

4. Engagement and communication



4.1. Communication skills

Throughout this subdomain, 'person'/'people' refers to children/young people, parents/carers, family members and significant others.



Knowledge

- An ability to draw on knowledge of the value of basic communication skills both:
 - to help people feel supported by a practitioner who is focused on their concerns and needs, and that helps them:
 - feel respected, heard and understood
 - feel connected to others (and so experience themselves as less alone)
 - express themselves and makes sense of their experience
 - reflect on and request the support that they feel is appropriate to their immediate needs
 - as a way for the practitioner to gain an accurate sense of the concerns and needs of the person
- An ability to draw on knowledge that if verbal communication is challenging for the person, other forms of communication (e.g. drawing or writing) are appropriate and may be the main way that the person communicates, and:
 - an ability to make use of a range of communication strategies, as needed
- An ability to draw on knowledge that asking and talking about difficult issues does not increase the likelihood of behaviours that put the person at risk (e.g. self-harm), and that it is helpful to communicate openly and with frankness

Application

- An ability to use communication skills that help to engage people in a collaborative discussion of their circumstances and immediate needs, and:
 - an ability to make adjustments for people who may have difficulty expressing themselves (e.g. because of a disability)

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- To gain an accurate sense of the person's account, an ability for the practitioner to be aware of (and avoid) any 'filters' they may find themselves imposing, e.g.:

- listening in a judgmental way
- making assumptions (in advance or instead of listening fully)
- using diagnostic labels as explanations

- An ability to convey an attentive stance through body language, e.g.:

- sitting close (but not too close) to the person
- sitting 'square on' or next to the person (rather than across a desk)
- having an open posture
- maintaining an appropriate level of eye contact

- An ability to listen attentively to the person by:

- actively listening to what they say and trying to make sense of their experiences, behaviours and feelings, as well as their social context
- listening to the tone and pace of what is said, as well as its content
- allowing silences if it appears to help the person express themselves at their own pace
- attending to the person's non-verbal behaviour, such as agitation (which can indicate the areas they find more intensely distressing, or unspoken feelings that might be difficult to express verbally)
- adopting a pace that matches theirs

- An ability to help the person expand on or explore relevant issues by using:

- statements (e.g. brief summaries of what has already been said)
- questions
- non-verbal prompts

- An ability to ask both:

- closed questions (that usually have a specific answer and are best used to establish factual information)
- open questions (that require more than a yes/no answer and encourage discussion)

- An ability to judge when questioning is being experienced as helpful and when less so (e.g. where the person is feeling 'grilled')

- An ability to listen empathically to the person:

- actively trying to understand their perspective and how they understand their situation
- 'stepping into their shoes' in order to understand their world
- taking on board and recognising their feelings (but taking care not to mirror their feelings)

- An ability to maintain an awareness of your own perspective or frame of reference in order not to inadvertently impose it



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■ An ability to convey a basic and empathic understanding of what has been said or conveyed, e.g. by:

- paraphrasing what has been said (but not 'parroting'/repeating verbatim)
- making short summaries that try to connect different aspects of what has been communicated
- using appropriate non-verbal behaviour that 'chimes' with what has been said (e.g. through appropriate facial expression)

■ An ability to check the person's understanding by asking them to summarise the discussion and/or any decisions that have been agreed

■ An ability to ask the person whether all the issues that they wished to raise have been discussed

4.2. Ability to communicate with children/young people of differing ages, developmental level and background

■ An ability to draw on knowledge of the ways that developmental differences usually manifest, in relation to the child/young person's:

- language
- thinking and understanding
- expression of affect
- behaviour

■ An ability to draw on knowledge that engagement and contact take place through:

- speech and conversation
- behaviour

Knowledge of the impact of development on the child/young person's understanding of, and participation in, clinical work

■ An ability to draw on knowledge of attachment theory and its implications for engagement

■ An ability to draw on knowledge that:

- developmental differences change across childhood and adolescence
- children/young people vary widely in their clinical presentation and adjustment

■ An ability to draw on knowledge that younger children will have a more concrete and egocentric understanding of:

- their own mental state
- the mental states of others
- interpersonal situations

■ An ability to draw on knowledge that younger children may have only a rudimentary understanding of the purpose of clinical contact

■ An ability to draw on knowledge that children/young people show a wide-range of behaviours in interview that can complicate the clinical process, and:

- that behaviour can vary widely within a single session (e.g. from withdrawn to restless or oppositional)

■ An ability to understand that children/young people's behaviour is a form of communication

■ An ability to reflect on the meaning of the behaviour(s) and their relation to the past and present



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■	An ability to draw on knowledge that children/young people often find it difficult to put their concerns and feelings into words, and an awareness:
	<ul style="list-style-type: none"> ■ that children/young people may need support to share concerns and feelings ■ that younger children use fewer, simpler words ■ that short replies (e.g. 'I don't know' or shrugs) are very common in child interviewing
■	An ability to draw on knowledge that children/young people will have difficulty understanding questions not tailored to their level
■	An ability to draw on knowledge that using leading, multiple and double questions can be confusing for a child/young person

Providing developmentally appropriate information about the session(s)

■	An ability to provide developmentally appropriate information about the session(s) in order to reduce anxiety and increase trust in the practitioner, and to discuss:
	<ul style="list-style-type: none"> ■ the aim of the session(s) ■ how the practitioner will manage confidentiality and its limits ■ how and what information will be shared with the parents/carers and other agencies

Ability to engage with the child/young person's perspective

■	An ability to draw on knowledge that children/young people often need to have spent some time with the practitioner before feeling able to express themselves, and:
	<ul style="list-style-type: none"> ■ an ability to be patient and persistent in helping the child/young person express themselves
■	An ability to draw on knowledge of the language, attitudes, behaviours and interests of children/young people of a similar age to the child/young person
■	An ability to show interest in the child as a person
■	An ability to show 'neutrality' when faced with problematic behaviour
■	An ability to stay close to the child/young person's language, emotional state and developmental capacities

Choosing developmentally appropriate activities to help engagement

■	An ability to draw on knowledge that because some children/young people may find it difficult to engage with the practitioner in more formal settings (such as an interview room), alternative settings or adjustments may be considered
■	An ability to engage younger children by observing and commenting on their behaviour with a variety of creative activities



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- An ability to help the child/young person communicate and engage with the practitioner by using a diverse range of creative activities (e.g. art and drama, or vocational activities)
- An ability to engage children/young people by using technologies that they are familiar with (e.g. texts, email diary, etc.)

Ability to help the child/young person express themselves verbally

- An ability to help the child/young person express themselves by 'scaffolding' communication:
 - keeping ideas concrete
 - using simple words (and few of them)
 - breaking down questions into component parts
 - moving from less to more difficult questions
 - moving from less to more difficult topics
 - letting them express some positives first
 - giving them choices about what they talk about
- An ability to use scales to help the child/young person communicate
 - analogue scales (e.g. '1-10'; 'little, medium, lots' etc.)
 - visual scales (e.g. smiley or sad faces)
- An ability to encourage the child/young person by thinking aloud for them (e.g. 'I wonder if ...?')
- An ability to normalise the child/young person's experience (e.g. 'Children often think that...')
- An ability to invite the child/ young person to offer an opinion (e.g. 'Do you think that ...?')
- An ability to go back to easier topics if the child/young person becomes distressed or anxious
- An ability to move between trivial and clinically relevant issues, to moderate distress or anxiety

Engaging the child/young person when the parents/carers is present

- When children/young people and parents/carers are seen together, an ability to set out the parameters of the meeting, in particular to ensure that the child/young person is aware:
 - that everyone will have the opportunity to talk and for their point of view to be heard
 - that the practitioner understands that the child/young person may have a different point of view from their parents/carers, and that the practitioner is interested in hearing it
- An ability to repeat and re-phrase important interview content for the child/ young person
- An ability to explain to the child/young person the content and purpose of any assessment procedures that are given to parents/carers (e.g. consent forms, rating scales)

4.3. Ability to foster and maintain a good therapeutic relationship and to grasp the service user's perspective and 'world view'

Work in children/young people's services almost always includes work with family/carers, both as part of an integrated intervention or in the form of a parallel treatment. As such, each person is potentially the 'service user' referred to in this set of competences.



