certification.

Group Consultation

Group consultation includes at least two consultees in a formalized setting which is led by a consultant in a structured group format. The group comes together to discuss cases, share insights and seek guidance on the application of EMDR therapy. The consultant provides guidance to improve clinical skills and therapeutic outcomes. All consultees in the group are expected to

actively participate and be prepared to bring their EMDR case presentation material content for discussion.

The focus of consultation is about applying EMDR therapy in real, clinical situations. Consultation groups are distinct from study groups or groups focused on special populations and alternative procedures/protocols, which may not be structured and may enrich the practices of those attending, but do not count for consultation hours toward certification.

Individual Consultation

Individual consultation includes a total of two individuals, the consultant and the consultee (1:1). Individual consultation hours can be accrued in a group setting under certain conditions—see information in the “Earning Individual Hours in a Group Setting” section of the EMDRIA Approved Consultant™ Standards document.

Professional Identity

Professional identity is the consultee's integrated understanding of their role, responsibilities, scope, authority and accountability as an EMDR therapist.

Developing professional identity is different than skill acquisition or protocol adherence alone. Professional identity emphasizes the consultant's role in helping consultees move from external validation toward internal clinical judgment grounded in the AIP model, ethics and reflective practice through the potential use of techniques like reflective questions, modeling clinical reasoning and naming developmental stages commonly seen during consultation.

Reflective Practice

Reflective practice is the intentional process of examining one's knowledge, skills and attitudes in professional work to deepen understanding and improve future performance. In EMDR consultation, reflective practice supports insight, ethical awareness, cultural humility and ongoing professional growth. It encourages thoughtful consideration of both strengths and areas of growth for practical application.

Standard Protocol

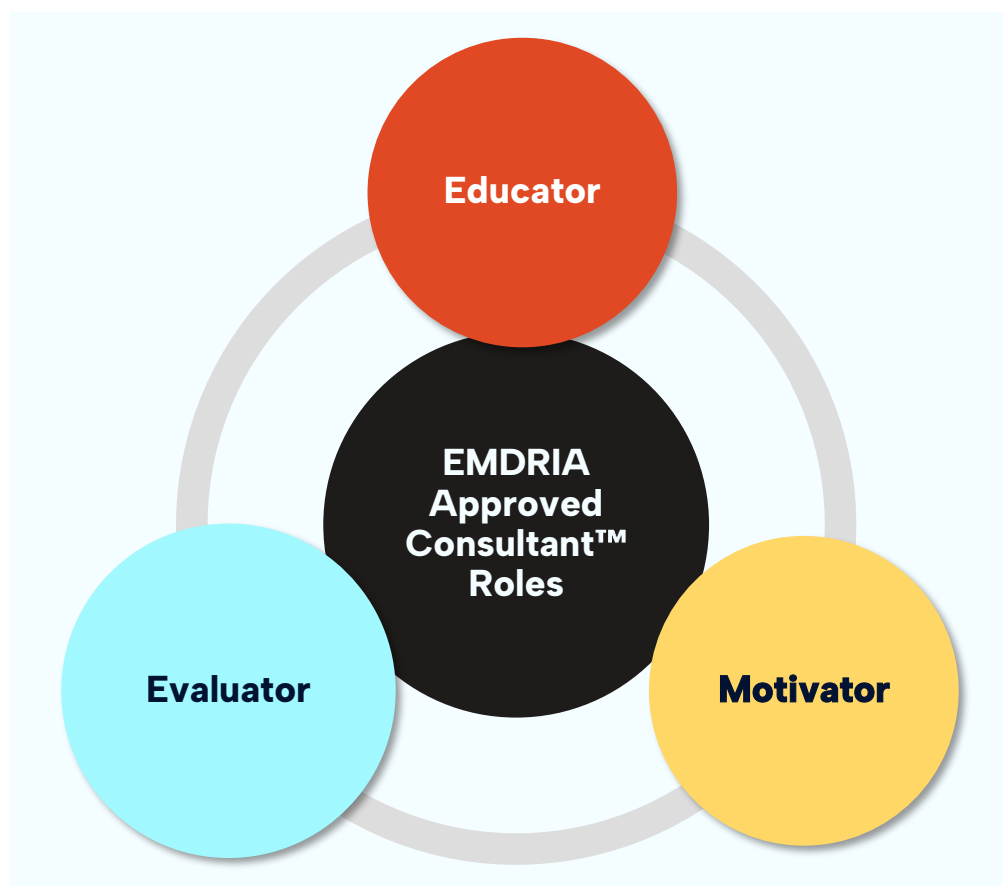
The standard protocol for EMDR therapy follows a three-pronged approach that targets the past, present and future. It focuses on past experiences driving current symptoms, addresses unresolved present triggers, and uses a Future Template to prepare for upcoming situations. This protocol is embedded within EMDR's comprehensive eight-phase treatment framework, which includes history-taking, client preparation, target memory assessment, desensitization, installation, body scan, closure and reevaluation of treatment outcomes. Standard protocol is rooted in the Adaptive Information Processing model (AIP), which provides the theoretical framework and principles for treatment.

Trainee

The person receiving the EMDRIA™ Approved Basic Training.

Roles of Consultants

EMDRIA Approved Consultants™ play a critical role in supporting the professional development of clinicians while promoting ethical, effective and trauma-informed practice. Their work encompasses three interconnected roles—Educator, Motivator and Evaluator—each contributing to the growth, competence and confidence of consultees in providing EMDR therapy.



Together, these roles ensure that consultation is supportive, developmental, addresses each therapist's or consultee's unique needs, promotes the focused and deliberate practice with the purpose of continuing to develop competencies and fosters excellence in EMDR practice.

- As **Educators**, a consultant shares knowledge, tools and strategies to strengthen clinical or consultation skills.

- As **Motivators**, a consultant encourages and inspires consultees to build confidence in their clinical or consultation work.
- As **Evaluators**, a consultant provides accountability through constructive feedback and assesses readiness for clinical or consultation competence.

The consultant's roles as educator, motivator and evaluator are complementary, not sequential or hierarchical, ensuring a balanced approach to learning and professional development.

The following table outlines key tasks associated with each role, highlighting how consultants guide clinical judgment, foster skill development and encourage reflective, client-centered practice.

Educator	Motivator	Evaluator
Provide clarification around EMDR treatment tools, protocols and procedures	Encourage consultees to trust their clinical abilities	Assess consultee's case presentations for the skillful and appropriate use of EMDR and other therapeutic interventions, as needed
Explain theory and practice connections clearly	Normalize challenges and setbacks as part of learning	Review treatment plans and case conceptualization
Demonstrate techniques through modeling or role-play	Recognize and affirm progress and strengths	Provide constructive feedback on clinical decisions, highlighting strengths and areas for growth
Provide information and resources as needed.	Inspire ongoing development and lifelong learning	Assess and offer constructive feedback on ethical and trauma-informed practice with

		attention to cultural humility.
Share resources, research and practice tools	Celebrate milestones and professional achievements	Determine readiness for certification with a clear evaluation framework
Recommend continuing education and further training	Create a supportive and safe consultation environment by modeling behaviors	Identify areas needing further training or information

Shifting Roles of the EMDR Consultant Across the Consultee's Journey

Effective EMDR consultation requires consultants to remain attuned to:

- the unique needs of each consultee,
- each specific case being discussed and
- where the consultee is on their professional journey.

Consultants may shift fluidly between roles by:

- emphasizing evaluation when assessing competence,
- leaning into motivation to build confidence and
- providing targeted education to address gaps in knowledge, skill and/or attitudes.

This dynamic approach ensures that consultation is responsive, client-centered, consultee-centered and tailored to foster both professional growth and high-quality clinical care.

Stage of Consultation	Educator	Motivator	Evaluator
Foundational Consultation (EMDR Basic Training Consultation)	Strong emphasis – teaching goals, procedures and protocol, case conceptualization and foundational EMDR skills.	Strong emphasis – fostering safety, curiosity and confidence in applying EMDR for the first time.	Light emphasis – focusing on guiding rather than examining; providing formative feedback.
Consultation for Certification	Moderate to strong emphasis – refining skills, integrating EMDR into complex cases and deepening case conceptualization.	Moderate emphasis – supporting resilience, addressing imposter syndrome and reinforcing professional identity.	Strong emphasis – evaluating clinical competence, ethical application in a trauma-informed framework.
Consultant in Training Consultation	Strong emphasis – teaching how to teach, model and structure effective consultation processes.	Strong emphasis – encouraging development of a consultant's identity, supporting confidence in guiding others.	Strong emphasis – assessing ability to provide consultation, clinical judgment and trauma-informed leadership.

