Credentialing Standards for the Registered Play Therapist

APT Professional Credentialing Program

This revision is effective as of July 1, 2019, and supersedes all previous versions.

APT may revise its Credentialing Program and its criteria, standards, process, and other aspects of the program at its sole discretion.
Credentialing Standards for the Registered Play Therapist (RPT) Credential

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All approval determinations are made at the sole discretion of APT based on all information received and reviewed, and that APT may approve or deny applications or renewals based on any and all information received by it during the application and renewal process or otherwise, including information that may be obtained independently or from third parties.
Credentialing Standards for the Registered Play Therapist (RPT) Credential

Mission

The mission of the Association for Play Therapy (APT), a national professional society in the United States, is to promote the value of play, play therapy, and credentialed play therapists. To satisfy this mission, APT will advance the psycho-social development and mental health of all people through play and play therapy by promoting and supporting those programs, services, and related activities that promote the:

- understanding and valuing of play and play therapy;
- effective practice of play therapy through training, research, and support;
- recognition, incorporation, and preservation of diversity in play therapy; and
- development and maintenance of a strong professional organization to accomplish these objectives.

We confer the Registered Play Therapist™ (RPT) and Registered Play Therapist-Supervisor™ (RPT-S) credentials upon those licensed clinical mental health professionals to help consumers identify those with specialized training and experience in play therapy.

Program Intent

The intent of the APT Credentialing Program is to develop national standards for the competent practice of play therapy and confer the Registered Play Therapist (RPT), Registered Play Therapist–Supervisor (RPT-S), and School Based-Registered Play Therapist (SB-RPT) to those mental health professionals who meet these national standards.

This is accomplished by integrating play therapy instruction, clinical experience, and supervision. The APT Credential is achieved by completing a sequential 3-phase approach that builds upon a completed graduate degree, and requires depth and breadth of training, experience, and supervision to increase play therapy competencies.

The updated credentialing standards, established in 2019, focus on promoting professional accountability and require ongoing professional growth and development that ultimately improve mental health services to the most vulnerable populations, especially children.

Sequential Three-Phase Approach

APT has developed a three-phase approach for the appropriate obtention and documentation of play therapy instruction, clinical experience, and supervision that provides the optimal training experience (intentionality and integration) for developing well-rounded play therapy clinicians.

The three-phase approach is in line with the educational/developmental model of how psychotherapists develop in knowledge, skills, and personal capacities. In order to obtain competency in the practice of play therapy, direct instruction must be followed by periods of application to clinical cases accompanied by supervision.

Successful completion of the credentialing requirements demonstrates the following:

- Instructional, clinical experience, and supervision hours must be accrued in a time period of no less than two (2) years and no more than seven (7) years.
- Each phase requires the completion and documentation of a minimum number of hours in play therapy instruction, clinical experience, and supervision prior to progressing to the next phase.
- All three phases must be completed before submitting application.

This process is designed to aid in obtaining comprehensive knowledge of the theories and clinical skills required for the competent practice of play therapy.
Application & Annual Fees

Applications are welcome upon the completion and documentation of all credentialing requirements. An RPT application will remain open for a maximum of 12 months after submission. Once earned, the credential must be renewed annually (see Appendix I for renewal criteria and process).

Applicants must first apply for, be granted, and maintain the RPT credential in good standing for minimum of three (3) years prior to applying for the RPT-S credential.

<table>
<thead>
<tr>
<th>RPT Application Fee</th>
<th>RPT Annual Renewal Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Member</td>
<td>Non-Member</td>
</tr>
<tr>
<td>$140.00</td>
<td>$270.00</td>
</tr>
</tbody>
</table>

Application fees: The non-refundable application fee of $140.00 (or $270 for non-members), includes complimentary initial 12-month activation fee.

Annual Renewal fees: Renewal fees are billed and due annually upon your anniversary date (see Appendix I for renewal criteria and process).

General Instructions

1. Review the APT Credentialing Standards. APT reserves the right to unilaterally revise, from time to time, the terms and conditions, this Guide, governing policies, approval and renewal criteria, and other facets of this agreement.
2. Complete, sign, and date the application, including attestation.
3. Attach the following:
   a. License,
   b. Graduate Transcripts,
   c. Completed and signed Criteria Verification Forms with corresponding documentation for each phase.
4. Submit your application and all attachments to:

   Alexandra Jarrell, Continuing Education and Credentialing Coordinator
   Association for Play Therapy, 401 Clovis Avenue, Suite 107
   Clovis, CA 93612
   559-298-3400 x4 ajarrell@a4pt.org

5. You will receive a confirmation email from APT upon receipt of your application. Incomplete applications will not be reviewed.
6. APT will notify applicants within 6 – 8 weeks via email regarding the status of their application.
7. Should there be a change in your licensure status at any time during the application process or once approved, you are required to immediately notify APT by certified, registered, or receipted mail.
8. If after reviewing the Credentialing Standards you continue to have questions, please do not hesitate to contact us.
**Program Criteria Overview**

This chart summarizes the criteria that applicants must satisfy to earn the Registered Play Therapist (RPT) credential. The criteria are designed to ensure well-rounded education and training in play therapy.

Successful completion of the credentialing criteria includes the completion and documentation of a minimum number of hours in play therapy instruction, clinical experience, and supervision in a three-phase approach. See Section 06 for additional information on the integration of these criteria.

<table>
<thead>
<tr>
<th>Section</th>
<th>Credentialing Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>01 - License</strong></td>
<td>Required to hold a current, active, and unconditional individual state license to independently provide clinical mental health services in one of the following general practice disciplines: counseling, marriage and family therapy, psychiatry, psychology, or social work.</td>
</tr>
<tr>
<td><strong>02 - Educational Degree</strong></td>
<td>Required to hold a master’s or higher clinical mental health degree in one of the following disciplines: counseling, marriage and family therapy, psychiatry, psychology, or social work with demonstrated coursework in: child development; theories of personality; principles of psychotherapy; child &amp; adolescent psychopathology; and ethics.</td>
</tr>
</tbody>
</table>
| **03 - Play Therapy Instruction** | Required to include documentation of at least 150 hours of play therapy specific instruction, accrued in a time period of no less than two (2) years and no more than seven (7) years from institutions of higher education or APT Approved Providers. A maximum of fifty (50) non-contact hours may be included. See Terms for definition of non-contact.  