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Understanding the concept of the therapeutic relationship

- An ability to draw on knowledge that a therapeutic relationship is usually seen as having three components:
 - the relationship or bond between practitioner and service user
 - consensus between practitioner and service user regarding the techniques/methods employed in an intervention
 - consensus between practitioner and service user regarding the goals of an intervention
- An ability to draw on knowledge that all three components contribute to the maintenance of the therapeutic relationship

Knowledge of practitioner factors associated with building a positive therapeutic relationship

- An ability to draw on knowledge of practitioner factors that increase the probability of forming a positive therapeutic relationship:
 - being flexible and allowing the service user 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
 - being consistent
 - being able to 'be oneself'
- Knowledge of practitioner factors that reduce the probability of forming a positive therapeutic relationship:
 - being rigid
 - being critical
 - being distant
 - being aloof
 - being distracted
 - making inappropriate use of silence



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Knowledge of service user factors associated with building the relationship

- An ability to draw on knowledge of service user factors that affect the probability of forming a positive relationship e.g.:
 - interpersonal issues (e.g. assuming the practitioner will not believe their perspective on events)
 - involuntary presentation (e.g. sectioned under the Mental Health Act, or attending a session because of external pressures)
 - issues related to substance misuse
 - service-related issues (e.g. previous negative experiences of services)
 - cultural factors (e.g. cultural expectations about who should be involved in any intervention)
 - influence of family and peers (e.g. families who encourage or discourage a young person from maintaining contact with services, or peers who stigmatise them for having an intervention)

Capacity to develop the therapeutic relationship to support an intervention

- An ability to listen to the service user's concerns in a non-judgmental, supportive and sensitive way, and that conveys acceptance when the service user describes their experiences and beliefs
- An ability to validate the service user's concerns and experiences
- An ability to ensure that the service user understands why the intervention is being offered
- An ability to gauge whether the service user understands why they are having the intervention, whether they have questions about it or are sceptical, and to respond to any concerns openly and non-defensively in order to resolve any ambiguities
- An ability to help the service user express any concerns or doubts they have about the planned intervention and/or the practitioner, especially where this relates to mistrust or scepticism
- An ability to help the service user form and articulate their goals for the intervention, and to gauge the degree of congruence in the aims of the service user and practitioner

Capacity to grasp the service user's perspective and 'world view'

- An ability to grasp the ways in that the service user characteristically understands themselves and the world around them
- An ability to hold the service user's world view in mind throughout the course of an intervention and to convey this understanding through interactions with the service user, in a way that allows them to correct any misapprehensions
- An ability to establish the service user's point of view by exploring their position in an open and accepting way, taking their concerns at face value and suspending any disbelief
- An ability to hold the service user's perspective in mind while gathering all relevant information in a sensitive way

- An ability to hold the service user's world view in mind, while retaining an independent perspective and guarding against collusion with the service user

Capacity to maintain the therapeutic relationship

Capacity to recognise and to address threats to the relationship

- An ability to recognise when strains in the relationship threaten the progress of an intervention

- An ability to use appropriate interventions in response to disagreements about tasks and goals, and:

- to check that the service user understands the rationale for the intervention and to review this with them and/or clarify any misunderstandings
- to judge when it is best to refocus on tasks and goals seen as relevant or manageable by the service user (rather than keep exploring issues that lead to disagreement)

- An ability to deploy appropriate interventions in response to strains in the bond between practitioner and service user, e.g.:

- for the practitioner to give and ask for feedback about what is happening in the here-and-now interaction, in a way that invites exploration with the service user
- for the practitioner to acknowledge and accept responsibility for their contribution to any strains in the therapeutic relationship
- where the service user recognises and acknowledges that the therapeutic relationship is under strain, an ability (when appropriate) to help them make links between the 'rupture' and how they usually relate to others
- to allow the service user to express any negative feelings about the therapeutic relationship
- to help the service user explore any fears they have about expressing negative feelings about the therapeutic relationship



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4.4. Ability to understand and respond appropriately to people in distress

Throughout this set (subdomain) of competences, 'person'/'people' refers to children/young people, parents/carers, family members and significant others

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- An ability to draw on knowledge that children/young people and families/carers will often experience high levels of emotional arousal and distress, and that acknowledging and addressing this should be a primary goal, and:

- an ability to listen to, maintain contact with and respond to people who are expressing strong emotions

- An ability to help people access, differentiate and experience their emotions in a way that best facilitates change

- An ability to help people express their emotions while also monitoring their capacity to tolerate emotional expression and to deploy strategies that help to manage any difficulties that emerge, e.g. by:

