



EuroPsy

EUROPEAN STANDARD AND CERTIFICATE IN PSYCHOLOGY
SET BY THE EUROPEAN FEDERATION OF PSYCHOLOGISTS'
ASSOCIATIONS AISBL (EFPA)

Regulations

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Introduction

Aim of EuroPsy

1. EuroPsy, the European Standard in Psychology set by the European Federation of Psychologists' Associations AISBL (EFPA), aims to set a common standard of competence in all the countries where it is acknowledged.
2. The EuroPsy Certificate and EuroPsy Specialist Certificates can be awarded to individual psychologists who meet the conditions specified in these Regulations.
3. EuroPsy aims to promote the mobility of psychologists and the access of clients to psychological services of high quality across Europe. It presents a benchmark or a set of European standards for Psychology that serve as the basis for evaluating the academic education and professional training of psychologists across the different countries of the EU, and other countries of which the psychology associations are Full Members of EFPA. This document contains the EFPA Regulations for EuroPsy and EuroPsy Specialist.
4. EuroPsy provides the standard required for independent practice. EuroPsy Specialist provides the standard for a specialist or advanced level of competence and expertise in particular fields of practice.
5. During the development of the EuroPsy framework considerable attention was devoted to the variety of educational, occupational and regulatory settings that currently exist in Europe. It has been noted that educational curricula have tended to differ in length as well as in the presence or absence of differentiation or specialisation. In order to devise a system that can fit meaningfully with these different forms of education and training, there is a differentiation in the Regulations between dependent and independent practice, a distinction between a number of fields of practice in which psychologists work, and a distinction between independent practice and advanced or specialist independent practice.
6. The aim of the EuroPsy is to set a standard with regard to dependent and/or independent practice, in a particular field of practice. One field of practice is the most frequent situation since psychologists normally practise in one field. These Regulations however permit a maximum of two fields of practice for psychologists appropriately qualified and competent to practise in two fields. This standard defines minimum requirements, which individual psychologists are likely to exceed. The EuroPsy certificate does not represent a licence to practise and is not intended to supersede or replace national licensing.

Aim of EuroPsy Specialist

7. The first EuroPsy Specialist Standard and Certificate was developed for the field of Work and Organisational Psychology jointly by EFPA and the European Association for Work and Organisational Psychology (EAWOP). This has established a model of collaboration for the development of the Specialist Standards and Certificates.
8. The aim of EuroPsy Specialist is to specify requirements for advanced or specialist independent practice in a particular field. In some countries specialist or advanced qualifications are required before psychologists may undertake particular aspects of professional work.
9. The EuroPsy Specialist Certificates can be awarded to individual psychologists who meet the conditions specified in these Regulations

Guiding principles

10. A number of guiding principles underpin EuroPsy, which aims to:
- a) Set a common education, training and competence standard for psychologists in all the countries across Europe.
 - b) Promote the availability of psychological services from a competent and qualified professional across Europe for every citizen and any institution.
 - c) Protect consumers and citizens in Europe through the assurance of quality and against unqualified providers of services.
 - d) Contribute to mechanisms to promote the mobility of properly qualified psychologists to practise anywhere in Europe.
 - e) Ensure that the EuroPsy and EuroPsy Specialist Certificates are awarded on the basis of:
 - i. demonstrated completion of an academic curriculum in psychology of sufficient scope;
 - ii. demonstrated competence in the performance of professional roles during supervised practice;
 - iii. commitment to national ethical standards for psychologists consistent with the EFPA Meta Code of Ethics.
 - f) Ensure that the EuroPsy system is fair and avoids favouring or disfavouring psychologists on the basis of national or other differences in educational or professional background, and that it recognises high service quality as a prevailing principle. This implies that the EuroPsy will not pose specific requirements concerning the structure or format of the academic education, or the nature and organisation of the internship for professional practice.
 - g) Certify the qualification for psychological practice for independent practice of the profession as well as advanced or specialist practice.
 - h) Endorse a commitment to the active maintenance of competence, that is Continuing Professional Development (CPD). For this reason, the EuroPsy and EuroPsy Specialist Certificates are awarded for a limited time period, and shall be renewed, again for a limited period of time, on the basis of evidence of continuing professional practice and professional development.

The Articles

11. Within these EFPA Regulations on EuroPsy the following definitions of terms are used:

The *EuroPsy*, is a set of standards for the education and training of psychologists which defines a level of quality and standard agreed by EFPA Full Members.

EuroPsy Specialist provides the standard for a specialist or advanced level of competence and expertise in particular fields of practice.

A *Registered EuroPsy Psychologist* refers to the holder of the EuroPsy Certificate.

A *Registered EuroPsy Specialist Psychologist* refers to the holder of a EuroPsy Specialist Certificate.

A *Psychologist* shall be understood as a person who has graduated in psychology from a university or equivalent institute of higher education, having undertaken a course in psychology recognised by their association, and who has fulfilled the criteria for professional status prescribed by that association. In

countries where there is legal recognition of psychologists, psychologists are those who are entitled, by law or through registration, to call themselves psychologists and to practise professionally as such. For the purposes of the EuroPsy this is provided that the curriculum has a standard duration equivalent to at least five years (300 ECTS) of full-time study, and meets the specification set out in these Regulations.

The *European Register of Psychologists*, hereafter called the Register, is a register which provides a record of each Registered EuroPsy Psychologist or Registered EuroPsy Specialist Psychologist.

Professional functions (Functional Competences) refer to the categories of professional activities making up the psychological services delivered within a field of practice, as set out in these Regulations.

Field of practice refers to a particular category of work setting in which psychological services are provided vis-à-vis a particular category of client. Fields of practice are to be understood in a broad sense.

Scientific knowledge refers to the knowledge accumulated in the scientific literature of the discipline of psychology and shared in the community of researchers and teachers of psychology.

Professional competence refers to the ability to adequately fulfil a professional role as defined in these Regulations.

Independent practice as a psychologist refers to the fulfilment of professional roles vis-à-vis clients without the requirement for direct supervision by other psychologists.

Dependent practice as a psychologist refers to the fulfilment of professional roles vis-à-vis clients under the responsibility and authority of another psychologist who is qualified for independent practice in the particular field of practice.

Supervised Practice refers to the fulfilment of professional roles vis-à-vis clients by a (Specialist) Psychologist-in-Training with the direct supervision by a qualified psychologist as specified in these Regulations, either as part of the university curriculum or outside of a university.

A *(Specialist) Psychologist-in-Training* is a person who, under the responsibility of a qualified psychologist, is in the process of completing their supervised practice.

A *Supervisor* is a qualified psychologist who meets the requirements of these Regulations and who is responsible for the acquisition and assessment of professional competence by a (Specialist) Psychologist-in-Training.

The references to *Full Member* are to the organisations or federations (or networks) of associations of psychologists that are members of EFPA in accordance with its Statutes.

The references to *Associate Member* are to the organisations which exists to promote a particular domain of psychology or support a particular group of Psychologists that are members of EFPA in accordance with its Statutes.

The references to *Board of Directors* are to the body that administers EFPA as set out in the Statutes of EFPA.

The *Country of Residence* is the country where the psychologist or Registered EuroPsy Psychologist is registered as resident.

A *Country of Practice* is a country where the psychologist or Registered EuroPsy Psychologist is practising or intends to practise.

ECTS refers to European Credit Transfer System units. One (1) ECTS is assumed to be equivalent to twenty-five (25) hours of active study (i.e. 'study load') by the student and one year is assumed to be sixty (60) ECTS units.

12. These Regulations apply in all countries where the Full Member of EFPA has accepted the EuroPsy and these Regulations.

Section A. EuroPsy

Article 1 EuroPsy comprises a set of standards of academic education and professional training for professional psychologists as described in Appendix I. EuroPsy Specialist comprises a set of standards of education and training for professional psychologists at the specialist level as described in Appendix II.

Article 2 The Standards for the EuroPsy and EuroPsy Specialist and requirements for Certificates are laid down in the Appendices which describe:

- a) The minimum volume of study, expressed in study hours or units of the European Credit Transfer System (ECTS), and the content to be covered.
- b) The competences to be demonstrated by the end of period of supervised practice.
- c) The minimum volume of supervised practice expressed in years, and the minimum volume of supervision expressed in hours.
- d) The requirements with regard to continuing professional development.
- e) The way in which the evidence of further study, practice, supervision and competences is evaluated.

Article 3

- a) Individual psychologists are eligible to be listed in the European Register of EuroPsy Psychologists (henceforth the Register) and to hold the EuroPsy Certificate if they:
 - i. have successfully completed a nationally accredited academic curriculum in psychology at a university or an equivalent institution that by law or custom leads to a national title or qualification of "psychologist", provided the curriculum has a standard duration equivalent to at least five years of full-time study (300 ECTS) and fits the framework as described in these Regulations;
 - ii. demonstrate the minimum volume of supervised practice and supervision as described in these Regulations;
 - iii. demonstrate the relevant competences defined in these Regulations applied to professional work in that field of practice at the level of satisfactory performance of this work as evaluated by their Supervisors; and
 - iv. have committed in writing to their National EuroPsy Committee that they subscribe to the principles of professional conduct set out in the national code of ethics and will conduct professional activities in accordance with the code of ethics of the national association of psychology in the country of practice. The EuroPsy and EuroPsy Specialist Certificates can only be issued to an individual whose professional conduct can be adjudicated on by the national association or another regulatory body for psychologists in that country.
- b) Individual psychologists are eligible to be listed in the Register and to hold a EuroPsy Specialist Certificate if in addition to meeting the requirements for a EuroPsy Certificate they:
 - i. hold or obtain simultaneously the EuroPsy Certificate;
 - ii. meet the relevant specialist requirements for the minimum volume and content of further study as described in these Regulations;
 - iii. demonstrate the relevant specialist competences defined in these Regulations applied to professional work at the specialised level as evaluated by their Supervisors;
 - iv. demonstrate the minimum volume of supervised practice and supervision in the specialism as described in these Regulations;

- v. satisfy the requirements on continuing professional development as described in these Regulations.

Article 4 Following positive evaluation of the evidence mentioned in Article 3, an individual may be entered in the Register and awarded the EuroPsy and/or a EuroPsy Specialist Certificate.

Article 5 The EuroPsy Certificate and a EuroPsy Specialist Certificate loses its validity after a period of seven (7) years, unless it is revalidated.

Article 6 For purposes of revalidation, the EuroPsy and EuroPsy Specialist Certificates can be re-issued to all psychologists who:

- a) Affirm and are able to show evidence on demand of maintenance of professional competence in the form of a specified number of hours of practice as a psychologist and continued education and professional development as indicated in these Regulations;
- b) Have committed in writing to their National EuroPsy Committee that they subscribe to the principles of professional conduct set out in the national code of ethics and will conduct professional activities in accordance with the code of ethics of the national association of psychology in the country of practice.

Article 7 The EuroPsy Certificate and EuroPsy Specialist Certificates must be identical in content, format and appearance to the model issued by EFPA as a template to the National EuroPsy Committees.

Article 8 The information required in the application form for the EuroPsy Certificate or EuroPsy Specialist Certificates shall be sufficient to comply with the requirements set out in Section C below and must be collected as specified in the template issued by EFPA to the National EuroPsy Committees.

Article 9 The information to be included in the European Register of Psychologists shall be sufficient to record the award of the certificate.

Article 10 The Registered EuroPsy Psychologist is considered qualified for independent practice as a psychologist, within the field(s) of practice mentioned in the registration details, in as far as there are no restrictions from national regulations in the country concerned. One field of practice is the most frequent situation since psychologists normally practise in one field. These Regulations however permit a maximum of two fields of practice for psychologists appropriately qualified and competent to practise in two fields.

Article 11 The Registered EuroPsy Psychologist qualified for independent practice in one field of practice is also considered qualified for Supervised Practice as a psychologist within a second field of practice, in as far the psychologist can demonstrate sufficient knowledge and skills for supervised practice in that field and there are no restrictions from national regulations in the country concerned.

Article 12 The record of a psychologist will be:

- a) Removed from the Register in the following cases:
 - i. upon expiry of the EuroPsy;
 - ii. upon the request of the holder;
 - iii. when a court of law, a regulatory body or a national committee has imposed a sentence or measure against the holder that deems the holder unfit to practice as a psychologist and/or prohibits them from exercising the profession of psychologist, such as removal from a national register or withdrawal of a national license;

- iv. if, on receipt of a complaint, the EuroPsy holder does not agree to submit to an adjudication process of that complaint by the national association or other regulatory body for psychologists in that country;
- v. when the licence of the National EuroPsy Committee that awarded the EuroPsy has been removed;
- b) Also removed from the Register when a court of law, a regulatory body or a national committee has imposed a sentence or measure that suspends the holder's right to exercise the profession of psychologist. or makes a suspension on grounds of unfitness to practice as a psychologist. The record will be restored when the suspension in the respective country ends. Such temporary suspension does not extend the period of validity of the original certificate.

Article 13 The authority to award the EuroPsy and EuroPsy Specialist Certificates and entering an individual into the Register according to these Regulations is awarded under licence by EFPA to National EuroPsy Committees.

Section B. EuroPsy Committees

Article 14

- a) The EuroPsy Committees are established, dissolved, and act under the responsibility of the Board of Directors as set out in EFPA's Statutes.
- b) The European EuroPsy Committee consists of a Chair, and up to twelve (12) other committee members. They are appointed by the Board of Directors. They shall each be from a different country within EFPA and represent a range of the main fields of practice of psychology and specialisations in those fields, the balance to be determined by the EFPA Board of Directors when making appointments. They should provide a balance between those working as practitioners and those working at universities and involved in the education of psychologists. Any Ad Hoc Working Group set up by the Board of directors to develop a new field of practice or a new specialisation will have one representative that will act as liaison to the European EuroPsy Committee that may participate in its meetings upon invitation by the European EuroPsy Committee Chair. This representative will be appointed by the Board of Directors.
- c) Candidates are nominated by the Full Members. Committee members are appointed for a term of up to four (4) years, once renewable, by the Board of Directors. Where a committee member wishes to renew their term of office for a second term, a renomination must be submitted by the Full Member and the reappointment is made on the decision of the Board of Directors.

Article 15 The European EuroPsy Committee is responsible for oversight of the EuroPsy and EuroPsy Specialist and its Regulations and for ensuring that the National EuroPsy Committees award the EuroPsy and EuroPsy Specialist Certificates in accordance with these Regulations.