<table>
<thead>
<tr>
<th>Phase 1-Instruction</th>
<th>Phase 2-Instruction</th>
<th>Phase 3-Instruction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Document 35-55 hours</td>
<td>Document 55-70 hours</td>
<td>Document 45-60 hours</td>
</tr>
</tbody>
</table>

See Section 03 for primary areas that must be covered within each phase.

| **04 - Supervised Play Therapy Experience** | Required to include documentation of a minimum of 350 direct client contact hours, under the supervision of a Registered Play Therapist-Supervisor (RPT-S).  

<table>
<thead>
<tr>
<th>Phase 1-Experience</th>
<th>Phase 2-Experience</th>
<th>Phase 3-Experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Document 50-75 hours</td>
<td>Document 100-150 hours</td>
<td>Document 100-175 hours</td>
</tr>
</tbody>
</table>

See Section 04 for additional information on the appropriate acquisition of play therapy experience.

| **05 - Play Therapy Supervision** | Required to include documentation of a minimum of 35 hours of play therapy supervision and five (5) session observations during the accumulation of the supervised play therapy experience.  

<table>
<thead>
<tr>
<th>Phase 1-Supervision</th>
<th>Phase 2-Supervision</th>
<th>Phase 3-Supervision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Document 5-10 hours and supervisor must view/observe at least 1 session.</td>
<td>Document 10-15 hours and supervisor must view/observe at least 2 sessions.</td>
<td>Document 10-20 hours and supervisor must view/observe at least 2 sessions.</td>
</tr>
</tbody>
</table>

See Section 05 for additional information on supervision guidelines.
Section 01 - Applicant Information and License Verification

Applicant Information
Provide your current contact information and indicate the best way to reach you. To avoid delays in the processing of your application, please notify APT when any changes occur to your contact information. In addition, this information will be listed on our website once approved.

Application Fee and Payment
A nonrefundable fee is required at the time application is submitted. Payment may be submitted via check or credit card (Visa and MasterCard only).

Nonmembers interested in joining APT may include membership fees with this application.

Foundation contributions may also be included with your application. The Foundation for Play Therapy accepts tax-exempt donations to support play therapy research and promotion.

Complete the application fee and payment section of the application by entering the applicable amounts, and entering the amount in the total enclosed box.

If paying by credit card, please complete all information requested. APT does not maintain credit cards numbers on file.

Verification of License
Attach a copy of your current, active, and unconditional state mental health license in the general practice fields of counseling, marriage and family therapy, psychiatry, psychology, or social work indicating you are legally permitted to independently provide clinical mental health services. An add-on specialty license (e.g.: addictions, art therapy, dance/movement therapy, etc.) is not acceptable in lieu of a clinical mental health license in any of the aforementioned general practice disciplines.

APT only accepts licenses that are unconditionally issued by an authority that promulgates mental health standards and practices and that investigates and penalizes violations of such standards and practices.

A clinical license should include two (2) years and 2,000 direct client contact hours of supervised clinical mental health experience.

APT confers “practitioner credentials.” If you are a practitioner, you must maintain an active license in the state in which you practice. It is your responsibility to update the licensure expiration date in your credentialing profile upon renewal of your license.

If you are not currently practicing, you must hold an active license issued by a state licensing board whether or not you are practicing or residing in that state in order to maintain the RPT credential.
Section 02 - Verification of Graduate Degrees and Core Content Coursework

Applicants must hold a master’s or higher clinical mental health degree in one of the following general practice disciplines: counseling, marriage and family therapy, psychiatry, psychology, or social work. Please note, add-on specialties (e.g.: addictions, art therapy, dance/movement therapy, etc.) are not acceptable in lieu of a clinical mental health degree in any of the aforementioned general practice disciplines. Attach a copy of your graduate transcript(s) issued by an institution of higher education and list specific courses that meet each of the core areas on the credentialing application. The date your graduate degree was conferred must be clearly visible.

Your transcripts must indicate that you have completed coursework in these five (5) required core areas:

1. Child Development
2. Theories of Personality
3. Principles of Psychotherapy
4. Child and Adolescent Psychopathology
5. Legal, Ethical, and Professional Issues

The core content areas may be covered in single or multiple courses. The class titles may differ from APT’s core area titles. The table below provides examples of possible graduate course titles for each content area.

Table 2.1 – Core Content Areas

<table>
<thead>
<tr>
<th>Required Core Content Area</th>
<th>Possible Titles of Courses on Transcripts (List not exhaustive)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Development</td>
<td>Life Span Development, Human Behavior in Social Environment (HBSE) I</td>
</tr>
<tr>
<td>Theories of Personality</td>
<td>Counseling Theories, HBSE I</td>
</tr>
<tr>
<td>Psychotherapy</td>
<td>Counseling Process &amp; Skills, Social Work Practice, Pre-practicum</td>
</tr>
<tr>
<td>Child &amp; Adolescent Psychopathology</td>
<td>Abnormal Psychology or Behavior, HBSE III, DSM, Diagnosis &amp; Treatment, Mental Emotional &amp; Behavioral Disorders</td>
</tr>
<tr>
<td>Ethics</td>
<td>Intro into the Profession, SW Policy and Issues</td>
</tr>
</tbody>
</table>

If you would like assistance in determining whether or not your academic program covered the five (5) content areas list above prior to submitting your application, please complete the Transcript Review form available on our website.
Section 03 - Verification of Play Therapy Instruction

Applicants are required to complete 150 hour of play therapy specific instruction in four (4)-primary areas, during the simultaneous completion of both play therapy experience and supervision, in a three-phase approach. See Table 3.1.

