



*A suite of talking therapy tools from Te Pou*

# Skills survey

Identify strengths and  
areas for development in  
talking therapies delivery



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The *Let's get talking Skills survey* tool can help primary and secondary mental health and addiction services to identify workforce capability and capacity to deliver evidence-based talking therapies.

It collects information from individual practitioners and/or teams about:

- talking therapy skills, knowledge and practice (Part A)
- strengths and areas for development in your service (Part B).

This information can be aggregated at a team or service level to help identify workforce capability, capacity, strengths and needs in order to develop or extend the delivery of talking therapies. Some of the ways in which the information can be used include:

- to gain an account of the current state of talking therapies
- to respond to service user needs and preferences
- to determine gaps in provision
- to inform training and development
- to guide recruitment of skilled staff
- to inform service provision in relation to other complementary services.

This tool supports delivery of therapies in adult services and can be adapted for use by others. Analysis of the data is left to individual teams and services as they may have different data analysis systems in place.

It is best used in conjunction with the *Let's get talking Planning* tool which outlines a six step planning approach to use when establishing or extending delivery of talking therapies.

This tool draws on the talking therapies stocktake work carried out in Lakes District Health Board, Waitemata District Health Board and Auckland District Health Board. Te Pou o Te Whakaaro Nui wishes to acknowledge these contributions.

This survey is part of a suite of tools developed by Te Pou. The following are a list of tools which complete the *Let's get talking* toolkit available on the [Te Pou website](#).

- Introduction: A stepped care approach to talking therapies
- Planning: Develop or extend talking therapies delivery
- Skills survey: Identify strengths and areas for development in talking therapies delivery
- Assessment: How to match talking therapies to peoples' needs
- Therapy: A guide to evidence-based talking therapies
- Review: Progress and outcome measures to support talking therapies delivery
- Practice support: Competencies, training and supervision for talking therapies delivery



## How this tool works

**Part A** is a self-assessment to identify practitioner knowledge and skills. This asks you to identify what talking therapies you are skilled in and what therapies you use in your clinical practice with services users, family and whānau. You will also be asked to estimate how much time you spend delivering therapies to help plan for future therapy delivery.

**Part B** asks you about your service's current delivery of talking therapies to help identify strengths and areas for development.

Information on the need to address cultural fluency and competency relating to taking therapies is requested in Part B.

Cultural factors need to be taken into account where talking therapies are used with people from different ethnic groups. The standard application of a therapy may not be appropriate. Specific forms of talking therapies and their evidence base may be in development for Māori, Pasifika and Asian populations as well as other ethnic groups. It is recommended that there is reference to research or guidelines for the therapy; and that there is appropriate specialist, cultural and service user consultation (refer to [talking therapy guides](#) available on the Te Pou website).



## ● Part A - Individual practitioner skills and knowledge

The following information will help to identify the skills and knowledge of team members. Completion of this questionnaire may be mandatory or optional depending on the requirements and decision of your service. The need for individually identifiable information for team planning will depend on the decision of your service.

<b>Name</b>		<b>Date</b>				
<b>Role and Service</b>						
<b>Please select your profession</b>		Alcohol and Other Drug Practitioner			Occupational Therapist	
		Counsellor			Problem Gambling Practitioner	
		Medical Doctor			Psychologist	
		Mental Health/Peer Support Worker			Psychotherapist/Therapist	
		Nurse			Social Worker	
		Other (please state)				
<b>Years of experience working in mental health and/or addiction (select one)</b>		1 to 5 years		5 to 10 years		10 years or more



### Talking therapies and use in daily practice

The table below lists a group of commonly used evidence-based talking therapies. The practice of a therapy requires both knowledge and skills. Please self-rate your level. Identify the type of training you received and how regularly you use each therapy in your daily practice with service users, family and whānau. You may find that you have trained in some of the listed talking therapies but are not currently using them in your practice.

Talking therapy type	How would you rate your level of skill and knowledge in this therapy? Please tick one.			Where did you acquire your training in this therapy? Please tick as many as are appropriate. <small>*denotes during tertiary training to gain your health professional qualification</small>				On average, how often do you use this therapy in your clinical practice? Please tick one.		
	Beginner 1	Competent 2	Expert 3	Through professional training*	Post graduate Certificate or Diploma level course	In a workshop format (please state number of hours)	Self-taught/ on the job learning	Never 1	Occasionally 2	Frequently 3
Cognitive Behaviour Therapy (CBT)										
Motivational Interviewing (MI)										
Dialectical Behaviour Therapy (DBT)										
Family therapy										
Solution-Focused Brief Therapy (SFBT)										
Mindfulness based therapies										



Talking therapy type	How would you rate your level of skill and knowledge in this therapy? Please tick one.			Where did you acquire your training in this therapy? Please tick as many as are appropriate. <small>*denotes during tertiary training to gain your health professional qualification</small>				On average, how often do you use this therapy in your clinical practice? Please tick one.		
	Beginner 1	Competent 2	Expert 3	Through professional training*	Post graduate Certificate or Diploma level course	In a workshop format (please state number of hours)	Self-taught/ on the job learning	Never 1	Occasionally 2	Frequently 3
Brief psychotherapy										
Problem Solving Therapy (PST)										
Acceptance and Commitment Therapy (ACT)										
Supportive counselling										
Brief intervention										
Group therapy and skills training (please state type)										

Please identify any **other talking therapies** (including culturally focused therapies) that you have skills and knowledge in and use in your practice with service users, family and whānau.