Its tasks include the following:

- a) To review the EuroPsy Regulations and propose changes to develop, adjust, harmonise, implement and promote EuroPsy and EuroPsy Specialist Standards in the context of European regulatory developments for professions;
- b) To approve a named 'Other' field of practice;
- c) To receive and evaluate applications from Full Members to establish National EuroPsy Committees;

- d) Upon the agreement of the Board of Directors to award the authority under licence to the National EuroPsy Committees to issue the EuroPsy and EuroPsy Specialist Certificates;
- e) To set out requirements and provide guidance for the National EuroPsy Committees;
- f) To ensure that the National EuroPsy Committees are interpreting the EuroPsy and EuroPsy Specialist Standards in a similar way and to co-ordinate at the European level the work of the National EuroPsy Committees;
- g) To monitor and support the proper implementation of these Regulations by each National EuroPsy Committee;
- h) To take steps towards the suspension of, and as necessary upon the agreement of the Board of Directors to suspend, a National EuroPsy Committee in accordance with the provisions of these Regulations;
- i) To work with Full Members to remedy the causes of a suspension of a National EuroPsy Committee;
- j) To maintain contact, and (for in person meetings having obtained the agreement of the Executive Director) arrange meeting(s), with the National EuroPsy Committees;
- k) To engage with an appropriate Associate Member of EFPA that may appoint its liaison person to collaborate with the European EuroPsy Committee on matters relevant to their Field of Practice and Specialism and to collaborate to establish goals and tasks to foster the further development of the Specialist Standard and Certificate;
- l) To carry out tasks delegated by, and report to, the Board of Directors as laid down in the Statutes;
- m) To prepare updates and reports for EFPA's Council and the General Assembly upon request of the Board of Directors.

Article 16

- a) A National EuroPsy Committee will be appointed by the Full Member. The Full Member may also put in place such additional operational committees, resources or processes that it requires in order to fulfil the responsibilities of the National EuroPsy Committee.
- b) The National EuroPsy Committee consists of a Chair and up to twelve (12) other committee members. The members of the National EuroPsy Committee will represent a range of the main fields of practice of psychology and specialisations in those fields in that country, the balance to be determined by the Full Member when making appointments. They should provide a balance between those working as practitioners and those working at universities and involved in the education of psychologists.
- c) The members of the National EuroPsy Committee are appointed by the Full Member to serve in accordance with the terms of office set by the Full Member.

Article 17 The responsibilities of a National EuroPsy Committee may be focused on Standards only or include the award of the EuroPsy Certificate and EuroPsy Specialist Certificates. As applicable to their focus, their responsibilities will include the following:

- a) To act as consultation body to the Full Member for:
 - i. developing, adjusting, harmonising Full Member or national education and training standards according to EuroPsy and EuroPsy Specialist Standards, and

- ii. implementing and promoting EuroPsy and EuroPsy Specialist Standards and Certificates within their country;
- b) To award the EuroPsy Certificate and EuroPsy Specialist Certificates within their country;
- c) To submit its procedures for issuing the EuroPsy and EuroPsy Specialist Certificates for approval to the European EuroPsy Committee;
- d) To stipulate the manner in which an applicant has to submit evidence of professional competencies so as to satisfy the requirements of these Regulations;
- e) To prepare and publish a list of currently approved curricula for academic education in psychology, including the level of degree;
- f) To advise Higher Education Institutions of conditions for approval;
- g) To issue guidelines for the assessment of competences by Supervisors;
- h) To prepare a form on professional ethics to be signed by applicants;
- i) As directed by the Full Member to determine the fee, if any, for administrative costs to be paid to the Full Member by applicants;
- j) To nominate a contact person who will be authorised to access the Register;
- k) To take a decision on each individual application for the EuroPsy and EuroPsy Specialist Certificates, either informing the applicant of the reasons why the application failed or awarding the Certificate;
- l) To issue the EuroPsy and EuroPsy Specialist Certificate(s) to individual psychologists;
- m) To keep a record of psychologists awarded the EuroPsy and EuroPsy Specialist Certificates;
- n) To keep an archive of all application materials for a period, to be set by the Full Member, that ensures retention for long enough to have the materials available to defend against any legal challenge and in compliance with relevant data protection legislation in the country;
- o) To prepare an annual report of activities for the European EuroPsy Committee;
- p) To provide relevant information to and participate in EFPA's meetings of the National EuroPsy Committees.

Article 18

- a) A National EuroPsy Committee shall have its licence removed on the advice of the European EuroPsy Committee and upon approval of the Board of Directors where:
 - i. the Full Member that nominated the National EuroPsy Committee has been excluded from membership of EFPA, or
 - ii. the National EuroPsy Committee, in the opinion of the European EuroPsy Committee, does not work in accordance with these Regulations. In such a case the National EuroPsy Committee will have one (1) month from the date of written notification of the concerns by the European EuroPsy Committee to remedy the deficiencies. At the absolute discretion of the European EuroPsy Committee additional time may be given to remedy the deficiencies. In the case of removal, the European EuroPsy Committee will give reasons for its decision.

- b) In the case of ii, the National EuroPsy Committee may be reinstated when the failure to observe the Regulations has been remedied. No EuroPsy or EuroPsy Specialist Certificate can be issued by a National EuroPsy Committee when its licence has been removed.
- c) Where the Full Member has been excluded from membership of EFPA, all EuroPsy certificates issued by that National EuroPsy Committee will be rescinded and removed from the Register.
- d) The decision of the Board of Directors to remove the licence for a National EuroPsy Committee is an ultimate decision taken by the body of EFPA which has the ultimate power to take such a decision, and which consequently is not subject to any appeal.

Section C. The Procedure for Obtaining the EuroPsy and EuroPsy Specialist Certificates

Article 19 The validity of a EuroPsy or EuroPsy Specialist Certificate cannot be extended by applying for the same Certificate again, but only by revalidation as described in these Regulations.

Article 20 The application must be made on a form that is identical in content, format and appearance to the model issued by EFPA as a template to the National EuroPsy Committees.

Article 21 The National EuroPsy Committee will establish whether the candidate meets the criteria required by Article 3 and further elaborated in the relevant Appendices to these Regulations.

Article 22 The application will only be processed after the candidate has paid the fee set by the National EuroPsy Committee for processing applications. If the fee is nil, then there is no payment obligation.

Article 23 The National EuroPsy Committee shall examine the evidence submitted and decide whether or not more information is needed from the applicant. The applicant will be informed whether or not the National EuroPsy Committee requires further information within thirteen (13) weeks of the original application and the fee having been received.

Article 24 Where additional information is required, the applicant shall be informed of the National EuroPsy Committee's decision within thirteen (13) weeks of such additional information having been received.

Article 25 Where no additional information is required, the applicant shall be informed of the National EuroPsy Committee's decision on whether to award or not to award the EuroPsy or EuroPsy Specialist Certificate within thirteen (13) weeks of the original application and fee having been received. When the Certificate is not awarded the applicant shall receive an explanation in writing of the reason(s) for this decision.

Article 26 The date of award of the Certificate shall be the date on which the applicant has been entered onto the Register. In the event of a Specialist Certificate being awarded at a date that is later than the award date of the EuroPsy Certificate, the expiry date of the latter shall be automatically extended by the National EuroPsy Committee to match that of the Specialist Certificate.

Article 27 In order to revalidate the EuroPsy Certificate and EuroPsy Specialist Certificate following the end of the period of validity the applicant must submit an application to the National EuroPsy Committee in the actual or intended country of practice.

Article 28 The application for revalidation must affirm and provide evidence on demand of maintenance of professional competence in the form of a specified number of hours of practice as a psychologist and continued education and professional development, in the relevant field(s) of practice, as specified by the National EuroPsy Committee in the actual or intended country of practice. The application must also make a commitment in writing to the principles of professional conduct set

out in the national code of ethics and to conduct professional activities in accordance with the code of ethics of the national association of psychology in the country of practice.

Section D. Appeal Procedures

Article 29 An applicant whose application for the EuroPsy has been rejected by the National EuroPsy Committee can lodge an appeal against this decision with the Full Member within the country concerned, providing the grounds for the appeal.

Article 30 This Full Member will establish a committee independent of the original decision makers, consisting of at least three (3) experts, to examine the appeal. This committee will rule on the appeal and provide a decision and an explanation in writing of the reason(s) for this decision within sixty (60) days. This decision will be communicated to the applicant and the National EuroPsy Committee. The decision of this committee will be an ultimate decision taken by a body which has the ultimate power to do so and that is consequently not subject to any appeal.

Section E. Miscellaneous

Article 31

- a) Transitional arrangements for the EuroPsy Certificate will apply for a period of three (3) years after the date of approval of a National EuroPsy Committee in a particular country and can also be introduced if a new field of practice has been introduced to the Regulations, for that particular field of practice.
- b) Transitional arrangements for any EuroPsy Specialist certificate will apply for a period of three (3) years from the date of approval for awarding the Specialist Certificate in a particular country.
- c) In order to permit the acquisition of a EuroPsy Specialist Certificate, further transitional arrangements for the EuroPsy Certificate will apply for an additional period of two (2) years after the date of approval of awarding of that EuroPsy Specialist Certificate in a particular country. These arrangements exclusively apply to applicants for that EuroPsy Specialist Certificate.
- d) Applicants, who before the date mentioned in Article 31 a), b) or c) have been licensed to practise independently as a psychologist by a national licensing body recognised by the European EuroPsy Committee, and/or meet the requirements and conditions of practice as a psychologist in their country of practice can substitute listing of their supervised practice as a psychologist, with a record of their work history after they were qualified for independent practice as a psychologist. In these cases evidence of at least three (3) years or the equivalent, within the past ten (10) years, of independent practice as a psychologist, and evidence of current competence and continuing professional development is required for the EuroPsy certificate and EuroPsy Specialist to be awarded. In this case the psychologist applying for the EuroPsy or EuroPsy Specialist Certificate under these transitional arrangements may have a further two years beyond the end date of the transitional arrangements to demonstrate the fulfilment of the requirements.

Article 32 These Regulations are established and can be changed, upon proposal of the Board of Directors, by the General Assembly of EFPA, by a vote in support of two thirds (2/3) of those present. They will be operative with effect from a date set by the Board of Directors.

Article 33 The EuroPsy Regulations will be reviewed regularly and at least every two years by the European EuroPsy Committee, which will propose any changes. Changes may also be proposed by the

Board of Directors. Upon the agreement of the Board of Directors the necessary changes will be made in the Regulations. The changes will be brought to the General Assembly for approval. Where the Board of Directors considers it necessary the changes will apply provisionally until the next biennial General Assembly at which matters related to EuroPsy are customarily considered. To apply further they need to be confirmed by the General Assembly.

Appendix I. EuroPsy Standards

I.1. Framework and Minimum Standards for the Education and Training of Psychologists

1.1.1. This appendix indicates the educational requirements for meeting EuroPsy Standards and obtaining the EuroPsy Certificate. Only individuals who can prove that they have followed an academic curriculum that meets the following requirements and have completed the equivalent of one year supervised practice, making a total of at least 6 years (360 ECTS) of standard education and training, may meet EuroPsy Standards and qualify for the EuroPsy Certificate and entry on the Register.

1.1.2. As a basic framework, the requirements are formulated with reference to a curriculum model that makes a distinction between three phases:

1st phase	Academic Bachelor or equivalent
2nd phase	Academic Masters or equivalent
3rd phase	Supervised practice

1.1.3. It is assumed that the 1st and 2nd phase will be part of the academic curriculum in psychology, whereas the 3rd phase may, though does not need to, be included within the university curriculum. In some countries this 3rd phase is imposed by legal regulations or required by psychological societies regulating professional practice. It is further assumed that there will be a range of arrangements made by universities to meet these requirements and that a structure of separate or sequential phases is not essential.

1.1.4. A number of European universities have developed approaches to the education and training of psychologists where integrated blocks of theory-method-application cycles are organised from the start of the programme (e.g., Problem-Based Learning). These types of curriculum models assume that students graduating from such programmes have gained equivalent knowledge, skills and attitudes, and innovative approaches are a welcome feature of professional formation. The Regulations are neutral in relation to the organisation and sequence of the learning programme. to acquire the functional and foundational competences below.

1.1.5. To acquire the functional and foundational competences along the EFPA framework of competences certified by the EuroPsy certificate, 360 ECTS are needed. 300 ECTS can be acquired during a five-year Bachelor and Master or equivalent psychology study programme at university. The other 60 ECTS must be acquired by at least 1.500 hours of supervised practice of psychology in a specified field. This supervised practice can be either integrated in a six-year university study programme (360 ECTS) or done following a standard five-year university (300 ECTS) study programme. This academic education and supervised practice training programme of 360 ECTS is regarded as a basic qualification needed for entering the profession of psychology as an independent practitioner. We stress that independent practice of psychology requires continuous professional development (CPD) specified in these Regulations.

1.1.6. Specialised professional practice in specific areas of psychology require post-qualification training in areas, for which specialist titles may be awarded.

1.1.7. This appendix provides a description of the content and minimum requirements to be covered by the two phases. The third phase Supervised Practice is described further in this document.

Description of curriculum content

The First Phase

1.1.8. The first phase (e.g., an academic Bachelor or an equivalent programme) offers basic education in the major theories and methods in key areas of psychology, as well as basic knowledge in related disciplines. It gives a basic introduction to psychologists' knowledge, skills and attitudes as well as a grounding for research and practice in psychology. It qualifies for further studies in the second phase (e.g., an academic Master programme or an equivalent). However, it does not lead to any occupational qualification in psychology and does not provide the necessary competence for independent practice in psychology.

1.1.9. The curriculum of the first phase is presented in Table 1 below and described in terms of objectives and contents. The objectives are to achieve basic knowledge, skills and attitudes in the basic domains of psychological science along the EFPA framework of competences. To acquire basic skills especially with regard to basic professional competences on-site teaching and learning, allowing face-to-face interaction between teachers and students, are needed and required. The contents are specified in relation to individuals, groups and society/systems.