Table 3.1 – Play Therapy Primary Areas

<table>
<thead>
<tr>
<th>Primary Areas</th>
<th>Minimum number of hours</th>
<th>Must be completed in Phase 1</th>
<th>Must be completed in Phase 2</th>
<th>Must be completed in Phase 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 - Play Therapy History</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 - Play Therapy Seminal or Historically Significant Theories</td>
<td>55</td>
<td>20-30</td>
<td>25-30</td>
<td>10-15</td>
</tr>
<tr>
<td>At least 25 hours must be in one Seminal or Historically Significant Theory.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 - Play Therapy Skills and Methods</td>
<td>50</td>
<td>10-20</td>
<td>25-30</td>
<td>15-20</td>
</tr>
<tr>
<td>The hours earned in skills and methods should be based on seminal or historically significant theories studied.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 - Play Therapy Special Topics</td>
<td>25</td>
<td>0-5</td>
<td>5-10</td>
<td>20-25</td>
</tr>
<tr>
<td>Includes special populations and burgeoning models.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Applicant's Choice</td>
<td>15</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The additional 15 hours may be earned in any of the categories listed above.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total:</td>
<td>150</td>
<td>35-55</td>
<td>55-70</td>
<td>45-60</td>
</tr>
</tbody>
</table>

Seminal Theories and their Derivatives
In order to preserve and strengthen the credentialing program, APT wishes to distinguish seminal theories and historically significant theories that were derived from them, which have had a lasting impact and have stood the test of time, from newer theories or approaches that have emerged in more recent years and have not yet proven their significance, though they may at some point with more time and empirical evidence.

Play Therapy - Seminal Theories and Historically Significant Theories
APT recognizes the following three major branches as seminal theories to the field of play therapy: Cognitive-Behavioral, Humanistic, and Psychodynamic

APT recognizes the following historically significant theories to the field of play therapy:
1. Adlerian
2. Child-Centered
3. Cognitive-Behavioral
4. Developmental (Viola Brody)
5. Ecosystemic
6. Filial – although not a theory, this approach is historically significant.
7. Gestalt
8. Jungian
9. Object-Relations
10. Theraplay – although not a theory, this approach is historically significant.
In order to ensure instruction, clinical experience, and supervision are integrated:

- Instruction should be ongoing and in conjunction with (or simultaneous to) play therapy experience and supervision.
- Instructional hours must be accrued in a time period of no less than two (2) years and no more than seven (7) years.
- Applicant’s play therapy coursework and trainings must demonstrate a well-rounded education in more than one play therapy seminal or historically significant theory.
- Hours earned in skills and methods should be based on the theoretical model studied.
- A maximum of eight (8) hours of instruction per day will be accepted.
- Not more than 50 of the 150 play therapy specific clock hours may be non-contact. See Terms for definition of non-contact.

Play Therapy Graduate Coursework and Continuing Education

To meet this requirement, APT accepts graduate coursework from institutions of higher education and play therapy continuing education from APT Approved Providers. See Table 3.2.

APT accepts graduate coursework specific to play therapy from institutions of higher education when the applicant is a matriculated student at the university. If applicant is not a matriculated student, hours are counted as continuing education.

APT only accepts continuing education specific to play therapy from APT Approved Providers in good standing at the time of the CE workshop.

Table 3.2 – Play Therapy Instruction

<table>
<thead>
<tr>
<th>Graduate Coursework</th>
<th>Continuing Education from an APT Approved Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Each graduate course semester credit equals 22.5 hours of play therapy instruction.</td>
<td>One hour of instruction equals one clock hour.</td>
</tr>
<tr>
<td>Not more than 135 clock hours may be earned from the same instructor.</td>
<td>Not more than 100 clock hours may be earned from the same instructor.</td>
</tr>
<tr>
<td>A copy of course syllabus is required for all play therapy graduate courses you wish considered towards this requirement.</td>
<td>Completion certificate must display the sponsor’s APT Approved Provider number (i.e. APT Approved Provider XX-XXX).</td>
</tr>
</tbody>
</table>

Items not eligible for instructional credit include but are not limited to:

1. Presentations and/or coursework taught or written by applicant.
2. Clock hours earned from graduate internships and practicum (these hours may be included in Section 04).

See Section 06 for detailed instructions on the documentation of play therapy instruction.

APT reserves the right to require the completion of additional play therapy specific training should applicant not document adequate instruction in the four primary areas: play therapy history, play therapy seminal or historically significant theories, play therapy skills and methods, and play therapy special topics.
Section 04 - Verification of Supervised Play Therapy Experience

Play therapy experience must be obtained under the supervision of an RPT-S who is recognized by their licensing boards as eligible to supervise; expected to know and abide by their respective ethics and standards; subject to disciplinary action by their respective licensing boards and accountable for the actions of their supervisees. Supervised Play Therapy Experience is required to occur in three separate but integrated phases. See Table 4.1.

In order to ensure instruction, clinical experience, and supervision are integrated:
- Applicants must complete a minimum of 350 hours of direct play therapy experience and 35 hours of simultaneous supervision in three phases.
- Supervised play therapy experience hours must be accrued in a time period of no less than two (2) years and no more than seven (7) years.
- Through the supervised play therapy experience, applicants are expected to demonstrate play therapy competencies (competencies listed in Section 05).

Table 4.1 – Play Therapy Experience

<table>
<thead>
<tr>
<th>Supervised Play Therapy Experience</th>
<th>Must be completed in Phase 1</th>
<th>Must be completed in Phase 2</th>
<th>Must be completed in Phase 3</th>
<th>Minimum number of hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct Client Contact Hours required in each phase</td>
<td>50-75</td>
<td>100-150</td>
<td>100-175</td>
<td>350</td>
</tr>
</tbody>
</table>

The three-phase approach permits the applicant to adequately absorb and synthesize play therapy instruction obtained into their supervised play therapy experience in a more manageable pace.

