

CBT COMPETENCES – SPECIFIC COMPETENCES

Exposure techniques

An ability to explain the rationale for exposure, in particular its use as a way of helping clients re-evaluate anticipated consequences and to learn to tolerate (rather than rigidly to avoid) fear and anxiety cued by both situational and interoceptive (somatic) stimuli
An ability to introduce the concept of hierarchical exposure and to help clients to construct a hierarchy of feared situations for both situational and interoceptive items, and their combination
An ability to work with the client to implement exposure in a manner which maximises the probability of benefit, in terms of its structure (e.g. number of situations faced, duration and pacing), as well as helping the client identify and circumvent any covert avoidance or the use of safety behaviours
An ability to identify, plan and implement interoceptive , <i>in vitro</i> and in vivo exposure to help clients learn that some physiological sensations can be induced behaviourally and / or cognitively
An ability to identify when it would be helpful to involve significant others in exposure, and to plan and implement this
An ability to help the client follow-up any therapist-directed exposure with self-directed exposure
An ability to help the client review exposure experiences
An ability to help clients draw upon skills learnt within the cognitive and relaxation components of the intervention to help them to manage anxiety when undergoing graded exposure tasks

Applied relaxation and Applied Tension

Applied Relaxation

Engagement

An ability to explain the rationale for applied relaxation to the client, specifically:

the use of this technique to break into vicious circles of physiological arousal

the benefit of learning to apply relaxation techniques in a range of contexts

the importance of undertaking homework in order to gain most benefit

Intervention

An ability to help the client increase their awareness of early signs of anxiety reactions by completing a record of anxiety episodes

An ability to teach clients progressive relaxation techniques, specifically (and in the following order):

tension and release

release only

cue-controlled relaxation

differential relaxation of different parts of the body while engaged in various activities and while moving

rapid relaxation

An ability to help the client apply relaxation techniques in anxiety-provoking situations (i.e. to conduct exposure)

An ability to help the client maintain and apply their relaxation skills

Applied tension

Knowledge

An understanding of the diphasic reaction (an initial rise in blood pressure and heart rate followed by a rapid drop in these parameters, potentially leading to fainting)

Engagement

An ability to explain the rationale for applied tension in relation to the diphasic reaction

Intervention

An ability to teach the client tension techniques through modeling, and to encourage homework practice of this technique

An ability to use stimuli which cue the phobic reaction to help the client detect early signs of a drop in blood pressure and to provide opportunities for applying the skill of applied tension

An ability to create opportunities for in-vivo exposure to phobic stimuli and/or situations while practicing applied tension

Activity monitoring and scheduling

Activity monitoring

An ability to help clients complete an activity chart in order to monitor their activities

An ability to help clients rate degrees of pleasure and mastery associated with activities

An ability to review activity charts with the client, identifying:

activities which are over- or under-represented

activities which are associated with high or low levels of pleasure and mastery

conclusions about these patterns of activity

An ability to work with the client to identify and plan specific changes to activities, identifying any thoughts (assumptions or beliefs) which might make it difficult for the client to implement these changes

Activity scheduling

An ability to use the activity chart to help clients schedule activities for the forthcoming week (e.g. pleasurable activities, previously avoided activities, therapy homework)

An ability to help clients record both predicted and actual levels of pleasure and mastery associated with scheduled activities

An ability to review activities with the client, and to discuss how these activities test out any automatic thoughts or beliefs which emerge prior to, or while carrying out, activities

Guided Discovery and Socratic Questioning

Knowledge

An ability to be aware of, and draw on, knowledge that guided discovery usually consists of four steps:
asking questions to uncover relevant information outside the client's current awareness
accurate listening and reflection by the therapist
summarising the information discovered
forming a synthesising question that asks the client to apply the new information discussed to the client's original belief

Application

An ability to make effective use of questioning techniques (e.g. Socratic questions) aimed at helping the client to discover useful information that can be used to help him/her to discover alternative meanings and gain a better level of understanding
An ability to help the client develop an alternative perspective based on information provided by the client (and not the therapist)
An ability to help the client adopt an experimental approach to evaluating beliefs, behaviours, moods and plans for change
An ability to adopt an open and inquisitive style aimed at helping the client draw his/her own conclusions
An ability to help the client develop hypotheses regarding his/her current situation and to generate potential solutions for him/herself
An ability to help the client develop a range of perspectives regarding his/her experience by examining evidence, considering alternatives, and weighing the advantages and disadvantages of different perspectives
An ability to help provide the opportunity for re-evaluation and new learning to occur by using guided discovery to create doubt in place of certainty.
An ability to refrain from imposing a particular point of view on the client, for example by reliance on debate, persuasion, "lecturing", or "cross-examining" the client