Types of Consultation

Foundational Consultation (EMDR Basic Training Consultation)

- **Purpose:** The EMDR basic training consultation hours are focused on implementation and initial application of standard EMDR therapy and the AIP model in working with actual client cases.
- **Process:** An EMDRIA Approved Trainer™ connects trainees with consultants to complete the consultation requirements for EMDR basic training.
- **Goals:** The goal of consultation during basic training is to begin allowing trainees to safely and effectively integrate the use of EMDR therapy into their clinical setting. Consultation provides an opportunity for the integration of theory into practice. The goal is that consultees remember and recall facts and concepts from their training and understand ideas and concepts to be applied to actual clients.
- **Expectations:** During consultation trainees receive individualized feedback and instruction in the areas of case conceptualization, client readiness, target selection and sequence, treatment planning, specific application of skills and the integration of EMDR therapy into clinical practice with diverse populations and settings. Consultation supports trained clinicians in deepening their use of EMDR therapy by developing and integrating their skills in creative ways. Consultation during EMDR basic training centers on the applications of the standard protocol to support the enhancement of those skills before including more nuances about more specialized applications.

Certification Consultation

- **Purpose:** The certification consultation hours are focused on demonstrating proficiency and fidelity to the standard protocol as well as an awareness of situations in which modifications to standard protocol are necessary to safely and effectively treat the client. The feedback provided by the consultant is based on material presented by the consultee, direct observation or recorded observation.
- **Process:** A consultant works with certification applicants to complete the consultation requirements for the EMDRIA Certified Therapist™ credential.
- **Goals:** The goal of consultation for certification is a collaborative and instructional focus designed to enhance a clinician's proficiency in EMDR therapy. It involves working with a consultant who provides guidance, feedback and support as the clinician hones their skills. It involves applying

and analyzing information to strengthen clinical decision-making and clinical EMDR practice.

- **Expectations:** Consultation sessions focus on applying EMDR therapy effectively and ethically with diverse populations and settings, integrating the eight phases of treatment, and addressing clinical challenges. Whenever possible, video recording or live observation of clinical work is strongly preferred. This allows consultants to directly observe clinical skills, identify strengths and areas for growth and provide specific, EMDR-focused feedback. When video or live observation is not permitted—such as in certain agencies, university clinics or governmental settings—alternative behavioral samples may be used. These may include detailed case presentations, near-verbatim transcripts, structured session summaries or reflective dialogue.

Consultant in Training Consultation

- **Purpose:** The consultation of consultation hours are focused on the CIT's skills and ability to provide consultation to other clinicians based on material presented by the CIT, direct observation or recorded observation.
- **Process:** The consultation of consultation occurs when the consultant and CIT meet to discuss specific knowledge, skills and attitudes related to consultation to complete the consultation requirements for the EMDRIA Approved Consultant™ credential.
- **Goals:** The goal of consultation of consultation is a collaborative and instructional focus designed to enhance a CIT's proficiency in providing EMDR consultation. It involves working with a consultant who provides guidance, feedback and support as the consultee hones their consultation skills. It also involves applying and analyzing information to strengthen consultation decision-making and adult education to support their consultees.
- **Expectations:** Consultation sessions focus on developing CIT knowledge, skills and attitudes related to consultation which includes the practice of case conceptualization and treatment planning consistent with the AIP model and adhering to EMDR treatment. Whenever possible, video recording or live observation of consultation work is strongly preferred. This allows approved consultants to directly observe the CIT's skills and identify strengths and areas for growth to provide specific, focused feedback. When video or live observation is not permitted—such as in certain agencies, university clinics or governmental settings—alternative behavioral samples may be used. These may include consultation summaries, near-verbatim transcripts or reflective dialogue. These methods can be used to support consultees in deepening

their understanding in teaching and consulting on EMDR principles, building confidence as a consultant and refining their consultation techniques. This structured process not only meets credential requirements but also fosters professional growth and competence in delivering high-quality EMDR consultations. The expectation is that the CIT applies the feedback received by the consultant to meet consultation competencies.

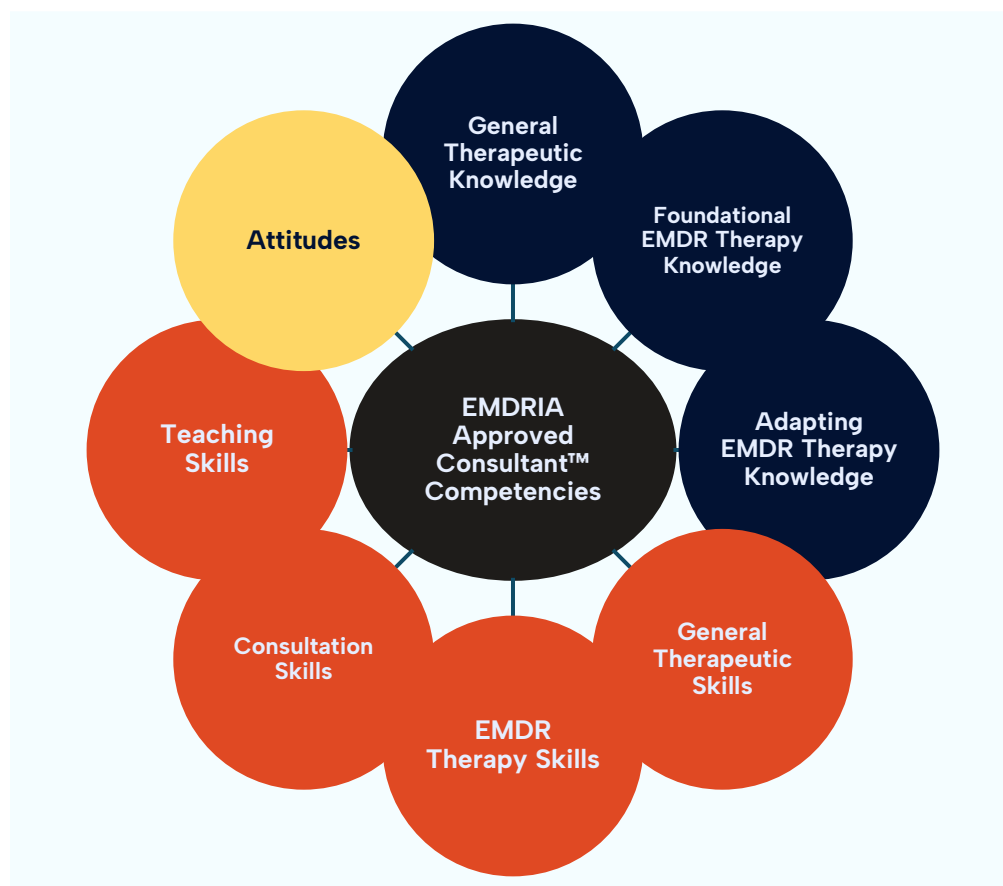
EMDR Case Consultation (not for credentialing purposes)

- **Purpose:** EMDR case consultation focuses on discussing complex or challenging cases to ensure that EMDR interventions and treatment are used properly and are effective. This type of consultation might be short-term or provided on an as-needed basis. In addition, this type of consultation does not count for reaching a credential of certification or consultant. Many clinicians continue engaging in this form of consultation after meeting credentialing requirements to support lifelong learning and professional development.
- **Process:** This occurs when two clinicians meet to discuss case specific interventions, presentations or situations to support EMDR therapy applications.
- **Goals:** The goal of EMDR case consultation is to enhance a clinician's proficiency in EMDR therapy in a collaborative process to gather feedback and recommendations.
- **Expectations:** This is not a formal structured process for the purpose of credentialing— expectations are set by individual clinicians who are working together.

Core Competencies

Core competencies refer to the integrated set of knowledge, skills, attitudes and reflective capacities that enable EMDR consultants to provide effective, ethical and culturally responsive consultation. They represent the essential abilities that underpin competent performance across roles—Educator, Motivator and Evaluator—and across developmental stages of consultees.

These competencies are not just technical checklists, but essential guideposts for professional integrity and therapeutic impact. They are reflected in the quality of clinical practice that benefits others. Core competencies can be evaluated by professional standards and be developed and enhanced through professional training and reflection (Sperry & Sperry, 2023).



These competencies represent the minimum standards required to ensure quality, consistency and ethical practice. With a foundation in developing a strong therapeutic and consultation alliance along with cultural humilities, ethics and IDEA, consultants are responsible for demonstrating proficiency in each area throughout their work. Meeting these competencies is essential for maintaining good standing and delivering effective consultation services.

For a consultant to provide effective, informed and supported consultation, whether on an individual basis or in a group setting, the consultant should strive to maintain competencies in categories related to knowledge, skills and attitudes that support a developmental model. While rooted in a strong consultation alliance that embodies cultural and ethical humility, these categories are separate in such that:

- A consultant and/or consultee may have strengths in some competencies and yet may be at different developmental stages in others, which helps to identify potential gaps for further support and growth;
- Allows for increasing self-awareness and application of evolving knowledge and skills;
- Allows for tailored supports for each consultee/consultant; and
- Ensures that proficiency standards are met through behavioral evidence.

Each category of competency is further described below.

Therapeutic/Consultation Alliance

In EMDR consultation, the therapeutic alliance between the consultee and client has many similarities with the consultation alliance between the consultant and the consultee. Just as clients need safety and trust with their therapist to do deep work, consultees need a similar foundation with their consultant. A strong consultation alliance fosters openness, honest reflection and a willingness to grow—mirroring the therapeutic process itself. When consultees feel supported, respected and challenged within a safe relationship, they are better equipped to strengthen their therapeutic alliances with clients, ultimately improving outcomes in EMDR therapy. Consultants should model ways to strengthen this alliance by sharing their experiences and learning processes to provide support without judgment.