In order to obtain competency, assessment of the supervisee’s play therapy knowledge and skills is essential. Therefore, applicants are encouraged to share with their supervisor attendance certificates or graduate transcripts for play therapy instruction received while under supervision. This interchange helps inform the supervisory process and aids in the integration of the acquired knowledge through demonstrated practice.
Section 05 - Verification of Play Therapy Supervision

To provide play therapy supervision, supervisors must hold the RPT-S credential; be recognized by their licensing board as eligible to supervise; expected to know and abide by their respective ethics and standards; subject to disciplinary action by their respective licensing boards and accountable for the actions of their supervisees. In some situations, peer supervision or ongoing consultation may be used to meet this requirement. Play Therapy Supervision is required to occur in three separate but integrated phases.

In order to ensure instruction, clinical experience, and supervision are integrated:

- Applicants must complete a minimum of 35 hours of play therapy supervision and 350 hours of simultaneous play therapy experience.
- Play Therapy Supervision hours must be accrued in a time period of no less than two (2) years and no more than seven (7) years.
- Supervision should be received at a ratio of 1 to 10. One hour of supervision for every 10 hours of play therapy experience.

### Table 5.1 – Play Therapy Supervision

<table>
<thead>
<tr>
<th>Play Therapy Supervision</th>
<th>Must be completed in Phase 1</th>
<th>Must be completed in Phase 2</th>
<th>Must be completed in Phase 3</th>
<th>Minimum number of hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hours required in each phase</td>
<td>5-10</td>
<td>10-15</td>
<td>10-20</td>
<td>35</td>
</tr>
<tr>
<td>Session observations required in each phase</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>5</td>
</tr>
</tbody>
</table>

**Play Therapy Supervision**

Types of Supervision:
1. **Individual Supervision**: Consists of one supervisor and one supervisee.
2. **Group Supervision**: Consists of one supervisor and at least two but not more than 10 supervisees.
3. **Individual in Group Supervision**: You may obtain individual supervision hours within a group only if focus was on your play therapy case notes, reports, or session video and does not exceed 10 supervisees. There is no limit to the number of hours that may be obtained in this manner.
4. **Contact or In-Person Supervision**: Occurs when you meet in-person with your supervisor to discuss case notes, reports, session video, or by simultaneously but separately watching and discussing your session video. There is no limit to the number of hours that you may obtain in this manner.
5. **Non-Contact or Distance Supervision**: Occurs when you meet with your supervisor via telephone or online to discuss your play therapy case notes, reports, or session video. There is no limit to the number of hours that you may obtain in this manner.

**Play Therapy Consultation**

Consultation differs from supervision in that the ‘supervisor’ and ‘supervisee’ both hold individual clinical mental health licenses issued by their respective state licensing boards that permit for independent practice. In consultation, the ‘supervisor’ is asked to share *expert advice* specific to play therapy to the existing competent care being provided by the ‘supervisee’. This type of ‘peer supervision’ or on-going consultation may meet APT Credentialing requirements.

**Supervisor Observations**

Supervisor observations are necessary to assess the supervisee’s competencies, qualifications, professionalism, and other matters germane to the practice of play therapy. A minimum of five (5) session observations are required for the successful completion of the supervision requirement. See Table 5.1 for specific phase requirements.

It is beneficial to both supervisor and supervisee if observations take place at different stages during the therapeutic relationship. Supervisors providing five (5) or more hours of supervision must observe at least one (1) play therapy session.
Supervisee Required Competencies
It is the supervisor’s obligation to identify gaps in knowledge and/or skill sets, to provide recommendations for remediation, when necessary, and to protect the integrity of the play therapy field and the vulnerable children and families play therapists serve. This is achieved through the formal assessment of supervisees' play therapy competencies.

APT identifies the following areas of competencies as essential to the competent practice of play therapy, irrespective of theoretical orientation:

Knowledge & Understanding of Play Therapy
1. Demonstrate an understanding of child development.
2. Possess working knowledge of childhood diagnoses and disorders as outlined by the DSM.
3. Possess knowledge of more than one seminal/historically significant play therapy theory.
4. Understand the application of at least one family systems theoretical orientation.
5. Understand the Therapeutic Powers of Play.
6. Understand the impact of trauma on childhood development and its long-term impacts on psychological well-being.

Clinical Play Therapy Skills
1. Demonstrate ability to conceptualize play therapy cases through a theoretical lens.
2. Understand applicable play therapy assessments.
3. Demonstrate ethical intake practices, treatment planning, documentation and other clinical record keeping skills of play therapy cases.
4. Demonstrate interventions congruent with theoretical orientation
5. Understand the role and timing of family consultation/therapy.
6. Demonstrate effective play therapy micro skills including tracking behavior, reflecting content, reflecting feeling, esteem building responses, facilitation of the relationship, reflecting meaning, and setting limits.
7. Understand the role of termination in the therapeutic relationship.

Professional Engagement
1. Has read and reviewed APT’s, Best Practices and Paper on Touch documents.
2. Demonstrate ethical engagement with state ethical guidelines and codes.
3. Practices from a perspective of social justice and inclusion with understanding of cultural diversity.
4. Establish a play therapy professional identity.

During each phase, supervision should include discussion and assessment based on these competencies. Applicant should meet all competencies by the completion of Phase 3.
Section 06 – Integration of Play Therapy Instruction, Experience and Supervision

APT believes in the importance of providing competent care to clients and ensuring that the RPT credentials represent quality play therapy services by the holder. To these ends, the three-phase approach was developed to accomplish two outcomes. First, to provide a process for applicants to obtain play therapy competency through the intentional integration of direct instruction (Section 03) followed by periods of application to clinical cases (Section 04) accompanied by supervision (Section 05). Second, to provide a process for documenting the successful achievement of these criteria (RPT Credentialing Application).

