The Standards of the College of Pastoral Supervision and Psychotherapy

Adopted by the CPSP Governing Council
The College of Pastoral Supervision and Psychotherapy, Inc. (CPSP) offers its programs in clinical pastoral training (CPT), pastoral psychotherapy, pastoral supervision, and psychotherapy supervision as a unique form of ministry and education. Respect for the trainee’s person and his/her personal growth, professional development, and unique integration of the personal and professional functioning is central to the CPSP mission.

The Standards provide guidance to chapters and other CPSP structures as they do their work of accrediting programs, certifying and recertifying persons, and upholding ethical standards. They ensure consistency in practice and application to ensure the quality and effectiveness of CPSP-accredited training programs and proficiency of certified members.

The Standards should be read and applied in the light of the CPSP Covenant and By-laws, which they seek to implement; where The Standards fail to address specific individual circumstances, the spirit of the Standards, informed by conversations with consultants, will govern.

The Standards Committee is the proponent for ongoing, systematic review of The Standards, in collaboration with the Standing Committees (By-laws, 7.04(f)); recommendations for changes are reviewed at least annually by the Governing Council, following suitable opportunity for review and comment.

The Covenant
of the
College of Pastoral Supervision
and Psychotherapy

We, the CPSP members, see ourselves as spiritual pilgrims seeking a truly collegial professional community. Our calling and commitments are, therefore, first and last theological. We covenant to address one another and to be addressed by one another in a profound theological sense. We commit to being mutually responsible to one another for our professional work and direction.

Matters that are typically dealt with in other certifying bodies by centralized governance will be dealt with primarily in chapters. Thus, we organize ourselves in such a way that we each participate in a relatively small group called a chapter consisting of approximately a dozen colleagues. Teaching or counseling programs directed by CPSP Diplomates are the primary responsibility of the chapter.

We commit ourselves to a galaxy of shared values that are as deeply held, as they are difficult to communicate. “Recovery of soul” is a metaphor that points toward these values. We place a premium on the significance of the relationships among ourselves. We value personal authority and creativity. We believe we should make a space for one another and stand ready to midwife one another in our respective spiritual journeys. Because we believe that life is best lived by grace, we believe it essential to guard against becoming invasive, aggressive, or predatory toward each other. We believe that persons are always more important than institutions, and even the institution of CPSP itself must be carefully monitored lest it take on an idolatrous character.

We intend to travel light, to own no property, to accumulate no wealth, and to create no bureaucracy. We, as a community, are invested in offering a living experience that reflects human life and faith within a milieu of supportive and challenging fellow pilgrims.

The College of Pastoral Supervision and Psychotherapy

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100. ACCREDITATION

Accreditation is an essential function of the covenant community, the means by which we ensure the accountability and quality of training programs, and communicate their effectiveness to the public. Accordingly, pre-accreditation reflects the judgment that the resourcing of a training program justifies a reasonable expectation of a program’s effectiveness in supporting the personal and professional development described elsewhere in these Standards. Full accreditation, then, validates the existence of the organizational, training, materiel, and environmental resources required to accomplish the objectives of the training program, and the effectiveness of training. The College confers full accreditation, or reaccreditation, only on the positive recommendation of a third-party accrediting body approved by the Governing Council.

100.1 A program of clinical pastoral training or pastoral psychotherapy is immediately pre-accredited upon

100.1.1 Authorization of the program by the chapter responsible for oversight (§1120.2.3), designating the clinical supervisor, either

100.1.1.1 A certified CPSP diplomate approved to conduct training, or

100.1.1.2 A supervisor-in-training (SIT) or psychotherapy supervisory trainee in good standing with an approved training supervisor or training supervisor candidate.

100.1.2 Registration of the program on the SIT Registry by the training supervisor or training supervisor candidate, if training be conducted by a supervisor-in-training.

100.1.3 Submission of the Training Centers Data Form.

100.1.4 Payment of annual fees.

100.2 Pre-accredited programs may continue to conduct training, provided

100.2.1 The responsible chapter provides continuing oversight to the program (§1120.2.3), reporting on the program in the chapter’s annual report.

100.2.1.1 The supervisor shall report to the appropriate chapter annually, in the form prescribed by the Accreditation Oversight Committee, and as the chapter may require.

100.2.1.2 Chapter oversight and consultation to a supervisor-in-training who has conducted training in a single program for two years (or more) shall be documented and reported, in addition, to the Accreditation Oversight Committee.

100.2.2 Training Centers Data Form is current.

100.2.3 Annual fees are current.
100.2.4 The supervisor, if a supervisor-in-training, continues in good standing with an approved training supervisor or training supervisor candidate.

100.2.5 The program’s total time in pre-accredited status does not exceed five years.

100.3 Programs directed by a certified CPSP diplomate shall seek accreditation according to the procedures and timeline published by the Accreditation Oversight Committee; pre-accreditation continues as long as a training program and its diplomate are engaged with their chapter and the Accreditation Oversight Committee in the preparation and program review process.

100.4 Accredited programs that are affected by the supervisor’s inability to continue (§130.2.9) remain accredited. The chapter to which the diplomate conducting training is accountable will provide oversight, as required.

100.5 The Accreditation Oversight Committee and the General Secretary shall oversee accredited programs in transition in collaboration with the chapter (§1120.2.3).

110. The Accredited Program

An accredited training program may be established wherever access to appropriate structures for clinical pastoral training or pastoral psychotherapy training exist, including but not limited to public and private hospitals and mental health centers, parishes and congregations, counseling and psychotherapy centers, state and federal health and welfare institutions, drug rehabilitation centers, hospice centers, nursing home facilities, and urban inner-city programs. The accredited program provides a specific description of its administrative structure and lines of authority within the setting, and its compliance with all CPSP Standards. The accredited program shall provide the following essential program components:

110.1 Financial, human, and physical resources sufficient to support the programs.

110.2 A sufficient number and variety of persons in need of pastoral care and counseling so as to ensure opportunities for ministry and learning.

110.3 An advisory committee appointed by the CPSP diplomate charged with the responsibility of consulting with, evaluating, and supporting the program. Under the advisement of the diplomate’s chapter, the chapter itself may serve as the advisory committee.

120. Educational and Training Resources

The accredited program shall provide comprehensive educational resources including:

120.1 A faculty of sufficient size to fulfill program goals.
120.1.1 The faculty shall include one or more CPSP diplomates with close involvement in the administration and supervision of the programs.

120.2.2 Adjunct faculty of related disciplines may be designated for teaching and consulting.

120.2 A training curriculum congruent with the growth and education needs of the trainees, the CPSP Standards, and the CPSP Covenant.

120.3 Access to media resources and training facilities (including physical meeting space and/or teleconferencing technology) adequate for CPSP Standards.

130. Written Policies and Procedures

Accredited programs shall document relationships with both supported and supporting organizations in writing, and shall provide notice of all policies and procedures applicable to trainees and their training to both trainees and faculty. These documents shall include, but not be limited to, the following:

130.1 Formal written agreements that specify the relationship and operational agreements between the CPSP program and any other agencies that utilize the services of the program.

130.2 Policies and procedures, which shall be available to the public. All trainees and program staff shall be fully informed of their content. These documents shall include, but not be limited to, the following:

130.2.1 An admission policy that does not discriminate against persons because of race, ethnicity, national origin, class, age, physical disability, faith group background or affiliation, or sexual or gender identity, orientation or preference.

130.2.2 A financial policy that states fees, payment schedules, refunds, stipends, and benefits. [Distance learning programs may impose fees to verify trainees’ identity.]

130.2.3 A complaint and grievance procedure that incorporates the oversight of the advisory council and/or the diplomate’s chapter.