Cultural Humility and Ethics

Cultural humility and ethics are essential in the EMDR consultation process. Consultants model the same sensitivity clinicians are called to bring to their clients. Humility means acknowledging that learning is ongoing and that no one person holds all the answers. This mindset not only strengthens the consultation relationship but also supports ethical, culturally responsive EMDR practice that better supports and serves diverse clients.

Inclusion, Diversity, Equity and Access (IDEA)

Inclusion, Diversity, Equity and Access (IDEA) is a guiding framework at EMDRIA™ and for EMDR consultation. It reminds consultants to create learning environments where all voices are welcomed, respected, and represented. By broaching IDEA in consultation, consultants intentionally acknowledge the impact of cultural background, lived experience and systemic barriers on both clients and clinicians and recognize that such conversations deepen trust and foster mutual learning and greater cultural attunement. This framework ensures that EMDR skills are developed with cultural humility, that consultees feel safe to bring their full identities into the process, and that the practice of EMDR therapy remains accessible and equitable for the diverse communities it serves. IDEA as a framework requires a consultant who constantly engages in self-assessment and actively engages in learning to keep their own biases in check to support consultees from different backgrounds—with curiosity and understanding.

Knowledge

General Therapeutic Knowledge

This competency involves the capacity to use a theoretical understanding and application to assess, conceptualize, plan and implement a course of therapy in a consistent and effective manner.

- **Mental Health Problems:** A consultant possesses a solid working knowledge and understanding of a wide range of mental health problems, including those in the current version of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) and/or the *International Classifications of Diseases* (ICD). If a consultant does not have sufficient experience to address specific mental health concerns, they are expected to

- acknowledge these limitations transparently and refer the consultee to an appropriate expert or qualified professional.
- This expertise enables the consultant to support consultees in accurate case conceptualization, appropriate treatment planning and the safe application of therapy tailored to the complexities of each client's diagnosis and presentation.
 - **Trauma and Trauma-Informed Principles:** A consultant demonstrates comprehensive knowledge and understanding of trauma and trauma-informed principles, emphasizing safety, choices, empowerment, collaboration and cultural consideration in the therapeutic process. Trauma-informed care is a framework that recognizes the impact of trauma and emphasizes safety, stabilization, trust and avoidance of re-traumatization. It guides how services are delivered, supports readiness for treatment, but does not necessarily involve direct processing of traumatic memories. Trauma-focused treatment, such as EMDR therapy, directly targets traumatic experiences using structured, evidence-based protocols. Grounded in the Adaptive Information Processing (AIP) model, trauma-focused EMDR involves the reprocessing of maladaptively linked memories. In short, trauma-informed care creates the conditions for safety and engagement; trauma-focused EMDR therapy treats the trauma itself.
 - This expertise enables the consultant to support consultees in recognizing the widespread impact of trauma, its neurobiological effects, and the importance of pacing, stabilization and client readiness for trauma reprocessing.
 - This expertise enables the consultant to support consultees in delivering therapy with sensitivity to trauma histories, cultural contexts and individual differences to promote healing in a respectful and supportive environment.
 - **Dissociation:** A consultant possesses a thorough understanding of dissociation including various diagnostic and screening tools.
 - This expertise enables the consultant to support consultees in assessing dissociative symptoms within the context of trauma and help them implement appropriate pacing, stabilization and

grounding strategies to ensure client's emotional and physical safety.

- This expertise enables the consultant to support consultees in recognizing when specialized interventions or referrals are needed to effectively address complex dissociative presentations.

Foundational EMDR Therapy Knowledge

This competency involves the capacity to use a theoretical understanding of the AIP model and application of EMDR therapy to assess, conceptualize, plan and implement treatment in a consistent and effective manner.

- **AIP Model:** A consultant demonstrates a thorough knowledge of the AIP model and its implications for case conceptualization and treatment planning with a client-centered approach that considers setting of practice.
 - This expertise enables the consultant to support consultees in using the AIP therapy model in their clinical practice.
- **Case Conceptualization and Treatment Planning:** A consultant demonstrates a thorough knowledge of case conceptualization, including identifying and addressing potential blocks in the therapeutic process.
 - This expertise enables the consultant to support consultees in developing treatment plans that are client-centered and that use the AIP model and the phases of EMDR therapy. Detailed examination of client cases to gain insights, address therapeutic challenges and refine treatment strategies is required to develop this competence.
- **Three-Pronged Approach:** A consultant demonstrates a thorough knowledge of the Three-Pronged Approach and understands its integration into case conceptualization, treatment planning and clinical decision-making.
 - This expertise enables the consultant to support consultees in engaging in a comprehensive reprocessing of maladaptive experiences across time domains— past trauma, present triggers

and future possible traumatic situations. Clinicians should use the Three-Pronged Approach with flexibility to adapt to each client's needs.

- **Eight Phases:** A consultant demonstrates a thorough knowledge of the 8 phases of EMDR therapy. This includes clearly explaining and applying each phase with clinical flexibility and adherence to EMDR treatment.
 - This expertise enables the consultant to support consultees explaining and applying each phase clearly, organizing and prioritizing targets, managing client stuck points skillfully and applying the 8 phases framework in a client-centered way.
- **Cultural Humility and Ethics:** A consultant demonstrates a thorough knowledge in culturally responsive care and individualized approaches to EMDR therapy, considering diverse consultee and client backgrounds, identities and trauma experiences to integrate this knowledge into case conceptualization and treatment planning that includes cultural humility and an awareness of personal biases.
 - This expertise enables the consultant to support consultees in recognizing how culture, context and individual differences inform therapeutic needs and responses.
- **EMDR as a Guiding Clinical Framework:** A consultant demonstrates a thorough knowledge of EMDR not just as a technique, but a clinical therapeutic approach that informs how clinicians conceptualize cases, how they relate to their clients and how they support healing.
 - This expertise enables the consultant to support consultees in maintaining integrity to the model across diverse settings and clinicians.
- **How to Address Common Missteps:** A consultant demonstrates a thorough knowledge of how to identify, address and support the correction of common missteps that can compromise EMDR treatment, client safety and therapeutic effectiveness. This requires both clinical knowledge and educational attunement through reflective and structured guidance.

- This expertise enables the consultant to support consultees in recognizing and acknowledging missteps in clinical practice and brainstorming ideas on how to address similar situations in the future.

Adapting EMDR Therapy Knowledge

This competency reflects the ability to apply a strong theoretical understanding of the AIP model to guide thoughtful adaptations of EMDR therapy. Adaptations are made with intention and clarity, preserving the integrity of the EMDR approach.

- **Clinical Experience:** A consultant has extensive knowledge of different applications of EMDR therapy. A consultant applies understanding gained from working with diverse populations and complex clinical presentations and draws from real-world experiences to offer relevant insights, guide case conceptualization and support effective clinical decision-making.
 - This expertise enables the consultant to support consultees in enhancing their confidence and increasing their effectiveness when working with diverse populations and complex cases.
- **Adaptation and Integration of EMDR Therapy:** A consultant utilizes a depth of EMDR knowledge and clinical expertise to determine when, why and how to adapt EMDR without compromising the integrity of the model. This involves integration of EMDR with other evidence-based modalities when clinically appropriate and includes rationale for integration. Consultants must embody both technical mastery and clinical discernment in the use of adaptation of EMDR therapy. Consultants should guide consultees to remain grounded in the EMDR model while adapting thoughtfully and ethically to real-world complexities and diverse client needs.
 - This expertise enables the consultant to support consultees in adapting and integrating EMDR as appropriate for clients' needs and situations.

Skills—Actions, Behaviors, Abilities

General Therapeutic Skills

This competency reflects the consultant's ability to support a consultee in the application of general therapeutic principles.

- **Ability to Foster and Maintain a Good Therapeutic Alliance:** A consultant models and cultivates the ability to foster and maintain a strong therapeutic alliance with their clients and consultees, emphasizing empathy, trust and attunement.
 - By demonstrating respectful, supportive and collaborative interactions, the consultant helps consultees understand the critical role of the therapeutic alliance in EMDR therapy and encourages them to build similar connections with their clients for effective and safe treatment outcomes.
- **Ability to Use and Interpret Screening and/or Assessment Tools:** A consultant demonstrates proficiency in administering and interpreting therapeutic screening and/or assessment tools including trauma-related assessments.
 - By guiding consultees in selecting appropriate screening and/or assessments tools, the consultant supports accurate interpretation of results within the EMDR framework, ensuring that the information enhances clinical decision-making and helps tailor interventions to the client's unique needs.
- **Ability to Understand and Respond to Dysregulated, Dissociated, and/or Suicidal Clients:** A consultant is skilled in guiding consultees to recognize and effectively respond to clients in distress, ensuring safety and stabilization throughout the therapeutic process.
 - By emphasizing the importance of assessing emotional states, managing crises and using grounding techniques to support regulation, the consultant helps consultees maintain therapeutic containment.

