

Ability to provide Telephone and E-counselling

Underpinning knowledge	Core Competences	Metacompetences
Knowledge of psychological processes relevant to offering telephone and e-counselling	<p data-bbox="909 371 1321 483">Ability to assess suitability for telephone & e-counselling</p> <p data-bbox="909 499 1321 611">Ability to identify and manage risk when telephone/e-counselling</p> <p data-bbox="909 635 1321 722">Ability to communicate with clients when telephone/e-counselling</p> <p data-bbox="909 738 1321 850">Ability to establish “ground rules” and boundaries when telephone/e-counselling</p> <p data-bbox="909 874 1321 986">Ability to direct clients to supplementary online therapeutic resources</p> <p data-bbox="909 1010 1321 1098">Ability to conclude the therapeutic relationship</p> <p data-bbox="909 1121 1321 1201">Supervision of telephone & e-counselling</p>	Metacompetences for providing telephone & e-counselling

Knowledge of psychological processes relevant to offering telephone and e-counselling

Managing the impact of disinhibition

An ability to draw on knowledge that people may behave differently online/when using other media to the ways in which they might interact in face-to-face situations, and that these differences have important implications for the therapeutic process	
An ability to draw on knowledge that disinhibition can be encouraged by features of the online/other media environment e.g.:	
	having the sense of being anonymous and invisible
	not seeing (and therefore not experiencing) other people's reactions to what is said
	experiencing an absence of external authority in the online/other media environment
	not experiencing others as 'real'
An ability to draw on knowledge that disinhibition can be a common feature of online/other media interactions, and that where this occurs it will have a significant impact on the therapeutic process e.g.:	
	inappropriately rapid disclosure of sensitive information that risks leaving the client feeling overwhelmed
	an inappropriately rapid development of intimacy, sometimes followed by withdrawal or distancing
	difficulty in pacing sessions because clients have disclosed more information than they had intended
	clients coming to regret having made an uninhibited disclosure
	clients disclosing issues they would not address had they been in face-to-face therapy
	the uninhibited expression of anger, hatred, criticism
An ability to help clients who may be disinhibited pace their communications in a manner that makes it more likely that they are able to process material they are disclosing, e.g.:	
	interjecting to summarise what the client has been saying
	asking the client how they feel about what they have said
An ability to draw on knowledge that therapists can also experience disinhibition, leading to their making unhelpful interventions (e.g. that are too direct, forthright or insensitive)	
An ability to draw on knowledge that (without face-to-face reality checking) both clients and therapists can more easily develop inaccurate fantasies about each other	
An ability to rectify inappropriate assumptions by the therapist or the client by "reality checking" any fantasies that each has developed about the other e.g.:	
	asking for (and offering) clarification where it becomes apparent that assumptions may have been made
	asking the client what assumptions they hold about the therapist

Using writing as the medium for telephone and e-counselling

An ability to draw on knowledge that the written word can have a different impact to oral communication because:
it can acquire a sense of permanence
it can appear more authoritative than the spoken word
its meaning cannot be moderated by contextual features (such as non-verbal communication)
An ability to modulate the potential impact of the written word (for example, by taking care to express views tentatively)
An ability to draw on knowledge that clients may find the act of writing therapeutic in itself (e.g. as a means of self-expression and self-reflection)
An ability to detect and to comment on shifts in the client's style of written communication that could be indicative of psychological changes in the client
An ability to draw on knowledge that using written language may help clients stay in control of the feelings they express

Managing attachment and rejection in the context of telephone and e-counselling

An ability to draw on knowledge that telephone and e-counselling can promote phenomena (such as transference and projection) in which 'fantasy' and speculation about the therapist are to the fore
An ability to draw on knowledge of the ways that 'transference' and 'countertransference' issues can be activated when e-counselling e.g.:
the absence of a prompt response from the counsellor may evoke feelings of rejection or abandonment in the client
the client may perceive the therapist to be constantly available to them ("at the flick of a switch")
An ability to manage issues of 'transference' and 'countertransference' e.g.;
by negotiating and agreeing clear boundaries with the client
by checking perceptions and understanding
by engaging in meta-communication (discussing how client and therapist are communicating and relating to each other)