- ensuring that discussion moves at their pace (i.e. their readiness and capacity to discuss an issue)
- 'pulling back' if areas appear to be too difficult and returning to them at a later stage
- helping them stay with the emotion without escalating it
- helping them recognise and accurately label emotions

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

- helping the person to name emotions and the 'messages' that they convey
- indicating what behaviour is appropriate (setting limits)

- When sessions include the child/young person and their family/carers, an ability to help the adults:

- support the child/young person's capacity to express emotion in an appropriate way (in the session)
- express their emotions in an appropriate way

Ability to reflect on the expression of behaviours and strong emotions

- An ability to understand that the person's emotional expression (including behaviour that challenges) is a form of communication

- An ability to reflect on the meaning of the behaviour/emotional expression and how it relates to the past and present

- An ability to describe the emotion/behaviour and identify the person's own interpretation of its meaning, and:

- an ability to discuss the interpretations with the person



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■ An ability for the practitioner to reflect on their own reaction to the emotional/behavioural expression and their influence on the person's behaviour, and:

■ an ability for the practitioner to make use of supervision to reflect (and, if necessary, act) on these issues



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4.5. Communicating with children/young people with cognitive and neurodevelopmental challenges

This section identifies communication issues that may occur in working with children/young people with neurodevelopmental presentations or conditions. Three example conditions are included, but it is important to hold in mind that:



- there are a range of these conditions
- children/young people can have more than one condition
- children/young people who do not meet formal diagnostic criteria may also have difficulties with communication.

- An ability to draw on knowledge that if verbal communication is challenging for the child/young person, other forms of communication (e.g. drawing, writing or play) are appropriate and may be the main way that they communicate, and:

- an ability to make use of a range of communication strategies, as needed

Communicating with people with learning disabilities

- An ability to draw on knowledge that the linguistic and cognitive abilities of children/young people with learning disabilities will vary greatly, but they may have specific communication difficulties, e.g.:

- difficulty understanding abstract concepts
- unclear speech
- needing more time to process and retrieve information
- a limited vocabulary
- being prone to suggestibility (they may change their answers in response to the feedback they get)
- being more likely to agree and answer 'yes' to questions
- struggle to express themselves, and become frustrated by it

- An ability to draw on knowledge that children/young people with learning disabilities may have learned social strategies to mask their difficulties understanding and following verbal communication

- An ability to address any difficulties the child/young person has communicating by making appropriate adjustments, e.g.:

- listening carefully and asking them to clarify or repeat information if it has been hard to understand what they said
- giving them time to respond
- using simple, straightforward, everyday language
- limiting the number of key ideas that are communicated in a sentence
- using concrete examples (rather than abstract ideas)



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<ul style="list-style-type: none"> ■ asking short, simple 'either/or' questions (but avoid asking leading questions)
<ul style="list-style-type: none"> ■ creating a context for comments (i.e. to orient the person to the reasons for comments or questions)
<ul style="list-style-type: none"> ■ regularly asking them to summarise or repeat what has been discussed (to check that it has been understood)

Communicating with people with autism spectrum disorder (ASD)