Therefore, applicants must demonstrate through documentation on the Criteria Verification Forms found in the RPT Credentialing Application that instructional, clinical experience, and supervision hours were earned:

- in a time period of no less than two (2) years and no more than seven (7) years;
- in three distinct, but sequential phases with a minimum number of hours in each criterion met prior to progressing to the next phase; and
- all three phases must be completed before submitting application.

Table 6.1 provides specific information on the required hours in each criterion per Phase. Applicants may document additional hours per Phase, but APT will accept no more than the maximum hours allotted per criterion as indicated in Table 6.1.

Instructions for Completion of Criteria Verification (CV) Form

Applicant must use the appropriate Criteria Verification Form in the RPT Credentialing Application to document the necessary hours completed for each criterion during each of three phases. No more than the maximum number of hours indicated in each criterion will be accepted. “Applicant’s Choice” provides an option of obtaining 15 hours of play therapy instruction in any of the Primary Areas of the applicant’s choosing.

- Applicant’s name must be included on each phase form.
- Date range should identify the time period in which the play therapy instruction, experience, and supervision was completed by applicant. The date range on each Criteria Verification form may not overlap.
- Section A – Play Therapy Instruction: To be completed by applicant. This section includes all play therapy instruction obtained during the date range specified. Applicants must complete the table in section A and attach copies of transcripts and training certificates issued by institutions of higher education and Approved Providers, respectively, to demonstrate that you earned the required number of hours during each phase.
- Sections B and C - Play Therapy Experience & Supervision: To be completed by applicant and verified by supervisor. See chart on page 4 for the acceptable minimum and maximum number of hours of experience and supervision accepted within each Phase.
- Section D - Play Therapy Competencies: To be reviewed and discussed with applicant. Applicant should meet all competencies by the completion of Phase 3.
- Section E – Supervisor Attestation: To be completed by supervisor. This section serves as verification for the information documented in Sections A-D. The supervisor must also verify that the required number of observations have been met during each phase and indicate their role in the relationship as either that of supervisor or consultant.

Disclaimer: The breakdown of hours in the three-phase approach was designed to serve as a guide and should not substitute the clinical judgment of the applicant or the applicant’s supervisor. Should additional hours be deemed necessary in any or all of the three criteria due to observed deficiencies in competence, APT expects that the additional hours will be obtained and documented in the credentialing application. Exceeding the minimum hours required in each criterion is encouraged, but not required.

Hours Earned Prior to January 1, 2020

Use Appendix I of the Credentialing Application to document play therapy experience and supervision hours earned prior to January 1, 2020.
Applicants must submit three **Criteria Verification forms**, one for each Phase with their application materials, documenting the requirements outlined below. Each form must be completed in its entirety and all requirements met.

### Table 6.1 – Integration of Required Criteria

<table>
<thead>
<tr>
<th>Phase</th>
<th>Instruction (Section 03)</th>
<th>Experience (Section 04)</th>
<th>Supervision (Section 05)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Phase 1</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Hours Required:</strong></td>
<td>35-55</td>
<td></td>
<td>At least 5, not more than 10</td>
</tr>
<tr>
<td>Phase 1 only:</td>
<td></td>
<td>At least 50, but no more than 75 hours of Supervised Play Therapy Experience must be completed during Phase 1.</td>
<td></td>
</tr>
<tr>
<td>• Seminal or Historically Significant Theories</td>
<td>20-30</td>
<td></td>
<td>Note: Of the required 35 hours, no more than 10 group supervision hours will be accepted.</td>
</tr>
<tr>
<td>• Skills &amp; Methods</td>
<td>10-20</td>
<td></td>
<td>Observe 1 play therapy session.</td>
</tr>
<tr>
<td>• Special Topics</td>
<td>0-5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>In Any Phase</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• History</td>
<td>up to 5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Applicant’s Choice</td>
<td>up to 15</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| **Phase 2** |                          |                         |                          |
| **Hours Required:** | 55-70                    |                         | At least 10, not more than 15 |
| Phase 2 only: |                           | At least 100, but no more than 150 hours of Supervised Play Therapy Experience must be completed during Phase 2. |
| • Seminal or Historically Significant Theories | 25-30                    |                         | Note: Of the required 35 hours, no more than 10 group supervision hours will be accepted. |
| • Skills & Methods | 25-30                    |                         | Observe 2 play therapy sessions. |
| • Special Topics | 5-10                     |                         |                          |
| In Any Phase |                           |                         |                          |
| • History | up to 5                  |                         |                          |
| • Applicant’s Choice | up to 15                |                         |                          |

| **Phase 3** |                          |                         |                          |
| **Hours Required:** | 45-60                    |                         | At least 10, not more than 20 |
| Phase 3 only: |                           | At least 100, but no more than 175 hours of Supervised Play Therapy Experience must be completed during Phase 3. |
| • Any Theory | 10-15                    |                         | Note: Of the required 35 hours, no more than 10 group supervision hours will be accepted. |
| • Skills & Methods | 15-20                    |                         | Observe 2 play therapy sessions. |
| • Special Topics | 20-25                    |                         |                          |
| In Any Phase |                           |                         |                          |
| • History | up to 5                  |                         |                          |
| • Applicant’s Choice | up to 15                |                         |                          |
Section 07 - Attestation by Applicant

A comprehensive attestation is included in the credentialing application. All applicants are encouraged to read the attestation before submitting an application in order to familiarize themselves with the terms and conditions therein.

By submitting an application to APT, you accept sole and total responsibility for the accuracy and completeness of the information provided in your application and agree to abide by the terms and conditions of the application and as set forth in these Credentialing Standards.
Section 08 – News Release Information

Individuals who have earned the Registered Play Therapist credential may receive public recognition of their accomplishment in industry publications, local newspapers, or other public media.

