Acceptance and Commitment Therapy Tape Rating Scale

Therapist:	Patient:	Date of Session:
Rater:	Date of Rating:	Session#
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Directions: Rate each tape by assessing the therapist on a scale from 0 to 4 and record the rating on the line next to the item number. Review the full recording before making any ratings, getting the full gestalt of the therapy and an overview that captures the session. Take notes as you listen to aid with ratings. The rating scale is below to serve as a guide for thinking about and applying the ratings. When rating the therapist, focus on the therapist's skill and consider the difficulty of the case being presented. When considering the skill level, your assessment should be based on the overall delivery and impression of how well the therapist performed on all the items below. A high level of skill (rating of 4) should be considered when the therapist is implementing the 6 core processes, engaging the ACT therapeutic stance, and using ACT technology appropriately across the treatment and as defined in the items written below.

- 0 = Poor skill/quality. The therapist did not use, was unable to use due to lack of knowledge, or did not use ACT approach or core processes; the therapist demonstrated no skill, used processes that were inconsistent with ACT or interventions that supported the use of control strategies directed at internal experience; unskilled, a great degree of improvement is needed.
- 1 = Low skill/quality. The therapist used ACT processes but did so with little skill or significant flaws; ACT processes occurred on occasion, but with little skill, a fair amount of improvement is needed.
- 2 = Adequate skill/quality. The therapist used ACT processes with some competence and to a satisfactory degree; ACT processes occurred with adequate skill; *some improvement is needed*.
- 3 = Good skill/quality. The therapist used ACT processes with a good level of competence; ACT processes occurred with good skill, and minimal improvement was *needed*.
- 4 = Excellent skill/quality. The therapist used ACT processes with a high level of competence (implemented the six core processes appropriately, skillfully applied the ACT technology, models ACT processes in therapy, etc.); ACT processes occurred *with excellent skill*.

Part I. GENERAL ACT THERAPEUTIC STANCE

- 1. <u>Skill in the Application of ACT processes</u>. The therapist flexibly and skillfully responded to the client and used ACT-relevant processes as appropriate in helping the client move from unworkable to workable responses that reflect the client's values.
 - The therapist *did not* use ACT consistent processes or used them *unskillfully*; a great degree of improvement is needed.
 - 1 The therapist used ACT consistent processes, but with little skill, a fair amount of improvement is needed.
 - 2 The therapist used ACT consistent processes with adequate skill, some improvement is needed.
 - 3 The therapist used ACT consistent processes with good skill; minimal improvement is needed.
 - 4 The therapist engaged ACT consistent processes with excellent skill.

- 2. <u>Interpersonal Relationship</u>. The therapist responds respectfully, compassionately, and genuinely to the client and speaks to the client from an equal, willing, and vulnerable point of view.
 - The therapist *did not* respond or engage in respectful, compassionate, and genuine behaviors while working with the client; unwilling, *unskilled*, a great degree of improvement is needed.
 - 1 The therapist responded and engaged in respectful, compassionate, willing and genuine behaviors, *but with little skill, a fair amount of improvement is needed.*
 - 2 The therapist responded and engaged in respectful, compassionate, willing, and genuine behaviors with adequate skill, some improvement is needed.
 - 3 The therapist responded and engaged in respectful, compassionate, willing, and genuine behaviors with good skill, minimal improvement needed.
 - 4 The therapist displayed respect, compassion, willingness, and genuineness in responding to the client *with excellent skill*
- 3. <u>Modeling ACT Processes in the Therapeutic Relationship</u>. The therapist models, instigates, and supports ACT processes in the therapeutic relationship itself. The exchanges between client and therapist are accepting, defused, focused on what is present, and includes mutual recognition of self-as context processes while also showing flexible behavior linked to personal values.
 - 0 The therapist *did not* model, instigate or support ACT processes. The interchange was *not* accepting, defused, or focused on what is present; no modeling of flexible behavior; *unskilled*; a great degree of improvement is needed.
 - 1 The therapist models, instigates, and supports ACT processes. The interchange occurred with *some* acceptance, defusion, and flexibility, but *with little skill*, *a fair amount of improvement is needed*.
 - 2 The therapist models, instigates, and supports ACT processes in the therapeutic relationship to a satisfactory degree; the interchange was accepting and occurred *with adequate skill*, *some improvement is needed*.
 - The therapist models, instigates, and supports ACT processes in the therapeutic relationship to a good degree; the interchange occurred with acceptance, defusion, and flexibility, and with good skill, minimal improvement needed.
 - 4 The therapist models, instigates, and supports ACT processes to an optimal degree; the interchange occurred with acceptance, defusion, and flexibility and *with excellent skill*.

Part II. ACT TECHNOLOGY

4. <u>Strategy for Behavior Change</u>. The therapist uses a clear ACT case conceptualization strategy, identifying and applying it to problem areas on an ongoing basis, addressing experiential avoidance and emotional control patterns and the ways in which these behaviors have led to narrow and inflexible client behavior. Additionally, the therapist is able to evaluate motivational factors, environmental barriers, and client strengths from an ACT perspective and uses this information to formulate and implement a treatment plan on an ongoing basis.