130.2.4 A policy providing for maintenance of trainee records. Trainee records are to be maintained by the training site for three (3) years in either electronic or hard-copy format. In the fourth year, only the application will be maintained to show proof of the trainee participation, including a record of completed units. All other materials are to be physically shredded or otherwise permanently destroyed. As a minimum, records to be maintained would include the following:

130.2.4.1 Application face sheet and application materials

130.2.4.2 Final evaluations from trainees and supervisor, or SIT
130.2.4.3 Copies of any disciplinary actions and complaints or grievances filed by trainees

130.2.5 A procedure for the discipline, dismissal, and withdrawal of trainees.

130.2.6 A policy of ethical conduct of trainees and program staff consistent with the CPSP Code of Ethics.

130.2.7 A policy that provides for trainee rights and responsibilities—one that adequately informs trainees regarding the requirements, procedures, and expectations associated with his/her professional role and function as a CPT trainee. This should, at a minimum, include trainees' rights to confidentiality, to be treated with respect and protected, to receive quality clinical and educational experiences, and access to trainee support services.

130.2.8 An agreement for training at the ministry site that includes but is not limited to authorization to meet with patients, parishioners, or clients; access to appropriate clinical records; informed consent with regard to teaching materials; and agreement by the trainees to abide by center policies that protect confidentiality and the rights of clients, patients, and parishioners.

130.2.9 A contingency plan for interruption of training units in progress. This plan should be in writing and filed with the chair of the advisory committee. The advisory committee and chapter are responsible, jointly, for implementing the contingency plan in order to complete current unit (§100.4).

130.2.10 Program administration.

130.2.10.1 Supervisors/training supervisors shall submit final evaluations on trainees/training supervisor candidates no later than 21 business days following the completion of the unit.

130.2.10.2 Supervisors/training supervisors shall submit the Trainee Unit Verification Form for all trainees/training supervisor candidates no later than 21 business days following the completion of the unit to the CPSP Administrative Coordinator.

130.2.10.3 Trainees in distance learning programs shall verify their identities to the supervisor’s satisfaction prior to commencing training.

140. Public Statements

The accredited program shall accurately describe the work and function of the training program. All statements in advertising, publications, recruitment, and academic calendars shall be accurate and current.
150. **Fees**

All CPSP training programs are responsible financially for fees associated with program registration and for accreditation program review.

150.1 Annual fees established by the Governing Council will reflect the differences in the variety of accredited training programs and the financial resources available to these programs.

150.1.1 Programs affiliated with clinical or service institutions (“institutional programs”) such as hospitals, hospices, or other large organizations will be assessed an annual fee based upon the sponsoring institution’s total budget.

150.1.2 Independent, non-institutional programs (such as smaller community-based, supervisory training, or teleconference-based programs) will be assessed an annual fee that reflects the financial resources available.

150.2 Accreditation expenses and review fees are the responsibility of the training program.

160. **Accreditation Process for Training Programs**

Pre-accredited programs (§100, above) exhibit the community’s commitment to clarity and transparency. Such programs operate under multiple layers of oversight that include mentoring for both the supervisor and responsible chapter by members of the Accreditation Oversight Committee. *The CPSP Accreditation Manual* provides authoritative guidance concerning every aspect of the accreditation process, in addition to the following:

160.1 Preparation for an accreditation program review must be initiated by the diplomate and her/his chapter within the following timeframes, commencing upon completion of a new program’s first unit of training:

160.1.1 Within six (6) months, a self-study must be initiated and reported through the diplomate’s chapter to the Accreditation Oversight Committee.

160.1.2 Within twelve (12) months, a program review must be scheduled to occur.

160.2 A self-study portfolio shall be created by the diplomate and chapter overseeing the training program as an aid in examining and evaluating the program. The self-study portfolio shall document the manner in which the program conforms to the minimum requirements for a training program under published CPSP Standards, and shall include assessment of the quality of training and the program's continuing efforts to improve quality outcomes. Programs offering distance learning shall demonstrate program quality, using metrics agreed
with the assigned mentor. The diplomate will advise the Accreditation Oversight Committee and engage the assigned mentor.

160.3 The convener of the chapter with oversight of the training program shall submit a letter of intent to the Accreditation Oversight Committee specifying its desire to seek accreditation status, along with the self-study portfolio. The convener and the diplomate supervisor shall be responsive to consultation from the Accreditation Oversight Committee.

160.3.1 The Committee shall review, and forward the completed accreditation portfolio to the Executive Chapter for its endorsement, with a request that the program review be performed.

160.4 The Governing Council (or Executive Chapter) shall engage with a third-party accrediting body to conduct program reviews to establish that training programs satisfy CPSP standards; method and scope for each program review shall be agreed between the Executive Chapter and the accrediting body in advance, considering the environment in which training is conducted. All reasonable expenses of the program review are the responsibility of the training program being reviewed.

160.5 When accreditation for a training program has been recommended, a certificate of accreditation will be presented at the next CPSP plenary. Following accreditation, the training program will remain accredited for the subsequent seven (7) years. The chapter of the CPSP diplomate will continue to provide oversight as required for all programs functioning under the auspices of a given chapter. (§1120.2.3)

160.5.1 The process for reaccreditation includes all steps 160.2 through 160.7, and shall be completed before the end of the current accreditation period.
200. CLINICAL PASTORAL TRAINING
Clinical Pastoral Training provides formative experience through learning pastoral practice in a clinical setting under supervision. This concept (following Anton T. Boisen) uses the case study method in theological inquiry – a study of “living human documents.” For over ninety years, CPT has developed in concert with the disciplines of medicine, the behavioral and social sciences, and theology.

Accredited programs in clinical pastoral education/training shall implement admission to training, program content and structure, and objectives for training in accordance with The Standards.

210. Program Standards for Clinical Pastoral Training
Program standards for CPT include the following:

210.1 The curriculum will provide for no less than 400 hours of supervised learning for a unit of CPT comprising a minimum of 100 hours of supervised clinical group and individual training and a minimum of 300 hours of supervised clinical experience. At least 200 hours of supervised learning is required for a half unit of CPT.

210.2 The actual practice of ministry to an appropriate variety of persons.

210.3 Pastoral supervision by a CPSP Diplomate in Pastoral Supervision or by a supervisor-in-training who is under general supervision of a CPSP Diplomate in Pastoral Supervision (Training Supervisor, or Training Supervisor Candidate, §450)

210.4 Detailed reporting and evaluation of the practice of ministry.

210.5 Participation of trainees in a peer group, ensuring that a peer group shall be composed of no fewer than three and no more than eight persons in training, to allow for a variety of creative, interpersonal relationships that facilitate growth and learning.

210.6 Didactic instruction to enable the trainee to understand the particular needs of persons receiving ministry and the variety of ways of helping those persons. Material is utilized from all sources and disciplines that assist the trainees’ integration of theological understanding and knowledge of behavior sciences with personal and pastoral functioning.

210.7 A curriculum that enables trainees to meet the objectives of CPT, utilizes the unique resources of the center, and takes into account the trainees’ interests, gifts, learning and growth needs and areas of specialization, if applicable.

210.8 An individual learning contract that relates individual objectives to CPT program objectives (§230).
210.9 A final written evaluation of the experience, both by the trainee and by the CPT supervisor.

220. Admission to Clinical Pastoral Training

An applicant’s suitability for admission to any CPSP program of CPT is a matter of judgment by the accredited program in accordance with its admission policies. Requirements for admission to CPE/CPT include but are not limited to:

220.1 A completed application.

220.2 An admission interview with a qualified interviewer for persons for an initial unit of CPT to determine readiness for clinical learning.

220.3 A thorough review of the requirements (The CPSP Certification Manual) for candidates who may aspire to certification by CPSP in clinical chaplaincy/pastoral counseling.