- **Ability to Collaborate with Clients:** A consultant encourages and models the ability to collaboratively engage clients in exploring and choosing treatment options, fostering a client-centered, trauma-informed approach that honors their preferences, values and readiness.
 - By facilitating open dialogue about treatment options, the consultant helps consultees engage in similar conversations with their clients.
- **Ability to Assess and Manage Risk:** A consultant demonstrates expertise in guiding consultees to assess and manage risk effectively, including identifying indicators of safety concerns such as suicidality, self-harm or aggression and provides the consultee with appropriate ways to support clients with those presentations.
 - By emphasizing ongoing risk assessment throughout treatment, the consultant supports consultees in the development of clear safety plans and crisis interventions as needed.
- **Ability to Manage Therapeutic Terminations:** A consultant guides consultees in navigating therapeutic terminations ethically and with care, supporting client closure, integration and emotional readiness.

By emphasizing the importance of reviewing treatment progress, addressing unresolved issues and collaboratively planning for aftercare or referral when needed, the consultant supports consultees in fostering a smooth and respectful transition that honors self-determination and leaves the door open to return for consultation if appropriate.

EMDR Therapy Skills

This competency encompasses the consultant's ability to support the development and refinement of EMDR therapy skills in consultees. It involves guiding consultees in the accurate implementation of EMDR procedures, maintaining fidelity to the standard protocol while allowing for clinically appropriate adaptations and promoting confidence, precision and ethical judgment in the application of EMDR interventions.

- **Ability to Apply Foundational EMDR Therapy Knowledge:** A consultant guides consultees in applying foundational EMDR therapy knowledge as outlined in this document. This includes integrating the AIP model, the Eight Phases of EMDR therapy and the Three-Pronged Approach into case conceptualization and treatment planning.
 - By demonstrating the application of foundational EMDR therapy knowledge, the consultant models the use of EMDR as a guiding clinical framework, promotes cultural humility throughout the consultation process and supports consultees in effectively integrating EMDR principles into their clinical practice.
- **Ability to Adapt EMDR Therapy:** A consultant guides consultees in applying adaptations for EMDR therapy as outlined in this document. This includes helping consultees recognize when and how to modify EMDR treatment. Through this process, the consultant models flexibility, ethical decision-making and client-centered responsiveness while reinforcing EMDR as the guiding clinical framework.
 - By demonstrating the ability to adapt EMDR therapy, the consultant models flexibility and clinical judgment in applying EMDR principles to diverse client needs and settings.

Consultation Skills

This competency encompasses the cognitive understanding and applied skills required for effective consultation, demonstrated through modeling, teaching and responsive support that address the diverse needs of consultees across varying levels of practice, experience and training.

- **Ability to Demonstrate Ethical and Professional Standards:** A consultant adheres to the ethical guidelines and professional standards of their profession and within their scope of practice.
 - By identifying and addressing any issues of transference and/or countertransference, consultants manage consultation relationships professionally and ethically.

- **Ability to Maintain Professional Boundaries:** A consultant maintains professional boundaries with their consultees and recognizes that consultation is focused on enhancing clinical skills, and it is not psychotherapy. A consultant does not provide consultation for a spouse, partner, family members and/or relatives. A consultant does not provide therapy to current consultees.
 - By focusing on the professional development of the consultee, when necessary, consultants may want to encourage consultees to engage in their own personal therapy as appropriate; however, this occurs outside the context of consultation and with a different therapist who is not the consultant.
- **Ability to Provide Developmentally Attuned Support:** A consultant assesses the individual skills and experience levels of their consultees and remains cognizant that learning and mastering EMDR can feel overwhelming. The consultant normalizes these challenges, providing empathetic support during emotionally difficult or uncertain clinical moments.
 - By helping consultees manage self-doubt and emotional responses with sensitivity, consultants can support the consultee in developing their proficiency in EMDR therapy with confidence and resilience. Additionally, consultants support consultees in practicing new skills in a deliberate and focused way.
- **Ability to Apply Familiarity and Consistency with EMDRIA™ Standards and EMDR Research:** A consultant adheres to EMDRIA™ standards and stays abreast of resources and current EMDR research.
 - By staying informed of updates to standards and resources, consultants effectively guide consultees through the certification process, supporting compliance with required standards and upholding the integrity and credibility of EMDR training and practice.

- **Ability to Facilitate Effective Group Consultations (if applicable):** A consultant effectively facilitates group consultations by establishing a clear structure that promotes group safety, cohesion, and respectful discussion.
 - By skillfully guiding group dynamics to encourage meaningful peer feedback and collaborative learning, consultants ensure that logistical elements, such as allocating appropriate time for each case discussion, support equitable participation and maximizing the group's educational value.

Teaching Skills

This competency reflects cognitive aspects demonstrated in a physical capacity to perform a teaching activity/task with a successful outcome (Hoge et al., 2005). It includes an understanding of information and its application through effective teaching and transfer of knowledge techniques to support diverse needs of consultees through practice, experience and training.

- **Ability to Create a Positive Learning Environment:** A consultant fosters a safe, inclusive and affirming learning environment where consultees feel supported to take risks, make mistakes and develop new skills.
 - By emphasizing the creation of space for growth, consultants are promoting psychological safety, encouraging open dialogue, as well as recognizing and valuing the existing knowledge and lived experiences of each consultee. When consultants create an environment where consultees feel comfortable expressing themselves and taking risks without fear of negative consequences, this further supports consultees in fully engaging and building confidence in the consultation process.
- **Ability to Adapt Teaching Skills for Diverse, Adult-Learner Needs:** A consultant adapts their teaching approaches to meet the individual and group needs of consultees, incorporating principles of cultural responsiveness and humility along with IDEA.
 - By using a variety of interactive learning methods and multimodal resources—such as questioning techniques, Socratic questioning, visual aids, handouts, role play, explanation of protocols and media tools (e.g.,

podcasts, videos, scripts), etc.— consultants promote engagement to further deepen and apply what is learned.

- **Ability to Foster a Reflective Learning Process:** A consultant helps consultees explore the rationale behind their clinical decisions, rather than focusing on what they did “wrong.”
 - By using metaphors, analogies, and real-world case examples, consultants strive to make complex concepts accessible to support practical application.
 - By practicing active listening and Socratic questioning techniques, consultants guide consultees toward their own insights, encouraging critical thinking and skill development rather than providing directive answers.
- **Ability to Promote Skill Development:** A consultant allows both time and learning space for each consultee to think through a variety of different clinical options with guidance. A consultant recognizes the knowledge and skills that a consultee brings from other therapeutic approaches and other professional and personal experiences.
 - By including the use of role-plays, case simulations, videos and real-time observation within consultation sessions, consultants support the integration of EMDR protocols into diverse clinical contexts.
 - By providing developmentally appropriate feedback that is delivered in a way that is constructive, non-shaming and growth-oriented, consultants support consultees in building their own confidence, competence and clinical judgment.
- **Ability to Evaluate Application of EMDR Therapy:** A consultant frequently evaluates each consultee’s competence using EMDRIA™ competencies and adherence to the established EMDR standards. Consultants review and assess a range of work products—including case documentation, session recordings (video/audio), transcripts, role plays, in vivo observations and verbal summaries—to provide precise, constructive feedback.

- By guiding consultees through challenges (e.g. clinical impasses, clinical choice points, or inaccuracies) in applying standard EMDR therapy, consultants support thorough and consistent evaluation for consultee growth.
- **Ability to Encourage Two-Way Learning:** A consultant values collaboration and establishes means to exchange knowledge, perspectives and growth so learning flows in both directions in a consultation relationship between consultee and consultant. By being open to both giving and receiving feedback, consultants model engagement in the life-long learning process.

Attitudes/Dispositions – Sense of Self and Others

Intrapersonal & Interpersonal Attitudes

Intrapersonal and interpersonal attitudes and dispositions reflect enduring patterns of beliefs, emotions and behaviors that shape how individuals relate to themselves and others (Hogg & Vaughan, 2005). These dispositions influence actions, values, and motivation in clinical practice. They evolve over time through feedback, reflective self-awareness, deliberate and focused practice and intentional personal growth.

- **Self-Awareness:** A consultant has the ability to know their own limitations and competencies, manage their personal reactions, biases and cultural awareness.
- **Supportive Dispositions:** A consultant demonstrates a variety of supportive dispositions such as integrity toward EMDR treatment, and use of affirming, accepting and understanding attitudes towards consultees.
- **Positive Influence and Model:** A consultant models positive behaviors such as professionalism, vulnerability and self-care.

Willingness to Learn: A consultant is aware of the latest research, trends and updates in the field of EMDR therapy to provide evidence-based guidance and incorporate new findings into practice. Consultants seek to attain and maintain competence in EMDR consultation through formal education and training as well as using EMDRIA™ resources (including those found in the [EMDRIA™ Library](#)).

Consultants also develop constructive relationships with other consultants by seeking opportunities for feedback toward self-improvement.

Practice Expectations

The following practice expectations outlined below are recommended approaches for delivering high-quality consultation. While not required for maintaining the consultant credential, these expectations reflect professional standards and support consistency, clarity and effectiveness in practice. Consultants are encouraged to incorporate these practices as appropriate to their setting, style and the needs of their consultees.

Consultants are encouraged to use their professional judgment in determining which practices are most appropriate for their individual consultation settings. These expectations do not replace legal, ethical or organizational obligations, and consultants should continue to adhere to any relevant codes of ethics and professional standards.