Table 1. First Phase

Objectives <i>to achieve basic KSA in the following domains</i>	Contents <i>(With respect to individuals, groups and society/systems)</i>
<i>Introduction to psychological science</i>	Overview of: Key areas of psychology History of psychology Basic principles, problems, and methods underlying the science of psychology Ethical codes, research, and professional ethics Collecting information/library & bibliographic skills
<i>Basic courses in key fields of basic and applied psychology</i>	Basic fields: General Psychology (Cognition and Emotion) Psychobiology and Neuropsychology Differential and Personality Psychology Social Psychology Developmental Psychology And at least two of the Applied fields: Clinical and Health Psychology Educational psychology Work and Organisational Psychology Elective options might be offered in further applied fields such as: Community Psychology Environmental Psychology Forensic Psychology Sport Psychology Traffic Psychology Etc.
<i>Basic psychological research methods</i>	Research methods in psychology Training in research methods Quantitative and statistical methods Qualitative methods

	Psychometrics (data and test theory, test and questionnaire construction training, Evaluation theory) Data analysis and interpretation, understanding research literature
<i>Basic professional competences along the EFPA framework of competences</i>	Relating to others Observing Assessing Interviewing and communicating Giving and receiving feedback
<i>Non-psychology theories</i>	Theoretical and practical courses on topics from other disciplines relevant for professional activity. E.g. medicine, law, business economics, philosophy
<i>Basic research competence</i>	RESEARCH PROJECT (THESIS)/ Reading/writing project papers
<i>Basic professional competences along the EFPA framework of competences</i>	Orientation INTERNSHIP/onsite practice training guided by practitioners

The Second Phase

1.1.10. The programme of the second phase prepares the student either for supervised practice within a specified field of practice of psychology or for further postgraduate studies. For supervised practice the student will acquire advanced knowledge, skills and attitudes focusing on applied areas of psychology along the EFPA framework of competences. For postgraduate study the student will acquire advanced knowledge, skills and attitudes focusing on research topics. Whether preparing for research or for a practitioner career, the psychology student has to demonstrate the capacity to acquire skills in research. All psychologists should gain competence in research, both to evaluate their own work and interventions, and to maintain their research competence to evaluate future developments and studies in the field of psychology and related disciplines.

1.1.11. The curriculum of the second phase is presented in Table 2 below and described in terms of objectives and contents. The objectives are to achieve advanced knowledge, skills, and attitudes in specific domains of psychological science along the EFPA framework of competences. To acquire advanced skills especially with regard to advanced intervention methods, on-site teaching and learning, allowing face-to-face interaction between teachers and students, are needed and required. The contents are also specified in relation to individuals, groups, and society/systems.

Table 2. Second Phase

Objectives <i>to achieve KSA in the following domains</i>	Contents <i>(With respect to individuals, groups and society/systems)</i>
<i>Advanced courses in selected basic and applied fields of psychology</i>	Advanced courses in basic fields, e.g.: General Psychology (Cognition and Emotion) Psychobiology and Neuropsychology Differential and Personality Psychology Social Psychology Developmental Psychology
	Advanced courses in applied fields, e.g.: Clinical and Health Psychology Educational Psychology Work and Organisational Psychology Sport Psychology Community Psychology Environmental Psychology Forensic Psychology Traffic Psychology Etc.
<i>Advanced assessment and evaluation methods</i>	Advanced quantitative and or qualitative research design (e.g., survey methods, advanced interviewing, EEG, fMRI, eye-tracking) Advanced multivariate statistics and or qualitative methodologies (e.g. data analyses) Advanced assessment and psychometric theory
	Field specific assessment and evaluation methods (e.g., Work and Organisational Psychology, Educational Psychology, Clinical Psychology, Neuropsychology, Sport Psychology and/or other psychological subdisciplines, such as work analysis, analysis of learning needs, psychopathology assessment, evaluation of intervention outcomes) Skills training in report writing and or expert reports and or diagnostic reports
<i>Advanced interventions methods:</i>	Project based planning and implementing E.g. training in the design of performance rating systems, the design of a training system, the development of a therapeutic plan, psychotherapeutic intervention methods
<i>Ethics</i>	Knowledge of ethical principles and their application Skills training in the application of ethical principles and ethical codes to professional practice
<i>Advanced research Competence</i>	RESEARCH PROJECT (THESIS)
<i>Professional competences along the EFPA framework of competences</i>	INTERNSHIP

Internship in phase I and II

1.1.12. In phase I the aim of the orientation internship/onsite practice training guided by practitioners is to provide primarily a first orientation into fields of professional psychology either in academia or in other settings to make an informed choice for the focus of their further study, for their master or equivalent programme. In phase II the aim of the internship is to provide an informed choice for their focus of study and professional field, and to provide an introductory professional field training to enable students to:

- a) Integrate theoretical and practical knowledge;
- b) Learn procedures related to psychological knowledge;
- c) Start practising under supervision;
- d) Be able to reflect upon and discuss own and other people's activities;
- e) Begin working in a setting with professional colleagues from psychology and other disciplines.

1.1.13. The internship should be part of the five-year university curriculum and can be adjusted along the five years of phase 1 and 2, but the majority of time should be in the second phase. In phase I the duration of the internship/onsite practice training guided by practitioners would normally be at least three weeks (ECTS 4) after at least three terms of study. In phase II the duration of the internship would be at least 3 months (or 15 ECTS) up to maximum 6 months (or 30 ECTS) according to the specific area of interest.

1.1.14. The type of practice during the internship varies and may include:

- a) Observation of actual situations in which psychological techniques are used;
- b) Use of basic techniques under supervision;
- c) Taking part in projects with a specified role;
- d) Analysis and discussion of 'cases'.

1.1.15. The location where internships take place will normally be a public or private institution or 'certified' private firm that:

- a) Provides services that are congruent with the trainee's educational background;
- b) Can guarantee that the majority part of the supervision will be provided by professional psychologists;
- c) Is approved by an accredited university.

1.1.16. Examples of institutions include hospital or clinic settings, private practice, schools and educational institutions, companies, community services, sporting organisations and clubs.

1.1.17. The internship is not considered as part of the supervised practice.

Research in phase I and II

1.1.18. Students should already develop some basic competences in research skills and carry out a small-scale research project in phase I and more advanced competences in phase II. This may be performed within the laboratory at the university or in the field, and may use experimental approaches, or more naturalistic approaches such as quasi-experiments, case studies, interview or questionnaire studies. Students will be introduced to issues concerning the nature and ethics of psychological research, and the basic methods employed by psychologists. This activity is likely to take

the equivalent of 2 - 3 months (i.e. 10-15 ECTS) in phase I and 3 to 6 months in phase II (i.e. 15-30 ECTS).

The Third Phase (the year of supervised practice)

1.1.19. The third phase in the professional education of psychologists consists of one year or at least 1.500 hours (60 ECTS) supervised practice within a particular field of practice of Psychology. In total at least 50 hours of supervision are required.

1.1.20. Supervised practice is a form of professional interactive training carried out in a real work setting with the aim of preparing a Psychologist-in-Training for independent practice as a psychologist in their specified field of practice:

- a) Developing the professional role of a psychologist
- b) Integrating theoretical and practical knowledge within the delivery of safe and appropriate professional services.

1.1.21. Supervised practice within a particular field of practice either starts after a Psychologist-in-Training has finished phase I- and II of a standard five-year Bachelor- and Master- programme or equivalent study or is integrated in a six-year university programme, and presumes that Psychologist-in-Training has acquired successfully the relevant knowledge, skills and attitudes related to that field of practice (e.g., studying Sport Psychology in phase 2 or equivalent competence development is a necessary pre-requisite for attaining readiness for supervised practice in phase 3).

Minimum requirements of the programme of education and training

1.1.22. This section describes the minimum scope and contents required of a psychology curriculum. They are formulated in terms of content categories, as specified below, and a minimum scope in terms of ECTS-units.

Total length of the education and training

1.1.23. The curriculum must have a standard duration of at least 5 years (300 ECTS); this may be divided between 180 ECTS for the 1st phase and 120 ECTS for the 2nd phase (which matches the Bologna "3+2" structure of Bachelors + Masters), though universities and countries will differ in the structure of their education systems. The duration of the 3rd phase (supervised practice) must be at least 1 year (60 ECTS) or its equivalent of 1.500 hours. This leads to a total length of 6 years or 360 ECTS.

Composition of the curriculum

1.1.24. The academic curriculum must cover all curriculum components outlined in Tables 1 and 2. However, there may be differences in emphasis on fields of study and/or types of educational objectives. Table 3 describes the limits within which the composition of the curriculum may vary. They provide a flexible definition of the 'common core' of European psychology in operational terms.

1.1.25. Based on the 3+2 Bachelor and Master model the requirements should be understood as follows (in the case of the 4+1 model adaptations must be made accordingly):

- a) The largest part of the 1st phase should be devoted to theoretical courses and skills training in psychology; however some part should be reserved for psychological methodology and non-psychological theory (e.g. philosophy or sociology) relevant for the study of psychology and the intended field of future practice. It is suggested that the part spent on theoretical courses and skills training, plus orientation and academic skills should be between 125 and 135 ECTS (over 3 years). Within the theoretical courses and skills training the largest part should be

devoted to individual behaviour. The behaviour of people in groups and society/systems should receive a minimal coverage of 20 ECTS each.

- b) Psychological methodology should have a coverage of at least 30 ECTS.
- c) Non-psychological theory may have a coverage of at maximum of 25 ECTS
- d) Within the 2nd phase a minimum of 60 ECTS (1 year) should be spent on advanced courses, seminars, assignments, or other study formats in selected basic and applied areas of psychology and psychological methodology (research methods, assessment, and evaluation). The curriculum should be balanced to ensure that sufficient attention is being paid to psychological theories and interventions with respect to individuals, groups, and society/systems within different contexts/situations and considers a variety of career destinations.
- e) 15-30 ECTS should be devoted to an internship and 15-30 ECTS to a research project or thesis. These two activities should cover a maximum of 60 ECTS (1 year).
- f) At least 60 ECTS (1 year or its equivalent of 1.500 hours) should be spent on supervised practice.

Table 3. Minimum and maximum requirements (in ECTS) for education for independent professional practice in psychology

Phase	Component		Total
1st Phase: ("Bachelor" or equivalent)	Basic theoretical courses and practical exercises	The curriculum should include orientation to psychology, basic knowledge in key areas of basic and applied psychology and areas of professional activity and train both functional and foundational competences	Min 111
	Psychological methodology		Min 30
	Orientation Internship/onsite practice training guided by practitioners		Min 4
	Research project /thesis		Min 10
	Non-psychology theory		Max 25
			Total 180
2 nd Phase: (Masters or equivalent)	Advanced courses, seminars, assignments or other formats in selected basic and applied areas of psychology and psychological methodology.		Min 60
	Internship	Min 15 to max 30	Max 60
	Research project /thesis	Min 15 to max 30	
			Total 120
3 rd Phase	Supervised Practice	Min 60	Total 60
			Total 360

I.2. Competences

Competences of psychologists

1.2.1. The overall purpose of practising as a professional psychologist is to develop and apply psychological principles, knowledge, models and methods in an ethical and scientific way in order to promote the development, well-being and effectiveness of individuals, groups, organisations and society.

1.2.2. This appendix defines, as the EFPA framework of competences, the major competences that professional psychologists should develop and demonstrate before being admitted to independent practice. These competences relate to aspects of the process by which psychologists render services to their clients.

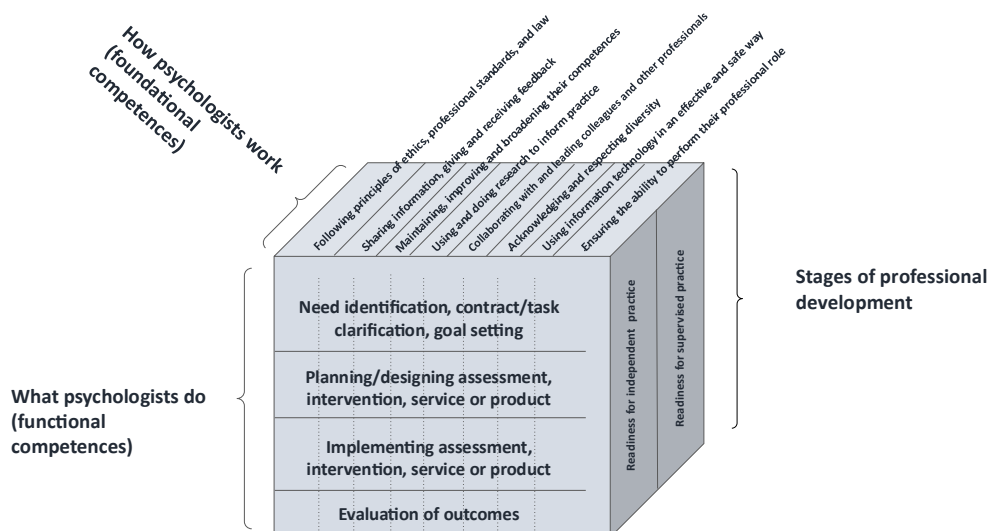
1.2.3. Based on the cube competence model suggested by Rodolfa et al. (2005)¹ two main groups of competences are differentiated (cf. Figure 1):

- a) Functional competences describing main types of scientifically based activities of psychologists (what psychologists do), and required psychological knowledge, skills, and attitudes;
- b) Foundational competences describing main aspects of psychological knowledge, skills and attitudes needed to implement these psychological activities (how psychologists work).

1.2.4. Both functional and foundational competences are essential for rendering services in a professionally acceptable way within the psychologist's selected field(s) of practice. It further differentiates two stages of practice:

- a) Readiness for supervised practice.
- b) Readiness for independent practice.

Figure 1. Adapted cube competence model (cf. Rodolfa et al., 2005)



¹ Rodolfa, E., Bent, R., Eisman, E., Nelson, P., Reh, L., & Ritchie, P. (2005). A cube model for competency development: Implications for psychology educators and regulators. *Professional Psychology: Research and Practice*, 36(4), 347. DOI:10.1037/0735-7028.36.4.347

1.2.5. In the adapted cube model all eight foundational competences are relevant for each functional competence. For example, sharing information, giving and receiving feedback is equally important in

- a) Need identification, contract/task clarification goal setting;
- b) Planning/designing assessment, intervention, service or product;
- c) Implementing assessment, intervention, service or product; and
- d) Evaluation of outcomes.

1.2.6. In the following we describe both competences in detail, with respect to expected learning outcomes, knowledge, skills and attitude related to individuals, groups or organisations, communities or society within different contexts/situations for the stage of professional development “readiness for independent practice”. Readiness for independent practice is acquired by at least 1.500 hours of supervised practice of psychology in a specified field either integrated in a six year university study programme (360 ECTS) or done following a five year university (300 ECTS) study programme.

1.2.7. It builds on the stage of professional development “readiness for supervised practice”. Readiness for supervised practice is achieved by successfully acquiring advanced knowledge, skills and attitudes in the basic and applied domains of psychological science focusing on applied areas of psychology in the second phase (academic Master or an equivalent programme) of a five-year psychology study programme at university.

Functional competences

1.2.8. The functional competences provide a description of the actions psychologists perform based on a problem solving cycle starting from:

- a) Need identification, contract/task clarification goal setting;
- b) Planning/designing assessment, intervention, service or product;
- c) Implementing assessment, intervention, service or product; and
- d) Evaluation of outcomes.

1.2.9. These competences are performed in various fields of practice, occupational contexts and types of clients. Competences are based on knowledge, skills and attitudes applied and practised ethically. The competent practitioner is not only able to demonstrate the necessary knowledge and skills but also attitudes appropriate to the proper practice of their profession. Attitudes are of special importance, since they define the unique nature of the psychological profession.