220.4 Fulfillment of any prerequisites that might be required by a center for a particular program.

230. Objectives of Clinical Pastoral Training

The goal of Clinical Pastoral Training is to enable the trainee to achieve high levels of competence in the art and science of clinical pastoral care and counseling. Specific objectives include the following:

230.1 Development of the uniqueness of the trainee’s person as a gift through which the trainee is able to offer a pastoral relationship to persons in crisis who might present a variety of theological and cultural perspectives.

230.2 Development of a professional identity as a chaplain/pastoral counselor through the integration of theory, theology, and the practice of pastoral care.

230.3 Development of conceptual competence in personality and psychosocial development; group and systems theory; the resource of religious symbols and values; and the psychology of the religious experience.

240. Competencies of Pastoral Clinicians

The following competencies evidence successful engagement with the learning methodology and achievement of the objectives of Clinical Pastoral Training:

240.1 Demonstrated ability to make use of the clinical process and the clinical method of learning. This includes the formulation of clinical data, the ability to receive and utilize feedback and consultation, and to make creative use of supervision.
240.2 Development of the self as a work in progress, and understanding of the self as the principal tool in pastoral care and counseling. This includes the ability to reflect and interpret one’s own life story both psychologically and theologically.

240.3 Demonstrated ability to establish a pastoral bond with persons and groups in various life situations and crisis circumstances.

240.4 Demonstration of basic care and counseling, including listening, empathy, reflection, analysis of problems, conflict resolution, theological reflection and the demonstration of a critical eye so as to examine and evaluate human behavior and religious symbols for their meaning and significance.

240.5 Demonstrated ability to make a pastoral diagnosis with special reference to the nature and quality of religious values.

240.6 Demonstrated ability to provide a critical analysis of one’s own religious tradition.

240.7 Demonstrated understanding of the dynamics of group behavior and the variety of group experiences, and effective utilization of the support, confrontation and clarification of the peer group for the integration of personal attributes and pastoral functioning.

240.8 Demonstrated ability to communicate and engage in ministry with persons across cultural boundaries.

240.9 Demonstrated ability to utilize individual supervision for personal and professional growth, and for developing the capacity to evaluate one’s ministry.

240.10 Demonstrated ability to work as a pastoral member on an interdisciplinary team.

240.11 Demonstrated ability to make effective use of the behavioral sciences in pastoral ministry.

240.12 Demonstration of increasing leadership ability and personal authority.

240.13 Demonstrated familiarity with the basic literature of the field: clinical, behavioral, and theological.
300. PASTORAL PSYCHOTHERAPY TRAINING

The term “psychotherapy” is utilized by persons who function at a most advanced level in one of the mental health fields: psychiatry, psychology, social work, pastoral counseling, professional counseling, marriage and family counseling, or nursing. The term literally means “the cure of souls,” and has been the purview of religious work since antiquity. Psychotherapy has experienced great advances since the emergence of psychoanalytic thinking originally promoted by Freud.

All forms of psychotherapy have been significantly impacted by the psychoanalytic revolution of psychology.

The minister who practices pastoral psychotherapy must demonstrate mastery of the insights and principles of both theology and the behavioral disciplines, and more specifically, the contributions of psychology. The pastoral psychotherapist serves as a treatment resource for persons who are troubled or disabled and as a guide and counselor to persons seeking greater wholeness and self-awareness. The training and certification of a pastoral psychotherapist prepares and authorizes the minister to function at this most advanced proficiency level of ministry.

Accredited training programs in pastoral psychotherapy shall implement admission to training, program content and structure, and objectives for the various levels of training in accordance with The Standards.

310. Program Standards for Pastoral Psychotherapy Training

Program standards for pastoral psychotherapy training include the following:

310.1 No less than 400 hours of supervised learning for a unit of pastoral psychotherapy training.

310.2 The actual practice of ministry to an appropriate variety of persons.

310.3 Clinical supervision by a CPSP Diplomate in Pastoral Psychotherapy or by a Pastoral Psychotherapist who is under general supervision of a CPSP Diplomate in Pastoral Psychotherapy.

310.4 Detailed reporting and evaluation of the trainee’s clinical practice.

310.5 Participation by trainees in a peer group numbering at least three, and no more than eight (§210.5), to provide for experiential learning about group processes and behavior.

310.6 Didactic instruction on marriage and family systems, social and cultural diversity, post-modern and constructivist therapies, pastoral diagnosis, abnormal behavior, and addictions, thus enabling the trainee to understand the particular needs of persons and the variety of ways of helping them.
310.7 A curriculum that enables trainees to meet the objectives of pastoral psychotherapy training, utilizes the unique resources of the center, and takes into account the trainees’ interests, gifts, learning and growth needs and areas of specialization, if applicable.

310.8 An individual learning contract that relates individual objectives to pastoral psychotherapy training objectives ($330).

310.9 A final written evaluation of the experience both by the trainee and by the clinical supervisor.

320. Admission to Pastoral Psychotherapy Training

Admission to training in pastoral psychotherapy is based upon a face-to-face interview, which results in the endorsement of a CPSP chapter that the candidate has the vocational, academic and inner resources to become a pastoral psychotherapist. Admission also has the following formal requirements:

320.1 Master of Divinity, or Masters or Doctoral (or equivalent) level degree in theology, counseling, or related disciplines from an accredited college, university, or seminary or equivalent course of study particular to the candidate’s faith tradition.

320.2 Fulfill the study requirements of sixty (60) semester hours or its equivalent in the core mental health and pastoral counseling disciplines. The academic credit must be supported by accredited colleges, universities, and programs of study. Equivalency credit can be given for consultation and subsequent examination by a CPSP-approved consultant. For equivalency, 15 contact hours will equal one semester hour.

320.3 Full-time pastoral experience.

320.4 Demonstrated personal maturity.

320.5 Completion of two units of clinical pastoral training or 800 hours of equivalent clinical training.

320.6 Acceptance into a program accredited by CPSP to offer training in pastoral psychotherapy.

330. Objectives of Pastoral Psychotherapy Training

The goal of Pastoral Psychotherapy training is to enable the trainee to achieve high levels of competence in the art and science of Pastoral Psychotherapy so as to be able to function independently as a psychotherapist and pastor. Specific objectives include the following:
330.1 Development of the uniqueness of the trainee’s person as a gift through which the trainee is able to offer an in-depth psychotherapeutic relationship for changing, sustaining and healing those in need.

330.2 The integration of the theory, theology, and practice of pastoral psychotherapy into a coherent sense of identity as a pastoral psychotherapist.

330.3 Achieving mastery of theory in the following conceptual areas: personality and psychosocial development; intensive psychotherapy and counseling; psychopathology and diagnosis; group psychotherapy and dynamics; marriage and family counseling, and the psychology of religious experience.

330.4 Development of a methodology of differential diagnosis to the practice of pastoral psychotherapy.

330.5 Development of an understanding of the dynamics of religious experiences and the implications for pastoral psychotherapy.

330.6 Development of the ability to relate the contributions of various disciplines to the psychotherapy task and to make appropriate use of professional collaboration.

340. Competencies for Pastoral Psychotherapists

340.1 Clinical competence, as evidenced by:

   340.1.1 Ability to offer an in-depth psychotherapeutic relationship for changing, sustaining and healing those in need.

   340.1.2 Effective application of differential diagnosis to the practice of pastoral psychotherapy.

340.2 Pastoral competence, as evidenced by:

   340.2.1 Demonstrated ability to synthesize and evaluate critically diverse conceptual frameworks in pastoral theology and the behavioral and social sciences as these relate to pastoral functioning.

   340.2.2 Demonstrated ability to synthesize and evaluate the contributions of various disciplines to the psychotherapy task; make appropriate use of professional collaboration.

340.3 Conceptual competence, as evidenced by:

   340.3.1 Development, integration, and articulation of a consistent theory, theology, and practice of pastoral psychotherapy, to include, as a minimum: personality and psychosocial development; intensive psychotherapy and counseling;
psychopathology and diagnosis; group psychotherapy and dynamics; marriage and family counseling; group relations, and the psychology of religious experience.