No more than two (2) hours of consultation may be conducted within a single day. This limitation is intended to support meaningful skill development and integration of EMDR therapy practice. Accruing consultation hours within a compressed timeframe does not allow adequate opportunity to apply feedback, gain clinical experience between sessions and demonstrate progressive competency. Consultation is designed to support ongoing learning and integration over time rather than rapid accumulation of hours.

Consultation Process

Consultation is not supervision. In consultation, the consultee maintains full responsibility and autonomy for the decisions involving their clients' treatment. The consultant provides feedback on the consultee's implementation of standard EMDR therapy and is not directive with client treatment.

Typically, consultation is a more collaborative (rather than directive) process that focuses on supporting the growth of a consultee's clinical decision-making skills through recommendations made by the consultant. In consultation, a consultee decides whether to proceed with the recommendations made by the consultant.

Consultation	Supervision
More collaborative than directive	More directive than collaborative
Focuses on growing consultee's clinical decision-making skills	Focuses on a structured supervision plan to develop foundational clinical knowledge and skills.
Gives descriptive recommendations and consultee decides to follow recommendations	Supervisor provides descriptive clinical direction and works toward descriptive recommendations
Not regulated by licensing board(s)	Regulated by licensing board(s)

Consultant and Consultee Expectations

The EMDR consultation relationship is a collaborative and developmental process grounded in mutual respect, reflective dialogue and professional growth. Both the consultant and consultee share responsibility for creating a learning environment that encourages curiosity, self-awareness and continual improvement in EMDR practice. The expectations outlined below define the attitudes and behaviors that support ethical, culturally responsive and effective consultation.

Consultant Expectations

The consultant is expected to:

- **Provide clear, thoughtful, practical guidance** while fostering reflective dialogue about the consultee's clinical decision-making—inviting exploration of the “why” behind each choice. Through this collaborative and inquiry-based approach, consultants deepen understanding, strengthen clinical judgment and build consultees' confidence in applying EMDR therapy effectively across diverse cases.
- **Demonstrate a commitment to continuous professional growth** by staying current with trauma research, developments in EMDR therapy and

emerging applications, while modeling the same developmental mindset expected of consultees—to support growth and to be better tomorrow than today.

- **Model ethical, trauma-informed, and culturally responsive practice** by integrating cultural humility, inclusivity and respect for diverse client and consultee backgrounds throughout the consultation process.

Consultee Expectations

The consultee is expected to:

- **Actively using EMDR therapy with clients** (and actual EMDR consultees for CITs) and **providing examples of work** as part of the consultation process. Ideally, consultants should have the opportunity to observe the consultee's work, when possible, through video recording or live observation of work, which is strongly preferred. This allows consultants to directly observe clinical or consultation skills, identify strengths and areas for growth and provide specific, EMDR-focused feedback. When video or live observation is not permitted—such as in certain agencies, university clinics or governmental settings, alternative behavioral samples may be used. These may include detailed case presentations, near-verbatim transcripts, structured session summaries or reflective dialogue.
- **Engage actively and reflectively in the consultation process**, approaching feedback with openness and curiosity to enhance understanding, confidence and effectiveness in EMDR practice.
- **Be receptive to and apply consultant feedback** thoughtfully and consistently, recognizing that constructive feedback is essential to professional growth. This includes a willingness to explore new strategies, integrate guidance and refine clinical decision-making, embracing a developmental mindset to be better tomorrow than today.
- **Demonstrate commitment to continual learning and professional development** by seeking opportunities to deepen EMDR knowledge, staying informed about current research and applying new insights to clinical work and consultations.

- **Uphold ethical and culturally responsive standards of practice** by integrating cultural humility, trauma-informed awareness and respect for diversity in all aspects of clinical and professional behavior.

Consultation Types, Roles and Responsibilities

EMDR consultation is a developmental process that evolves across three progressive stages—basic training, certification, and consultant in training (CIT). Each stage builds upon the previous one, expanding the consultee’s competence, professional identity and capacity to apply EMDR therapy with clinical integrity, flexibility and ethical awareness.

The consultant’s role adapts at each level—from supporting foundational skill integration to mentoring advanced clinical application and cultivating future consultants. The following table outlines the focus, consultant role and expected outcomes associated with each consultation level.

Consultation Level	Primary Focus	Consultant Functions	Expected Outcomes
Foundational Consultation (EMDR Basic Training)	Supports integration of foundational EMDR concepts and procedures introduced in basic training during instruction and practical parts of the training.	Acts as an extension of the EMDRIA Approved Trainer™, ensuring accurate application of EMDR fundamentals within a supportive learning environment.	Verifies completion of required consultation hours for the EMDR basic training.
Certification Consultation	• Deepens competence in EMDR application beyond basic training. • Emphasizes AIP case conceptualization,	Functions as an educator, evaluator and motivator providing feedback, modeling reflective and focused practice and supporting professional growth.	Verifies demonstrated readiness for certification and commitment to continue professional development.

	treatment planning and treatment consistent with eight phases and three-pronged approach with clinical integrity, flexibility, ethical practice and cultural humility. • Supports consultees in clinical decision-making considering needs and settings of practice.		
Consultant in Training (CIT) Consultation	Develops advanced consultation skills and professional identity as a future EMDRIA Approved Consultant™.	Serves as a model and guide for CITs, focusing on consultation competencies and reflective, deliberate, trauma-informed leadership.	Verifies demonstrated readiness for EMDRIA Approved Consultant™ credential and sustained engagement in the EMDR professional community.

Foundational Consultation (EMDR Basic Training Consultation)

Consultants are expected to maintain active collaboration with the EMDRIA Approved Trainer™ when providing consultation hours toward completion of basic training. They function as an extension of the trainer's educational process, ensuring that consultation aligns with the trainer's curriculum, procedures and learning objectives (that have been approved by EMDRIA™). Consultants and trainers are responsible for maintaining clear communication regarding

requirements, documentation and progress, thereby supporting consistency, accountability and a cohesive learning experience for the consultee. The chart below describes the consultant and consultee responsibilities before, during and after EMDR basic training consultation.

Consultation Phase	Consultant Responsibilities	Consultee Responsibilities
Before Consultation Begins	- Confirm agreement with the EMDRIA Approved Trainer™ to provide consultation hours. - Verify the trainer's requirements around procedures, forms and documentation for tracking hours.	- Ensure the consultant is approved by the EMDRIA Approved Trainer™ to provide consultation for their training. - Review consultation expectations, procedures and documentation process.
During Consultation	- Identify areas needing additional development and adjust focus as needed. - Provide clear, direct feedback on the progress of stated goals.	- Seek clarification about expectations for competency and completion. - Provide behavioral samples for feedback. - Reflect on feedback and discuss progress of stated goals.
After Consultation Ends	- Follow EMDRIA Approved Trainer's™ procedures to document and sign off on consultation hours. - Provide information about EMDRIA™ credential pathways and ongoing development opportunities.	- Submit all required documentation for completed consultation hours to the EMDRIA Approved Trainer™. - Seek ongoing professional growth through workshops, reading and engagement with current EMDR research.

EMDR Certification Consultation

Consultation for EMDR certification is designed to deepen the clinician's competence beyond basic training, supporting the integration of EMDR therapy

into diverse clinical contexts with professionalism, ethical awareness and cultural responsiveness. During this stage, consultants guide consultees in refining case conceptualization, strengthening clinical decision-making and applying EMDR procedures with confidence, flexibility and clinical integrity. The chart below describes the consultant and consultee responsibilities before, during and after certification consultation to ensure consistency, accountability and alignment with EMDRIA™ standards.

Consultation Phase	Consultant Responsibilities	Consultee Responsibilities
Before Consultation Begins	• Confirm that the consultee can provide you with a copy of their EMDRIA™ Approved EMDR Basic Training final completion certificate. • Review EMDRIA's™ certification requirements. • Confirm that the hours are for the certification consultation requirement. • Establish consultation goals, structure, documentation procedures and expectations for case presentation and feedback in a written agreement/contract. • Clarify ethical guidelines, boundaries and confidentiality in the consultation process.	• Confirm that the consultant is a current EMDRIA Approved Consultant™ or EMDRIA Approved Consultant in Training™. • Review EMDRIA's™ certification requirements. • Identify personal learning goals for the consultation process. • Provide copy of your EMDRIA™ Approved EMDR Basic Training final completion certificate to your consultant. • Commit to active participation, including case presentations, reflection on clinical application and focus and deliberate practice to work toward learning goals.
During Consultation	• Identify areas needing additional development and adjust focus as needed. • Provide clear, direct feedback on the progress of stated goals.	• Seek clarification about expectations for competency and completion. • Provide behavioral samples for feedback.

		• Reflect on feedback and discuss progress of stated goals.
After Consultation Ends	• Follow the process to verify the number of hours and provide a recommendation for certification (if applicable). • Offer formative and summative feedback on professional strengths and areas for continued growth.	• Follow the process to submit documentation of the hours for the EMDRIA Certified Therapist™ application. • Continue ongoing learning through advanced workshops, peer consultation and engagement with the EMDRIA™ community. • Integrate feedback into ongoing EMDR clinical practices.

