

## **Contract Agreement for Individual Consultation**

The purpose of this agreement is to establish a clear understanding of the expectations of consultation. There are several different reasons a consultee seeks consultation. Please indicate:

\_\_\_\_\_To complete the 10 hours of consultation to meet EMDR basic training requirements

\_\_\_\_\_To gain knowledge regarding special populations and/or build confidence using EMDR but not EMDRIA credential purposes

\_\_\_\_\_To achieve the EMDRIA Certification credential

\_\_\_\_\_To achieve the EMDRIA Approved Consultant credential

Your reason for entering consultation directs the type of consultation activities. As you develop, you may choose to change the focus of consultation. As soon as you decide to make changes in your focus, please let me know and we will discuss the change in activities or requirements at that time.

The following clarifies expectations, the general structure of consultation, what consultees can expect of me and what is expected of you when seeking to complete 10 hours of consultation for EMDR basic training, or to become EMDRIA Certified in EMDR. I am an EMDRIA Approved Consultant. This means that if you have completed the Basic Training in EMDR and wish to become an EMDRIA Certified Therapist, I am approved to provide consultation toward that end, or consultation-of-consultation to become an EMDRIA Approved Consultant.

## **What the Consulatee can expect of Consultant:**

1. EMDRIA currently requires a minimum of 20 hours of consultation (at least 10 hours must be individual consultation) to apply for EMDRIA Certification. I require work samples of all 8 Phases and 3 Prongs of the standard EMDR therapy and evidence of correcting any concerns prior to writing a recommendation letter for EMDRIA Certification. If you use more than one Approved Consultant in your journey toward EMDRIA Certification, I require a minimum of 5 hours of individual consultation prior to writing a recommendation letter for you to submit for EMDRIA Certification.
2. I encourage you to seek consultation from other consultants if they have a specialty area which fits your needs. Please notify me if additional consultants are utilized for hours towards EMDRIA Certification. The guidance provided to you will be enhanced if you grant both consultants permission to speak to each other.
3. I will document and track our time spent in consultation. I will retain documentation of our consultation together for a five year period from the date our work together concludes. I will write a letter of recommendation or written verification if you have acquired the skills and knowledge base to be Certified and demonstrate this. If the skills and knowledge have not been demonstrated, I can provide written documentation of the time spent in consultation, the skills and knowledge acquired and the areas still needing improvement. We will discuss issues as they arise especially if you are having difficulty.
4. I will keep abreast of current trends and changes happening with EMDR and trauma treatment. I will provide consulatees with new information and accommodate your needs as long as it stays within the scope of my knowledge. I will refer to other consultants if your needs are beyond my scope.

5. We will schedule our individual appointments as schedules permit.  
Suggested frequency is 1-2 hours per month.
6. I will make efforts to provide a safe and supportive learning environment. Any concerns about this, when shared with me, will be addressed with you in private.

**What is expected of Consultee:**

1. You are expected to come prepared to present case material, complete with notes on that case.
2. Do not include any information that will identify the case you are presenting on materials you share with me.
3. You are expected to practice within the ethical guidelines of both your license and professional associations. EMDRIA states that if there is no professional association, then the APA's code of ethics will be the standard for all EMDRIA members. It is your responsibility to stay current on both the laws and ethics applicable to them.

## **For EMDRIA Certification**

- Examples of your clinical work are essential to the consultation process. You will need to come prepared with near verbatim transcripts or (if you prefer) video or audio recordings of your client sessions. You will need to obtain the necessary releases from clients. The verbatim/video/audio must include your words and interventions.
- You will need to demonstrate proficiency and fidelity to the standard EMDR therapy and also an awareness of situations in which modifications to standard EMDR therapy are necessary in order to safely and effectively treat the client. This may include reading and training outside of consultation.

## **For Consultants in Training**

- You are expected to work with at least five different consultees, three of whom have already completed the EMDR basic training.
- Consultation-of-consultation will involve developing your forms and skills as a consultant and reviewing examples of your clinical and consultation work.
- I will expect the following in addition to consultation-of-consultation: shadowing and/or co-facilitating group consultation, offering and forming a consultation group for the duration of your CIT status.

**\* Please note you are responsible for knowing EMDRIA's criteria and requirements regarding applying to become an EMDRIA Approved Therapist or EMDRIA Approved Consultant. All of this information can be found on [www.emdria.org](http://www.emdria.org)**

## **Consultation vs Supervision**

Consultation is not supervision. Consultation focuses on mastery of standard EMDR therapy and integrating EMDR into your practice. You are responsible for the therapeutic relationship with your clients and competency in the modalities you offer. As a consultant, I do not hold liability for how you practice.

If you are seeking consultation toward EMDRIA Certification, I will be evaluating your proficiency and fidelity to the standard EMDR therapy and your awareness of situations in which modifications to standard EMDR therapy are necessary in order to safely and effectively treat the client.

If you are seeking consultation-of-consultation toward becoming an EMDRIA Approved Consultant, I will be evaluating your skills and progress in both knowledge of EMDR therapy terms and protocols, and your abilities as a consultant.

Consultation does not substitute for foundational psychotherapy skills. Should concerns in this area become evident, I may require that these concerns be remedied prior to writing a recommendation.

## **Consultee Information**

Full Name and  
degree: \_\_\_\_\_

License type and number: \_\_\_\_\_

Preferred mailing address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Please provide the dates of your EMDR basic training and trainer's  
name:

\_\_\_\_\_

\*Consultee will provide certificate of completion\*

Name and address of work setting:

\_\_\_\_\_  
\_\_\_\_\_

Approximate number of clients you see per week: \_\_\_\_\_

## **EMDRIA Certification**

\_\_\_\_\_ Signed contract (initial meeting)

\_\_\_\_\_ Case presentation material for discussion (bring to each consultation)

## **EMDRIA Consultant in Training**

\_\_\_\_\_ Signed agreement (initial meeting)

\_\_\_\_\_ Completion of the CIT declaration process (this is done online through the EMDRIA website)

By the third consultation-of-consultation meeting date you should have the following:

\_\_\_\_\_ Your own agreement designed to fit your consultation practice

\_\_\_\_\_ Your own learning objectives or evaluation measure to fit your consultation practice

### **Fees:**

My fee for individual consultation is \$100/hour for certification purposes and \$115/hour for consultant in training purposes. Payment is expected at the time of service. Check or credit cards accepted. Notes/how to be paid: \_\_\_\_\_

I have read and understand and agree to the above conditions and expectations.

**Consultee Signature and Date:** \_\_\_\_\_

**Approved Consultant Signature and Date:** \_\_\_\_\_