340.3.2 Ability to articulate and demonstrate integration of personal and professional strengths and weaknesses with one’s identity and function as a pastoral psychotherapist in all areas of pastoral and professional competence.

340.3.3 Ability to synthesize and evaluate critically ethical perspectives that emerge in clinical practice; consistent organization of personal and professional functioning according to the principles of *The CPSP Code of Professional Ethics.*
400. SUPERVISORY TRAINING – DIPLOMATE IN PASTORAL SUPERVISION and TRAINING SUPERVISOR

Diplomates in Pastoral Supervision and diplomates who are Training Supervisors are specialists in supervising programs of Clinical Pastoral Training who have integrated the disciplines of theology and the social/behavioral sciences, both personally and in clinical practice. Specifically, all diplomates conducting or proposing to conduct supervisory training (also known as training supervisors) must be experienced supervisors who complete a prescribed process of qualification and certification after having been certified as a diplomate. The trainee in supervisory CPT (Supervisor-in-Training) will learn the art of clinical pastoral training in a setting and with a curriculum prescribed by the Training Supervisor/Training Supervisor Candidate that enables the following:

400.1 Establishment of a unique, valued, respected, intensive mentoring relationship with a Training Supervisor or Training Supervisor Candidate who will support the modeling and personal and professional integration of the candidate.

400.2 Mastery of theories related to supervision using conceptual models from theology, social and behavioral sciences, and education.

400.3 Practice of supervision under the supervision of a Training Supervisor or Training Supervisor Candidate.

400.4 Demonstration of the integration of person, theory, theology, and practice of clinical pastoral education.

400.5 Ongoing consultation with other CPSP diplomates, supervisors-in-training, adjunct faculty and the trainee’s chapter.

400.5.1 Before offering any CPSP training, the supervisor-in-training shall participate in a consortium/peer group of supervisors-in-training, under the direction of their training supervisor(s), that meets regularly for the purposes of collaboration, sharing learning, mutual support, and setting and maintaining high standards of clinical pastoral training.

400.5.2 Each consortium/peer group shall gather together, face-to-face, along with their training supervisor(s), where it is geographically possible as often as is reasonable.

400.5.3 Peer group meetings shall be scheduled preceding each National Clinical Training Seminar (NCTS) and the Plenary when possible; training supervisor candidates are encouraged to participate in the full schedule of subsequent NCTS/Plenary activities.
410. *Admission to Supervisory Training*

This section is under discussion - please contact Krista Argiropolis, Administrative Coordinator, if you need assistance.
krista@cpsp.org.
420. Objectives of Supervisory Training

The goals of supervisory training are to provide all the resources needed to develop the uniqueness of the trainee’s persona, to be a mentor to trainees, and to learn to live and work in the dynamic and in-depth relationship milieu that characterizes Clinical Pastoral Training. Specific objectives include the following:

420.1 Attaining competence as a clinical pastoral supervisor:

420.1.1 Establishing relationships with trainees.

420.1.2 Developing appropriate curricula.

420.1.3 Learning to present one’s own unique personality and history as an instrument to facilitate the trainee’s growth, learning, and emergence as a clinician.

420.1.4 Evidencing significant learning and ability in applying knowledge of group relations from a psychodynamic perspective, in a supervisory role.

420.2 Demonstrating competence in using conceptual models from theory and practice in clinical pastoral supervisory approaches. The candidate shall demonstrate knowledge of the literature relating to the field of clinical pastoral supervision.

420.3 Demonstrating competence in individual supervision that includes:

420.3.1 The ability to supervise the trainee’s pastoral work, giving attention to unique patterns of personal and professional development; facilitating movement toward personal and pastoral identity;

420.3.2 Demonstrating sensitivity to the trainee’s psychological development, individual learning patterns, and diverse religious histories

420.3.3 Demonstrating competence in the process of defining and evaluating the trainee’s pastoral and personal strengths and challenges.

430. Competencies of CPT Supervisors and Training Supervisors

430.1 Clinical competence, as evidenced by:
430.1.1 Ability to establish effective supervisory relationships with trainees, taking into account their personal psychological development, individual learning patterns, and diverse religious histories.

430.1.2 Ability to evaluate trainees’ pastoral or supervisory work (as appropriate), and provide consultation.

430.2 Pastoral competence, as evidenced by:

430.2.1 Demonstrated ability to synthesize and evaluate critically diverse conceptual frameworks in pastoral theology and the behavioral and social sciences as these relate to pastoral functioning.

430.2.2 Demonstrated pastoral care, counseling, competence

430.3 Conceptual competence, as evidenced by:

430.3.2 Demonstrated ability to conduct a program of Clinical Pastoral Training, or a program leading to certification as a Diplomate in Pastoral Supervision or Training Supervisor (as appropriate).

430.3.3 Familiarity with and an ability to utilize group relations theory in practice.

430.4 Supervisory competence, as evidenced by:

430.4.1 Demonstrated integration of one’s unique history, theory, and theology with one’s practice of clinical pastoral supervision.

430.4.2 Demonstrated ability to choose methods of individual and group supervision appropriate to specific individuals and groups.

430.4.3 Demonstrated ability to evaluate trainees’ pastoral and personal strengths and challenges.

430.5 Administrative/leadership competence, as evidenced by:

430.5.1 Demonstrated ability to plan and administer a program of Clinical Pastoral Training, or a program leading to certification as a Diplomate in Pastoral Supervision or Training Supervisor (as appropriate).

430.6 Ability to synthesize and evaluate critically ethical perspectives that emerge in clinical practice and in supervision; consistent characterization of the principles of The CPSP Code of Professional Ethics in personal and professional functioning.

430.6.1 No one shall commence training as a supervisor-in-training, represent him/herself as a supervisor-in-training, or offer training in CPT who has not completed the application requirements (§410, above) or is not in good standing with a qualified training supervisor or training supervisor candidate. (§400)
440. Requirements for Certification

On the completion of required training and on the recommendation of the candidate’s Training Supervisor, provide evidence of

440.1 (For Diplomate in Pastoral Supervision)

440.1.1 Having completed a personal, therapeutic, psychodynamic journey in the service of self-understanding.

440.2 (For Training Supervisor)

440.2.1 Having planned, administered, and evaluated a program leading to the qualification of no less than three candidates as Diplomates in Pastoral Supervision.
500. PSYCHOTHERAPY SUPERVISORY TRAINING and CERTIFICATION AS A DIPLOMATE IN PASTORAL PSYCHOTHERAPY

Psychotherapy supervisors are specialists in supervising programs of pastoral psychotherapy who have integrated the disciplines of theology and the social/behavioral sciences, both personally and in clinical practice. The candidate in pastoral psychotherapy supervision will pursue mastery of this art and science, as follows:

500.1 Establishment of a unique, valued, respected, intensive mentoring relationship with a CPSP Diplomate in Pastoral Psychotherapy or Psychotherapy Supervisor Candidate who will support the modeling and personal and professional integration of the candidate.

500.2 Mastery of theories related to supervision using conceptual models from theology, the social and behavioral sciences, and education.

500.3 Practice of supervision under the supervision of a CPSP Diplomate in Pastoral Psychotherapy, or equivalent.

500.4 Demonstration of the integration of theory and practice of supervision into one's personal and pastoral identity, and development of his or her identity as an educator.