Other talking therapies (please state)	How would you rate your level of skill and knowledge in this therapy? Please tick one.			Where did you acquire your training in this therapy? Please tick as many as are appropriate. <small>*denotes during tertiary training to gain your health professional qualification</small>				On average, how often do you use this therapy in your clinical practice? Please tick one.		
	Beginner 1	Competent 2	Expert 3	Through professional training*	Post graduate Certificate or Diploma level course	In a workshop format (please state number of hours)	Self-taught/ on the job learning	Never 1	Occasionally 2	Frequently 3





Please rate your level of skill and knowledge in various types of assessment.

<b>Assessment type</b>	<b>How would you rate your level of skill and knowledge in assessment? Please tick one.</b>		
	<b>Beginner 1</b>	<b>Competent 2</b>	<b>Expert 3</b>
<b>Mental health</b>			
<b>Alcohol and other drug/gambling</b>			
<b>Psychological</b>			
<b>Risk</b>			
<b>Psychometric</b>			
<b>Neuro-psychological</b>			
<b>Other (please state)</b>			



### Time spent delivering talking therapy

This section gathers information about the **time spent delivering talking therapies** in your weekly practice.

Please provide an estimate of how much time you spend doing the following activities per week (needs to total 100 per cent):

Activity	Estimated percentage of weekly activity
Delivering talking therapy	
Care co-ordination / key working	
Other – please specify e.g. administration, profession specific activities, meetings	
<b>Total</b>	<b>100%</b>

What percentage of your practice time is spent delivering talking therapies in each of the following (needs to total 100 per cent):

Activity	Estimated percentage of weekly activity
One-to-one therapy	
Family or couples therapy	
Group therapy (with service users and/or family and whānau)	
Other e.g. e-therapy, phone (please state)	
<b>Total</b>	<b>100%</b>

## ● Part B - Talking therapy requirements for your service

Part B asks you to reflect on aspects of the current delivery of talking therapies within your service.

How often are these practices used in the current delivery of talking therapies? (Select one rating for each question).	Never	Occasionally	Frequently	Always
<b>Inclusion of cultural practices</b> (such as referral to cultural advisors or services, co-working with cultural services, cultural supervision).				
<b>Inclusion of a person's preferences</b> (for example, their spiritual values, choice of therapy or therapist).				
<b>Family or whānau member involvement</b> (either directly in therapy or by consultation).				
<b>Identifying and addressing co-existing problems</b> (such as addictions, mental health, physical health, long-term physical illness and disability).				



**Workforce development needs**

**Training**

Is there any training you would like to receive to support confidence and capability in your delivery of talking therapies?

Type of training required (please include details of actual training courses if relevant)

Are there any talking therapies that you think could be made more available in your service and why?

Talking therapy type	Please state reasons



**Supervision**

<p><b>What type of talking therapy supervision do you receive (e.g. one-to-one or group) and how often do you receive it?</b></p>			
<p><b>What further supervision, if any, do you require?</b></p>			
<p><b>Do you provide supervision of talking therapies to other practitioners?</b></p>	<p>Yes</p>		<p>No</p>
<p><b>If yes, approximately how many hours each month do you spend delivering talking therapies supervision (such as one-to-one or group supervision, consultation or training)?</b></p>	<p>Hours each month:</p>		
<p><b>Do you require training to provide supervision to others? If yes, please describe.</b></p>	<p>Yes</p>		<p>No</p>



**Use of Outcome Measures**

<p><b>Do you assess the progress that a person makes in talking therapy?</b> If yes, please describe how.</p>		Yes		No				
<p><b>Do you assess the effectiveness of the therapy you deliver?</b> If yes, please describe how.</p>		Yes		No				
<p><b>Do you routinely use progress and outcome measures within your talking therapy practice?</b> This means that you use a valid and reliable tool to measure a person's health, wellbeing and therapy progress over time.</p>		Never		Occasionally		Frequently		Always
<p><b>If yes, please specify the outcome measure(s) used:</b></p>								



**Summary Questions**

<b>Do you think current delivery of talking therapies is meeting demand?</b>	Yes	No
<b>Please briefly describe the reasons for this:</b>		
<b>What do you think are the main strengths of the current delivery of talking therapies?</b>		
<b>What do you think are main areas for development?</b>		
<b>What development is required to meet the needs of cultural and ethnic groups?</b>		
<b>Do you have any further comments about current delivery of talking therapies within your service or practice?</b>		





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