



**COSCA (Counselling & Psychotherapy in Scotland)**  
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# COSCA VALIDATION OF COURSES OFFERING A SPECIALIST COURSE

## REPORT OF THE COSCA ASSESSOR

*Please indicate where additional information is included and clearly mark all additional paperwork with the relevant Section number.*

<b>COSCA ASSESSOR</b>
Name of COSCA Assessor:
Address
Post Code
Telephone No.
Email address
Name of Organisation applying for Validation
Contact Person within the organisation
Dates of Contact with the Applicant
Date of Submission of the Report
Title of the Course:
Validation Application for: Please ✓ as appropriate  Module 1 <input type="checkbox"/> Module 2 <input type="checkbox"/> Module 3 <input type="checkbox"/> Module 4 <input type="checkbox"/> Certificate/Course <input type="checkbox"/>

Date of Receipt:	
Date to CVP:	

**1. ETHICS AND PRACTICE (Please refer to Section A, Point 1 of the Guidelines)**

**1.1 Please comment on the information participants had received in relation to Ethics and Practice, equal opportunities and anti-discriminatory policies, grievance and complaints procedures and your role and accessibility.**

**1. TRAINERS (Please refer to Section A, Point 2.2 and Point 3 of the Guidelines)**

**2.1 Please give details of the outcomes of the meetings with the course trainers.**

**2.2 Which trainers did you observe in the delivery of the course?**

**2.3 Please comment on the effectiveness of the provisions for trainer support, supervision and development.**

**3. TRAINER:PARTICIPANTS RATIO (Please refer to Section A, Point 4 of the Guidelines)**

**3.1 Please detail the ratio of trainer:participants on this course and, where applicable, comment on the provision for dealing with groups of more than 15 participants.**

**4. COURSE MONITORING (Please refer to Section A, Point 5 of the Guidelines)**

**4.1 Please comment on how the overall structure, method of delivery and continued appropriateness for the target group is being reviewed.**

**5. RESOURCES (Please refer to Section A, Point 6 of the Guidelines)**

**5.1 Please comment on the setting and resources available indicating if you consider them satisfactory for the training being delivered.**

**6. COURSE STRUCTURE AND CONTENT (Please refer to Section A, Points 7 of the Guidelines)**

**6.1 Please comment on the consistency of the teaching/learning with the described Aims, Learning Outcomes, Range, Method and Activities.**

**6.2 Please comment on when and how participants were given detailed information about the Aims, Learning Outcomes, Range, Methods and Activities.**

**6.3 Please comment on how familiar the trainers appeared to be with the stated Aims, Learning Outcomes, Ranges, Methods and Activities.**

**6.4 Please detail any changes made to the stated Aims, Learning Outcomes, Ranges, Methods and Activities during delivery and comment on how decisions on changes were agreed and the effect of the changes.**

**6.5 Please comment on the methods of delivery used in meeting the Aims, Learning Outcomes, Ranges, Methods and Activities.**

**6.6 Please comment on how comfortable trainers appeared to be with each other, the participants and the delivery method of the different parts of the course.**

**7. ASSESSMENT (Please refer to Section A, Point 9 of the Guidelines)**

**7.1 How and when was the framework for assessment clearly and accurately communicated to participants.**

**7.2 Please comment on how familiar the trainers appeared to be with the assessment framework of the course and state if the trainers were in agreement about the framework for assessment and the assessment outcomes.**

**7.3 Please comment on how the assessment was carried out and the feedback given.**

**7.4 Please detail any changes to the stated formative and summative assessment framework, how these changes were agreed and the effect on the participants.**

**7.5 How did the assessment process support self-reflection and self-assessment in participants?**

**7.6 Please comment on how ongoing feedback was provided to participants.**

**7.7 What measures were in place to ensure that all participants were equally and fairly treated in the process of assessment?**

**8. TIMING AND SPACING (Please refer to Section A, Point 10 of the Guidelines)**

**8.1 Please state how the above was communicated to participants.**



**9. ATTENDANCE (Please refer to section A, Point 11 of the Guidelines)**

**9.1 Please comment on the level of attendance of participants during the delivery of the course.**

**10. SELECTION (Please refer to Section A, Point 12 of the Guidelines)**

**10.1 Please comment on the selection procedure (where applicable) indicating how it implements equal opportunities and anti-discriminatory policies.**

**11. APL/APEL (Please refer to Section A, Point 13 of the Guidelines)**

**11.1 Please comment on the procedures for establishing APL/APEL.**

## 12. ADDITIONAL COMMENTS

Please comment on any concerns, specific issues or any particular aspect of the course you wish to draw to the attention of the CVP.

## 13. RECOMMENDATION AND CONCLUSIONS

Please state whether you recommend that this course should receive Full Validation. If you decide not to recommend the course for Full Validation, please state your reasons below.

**Signature of COSCA Assessor:**

**Name (Please print):**

**Date:**