1.2.10. Functional competences describe the main types of scientifically based activities of psychologists (what psychologists do, including e.g., assessing, consulting, and coordinating, researching, teaching, treating, training). Each functional competence describes psychological knowledge, skills and attitudes related to individuals, groups, organizations, communities, and society within different contexts/situations. For each competence learning outcomes are defined in terms of what psychologists are expected to be able to do after the completion of the three phases of academic education and supervised practice.

1.2.11. The following general attitudes are needed in all functional competences:

- a) Caring – displays kindness and concern for others.
- b) Collaborative – willingness to work with other people in a respectful manner.
- c) Conscientious – accurate with attention to detail.

- d) Reflective - willingness to think critically and hypothesis-oriented—to reflect critically on own actions.
- e) Curious – be interested in the causes of behaviour and events.
- f) Empathic – willingness to understand and share the feelings of others.
- g) Flexible – willingness to adapt a flexible approach and mindset.
- h) High quality mindset – willingness to strive for continuous improvement.
- i) Honest – willingness to accept information and results that are not expected and act with integrity.
- j) Open – be open to new experience, knowledge, research and practice.
- k) Patient – be tolerant towards obstacles without becoming annoyed or anxious.
- l) Responsible – being aware of one's own responsibility.

1.2.12. The following description of functional and foundational competences is intended to apply for all areas of psychology and to encompass important learning outcomes and competences of psychology.

Table 4. Functional competences (describing what psychologists do in each field of practice)

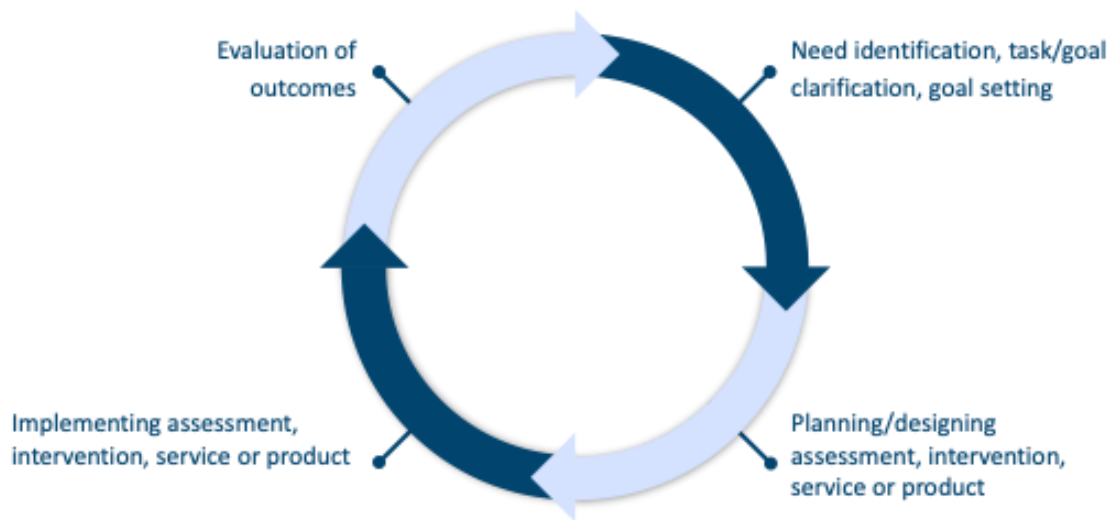
Functional competences (describing the actions psychologists perform)	Learning outcome, competences needed Clients can be individuals, groups or organizations, communities or society within different contexts/situations
A. Need identification, contract/task clarification and goal setting	<p>Learning outcome: The psychologist can:</p> <ul style="list-style-type: none"> i. Identify, assess, and analyse clients' needs and risks. ii. Gather information about the clients' context to inform action. iii. Clarify expectations and contract with clients iv. Set appropriate goals for action. (assessment/intervention/service/product) specifying criteria for evaluation. <p>Competences needed are in particular:</p> <p>Knowledge</p> <ul style="list-style-type: none"> i. Basic principles, problems and methods underlying the science of psychology. ii. Mental health and wellbeing, normotypical and atypical functioning and development, and their preconditions. iii. Psychopathology and/or dysfunctional/maladaptive behaviour (incl. clinical, occupational, educational and other settings, e.g. bullying/mobbing). <p>Skills</p> <ul style="list-style-type: none"> i. Establishing contact with clients in different emotional states ii. Interviewing, listening, and observing skills. iii. Gathering and understanding additional information (from scientific literature, medical/educational/organisational records, stakeholder analysis and other available documents /sources). iv. Arranging, structuring and critically evaluating information, drawing conclusions, formulating the problem until it informs next actions (assessment or intervention). v. Negotiating tasks/goals and required resources with clients and important others. <p>Attitudes</p> <ul style="list-style-type: none"> i. Curious – interest leading to inquiry to understand the causes of client's behaviour and interpretation of events ii. Open – be open to client's needs and goals. iii. Empathic – willingness to understand the client's situation and share client's feelings. iv. Collaborative – display a willingness to work with clients and others in a respectful manner.
B. Planning/designing relevant assessment and intervention or product/service	<p>Learning outcome: The psychologist can plan/design or consider and choose among relevant assessments and interventions or services/products according to the clients' needs and context/situations and the goals agreed upon. <i>(Intervention is defined here in general terms: it may include psychological therapy/coaching, consultation/consulting, teaching/training, psychoeducation, advocacy, empowerment or changing context/system conditions.)</i></p>

	<p>Competences needed are in particular:</p> <p>Knowledge</p> <ul style="list-style-type: none"> i. Psychometrics. ii. Theories of individual/team/organisational behaviour and change/modification/development. iii. Constructs that are measured (by quantitative and qualitative methods) or intervened (e.g., personality, emotions, cognitive functions, actions, team/ organizational processes etc). iv. Specific assessment/intervention methods, their procedures and their attributes/qualities. <p>Skills</p> <ul style="list-style-type: none"> i. Choosing methods and their implementation strategies, taking into consideration the goals of assessment/intervention, clients' (mental) status, their context and individual/group/organisational differences. ii. Analysing the options available and formulating hypotheses about the possible outcomes of the choices and the evaluation criteria for testing these hypotheses. <p>Attitudes</p> <ul style="list-style-type: none"> i. Caring – displays kindness and concern for others, considering a client's emotional state. ii. Responsible – being aware of one's own responsibility. iii. Flexible – displays a flexible approach and mindset. iv. Critical and hypothesis-oriented thinking – display willingness to reflect critically on own actions.
<p>C. Implementing psychological assessments or interventions or services/products</p>	<p>Learning outcome:</p> <p>The psychologist can appropriately carry out psychological assessments and implement interventions or services/products with/for clients in different contexts/situations. This can include pilot studies to test psychological assessments and interventions or services/products.</p> <p><i>(Interventions can include psychological therapy/coaching, consultation/consulting, teaching/training, psychoeducation, advocacy, empowerment or changing context/system conditions.)</i></p> <p>Competences needed are in particular:</p> <p>Knowledge</p> <ul style="list-style-type: none"> i. Procedures of specific assessment/intervention methods or services. ii. Possible difficulties and problems that may come from method/service itself, clients' specificity etc., and the ways of overcoming these difficulties. <p>Skills</p> <ul style="list-style-type: none"> i. Can implement specific assessment/intervention methods under different conditions and with different clients. ii. Can recognise, articulate and manage/accommodate unexpected/possible (side)effects (consequences, impact) during the assessment/intervention without losing sight of the agreed goal. iii. Can test the a priori formulated hypotheses for evidenced based decisions. <p>Attitudes</p> <ul style="list-style-type: none"> i. Conscientious – accurate with attention to details of situations, interpretations, and feelings of clients.

	<ul style="list-style-type: none"> ii. Empathic – willingness to understand and share the feelings of clients and others and one's own reactions, and reflect their consequences with respect to the applied assessment and intervention. iii. Flexible – willingness to adapt one's assessment and intervention approach. iv. Open – be open to new experience, assessment and intervention knowledge, research, and practice. v. Patient – demonstrates tolerance of delay, problems or suffering caused by assessments and interventions without becoming annoyed or anxious.
D. Evaluation	<p>Learning outcome: The psychologist can evaluate process characteristics, and outcomes, outputs, and impact of psychological assessments and/or interventions or services/products and to revise the procedures if necessary during the implementation process (formative evaluation) and at the end (summative evaluation). If needed, it may mean going back to section 1 (need analysis and goal setting) and start the process again.</p> <p><i>(Outcome measures may include reliability, validity, usefulness, impact, gain, effectiveness etc. depending on the context and goals of the evaluation)</i></p> <p>Competences needed are in particular:</p> <p>Knowledge</p> <ul style="list-style-type: none"> i. Psychometrics. ii. Quantitative and qualitative research methods to gather, analyse and interpret data. <p>Skills</p> <ul style="list-style-type: none"> i. Develop and apply appropriate evaluation designs. ii. Gathering, analysing, and interpreting evaluation data with respect to quality and ethical criteria and evaluation goals, considering cultural competences. iii. Detecting/scrutinising noteworthy details, critically reflecting and adapting assessment/evaluation accordingly to ensure quality. <p>Attitudes</p> <ul style="list-style-type: none"> i. Honest – willingness to accept evaluation results that are not expected and act with integrity. ii. Flexible – willingness to probe different interpretations of evaluation outcomes and own biases. iii. High quality mindset – strives for continuous improvement of one's problem-solving approach.

1.2.13. Each functional competence can be seen as part of a problem-solving cycle starting with need identification, task/goal clarification and goal setting, followed by planning/designing assessment, intervention, service or product, followed by implanting assessments, interventions, service or products, followed by evaluation of outcomes and restarting the cycle if needed (see Figure 2).

Figure 2. Functional competences as a problem-solving cycle



Foundational competences

1.2.14. The foundational competences describe main aspects of psychological knowledge, skills and attitudes needed to implement the four functional competences and focus on how psychologists work. Psychologists are required to provide evidence of the following foundational competences for independent practice:

- a) Competences related to ethics, professional standards and law.
- b) Communication and relational competences.
- c) Continuing Professional Development – CPD competences.
- d) Science and research competences.
- e) Collaboration competences.
- f) Individual and cultural differences competences.
- g) Digital/Information and communication technology competences.
- h) Self-reflection, and self-care competences.

Table 5. Foundational competences (describing how psychologists work in any field of practice)

Foundational competences (describing how psychologists work)	Learning outcome, competences needed Clients can be individuals, groups or organizations, communities or society within different contexts/situations - this definition applies for all competences
<p>1. Competences related to ethics, professional standards and law-</p>	<p>Learning outcome: The psychologist can</p> <ul style="list-style-type: none"> i. Apply relevant ethical principles and adheres to relevant laws, codes and rules in one's practice and conduct. ii. Recognise, record and solve ethical dilemmas and deviation of professional standards in one's professional practice and research using an appropriate decision making and quality management approach. iii. Recognise the relevance and importance of ethical codes and professional standards as a basis of professional conduct, research and practice. iv. Give support/advice/consultation for colleagues on matters of ethics. <p>Competences needed are in particular:</p> <p>Knowledge</p> <ul style="list-style-type: none"> i. EFPA ethical meta-code, relevant international conventions, international and national laws and professional standards pertaining to one's professional practice and research. ii. Relevant laws and regulations in one's professional practice and research. <p>Skills</p> <ul style="list-style-type: none"> i. Applies relevant ethical codes and professional standards into one's professional practice, research and conduct ii. Recognises, record and solve ethical dilemmas and deviation of professional standards in one's professional practice and research using an appropriate decision making and quality management approach. iii. Consults with colleagues/supervisors and seeks for additional viewpoints from relevant literature. <p>Attitudes</p> <ul style="list-style-type: none"> i. Responsible – acts in a responsible manner and in line with relevant ethical, conduct and legal frameworks. ii. Respectful – demonstrates respect when engaging with clients and others. iii. Honest – acts with integrity and honesty. iv. Conscientious – demonstrates attention to detail and a thorough approach. v. Reflective – willingness to think and reflect critically and hypothesis-oriented, and apply reasoning in decision making processes.
<p>2. Communication and relational competences</p>	<p>Learning outcome: The psychologist can:</p> <ul style="list-style-type: none"> i. Establish a working alliance. ii. Take others' perspective and acknowledge others experience, etc. iii. Express their thoughts, professional contributions and share information with clients, other professionals and public. iv. Manage professional and personal boundaries appropriately.

	<p>Competences needed are in particular:</p> <p>Knowledge</p> <ul style="list-style-type: none"> i. Communication theory/models. ii. Theories on social relations/interactions. <p>Skills</p> <ul style="list-style-type: none"> i. Interpersonal skills (e.g. verbal fluency, emotional and affective expression, persuasiveness, warmth/positive regard, hopefulness, empathy, alliance bond capacity, and alliance-rupture-repair responsiveness; perspective taking; consistency). ii. Obtain informed consent, sharing information, professional contributions with clients and important others taking into account the status/condition of the client and important others (e.g. parents). iii. Negotiate the needs, goals, process, and results of assessment/intervention and resolving conflicts with clients and important others. iv. Give and receive constructive feedback, writing structured reports and presenting oral reports adequate for different audiences. v. Share information and check understanding using clear language and appropriate, written materials, making reasonable adjustments where appropriate to optimise people's understanding. vi. Present and clarify the relevance of the psychologist's professional contributions. <p>Attitudes</p> <ul style="list-style-type: none"> i. Open – applies an open minded and enquiring client specific approach to communication and relationship building. ii. Honest - when obtaining informed consent, developing contract, reporting the findings. iii. Positive – supportive and positive in approach in communication and feedback. iv. Respectful – accepts others as equal in professional interactions.
<p>3. Continuing Professional Development – CPD competences</p>	<p>Learning outcome:</p> <p>Psychologists have the responsibility of developing their professional qualities and maintaining, improving, and broadening their knowledge, expertise and multi-faceted competences. This requires that they are able to use the functional competences to develop their own professional competences in a career long process: analysis of training needs, goal setting, planning the training, implementing the training, evaluating the training.</p> <p>The psychologist can:</p> <ul style="list-style-type: none"> i. Maintain professional competences. ii. Overcome gaps in knowledge and skills. iii. Respond to the challenges of the rapidly growing knowledge base and technological developments by upskilling. iv. Change practice requirements when needed. v. Commit to continuous lifelong learning. vi. Engage in supervision. vii. Share and learn from collaboration with other psychologists and professionals.