<ul style="list-style-type: none"> ■ An ability to draw on knowledge that children/young people with ASD vary considerably in their capacity to communicate, but that they may: <table border="1"> <tr> <td> <ul style="list-style-type: none"> ■ have difficulty articulating and communicating how they feel, both in their speech and non-verbal communication (e.g. facial expression, body language) </td> </tr> <tr> <td> <ul style="list-style-type: none"> ■ have a very literal interpretation of language, and so find figurative language (metaphors, idioms, similes) difficult to understand </td> </tr> <tr> <td> <ul style="list-style-type: none"> ■ have a higher level of expressive language (their ability to communicate with others) than receptive language (their ability to understand what has been said) </td> </tr> <tr> <td> <ul style="list-style-type: none"> ■ find long, complex communications hard to follow </td> </tr> <tr> <td> <ul style="list-style-type: none"> ■ find it difficult to modulate the pitch, tone or speed of their voice (e.g. talking in a monotone or loudly) </td> </tr> <tr> <td> <ul style="list-style-type: none"> ■ find it uncomfortable to maintain eye contact </td> </tr> <tr> <td> <ul style="list-style-type: none"> ■ have difficulty interpreting facial expressions </td> </tr> <tr> <td> <ul style="list-style-type: none"> ■ have difficulty interpreting body language </td> </tr> </table> 	<ul style="list-style-type: none"> ■ have difficulty articulating and communicating how they feel, both in their speech and non-verbal communication (e.g. facial expression, body language) 	<ul style="list-style-type: none"> ■ have a very literal interpretation of language, and so find figurative language (metaphors, idioms, similes) difficult to understand 	<ul style="list-style-type: none"> ■ have a higher level of expressive language (their ability to communicate with others) than receptive language (their ability to understand what has been said) 	<ul style="list-style-type: none"> ■ find long, complex communications hard to follow 	<ul style="list-style-type: none"> ■ find it difficult to modulate the pitch, tone or speed of their voice (e.g. talking in a monotone or loudly) 	<ul style="list-style-type: none"> ■ find it uncomfortable to maintain eye contact 	<ul style="list-style-type: none"> ■ have difficulty interpreting facial expressions 	<ul style="list-style-type: none"> ■ have difficulty interpreting body language 	
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<ul style="list-style-type: none"> ■ An ability to accommodate the communication difficulties of children/young people with ASD, e.g. by: <table border="1"> <tr> <td> <ul style="list-style-type: none"> ■ keeping communications short and straightforward </td> </tr> <tr> <td> <ul style="list-style-type: none"> ■ not using metaphors, idioms, similes or analogies </td> </tr> <tr> <td> <ul style="list-style-type: none"> ■ using concrete examples/facts to explain things </td> </tr> <tr> <td> <ul style="list-style-type: none"> ■ asking specific questions </td> </tr> <tr> <td> <ul style="list-style-type: none"> ■ not overloading them with verbal information </td> </tr> <tr> <td> <ul style="list-style-type: none"> ■ being patient and giving them extra time to respond </td> </tr> <tr> <td> <ul style="list-style-type: none"> ■ regularly asking them to summarise or repeat what has been discussed (to check that it has been accurately understood) </td> </tr> <tr> <td> <ul style="list-style-type: none"> ■ being aware of their difficulties and differences in non-verbal communication (e.g. facial expression, eye contact and personal distance) </td> </tr> <tr> <td> <ul style="list-style-type: none"> ■ using alternative ways to communicate that they find easier or prefer (e.g. writing [including text and email] rather than speaking) </td> </tr> </table> 	<ul style="list-style-type: none"> ■ keeping communications short and straightforward 	<ul style="list-style-type: none"> ■ not using metaphors, idioms, similes or analogies 	<ul style="list-style-type: none"> ■ using concrete examples/facts to explain things 	<ul style="list-style-type: none"> ■ asking specific questions 	<ul style="list-style-type: none"> ■ not overloading them with verbal information 	<ul style="list-style-type: none"> ■ being patient and giving them extra time to respond 	<ul style="list-style-type: none"> ■ regularly asking them to summarise or repeat what has been discussed (to check that it has been accurately understood) 	<ul style="list-style-type: none"> ■ being aware of their difficulties and differences in non-verbal communication (e.g. facial expression, eye contact and personal distance) 	<ul style="list-style-type: none"> ■ using alternative ways to communicate that they find easier or prefer (e.g. writing [including text and email] rather than speaking)
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Communicating with children/young people with attention deficit hyperactivity disorder (ADHD)

- An ability to draw on knowledge that children/young people with ADHD:
 - have difficulty directing and sustaining attention
 - can seem inattentive and forgetful
 - often have difficulty with impulse control
 - can experience social difficulties because of the combination of these factors

- An ability to draw on knowledge that children/young people with ADHD can find it difficult:

- to follow the thread of a conversation
- to concentrate on long conversations
- to attend to conversations in a noisy environment

- An ability to draw on knowledge that children/young people with ADHD may:

- 'blurt out' answers
- interrupt
- talk excessively
- struggle to organise their thoughts
- be easily distracted
- feel overwhelmed

- An ability to adjust communication to take account of the difficulties experienced by children/young people with ADHD, e.g.:

- minimising potential distractions (e.g. noisy or busy environments, or distractions e.g. mobile phones)
- keeping communications short and focused
- giving a 'big picture' summary before moving to a short summary of details (and so accommodate to difficulties holding attention)
- avoiding long conversations



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