EMDR Consultant in Training Consultation

Consultation for the consultant in training (CIT) process focuses on developing the advanced skills, professional judgment and reflective capacity needed to guide other EMDR clinicians. In this stage, consultants mentor CITs in the art and structure of consultation—modeling effective feedback, ethical discernment and cultural humility. The chart below describes the consultant and CIT responsibilities before, during and after consultation to ensure clarity, consistency and alignment with the EMDRIA Approved Consultant™ standards.

Consultation Phase	Consultant Responsibilities	Consultee (CIT) Responsibilities
Before Consultation Begins	- Establish a clear consultation plan outlining goals, structure, documentation procedures and evaluation criteria. - Clarify expectations, role boundaries and establish an agreement/contract for consultation of consultation. - Confirm that the CIT meets EMDRIA™ prerequisites to begin the consultant in training process (e.g., current certification credential, completes CIT declaration form).	- Confirm that the consultant is a current EMDRIA Approved Consultant™. - Review EMDRIA's™ consultant requirements. - Complete the Consultant in Training Declaration Form. - Identify personal learning goals and areas for growth as a future consultant.
During Consultation	- Identify areas needing additional development and adjust focus as needed. - Provide clear, direct feedback on the progress of stated goals.	- Seek clarification about expectations for competency and completion. - Provide behavioral samples for feedback. - Reflect on feedback and discuss progress of stated goals.
After Consultation Ends	- Follow the process to verify the number of hours and provide recommendation for the consultant credential (if applicable). - Offer formative and summative feedback on consultant competences using the role of educator, evaluator and motivator. - Provide guidance on next steps in the EMDRIA Approved Consultant™ application process and encourage	- Follow the process to submit documentation of the hours for the EMDRIA Approved Consultant™ application. - Engage in ongoing professional development, including keeping up with relevant literature and research to refine consultation competencies and leadership within the EMDR community.

	continued engagement in the EMDRIA™ community.	
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Developing Contracts

A written contractual agreement for providing consultation is important for setting clear expectations and supports transparency and accountability between the consultant and the consultee.

Below is a comprehensive list of elements that EMDRIA™ recommends be included in a written contractual agreement.

- **Parties Involved:** This includes names and contact information for both the consultant and the consultee.
- **Scope of Services:** This includes a detailed description of the type and manner of consultation (e.g., in-person, virtual, phone, etc.) being provided along with the goals and objectives that are planned.
- **Expectations:** This includes detailed information about what both parties agree to regarding documentation of hours, providing feedback, and the assessment/evaluation framework.
- **Duration and Frequency:** This includes consultation session length (e.g., 60 minutes), frequency of sessions (e.g., weekly, monthly), and the expected duration of the consultation to regularly review consultee progress and address issues that arise.
- **Clinical Case Material Needed for Consultation:** The examples below include clinical material needed for the consultant to provide feedback and recommendations:
 - Video recordings
 - Audio recordings
 - Near verbatim transcripts
 - Direct observations / In vivo
 - Case Presentation Forms / Session Summaries

- o Case Conceptualization / Treatment plans
 - o Verbal summaries
- **Fees and Payment Terms:** This includes the fee for each session. Be sure to specify any difference in fees for individual and group consultation. Information should also include when and how the payment should be made (e.g., at the end of each session, monthly) and accepted payment methods. Be sure to include the cancellation policy (e.g., terms and fees that may apply).
- **Confidentiality and Privacy:** This includes a confidentiality statement, its limits, and a record keeping plan.
- **Informed Consent:** This includes the consent to consultation and the explanation of the consultation process.
- **Rights and Responsibilities:** This includes the consultant's rights as well as the consultee's rights.
- **Termination of Services:** This includes the termination of conditions and the process of referral, if applicable.
- **Dispute Resolution:** This includes how disputes and grievances will be addressed, including any formal complaint processes.
- **Legal Considerations:** This includes governing law along with signature lines for both parties to sign and date.
- **Additional Clauses:** This includes any amendments on how changes to the agreement will be handled and the communication policy (preferred methods and boundaries for communication between sessions).

Documentation and Reports

Maintaining clear documentation and reports at regular intervals is essential to ensure accountability, consistency and effective consultee support and tracking. EMDRIA™ does not need records of these documents, **only the CIT Verification, Evaluation and Recommendation (VER) Form** is needed for the credentialing process. The other forms are suggested for the consultant to keep as a way to document and enhance the consultation process.

- **Initial Conversations – Consultant and Consuee:** [See example document here.](#)
- **EMDR Case Presentation Forms:** [See example document one here.](#) [See example document two here.](#) [See example document three here.](#)
- **EMDR Consultation Presentation Form:** [See example document here.](#)
- **Documentation & Record Retention:** Consultants are expected to track and maintain accurate records for the consultation hours they provide and are expected to retain this documentation for a five-year period from the date the consultation concludes.
- **Timeliness:** Consultants should complete documentation of hours and provide timely feedback to consultees at regular intervals agreed upon in the contract.
- **Accuracy & Objectivity:** Consultants should provide documentation in a factual, professional manner, free from bias.
- **CIT Verification, Evaluation and Recommendation (VER) Form:** It is **required** that the consultant submit the completed online evaluation form to EMDRIA™ when providing a final recommendation for credentialing. The document specifies training hours, rationale and other pertinent information to ensure accountability and that professional standards are met. More information regarding the evaluation process can be found further in this document. [See PDF version here.](#)

Facilitating Consultation Groups

Consultation groups offer a collaborative space for shared learning and reflection. Facilitating these groups requires thoughtful structure and sensitivity to group dynamics.

Key Considerations

Below are the key considerations when managing a consultation group. By addressing these considerations, a consultant can create a productive and supportive consultation group that enhances the skills and knowledge of its participants while maintaining a high standard of professional practice.

- **Understanding and Managing Group Dynamics**

- Group Composition: Ensure the group consists of consultees with similar levels of experience or training to facilitate relevant and constructive discussions. If not, the consultant should be prepared to address a range of experience levels and therapeutic issues presented by group members.
- Group Goals: Set clear goals for the group and regularly assess progress toward these goals.
- Roles and Boundaries: Clearly define behaviors, norms and roles within the group (e.g., consultant, consultees) and establish boundaries to maintain a professional and supportive environment.
- Address Conflicts: Be prepared to manage and resolve conflicts that may arise within the group, ensuring a respectful and supportive environment.
- Foster Inclusivity: Promote inclusivity and respect for diverse perspectives and approaches within the group.

- **Facilitating Effective Communication**

- Structured Sessions: Plan and structure sessions. Ensure there is time for each consultee to contribute and set the expectation that everyone actively participates.
- Active Listening: Encourage active listening and respect for each consultee's perspective, ensuring that each consultee has an opportunity to speak.
- Feedback to Consultee: Allow time to provide constructive feedback to each consultee and encourage consultees to offer feedback to one another in a respectful and supportive manner.
- Feedback from Consultee: Regularly solicit feedback from consultees on the effectiveness of the consultation group and make adjustments as needed. Customization of content and discussions should address the specific needs and goals of the group.

- Follow-up Support: Be available for follow-up questions or additional support outside of group sessions if needed or provide a plan about how to access this follow-up support.
- **Maintaining Confidentiality**
 - Confidential Environment: Emphasize the importance of confidentiality regarding shared cases and personal experiences within the group.
 - Ethical Guidelines: Adhere to ethical guidelines concerning confidentiality and discuss these guidelines at the start of the consultation group.
 - Legal Requirements: Be aware of and comply with any legal requirements regarding consultation and client confidentiality.
- **Focusing of Discussions**
 - EMDR Protocol: Ensure that discussions and case consultations stay centered on EMDR treatment.
 - Current Practices: Stay updated on the latest research, resources, techniques and updates in EMDR therapy to provide relevant and current guidance.
- **Providing Clinical Guidance**
 - Case Discussions: Offer expert guidance on complex cases and therapeutic challenges presented by consultees. Offer relevant resources, such as articles, books or research studies, to support participants' learning and development.
 - Skill Development: Focus on enhancing consultee's EMDR skills and understanding through practical examples, role-playing and case studies.
- **Logistical Considerations**
 - Scheduling and Time Management: Schedule sessions at times that allow for regular attendance and for effective and individualized consultation time.

Format: Decide on the format of the group (e.g., in-person, virtual) and ensure that all logistical aspects (e.g., technology for virtual meetings) are handled smoothly.

Earning Individual Hours Within a Group Setting

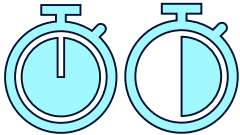
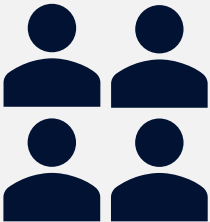
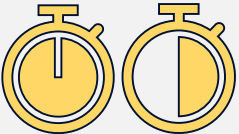
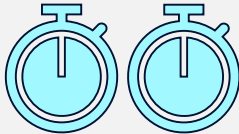
Allowing consultees to receive individual consultation hours within a group setting makes the process more accessible and cost-effective. This model is especially helpful for clinicians working in nonprofit organizations, where funding or organizational resources may be available for group consultation but not for individual sessions. In this format, consultees not only receive personalized feedback on their own cases but also gain valuable insights by observing and learning from their peers' questions and experiences. In this way, group consultation maximizes access, learning and impact while supporting a collaborative professional community. It promotes greater equity by reducing barriers for clinicians who might otherwise have limited opportunities to engage in consultation.