	<p>Competences needed are in particular:</p> <p>Knowledge</p> <ul style="list-style-type: none"> i. Recent/novel evidence-based research, methodological and theoretical psychological perspectives in specific fields of practice. ii. Multicultural perspectives of psychology and diversity. iii. Interprofessional collaborative practices. iv. Professionalism/Ethics. <p>Skills</p> <ul style="list-style-type: none"> i. Updating knowledge in line with current evidence bases. ii. Identifying needs and areas for development. iii. Exploring knowledge. iv. Examining and analysing information from a range of sources and different mediums. v. Questioning and using critical thinking. vi. Self-actualising, self-reflecting and learning. <p>Attitudes</p> <ul style="list-style-type: none"> i. Open – be open to challenge, change and development. ii. Curious – interest leading to inquiry, be interested in the causes of behaviour and events. iii. Collaborative – display a willingness to work with others in a respectful manner, to share knowledge and experiences. iv. Goal oriented – set goals and evaluate progress on a regular basis. v. Innovative – explore new ways of working. vi. Proactive – identify professional development activities.
<p>4. Science and research competences</p>	<p>Learning outcome: Psychological practice requires a constant critical reflection that is informed by knowledge, practice and research and the ability to use and do research to inform practice and understand of the process of research.</p> <p>The psychologist can:</p> <ul style="list-style-type: none"> i. Engage in evidence-based decision making, critical reasoning, and integrating best available scientific and contextual expertise into practice. ii. Use informed and scientifically established assessment, intervention, supervision and consultation tools and strategies. iii. Informs oneself critically and reflectively about advances in psychological science, other sciences in general and own subject area. <p>Competences needed are in particular:</p> <p>Knowledge</p> <ul style="list-style-type: none"> i. Scientific decision-making processes. ii. Hypothesis testing and research problem solving approaches. iii. Qualitative and quantitative research methods. <p>Skills</p> <ul style="list-style-type: none"> i. Search for, critically read, understand and evaluate scientific psychological literature. ii. Be able to formulate hypotheses and research questions in everyday psychological practice. iii. Collect and analyse qualitative and quantitative data to test hypotheses or explore research questions.

	<p>iv. Use qualitative and quantitative research data to theorise from and improve practice.</p> <p>Attitudes</p> <p>i. Critical and hypothesis-oriented thinking – display willingness to reflect critically and formulate hypothesis for further actions.</p> <p>ii. Curious – interest leading to inquiry, be interested in scientific knowledge.</p> <p>iii. Open – willingness to consider different perspectives.</p> <p>iv. Conscientious – willingness to respect scientific findings, make thorough data analysis and pursue the integrity of research.</p>
<p>5. Collaboration and leadership competences</p>	<p>Learning outcome: The psychologist can work effectively with and consult colleagues/other professionals in the same and other disciplines to provide safe, high-quality client-centred services. They are able to perceive in which task and context they have expertise and are expected to assume leadership functions.</p> <p>Competences needed are in particular:</p> <p>Knowledge</p> <p>i. Roles and methods of related professions.</p> <p>ii. Models and formats of supervision/intervention.</p> <p>iii. Theories on (inter-, multi-, trans-) disciplinary teamwork/cooperation/collaboration/group dynamics and leadership.</p> <p>iv. Systemic theories.</p> <p>Skills</p> <p>i. Shared decision-making and leadership.</p> <p>ii. Perspective taking.</p> <p>iii. Resolving conflict.</p> <p>iv. Managing and leading change.</p> <p>Attitudes</p> <p>i. Trustful – willingness to create an environment of confidence.</p> <p>ii. Open – be open to new experience, knowledge, research, and practice.</p> <p>iii. Collaborative - display a willingness to work with other people in a respectful manner.</p> <p>iv. Responsible – willingness to take on responsibility.</p>
<p>6. Individual and cultural differences competences</p>	<p>Learning outcome: The psychologist can:</p> <p>i. Identify, acknowledge, and respect diversity and minority issues.</p> <p>ii. Recognise one's own values, beliefs, and experiences on one's professional behaviour with clients and others and the impact on others.</p> <p>iii. Work and communicate effectively with all forms of diversity in clients, colleagues, and others.</p> <p>iv. Be inclusive in all forms of diversity in working with clients, colleagues, and others.</p> <p>Awareness of own biases helps to avoid stereotyping individuals belonging to different groups. The psychologist can consider that sociocultural factors such as gender, gender identity, culture, ethnicity, age, family context, religion, sexual orientation, majority/minority affiliation etc. are</p>

	<p>included in the assessment of factors which affect personality, values, worldview, relationships, psychopathology, and attitudes to treatment, and can make individual adjustments to the client's needs based on this.</p> <p>Competences needed are in particular:</p> <p>Knowledge</p> <ul style="list-style-type: none"> i. Diversity theories. ii. Intercultural theories. iii. Personality theories. iv. Adaptation and inclusion theories. <p>Skills</p> <ul style="list-style-type: none"> i. Perspective taking. ii. Self-reflection. iii. Identify differences. iv. Manage diversity. v. Advocate for others. <p>Attitudes</p> <ul style="list-style-type: none"> i. Open – be open to new experience, values, knowledge. ii. Empathic – willingness to understand and share the feelings of others. iii. Curious – interest leading to inquiry of others. iv. Respectful to other experiences, values, knowledge. v. Proactive toward improving the situation for others and self.
<p>7. Digital/information and communication technology competences</p>	<p>Learning outcome:</p> <p>The psychologist can use digital technologies, in particular information /communication technologies in an effective and safe way considering clients' needs, data protection, online privacy and cybersecurity for need analysis and goal setting, assessment, intervention, and evaluation. Knowledge about the possibilities and limitation of digital technologies, in particular information/communication technologies and the skills to apply the technology in an effective and safe way.</p> <p>Competences needed are in particular:</p> <p>Knowledge</p> <ul style="list-style-type: none"> i. Ethical practice, legal and security requirements (e.g. GDPR), specific to electronic/remote practice. ii. Professional boundary issues. iii. Range of digital technologies (e.g. Self Help or Online Blended Learning/Therapy). iv. The role of apps in psychological assessments and interventions and other platforms available to support the delivery of psychological interventions. v. Communication processes which may affect digital practice across individual, system and group work (e.g. turn taking and use of non-verbal information). <p>Skills</p> <ul style="list-style-type: none"> i. Adequately apply data protection principles (including risk and safety) to all aspects of remote/online or in person work. ii. Recognise one's own competences, training and supervision needs in relation to the context of digital practice. iii. Recognise needs and culture-specific requirements of clients and provide suitable digital modalities. iv. Manage boundaries if working remotely (e.g. conducting a consultation session via video chat from home).

	<p>v. Critically appraise digital tools and interventions and use the evidence base to inform selection of these for practical and research purposes.</p> <p>Attitudes</p> <p>i. Responsible -works in an ethical, safe, and effective way attending to professional and clinical boundary issues specific to online/remote practice.</p> <p>ii. Flexible – displays a flexible approach and mindset.</p>
<p>8. Self-reflection, and self-care competences</p>	<p>Learning outcome: To promote their own wellbeing and ensure the ability to perform their professional role, psychologists have the responsibility of self-awareness, self-reflection, and self-care. This includes psychologists balancing their professional and personal lives. Psychological practice entails exposure to potentially distressing situations that may create a risk for the psychologist's and may affect the client's wellbeing.</p> <p>The psychologist can:</p> <p>i. Acknowledge that the well-being of clients depends on their own self-awareness and self-regulation.</p> <p>ii. Acknowledge own thoughts, behaviours, attitudes and prejudices.</p> <p>iii. Identify and analyse own needs and risks through an unbiased and unattached perspective.</p> <p>iv. Recognise and correct errors, such as losing professional distance or impartiality.</p> <p>v. Engage in physical, psychological, spiritual or support activities described as the components of self-care.</p> <p>Competences needed are in particular:</p> <p>Knowledge</p> <p>i. Awareness of occupational risks and how to mitigate and manage them.</p> <p>ii. Mental health and career satisfaction indicators.</p> <p>iii. Deontology and professional values.</p> <p>Skills</p> <p>i. Self-observe, -analyse, -reflect and -evaluate (attending to signs of distress).</p> <p>ii. Seek interpersonal support, or professional, if needed.</p> <p>iii. Balance personal and professional requirements.</p> <p>iv. Resilience and coping strategies.</p> <p>Attitudes</p> <p>i. Attentive – attuned to own emotional state and willingness to recognise one's own thoughts and feelings.</p> <p>ii. Open - Willingness to change.</p>

I.3. EuroPsy Fields of Practice and Competence Profiling

1.3.1. The descriptions of these functional and foundational competences are intended to be generic and applicable to most or all types of psychologists' professional work, although they are implemented in specific ways in different fields of practice.

1.3.2. This means that although some knowledge and skills are general in their applicability, many are context related. Thus, the psychologist who has demonstrated professional competence in one field of practice with one client group cannot automatically be assumed to be competent with other client groups.

1.3.3. A psychologist should gain each of these competences as far as applicable within a particular field of practice.

1.3.4. Each holder of the EuroPsy Certificate will have a profile defining the field of practice within which they have demonstrated competence to practise independently from the time at which the Certificate is awarded (For assessment of competences see Appendix III).

1.3.5. The following main fields of practice are currently approved and are designated as:

- a) Clinical & Health
- b) Education
- c) Work & Organisations
- d) Sport
- e) Community & Social Intervention

1.3.6. In addition to the main fields of practice a category "Other" is currently approved. The category "Other" refers to all other fields which do not fall under the main fields of practice. An Other field should be a field which has a wide practice, is recognised in the country concerned and has a recognised education and preparation at the basic level. The Other field of practice must be specified by the applicant for the EuroPsy Certificate in the application made to the National EuroPsy Committee.

1.3.7. For the purpose of describing qualifications to practice, a broad categorisation in fields of practice is deemed to be sufficient.

1.3.8. In the following the main fields of practice and the most relevant specific functional competences for psychologist working in this field are briefly described.

Clinical & Health

Definition of the Field of Practice

1.3.9. The field of practice of Clinical & Health concerns the development and the application of theories and methods from scientific psychology, such as developmental, cognitive, social, personality and biological psychology, and related domains, such as neurosciences, to realise different aims consisting of promotion of health in general and mental health in particular, enhancement of development and wellbeing, prevention of mental health problems, treatment of mental disorders and rehabilitation after loss of mental or physical capacities due to illness, accident, trauma or other major events.

1.3.10. To attain these aims the psychologist in the field of Clinical & Health uses various methods such as psychological assessment of affective, cognitive, behavioural and relational processes, including diagnostic procedures, psychological interventions designed and implemented to change affective, cognitive, behavioural and relational processes towards more psychological wellbeing and

less distress and suffering and providing consultation to other professionals concerning psychological aspects relevant to the situation of the client. Clients can be individuals, families, groups, organisations, communities and teams responsible for a comprehensive integrated psychological care programme.

Functional competences as related to this Field of Practice

1.3.11. The functional competences as related to this Field of Practice are:

- a) Need identification, contract/task clarification and goal setting: This pertains to the first phase of a problem-solving cycle that includes psychological assessment of clients with affective, cognitive, relational or behavioural needs, demands, problems and disorders, case conceptualisation, goal setting and action planning.
- b) Planning/designing relevant assessment and intervention or product/service: Planning/designing assessment and interventions for various clients and client systems include a variety of assessment and intervention methods grounded in evidence based theoretical and applied conceptual frameworks used to realise the goal of understanding and enhancing mental health and wellbeing and alleviation of suffering. Consultation and advice for other professionals and relevant others on psychological assessment and intervention methods and change processes is an important part of the professional activities.
- c) Implementing psychological assessments or intervention or services/products: Developing/implementing clinical psychological assessment and intervention programmes include evidence based psycho-education, psychological guidance, psychological treatments and processes of rehabilitation.
- d) Evaluation: Outcome and process evaluations imply collaborative approaches that draw upon the resources of clients, client systems and teams, other professionals and relevant persons involved in the care process of the client. Evaluation is put in place to monitor change and adapt assessment and intervention in order to maximise the realisation of the goals.

Education

Definition of the Field of Practice

1.3.12. Educational Psychology is the branch of Psychology that applies psychological principles and theories to a broad range of learning, developmental, teaching and training issues in educational settings. Uniquely positioned at the intersection of psychology and education its main focus is the academic, emotional, social, and behavioural needs of all actors in educational settings and to support learners, families and educational staff within these settings. The wide ranging knowledge of educational themes enables Educational Psychology to address a variety of psychological issues, themes and problems that may arise within educational settings through a multiple perspectives approach that includes behavioural, cognitive, constructive, experiential, systemic and developmental viewpoints.

Functional competences as related to this Field of Practice

1.3.13. The functional competences as related to this Field of Practice are:

- a) Need identification, contract/task clarification and goal setting: This pertains to a complex problem solving cycle that includes assessment of learners with individual cognitive, emotional, social or behavioural needs
- b) Planning/designing relevant assessment and intervention or product/service: Planning/designing individual and group assessment and interventions include a variety of

resources and aim at supporting children, adolescents and adults in their life-long learning and sustainable developmental processes.

- c) Implementing psychological assessments or intervention or services/products: Developing/implementing primary and secondary intervention programmes include advice and guidance to students, teachers, instructors, families and other professionals.
- d) Evaluation: Outcomes imply collaborative approaches that draw upon the resources of students, teachers, families, agencies and communities and aim at strategic development, evidence based practice, development of new ideas and reflective practice.

Work & Organisations

Definition of the Field of Practice

1.3.14. Work and Organisational Psychology addresses the needs, concerns, and wellbeing of those working in the organisations, the employees, but also the concerns and goals of those leading or owning the organisations. The goals are to better understand and optimise the effectiveness, health, and well-being of both individuals within organisational and work contexts and organisations.

1.3.15. Psychologists in the field of Work & Organisations work at all levels in the organisation, including individual, group, leadership, and organisational levels. An essential part of their competence is to acknowledge that these levels are interdependent, and that often, more than one level must be addressed. Their clients may include employees, groups, leader(s), organisations, owners, customers, trade associations, communities, etc.. These are often referred to as “stakeholders” and may represent different and sometimes conflicting interests. Identifying different stakeholders in a project and their interests is challenging and constitutes an essential part of professional competence in this field of practice.