APT will provide a complimentary professional news release to the outlet listed in Section 8 of the credentialing application.
Credentialing Standards for the Registered Play Therapist (RPT) Credential

Appendix I – Application Denial, Complaints, and Appeals

Denial, Revocation, Suspension, or Probation

Section A. A credentialing application or renewal may be denied, or APT may unilaterally – revoke, suspend or place on probation an RPT, RPT-S, or SB-RPT credential, for one or more of these reasons:

1. Disciplinary action is taken against you by the applicable licensing authority that results in the suspension or revocation of your license or a condition placed on your license
2. Conviction of a crime related to the provision of mental health services or a crime that would adversely affect the interests, effectiveness, reputation, or image of APT
3. Falsification, by inclusion or omission, of information on the credentialing application or renewal or any supporting document
4. Failure to complete credentialing application or renewal requirement(s)
5. Representing your credential (RPT, RPT-S, or SB-RPT) as your primary credential or mental health license
6. Voluntary relinquishment of your license
7. Aiding or engaging in any conduct that is prejudicial to the purpose, interests, effectiveness, reputation, or image of the play therapy profession and/or APT
8. Adverse action taken against you pursuant to any policy or procedure adopted by APT from time to time

Section B. If an initial or renewal application is denied and the applicant disagrees with one or more policies pertaining to the approval of such applications, the applicant may appeal to the CEO of APT. If the latter declines to grant such approval, the applicant may ask that the CEO reconsider by consulting with the Chairs of the Board of Directors, the Ethics & Practices Committee, and/or the Registration & Continuing Education Committee regarding whether such policies should be changed. The reconsidered decision of the CEO is final.

Section C. When issuing the revocation, suspension or prohibition of a credential, APT may identify the number of months before which the individual may reapply for or have the credential reinstated. In determining the number of months, APT may consider the extent of the infraction resulting in the revocation, suspension of prohibition and does not have to adhere to the time periods set forth in Section H below. Subject to the review described above in Section B, the decision of APT for revocation, suspension or prohibition and the time period therefore are final.

Complaint Process

Section D. APT may consider revoking, suspending, or the placing one credentials on probation if a complainant files a formal written complaint against one or more mental health professionals holding an APT credential with their applicable mental health boards of license authorities.

1. For example, if the California Board of Behavioral Sciences has issued a license to a RPT or RPT-S designee, then a complainant will be advised by APT to file a formal complaint with that board.
2. If the identity of the applicable authority is unknown to a complainant, the latter may contact APT to learn the identity of the authority upon which the RPT, RPT-S, or SB-RPT designee’s application or renewal application is based.

Section E. If the formal complaint results in an adverse finding about and disciplinary action against a credential holder, the complainant may then file with the CEO a) a formal written complaint and b) a copy of the official written resolution to the complaint previously filed with the applicable licensing or certifying authority.

1. Complainants may themselves forward - or ask that the applicable mental health licensing or certifying authorities forward - a copy of their resolutions to the CEO.
2. APT may take no action with respect to the RPT, RPT-S, or SB-RPT designees against whom formal complaints are filed until its receipt of such formal written complaint resolutions.

Section F. If the resolution of any formal complaint is adverse to a RPT, RPT-S, or SB-RPT then, within 10 calendar days of receipt of the resolution, the CEO shall send copies of the formal complaint and other
documentation relating to the complaint, including the resolution of the licensing or certifying authority, to both the credential holder and the Ethics & Practices Committee.

Section G. An RPT, RPT-S, or SB-RPT may submit to the Ethics & Practices Committee via the CEO a written statement in response to the complaint, resolution, and other documents within 10 calendar days of their receipt of such from the CEO.

Section H. Within 30 calendar days after receipt of the complaint, resolution, and other documents, the Ethics & Practices Committee reviews and evaluates such items and determines if the credential should be:
1. Maintained.
2. Placed on probation for six (6) or 12 months with all rights and privileges.
3. Temporarily suspended for six (6) or 12 months without any rights and privileges.
4. Permanently revoked.

Section I. Within 10 calendar days of the decision of the Committee, the CEO advises the credential holder and complainant of the decision in writing.

Appeal Process
Section J. The credential holder may appeal any decision made by the Ethics & Practices Committee relating to any decision made by it to revoke, suspend, place on probation, or otherwise take disciplinary action against the RPT, RPT-S, or SB-RPT for any reason identified in Sections D through I as follows:
1. File a written request (the “Appeal Request”) with the CEO within thirty (30) calendar days of receipt of the decision or other action. The Appeal Request must contain the pertinent facts, the reason for the appeal, and any other information that the credential holder desires to convey but may not re-state any matters set forth in any written statement provided to APT pursuant to Sections D through I.
2. Within 10 calendar days after receipt of the Appeal Request, the CEO shall advise the Chair of the Board to appoint an Appellate Committee compromising not fewer than five (5) licensed mental health professionals.
3. Within 10 calendar days after receipt of such appointment request, the Chair of the Board shall appoint the Appellate Committee and notify the CEO of the appointed Appellate Committee members.
4. Within 10 calendar days of the notice of the Appellate Committee members, the CEO shall forward to Appellate Committee these items:
   a. Formal complaint to APT.
   b. Resolution of initial complaint formally filed with licensing (or certifying) authority.
   c. Response and other written statements by credential holder or designee.
   e. Appeal Request filed by credential holder or designee.
5. The Appellate Committee shall render a decision, based upon submitted documents, to the CEO within 30 calendar days of receipt of such documents.
6. The CEO shall inform the RPT, RPT-S, or SB-RPT of the Appellate Committee decision in writing within 10 calendar days of receipt thereof. The decision of the Appellate Committee is final.
Credentialing Standards for the Registered Play Therapist (RPT) Credential

Appendix II - Terms

To ensure clarity of understanding and to both simplify and standardize usage, the meaning of these words and phrases are described below:

1. “Application Fees” are fees paid to have your application reviewed and processed.

