

Ability to foster and maintain a good working alliance, and to grasp the client's perspective and 'world view'

Understanding the concept of the working alliance

An ability to draw on knowledge that the working alliance is usually seen as having three components:	
	the relationship or bond between practitioner and client
	consensus between practitioner and client regarding the techniques and methods employed
	consensus between practitioner and client regarding the goals
An ability to draw on knowledge that all three components contribute to the maintenance of the alliance	

Knowledge of practitioner factors associated with the alliance

An ability to draw on knowledge of practitioner factors that increase the probability of forming a positive alliance:	
	being flexible and allowing the client to discuss issues that are important to them
	being respectful
	being warm, friendly and affirming
	being open
	being alert and active
	being able to show honesty through self-reflection
	being trustworthy
Knowledge of practitioner factors that reduce the probability of forming a positive alliance:	
	being rigid
	being critical
	being distant
	being aloof
	being distracted
	making inappropriate use of silence

Knowledge of client factors associated with the alliance

An ability to draw on knowledge of client factors that affect the probability of forming a positive alliance, e.g.:	
	interpersonal issues (e.g. assuming that the practitioner will disbelieve the client's perspective on events)
	involuntary presentation (e.g. attending only because of external pressures)
	service-related issues (e.g. previous negative experiences)
	influence of family and peers (e.g. families who encourage or discourage the client from maintaining contact with services, or peers who stigmatise the client for being in receipt of an intervention)

Capacity to develop the alliance

An ability to listen to the client's concerns in a manner that is non-judgmental, supportive and sensitive, and that conveys an accepting attitude when the client describes their experiences and beliefs
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An ability to validate the client's concerns and experiences
An ability to gauge whether the client understands the rationale for the intervention, has questions about it, or is skeptical about the rationale, and to respond to these concerns openly and non-defensively to resolve any ambiguities
An ability to help the client express any concerns or doubts they have about the intervention and/or the practitioner, especially where this relates to mistrust or skepticism
An ability to help the client form and articulate their goals for the intervention, and to gauge the degree of congruence in the aims of the client and practitioner

Capacity to grasp the client's perspective and 'world view'

An ability to apprehend the ways in which the client characteristically understands themselves and the world around them
An ability to hold the client's world view in mind throughout the course of an intervention, and to convey this understanding through interactions with the client, in a manner that allows the client to correct any misapprehensions
An ability to establish the client's point of view by exploring their position in an open and accepting manner, taking their concerns at face value and suspending any tendency to disbelief
An ability to hold the client's perspective in mind while gathering all relevant information in a sensitive manner
An ability to hold the client's world view in mind, while retaining an independent perspective and guarding against collusion with the client

Capacity to maintain the alliance

Capacity to recognise and to address threats to the therapeutic alliance ('alliance ruptures')

An ability to recognise when strains in the alliance threaten progress
An ability to deploy appropriate interventions in response to disagreements about tasks and goals, and:
to review the client's understanding of the rationale for the intervention and to clarify any misunderstandings
to judge when it is best to refocus on tasks and goals that are seen as relevant or manageable by the client (rather than keep exploring issues that are giving rise to disagreement)
An ability to deploy appropriate interventions in response to strains in the bond between practitioner and client, for example:
for the practitioner to give and ask for feedback about what is happening in the here-and-now interaction, in a manner that invites exploration with the client
for the practitioner to acknowledge and accept responsibility for their contribution to any strains in the alliance
where the client recognises and acknowledges that the alliance is under strain, an ability (when appropriate) to help the client make links between the rupture and their usual style of relating to others
to allow the client to assert any negative feelings about the relationship between the practitioner and themselves
to help the client explore any fears they have about expressing negative feelings about the relationship between the practitioner and themselves

Ability to understand and respond to the emotional content of sessions

Eliciting emotions that facilitate change

An ability to help clients access, differentiate and experience their emotions in a manner that best facilitates change

Management of strong emotions that interfere with effective change

An ability to help clients recognise and accurately label their emotions
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An ability to help clients process their emotions, by acknowledging and/or containing emotional levels that are too high (e.g. anger, fear, despair) or too low (e.g. apathy)

An ability to deal effectively with emotional issues that interfere with effective change (e.g. excessive levels of anxiety, anger or hostility, or avoidance of strong affect)

An ability to help clients express their emotions while also monitoring their capacity to tolerate emotional expression and to deploy in-session strategies that help to manage any difficulties that emerge, for example by:

ensuring that discussion moves at the client's pace (i.e. their readiness and capacity to discuss an issue)

'pulling back' if the client appears to find an area too difficult, and returning to it at a later stage
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helping the client to stay with the emotion without escalating it

An ability to introduce techniques designed to manage unhelpfully strong emotions (such as aggressive behaviour or extreme fear), e.g.:

helping the client to name emotions and the 'messages' that they convey

indicating what behaviour is appropriate in the session (setting limits)
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When significant others are participants in the session, an ability to help them:

support the client's capacity to express emotion in an appropriate manner (in the session)
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express emotion in an appropriate manner
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Ability to reflect on the expression of behaviours and emotions