When calculating individual hours within a group consultation, consultants should allocate **a minimum of 30 minutes per individual consultee**. Individual consultation hours can be accrued in a group setting under certain conditions. The following examples are provided to outline the conditions and limitations:

- If there are **2** consultees participating in a group consultation session, the meeting time would be 60 minutes, and each consultee would spend 30 minutes presenting their case for consultation. This means both consultees would receive 30 minutes of individual consultation and 30 minutes of group consultation.
- If there are **3** consultees participating in a group consultation session, the meeting time would be 90 minutes, and each consultee would spend 30 minutes presenting their case for consultation. This means each consultee would receive 30 minutes of individual consultation and 60 minutes of group consultation.
- If there are **4** consultees participating in a group consultation session, the meeting time would be 120 minutes, and each consultee would spend 30 minutes presenting their case for consultation. This means each consultee

would receive 30 minutes of individual consultation and 90 minutes of group consultation.

As outlined in the examples below, the ratio would be 30 minutes of meeting time multiplied by the number of consultees in the group (30 minutes x each consultee = length of group consultation meeting) to calculate the duration of the group consultation meeting. The duration of the group consultation session would depend on the number of consultees participating in the group.

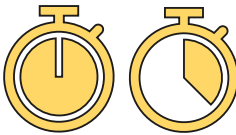
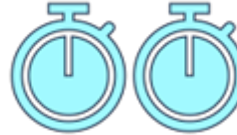
Total Number of Consultees in Group Consultation Session	Maximum Individual Time for Each Consultee	Group Consultation Time	Total Duration of Meeting Time for Entire Group Consultation Session
	 30 minutes	 30 minutes	 60 minutes
	 30 minutes	 60 minutes	 90 minutes
	 30 minutes	 90 minutes	 120 minutes

Earning CIT Hours by Leading a Consultation Session

To support the development of effective consultation skills, EMDRIA™ allows EMDRIA Approved Consultants in Training™ to earn a portion of their required consultation of consultation hours by leading a consultation session while being observed by the CIT's EMDRIA Approved Consultant™. This approach recognizes that both the live observation of the CIT providing consultation and the subsequent debriefing and feedback process are educationally valuable components of consultation of consultation.

When calculating consultation of consultation hours, the CIT can count half of the total time leading a consultation session (observed time) as a portion of their consultation of consultation hours. The CIT's consultant must be present during the consultation session for the observed time to count. The following examples are provided to outline the conditions and limitations:

- If a CIT leads a 60-minute consultation session, a maximum of 30 minutes of the observed time can be counted as consultation of consultation. If the CIT and consultant debrief within the same day, a maximum of 90 minutes can be counted as consultation of consultation. This meets the policy of no more than two hours of consultation of consultation being conducted within a single day.
- If a CIT leads a 90-minute consultation session, a maximum of 45 minutes of the observed time can be counted as consultation of consultation. If the CIT and consultant debrief within the same day, a maximum of 75 minutes can be counted as consultation of consultation. This meets the policy of no more than two hours of consultation of consultation being conducted within a single day.
- If a CIT leads a 120-minute consultation session, a maximum of 60 minutes of the observed time can be counted as consultation of consultation. If the CIT and consultant debrief within the same day, a maximum of 60 minutes can be counted as consultation of consultation. This meets the policy of no more than two hours of consultation of consultation being conducted within a single day.

Consultation Session Run Time Lead by CIT	Maximum <i>Observed Time</i> that can be counted	Maximum <i>Debrief Time</i> that can be counted	<i>Total Consultation of Consultation Hours</i>
60 minute session	 30 minutes	 90 minutes	 120 minutes
90 minute session	 45 minutes	 75 minutes	 120 minutes
120 minute session	 60 minutes	 60 minutes	 120 minutes

Supporting Growth and Development

Ongoing assessment, providing constructive feedback and evaluation are essential components of the EMDR consultation process. Together, they help consultees recognize their strengths, identify areas for growth and monitor progress throughout their development.

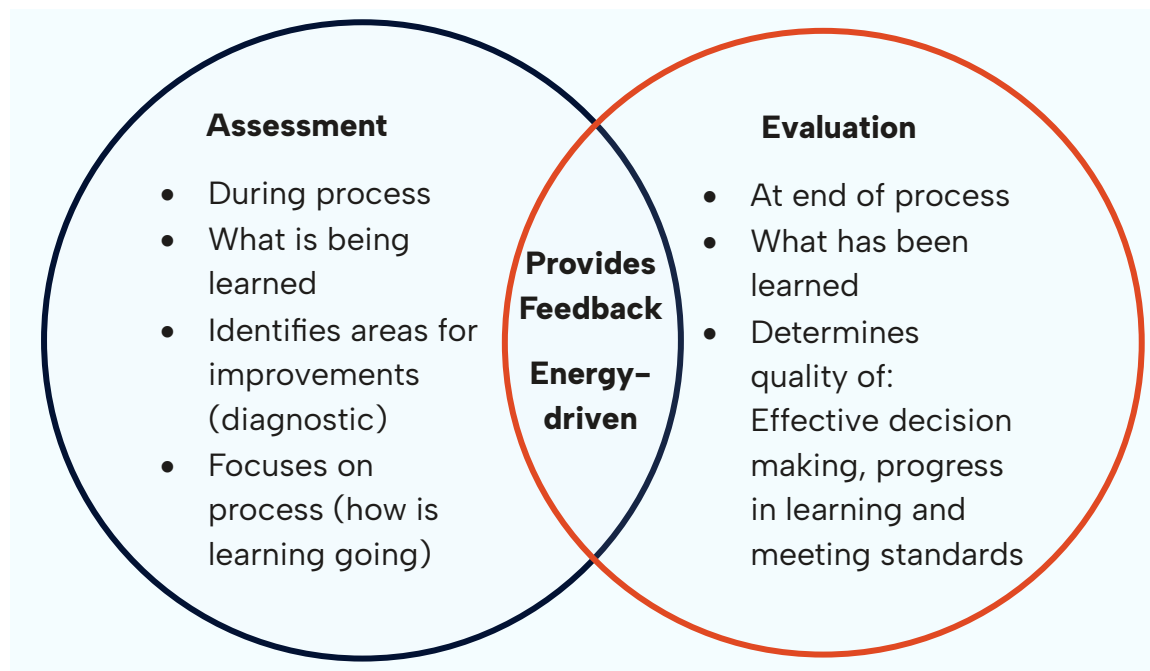
These elements are designed to provide supportive, growth-oriented feedback while fostering trust, openness and positive consultant—consultee relationships that promote professional and personal development.

It is essential to differentiate between **assessment** and **evaluation**, as each serves a distinct purpose in supporting consultees' professional growth.

- **Assessment** is an ongoing, collaborative process focused on identifying a consultee's current skills, strengths and areas for development within the EMDR framework as well as the knowledge, skills and attitudes for quality consultations. It guides learning goals and promotes reflective practice.
- **Evaluation** is a more formal process used to determine whether a consultee has effectively demonstrated specific competencies.

The key differences between assessment and evaluation are related to timing, purpose and focus.

Clarifying these distinctions ensures that consultants balance support and accountability, fostering both skill development and adherence to EMDRIA's™ professional standards.



Ongoing Assessment

Assessment is an ongoing, interactive process used to gather information about a consultee's knowledge, skills and attitudes to support their growth and development throughout the consultation process. Conducted at different times, the focus of assessment is on learning—by identifying each consultee's strengths and areas for improvement.

The flexible nature of both formal and informal assessments promotes self-awareness, reflection and progress toward specific goals. The consultant provides each consultee with feedback to enhance the consultee's quality of knowledge, skills and attitudes over time.

Suggested tools to use for assessing:

- EMDRIA Approved Consultant™ Standards Document
- [Consultant Self-Assessment](#)
- [CIT Verification, Evaluation and Recommendation \(VER\) Form](#)

Providing Feedback with Deliberate Practice

Providing and receiving feedback is a vital component of the consultation process, fostering mutual growth between the consultant and the consultee. Through continuous feedback and reflection, consultants help consultees build self-awareness, refine their competencies and enhance the overall quality of their professional practice.

Feedback that consultants provide incorporates and balances the roles of educator, motivator and evaluator. Thoughtful, compassionate feedback builds confidence and helps consultees develop clinical skills and ethical foundation essential for effective EMDR practice. Effective feedback:

- is developmentally appropriate;
- is based on observable competencies;
- is constructive and supportive;
- includes cultural sensitivities and individual communication styles;
- emphasizes reflection, growth, and open communication;
- involves active listening, open-ended questioning, and consistent follow-up; and
- models empathy and vulnerability throughout the process.

EMDRIA™ has provided a resource with [some suggestions for providing feedback](#) to consultees. There are also a variety of feedback models that can be used to fit the variety of consultees' needs over the course of the consultation process. More information on specific feedback models is provided in EMDRIA's™ resources.

