

SFHPT05

Foster and maintain a therapeutic alliance in cognitive and behavioural therapy



Overview

This standard is about establishing and maintaining an environment of respect, open communication and collaboration between therapist and client in cognitive and behavioural therapy. The focus is on helping the client to continue to engage in the therapy, recognising and empathising with their doubts, uncertainties and vulnerabilities. The therapeutic alliance may encounter difficulties which will need to be explored and understood, with the therapist acknowledging their own contribution to any strains in the relationship.

This standard describes therapeutic practice that has been shown to benefit adult clients engaged in cognitive and behavioural therapy for healthcare reasons, particularly depression and anxiety disorders (see reference in the additional information section on page 4). To apply this standard, practitioners also need to take account of the multiple problems and complex co-morbidities that individual clients may bring to therapy. Cognitive and behavioural therapy should be offered as part of an explicit and structured approach agreed within the treatment team and with the client.

Users of this standard will need to ensure that they are receiving supervision and that their practice reflects up to date information and policies. This standard should be understood in the context of the Digest of National Occupational Standards for Psychological Therapies.

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Performance criteria

You must be able to:

- P1 listen to the client's concerns in a manner which is collaborative, validating, non- judgmental, supportive and sensitive
- P2 help the client feel safe and understood and demonstrate that their current beliefs and feelings, as well as their actions, are comprehensible and acceptable
- P3 track the client's distress levels and level of emotional engagement during therapy and ensure that they are neither disengaged from, nor overwhelmed by, emotional states during sessions
- P4 provide the opportunity for the client to express any mistrust, scepticism or other concerns they have about the therapy or the therapist
- P5 respond to the client's mistrust, scepticism or other concerns openly and non- defensively, inviting consideration of alternatives
- P6 when disagreements about tasks and goals threaten the progress of therapy select interventions that clarify the client's understanding and focus
- P7 hold the client's world view in mind throughout the course of therapy
- P8 convey your respect and understanding of the client's world view through interactions with them, in a manner that allows them to correct any misapprehensions you have
- P9 retain an independent perspective and avoid over-identification with the client
- P10 give and ask for feedback about what is happening in the here-and-now interaction, in a manner which invites exploration with the client
- P11 help the client use their relationship with you to test their beliefs about the reactions of others to expression of these feelings
- P12 actively support the client to assert any negative feelings about the relationship and explore their fears of expressing these feelings
- P13 where the client recognises and acknowledges that the alliance is under strain, help them make links between the rupture and their usual style of relating to others
- P14 acknowledge and accept your responsibility for any contribution to strains in the alliance
- P15 identify and reflect on the presence and nature of therapeutic impasse using clinical supervision

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Knowledge and understanding

You need to know and understand:

Working together in cognitive and behavioural therapy

- K1 models of the therapeutic alliance
- K2 methods for monitoring and assessing the state of the alliance
- K3 factors likely to affect the strength of the alliance
- K4 verbal and non verbal behaviours
- K5 listening skills
- K6 effective and ineffective interpersonal behaviours
- K7 personal self awareness
- K8 how to engender trust
- K9 how to develop rapport
- K10 professional boundaries and codes of conduct
- K11 how to 'read' and interpret the client's emotional reactions
- K12 possible sources of therapeutic impasse

Principles and practice of cognitive and behavioural therapy

You need to know and understand:

- K13 cognitive and behavioural models of depression and anxiety disorders and their underlying mechanisms
- K14 the principles underlying cognitive and behavioural approaches to common psychological problems
- K15 how cognitive and behavioural models are translated into treatment
- K16 evidence based cognitive and behavioural techniques used in treatment of depression and anxiety disorders
- K17 the psychological and social difficulties presented by clients with common psychological problems
- K18 the stages of human development throughout a life span and how they affect people and their needs
- K19 the impact of social relationships and environment on health and wellbeing
- K20 the changes in cognitive ability and the impact that age related transitions have on interpersonal networks
- K21 the effects and impact of prescribed medication, non-prescribed drugs and alcohol on the client's health and wellbeing
- K22 how to adapt your communication to the client's individual needs

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Additional Information

External Links

This standard is derived from research reported in Roth A D and Pilling S (2007) *The competences required to deliver effective cognitive and behavioural therapy for people with depression and with anxiety disorders*. Department of Health/University College London.

This standard has indicative links with the following dimension within the NHS Knowledge and Skills Framework (October 2004).

Dimension: To be confirmed

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