An ability to understand that the client's emotional expression (including aggressive behaviour) is a form of communication

An ability to reflect on the meaning of the behaviour or emotional expression and its relation to the current and past context
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An ability to describe the emotion or behaviour and elicit the client's interpretation of its meaning, and:

an ability to discuss any such interpretations with clients

An ability for the clinician to reflect on their own reaction to the emotional or behavioural expression and their influence on the client's behaviour, and:
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an ability for the clinician to make use of supervision to reflect (and, if need be, act) on these issues

Ability to manage endings

Working with planned endings

Where the contact will be of a fixed duration, an ability to work collaboratively with clients to manage termination and set in place any future support

An ability to prepare clients for endings by explicitly referring to the limits of the intervention at the outset, and throughout therapy, as appropriate (e.g. in connection with discussions about loss)

An ability to assess any risks to clients that may arise during or after termination with the service

An ability to help the client express feelings about termination, including any feelings of hostility and disappointment with the limitations of the intervention and of the therapist

An ability to help clients make connections between their feelings about ending and other losses/separations

An ability to help clients explore any feelings of anxiety about managing without the clinician

An ability to help clients reflect on the process of the intervention as well as what they have learnt and gained from it

Where there is a planned transition to another service, an ability to prepare clients appropriately (e.g. by providing them with information about what the service offers and its style of working, or arranging joint appointments with the new service)

Working with premature or unplanned terminations

Knowledge

An ability to draw on knowledge of national and local guidance on the assessment of risk relating to a client ending contact with a service, including policies, procedures and standards in relation to:

risk assessment and management

consent, confidentiality and information sharing

An ability to draw on knowledge of local procedures in response to 'failure to attend' appointments

An ability to draw on knowledge of local services to which the client may be referred at the end of contact with local services

Working with unplanned endings

Where possible, an ability to explore with clients why they wish to terminate contact with the service earlier than originally planned

An ability to explore with clients whether their concerns about the intervention or service can be addressed

An ability to assess any risk arising from early termination with the service

An ability to contact relevant agencies regarding early termination

An ability to review contact with clients verbally or through a discharge letter

When working with families, an ability to establish which members of the family wish to terminate contact early (i.e. the extent to which this is a consensual family decision, or is a view held by some, but not all, family members)

Ability to select and use measures and diaries

Knowledge of commonly used measures

An ability to draw on knowledge of measures commonly used as part of an assessment for eating disorders

An ability to draw on knowledge relevant to the application of a measure, such as:

its psychometric properties (including norms, validity and reliability)

the training required to administer the measure

scoring and interpretation procedures

characteristics of the test that may influence its use (e.g. brevity, or 'user friendliness')

Ability to administer measures

An ability to judge when a client may need assistance when completing a scale

An ability to take into account a client's attitude to the scale, and their behaviours while completing it, when interpreting the results

An ability to score and interpret the results of the scale using the scale manual guidelines

An ability to interpret information obtained from the scale in the context of assessment and evaluation information obtained by other means

An ability to select and make use of outcome measures

An ability to integrate outcome measurement into an assessment and any intervention

An ability to draw on knowledge that a single measure of outcome will fail to capture the complexities of a person's functioning, and that these complexities can be assessed by:

measures focusing on a person's functioning drawn from different perspectives (e.g. person, family member or professional)

measures using different technologies (e.g. global ratings, specific symptom ratings and frequency of behaviour counts)

measures assessing different domains of functioning (e.g. home and work functioning)

measures that assess different symptom domains (e.g. affect, cognition and behaviour)

An ability to draw on knowledge that pre- and post-intervention measures are a more rigorous test of improvement than the use of retrospective ratings

An ability to use sessional measures (such as changes in bodyweight) to inform on progress in therapy and to discuss the implications of this with the client

Ability to use systematic recordings

Knowledge

An ability to draw on knowledge of the ways in which systematic recording can be used to help identify the function of a specific behaviour by analysing its antecedents and consequences (i.e. what leads up to the behaviour, and what happens after the behaviour has occurred)

Ability to integrate systematic 'diary recordings' into assessment and intervention

An ability to explain the function of structured charts to clients, and to help them use charts to monitor their own behaviour, e.g.:

explaining and demonstrating the use of self-completed frequency charts (designed to record the frequency of target behaviours)

explaining and demonstrating the use of self-completed behavioural diaries (designed to record problematic or desired behaviours, and their antecedents and consequences)

An ability to review completed frequency charts and behaviour diaries with a client in order to:

find out their interpretation of the data

find out how easy it was for them to record information

motivate them to carry out any further data collection

An ability to use diary and chart information to help assess the frequency of problems, degree of distress caused, antecedents and patterns of behaviour and reinforcement