Knowledge of the culture of internet communities

An ability to draw on knowledge of the characteristics of internet communities (e.g. transient relationships, false identities, playing out of fantasies) and the implications these have for the therapeutic relationship
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Ability to assess suitability for telephone and e-counselling

An ability to draw on knowledge that a client's ability to make use of therapy at a distance should be assessed before therapy and periodically during the intervention	
An ability to draw on knowledge of factors that may be relevant when assessing suitability for telephone and e-counselling e.g.:	
	the client's preference regarding the type of technology to be used
	the client's competence in using differing technologies
	how comfortable the client is when communicating using particular technologies
	the client's ability to express their feelings and experience using particular technologies
	the client's likely ability to engage in a therapeutic relationship mediated by technology
	any potential benefits for the client in using particular technologies
An ability to assess the client's understanding of, and attitudes towards telephone and e-counselling, in order to judge whether this is likely to be an appropriate therapeutic medium for them	
An ability to assess when supplementary modes of communication are needed in order to gain a fuller picture of the client and their problems (e.g. adding a phone conversation to an online discussion)	
	an ability to determine when the time and resources required for a comprehensive assessment are justified (for example, by the complexity of a client's presentation)
An ability to discuss with the client the advantages of working therapeutically when telephone/e-counselling, for example:	
	that it is accessible (e.g. for people with disabilities, where people have limited access to transport or where people travel extensively as part of their work)
	that sessions can be scheduled flexibly (e.g. arranged around working commitments and/or caring roles)
	that therapy can be accessed in people's own homes
	that the absence of a face-to-face relationship can feel less inhibiting
An ability to discuss with the client the potential disadvantages of telephone and e-counselling e.g.:	
	that therapy can be disrupted by technical problems
	that telephone and e-counselling raise issues of data security
	that without visual contact (and hence reduced opportunity for non-verbal communication) it can be harder to assure mutual understanding
	that communicating only by text can be experienced as lacking in spontaneity

Assessing psychological suitability

An ability to assess psychological difficulties and presenting problems that may make it harder for clients to make effective use of telephone and e-counselling, e.g.:
clients who need a high level of care and support
clients who are struggling to function
clients who present a high level of risk (e.g. suicide/self-harm)
evidence of poor reality-testing
evidence of strong transference reactions that may be difficult to contain
evidence of a tendency to challenge boundaries and/or present in a fragmented and inconsistent manner across time or medium of communication

Assessing suitability for working online

An ability to evaluate the client's ability to work online, with the specific aim of detecting whether their skills and knowledge are sufficient for them to make effective use of the medium e.g.:
whether they can communicate quickly and efficiently
whether they can express themselves effectively
An ability to identify and help the client "trouble-shoot" practical issues that may limit their ability to make effective use of communications technology e.g.:
where the client is unable to access the internet in a private and secure environment
where technological factors limit internet access (such as firewalls or out-of-date browsers)
An ability to assess the client's familiarity with working online, with the aim of detecting their likely capacity to make effective use of the medium, identifying:
their experience of communicating using the internet
their use of social media
whether they already have online relationships or belong to online groups
the nature, length and quality of any online relationships
An ability to draw on knowledge that the client's attitude to telephone and e-counselling will be influenced by:
previous experiences of therapy, either online, via other media or face-to-face
concurrent therapy, either online, via other media or face-to-face
An ability to identify any physical and medical factors that may affect online/other media therapy, such as visual or motor disabilities
An ability to recommend appropriate support software for clients with a disability (e.g. voice recognition software)

Assessing suitability for text-based therapy

An ability to assess the client's suitability for text-based therapy, e.g.:	
	the ease with which they use the medium to express themselves
An ability to assess the client's preference for synchronous or asynchronous text-based communication e.g.:	
	where a client may prefer to write spontaneously and find it difficult to tolerate the lack of immediate response
	where a client may prefer to compose, edit and reflect on their communication before sending
An ability to suggest alternative sources of support where clients are assessed as not suitable for telephone and e-counselling	