Functional competences as related to this Field of Practice

1.3.16. The functional competences as related to this Field of Practice are:

- a) Need identification, contract/task clarification and goal setting: This is directed toward organisations at all levels (employees, groups, leaders, owners, and others). Addressing different stakeholders and negotiating their interests is central when setting goals for the project.
- b) Planning/designing relevant assessment and intervention or product/service: Planning and choosing relevant assessments and interventions in organisations based on the principle of evidence-based practice, including best research, organisational data, stakeholders’ interest, and own expertise.
- c) Implementing psychological assessments or intervention or services/products: Implementing psychological assessments or interventions in ways that address the different challenges of the workplace, individuals, groups, and organisational contexts.
- d) Evaluation: Evaluating the effectiveness of assessments and interventions in organisations, using validity and reliability checks to ensure outcomes meet organisational and client expectations

Sport

Definition of the Field of Practice

1.3.17. Sport represents a multifaceted field of practice that draws from the scientific study of the cognitive, social, emotional and behavioural processes of individuals and teams engaging in sport and also exercise contexts. Psychologists in the field of Sport draw upon the scientific evidence base within Psychology and Sport Psychology. They apply relevant psychological knowledge, skills and strategies to assess, support and enhance the performance, well-being and health of athletes across the lifespan. Psychologists in this field of practice may support multiple stakeholder groups within the sporting ecosystem including coaches, parents, and support staff drawing in developmental, social and organisational elements of psychology applied to sport settings.

Functional Competencies as related to this Field of Practice

1.3.18. The functional competencies as related to this Field of Practice are:

- a) Need identification, contract/task clarification and goal setting: This relates to the initial contracting process with athlete clients, teams and other sport stakeholders in the context of understanding development, health and performance-related needs. This also requires the practitioner to understand the specific demands of the sport and context of the client in order to select the best starting points of entry.
- b) Planning/designing relevant assessment and intervention or product/service: Planning/designing relevant assessments, individual and group interventions involve the psychological assessment of clients that then progresses into client case formulation using appropriate theoretical and empirical knowledge to inform appropriate interventions. The selection of evidence-based interventions and strategies aims to help support clients' needs or goals
- c) Implementing psychological assessments or intervention or services/products: This relates to the delivery of one-to-one services with athletes and teams through the introduction of appropriate techniques, strategies or exercises. It also includes the provision of consultation, support and advice to coaches and other sport stakeholders.
- d) Evaluation: This relates to the responsible process of monitoring and evaluating the impact of an intervention or programme of delivery in sport. It incorporates reflective, subjective and objective assessments on the processes and outcomes of the work conducted, perhaps from multiple perspectives, in order to facilitate learning.

Community & Social Intervention

[The definition of the field of practice is currently being developed]

Appendix II. EuroPsy Specialist Standards

This Appendix describes the requirements for EuroPsy Specialist Standards and Certificates. All EuroPsy Specialist Standards and Certificates build on and require the fulfilment of the EuroPsy Standards in the relevant field of practice. A EuroPsy Specialist Certificate will only be awarded to appropriately experienced psychologists who hold the EuroPsy Certificate (or who are awarded the EuroPsy Certificate at the same time) in the relevant field of practice.

II.1. Common Minimum Requirements for the EuroPsy Specialist Standards and Certificates

2.1.1. In addition to EuroPsy Standards in the relevant field of practice all EuroPsy Specialist Standards and Certificates have to fulfil the following education and professional training and practice requirements.

Minimum volume and content of further education and training

2.1.2. At least three years (at least 4.500 hours in total) or equivalent professional practice in the relevant field of practice (post eligibility for EuroPsy Certificate in the relevant field of practice). Within this period the following is required:

- a) Theoretical and applied education training (e.g. courses, workshops on theory and methods): Minimum 400 contact hours. In addition to the contact hours, the education should involve twice as much time (800 hours) dedicated for independent learning (e.g. searching and reviewing current literature). The learning outcome should be expressed and evaluated (by e.g. written assignments, essays, quizzes, learning diary, exams, or similar methods). National EuroPsy Committees may acknowledge other forms of learning to develop the required competences (e.g. additional supervision hours, written assignments) to compensate for contact hours as long as learning outcomes are met.
- b) Supervised Practice: Minimum 500 hours of supervised practice (additional hours of supervised practice may be required in each Specialism).
- c) Supervision: Minimum of 150 hours (50 hours per year) of supervision as specified in Appendix III.

2.1.3. The content varies with the institution's curriculum and/or the psychologists' learning trajectory. The courses have to be accredited or endorsed by an appropriate body and form a coherent training programme.

2.1.4. Studies completed within the six-year EuroPsy education and training cannot typically be counted for a Specialist Certificate.

Competences to be demonstrated

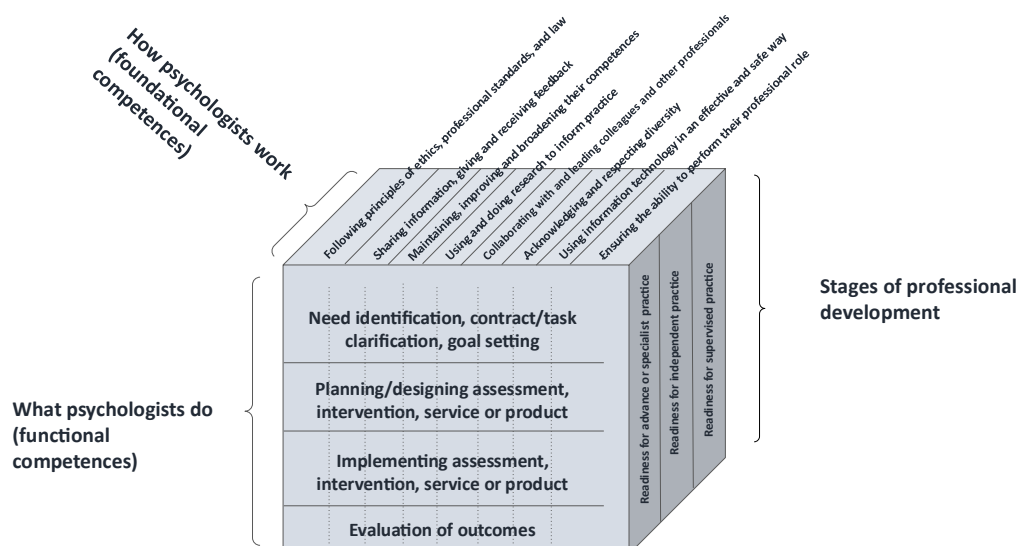
2.1.5. EuroPsy Specialist Standards build on and require the fulfilment of EuroPsy functional and foundational competences. In addition each EuroPsy Specialist Standard specifies additional functional competences in a specialist field of practice, which are required to achieve readiness for specialist or advanced practice as a third stage of professional competence development. (For assessment of competences see Appendix III).

2.1.6. Figure 2 shows the adapted cube competence model with the three stages of professional development:

- a) Readiness for supervised practice.
- b) Readiness for independent practice.

- c) Readiness for specialist or advanced practice.

Figure 2. Adapted cube competence model for the EuroPsy Specialist (cf. Rodolfa et al., 2005)



2.1.7. The individual EuroPsy Specialist Standards may have additional specific criteria within these requirements.

Requirements on continuing professional development

2.1.8. These requirements are specified in Appendix IV.

II.2. Specific Minimum Requirements for the EuroPsy Specialist Standard and Certificate in Psychotherapy

This Appendix describes the requirements for the EuroPsy Specialist Standard and Certificate in Psychotherapy which is situated in the EFPA field of practice of Clinical & Health (cf. 1.3). These requirements are in addition to the requirements for the EuroPsy standard in the field of practice of Clinical & Health and to the common minimum requirements for EuroPsy Specialist Standards described above.

Definition of the Specialist Field of Practice

2.2.1. A psychologist specialised in Psychotherapy delivers a specialised type of psychological treatment (advanced psychotherapy) to clients with a wide variety of complex psychological needs, demands, problems and disorders with the aim of alleviating suffering and enhancing health, wellbeing and personal development. Various characteristics of the client situation such as the complexity, chronicity and severity of the problem and the needs, demands and resources of the persons and their context are indications for advanced psychotherapy.

2.2.2. Advanced psychotherapy is based on a rich diversity of theoretical conceptual psychotherapeutic frameworks and the applied practice models based upon them. These theoretical psychotherapeutic conceptual frameworks are based on clinically, scientifically and contextually validated psychological knowledge, skills, attitudes and values. This specialised psychological service requires advanced functional competences of psychotherapeutic assessment of the affective, cognitive, behavioural and relational processes active in the needs, problems and/or disorders of the client and advanced competences of psychotherapeutic intervention to initiate change in the affective, cognitive, behavioural and relational processes. This specialised type of psychological treatment is provided in the context of a specific type of helping relationship creating the necessary conditions for psychological change.

2.2.3. A psychologist specialised in Psychotherapy can offer advanced psychotherapy in a direct relationship to the client or can offer indirect advanced psychotherapy in the context of a therapeutic environment in which various professionals collaborate in the psychotherapy process and the psychotherapeutic environment. In these contexts the psychologist specialised in Psychotherapy can be assigned the responsibility for the need analysis, case conceptualisation and psychotherapeutic contract, the design, planning, implementation and evaluation of the psychotherapeutic assessment, interventions and consultation, in close collaboration with other disciplines implicated in the care process of the client.

Specific Minimum Education & Training Requirements

2.2.4. In addition to the general minimum requirements specified in Appendix II.1 the following specific minimum education and training requirements must be met:

- a) Personal Development: minimum 100 hours of personal development

Competences to be demonstrated

2.2.5. EuroPsy Specialist Standards build on and require the fulfilment of EuroPsy functional and foundational competences. In addition, the EuroPsy Specialist Standard in Psychotherapy specifies the following additional functional competences, which are required to achieve readiness for specialist or advanced practice in Psychotherapy as a third stage of professional competence development.

(For assessment of competences see Appendix III).

Table 1. Functional competences (describing what psychologists do) of psychologists specialised in Psychotherapy

Functional competences	Learning outcomes and competences needed in the specialist field of Psychotherapy. Competences build upon the competences of the EuroPsy Standard in the field of Clinical & Health.
<p>A. Need identification, contract/task clarification and goal setting</p>	<p>Learning outcome:</p> <p>The psychologist specialised in psychotherapy can:</p> <ol style="list-style-type: none"> Identify, assess, analyse, elaborate, clarify and formulate the demands, needs, problems, contexts and expectations of different types of complex clients. Gather various types of information from the client and other relevant sources about the client's demands, needs, problems and contexts. Structure this information into a coherent and integrated case formulation to inform psychotherapeutic action in terms of psychotherapeutic assessment, intervention and consultation. Communicate the case formulation and discuss it with the client and relevant client systems. Agree a psychotherapeutic contract with clients and client systems about the goals, psychotherapeutic treatment framework, types of assessment, intervention and consultation and evaluation. <p>Advanced knowledge of:</p> <ol style="list-style-type: none"> Psychological science (e.g. developmental, cognitive, social, personality psychology) and related domains such as biological psychology and neurosciences relevant to understand the nature, causes, development and course of psychological dysfunction and psychopathology such as mood, anxiety, behavioural, relational and personality disorders and of various other mental disorders, needs related to complex life situations including e.g. trauma, loss and grief, major life changes, rehabilitation after loss of functions, existential challenges. Psychological and psychotherapeutic assessment of a broad variety of parameters active in the origin, development and course of the complex problem and of the diagnostic classification systems including their strengths and limitations. Various methods of case formulation and clinical diagnosis and their utility in the process of indication for/choice of psychotherapeutic interventions. Different theoretical psychotherapeutic conceptual frameworks concerning psychological and relational functioning and dysfunction and of the psychotherapeutic interventions based on these theories. Theories of human communication, interaction dynamics, motivation and processes of change. Introduction in psychopharmacology and other biological treatments that are often used in combination with psychotherapeutic interventions.

	<p>Advanced skills in:</p> <ul style="list-style-type: none"> i. Establishing contact with clients in different and complex states of affective, cognitive, behavioural, physical and social functioning. ii. Establishing a psychotherapeutic relation characterised by authenticity, empathy, warmth, acceptance and a willingness to collaborate with the client in the process of looking for answers to the demand, need, problem or disorder. iii. Interacting with clients such as (participative) observation, active and emphatic listening, (structured) interviewing, including e.g. motivational interviewing, elaboration, confrontation, clarification, information and (psycho)-education, regulation, modelling, problem solving iv. Assessment and the use of diagnostic classifications taking into account their strengths and limitations v. Gathering additional information from psychological, medical social, forensic and other records on the client and from other available documents /sources and the scientific literature. vi. Critically evaluating gathered information and arranging and structuring it into a coherent case formulation concerning the need, demand, problem or disorder and the active parameters in the development of them that can be used as a basis for psychotherapeutic action. vii. Communicating with the client and relevant others to present, clarify and discuss the case formulation in order to come to a shared decision on the action to take in terms of further assessment, psychotherapeutic intervention, consultation and evaluation. viii. Establishing a psychotherapeutic contract concerning the psychotherapeutic process on the basis of the shared case formulation and the decisions on action to take.
<p>B. <i>Planning /designing relevant assessment and intervention or product/service</i></p>	<p>Learning outcome:</p> <p>The psychologists specialised in psychotherapy can independently plan and design assessment and intervention as an intertwined continuous process according to the clients' needs, context, and agreed-upon relevant goals, beginning with initial clinical assessment, flowing throughout interventions to test and refine psychotherapeutic intervention strategies as needed, and concluding with a final assessment of achieved psychotherapeutic outcome and course of the process:</p> <ul style="list-style-type: none"> i. Advanced psychotherapeutic assessment in function of the case formulation and of the planning and evaluation of the psychotherapeutic intervention, with methods such as clinical interviewing, questionnaires, psychological tests and other psycho-diagnostic instruments, auto- and hetero-observation, measurements of psychophysiological parameters. ii. Advanced psychotherapeutic intervention based on theoretical psychotherapeutic conceptual frameworks that are offered to the client with the aim of responding to the complex need or demand and of alleviating the suffering