500.5 Ongoing consultation with other CPSP diplomates, consultants, adjunct faculty and the trainee’s chapter.

510. Admission to Psychotherapy Supervisory Training

Requirements for admission to psychotherapy supervisory training are designed for qualified persons with demonstrated pastoral, professional and clinical experience to learn the art of pastoral psychotherapy supervision. Admission to supervisory training is contingent upon a face-to-face interview, which results in the conviction by a chapter that a given candidate has the resources to become a pastoral psychotherapy supervisor. Admission also requires the following:

510.1 Certification as a pastoral psychotherapist. ($300)

510.2 Significant full-time pastoral experience.

510.3 Personal maturity and a record of professional competence.

510.4 Acceptance for psychotherapy supervisory training by a Diplomate in Pastoral Psychotherapy, and subsequent endorsement by the diplomate’s chapter.
520. Objectives of Psychotherapy Supervisory Training

The goal of psychotherapy supervisory training is to develop the uniqueness of the trainee’s persona, to be a mentor to trainees, and to learn to live and work in the dynamic and in-depth relationship milieu that characterizes pastoral psychotherapy training. Specific objectives include the following:

520.1 Attaining competence as a pastoral psychotherapy supervisor:
   520.1.1 Establishing relationships with trainees.
   520.1.2 Developing appropriate curricula.
   520.1.3 Learning to present one’s own unique personality and history as an instrument to facilitate the trainee’s growth, learning and professional development.

520.2 Attaining competence in pastoral psychotherapy supervision.

520.3 Attaining competence in individual supervision which includes:
   520.3.1 The ability to supervise the trainee’s pastoral psychotherapy work, giving attention to unique patterns of personal and professional development; facilitating movement toward personal and pastoral identity.
   520.3.2 Demonstrating sensitivity to the trainee’s psychological development, individual learning patterns, and diverse religious histories.
   520.3.3 Developing competence in the process of defining and evaluating the trainee’s pastoral and personal resources.

530. Competencies of Pastoral Psychotherapy Supervisors

530.1 Demonstrated pastoral competence

530.2 Demonstrated pastoral care and counseling competence as evidenced by certification as a pastoral psychotherapist by CPSP or another cognate group, or by meeting the criteria for pastoral psychotherapist certification in these Standards.

530.3 Demonstrated conceptual competence

530.4 Demonstrated fulfillment of the objectives of Psychotherapy Supervisory Training (§ 520).

530.5 Familiarity with and an ability to utilize group relations theory in practice.

530.6 An understanding of how one’s person is integrated with professional identity and function as a pastoral psychotherapy supervisor.

530.7 Demonstrated ability to choose methods of individual and group supervision appropriate to specific individuals and groups.
530.8 Demonstrated ability to plan and administer a program of pastoral psychotherapy training.
530.9 Familiarity with diverse conceptual frameworks in pastoral theology and the behavioral sciences as these relate to pastoral functioning.
530.10 Professional competence.
530.11 Demonstrated achievement in at least three of the following areas: academic (doctoral-level degree), research, publication, leadership in CPSP, contribution to faith group and/or community, or contribution to another mental health discipline.
530.12 Recommendation for certification by the candidate’s primary training supervisor and the sponsoring chapter.
530.13 Evidence of having completed a personal, psychodynamic-oriented psychotherapeutic investigation by a psychotherapist recognized and accepted by the candidate's training supervisor. This investigation shall be of no less than twelve months and its efficacy shall be measured by the candidate’s subsequent ability to articulate and demonstrate integration of personal and professional strengths and weaknesses, personal integrity and pastoral identity, and emotional maturity.
530.14 Ability to synthesize and evaluate critically ethical perspectives that emerge in clinical practice and in supervision; consistent characterization of the principles of The CPSP Code of Professional Ethics in personal and professional functioning.

540. Qualification of Diplomates in Pastoral Psychotherapy to Function as Training Supervisors

540.1 All diplomates in pastoral psychotherapy conducting or proposing to conduct supervisory training (training supervisors) must provide satisfactory evidence of having fulfilled the following:

540.1.1 Evidence of current state licensure or certificate to supervise, OR be approved by a cognate group to supervise in specific mental health disciplines, OR receive fifty (50) hours supervision of supervision.

540.1.2 Evidence of having completed a minimum of 30 contact hours of graduate-level coursework in clinical supervision.

540.1.3 Evidence of having provided at least 150 hours of pastoral counseling supervision.

540.2 A diplomate commencing supervisory training must have approval of the diplomate’s chapter.
540.3 Chapters with fewer than four (4) diplomate members shall consult with a sponsoring chapter prior to approving a training supervisor, and document this consultation in their annual report. (§1110.4)

540.4 Training supervisors must work in concert with other training supervisors in a consortium approved by the Certification Committee. The nature and extent of the consortium will be reviewed and approved by the Certification Committee. The consortium will provide peer support for the training supervisor as well as opportunities for peer review for pastoral psychotherapy supervisor trainees.
600. COMMON CERTIFICATION STANDARDS

CPSP offers certification to qualified individuals in the following areas: Diplomate in Pastoral Supervision, Diplomate in Pastoral Psychotherapy, Training Supervisor, Pastoral Psychotherapist, Clinical Chaplain/Pastoral Counselor, Associate Clinical Chaplain/Pastoral Counselor, Hospice/Palliative Care, and Clinically Trained Minister.

Standards for certification include standards that are common to all CPSP certifications as well as standards that are unique to each level of certification. Some of the requirements are objective. Other requirements are matters of subjective judgment regarding a candidate’s level of functioning. In general, it should be clearly understood that (1) the certification process always emphasizes a candidate’s ability to demonstrate the kind of profound personal and professional competence essential for clinical work in interpersonal relationships; (2) the completion of formal requirements is always seen in relation to such a demonstrated ability to function; and (3) certification is always a matter of judgment of one’s professional peers who are delegated representatives of CPSP.

610. Requirements for Certification

In order to seek certification in CPSP, candidates shall demonstrate the following:

610.1  Education consistent with the required educational level for the certification being sought.

610.2  Clinical training consistent with the required level of training for the certification being sought.

610.3  Documented accountability to the candidate’s faith community, or endorsement, as pastoral clinician.

610.4  Evidence of subscription to The Covenant of the College of Pastoral Supervision and Psychotherapy and commitment to be governed by The Standards and The CPSP Code of Professional Ethics, in such form as the Governing Council may, from time to time, prescribe.

610.4.1 If not submitted in conjunction with initial certification, subscription is mandatory for renewal of all certifications.

620. Reciprocity

Persons who are certified as CPE/CPT supervisors, psychotherapy supervisors, psychotherapists, chaplains/pastoral counselors (pastoral care specialists), or clinically trained ministers in other cognate groups may qualify for certification in CPSP at the corresponding level by reciprocity, on a case-by-case basis, on the recommendation of one’s chapter, with the Certification Committee granting approval.
620.1 Certifications required for admission to supervisory training, if based on reciprocity
with other cognate groups, shall be requested by the candidate and already have been
approved by the Certification Committee prior to the candidate's application to engage in
supervisory training.

630. **Equivalencies**

Equivalency for training or education requirements for any certification shall be approved by the
Executive Chapter, on the recommendation of the candidate's chapter and the Certification
Committee.

630.1 Equivalencies for education or training requirements shall be substantively similar to
the stated requirements for the desired certification.

630.2. Equivalencies required for admission to training shall be requested by the member
prior to engaging in that training.

640. **Chapter Certification Consultations**

The purpose of the consultation is to establish that the candidate has achieved the competencies
expected for the level of certification for which applying.

640.1 Prior to the consultation, the candidate shall submit to the chapter all written and
video materials required by CPSP Standards for the level of certification sought. These
materials shall reflect professional-level content, form, and organization.

640.1.1 The chapter may decline to conduct the pre-certification consultation if, in
their judgment, the candidate is not prepared.

640.2 Candidates seeking certification first must be reviewed by their chapter to determine
readiness to meet with the Certification Committee.

640.2.1 Certified chapters with no less than four members certified at the same level
as the certification sought by the candidate shall conduct the initial stage of the
consultation review.

640.2.2 Chapters with fewer than four members certified at the level sought by the
candidate shall proceed to establish a consultation with a chapter certified to provide
the consultation. (§1120.9).