2. “APT” refers to the Association for Play Therapy, a national professional society in the United States.

3. “APT Approved Providers” refers to those individuals, organizations, and businesses that are designated by APT as “Approved Providers of Play Therapy Continuing Education” to provide post graduate-level play therapy trainings presented by graduate-level instructors for individuals with Master or higher mental health degrees.

4. “CE” is the acronym for “continuing education” (or “training”) hours earned at conferences, workshops, and other forums.

5. “Clock Hours” are used to convert certain training-related activities into hours. Graduate coursework may be converted to clock hours based on the information listed in Table 3.2. Relevant publications may be converted to clock hours based on the calculation described in Appendix I.

6. “Competency” refers to the possession of the necessary knowledge, skills, and ability to successfully practice play therapy ethically.

7. “Consultation” differs from supervision in that the ‘supervisor’ and ‘supervisee’ both hold individual clinical mental health licenses issued by their respective state licensing boards that permit for independent practice. In consultation, the ‘supervisor’ is asked to share expert advice specific to play therapy to the existing competent care being provided by the ‘supervisee’. This type of ‘peer supervision’ or on-going consultation may meet APT Credentialing requirements.

8. “Contact Hours” refer to those in which “students enjoy in-person live instruction in real time”. “Non-Contact” programs are essentially home study or other programs that do not include such interaction, this includes live webinars.

9. “Contact or In-Person Supervision” is when you meet face-to-face with your supervisor to discuss your play therapy case, notes, reports, session video. There is no limit to the number of hours that you may obtain in this manner.

10. “Clinical Practitioner” or Practitioner refers to a licensed clinical mental health professional authorized to independently provide clinical mental health services in the general practice disciplines of counseling, marriage and family therapy, psychiatry, psychology, or social work.

11. “Direct Client Contact Hours” refers to the in-person time spent with the client in session using play therapy.

12. “Distance Supervision” occurs when you meet with your supervisor via telephone or online to discuss your play therapy case notes, reports, or session video. The applicant/supervisee is responsible for assuring acceptance and compliance with state board regulations in his or her specific discipline, up to and including verification of identity by either party. There is no limit to the number of hours that you may obtain in this manner.

13. “Group Supervision” consists of one supervisor and at least two but not more than 10 supervisees.

14. “Historically Significant Play Therapy Theories” have roots in seminal theories and are considered landmark works in the field of psychotherapy. They are a second layer of theoretical richness from which third-generation theories and models may be emerging.
15. “Individual Supervision” is defined as one supervisor and one supervisee.

16. “Individual in Group Supervision” You may obtain individual supervision hours within a group only if focus was on your play therapy case, notes, reports, or session video and does not exceed 10 supervisees. There is no limit to the number of hours that may be obtained in this manner.

17. “Institutions” refer to institutions of higher education, i.e. colleges and universities. Several institutions have been designated by APT as “Approved Centers of Play Therapy Education” because they provide graduate-level programs presented by graduate-level instructors for individuals with or earning Master’s or higher clinical mental health degrees.

18. “License or Clinical License” refers to an individually issued current, unconditional, and active clinical mental health license in the general practice fields of counseling, marriage and family therapy, psychiatry, psychology, and social work AND permits for the independent provision of clinical mental health services. Also, deemed the highest level of practice for that particular field and is generally termed “independent”, “clinical”, or Independent clinical.” Examples of licenses are Licensed Clinical Psychologist (LCP), Licensed Professional Counselor (LPC), Licensed Clinical Social Worker (LCSW), and Licensed Marriage and Family Therapist (LMFT). Excluded are temporary and learning licenses issued to interns, associates, and to those engaged in clinical practice under supervision of another’s license.

19. “Member” refers to a Professional, International, or Affiliate member of the Association for Play Therapy. You do not need to be a member to earn and maintain the RPT/S credentials.

20. “Mental Health Degree” refers to earning a master’s or higher clinical mental health degree in the general practice fields of counseling, marriage and family therapy, psychiatry, psychology, and social work from an institution of higher education.

21. “Multicultural Competency” refers to the ability of play therapists to 1) become and remain aware of their own cultural backgrounds, influences, and biases (including but not limited to religion, gender, sexual orientation, ethnicity, and race), 2) acquire and continuously seek knowledge about how cultural backgrounds, influences, and biases operate in the lives of their clients, and 3) demonstrate culturally-appropriate therapeutic skills.

22. “Non-Contact” hours are essentially home study or other programs that do not include in-person interaction with the instructor in real-time. “Contact Hours” refer to those in which “students enjoy in-person live instruction in real time”.

23. “Ongoing Consultation” is the recurrent dialogue between the ‘supervisor’ and ‘supervisee’ both hold individual clinical mental health licenses issued by their respective state licensing boards that permit for independent practice. In consultation, the ‘supervisor’ is asked to share expert advice specific to play therapy to the existing competent care being provided by the ‘supervisee’. This type of “peer supervision” or “ongoing consultation” may meet APT Credentialing requirements.

24. “Peer Supervision” refers to “ongoing consultation” as defined in the Terms.

25. “Play Therapy Approach” requires applicants to include documentation that demonstrates education/training in more than one approach. Examples of play therapy approaches include, but are not limited to: nondirective play, directive play, expressive arts, sandtray, drama, etc.

26. “Play Therapy Experience” refers to applicants’ clinical session time with clients using play therapy theory(ies) to inform their play therapy practice (assessment, conceptualization, treatment planning, etc.). Play Therapy Experience is also known as direct client contact hours.

27. “Play Therapy Training” refers to the applicants’ play therapy instruction or education via graduate coursework or continuing education workshops.
28. “Renewal Fees” are due annually and are to maintain your credential active. Annual APT membership dues are unrelated and billed separately.

29. “RPT” is the acronym for the Registered Play Therapist credential.