Maintaining a flexible and responsive style

An ability to employ a flexible and responsive questioning technique which flows from the general to the specific, and back again
An ability to frame and to phrase questions in a way which is consonant with client's likely current level of understanding

Sources:

Padesky, C.A. and Greenberger, D. (1995) *Clinician's guide to mind over mood* New York: Guilford Press

Blackburn, I.M. James, I.A. Milne D.L & Reichelt F.K. (2001) *Cognitive Therapy Scale – Revised (CTS-R)*

Ability to use thought records

Preparation for using thought records

An ability to ensure that the client has grasped and has accepted the relevance of the cognitive model (i.e. to ensure that they accept the potential relevance of the concepts they will be applying in completing thought records)

An ability to ensure that the client is able to identify their automatic thoughts and emotions, by verbally eliciting examples of specific situations and their accompanying automatic thoughts in the session

An ability to work with the client to evaluate an important automatic thought in the session, prior to their completing the full thought record

Explaining the rationale for, and content of, thought records

An ability to explain the rationale for using a written thought record (a means of helping the client to become an active, collaborative participant in their own therapy by identifying and appraising how they react to events (in terms of their own physiological reactions, behaviours, feelings and cognitions))

An ability to explain the content of thought records (initially including a record of the date and time, the situation, associated automatic thoughts, and associated emotions; extended at later stages to include a record of the client's adaptive responses to automatic thoughts and the outcome(s) after making these responses)

Incorporating use of thought record into the intervention

An ability to ensure that review and discussion of thought records with the client is consistently incorporated into the intervention

An ability to encourage the client to make use of the thought record as part of ongoing self-monitoring

Managing problems in completing thought records

An ability to help the client identify any automatic thoughts associated with completing the form itself

An ability to help the client implement a problem-solving approach to any obstacles in completing the form

Ability to identify and work with safety behaviours

Knowledge

An ability to draw on knowledge of safety-seeking behaviours in order to identify both overt and covert safety behaviours, and hence their impact in the development and maintenance of the client's problems

Application

An ability to identify the way in which overt and covert safety behaviours manifest in individual clients

An ability to help the client become aware of the effect of his/her behaviours on their problems

An ability to elicit safety behaviours that are associated with the management of distressing emotions

An ability to help the client draw links between behaviours and emotions, so that the role of safety behaviours in maintaining problems is clear to them

Ability to detect, examine and help client reality test automatic thoughts and images

Explaining the notion of automatic thoughts and images to the client

An ability to define the notion of automatic thoughts and images in a way which is meaningful for, and relevant to, the client

Detecting, eliciting and recording automatic thoughts/ images

An ability, in the session, to help clients notice automatic thoughts/images (by commenting on verbal and nonverbal cues which might indicate shifts in the client's affect and helping them focus on the thoughts which were going through their mind)

An ability to help clients identify automatic thoughts which arise in specific situations by a detailed focus on these events

An ability to help clients elaborate on initial reports of automatic thoughts in order to identify thoughts both about the situation itself and the client's thoughts about their reaction to the situation

An ability to use discussion and exploration to help clients who are experiencing difficulty identifying thoughts and situations which precipitate thoughts

An ability to help clients specify the actual phrasing of their thoughts, to help them distinguish thoughts from interpretations and feelings, and to identify the thoughts which are most closely associated with distress

An ability to help clients begin detecting automatic thoughts for themselves

An ability to help clients detect automatic thoughts and images through devising specific 'projects' designed to help elicit and "catch" pertinent cognitions

An ability to help clients identify specific environmental events/ cues associated with specific automatic thoughts/ images

An ability to help clients use and complete relevant written records

Examining and evaluating (reality testing) automatic thoughts/ images

An ability to help clients elaborate the situations which cue thoughts/ images, and their accompanying reactions

An ability to explore the validity of thoughts/ images with the client (e.g. by exploring evidence, considering alternative explanations)

