

GENERIC THERAPEUTIC COMPETENCES

Knowledge and understanding of mental health problems

During assessment and when carrying out interventions, an ability to draw on knowledge of common mental health problems and their presentation
An ability to draw on knowledge of the factors associated with the development and maintenance of mental health problems
An ability to draw on knowledge of the usual pattern of symptoms associated with mental health problems
An ability to draw on knowledge of the ways in which mental health problems can impact on functioning (e.g. maintaining intimate, family and social relationships, or the capacity to maintain employment and study)
An ability to draw on knowledge of the impact of impairments in functioning on mental health
An ability to draw on knowledge of mental health problems to avoid escalating or compounding the client's condition when their behaviour leads to interpersonal difficulties which are directly attributable to their mental health problem

Knowledge of, and ability to operate within, professional and ethical guidelines

Knowledge

An ability to maintain awareness of national and local codes of practice which apply to all staff involved in the delivery of healthcare, as well as any codes of practice which apply to the therapist as a member of a specific profession

An ability to take responsibility for maintaining awareness of legislation relevant to areas of professional practice in which the therapist is engaged (specifically including the Mental Health Act, Mental Capacity Act, Human Rights Act, Data Protection Act)

Application of professional and ethical guidelines

An ability to draw on knowledge of relevant codes of professional and ethical conduct and practice in order to apply the general principles embodied in these codes to each piece of work being undertaken, in the areas of:

obtaining informed consent for interventions from clients

maintaining confidentiality, and knowing the conditions under which confidentiality can be breached

safeguarding the client's interests when co-working with other professionals as part of a team, including good practice regarding inter-worker/ inter-professional communication

competence to practice, and maintaining competent practice through appropriate training/professional development

recognition of the limits of competence and taking action to enhance practice through appropriate training/professional development

protecting clients from actual or potential harm from professional malpractice by colleagues by instituting action in accordance with national and professional guidance

maintaining appropriate standards of personal conduct for self:

a capacity to recognise any potential problems in relation to power and "dual relationships" with clients, and to desist absolutely from any abuses in these areas

recognising when personal impairment could influence fitness to practice, and taking appropriate action (e.g. seeking personal and professional support and/or desisting from practice)

Ability to work with difference (cultural competence)

an ability to maintain an awareness of the potential significance for practice of social and cultural difference, across a range of domains, but including:

ethnicity

culture

class

religion

gender

age

disability

sexual orientation

For all clients with whom the therapist works, an ability to draw on knowledge of the relevance and potential impact of social and cultural difference on the effectiveness and acceptability of an intervention

Where social and cultural difference impacts on the accessibility of intervention, an ability to make appropriate adjustments to the therapy, with the aim of maximising its potential benefit to the client

**Knowledge of a model of therapy, and
the ability to understand and employ the model in practice**

An ability to draw on knowledge of factors common to all therapeutic approaches*:	
	supportive factors:
	a positive working relationship between therapist and client characterised by warmth, respect, acceptance and empathy, and trust
	the active participation of the client
	therapist expertise
	opportunities for the client to discuss matters of concern and to express their feelings
	learning factors:
	advice
	correctional emotional experience
	feedback
	exploration of internal frame of reference
	changing expectations of personal effectiveness
	assimilation of problematic experiences
	action factors:
	behavioural regulation
	cognitive mastery
	encouragement to face fears and to take risks
	reality testing
	experience of successful coping
An ability to draw on knowledge of the principles which underlie the intervention being applied, using this to inform the application of the specific techniques which characterise the model	
An ability to draw on knowledge of the principles of the intervention model in order to implement therapy in a manner which is flexible and responsive to client need, but which also ensures that all relevant components are included	

* classification adapted from:

Lambert, M.J. and Ogles, B.M (2004) The efficacy and effectiveness of psychotherapy pp139-193 in M.J. Lambert Bergin and Garfield's Handbook of Psychotherapy and Behaviour Change (5th Edition) New York: Wiley

Ability to engage client

While maintaining professional boundaries, an ability to show appropriate levels of warmth, concern, confidence and genuineness, matched to client need
An ability to engender trust
An ability to develop rapport
An ability to adapt personal style so that it meshes with that of the client
An ability to recognise the importance of discussion and expression of client's emotional reactions
An ability to adjust the level of in-session activity and structuring of the session to the client's needs
An ability to convey an appropriate level of confidence and competence
An ability to avoid negative interpersonal behaviours (such as impatience, aloofness, or insincerity)

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

Understanding the concept of the therapeutic alliance

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

Knowledge of therapist factors associated with the alliance

An ability to draw on knowledge of therapist factors which increase the probability of forming a positive alliance:
being flexible and allowing the client to discuss issues which 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 therapist factors which reduce the probability of forming a positive alliance:
being rigid
being critical
making inappropriate self-disclosure
being distant
being aloof
being distracted
making inappropriate use of silence

Capacity to develop the alliance

An ability to listen to the client's concerns in a manner which is non-judgmental, supportive and sensitive, and which conveys a comfortable attitude when the client describes their experience
An ability to ensure that the client is clear about the rationale for the intervention being offered
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 in order to resolve any ambiguities
An ability to help the client express any concerns or doubts they have about

the therapy and/or the therapist, especially where this relates to mistrust or skepticism
An ability to help the client articulate their goals for the therapy, and to gauge the degree of congruence in the aims of the client and therapist