640.3 The consultation may address any issues covered in the candidate’s written materials
and other personal or professional matters that are relevant to the candidate’s ability to
function at the level for which he or she seeks certification.
640.4 Upon completion of the committee’s deliberations, the candidate shall be immediately informed of their recommendation.

640.4.1 Candidates recommended to proceed to the certification review process will be reported to the Certification Committee. The Chapter Consultation Report shall address, among other items, the chapter’s understanding of the candidate’s strengths, weaknesses, clinical and professional functioning, and shall include the candidate’s written materials.

640.4.2 If the chapter’s consultation committee determines, following its review, that the candidate needs further professional preparation and development, the chapter will continue to support and guide the candidate in addressing the deficiency.

640.4.3 When the chapter is satisfied with the candidate’s progress in remediating all deficiencies, the chapter may invite the candidate to resume the consultation process at the initial stage (§640.1).

650. Certification Review

650.1 Candidates recommended to proceed to the certification review shall

650.1.1 Pay the appropriate fee to the CPSP Treasurer.

650.1.2 Formally request to meet with the certification review panel not later than 90 days prior to appearing for certification review.

650.1.3 Submit the materials previously reviewed by the candidate’s chapter to the Certification Committee not later than 90 days prior to appearing for certification review.

650.2 The candidate’s materials will be referred to a certification review panel, appointed by the Certification Committee.

650.2.1 Certification review panels will be scheduled, EXCEPT for sub-specialty certifications in hospice and palliative care and clinically trained ministers, for which the records review is the final stage.
700. CERTIFICATION AS CLINICAL CHAPLAIN/ PASTORAL COUNSELOR

Certification as Clinical Chaplain/Pastoral Counselor represents mastery of basic, broad-spectrum pastoral counseling; it does not signify competence to offer psychotherapy, but rather competence to offer supportive and crisis-oriented pastoral counseling, informed by in-depth clinical and cognitive understandings of the principles found in psychodynamic psychotherapy.

The Clinical Chaplain/Pastoral Counselor is equipped to distinguish the boundaries, authority, role and task that correspond to these respective roles. The chaplain role is defined by its context in the institution – religious, healthcare, military or civic – in which it is found; the pastoral counselor role is specific to a ministry setting, within a faith community.

Those seeking this certification commit to developing their skills and wisdom through continuing education and ongoing clinical review of their work as pastoral care specialists.

Equipped by training to utilize their own selves to offer and establish significant pastoral counseling relationships, clinical chaplains/pastoral counselors will find, in chapter life, a context in which they will be able to recognize the strengths and limits of their experience. Their practice of pastoral care must always be informed by and held accountable to a dynamic and integrative theology.

A candidate, in consultation with his/her chapter, may request a formal certification consultation to determine the candidate’s readiness to present themselves and their work for certification as a Clinical Chaplain/Pastoral Counselor (§ 630).

710. Competencies of Clinical Chaplain/Pastoral Counselor

710.1 Clinical competence, as evidenced by:

710.1.1 Ability to screen, assess, and diagnose the needs of persons and groups from a clinical/pastoral/spiritual perspective.

710.1.2 Ability to relate effectively to diverse persons and groups in their crisis, distress, loss, grief, or perplexity.

710.2 Theological competence, as evidenced by:

710.2.1 Demonstrated ability to reflect deeply on core themes in the theology and ethos of one’s own belief system.

710.2.1.1 (For Associate Clinical Chaplain/Pastoral Counselor) Demonstrated ability to apply and analyze core themes in the theology and ethos of this belief system, with reference to pastoral care.
710.2.1.2 (For Clinical Chaplain/Pastoral Counselor) Demonstrated ability to synthesize and evaluate critically core themes in the theology and ethos of this belief system, with reference to pastoral care. Completion of a master’s- or doctoral-level degree (or equivalent) in theology, religion, counseling, or a behavioral or social science discipline from an accredited college, university, or seminary, or equivalent course of study particular to the candidate’s faith tradition may satisfy this requirement.

710.2.2 Ability to analyze the nature and quality of religious symbols and spiritual values from a wide variety of theological and cultural perspectives.

710.3 Conceptual competence, as evidenced by:

710.3.1 Completion of four-year degree.

710.3.2 Development, integration, and articulation of a consistent theory and practice of clinical pastoral care, incorporating insights from the behavioral and social sciences; familiarity with a bibliography that informs and supports one's clinical practice. Ordinarily, achievement of suitable competence (proficiency) may require training, as follows:

710.3.2.1 (For Associate Clinical Chaplain/Pastoral Counselor) A minimum of 2 units of CPT or 800 hours of equivalent clinical training, or

710.3.2.2 (For Clinical Chaplain/Pastoral Counselor) A minimum of 4 units of CPT or 1,600 hours of equivalent clinical training.

710.4 Ability to articulate and apply consistently in personal and professional functioning the principles of The CPSP Code of Professional Ethics.

720. Certification of Clinical Chaplain/Pastoral Counselor and Associate Clinical Chaplain/Pastoral Counselor

A candidate who completes requirements for Clinical Chaplain/Pastoral Counselor or Associate Clinical Chaplain/Pastoral Counselor is eligible to meet with his/her chapter for examination of competence and proficiency (§640. If the candidate fulfills criteria for certification, and if the candidate is fully informed and committed to all expectations of participation in chapter life, then the Chapter shall recommend the candidate for certification as a Clinical Chaplain/Pastoral Counselor or Associate Clinical Chaplain/Pastoral Counselor (§640.4.1.

Candidates for Clinical Chaplain/Pastoral Counselor and Associate Clinical Chaplain/Pastoral Counselor must submit supporting materials as required by the chapter, to include, as a minimum, those materials required by The CPSP Certification Manual.
800. CERTIFICATION AS PASTORAL PSYCHOTHERAPIST

The term “psychotherapy” is utilized by persons who function at a most advanced level in one of the mental health fields: psychiatry, psychology, social work, pastoral counseling, professional counseling, marriage and family counseling, or nursing. The term literally means “the cure of souls,” and has been the purview of religious work since antiquity. Psychotherapy has experienced great advances since the emergence of psychoanalytic thinking originally promoted by Freud.

All forms of psychotherapy have been significantly impacted by the psychoanalytic revolution of psychology.

The minister who practices pastoral psychotherapy must demonstrate mastery of the insights and principles of both theology and the behavioral disciplines, and more specifically, the contributions of psychology. The pastoral psychotherapist serves as a treatment resource for persons who are troubled or disabled and as a guide and counselor to persons seeking greater wholeness and self-awareness. The training and certification of a pastoral psychotherapist prepares and authorizes the minister to function at this most advanced proficiency level of ministry.

810. Requirements for Certification as Pastoral Psychotherapist

On the completion of required training and on the recommendation of the candidate’s primary trainer, provide evidence of

810.1 Having completed a minimum of 1,650 hours of pastoral psychotherapy practice with a minimum of 250 hours of clinical supervision, preferably with two or more CPSP diplomates in pastoral psychotherapy.

810.2 Having completed a personal, psychodynamic-oriented psychotherapeutic investigation by a psychotherapist recognized and accepted by the candidate’s trainer. This investigation shall be of no less than twelve months and its efficacy shall be measured by the candidate’s subsequent ability to articulate and demonstrate integration of personal and professional strengths and weaknesses, personal integrity and pastoral identity, and emotional maturity.

820. Certification as Pastoral Psychotherapist

A candidate who completes requirements for Pastoral Psychotherapy is eligible to meet with his/her chapter for examination of competence and proficiency (§640). If the candidate fulfills criteria for certification, and if the candidate is fully informed and committed to all expectations of participation
in chapter life, then the chapter shall recommend the candidate for certification as a Pastoral Psychotherapist (§640.4.1).

