

Applications for DBT-ACES: Overview, Checklist, and Forms

Overview

Dialectical Behavior Therapy – Accepting the Challenges of Employment and Self-Sufficiency (DBT-ACES) is an expansion and adaptation of standard DBT. **The goal of DBT-ACES is to (a) help clients achieve effective, satisfying living wage employment, financial independence, social belonging, and self-sufficiency and (b) reduce the need for financial and other practical supports from employer or other disability programs or from family/friends.** The focus in DBT-ACES is on overcoming anxiety, avoidance, and other emotional problems that interfere with obtaining and maintaining employment, a social network, and your other recovery goals.

DBT-ACES differs from standard DBT in three main ways:

1. DBT-ACES clients commit to making career development, employment skills and experience, social belonging, self-sufficiency and other DBT-ACES recovery goals the highest priority. Thus, circumstances in your life that would have to take priority over these targets (e.g., medical treatment) must be resolved prior to DBT-ACES.
2. DBT-ACES teaches skills in a group focused on achieving DBT-ACES goals including:
 - a. More complex versions and application of standard DBT skills
 - b. Other skills such as goal-setting, problem-solving, and positive, flexible thinking
 - c. Specific interpersonal skills to use with health care providers and to establish oneself in a supportive community outside of mental health treatment
3. DBT-ACES requires clients to spend considerable time on career development activities including working, attending college or other strategies to achieve living wage employment (working their way from 0 to 10 then to 20 hours/week). As part of this, DBT-ACES requires “Work as Therapy” to demonstrate the ability to support yourself in a standard work environment. This is described on the next page.

In DBT-ACES, you will have an individual DBT-ACES therapist and attend a weekly DBT-ACES skills group for one year. As with standard DBT, you can contact your DBT-ACES therapist for coaching as needed and your DBT-ACES therapists will meet weekly for consultation.

There are several requirements which must all have been met for at least 8 consecutive weeks immediately prior to starting the DBT-ACES program. If this is not the case, your start of DBT-ACES will be delayed until they are all met for 8 consecutive weeks. These are the requirements: You must fully commit to shut the door on suicide as an option. You cannot engage in self-harm behavior or violence. You must attend at least 80% of your treatment and other key activities on time. In addition, you are asked to complete all the steps of this application process. (There may be other criteria your therapist or the DBT team will require, on a case by case basis.)

This program is not for all DBT clients: Our goal is to directly address interpersonal and emotion dysregulation issues that interfere in work or social settings. This requires a lot of willingness on the part of our DBT-ACES clients to be open to feedback on their interpersonal style and to make changes the therapists believe are required to not only survive but also succeed and find joy. These may not be changes you want to make. Please discuss this with your therapist and those you respect and find your wise mind.

DBT-ACES Recovery Goals – The Focus of Individual Therapy in DBT-ACES

A life worth living that doesn't involve financial dependency on others. In DBT-ACES, this means the ability to live successfully without continuous psychosocial treatment as well as independence from family/friend financial support... despite life's inevitable setbacks.

1. Living Wage Employment and Off Psychiatric Disability
 - a) Choose a career path to living wage employment knowing its fit with your wise mind values and talents as well as the practical issues of pay, health insurance, leave and retirement benefits, hours, shift times, required training or certification, and routes to advancement.
 - b) Demonstrates capability to financially support yourself (and your family) in your chosen career without psychiatric disability payments or partner/family's income
 - c) Demonstrate capability to financially support yourself (and your family) in at least one fall-back job without psychiatric disability payments or partner/family's income (if needed)
 - d) Sufficient health insurance to maintain health care and medications
 - e) Better than 90% follow-through at work on attendance, being on time, appropriate dress and manner, following directions, and job tasks

2. Interpersonal Proficiency
 - a) Interpersonally easy to work/be with – even with difficult people and during stressful times
 - b) Demonstrate capability to regulate emotional expression and actions and find wise mind in all interpersonal situations – even with difficult people and during stressful times
 - c) Know your wise mind personal limits and act on them with yourself, employer, friends, family, colleagues, and members of your community
 - d) Receive praise, raises, promotions, and offers for more desirable jobs and roles within your community

3. Life Outside of Work

(Note – we expect considerable overlap between the following categories.)

 - a) Have at least a couple of local and/or long-distance friends whose values align with yours
 - b) Have at least one person or group for casual interactions (e.g. lunchroom, church, coffee, movie, book club, volunteer organization)
 - c) Have at least one close support with whom you experience intimacy and discuss private issues (who is not your therapist)
 - d) Have at least one local person or group who would notice you were not around and would take action to find you.
 - e) Be an active member of an organized recreational activity that is either fun or meaningful and not related to mental health (e.g. volunteer organization, church, sports teams, gym class, Spanish lessons, ballroom dancing)
 - f) Disengage from relationships with family members that are ineffective or destructive

- g) Disengage or end friendships that are ineffective or destructive
- h) Choose relationships based on evidence that they are compatible in their lifestyle, needs, and values
- i) Take steps to find an effective and rewarding romantic relationship (if desired)

4. Emotional Proficiency

- a) Able to experience negative emotions building, staying, and falling mindfully – not avoiding, rushing them along, or mentally moving into a different moment.
- b) Able to experience positive emotions building, staying, and falling mindfully – not avoiding, rushing them along, or mentally moving into a different moment.
- c) Able to reduce problematic emotions effectively and fast enough to prevent them leading to problems.