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 therapy and to convey this understanding through interactions with the client, in a manner that allows the client to correct any misapprehensions
An ability to hold the client’s world view in mind, while retaining an independent perspective and guarding against identification 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 the progress of therapy
An ability to deploy appropriate interventions in response to disagreements about tasks and goals:
An ability to check that the client is clear about the rationale for treatment and to review this with them and/or clarify any misunderstandings
An ability to help clients understand the rationale for treatment through using/drawing attention to concrete examples in the session
An ability to judge when it is best to refocus on tasks and goals which are seen as relevant or manageable by the client (rather than explore factors which are giving rise to disagreement over these factors)
An ability to deploy appropriate interventions in response to strains in the bond between therapist and client:
An ability for the therapist to give and ask for feedback about what is happening in the here-and-now interaction, in a manner which invites exploration with the client
An ability for the therapist to acknowledge and accept their responsibility for their contribution to any strains in the alliance
Where the client recognises and acknowledges that the alliance is under strain, an ability to help the client make links between the rupture and their usual style of relating to others
An ability to allow the client to assert any negative feelings about the relationship between the therapist and themselves
An ability to help the client explore any fears they have about expressing negative feelings about the relationship between the therapist and themselves

*** Sources:**

Ackerman, S. J., & Hilsenroth, M. J. (2001). A review of therapist characteristics and techniques negatively impacting the therapeutic alliance. *Psychotherapy: Theory, Research, Practice, Training*, 38, 171–185.

Ackerman, S. J., & Hilsenroth, M. J. (2003). A review of therapist characteristics and techniques positively impacting the therapeutic alliance. *Clinical Psychology Review*, 23, 1–33

Safran J.D. and Muran J.C. (2000) Negotiating the therapeutic alliance New York: Guilford Press

Ability to deal with emotional content of session

An ability to facilitate the processing of emotions by the client – to acknowledge and contain emotional levels that are too high (e.g. anger, fear, despair) or too low (e.g. apathy, low motivation)

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

An ability to help the client access differentiate and experience his/her emotions in a way that facilitates change

Ability to manage endings

An ability to signal the ending of the intervention at appropriate points during the therapy (e.g. when agreeing the treatment contract, and especially as the intervention draws to close) in a way which acknowledges the potential importance of this transition for the client

An ability to help client discuss their feelings and thoughts about endings and any anxieties about managing alone

An ability to review the work undertaken together

An ability to say goodbye

Ability to undertake a generic assessment

An ability to obtain a general idea of the nature of the client's problem
An ability to elicit information regarding psychological problems, diagnosis, past history, present life situation, attitude about and motivation for therapy
An ability to gain an overview of the client's current life situation, specific stressors and social support
An ability to assess the client's coping mechanisms, stress tolerance, and level of functioning
An ability to help the client identify/select target symptoms or problems, and to identify which are the most distressing and which the most amenable to intervention
An ability to help the client translate vague/ abstract complaints into more concrete and discrete problems
An ability to assess and act on indicators of risk (of harm to self or others) (and the ability to know when to seek advice from others)

An ability to gauge the extent to which the client can think about themselves psychologically (e.g. their capacity to reflect on their circumstances or to be reasonably objective about themselves)
An ability to gauge the client's motivation for a psychological intervention

An ability to discuss treatment options with the client, making sure that they are aware of the options available to them, and helping them consider which of these options they wish to follow
An ability to identify when psychological treatment might not be appropriate or the best option, and to discuss with the client (e.g. the client's difficulties are not primarily psychological, or the client indicates that they do not wish to consider psychological issues) or where the client indicates a clear preference for an alternative approach to their problems (e.g. a clear preference for medication rather than psychological therapy)

Ability to make use of supervision

An ability to hold in mind that a primary purpose of supervision and learning is to enhance the quality of the treatment clients receive

An ability to work collaboratively with the supervisor

An ability to work with the supervisor in order to generate an explicit agreement about the parameters of supervision (e.g. setting an agenda, being clear about the respective roles of supervisor and supervisee, the goals of supervision and any contracts which specify these factors)

An ability to help the supervisor be aware of your current state of competence and your training needs

An ability to present an honest and open account of clinical work undertaken

An ability to discuss clinical work with the supervisor as an active and engaged participant, without becoming passive or avoidant, or defensive or aggressive

An ability to present clinical material to the supervisor in a focussed manner, selecting the most important and relevant material

Capacity for self-appraisal and reflection

An ability to reflect on the supervisor's feedback and to apply these reflections in future work

An ability to be open and realistic about your capabilities and to share this self-appraisal with the supervisor

An ability to use feedback from the supervisor in order further to develop the capacity for accurate self-appraisal

Capacity for active learning

An ability to act on suggestions regarding relevant reading made by the supervisor, and to incorporate this material into clinical practice

An ability to take the initiative in relation to learning, by identifying relevant papers, or books, based on (but independent of) supervisor suggestions, and to incorporate this material into clinical practice

Capacity to use supervision to reflect on developing personal and professional role

An ability to use supervision to discuss the personal impact of the work, especially where this reflection is relevant to maintaining the likely effectiveness of clinical work

An ability to use supervision to reflect on the impact of clinical work in relation to professional development

Capacity to reflect on supervision quality

An ability to reflect on the quality of supervision as a whole, and (in accordance with national and professional guidelines) to seek advice from others where:

there is concern that supervision is below an acceptable standard

where the supervisor's recommendations deviate from acceptable

practice

where the supervisor's actions breach national and professional guidance (e.g. abuses of power and/or attempts to create dual (sexual) relationships)