Ability to identify and manage risk when telephone and e-counselling

An ability to draw on knowledge that telephone and e-counselling (particularly when using written text) does not provide access to the non-verbal cues that can help signal increasing distress or vulnerability	
An ability to draw on knowledge that appraising risk when telephone and e-counselling can be more challenging than when working face-to-face e.g.:	
	limited information can make it harder to judge the severity of risk
	it can be harder to verify whether risk is genuine or when (for whatever reason) the client is misrepresenting the level of risk
	it can be harder to judge the level of support available to the client through their social and family networks
An ability to draw on knowledge that although clients who show disinhibition when telephone/e-counselling may be more likely to report risk issues, these reports should still be evaluated carefully	
An ability to have in place procedures for dealing with risk issues that emerge when telephone/e-counselling and to be able to communicate these to clients	
An ability to draw on knowledge that telephone and e-counselling limit how far a therapist can intervene in cases where risk issues emerge	
An ability, when contracting with a client, to gather relevant information that will support risk management e.g.:	
	requesting details of GP/friend/family member who may be contacted in times of crisis
	requesting the client's postal address and telephone number for use should it be necessary to contact the emergency services or crisis support
An ability to monitor the form and content of clients' communications in order to identify risk issues when these emerge, either directly or indirectly e.g.:	
	where a client reports engaging in risky behaviour
	where a client reports becoming actively suicidal
	where a client reports increased levels of hopelessness and despair
	where a client describes a third party being at risk
	where a client behaves uncharacteristically online/via other media
	where routine outcome measures (e.g. CORE, PHQ-9) indicate elevated levels of risk

An ability to act on risk issues e.g.:	
	by directing the client to sources of emergency support and other resources, including face-to-face and telephone counselling
	by offering additional contact between sessions
	in cases where a client is actively suicidal, by keeping contact with the client until appropriate support arrives
An ability to help clients identify sources of additional support in cases of elevated risk (e.g. by listing resources on the therapist's website)	
An ability to identify when risk issues warrant the breaking of confidentiality, e.g. contacting GP/social services/police/family member	

Managing the counsellor's anxiety in relation to risk

An ability for the counsellor to recognise and to manage the emotional impact of "holding" risk issues when telephone/e-counselling e.g.: by seeking appropriate, advice, supervision and/or support
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Ability to communicate with clients when telephone/e-counselling

An ability to draw on knowledge that (because communicating when telephone/e-counselling may carry a greater risk of misunderstanding than face-to-face communication) there is a need to check that meaning is being interpreted accurately by both parties

Communicating using written text

An ability for the therapist to adapt their style of communication to different clients

An ability to write in a manner that is professional, but also informal enough to engage the client

An ability to promote a sense of consistency and trust by maintaining a consistent style of writing

An ability to draw on knowledge that messages containing a lot of errors may undermine the client's confidence in the therapist

An ability to draw on knowledge of norms commonly associated with text-based communication (netiquette)

An ability to draw on knowledge of text-based communication styles that foster communication and so engage the client e.g.:

by using “emoticons” and other symbols (such as bold typeface, italics or capital letters) as a means of emphasis or to express emotion

by ensuring that abbreviations and acronyms are mutually understood

An ability to draw on knowledge of specific styles of written text used by particular groups (e.g. teenagers)

An ability to suggest, initiate and respond to therapeutic writing tasks (e.g. encouraging the client to write and reflect on “unsent letters”)

Using asynchronous text-based communication (e.g. email, message boards)

An ability to draw on knowledge of the strengths of asynchronous communication e.g.:
that it allows time to reflect on messages received, and to construct a thoughtful response
that it allows clients and counsellors to engage in therapeutic work at times that are convenient for them, without the restriction of communicating at scheduled times
An ability to draw on knowledge of the limitations of asynchronous communication e.g.:
that it can lead to a lack of spontaneity in therapeutic contact
that the delay between writing a message and receiving a response can lead to perceptions of a lack of therapeutic continuity
An ability to compose clear and focused therapeutic messages e.g.:
beginning with a warm greeting
ensuring the message has an appropriate therapeutic focus
ensuring issues are made explicit (e.g. by providing concrete examples/illustrations)
ending with an open question that invites both reflection and a thoughtful response
An ability to compose therapeutic messages that engage the client e.g.:
by making reference to the client's material in the message and explicitly responding to this material
where appropriate, by including the counsellor's own emotional responses to the client's material
An ability, when composing a challenging response to a client, to provide a preamble that helps the client to accept the challenge and remain engaged
An ability to draw on knowledge that (because messages can sometimes be sent but not received), it is important for all parties to acknowledge receipt of messages
An ability to reflect upon the significance of any delay between receipt of a message and the client's response and to check (for example):
whether the client has found a message painful
whether the client is struggling to stay engaged in therapy
whether there is no special significance to the delay (e.g. the client was very busy and unable to respond immediately)

Using synchronous text-based communication

An ability to draw on knowledge that synchronous communication requires spontaneous and instant responses, and hence a capacity:
to write fluently using short sentences and phrases
to infer a client's emotional state from their style and pace of responding
to reflect on the significance of silences and pauses in communication

Communicating audio-visually (e.g. using telephones (mobile and fixed-line), internet based telephony or video-conferencing)

An ability to establish that the client can create a safe and secure context for audio/video calls (e.g. by checking that they are in a private location where the conversation will be confidential and free from interruption)	
An ability to agree with the client clear boundaries for audio/video sessions e.g.:	
	agreeing dates and times of calls
	agreeing who will be responsible for initiating calls
	making sure that both the therapist's and the client's immediate environments are free from auditory distractions (e.g. intrusive background noise)
An ability to draw on knowledge of potential threats to security when using mobile phones and to inform the client of these	
An ability to open sessions with a welcoming and warm tone of voice	
An ability to adopt an appropriate vocal tone that conveys acceptance and empathy	
An ability to ensure that the client knows they are being listened to and that the therapist is attentive (e.g. by frequent use of affirmative or reflective comments)	
An ability to infer the client's emotional state from their tone of voice, pace, inflection and use of silence, and to check the accuracy of these inferences through reflective comments	
An ability to conclude audio/video sessions clearly and calmly, especially where a client wishes to continue to talk and finds it difficult to disengage	

Ability to establish “ground rules” and boundaries for telephone and e-counselling

An ability to agree ground rules and boundaries for therapeutic contact with the client, e.g.:	
	times when the therapist will be available
	limits to the therapist’s availability
	duration of therapeutic sessions
	how many messages can be sent
	how quickly messages will be responded to
	how many responses clients can expect
	the importance of routinely acknowledging messages
	that there will be no online communication between client and therapist outside the agreed therapeutic contact (e.g. on social networking sites)
An ability to agree alternative procedures (e.g. use of telephone) for maintaining contact in the event of IT equipment failure	
An ability to discuss issues relating to confidentiality and data protection, e.g.:	
	discussing the importance of maintaining confidentiality and data security when clients are using their own IT equipment (and advising them how to achieve this, if required)
	negotiating with the client to ensure that any therapeutic records (e.g. written exchanges between client and therapist) are kept confidential (i.e. are not shared with third parties)
	discussing how the client’s data will be protected (e.g. use of encryption)
	discussing any limits to confidentiality (e.g. indicating that material may be routinely shared with a supervisor)
	discussing circumstances that may lead the therapist to breach confidentiality (e.g. where there are clear indications of risk of harm to the client or a third party)
An ability to inform clients of the complaints procedure available to them e.g.:	
	how complaints will be addressed between therapist and client
	where appropriate, how to make a complaint to the therapist’s employer
	how a complaint can be taken to the therapist’s professional body
An ability to keep a formal record of consent given by clients to the terms and conditions of the therapy	

Establishing the identity of the client

An ability to draw on knowledge that an absence of visual contact when providing telephone and e-counselling presents problems in verifying the identity of the client
An ability to elicit and triangulate varying lines of information about the client in order to substantiate their background and identity
An ability to draw on knowledge that because legal and ethical considerations will differ when working with children* rather than adults, therapists should take reasonable steps to confirm the age of the client
An ability to identify signs that a client may be younger or older than the age they purport to be, e.g.:
by noting whether their use of language is consistent with their reported age
by assessing contextual information clients report about their lives (e.g. school, work, relationships) to ensure these are consistent with their reported age

*For more information on legal and ethical considerations when working with children see CYP competence framework at <https://www.bacp.co.uk/cypcompetences>

Ability to direct clients to supplementary online therapeutic resources

An ability to identify when a client may benefit from using additional online resources to supplement e-counselling, for example where the client:	
	expresses an interest in accessing further information relating to their difficulties
	expresses a need for additional support
	expresses an interest in being put in touch with others who experience similar problems
An ability to draw on knowledge of appropriate online resources for a range of mental health problems and emotional difficulties (e.g. websites, support groups [forums], self-help programmes, message boards, blogs, virtual reality websites, specialist therapy sites)	
An ability to evaluate the integrity, security, utility and effectiveness of online resources before recommending them to clients	
An ability to draw on knowledge that some online mental health resources may be harmful (e.g. pro-suicide, pro-anorexia, or pro-self-harm websites or forums)	
	an ability to review and discuss the client's use of online resources to establish whether this is supporting their therapeutic progress

Ability to conclude the therapeutic relationship

An ability to draw on knowledge that because the accessibility and immediacy of telephone and e-counselling can build a strong sense of intimacy, clients may find it hard to relinquish the therapeutic relationship	
An ability to draw on knowledge that clients who find it difficult to end the therapeutic relationship may log on as a new client, and hence an ability:	
	to take steps to verify when a “new” client is in fact a returning client
	to assess whether in such cases a new therapy contract is appropriate
An ability to evaluate risk issues where the client presents these as a reason for maintaining therapeutic contact, and to take appropriate action	
An ability to draw on knowledge that in asynchronous communication therapist and client will experience the ending at different points in time, and hence:	
	the need for issues relating to the ending to be discussed well in advance
	the need for a ‘read-receipt’ for the final message
An ability to draw on knowledge that it is good practice for the therapist to send the final message	
An ability, where appropriate, to inform clients of further sources of support that can be accessed after therapy has concluded	

Supervision of telephone and e-counselling

An ability to draw on knowledge that supervision of telephone and e-counselling would usually be conducted by a supervisor who has knowledge and experience of working using this approach	
An ability to agree the ground rules for supervision for telephone and e-counselling e.g.:	
	whether or not the medium of supervisory contact parallels the counsellor's mode of communication with clients (e.g. online, synchronous or asynchronous communication)
	the frequency and/or quantity of text-based supervisory contact
	agreeing a procedure for re-establishing contact in case of technical failure
	the procedure for making contact in an emergency
	the procedure each party uses to assure data security
	the amount of supervisory contact necessary to meet the requirements of the therapist's professional body
An ability to identify the optimal way for the supervisor to access clinical material (e.g. using transcripts of therapeutic exchanges, or through live observation of therapy sessions)	
An ability to reflect on any impact the provision of telephone and e-counselling may be having on client or counsellor and to discuss this in supervision	

Metacompetences for providing telephone and e-counselling

Assessment

An ability to draw on accumulating information in order to judge whether the client is presenting an account that reflects their actual identify and circumstances

Managing risk when providing telephone and e-counselling

An ability to judge the level of information required in an assessment, based on the level of risk being presented and levels of support available to the client

An ability to judge when the need to maintain contracted boundaries should be balanced against the need for flexibility (e.g. where additional contact may be required in response to clear indications of risk)

An ability to balance the need for an appropriately thorough assessment against the need rapidly to build a good therapeutic relationship

Adjusting the intervention to the individual when telephone/e-counselling

An ability to adjust the content, style and level of written communication to match the client's capacity to understand and assimilate this information

Managing the therapeutic relationship

An ability for the therapist to judge how to set limits to their availability while also building and maintaining the therapeutic relationship