	<p>caused by the psychological problem, disorder or psychopathological condition.</p> <p>iii. Advanced consultation approaches to share psychological formulations, treatment recommendations, and clinical insights with other professionals and relevant others involved in client care, enhancing interdisciplinary and interpersonal collaboration and integration of care while maintaining appropriate boundaries and confidentiality.</p> <p>Advanced knowledge of:</p> <p>i. Constructs/parameters that can be assessed by quantitative and qualitative methods and/or intervened upon e.g., personality, emotions, cognitive functions, processes and contents, behaviour, characteristics and dynamics of relationships, circumstances.</p> <p>ii. Diverse psychotherapeutic assessment methods, their theoretical underpinnings, psychometric properties, strengths, limitations, and appropriate applications for different client populations and complex problems.</p> <p>iii. Psychotherapeutic case formulation approaches within and across theoretical conceptual frameworks.</p> <p>iv. Psychotherapeutic assessment and intervention plans and protocols to address complex needs including trauma, personality disorders, treatment-resistant conditions, and comorbid presentations.</p> <p>v. Psychotherapeutic interventions, their qualities, mechanisms of change, indications, available evidence base, procedures and appropriate contextual adaptations for diverse clients.</p> <p>vi. Consultation processes adapted to various care givers involved in the care process of the client in function of the psychotherapeutic case formulation, the objectives and the respective role of the professionals.</p> <p>Advanced skills in:</p> <p>i. Choosing psychotherapeutic assessment and intervention methods taking into consideration the case formulation, the psychotherapeutic contract and the clients' mental, emotional, cognitive, physical and social status and contextual status.</p> <p>ii. Analysing the available intervention options and formulating hypotheses about the possible outcomes of the intervention.</p> <p>iii. Developing contingency plans for potential therapeutic challenges, including crisis situations, deterioration of the condition of the client, safety risks, resistance, alliance ruptures, and non-response to initial interventions.</p> <p>iv. Developing and planning consultation processes to strive for integrated and coordinated care.</p>
<p>C. Implementing psychological assessments or interventions or services/products</p>	<p>Learning outcome:</p> <p>The psychologist specialised in psychotherapy can independently implement advanced psychotherapeutic assessment and interventions with fidelity, flexibility, and responsiveness to client needs, demonstrating proficiency in applying approaches based on available clinical and scientific evidence to complex clinical situations.</p>

	<p>The psychologist specialised in psychotherapy can consult about the psychotherapeutic process with various other professionals.</p> <p>Advanced Knowledge of:</p> <ul style="list-style-type: none"> i. A broad range of psychotherapeutic interventions within and across various theoretical conceptual frameworks and their specific applications, indications, contraindications, and adaptations for diverse populations and presenting problems. ii. Psychotherapeutic process variables including alliance formation, therapist factors, client engagement, resistance, therapeutic boundaries, and mechanisms of change. iii. Implementation challenges including psychotherapeutic impasses, boundary issues, and unexpected adverse reactions. iv. Cultural adaptations to standard intervention protocols to enhance effectiveness with diverse populations. <p>Advanced skills in:</p> <ul style="list-style-type: none"> i. Establishment and maintenance of a secure psychotherapeutic frame within which the assessment and intervention procedures can effectively be applied. ii. Implementation of psychotherapeutic assessment and interventions based on a theoretical psychotherapeutic conceptual framework offered to the patient in the context of the psychotherapeutic contract. iii. Implementing integrated treatment approaches that combine elements from different theoretical conceptual frameworks when appropriate for clients with complex problems. iv. Effectively monitoring therapeutic process in real-time, making moment-to-moment adjustments based on client responses and progress. v. Identifying and addressing therapeutic alliance ruptures, resistance, and transference/countertransference phenomena that affect implementation. vi. implementing consultation protocols with other professionals that enhance coordinated care while maintaining appropriate boundaries and confidentiality.
D. Evaluation	<p>Learning outcome</p> <p>The psychologist specialized in psychotherapy can systematically evaluate the process characteristics, outcomes, and impact of psychotherapeutic assessments and interventions, using multiple approaches based on clinical and scientific evidence to inform ongoing treatment, revise procedures when necessary, and contribute to the personal and professional development of the psychologist specialised in psychotherapy</p> <p>Advanced knowledge of:</p> <ul style="list-style-type: none"> i. Qualitative and quantitative psychotherapy evaluation models, including process evaluation, outcome assessment, client feedback systems, and quality improvement approaches. ii. Psychometric principles relevant to selecting, implementing, and interpreting psychotherapy outcome and process measures.

	<div><div><div>iii.</div><div>Common and specific factors in psychotherapy effectiveness and methods to evaluate their contribution to outcomes.</div></div><div><div>iv.</div><div>Therapist effects on outcomes and methods for evaluating personal therapeutic effectiveness.</div></div><div>Advanced Skills in:</div><div><div>i.</div><div>Selecting and implementing appropriate evaluation methods that align with treatment goals, theoretical conceptual framework, and client characteristics.</div></div><div><div>ii.</div><div>Communicating evaluation results to clients in a manner that enhances engagement, motivation, and shared decision-making.</div></div><div><div>iii.</div><div>Using evaluation methods to determine when treatment goals have been achieved and termination is appropriate, or when referral or treatment modification is needed.</div></div><div><div>iv.</div><div>Implementing systematic self-evaluation protocols regarding personal therapeutic effectiveness, identifying areas for continuous professional development.</div></div></div>
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II.3. Specific Minimum Requirements for the EuroPsy Specialist Standard and Certificate in Work & Organisational Psychology

This Appendix describes the requirements for the EuroPsy Specialist Standards and Certificate in Work & Organisational Psychology, which is situated in the field of practice of Work & Organisations. These requirements are in addition to the requirements for the EuroPsy standard in the field of practice of Work & Organisations and to the common minimum requirements for EuroPsy Specialist Standards described above.

Definition of the Specialist Field of Practice

2.3.1. The specialist field of Work and Organisational Psychology covers three broad fields of study and practice: Work Psychology; Organisational Psychology; and Personnel psychology.

2.3.2. Work Psychology focuses on the relations between individual characteristics and the demands of work life. Work psychology emphasises individual resources, motivation, and potential for development. Working conditions and psycho-social work environments, including performance, well-being, mental health, job satisfaction, and safety, are central themes in work psychology, among others.

2.3.3. Organisational Psychology focuses on the interplay between humans, technology, and systems in an organisation. This includes themes such as communication, group dynamics, leadership, leadership development, conflict management, organisational culture and climate, change management, and organisational development.

2.3.4 Personnel Psychology concerns the relationship between employees and the organisation, and includes themes such as recruitment and selection, onboarding and placement, psychological contract, appraisal, reward systems, competence development, career development, coaching, psychological contract, and retirement.

2.3.5 The EuroPsy Specialist in Work and Organisational Psychology demonstrates advanced knowledge and skills in Work and Organisational Psychology. This includes design, critically evaluating and choosing between different methods and approaches of assessment and intervention; demonstrating advanced intervention skills in demanding and complex situations; managing and handling tough ethical dilemmas, e.g., in discrepancies and/or conflicts between different stakeholders.

Specific Minimum Education & Training Requirements

2.3.6 In addition to the general minimum requirements specified in Appendix II.1 the following specific minimum education and training requirements must be met:

- a) The content of education and training that must be covered is provided in a specialist curriculum framework (e.g. the ENOP-EAWOP model).
- b) Supervised Practice: 400 hours per year (in total, 1.200 hours, including the 500 hours of mentioned in Appendix II.1.) of supervised/coached professional practice.

Competences to be demonstrated

2.3.7 EuroPsy Specialist Standards build on and require the fulfilment of EuroPsy functional and foundational competences. In addition, the EuroPsy Specialist Standard in Work and Organisational specifies the following additional functional competences, which are required to achieve readiness for specialist or advanced practice in Work and Organisational Psychology as a third stage of professional competence development.

(For assessment of competences see Appendix III).

Table 1. Functional competences (describing what psychologists do) for specialists in Work and Organisational Psychology

Functional competences	Learning outcomes and competences needed in the specialist field of Work and Organisational Psychology. Competences build upon the competences of the EuroPsy Standard in the field of Work and Organisations.
<p>A. Need identification, contract/task clarification and goal setting</p>	<p>Learning outcome:</p> <ul style="list-style-type: none"> i. Understand the nature, context, and needs of different types of clients, private and public organisations, and apply this in goal setting. ii. Cope with the complex expectations of different stakeholders and negotiate contracts regarding products, services, intervention objectives, and evaluation. <p>Advanced Knowledge of:</p> <ul style="list-style-type: none"> i. Work design, psychological contract, organisational justice. ii. Work motivation, job satisfaction, and commitment at work. iii. Leadership in organisation. iv. Occupational stress. v. Organisational culture and climate; organisational change and development. vi. Recruitment and selection: predictors, applicant perspective. vii. Career and career management. viii. Management interventions. ix. Multiteam systems. x. Performance in organisations (in-role and extra-role), compensation systems. xi. Decision making. xii. Goal setting. <p>Advanced Skills</p> <ul style="list-style-type: none"> i. Proficient in gathering and synthesising information from multiple sources, including stakeholder interviews, client feedback, and organisational data. ii. Critically evaluate conflicting information from different stakeholders and synthesise this information to define actionable goals. iii. Presenting a realistic intervention plan, including financial and resource aspects, to a client. iv. Ability to build agreement about goals and objectives between different stakeholders.
<p>B. Planning/designing relevant assessment and intervention or product/service</p>	<p>Learning outcome:</p> <ul style="list-style-type: none"> i. Apply an evidence-based approach when planning assessments and interventions in complex organisational settings. <p>Concerning assessment planning</p> <ul style="list-style-type: none"> i. Design assessment processes relevant to complex contexts and multiple levels of an organisation.

	<p>Concerning intervention planning</p> <ul style="list-style-type: none"> ii. Design interventions in complex organisations and challenging situations. iii. Design and plan client-based interventions specific to the organisational context, targeting different levels (job, individual, group, organisation). <p>Advanced Knowledge of:</p> <ul style="list-style-type: none"> i. The International Test Commission (ITC) Guidelines on Test Use. ii. Advanced psychometrics related to assessing individuals, groups, and organisational performance. iii. Change management and organisational development. iv. Conflicts and organisational stress. v. Group dynamics. vi. Design of interventions in organisations. <p>Advanced Skills</p> <ul style="list-style-type: none"> i. Choose among multiple approaches and methods of psychological assessment (e.g. ability, aptitude, personality, situational judgment tests) and procedures (e.g. face-to-face, online or computer/AI supported) based on a critical reflection of their empirical evidence (e.g. strengths, limitations, fairness biases). ii. Design and develop a new assessment methodologies and interventions based on an evidence-based approach. iii. Use piloting of the assessment and intervention plan to test the chosen approach and, if necessary, revise the plans. iv. Manage conflicts in organisations.
<p>C. Implementing psychological assessments or interventions or services/products</p>	<p>Learning outcome:</p> <p>The psychologist can target the assessments and interventions to the relevant level of an organisation.</p> <p>Concerning assessment:</p> <ul style="list-style-type: none"> i. Implement multiple methods and means of assessment in ways that address the complex challenges of the workplace, individuals, groups, and organisational contexts. <p>Concerning intervention:</p> <ul style="list-style-type: none"> i. Implement interventions in complex organisational context (job, individual, group, and organisational) with fidelity to theory and evidence-based approaches and flexibility to adapt where appropriate to clients' needs. <p>Advanced Knowledge of:</p> <ul style="list-style-type: none"> i. Ethical guidelines related to assessment and intervention in organizational contexts. ii. Change management, motivation, conflicts in organisations, and well-being. iii. Organisational equity and justice. iv. Individual-, group-, leadership-, and organisational development. v. (Re)design of work for well-being, psychological safety, and organisational goals. <p>Advanced Skills</p> <ul style="list-style-type: none"> i. Apply assessments according to the standard of the ITC Guidelines on Test Use.

	<ul style="list-style-type: none"> ii. Facilitate and implement complex and challenging processes. iii. Monitor progress and outcome measures at individual, team, leader, or organisational levels. iv. Making real-time adjustments in interventions based on feedback and shifting organisational priorities.
D. Evaluation	<p>Learning outcome</p> <ul style="list-style-type: none"> i. Evaluate the effectiveness of complex assessments and interventions, using validity and reliability checks to ensure outcomes meet organisational and client expectations. ii. Evaluate own functioning and use the evaluation in own professional development. <p>Advanced Knowledge of:</p> <ul style="list-style-type: none"> i. Evaluation of organisational interventions. ii. Mixed-methods evaluation, incorporating qualitative and quantitative data analysis. iii. Learning and development in organisations. iv. Continuous improvement models. <p>Advanced Skills</p> <ul style="list-style-type: none"> i. Selection, adaptation, and/or design of project evaluation methods that are relevant for the organisational level of assessment/intervention. ii. Determine the appropriate criteria for evaluation. iii. Evaluate the impact of complex interventions, using qualitative and/or quantitative data to provide actionable insights. iv. Communicate evaluation results to stakeholders, ensuring that findings are integrated into organisational decision-making. v. Reflection and evaluation of own function in the project, use the results from this to develop knowledge and skills.

II.4. Specific Minimum Requirements for the EuroPsy Specialist Standard and Certificate in Sport Psychology

[Appendix II.4 is currently under development]

This Appendix describes the requirements for the EuroPsy Specialist Standards and Certificate in Sport Psychology, which is situated in the field of practice of Sport. These requirements are in addition to the requirements for the EuroPsy standard in the field of practice of Sport and to the common minimum requirements for EuroPsy Specialist Standards described above.

Definition of the Specialist Field of Practice

Specific Education & Training Requirements

2.4.1. In addition to the general minimum requirements specified in Appendix II.1 the following specific minimum education and training requirements must be met:

...

Competences to be demonstrated

2.4.2. EuroPsy Specialist Standards build on and require the fulfilment of EuroPsy functional and foundational competences. In addition, the EuroPsy Specialist Standard in Sport Psychology specifies the following additional functional competences, which are required to achieve readiness for specialist or advanced practice in Sport Psychology as a third stage of professional competence development.

(For assessment of competences see Appendix III).

II.5. Specific Minimum Requirements for the EuroPsy Specialist Standard and Certificate in Clinical Neuropsychology

This Appendix describes the requirements for the EuroPsy Specialist Standards and Certificate in Clinical Neuropsychology, which is situated in the field of practice of Clinical & Health. These requirements are in addition to the requirements for the EuroPsy standard in the field of practice of Clinical & Health and to the common minimum requirements for EuroPsy Specialist Standards described above.

Definition of the Specialist Field of Practice

2.5.1. Neuropsychology is a specialised domain of psychology that is focused on the relationships between cognitive and affective functioning, the personality and behaviour of the individual, and brain functioning. Cognitive functions include e.g. attention, learning, memory, language, and reasoning. Affective functions include emotions and mood.

2.5.2. Clinical Neuropsychology is the application of Neuropsychology in clinical situations across the life span to understand how these functions relate to either normal brain functioning or acquired or developmental brain injury.

2.5.3. The practice of Clinical Neuropsychology involves a clinical interview and the use of neuropsychological assessment methods for diagnostic and prognostic purposes. This information can also be used for planning, implementation and evaluation of interventions.

2.5.4. The objective of the specialist education and training is to ensure that the competences needed for independent practice in Clinical Neuropsychology are achieved.

Specific Minimum Education & Training Requirements

2.5.5. In addition to the general minimum requirements specified in Appendix II.1 the following specific minimum education and training requirements must be met:

- a) Supervised Practice. At least three years full time (at least 4.500 hours in total) or equivalent supervised practice in the field of clinical neuropsychology (post eligibility for EuroPsy Certificate in Clinical & Health). This supervised practice encompasses professional practice and includes the 500 hours of supervised practice and 150 hours of supervision mentioned in Appendix II.1.
- b) Individual work to a minimum of 200 hours in the form of applied projects (e.g. research reports, theses, case study reports, new assessment or intervention protocols, work practice guidelines, or similar) submitted for evaluation, that will demonstrate the competences required in the field of clinical neuropsychology.