30. “RPT-S” is the acronym for the Registered Play Therapist-Supervisor credential.

31. “RPT/S” is the collective acronym for both the Registered Play Therapist (RPT) and Registered Play Therapist-Supervisor (RPT-S) credentials.

32. “SB-RPT” is the acronym for the School Based-Registered Play Therapist credential.

33. “Seminal Theories” from the three major schools of thought are the original and influential theories from which historically significant theories have originated. They represent the foundational work that has been used to develop future theories and models.

34. “Supervision” refers to the ongoing relationship between supervisor and supervisee for the purpose of developing the supervisee’s competency in the practice of play therapy. Typically, this occurs between a licensed supervisor and an unlicensed supervisee.

35. “Supervisors” are clinical mental health professionals who are licensed to practice in the general practice fields of counseling, marriage and family therapy, psychiatry, psychology, or social work and recognized by their licensing boards as eligible to supervise; expected to know and abide by their respective ethics and standards; subject to disciplinary action by their respective licensing boards and accountable for the actions of their supervisees.

36. “Well-rounded” refers to the applicant’s play therapy education and supervised experience attained in an array of seminal or historically significant play therapy theories and models. It also refers to the attainment of these skills and instruction in a manner that permits for the absorption of content and the demonstration of proficient play therapy skills in the applicant’s supervised play therapy experience.
Credentialing Standards for the Registered Play Therapist (RPT) Credential

Appendix III – Transitioning to the RPT-S Credential

RPT-S applications are welcome upon the completion and documentation of all credentialing requirements. An RPT-S application will remain open for a maximum of 12 months after submission. Once earned, the credential must be renewed annually (see Appendix V for renewal criteria and process).

To transition an existing RPT credential to the RPT-S credential, applicants must meet the following criteria:

1. Hold or have held an RPT credential issued by APT for three consecutive years in good standing.
2. Be approved by your state mental health board to supervise others/interns (whether or not you choose to supervise towards licensure or just towards APT credentialing).
3. Hold a clinical mental health license for three consecutive years in good standing and without conditions.
4. Completed 3,000 hours of direct clinical experience after obtaining your clinical, independent license.
5. Complete 500 hours of direct play therapy experience after obtaining your RPT credential.
6. Complete 6 hours of play therapy specific supervisor instruction sponsored by an APT Approved Provider or through a graduate play therapy course shown on a transcript.
7. Complete 24 hours of clinical supervisor instruction* (academic instruction on how to supervise). This is not required to be play therapy specific.

*This requirement may be satisfied if your state mental health board requires supervision training in order to obtain approval to supervise. APT will accept these instructional hours in lieu of the 24 clinical supervisor training hours required. However, if your state board does not require any supervisor instruction hours, then you must meet APT's supervisor training requirement of 24 hours.

General Instructions

1. Review the APT Credentialing Standards. APT reserves the right to unilaterally revise, from time to time, the terms and conditions, these Standards, governing policies, approval and renewal criteria, and other facets of this agreement.
2. Complete, sign, and date the application, including attestation.
3. Attach the following:
   a. License,
   b. Graduate Transcripts if Supervisor Training Coursework is listed,
   c. Completed and signed RPT-S Criteria Verification Forms.
4. Submit your application and all attachments to:

   **Alexandra Jarrell**, Continuing Education and Credentialing Coordinator
   Association for Play Therapy,
   401 Clovis Avenue, Suite 107
   Clovis, CA 93612
   559-298-3400 x4  ajarrell@a4pt.org

5. You will receive a confirmation email from APT upon receipt of your application. Incomplete applications will not be reviewed.
6. APT will notify applicants within 6 – 8 weeks via email regarding the status of their application.
7. Should there be a change in your licensure status at any time during the application process or once approved, you are required to immediately notify APT by certified, registered, or receipted mail.
8. If after reviewing the Credentialing Standards you continue to have questions, please do not hesitate to contact us.
Credentialing Standards for the Registered Play Therapist (RPT) Credential

Appendix IV – Documenting Hours Acquired prior to 1/1/2020

In most cases, hours obtained in play therapy instruction, experience, and supervision prior to January 1, 2020 may be counted toward the credentialing requirements and documented on Appendix I of the Credentialing Application. Play therapy supervised experience and supervision earned after January 1, 2020 must be under the supervision of an RPT-S.

Play Therapy Instruction
Use Section 1 of the Appendix to document, in date order, any play therapy instruction earned prior to January 1, 2020 received from graduate coursework or continuing education from APT Approved Providers. Attach a copy of your graduate transcript and/or certificate of attendance to the Appendix I form.

To meet this requirement, APT accepts graduate coursework from institutions of higher education and play therapy continuing education from APT Approved Providers. See Table 3.2 on page 9.

APT accepts graduate coursework specific to play therapy from institutions of higher education when the applicant is a matriculated student at the university. If applicant is not a matriculated student, hours are counted as continuing education.

APT only accepts continuing education specific to play therapy from APT Approved Providers in good standing at the time of the CE workshop.

For additional information on graduate coursework and continuing education training requirements, see Section 3.

Supervised Play Therapy Experience & Supervision
If your Supervisor was an RPT-S, please document no less than 335 hours of play therapy experience and 35 supervision hours (max 15 group supervision) on Appendix I of the Credentialing Application.

If your Supervisor was NOT an RPT-S, please document no less than 500 hours of play therapy experience and 50 supervision hours (max 20 group supervision) on Appendix I of the Credentialing Application.

Any Supervisor who provided 10 or more hours of supervision must observe at least one (1) play therapy session during supervision. Failure to meet the required observation will void the supervised experience hours.

For additional information on supervised play therapy experience and supervision requirements, see Section 4 and Section 5, respectively.

Applicants are encouraged to contact APT directly with any questions.
Credentialing Standards for the Registered Play Therapist (RPT) Credential

Appendix V – Guidelines for Supervisors

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This page is being finalized.