- The therapist is *unable* to use ACT case conceptualization strategies for change; does not understand experiential avoidance, uses internal control strategies to guide treatment; does not let the ACT case formulation guide treatment on an ongoing basis; *unskilled*; a great degree of improvement is needed.
- 1 The therapist applies an ACT case conceptualization, but demonstrates significant flaws in strategy, and uses the conceptualization *but with little skill*; *a fair amount of improvement is needed*.
- 2 The therapist applies an ACT case conceptualization with adequate skill, some improvement is needed.
- 3 The therapist applies an ACT case conceptualization with good skill, minimal improvement needed.
- 4 The therapist applies an ACT case conceptualization with excellent skill.
- 5. <u>Implementation of Metaphors and Exercises</u>. The therapist is able to implement ACT consistent metaphors and exercises and applies them at the appropriate time in session (as determined by the protocol or as needed by the client) <u>and</u> in a fashion that is consistent with the core components.
 - The therapist *does not* understand and/or use ACT metaphors and exercises in session; *unskilled; a great degree of improvement is needed.*
 - 1 The therapist uses ACT metaphors and exercises in session but demonstrates significant flaws in their application; metaphors and exercises are used, *but with little skill*, *a fair amount of improvement is needed*.
 - 2 The therapist uses ACT metaphors and exercises with adequate skill, some improvement is needed.
 - The therapist uses ACT metaphors and exercises *with good skill, minimal improvement needed.*4 The therapist implements ACT metaphors and exercises appropriately and *with excellent skill.*
- 6 . <u>ACT Consistent Homework</u>. The therapist uses values consistent homework/commitments to support therapy, assigning homework on a regular basis and/or as appropriate. Homework/commitments support the client's personal values and/or promote flexible responding.
 - The therapist *does not* understand how and/or use ACT consistent homework/commitments; *unskilled*; *a great degree of improvement is needed*.
 - 1 The therapist uses homework/commitments but demonstrates significant flaws in application (Assigns homework only rarely; assigns homework that is not values consistent or it contains internal control strategies); uses but with little skill, a fair amount of improvement is needed.
 - 2 The therapist uses homework/commitments with adequate skill, some improvement is needed. (Assigns homework occasionally; homework is linked to values).
 - 3 The therapist uses homework/commitments with good skill, minimal improvement needed. (Assigns homework routinely; homework is values consistent).
 - 4 The therapist appropriately implements homework/commitments with excellent skill.

Part III. ACT CORE COMPETENCIES

7. <u>Willingness/Acceptance</u>. The therapist helps the client to see experiential willingness/acceptance as an alternative to excessive and misapplied internal control. The therapist works to help the client see willingness as a choice and process rather than an outcome.

NA Not applicable (did not occur as appropriate; not relevant for this session)

- The therapist *does not* understand and/or use willingness/acceptance work in session; *unskilled; a great degree of improvement is needed.*
- 1 The therapist uses willingness/acceptance work but demonstrates significant flaws in its application; willingness/acceptance used *but with little skill*, *a fair amount of improvement is needed*.
- 2 The therapist uses willingness/acceptance with adequate skill, some improvement is needed.
- The therapist uses willingness/acceptance work *with good skill, minimal improvement needed.*4 The therapist *appropriately* implements willingness/acceptance work *with excellent skill.*
- 8. <u>Cognitive Defusion</u>. The therapist helps the client to see thoughts as what they are (simply thoughts), so those thoughts can be responded to in terms of workability given the client's values rather than in terms of their literal content. The client is helped to attend to thinking and experience as ongoing behavioral processes.

NA Not applicable (did not occur as appropriate; not relevant for this session)

- 0 The therapist *does not* understand and/or use cognitive defusion in session; *unskilled*; *a great degree of improvement is needed*.
- 1 The therapist uses cognitive defusion but demonstrates significant flaws in ability to apply the skill; uses defusion *but with little skill*, *a fair amount of improvement is needed*.
- 2 The therapist uses cognitive defusion with adequate skill, some improvement is needed.
- The therapist uses cognitive defusion work *with good skill, minimal improvement needed.* 4 The therapist *appropriately* implements cognitive defusion *with excellent skill.*
- 9. <u>Present Moment</u>. The therapist helps the client learn to attend to what is present in a focused, voluntary, and flexible fashion. The therapist uses mindfulness and conscious awareness methods to help the client achieve present moment awareness. The therapist detects client drift into past and future and reorients client to the "now."

NA Not applicable (did not occur as appropriate; not relevant for this session)

- O The therapist *does not* understand and/or use present moment exercises and does not recognize or apply the processes involved in supporting present moment work in session; *unskilled*; a great degree of improvement is needed.
- 1 The therapist uses present moment exercises and processes but demonstrates significant flaws in their application; uses present moment processes but with little skill, a fair amount of improvement is needed.
- 2 The therapist uses present moment exercises with adequate skill, some improvement is needed.