Candidates for certification as a Pastoral Psychotherapist must submit supporting materials as required by the chapter, to include, as a minimum, those materials required by The CPSP Certification Manual.
900. SUBSPECIALTY CERTIFICATION IN HOSPICE AND PALLIATIVE CARE

Recognizing the development of specialized areas, or subspecialties, within clinical chaplaincy, CPSP certifies members’ qualification for service in the clinical subspecialty of Hospice and Palliative Care.

910. Competencies in Hospice and Palliative Care Subspecialty

The candidate for certification must provide evidence for having mastered the theory and practice of pastoral care in hospice and/or palliative care settings, as follows:

910.1 Demonstrated understanding of the nature, scope, and process of care delivery of the subspecialty of hospice and palliative care.

910.2 Demonstrated understanding of the process for identifying patients for whom hospice and palliative care is appropriate.

910.3 Demonstrated understanding of rights and responsibilities of hospice and palliative care patient and family.

910.4 Demonstrated understanding of and participates in the team process for involving patients and family in decision making, including exploring treatment options, making end of life decisions, completing advance directives, and the role of surrogate decision makers.

910.5 Demonstrated ability to facilitate communication between members of the care team and the patient/family, especially during patient/family conferences.

910.6 Demonstrated understanding of and ability to assess the patient’s and family’s values and beliefs, and religious, spiritual, and cultural practices, along with the ability to incorporate these into the care plan.

910.7 Demonstrated understanding of and participation in the interdisciplinary care team, including ongoing evaluation of the care plan, integration of pastoral care into it, along with adapting the care plan to the changes in the spiritual, cultural, pastoral, and religious needs of the patient and family.

910.8 Demonstrated ability to facilitate the participation of the patient’s and family’s faith group.

910.9 Demonstrated understanding of and the ability to facilitate the bereavement support and follow-up process, along with the knowledge of appropriate referral resources.

910.10 Demonstrated basic, minimum understanding of the dying process, along with symptom and pain management goals and methods.
910.11 Demonstrated understanding of the psychological, social, and emotional aspects of the disease process, the dying process, and the process of coping with pain, along with the ability to integrate these concepts into the plan of care as it relates to providing pastoral care.

910.12 Demonstrated understanding of information keeping procedures including privacy and security of health information, completeness and accuracy of record keeping, and continuity of information across the palliative care or hospice team.

920. Requirements for Hospice and Palliative Care Certification

920.1 Candidates for certification in the hospice and palliative care subspecialty must complete a qualifying program of training or experience, either

920.1.1 An accredited formal unit of or fellowship in clinical pastoral education in a hospice or palliative care setting, including palliative care/hospice interdisciplinary team case conferences, or

920.1.2 A mentoring/case conference/group process model under mentoring of one or more chaplains or pastoral counselors certified in the subspecialty of hospice and palliative care, to include palliative care/hospice interdisciplinary team case conferences.

920.2 Candidates for certification as a Clinical Fellow in Hospice and Palliative Care must

920.2.1 Be currently certified as Clinical Chaplain by CPSP.

920.2.2 Have completed 400 hours of training (to include 40 hours in interdisciplinary team case conferences) as described in §920.1 (above).

920.3 Candidates for certification as Associate Clinical Fellow in Hospice and Palliative Care must

920.3.1 Be currently certified as Clinical Chaplain or Associate Clinical Chaplain by CPSP.

920.3.2 Have completed 200 hours of training (to include 20 hours in interdisciplinary team case conferences) as described in §920.1 (above).

930. Certification in Hospice and Palliative Care Subspecialty

A candidate who completes requirements for subspecialty certification in hospice and palliative care is eligible to meet with his/her chapter for examination of competence and proficiency (§640). If the candidate fulfills criteria for certification, and if the candidate is fully informed and committed to all expectations of participation in chapter life, then the chapter shall recommend the candidate for certification as a Clinical Fellow in Palliative Care or Clinical Fellow in Hospice and Palliative Care.
or Associate Clinical Fellow in Palliative Care or Associate Clinical Fellow in Hospice and Palliative Care, as appropriate (§640.4.1, 650.2.1).

Candidates for subspecialty certification in palliative care or hospice and palliative care must submit supporting materials as required by the chapter, to include, as a minimum, those materials required by *The CPSP Certification Manual.*
1000. STANDARDS FOR CLINICALLY TRAINED MINISTERS

Clinically Trained Minister is a category of ordained clergy who have received basic clinical training in addition to their theological education and who, in their pastoral work, integrate the insights of clinical training into their pastoral care, counseling, and assessment of parishioners or congregants.

The trainee in clinically trained ministry will pursue mastery of this art and science in a setting and with a curriculum to enable the following:

1000.1 Establish a unique, valued, respected and intensive relationship with a CPSP Diplomate or supervisor-in-training who will supervise and support the modeling and the personal and professional integration of the candidate.

1000.2 Complete a supervised clinical internship as a clinically trained minister, which normally will be one unit of CPT.

1000.3 Receive didactic instruction to enable the trainee to understand the particular needs of persons receiving ministry and the variety of ways of helping such persons.

1010. Admission to Clinically Trained Minister Training

An applicant’s suitability for admission to clinically trained minister training is a matter of judgment by the accredited program in accordance with its admissions policies. Core requirements for admission to training are outlined in §220.

1020. Competencies of Clinically Trained Ministers

1020.1 Clinical competence, as evidenced by:

1020.1.1 Demonstrated ability to make a basic clinical/pastoral/spiritual assessment with special reference to understanding the nature and quality of religious symbols and spiritual values.

1020.1.2 Demonstrated ability to relate with personal and professional proficiency to persons in crisis who may represent a variety of theological and cultural perspectives.

1020.2 Conceptual competence, as evidenced by:

1020.2.1 Demonstrated knowledge of the core bibliography, including but not limited to: crisis intervention theory and practice; grief and loss; interdisciplinary and interfaith patient care; spiritual diagnosis; group and family systems theory and behavior; gender issues in pastoral care; and ethical issues and boundaries in pastoral care.
1020.3 Evidence of high ethical commitment, including absolute respect for the worth and rights of persons and an understanding and assent to *The CPSP Code of Professional Ethics*.

1030. **Requirements for Certification of Clinically Trained Ministers**

1030.1 Evidence of a minimum of 400 hours of CPT and a Master of Divinity, or Masters or Doctoral (or equivalent) level degree in theology, counseling, or related disciplines from an accredited college, university, or seminary.

1030.2 Ordination, consecration, or other recognition as a minister by one’s faith group.

1030.3 Intensive personal assessment by a sponsoring CPSP chapter.

1040. **Certification of Clinically Trained Ministers**

A candidate who completes requirements for Clinically Trained Minister is eligible to meet with his/her chapter for examination of competency and proficiency (§640). If the candidate fulfills criteria for certification, and if the candidate is fully informed and committed to all expectations of participation in chapter life, then the chapter shall recommend the candidate for certification as a Clinically Trained Minister (§650.2.1).

Candidates for Clinically Trained Minister must submit supporting materials as required by the chapter, to include, as a minimum, those materials required by *The CPSP Certification Manual*. 
1100. STANDARDS FOR CPSP CHAPTERS

CPSP members organize themselves in such a way that each participates in a small group called a chapter consisting of six to twelve colleagues.

The essential spirit of CPSP is to know others and to be known by others. Full accountability for both professional practice and personal conduct is assured. Members monitor the professional competency of all activities, provide consultation whenever needed, and assess certification and membership requirements.

Chapters meet and function according to The Standards, in accordance with the By-Laws. They regularly meet (an average of at least 2 hours per member per year) and function as a chapter in a manner that is congruent with and for the purposes expressed in the CPSP Covenant, and not as a joint, combined, or multiple organizational membership group.