Competences to be demonstrated

2.5.6. EuroPsy Specialist Standards build on and require the fulfilment of EuroPsy functional and foundational competences. In addition, the EuroPsy Specialist Standard in Clinical Neuropsychology specifies the following additional functional competences, which are required to achieve readiness for specialist or advanced practice in Clinical Neuropsychology as a third stage of professional competence development.

(For assessment of competences see Appendix III).

Table 1. Functional competences in the Specialist field of Clinical Neuropsychology.

Functional competences	Learning outcome and competences needed in the specialist field of Clinical Neuropsychology. Competences build upon the competences of the EuroPsy Standard in the field of Clinical & Health.
<p>A. Need identification, contract/task clarification and goal setting</p>	<p>Learning outcome:</p> <p>The specialist psychologist can:</p> <ul style="list-style-type: none"> i. Identify, assess, and analyse clients' needs and risks. ii. Gather information about the clients' context to inform action. iii. Clarify expectations and contract with clients iv. Set appropriate goals for action. (assessment/intervention/service/product) specifying criteria for evaluation. <p>Advanced Knowledge:</p> <ul style="list-style-type: none"> i. Theories and models of cognition, emotion, and behaviour, including information processing theories, cognitive/affective neuroscience, social neuroscience, neurodevelopment, cultural neuroscience, and behavioural neurology. ii. Diagnostic features and neuropathology of conditions affecting the brain (including, but not limited to stroke, traumatic brain injury, neurodegenerative disorders, neurodevelopmental disorders, multiple sclerosis, epilepsy, psychiatric disorders), including their staging/course over time. iii. Potential functional implications of neuromedical conditions and neuropsychological impairments as they relate to everyday ability level, quality of life, and educational/working/social/living environments. iv. Patterns of behavioural, cognitive, and emotional impairments associated with neurological and related diseases and conditions that affect brain structure and functioning. v. Effects of common systemic medical illnesses on brain functioning and behaviour. vi. Patterns of behavioural, cognitive, and emotional impairments associated with psychiatric disorders, alcohol/substance use disorders, behaviour addictions or antisocial behaviour. vii. Neurodevelopment and age-related changes in brain functioning and behaviour across the lifespan. <p>Advanced Skills:</p> <ul style="list-style-type: none"> i. Analyse and clarify referral questions within the brain-mind-behaviour framework based on the context, professional roles, and the patient/examinee presentation. ii. Gather key information to addressing the referral question, including interview(s), targeted behavioural observations, and review of records containing the results of neurological, neuroimaging, neurophysiological, and neuropsychiatric examinations.

	<p>iii. Integrate knowledge of neuropsychological models and syndromes to form a comprehensive neuropsychological formulation for individual cases.</p>
<p>B. Planning/designing relevant assessment and intervention or product/service</p>	<p>Learning outcome: The specialist psychologist can plan/design or consider and choose among relevant assessments and interventions or services/products according to the clients' needs and context/situations and the goals agreed upon.</p> <p>Advanced Knowledge:</p> <ul style="list-style-type: none"> i. Evidenced-based intervention techniques and practices to address cognitive, emotional, and behavioural problems present in different clinical populations. ii. How complex neurobehavioral disorders (e.g. anosognosia or other behaviours resulting from acquired brain injuries, neurodevelopment disorders or other neurological, neuropsychiatric, and genetic conditions) and sociocultural factors can affect the applicability of interventions. <p>Advanced Skills:</p> <ul style="list-style-type: none"> i. Appropriately select and critically appraise neuropsychological tests, measures, and other information sources consistent with best evidence and specific context of assessment, including assessment of performance and symptom validity, if relevant. ii. Identify targets of neuropsychological interventions and specify intervention needs. iii. Identify potential barriers to neuropsychological intervention and adapt interventions to minimise such barriers. iv. Develop and implement treatment plans that address neuropsychological deficits while accounting for patient preferences and insight, individual differences (in e.g. availability of proxy support and expected disease or recovery trajectory), and social cultural context. v. Apply key components of evidence-based practice (i.e., best evidence, clinical expertise, and patient characteristics/culture/values) in selecting appropriate assessment and intervention approaches.
<p>C. Implementing psychological assessments or interventions or services/products</p>	<p>Learning outcome: The specialist psychologist can appropriately carry out neuropsychological assessments and implement interventions or services/products with/for clients in different contexts/situations. This can include pilot studies to test neuropsychological assessments and interventions or services/products.</p> <p>Within the domain of assessment</p> <p>Advanced Knowledge:</p> <ul style="list-style-type: none"> i. Theories and evidence-based methods of measurement and psychometrics relevant to cognitive (e.g. attention, memory, executive functions, verbal and visuospatial abilities), social and emotional functioning, and brain-behaviour relationships.

	<ul style="list-style-type: none"> ii. Methods for measuring cognitive change, including decline from estimated premorbid abilities, and repeated/longitudinal assessment. iii. Potential influences of motivational factors and assessment context on test performance. <p>Advanced Skills:</p> <ul style="list-style-type: none"> i. Appropriately administer and score neuropsychological tests and measures. ii. Identify factors potentially affecting test performance (e.g. sensory and motor deficits, medication, fatigue, motivation, anxiety, distracting environment, technological competence, assessment modality), and when possible, manage these to optimise performance. iii. Interpret neuropsychological assessment results in the context of population norms and the range of typical performance, as well as estimated premorbid abilities where relevant, with formation of an integrated conceptualisation that draws from all relevant information sources. (e.g. interview, test results, behavioural observations, medical history/health records). iv. Demonstrate written communication skills in the production of integrated neuropsychological assessment reports. v. Provide feedback, as relevant to the assessment context, to patients, families, or caregivers in a sensitive manner adapting to the needs of the specific audience. <p>Within the domain of intervention</p> <p>Advanced Knowledge:</p> <ul style="list-style-type: none"> i. Theoretical and procedural bases of intervention methods appropriate to address disorders of cognition (e.g. attention, memory, executive functions, verbal and visuospatial abilities), social and emotional functioning, as well as psychological/emotional adjustment and behaviours of concern. <p>Advanced Skills:</p> <ul style="list-style-type: none"> i. Provide psychoeducation and information about neuropsychological disorders to aid the patient and family's understanding of their presenting concerns and how to manage them. ii. Implement evidence-based cognitive interventions in neuropsychological disorders across the lifespan iii. Deliver evidence-based psychological therapies (e.g. for depression, anxiety) appropriately adapted for people with neuropsychological impairment. iv. Provide behavioural interventions (e.g., positive behaviour support; positive reinforcement; errorless learning; conflict resolution; compensation techniques) for behaviours of concern in people with neuropsychological disorders. v. Demonstrate an awareness of ethical and legal ramifications of neuropsychological intervention strategies. <p>Within the domain of consultation</p> <p>Advanced Knowledge:</p> <ul style="list-style-type: none"> i. Professional roles and expectations of a consulting clinical neuropsychologist specific to each setting.
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	<ul style="list-style-type: none"> ii. Professional identity as a clinical neuropsychologist; understanding of the unique contributions of neuropsychology to different healthcare, educational, and forensic/legal contexts. iii. Awareness of the roles of clinical neuropsychologists, and how those roles vary across settings (e.g., practice, research, training, etc.) and assessment/intervention contexts. <p>Advanced Skills</p> <ul style="list-style-type: none"> i. Provide effective consultation services within common settings and contexts in clinical neuropsychology practice. ii. Educate referral sources regarding the utility and relevance of neuropsychological services. iii. Effectively communicate neuropsychological case formulations that emphasise the added value of neuropsychological services.
D. Evaluation	<p>Learning outcome: The specialist psychologist can evaluate process characteristics, and outcomes, outputs, and impact of neuropsychological assessments and/or interventions or services/products and to revise the procedures if necessary during the implementation process (formative evaluation) and at the end (summative evaluation).</p> <p>If needed, it may mean going back to section 1 (need analysis and goal setting) and start the process again.</p> <p>Competences needed are in particular:</p> <p>Advanced Knowledge:</p> <ul style="list-style-type: none"> i. The scientific method in generating neuropsychological knowledge and evaluating findings related to neuropsychological techniques, brain-behaviour relationships, assessment strategies, and interventions. ii. The scientific basis for assessment strategy, including test selection, use of appropriate normative standards, psychometric and operating characteristics, and test limitations. iii. Clinical reasoning and evidence-based decision-making strategies and their applications in improving the accuracy of differential diagnosis of neuropsychological conditions, and in the selection and delivery of intervention strategies. <p>Advanced Skills:</p> <ul style="list-style-type: none"> i. Employ neuropsychological assessment and provision of feedback for therapeutic benefit. ii. Independently evaluate the effectiveness of interventions employing appropriate assessment and outcome measurement strategies. iii. Provide effective neuropsychological assessment feedback and articulate appropriate recommendations in language appropriate for the audience. iv. Remain cognisant of potential sources of bias/error in clinical judgements (e.g. overconfidence, "clinician's illusion," confirmation bias, illusory correlation, availability heuristic) and apply relevant de-biasing techniques to address these limitations (e.g. active consideration of; alternatives, referencing quality evidence, semi-structured interviewing techniques).

Appendix III. Minimum Requirements for Supervised Practice

Supervised practice

3.1. Supervised practice is a form of professional interactive training carried out in a real work setting with the aims of:

- a) Preparing a (Specialist) Psychologist-in-Training for independent practice.
- b) Developing the professional role of a (Specialist) Psychologist.
- c) Integrating theoretical and practical knowledge.

3.2. Supervised practice aims to qualify a (Specialist) Psychologist-in-Training for entry into independent practice.

3.3. At the end of the supervised practice training period, the (Specialist) Psychologist can practice independently.

3.4. Supervised practice implies a regular meeting between the (Specialist) Psychologist-in-Training and the Supervisor. Based on the topics and context of supervision the Supervisor decides on the proportion of individual (min. 20 hours per year) and group supervision, and whether to start with individual or group supervision. A maximum of 50% of individual or group supervision could be online, after starting face to face to establish a trusting relationship

The Supervisor

3.5. In countries where professional licensing/registration exists, the Supervisor needs to be a licensed/registered psychologist.

3.6. A Supervisor must have a minimum of two years (or its equivalent of at least 3.000 hours) of independent practice in the field of practice/specialism in which they will supervise. In addition they must have some training in supervision (e.g., at least workshops lasting several days) before they can supervise independently. Whether the requirements are satisfied is a matter for the National EuroPsy Committee.

Procedural aspects, formative and summative assessment

3.7. The supervisor is required to supervise the (Specialist) Psychologist-in-Training and to assess the competences of a (Specialist) Psychologist-in-Training during (formative assessment) and at the end of the period of supervised practice (summative assessment) with respect to the functional and foundational competences mentioned above according to the rules and traditions that are specific for the particular field of practice and/or national context.

The assessment distinguishes between the two levels of competence:

Not yet competent	Competent
Competence <u>insufficiently</u> developed Need of further development and <u>requiring guidance and supervision</u>	Competence <u>sufficiently</u> developed Performing <u>tasks without guidance at the level of EuroPsy (Specialist)</u>

3.8. In the final summative assessment, the Supervisor should summarise the available information and indicate whether, based on the available evidence, the candidate can be expected to adequately

perform the functional and foundational competences needed for independent practice. The Supervisor's judgement should be expressed as a judgement of 'competent' or 'not yet competent'.

3.9. The results of the evaluation shall be summarized in a tabular form, as indicated below.

Table. Summative assessment of functional competences

<i>Field of Practice/Specialism</i>	Specify <i>Field of Practice:</i> _____	Specify <i>Specialism</i> _____
<i>Functional Competences</i>		
A. Need identification, contract/task clarification, goal setting		
B. Planning/designing assessment, intervention, service, or product		
C. Implementing assessment, intervention, service, or product		
D. Evaluation		

Note: Indicate by X sufficiently or by - insufficiently developed competences

Table. Summative assessment of foundational competences

<i>Foundational competences</i>	
Ethics, law, professional standards - competences	
Communication and relational competences	
Continuing Professional Development – CPD competences	
Science and research competence	
Collaboration competences	
Individual and cultural differences competences	
Digital/information/communication technology competences	
Self-reflection, and self-care competences	

Note: Indicate by X sufficiently or by - insufficiently developed competences

Responsibilities of the Supervisor

3.10. The Supervisor should establish a supervision contract with the (Specialist) Psychologist-in-Training. In the contract the Psychologist-In-Training and Supervisor should agree on the: (Specialised) Field of practice and client group(s) covered; Role(s) the (Specialist) Psychologist-in-Training may take; Competences that will be developed; Responsibility of both the Supervisor and (Specialist) Psychologist-in-Training to document the supervision.

Outcomes of supervision

3.11. If the assessment after the year of supervised practice is 'not yet competent' local procedures should be followed to address the matter. Where no local appeal procedures exist, the (Specialist) Psychologist-in-Training may approach the National EuroPsy Committee for advice about the process to follow.

Appendix IV. Minimum Requirements of Continuing Professional Development (CPD)

4.1. The holders of the EuroPsy and EuroPsy Specialist Certificates are expected to maintain and further develop their level of professional competence. CPD should be achieved by means of work experience, personal and professional development activities (e.g. accredited courses and workshops, conferences, teaching/training, research and writing), and through the process of peer-intervision or supervision. On renewal of the EuroPsy the applicant has to show relevant evidence of CPD over the past period of professional practice. CPD are all activities that maintain, develop and expand the psychologists' competences that underlie the practice of the profession and are necessary to maintain the quality of the profession.

4.2. CPD may be achieved by meeting local CPD requirements, which are compatible with EuroPsy requirements. Where no local CPD requirements exist, the following are provided as guidelines for use by National EuroPsy Committees.

Professional work experience

4.3. The applicant should show evidence of professional work as a psychologist within the last seven years (revalidation period) before the application for renewal. To maintain their competences, psychologists are expected to work at least four years during the revalidation period, on average at least 400 hours per year in their (specialist) field(s) of practice.

Professional development activities

4.4. To maintain their competences, psychologists are expected to provide explicit evidence of at least 40 hours of CPD activities per year within these four years during the revalidation period (a total of 160 hours). Evidence of a variety of activities is required.

Record keeping

4.5. Registered EuroPsy Psychologists are required to maintain a record of their Continuing Professional Development. For each CPD activity the psychologist should note which competences along the EFPA framework of competences were developed.

EFPA Board of Directors

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