The basic competences are extracted from the BACP YP Competence Framework and are regarded as the minimum level of competence required to work with YP.

For details of the complete *Humanistic competences to work with young people (11-18 yrs)* competences please refer to:

http://www.bacp.co.uk/research/competences/cyp_competences.php

Basic YP Competences

Knowledge of, and ability to operate	Professional and Ethical Guidelines:		
within professional and ethical	knowledge of ethical principles; ability to self-		
guidelines.	monitor levels of competence; ability to		
guidelliles.	identify and minimise the potential for harm;		
	ability to gain consent from service users;		
	ability to maintain confidentiality; ability to		
	maintain appropriate standards of conduct;		
	ability to maintain standards of competence;		
	ability to keep appropriate records.		
Ability to develop a contract for	An ability to explicitly agree with the		
therapeutic work	young person, the boundaries for		
	therapeutic work, including: confidentiality		
	and its limits; record and note keeping;		
	complaints procedure; timing and number of		
	sessions; attendance at sessions and		
	procedures for failure to do so; payment.		
Working within the context of the setting	Draw on knowledge of: the ethos, culture		
(e.g. school or community setting)	and core business of the setting and how this		
	relates to the counselling service; the		
	governing and organisational structure; the		
	roles and responsibilities of the staff; critical		
	school transitions periods for a young		
	person; setting policies and procedures;		
	setting approach to discipline, attendance,		
	punctuality, rewards, uniform, etc.		
	Impact on Counselling Service: access		
	and referral to the service; management of		
	client confidentiality; scheduling of		
	appointments; physical environment in which		
	counselling takes place; level of privacy;		
	client understanding of counselling and their		
	autonomy.		
	Working collaboratively: working with		
	management; working with other agencies,		
	including accepting referrals and processes		
	for onward referral; ability to work with link		
	staff; managing appointment system; ability		
	to evaluate the service and provide reports		
	on usage of the counselling service; ability to		
	work with staff on procedures for missed		
	appointments.		
Monitoring outcomes and onward referral	Knowledge of the importance of measures		

	for monitoring outcomes and onward			
	referrals when working with children and			
	young people.			
Knowledge of legal frameworks relating to young people.	Issues of confidentiality, consent and capacity: capacity and informed consent; parental rights and responsibilities; children and young people's rights when making welfare decisions; child protection; mental health legislation; education; data protection; equality; confidentiality and informed sharing; ability to develop a contract for therapeutic work.			
Ability to conduct a risk assessment	Risk assessment: knowledge of policies and legislation; knowledge of risks; knowledge of the risk assessment and management process; ability to seek advice and supervision; skills in risk assessment and management; assessment of risk.			
Ability to conduct a collaborative assessment	Assessments: knowledge of the assessment process; ability to adapt the assessment to match the abilities and capabilities of the young person; ability to engage the young person in the assessment process; ability to undertake a generic assessment; ability to assess the young person's difficulties; ability to assess the young person's current functioning, their strengths, resources and abilities; ability to integrate information from relevant others; ability to develop a collaborative understanding of the young person's life story, social and cultural context; ability to reflect on own experience of assessment process; ability to make use of appropriate tools and measurements.			
Knowledge of development in young people	Knowledge of child and adolescent development: physical, social, cognitive, emotional and psychosexual. Knowledge of the care environment and its interaction with child and adolescent development: attachment, influence of parent/carer, play activities.			
Ability to recognise and respond to concerns about child protection	Child protection: knowledge of policies and legislation; knowledge of child protection principles; ability to contribute to an holistic assessment of the young person's and family's needs; ability to draw on knowledge of the ways in which neglect and abuse presents; ability to recognise possible signs of abuse and neglect; ability to draw on knowledge of bullying; ability to recognise parental behaviours associated with abuse			

or neglect; ability to recognise risk factors for, and protective factors against, abuse or neglect; ability to respond where a need for child protection has been identified; ability to report concerns about child protection; ability to contribute to the development of a child protection plan; ability to contribute to the implementation of protective interventions; ability to record and report on interventions for which the counsellor is responsible; interagency working; ability to seek advice and supervision. Ability to communicate with young **Communication:** knowledge of the impact people of differing ages, developmental of development on the young person's level and background. understanding of, and participation in, counselling work; ability to provide developmentally appropriate information about the sessions; ability to engage with the young person's perspective; ability to utilise developmentally appropriate activities to aid engagement; ability to help the young person express themselves verbally; ability engage the young person when the parent/carer is present. Knowledge and understanding of mental Mental health problems: neurohealth problems in young people and developmental conditions and how these emerge and present in young people; child adults. development and psychopathology; social, psychological, family and biological factors associated with development and maintenance of mental health problems; knowledge of current DSM and ICD disease classification systems; prevalence of mental health presentations across different cultures, ethnicities, social classes.