Feedback and deliberate, focused practice work together as an ongoing learning cycle. Feedback identifies specific areas for improvement, while deliberate practice provides the structured, intentional effort to strengthen those areas through repetition, focused attention and reflection. Consultants help consultees translate feedback into clear, achievable goals and design opportunities to practice targeted skills between sessions. Subsequent feedback then refines and reinforces progress, creating a continuous loop of growth. While reading books, attending conferences and learning theories and procedures are important for EMDR therapists, the

practice of EMDR therapy cannot be learned only through these methods. It requires deliberative practice: define goals, focus on specific skills, practice those skills, get and integrate feedback and repeat the process until the goal has been achieved (Brayer, 2023). This integration of feedback and deliberate practice exemplifies EMDRIA's™ commitment to intentional learning and professional excellence in EMDR consultation.

Evaluation and Recommendation

Evaluation is an integral component of the consultation process, providing both structure and accountability for the consultee's professional growth. Consultants are responsible for assessing a consultee's readiness for the next stage of professional development—whether that involves completion of consultation hours of EMDR basic training, certification or progression from consultant in training to EMDRIA Approved Consultant™.

Evaluation should be based on observable competencies, reflective practice and ethical standards rather than subjective impressions. When providing recommendations, consultants are expected to offer clear, constructive feedback that highlights strengths, identifies areas for continued development and supports the consultee's commitment to clinical excellence. This process ensures that recommendations made to EMDRIA™ reflect integrity, fairness and adherence to established professional standards.

EMDRIA™ has created a standardized evaluation form, CIT Verification, Evaluation and Recommendation (VER) Form, to replace the traditional letter of recommendation from the EMDRIA Approved Consultant™ to promote greater consistency, transparency and accountability in the evaluation of CITs. While narrative letters often vary in detail and emphasis, a structured form provides a standardized way to verify hours of consultation and assess competencies across knowledge, skills and attitudes. This form ensures that recommendations are based on observable behaviors and clearly defined criteria based on the standards rather than subjective impressions. In addition, the form facilitates more constructive feedback and developmental guidance for consultees, strengthening the quality of consultation and the integrity of the credentialing process.

The evaluation form can be used in two complementary ways within the consultation process. First, it serves as a developmental tool to guide the deliberate practice of

competencies—helping identify consultation goals, define specific skills to strengthen and structure opportunities for feedback, reflection and growth. Second, it functions as a summative tool to document progress, summarize improvement and evaluate readiness for the EMDRIA Approved Consultant™ credential. While the form may be used multiple times throughout the consultation process to support development, it is required that the consultant submit the completed online CIT VER form to EMDRIA™ when providing a final recommendation for credentialing.

Consultants are expected to approach evaluation with cultural humility and awareness of cross-cultural dynamics, recognizing how cultural background, clinical context and communication styles may influence both the consultee's learning and the consultant's perception. Evaluation should therefore integrate sensitivity to inclusion, diversity, equity and accessibility (IDEA), ensuring fairness, respect and responsiveness in all feedback and recommendations.

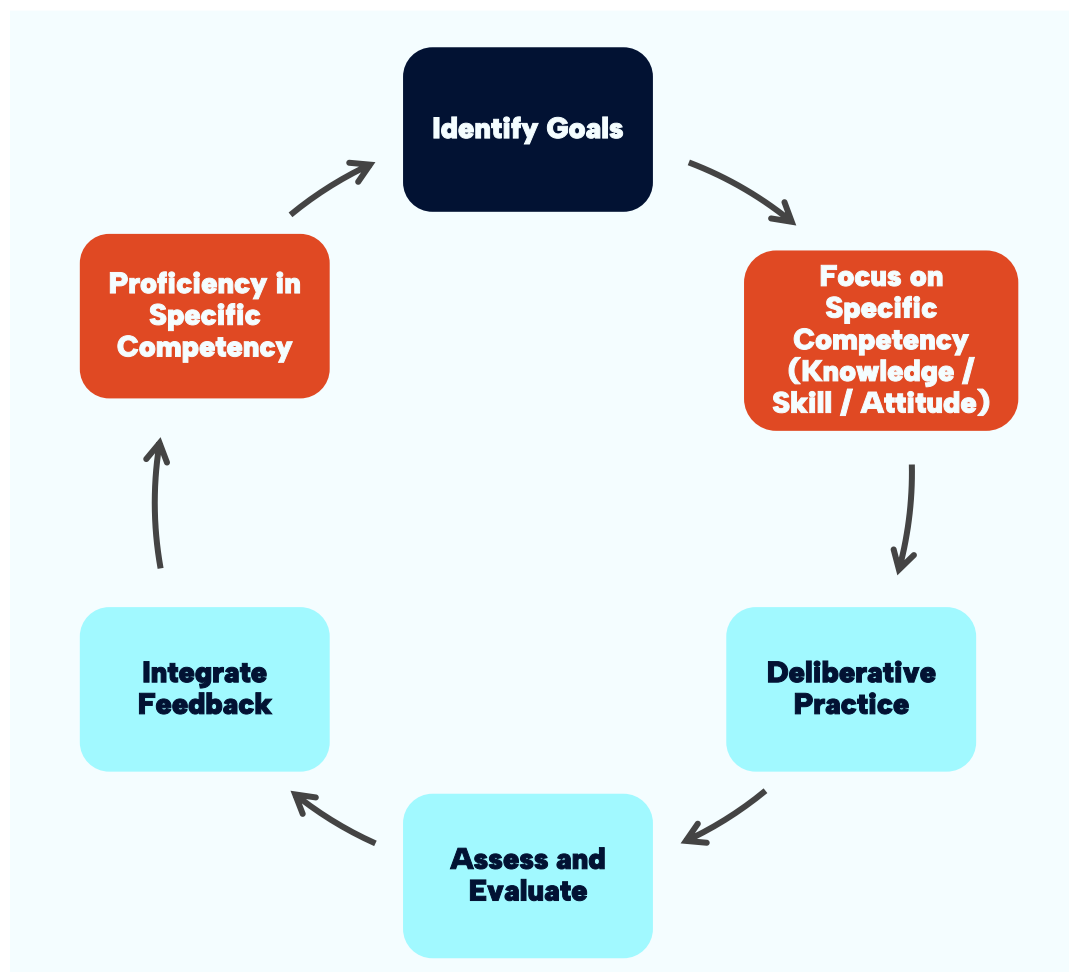
The evaluation form is organized to reflect both the developmental and multifaceted nature of consultation, integrating clinical expertise, teaching ability, reflective practice and ethical awareness within a framework grounded in both therapeutic alliance and cultural and ethical humility.

The competencies are organized into interrelated domains that together define professional knowledge, skills and attitudes leading toward excellence in EMDR consultation (described above in this document).

This framework recognizes that effective consultation extends beyond technical expertise—it involves fostering growth, reflection and confidence in consultees while maintaining a strong ethical and cultural foundation. The evaluation form based on these competencies provides a structured and transparent way to assess a consultant in training's developmental progress to become an EMDRIA Approved Consultant™.

Beyond credentialing, the evaluation form also provides a foundation for creating an action plan for continued professional development. By reflecting on areas of growth and identifying next steps for self-improvement, consultants and consultees alike are encouraged to remain lifelong learners—striving to be better tomorrow than they are today. This commitment to ongoing self-assessment and improvement reflects EMDRIA's core values of excellence, integrity and continuous learning in the service of community healing.

The diagram below illustrates the process flow for supporting consultees' growth through the iterative, evaluative process.



Conclusion

This EMDRIA Approved Consultant™ Standards document establishes the guiding principles, competencies and expectations that define high quality consultation across developmental stages from basic training, certification and consultant in training. Building upon foundational principles of EMDR therapy, these standards integrate current research, adult learning theory and culturally responsive practices to support both the preparation and the continued development of EMDR consultants.

The document emphasizes reflective and deliberate practice, ethical responsibility and trauma-informed relationships that foster safety, professional identity and continuous learning. It further describes the consultant's roles as educator, motivator and evaluator, reinforcing the importance of modeling best practices and promoting the highest standards of care in EMDR therapy.

Consultation is more than a credentialing requirement—it is a collaborative, developmental relationship that supports lifelong learning and advances the quality of EMDR practice across diverse settings and populations. Consultants not only guide learning but also shape the professional culture of EMDR, modeling integrity, clinical excellence and collaborative growth.

The updating of the EMDRIA Approved Consultant™ standards includes four key changes derived from this document:

- **Educational Programming:** Structured training program with courses for current and aspiring consultants.
- **Evaluation Framework:** Tools and resources to assess competence and adherence to the standards.
- **Supported Resources:** Resources to promote the adoption and consistent application of these standards throughout the EMDRIA™ community.
- **Updated Application Requirements:** Revised requirements designed to streamline the process and to better align with these standards.

Together, these changes form a unified framework for the development, implementation and continuous enhancement of EMDR consultation practices. They ensure that consultation remains a reflective, ethical and culturally responsive process—one that upholds EMDRIA's™ mission to sustain professional excellence and foster healing through the continued growth of EMDR practitioners.

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