- The therapist uses present moment processes with good skill, minimal improvement needed. 4
 The therapist appropriately implements present moment processes with excellent skill. ____10.

 Self-as-context. The therapist helps the client to make contact with a sense of self that is the experiencer of private content (emotions, thoughts, sensations, memories) rather than the content itself. The therapist helps the client to experience this sense of self as continuous, safe and consistent and as a place from which the client can observe and accept all changing experience.
- 10. <u>Self-as-context</u>. The therapist helps the client to make contact with a sense of self that is the experiencer of private content (emotions, thoughts, sensations, memories) rather than the content itself. The therapist helps the client to experience this sense of self as continuous, safe and consistent and as a place from which the client can observe and accept all changing experience.

NA Not applicable (did not occur as appropriate; not relevant for this session)

- The therapist *does not* understand and/or use self-as-context exercises and processes in session; *unskilled*; a great degree of improvement is needed.
- 1 The therapist uses self-as-context processes but demonstrates significant flaws in its application; self-as-context is used *but with little skill*, *a fair amount of improvement is needed*.
- 2 The therapist uses self-as-context processes with adequate skill, some improvement is needed.
- The therapist uses self-as-context processes *with good skill, minimal improvement needed.* 4 The therapist *appropriately* implements self-as-context processes *with excellent skill.*
- 11. <u>Valued Direction</u>. The therapist helps the client to clarify and choose personal values that give life meaning and establish motivation that is in the present and intrinsic to the behavior pattern itself. The therapist guides the client to link behavior change to these values while also supporting willingness to experience emotions, thoughts, sensations, memories (internal private events) in an open and undefended fashion.

NA Not applicable (did not occur as appropriate; not relevant for this session)

- The therapist *does not* understand how and/or help the client to contact and clarify values in session; *unskilled; a great degree of improvement is needed.*
- 1 The therapist uses values clarification processes but demonstrates significant flaws in its application; uses values work *but little skill*, *a fair amount of improvement is needed*.
- 2 The therapist uses values clarification processes *with adequate skill, some improvement is needed.*
- 3 The therapist uses valued direction processes *with good skill, minimal improvement needed.* 4 The therapist a*ppropriately* implements values clarification processes *with excellent skill.*
- ____12. <u>Committed Action</u>. The therapist works with the client to create behavior change that is in the service of chosen values, building these behavior changes into larger and larger patterns of action that support effective values-based living.

NA Not applicable (did not occur as appropriate; not relevant for this session)

- The therapist *does not* understand how and/or use committed action work in session; *unskilled;* a great degree of improvement is needed.
- 1 The therapist uses and supports committed action work in session but demonstrated significant flaws in application; uses committed action *but with little skill*, *a fair amount of improvement is needed*
- 2 The therapist uses and supports committed action work in session establishing goals for the client that are values consistent *with adequate skill, some improvement is needed.*
- 3 The therapist uses and supports committed action work in session *with good skill, minimal improvement needed.*
- 4 The therapist *appropriately* implements and supports committed action work in session establishing goals for the client that are values consistent *with excellent skill*.

Scoring:

Items 1-6 should always be scored.

Items 7-12 may have instances when they are not scored. Score all items unless one of the core components does not occur for the session being rated:

If all items are scored, divide by 12. If some items are left unscored, add the items and divide by the number of items scored.

Total Score	

COMMENTS AND SUGGESTIONS FOR THERAPIST'S IMPROVEMENT:

Part IV. OTHER ISSUES

	by unique or extraordinary problems arise during the session (e.g., difficult interpersonal derable resistance)? YES \square NO \square
If "Y	Yes," then rate:
	The therapist was unable to resolve the problem from an ACT perspective and resorted to control strategies/other interventions or failed to adequately address the issue.
	The therapist attempted to work with the problem from an ACT perspective but demonstrated ignificant flaws in applying ACT and the problem was not adequately addressed.
2 T	The therapist worked with the problem from an ACT perspective to a satisfactory degree and was moderately able to apply the core components in addressing the problem; resolution of problem occurred to a satisfactory degree; some improvement is warranted.
	Therapist worked with the problem from an ACT perspective to a great degree and with good kill, problem largely solved; minimal improvement is needed.
4 7	The therapist very skillful applied the ACT core components in addressing the problem.
from t	there any significant factors in this session that you feel justified the therapist's departure he standard ACT protocol/approach? YES NO NO Ses," please explain:
theory certain inapp	there any significant periods, comments or interventions that were inconsistent with ACT y and application (for instance, did the therapist identify that a client's thought or feeling may lead to behavior?) or were communications made to the client that they should work to ropriately control internal events (for instance, did the therapist encourage the client to avoid or I their thoughts, feelings, memories or bodily sensations?) YES NO
I	f "Yes," please explain: