**PERSON-CENTRED & EXPERIENTIAL PSYCHOTHERAPY SCALE – Young Person Counselling Version (PCEPS-YP) (Version 18.8.16)**

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**Client ID\_\_\_\_\_\_ Session \_\_\_\_\_\_\_\_\_\_\_\_**

**Rater\_\_\_\_\_\_\_\_\_ Segment\_\_\_\_\_\_\_\_\_\_\_\_**

Rate the items according to how well each activity occurred during the therapy segment you’ve just listened to. It is important to attend to your overall sense of the therapist’s level of skill. Try to avoid forming a ‘global impression’ of the therapist early on in the segment.

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**1. CLIENT FRAME OF REFERENCE:**

**How much do the therapist’s responses convey an understanding of the client’s frame of reference (i.e., their world view) and the ways in which the young person understands themselves within it?**

*Do the therapist’s responses convey an understanding of the client’s inner world, as immediately expressed by the client? Or, conversely, is the therapist only able to respond from their own frame of reference?*

1. **No understanding:** Therapist’s responses convey no understanding of the client’s frame of reference; or, therapist adds meaning based completely on their own frame of reference.

2. **Minimal understanding**: Therapist’s responses convey a poor understanding of the client’s frame of reference; or, therapist adds meaning partially based on their own frame of reference rather than the client’s.

3. **Slight understanding:** Therapist’s responses begin to approach an adequate understanding of the client’s frame of reference but are consistently somewhat ‘off’.

4. **Adequate understanding**: Therapist’s responses convey an adequate understanding of the client’s frame of reference.

5. **Good understanding**: Therapist’s responses convey a good understanding of the client’s frame of reference.

6. **Excellent understanding**: Therapists’ responses convey an accurate understanding of the client’s frame of reference and therapist adds no meaning from their own frame of reference.

**2.****TRACKING:**

**To what extent is the therapist following the client’s track?**

*Are the therapist’s responses closely following the client’s expressed thoughts, feelings and story? While following the client’s track, is the therapist able to check and responsively revise their perceptions of the client’s world view based on client feedback?*

*Conversely, are the therapist’s responses a diversion from the client’s own train of thoughts and feelings? Is the therapist inflexible in their perspective?*

1. **No tracking**: Therapist responses do not follow the client’s track at all, or they divert client from their thoughts/feelings; therapist fails to check their perceptions against client’s own experience.

2.  **Minimal tracking:** Therapist is only occasionally on client’s track; therapist fails to check their perceptions against client’s own experience.

3.  **Slight tracking**: Therapist tries to track client but often fails to do so accurately; only occasionally checks their perceptions against client’s own experience.

4.  **Adequate tracking**: Therapist is adequately on client’s track, checking their perceptions with client and showing ability to revise their understanding based on client feedback.

5.  **Good tracking**: Therapist responses consistently follow the client’s track; therapist checks and revises their perceptions of the client’s experience based on client feedback.

6.  **Excellent tracking**: Therapist is sensitively and actively follows the client’s track, quickly and flexibly responding and revising perceptions based on client feedback.

**3. EMPATHIC RESONANCE:**

**How well is the therapist able to resonate with, and communicate their understanding of, the young person’s spoken and unspoken feelings and perceptions?**

*How accurate and consistent is the therapist’s understanding of the client’s inner world? Is the therapist able to tune into, and reflect back, the young person’s unspoken or non-verbal communication such as body language or tone of voice (when this is possible to observe) in addition to the client’s verbally expressed feelings and thoughts?*

*Conversely, to what extent does the therapist miss or dismiss the client’s feelings, or assume the client shares their feelings?*

1. **No resonance**: Therapist consistently misses or dismisses client feelings and perceptions; makes assumptions based on therapist’s own perceptions and is completely out of tune with the client.
2. **Minimal resonance**: Therapist is only occasionally and inconsistently able to communicate client feelings and perceptions back to them, with their responses typically based on therapist’s own feelings.
3. **Slight resonance**: Therapist communicates understanding of some of the client’s feelings and perceptions, without fully resonating with them..
4. **Adequate resonance**: Therapist is generally able to resonate with, and communicate accurate understanding of, client’s feelings and perceptions.
5. **Good resonance**: Therapist is consistently and accurately attuned to the client and clearly communicates their understanding of the client’s spoken and unspoken feelings.
6. Excellent **resonance**: Therapist is especially in tune with the client and capable of deeply sensing, and resonating with, the feelings that are both unspoken and spoken.

**4. ACCEPTING PRESENCE:**

**Do the therapist’s responses convey a fundamentally accepting attitude toward the young person?**

*How well does the therapist’s attitude convey acceptance of the young person’s world view regardless of their behaviour, attitudes and beliefs?*

*How well do the therapist’s way of being and tone of voice convey genuine acceptance to the young person?*

*To what degree is the therapist able to hold a consistent welcoming and non-judgmental attitude?*

1. **Explicit nonacceptance:** Therapist explicitly communicates disapproval or criticism of client’s experience/meaning/feelings.

2.**Implicit nonacceptance:** Therapist implicitly or indirectly communicates disapproval or criticism of client’s experience/meaning/feelings.

3. **Incongruent/inconsistent nonacceptance:** Therapist acceptance is inconsistent and slightly judgmental.

4. **Adequate acceptance:** Therapist demonstrates at least some degree of acceptance of the client’s experience.

5. **Good acceptance:** Therapist clearly conveys unconditional acceptance, even in face of the client’s challenging behaviours or thoughts.

6. **Excellent acceptance:** Therapist skilfully conveys clear, grounded acceptance of the client’s experience and does not demonstrate any kind of judgment towards client experiences or behaviours, even when these might be criticised by others.

**5. GENUINENESS**:

**How well does the therapist respond in a way that genuinely and naturally conveys their moment to moment experiencing of the client?**

*How much is the therapist able to relate to the young person without adopting a professional façade? Does the therapist sound artificial, overly professional, formal, stiff, pedantic or affected vs. genuine, idiosyncratic, natural or real?*

*Is the therapist able to relate to the young person in a genuine person-to-person manner? Or, conversely, is the therapist patronising or parental in their responses?*

*To what degree is the therapist able to skilfully express their congruent experience of the young person in a facilitative manner?*

1 **No genuineness:** Therapist sounds completely fake, artificial or patronising and does not seem aware of their own experiencing of the client.

2  **Minimal genuineness:** Therapist sounds somewhat wooden, stiff, formal or technical; unable to relate in a person-to-person manner with the client.

3 **Slight genuineness:** Therapist sounds a little distant or affected and only occasionally aware of their own experiencing of the client; rarely able to connect to the client in a person-to-person manner.

4 **Adequate genuineness:** Therapist generally sounds natural, unaffected and able to some degree to maintain a person-to-person stance; some congruence with occasional lapses.

5 **Good genuineness:** Therapist sounds consistently natural or genuine, in touch with their experiencing of the client at a person-to-person level, and expresses this in a facilitative manner.

6 **Excellent genuineness**: Therapist sounds completely genuine, very real or
personally present, without any façade or pretence; comfortably, sensitively and appropriately conveys their experience of the client in a person-to-person manner.

**6. EMOTION FOCUS**

**How much does the therapist actively work to help the young person focus on their emotional experiences and meanings, both explicit and implicit?**

*Does the therapist facilitate the client to:*

* + - *focus their attention inwards in order to become more aware of their feelings?*
		- *focus their attention on bodily sensations?*
		- *reflect toward emotionally poignant content?*
		- *intensify, heighten, evoke or deepen their emotions?*

*Does the therapist help by:*

*• responding to explicit or implied emotional content in what the young person is saying or doing?*

* + - *making empathic conjectures about feelings that have not yet been expressed?*
		- *enquiring about client feelings?*

*Lower scores reflect ignoring implicit or explicit emotions; staying with non-emotional content; focusing on or reflecting generalised emotional states (‘feeling bad’) or minimising or downplaying emotional states (e.g., reflecting ‘angry’ as ‘annoyed’); failing to recognise, or ignoring, the young person’s attempt to verbalise a feeling.*

1.  **No emotion focus**: Therapist consistently ignores emotions or responds instead in a highly intellectual manner while focusing entirely on non-emotional content. When the client expresses emotions, the therapist consistently deflects the client away from them.

2.  **Minimal emotion focus**: Therapist seems to have a concept of emotion focus but doesn’t implement adequately, consistently or well; therapist may generally stay with non-emotional content; sometimes deflects client way from their emotion; reflects only general emotional states (‘bad’) or minimises client emotion.

3. **Slight emotion focus**: Therapist often ignores or deflects client away from emotion; therapist only slightly or occasionally helps client to focus on emotion; while they sometimes respond in a way that points to client emotions, at times they fail to do so, or do so in an awkward manner.

4.  **Adequate emotion focus**: Therapist generally encourages client focus on emotions (by either reflections or other responses), with only minor, temporary lapses or slight awkwardness.

5.  **Good emotion focus**: Therapist does enough of this and does it skilfully and sensitively, trying to help the client to evoke, deepen and express particular emotions.

6  **Excellent emotion focus**: Therapist does this consistently, skilfully, and even creatively where appropriate, offering the client powerful, evocative reflections or questions, while at the same time enabling the client to feel safe while doing so.

1. **EMOTION SYMBOLISATION**

**How well does the therapist assist the young person to articulate emotions and experiences?**

*How skilful is the therapist in facilitating the young person to:*

*• find appropriate words to describe their emotions, especially those that seem difficult to access?*

*• verbalise the concerns, meanings and memories which emerge out of emotional arousal?*

*• identify and verbalise the wishes, needs, behaviours and goals associated with feelings and emotions?*

*Is the therapist able to offer imagery and metaphor to help the young person accurately articulate the meaning of their experiences?*

1. **No emotion symbolisation**: Therapist imposes own language on the client, anticipates and assumes client’s meaning and leaves things unexpressed; does not attempt to help client symbolise experience.
2. **Minimal emotion symbolisation**: Therapist attempts minimally to facilitate the client’s symbolisation of their difficult-to-access feelings and experience but lacks patience and misses the underlying meanings and needs.
3. **Slight emotion symbolisation**: Therapist is able to facilitate the client’s symbolisation of emotion and other experiences to some degree but is inconsistent and mostly unimaginative in their approach; has slight sensitivity to underlying meanings and needs.
4. **Adequate emotion symbolisation**: Therapist is generally able to facilitate client symbolisation of emotion and experiences in a patient manner.
5. **Good emotion symbolisation**: Therapist is skilful and imaginative in facilitating client emotions and experiences and communicates patience when feelings are difficult to symbolise; helps client to identify and express the needs and concerns associated with their emotions.
6. **Excellent emotion focus**: Therapist is especially sensitive to the client’s pace in symbolising emotions and other experiences; works closely and creatively with the client to fine-tune the expression of even difficult-to-access experience and emotion so that understanding matches symbolisation.

**8. FACILITATION OF CLIENT SELF-DEVELOPMENT**

**How much does the therapist actively work to facilitate new client awareness, growth, perspectives and narratives?**

*Does the therapist:*

* + - *recognise, support, or symbolise emerging new client emotions or other experiences?*

*• facilitate the young person to translate new perspectives into alternative ways of understanding their experiences and actions?*

* + - *facilitate the young person to develop new narratives about themselves and their world?*

*Lower ratings are used when the therapist ignores new awareness, insight or shifts in perspective or behaviour.*

1  **No facilitation**: Therapist either fails to recognise, or consistently ignores new client awareness or new perspectives; generally responds instead to client despair or stuckness in recycling old narratives. When the client expresses new, emerging experiences, the therapist consistently deflects the client away from them.

2  **Minimal facilitation**: Therapist occasionally recognises emerging new client perspectives and narratives but fails to facilitate the client to explore or develop them..

3  **Slight facilitation**: Therapist recognises emerging new client perspectives and narratives but their attempts at facilitating client exploration and development are awkward, ineffective or, conversely, directive..

4  **Adequate facilitation**: Where appropriate, therapist generally recognises and encourages exploration of emerging client experiences or new narratives and actions (by either reflections or other responses), with only minor, temporary lapses or slight awkwardness.

5  **Good facilitation**: Therapist recognises and skilfully supports emerging new perspectives; where appropriate, offers responses that facilitate the young person to translate new perspectives into alternative understandings or actions.implicitly convey trust in the client’s self-development potential.

6  **Excellent facilitation**: Therapist works consistently, skilfully, even creatively, where appropriate, to highlight, and facilitate the client to explore, emerging new perspectives and any subsequent alternative understandings or actions; therapist may do this by offering client choices or implicitly or explicitly communicating trust in the client’s self-development process.

**9. DEVELOPMENTAL RESPONSIVENESS**

**How skilful is the therapist in adapting to the young person’s individual developmental levels in relation to language, thinking and understanding, expression of affect and behaviour?**

*Is the therapist able to communicate at a developmentally appropriate level while respecting the young person’s emotional, communicative and self-reflective capacities, as opposed to talking over the young person’s head or patronising them?*

*Is the therapist able to employ, where appropriate, a range of symbolic communication modes consistent with the young person’s developmental level, e.g. drawing, play or other creative methods?*

1. *Is the therapist able to understand and work with the client’s developmentally appropriate modes of expressing emotion even when these may be challenging? For example, does the therapist respond with empathy and acceptance when the young person expresses themselves in ways that might be considered unacceptable in another context (within limits of safety for both client and therapist).*

*Conversely, does the therapist inflexibly insist on adult ways of communicating and acting, or underestimate the client’s capacities and expect something too childish?*

1. **No developmental responsiveness:** Therapist does not adapt to the developmental capacity of the client in any way; offers no alternative methods of communication or symbolisation aside from talking; is unable to tolerate expression of client feelings outside of the ‘acceptable’ adult range.
2. **Minimal developmental responsiveness**: Therapist attempts to respond at the appropriate developmental level but is unable to do so adequately, consistently or well; sounds awkward, stilted, uncomfortable or patronising in adapting their language or way of working with the young person.
3. **Slight developmental responsiveness**: Therapist is somewhat able to respond to the young person’s developmental capacity but is slightly ‘off’ e.g. trying too hard or overestimating the young person’s developmental level.
4. **Adequate developmental responsiveness**: Therapist is mostly sensitive to, and able to respond appropriately to, the client’s developmental capacity through language and creative methods of symbolising experience; therapist shows some ability to empathise with and accept challenging, but developmentally appropriate, client actions and feelings.
5. **Good developmental responsiveness**: Therapist consistently matches client’s developmental capacity through language and creative methods of symbolising experience; they respond non-defensively and openly to challenging but developmentally appropriate client feelings and actions.
6. **Excellent developmental responsiveness**: Therapist’s responses are comfortably, consistently, and intuitively matched with the client’s developmental capacities; therapist shows an understanding of the meaning in the client’s developmentally appropriate feelings and actions, even when these are challenging or puzzling.