An ability to explore the validity of thoughts/ images without assuming that the client's thinking is erroneous

An ability to help clients consider the utility of automatic thoughts which (valid or not) are strongly believed by the client

An ability to consider, with the client, reasons why evaluation of automatic thoughts has not been effective

An ability to help the client evaluate automatic thoughts for themselves using appropriate homework assignments

An ability to help clients find alternative solutions to problems on the basis of helping the client to reevaluate automatic thoughts/ images

Responding to automatic thoughts/images

An ability to help the client record automatic thoughts/ images and responses to these thoughts, with the aim of appraising evidence and identifying alternative interpretations

Eliciting key cognitions/images

An ability to draw on a number of sources of information (e.g. empathy, Socratic questioning, discussion and information gleaned from client self-monitoring and behavioural experiments) in order to identify potential key cognitions/images (i.e. those which are associated with significant distress and/ or problems in functioning)

An ability use empathy and Socratic questioning to tentatively draw the client's attention to key automatic thoughts/ images

An ability to use empathy and Socratic questioning to help the client identify cognitions that are associated with distressing emotions which occur in the session

An ability to use clinical judgment to identify the stage of therapy when key cognitions or "hot" thoughts can be focused on

Ability to identify and modify assumptions, attitudes and rules ("intermediate beliefs")

Identifying assumptions, attitudes and beliefs

An ability to work collaboratively with the client in order to identify assumptions, attitudes and rules
An ability to ensure that the identification of assumptions is a process which is led by the client, and not one led by the therapist
An ability to take a "naïve", "unknowing" stance regarding the assumptions which shape the client's specific cognitions (i.e. an ability to avoid "jumping to conclusions")
An ability to identify possible assumptions and to help the client elaborate their meaning using the downward arrow technique

Modifying assumptions, attitudes and beliefs

An ability to identify those assumptions which are central and those which are more peripheral, and to focus on the most important
An ability to challenge assumptions using Socratic questions and by offering alternative suggestions, and to avoid making these challenges didactically (i.e. by 'lecturing' the client)
An ability to modify assumptions which compare what clients feel they 'should' do with what they are able to do (e.g. behavioural tests of assumptions)
An ability to help the client consider how assumptions can become self-fulfilling
An ability to help client consider changing/discarding self-defeating assumptions by identifying the advantages and disadvantages of holding on to these assumptions
An ability to help the client act against their assumptions, usually through behavioural experiments
An ability to help the client examine the long-term effectiveness of assumptions, especially when assumptions currently appear to be working in the client's favour

Ability to identify, and help the client modify, core beliefs

Identifying beliefs

An ability to formulate hypotheses about likely core beliefs on the basis of emerging clinical material
An ability to identify core beliefs using downward arrow techniques, by looking for central themes in the client's automatic thoughts and by direct elicitation
An ability to present core beliefs to the client as a hypothesis, in an appropriately tentative manner
An ability to present core beliefs to the client at a time in therapy when the client is likely to be able to be receptive to their discussion
An ability to help the client understand the concept of core beliefs, their origins in childhood events and the factors which tend to maintain them

Modifying beliefs

An ability to identify beliefs which are central and which are more peripheral, and to focus on the most important
An ability to help the client perceive beliefs as ideas whose validity can be tested
An ability to use standard cognitive techniques to help the client modify core beliefs and strengthen new beliefs (e.g. Socratic questioning, behavioural experiments, role play)
An ability to use additional cognitive techniques to help the client modify core beliefs (e.g. core belief worksheet, consideration of historical origins of core beliefs, restructuring of early memories using role playing/re-enactment)

Ability to employ imagery techniques

Identifying spontaneous images

An ability to help clients understand the concept of images, and if relevant identifying the terminology which best fits to the client's understanding of this term

An ability to help clients identify distressing spontaneous images

An ability to help clients discuss images that are particularly distressing by using appropriate empathy and normalisation

An ability to persevere when clients have difficulty identifying spontaneously occurring images

Responding to spontaneous images (with the aim of cognitive restructuring)

An ability to help clients follow images to completion in order to carry out cognitive restructuring

An ability to help clients reduce distress associated with an image by 'jumping ahead in time' to a point where the situation is resolved

An ability to help the client rework the image so as to imagine themselves coping with the situation

An ability to help the client rework the image and change its ending, with the aim of encouraging problem solving

An ability to use Socratic questioning to help the client to re-evaluate the image

An ability to help the client repeat images which are particularly distressing with the aim of helping the client reappraise the image and reduce associated distress

An ability to help the client use homework tasks to review techniques for responding to imagery

Responding to spontaneous images (with the aim of reducing immediate distress)

An ability to use techniques for 'cutting off' images, such as image stopping, image substitution or distraction

Using imagery induction

An ability to help the client practice coping strategies in imagination

An ability to induce imagery to help the client gain a new perspective which they can use to problem solve or for reappraisal

Planning and conducting behavioural experiments

Planning behavioural experiments

An ability to devise behavioural experiments which can directly test the validity of client's beliefs or assumptions about themselves or the world, which help clients construct and/or test new, more adaptive beliefs, and which can be carried out in the session or as homework

An ability to ensure that the form, timing and content of behavioural experiments are congruent with their intended aim

An ability to plan experiments which are likely to have positive outcomes

An ability to ensure that experiments are planned collaboratively, so as to ensure that any reservations held by the client are fully accounted for

Conducting behavioural experiments

An ability to ensure that the aim of the experiment is clear to, and understood by, the client, and that the client is aware of the cognitions being targeted by the experiment

An ability to help the client anticipate any possible problems, along with ways of overcoming these

An ability to help the client anticipate their likely reactions should the experiment confirm their fears

Reviewing behavioural experiments

An ability to help the client assess their reactions to the experiment by recording the outcome and the learning which has occurred

An ability to review the outcome of experiments (whether positive or negative) with the client in order to help them identify its impact on their thinking or behaviour, and the meaning the outcome of the experiment has for them

On the basis of review of the learning which has taken place, an ability to help the client build on this learning by identifying further behavioural experiments

Source:

Bennett-Levy, J., Butler, G., Fennell, M., Hackmann, A., Mueller, M., and Westbrook, D. (2004) *Oxford guide to behavioural experiments in cognitive therapy* Oxford: OUP

Formulation and treatment planning

Developing a formulation

An ability to develop, on the basis of a thorough assessment, a theory-based conceptualisation that specifically relates to the client, is well integrated and can be used to guide the practice of therapy
An ability to carry out a functional analysis – the causal, functional relationships between a specified set of target behaviours
An ability to translate client's complaints into a meaningful set of target problems and treatment goals
An ability to derive a cognitive behavioural formulation which links the client's symptoms and problems, the core beliefs underpinning these symptoms and problems, and the life events which activate the core beliefs
An ability to include a description of the likely origins of the client's core beliefs
In the light of emerging clinical information, an ability to revise the formulation and the treatment plan as needed

Applying the formulation – treatment planning

An ability to derive a formulation that has treatment utility
An ability to derive a treatment plan which links directly to the hypotheses contained in the formulation
An ability to use the formulation to develop a general treatment plan for therapy, and a specific plan for each individual session
An ability to formulate a therapy plan for each session that helps the client a) to identify and modify unhelpful thinking and b) to recognise and change the cognitive patterns leading to dysfunctional ideation and behaviour
An ability to use the formulation in treatment planning such that clients can experience success by focusing initially on less distressing and more malleable problems, thoughts and beliefs before progressing to more difficult and challenging beliefs
An ability to derive a formulation that identifies any likely obstacles to intervention, and helps to guide the therapist's response to their emergence

Sharing the formulation with the client

An ability to develop a conceptualisation, together with the client, that helps the client gain an understanding of how his/her perceptions and interpretations, beliefs, attitudes and rules relate to his/her problem
An ability to help the client gain an appreciation of the history, triggers and maintaining features of his/her problem in order to bring about change in the present and future

Ability to understand client's inner world and response to therapy

An ability to see the world through the perspective of the client's beliefs:	
	an ability to identify the client's beliefs
	an ability to take these beliefs and use their perspective to imagine how the world might look to the client
	an ability consistently to hold this perspective in mind when working with the client, such that it directly informs all aspects of the clinical work
An ability to hold in mind that one aspect of the client's world view is their perception of the therapist	
An ability for the therapist to adapt and revise their perception of the client's world view, both in response to changes in the client's beliefs which are prompted by the therapy, and in response to the emergence of new clinical material	