Table 4: Competencies for CBTp Training		
Assessment of	Ability to assess learning needs through consideration of both existing skill-level of learners and context within	
Learning Needs	which CBTp or CBTp-informed care is to be provided.	
	Awareness of attitudes that may influence working with individuals who experience psychosis (e.g., misperception	ons
	related to psychosis, biases, stigma related beliefs) and ability to address underlying attitudes.	
	Experience having provided CBTp in a variety of contexts and having provided supervision or consultation to	
	learners with varying levels of skill and experience. (This competency standard may be waived, as it is less	
	applicable, for those trainers who have extensive experience within a particular context and are only providing	
	training within that limited particular context. For example, this would include providers of CBTp in an inpatient	
	setting who are providing training only within an inpatient setting, or those from a community setting who are on	าly
	providing training within a similar community setting)	
Training to	Awareness and familiarity with existing competency standards, such as those proposed above by the NACBTPN, b	y
Competence	Roth & Pilling (2013) and Morrison & Barratt (2010)	
Standards	Ability to develop didactic and experiential training materials to cover all of the key competencies in CBTp	
Specific Training	Ability to engage an audience and to keep their attention	
Skills	Ability to model principles of normalization and	
	Awareness of reactions of learners and ability to adjust content and pacing of training as required (e.g., to add in	
	material to address gaps in knowledge or to remove material that is redundant)	
	Ability to address questions related to theory and application of skills related to various case presentations and common comorbidities	