Chapters that lack the number of certified members (at any level) required to certify or to review members for recertification shall establish a relation with another chapter for consulting, mentoring, and certification or recertification. This sponsoring relationship shall be renewed annually by agreement of both chapters, in consultation with the General Secretary and/or the Certification and Promotion of Chapters Committee.

Chapters will function freely, creatively and with autonomy while being subject to the authority of the Governing Council.

1110. Membership in Chapters

1110.1 Chapter membership shall consist of no fewer than six (6) and no more than twelve (12) persons. Requests for exception to the minimum number requirement must be submitted to the General Secretary in writing, and may be approved, at his/her sole discretion.

1110.2 A chapter must have at least four members certified at (or above) any certification level in order to recommend members at that level for annual recertification.

1110.3 Chapters may admit other pastoral persons (“Other Members”) into their membership as the chapter sees fit.

1110.4 In chapters with fewer than four members at a given level of certification, the certified person(s) shall request a consultation with a sponsoring chapter, with the approval of the Certification of Individuals Committee. This consultation must be documented in the chapter’s Annual Report.

1110.5 Persons in training will be accountable to their clinical supervisor’s chapter; trainees shall not be members of the chapter of which their trainer/supervisor is a member.
1110.6 Chapter names shall be identifiable as a point on a map of a region or state, which may not be deemed by some as offensive or discriminatory.

1120. Duties of Chapters

Each chapter will function in response to the needs for ministry and training of the community. Chapters have the following duties and obligations:

1120.1 To select a convener to oversee the scheduling of chapter meetings, coordination and general operation of the chapter, including accreditation program reviews, and communication with the regional representative and the Executive Chapter.

1120.2 To provide support, guidance, full accountability, and consultation for its members.

\[1120.2.1\] Advise and consent on a member’s entry into supervisory training (§400.5, 410), psychotherapy supervisory training (§500.5, 510), or undertaking to function as a training supervisor (§410.1) or supervisor of psychotherapy training (§540.2, 540.3).

\[1120.2.2\] Advise and consent on a supervisor-in-training commencing training under a diplomate member of the chapter approved as training supervisor (§400.5) or a candidate for psychotherapy supervisory training commencing training under a diplomate member of the chapter approved to conduct training (§510.4).

\[1120.2.3\] Oversight of training programs conducted by chapter members (both diplomates and supervisors-in-training) is the primary responsibility of the chapter. This includes authorizing the establishment of a training program (§100.1.1), oversight of the self-study (§160.2-160.3), participation in the program review (§160.4-160.7), and ongoing supervision (§160.8).

\[1120.2.4\] Conduct certification consultations for chapter members (§630), provided chapter certification (§1130) is current, or consultants participate as required (§630.2.2).

1120.3 To provide timely consultation to trainees functioning under their auspices.

1120.4 To submit an Annual Chapter Report, as required.

1120.5 To work to resolve any grievances that are filed and, if unresolved, will refer those grievances to the Governing Council.

1120.6 To foster participation of all members in CPSP activities, including Plenary and National Clinical Training seminars.

1120.7 To communicate needs and concerns to their Chapter of Diplomates and Chapter of Chapters representatives.
1120.8 To sponsor at least one member (preferably its convener) to attend the annual Plenary and regional NCTS gatherings.

1120.9 Sponsoring chapters shall provide consultation, mentoring, and certification consultations for the sponsored chapter, by annual agreement.

1130. Certification of Chapters

Each chapter will be certified annually to perform the duties of a chapter by the Governing Council, on the recommendation of the Certification and Promotion of Chapters Committee, based on the following:

1130.1 Submission of a Chapter Annual Report that attests to

1130.1.1 Participation in the governance, through the Regional Cluster of Chapters.

1130.1.2 Documented re-certification review of all certified members.

1130.1.3 Consultation with an outside consultant within three (3) years, or as needed.

1130.1.4 Effective oversight of training programs, to include conduct of Program Review(s), as required, for training program accreditation.

1130.1.5 Report on chapter meetings.

1130.1.6 Chapter support for members’ professional development.

1130.1.7 Members’ participation and/or leadership in CPSP-wide events.

1130.1.8 Self-assessment of chapter life.

1130.1.9 Plans for continuing professional development.

1130.2 Chapters may be recommended for recertification either unconditionally, or with conditions.

1130.3 Sponsored chapters will submit reports as required by the Certification and Promotion of Chapters Committee, but may not conduct certification consultations for their members or annual recertification, except as provided above (§640.2.2). Any necessary re-certifications shall be reviewed in consultation with the sponsoring chapter.
1200. GLOSSARY

The By-Laws of The College of Pastoral Supervision and Psychotherapy (adopted November 14, 2014), Article I, provide the correct usage and authoritative interpretation of terms distinctive to this organization. Additional terms, used in these Standards, follow.

1210. Added Terms, Training Relationships

CPSP Diplomates are persons who have demonstrated that they function at advanced levels of expertise as a Supervisor of Clinical Pastoral Training or Pastoral Psychotherapy training, or both, and who have been duly examined, initially certified, and annually re-certified for these functions by CPSP in accordance with CPSP Standards. Distinctions, based on training, experience, fulfillment of added requirements, and successful reviews are made for the following:

1210.1 Training Supervisor Candidate (TSC) designation is reserved for experienced supervisors who have commenced the process (§400-410) to become a training supervisor, but have not yet been approved.

1210.2 Psychotherapy Supervisor Candidate (PSC) designation is reserved for certified pastoral psychotherapists (§500-510), or diplomates who have not been approved to supervise programs in pastoral psychotherapy, who are qualifying (§540.1-540.5) to offer training in pastoral psychotherapy.

1210.3 Supervisor-in-Training (SIT) designation is reserved for certified clinical chaplains who have been approved to undertake supervisory training (§410).

1220. Added Terms, Hospice and Palliative Care

1220.1 CPSP Clinical Fellow in Palliative Care or CPSP Clinical Fellow in Hospice and Palliative Care (FHPC) designations are reserved for certified clinical chaplains who are certified, in addition, in the subspecialty of hospice and palliative care.

1220.2 CPSP Associate Clinical Fellow in Palliative Care or CPSP Associate Clinical Fellow in Hospice and Palliative Care designations are reserved for certified clinical chaplains or associate clinical chaplains who are certified, in addition, in the subspecialty of hospice and palliative care.
1300. REVIEW OF STANDARDS
The Standards Committee is the proponent for ongoing, systematic review of The Standards, in collaboration with the Standing Committees (By-laws, 7.04(f)).

The Standards Committee reviews the annual reports submitted by both training programs and chapters (§1120.4) to assess whether accreditation standards are adequate to evaluate the quality of training provided; the Committee invites feedback from the Certification Committee concerning their assessment of the state of training, as evidenced by candidates appearing for certification during the previous year.

1310. Procedures
The Standards Committee conducts its review according to an annual cycle.

1310.1 Following the Fall meeting of Governing Council, the Committee joins the Standing Committees in reviewing the contents of their annual report procedures, and offers consultation on revisions that would improve their documents’ fitness for the purpose of fulfilling the requirements of this chapter.

1310.2 In December, the Standards Committee reviews the requirements for data sharing with the Standing Committees.

1310.3 In January, the Standards Committee receives reports from the Standing Committees for review. Following review, the Committee shares opportunities for improvement with the committee(s) concerned.

1310.4 Issues that might eventuate in revisions to CPSP standards are reported to Governing Council for their consideration (March).

1310.5 Following Governing Council (April-May), the Standards Committee drafts language to effect Governing Council guidance, referring the text to the Executive Chapter for review.

1310.6 With Executive Chapter concurrence, proposed changes are published on the CPSP website (www.cpsp.org); publication is announced, in addition, by an e-mail to the membership, inviting their response.

1310.7 The Standards Committee reviews all comments (August), incorporating changes, as appropriate.

1310.8 Final text of proposed changes is reported to members of Governing Council at least 30 days in advance of their Fall meeting, for their consideration.