



**Stop & Think!**  
**Adherence & Competence Rating Scale**

<b>Site</b>		<b>Session</b>		<b>Therapist</b>		<b>Co-Therapist</b>	
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The list of items below defines a good problem solving session. The task is to rate *if* these tasks are done in the session (adherence) and *how well* these tasks are done in the session (competence). There are two therapists in each session and the focus here is on the *task* rather than the therapist. Each task should be rated twice – once for adherence and once for competence. Adherence is a simple yes/no rating, identifying whether or not the task was done. Competence is rated on a scale of 0 to 6 where:

0 = poor      1= barely adequate      2 = mediocre      3= satisfactory      4 = good      5 = very good      6 = excellent

<b>Task</b>	<b>Adherence Yes / No</b>	<b>Competence 0 – 6</b>
1 How did I do?		
2 Feeling bad?		
3 What's my problem?		
4 What do I want?		
5 What are my options?		
6 What's my plan?		
7 Therapy is well-paced and engaging and positive problem orientation is encouraged		
<b>Total</b>		

**Acceptable adherence and competence is defined as follows:**

Adherence: 7 / 7

Competence: Minimum score of 28, no item below a 3

## Definitions

Task	Definition Score 6	Score 0
1 How did I do?	Asks client who developed an action plan in last session to feedback on progress. Reminds group about the problem investigated. Asks client what action plan items have been undertaken. Praises completion of tasks. Asks client to identify obstacles to action plan items that have not been undertaken. Offers individual support session to address obstacles. Asks client if s/he believes the problem is solved or on the way to being solved. Asks client if s/he feels any better about this problem. Ends with praise for positive action.	Forgets who developed an action plan in last session. Does not remind group about the problem investigated. Asks client only for general feedback. Does not praise completion of action plan items or identify obstacles to tasks that were not undertaken. Does not ask the client if s/he believes progress has been made towards solving the problem or if s/he feels any better about this problem. Does not end with praise for positive action.
2 Feeling bad?	The therapist asks the group to name the question – <i>Feeling bad?</i> The therapist asks the client to identify the unpleasant feelings associated with the problem. The therapist asks the client to identify physical sensations associated with the emotions. The therapist explains that it is important to attend to unpleasant feelings and use them as a trigger to start the problem solving process.	The therapist names the question instead of asking the group what this is. The therapist accepts the naming of unpleasant feelings without asking the client to relate these to physical sensations. The therapist does not explain why it is important to attend to unpleasant feelings.

Task	Definition Score 6	Score 0
3 What's my problem?	<p>The client is asked to briefly introduce the problem s/he wishes to work on in this session. The client is allowed to describe the problem in his/her own words. The therapist prompts for further information as necessary or politely curtails a lengthy description. The client is thanked for describing the problem. The therapist summarises the main aspects of the problem. Group members are asked if they have any comments or questions. The therapist then turns to the question <i>Feeling Bad?</i> After this has been addressed, the therapist asks the group to name the second question – <i>What's my problem?</i> The client is invited to revisit the problem already mentioned and add any information. The client is asked specifically about what makes him/her feel bad. The client is allowed time to talk about the problem, with the aim of specifying an important and manageable aspect on which to focus for the rest of the process. Group members are asked to comment (e.g., on similar experiences, to ask for clarification, etc). The therapist aims to capture the problem succinctly in a few words. The therapist asks group members for suggestions about the best way to word the problem. The therapist chooses the best words and phrases and produces a succinct definition. The therapist checks with the client that the wording captures the actual problem. Amendments are made as necessary. The problem is then written on the flip chart.</p>	<p>The therapist allows too lengthy a description of the problem. The therapist does not appear interested in the problem. The therapist does not thank the client for describing the problem, does not summarise, and does not ask the group for comments. The therapist then turns to the question <i>Feeling Bad?</i> After this has been addressed, the therapist names the second question or simply writes it on the flipchart instead of asking the group what this is. The therapist does not ask what it is about the problem that makes the client feel bad. The client's problem is barely explored at all. The client is not helped to break down a large problem into more manageable constituent problems. Group members are not brought in to the discussion. The therapist defines the problem without involving group members. The therapist does not check the accuracy of the wording with the client before writing the problem on the flip chart.</p>
4 What do I want?	<p>The therapist asks the group to name the third question – <i>What do I want?</i> The therapist asks the client to identify a primary goal for change. The therapist checks that this will address the identified problem and lead to the client feeling better.</p>	<p>The therapist names the third question or simply writes it on the flipchart instead of asking the group what this is. The therapist asks the client to identify a primary goal for change but does not check that this will address the identified problem or lead to the client feeling better.</p>

Task	Definition Score 6	Score 0
5 What are my options?	<p>The therapist asks the group to name the fourth question – <i>What are my options?</i> The therapist asks all group members to contribute options. Where few options are generated, the therapist challenges group members to think of ‘just one more’. Where numerous options are generated, similar ones are merged (e.g., play tennis, play football, go running might be summarised as ‘take up a sport’). Options are not censored. Options are listed on the flip chart. Pros and cons of each option are discussed with nothing being written. The main pros and cons are then written on the flip chart. The pace is relatively brisk and repetition is avoided. The client is asked to run through the list of options and identify each as definitely ‘yes’, ‘maybe’, or definitely ‘no’. The client may be asked to consider an item carefully, but is given free choice.</p>	<p>The therapist names the fourth question or simply writes it on the flipchart instead of asking the group what this is. The therapist does not encourage the group to think creatively. The therapist censors suggestions. The therapist allows the list to grow too long (i.e., more than 10). All pros and cons for each option are written on the flip chart as the discussion takes place. The pace is slow and the content repetitive. The client is urged to adopt non-preferred options.</p>
6 What’s my plan?	<p>The therapist asks the group to name the fifth question – <i>What’s my plan?</i> The preferred options are operationalised and put in a logical sequence (e.g., chronological). The end product is a SMART action plan, i.e., items are specific, measurable, actionable, realistic, and timed. Helpers are identified if needed. The client is asked if the action plan is acceptable. The client is asked if the action plan is likely to help him/her attain the specified goal, solve the problem, and make him/her feel better. The client is thanked for working on the problem in the group. The therapist asks the group to name the sixth and final question – <i>How am I doing?</i> The client is reminded that feedback on progress will be taken in the next session. The problem solving process is immediately put into a format that is easy for the client and the therapist to retain and refer to.</p>	<p>The therapist names the fifth question or simply writes it on the flipchart instead of asking the group what this is. Options are left vaguely stated. The order is not logical. No deadlines are set. Help needed is not identified. The therapist does not check if the client accepts the action plan. The therapist does not relate the plan to the goal, the problem or the unpleasant feelings. There is no reminder the final question and next session’s feedback. The client receives only the flip chart. There is a substantial delay before the client before the client receives the problem solving record. The therapist does not retain a copy.</p>

<b>Task</b>	<b>Definition Score 6</b>	<b>Score 0</b>
7 Therapy is well-paced and engaging ,and positive problem orientation is encouraged	The therapy is appropriately paced. The therapist shows warmth, empathy, and understanding. Humour is used appropriately. Group members are encouraged to contribute to the client’s problem solving process. The therapist ensures that quieter group members are invited to contribute. The therapist identifies the client’s strengths and comments on these. Participation in the problem solving process is praised. Problems are normalised by identifying other group members who have experienced similar difficulties. Problem solving successes are recognised and praised. Approximations to success are praised. Lack of problem solving success is reframed as a learning opportunity. The session times and the duration of the break are specified in advance and the timings are adhered to. There is a break at a suitable juncture.	The therapy is too slow or too fast. The therapist shows aloofness, lack of concern, or lack of understanding. The session is dull and boring. The focus is too concentrated on the client who is working through a problem, and as a result other group members switch off from the process. More talkative group members are allowed too much air time. Quieter group members are ignored. The client’s strengths are not comment upon. Participation is not praised. Successes are not praised. The session times are not clear. The session ends significantly early or late. There is no break or the break occurs at an inappropriate time.