5. Self-Management

- a) Have an effective method for managing your monthly budget and one-time expenses (e.g. new tires) so you stay within your income
- b) Sufficient emergency fund savings to cover 3 months of living expenses in case you lose your job
- c) Have an effective method of savings for things you would enjoy.
- d) Have an effective method for getting out of debt/getting debt to a reasonable level
- e) Have an effective method for managing your time that spends your time in line with your wise mind values.
- f) Have an effective method for managing your time that gets key things done on time.
- g) Have an effective method for managing your time that balances work, leisure, household, and down time.
- h) Have an effective method of preventing illness and psychiatric symptoms from impacting your functioning.
- i) Have an effective method of managing chronic illness or pain to minimize its impact on your quality of life

Achieving a Living Wage Career and Financial Independence

We have learned that a living wage career and long-term financial independence require two different sets of skills. The first are the specific skills of your career. The second are the skills to succeed in a workplace. If you only have the first, you will not consistently get paid for your career skills. If you only have the second, you will likely be bored and underpaid at a job not of your choosing. The goal is to synthesize the career skills and job effectiveness skills so you can be paid for what you love to do or, if what you love to do doesn't make a living (e.g. being an artist, traveling to new places), have the stable job and insurance to support doing what you love.

To achieve these dual sets of skills, DBT-ACES has three requirements:

1. A career plan (which is part of your application)
2. Career Development (below)
3. Work as Therapy (see next page)

Career Development

Career development refers to the activities that will prepare you for the profession you have chosen. These activities such as attending college, internships, employment in your field or in junior versions of your field (e.g., working as a nursing assistant as experience toward nursing), volunteer positions, vocational-technical training (e.g., a certificate program), temporary or contract work, self-employment...

Career development hours must be on-going structured activities directly tied to one or more Recovery Goals. Working or going to school that are not tied to a Recovery Goal would not apply (e.g., continuing to work a status quo job at Target when your career ambition is to be a teacher).

Less structured activities (e.g. looking for a new job or investigating a career option) can be included on a case-by-case basis if time-limited, structured, and clearly tied to Recovery Goals. Discuss such options with your therapist or the intake clinician.

Requirement:

- By 4 months into DBT-ACES, you must maintain at least 10 hours a week on career development activities.
 - NOTE: If you have not yet successfully worked at a standard, competitive W2 job for at least six months, then your Career Development requirement at this point will be met through your Work as Therapy job (as described on the next page). As soon as you meet the Work as Therapy requirement, then other Career Development activities become the priority.
- By 8 months into DBT-ACES, you must maintain at least 20 hours a week on Career Development activities.

Work as Therapy

As noted above, a Career Plan and Career Development is not all that is needed to succeed in living wage employment and be financially independent. If you aren't an effective and successful employee, then your career skills will go to waste. And even if you can work in a particular career of your choosing, there may come a time when you lose your job, need more money, move to a new city, or otherwise have to start over. When you do this without financial support from the government or others, it means very quickly finding a job and maintaining it.

We help you with these employability skills through what we call "Work as Therapy". That is, we use finding and then maintaining a standard, competitive job as an opportunity to assess your work skills and problem areas then find and implement solutions to maximize your work performance so you can get raises and promotions.

Work as Therapy requires you to find a W2 job on the open market and work for a minimum of 10 hours/week for at least 6 months during your Standard DBT or DBT-ACES year.

DBT-ACES does not presume you can do this on your own at this time and provides substantial assistance via individual therapy, skills group, and coaching in the real world of your Work as Therapy. There are two stages to the Work as Therapy process:

Finding a Job

- √ Your individual therapy and out of session coaching will focus on the DBT skills you need to use in looking for, applying for, interviewing for, and accepting a W2 job.
- √ You are free to use employment or vocational services as well, but these services are often very slow and you are responsible to the DBT-ACES deadlines regardless.
- √ You do not need to wait for DBT-ACES to find work; starting in standard DBT is great.
- √ You will be expected to submit an increasing number of applications once you start DBT-ACES until your first day at a competitive W2 job:

Month 1:	1 application/week	Month 2:	5 applications/week
Month 3:	10 applications/week	Month 4:	15 applications/week

Maintaining a Job

- √ The majority of DBT-ACES clients succeed in their first Work as Therapy job with help from the DBT-ACES program.
- √ Some clients struggle and, if you do, your individual therapy and coaching will focus on the DBT and DBT-ACES skills you need to keep this job or find a new one.
- √ If you don't like your job, we strongly recommend keeping your current job as you seek alternative employment. (This is what financial independence requires.)
- √ If you stop working before 6 months, you will need to find another job starting at the 5 applications a week requirement.
- √ Individual therapy and coaching will also focus on helping you to get raises, promotions, and other acknowledgments of your hard work.
- √ You may find yourself deciding to work more hours than is required. You are, of course, welcome to do so as long as you stay inside your limits of time and energy.

DBT-ACES Requirements and Time Line¹

Throughout DBT-ACES:

1. Continue
 - no suicidal urges,
 - no self-harm, and
 - no significant therapy-interfering behaviors such as missing, coming late, not doing homework, not completing diary cards, argumentativeness or judging, not focusing on DBT-ACES tasks and requirements...
2. Normative Productive Activity - Throughout the DBT-ACES year, maintain 20 hours per week of normative/productive activity as you had in Standard DBT. (Work as Therapy and Career Development requirements below count as part of Normative Productive Activities, not in addition.)

After 4 months in DBT-ACES:

3. Work as Therapy – Maintain 10 hours/week for 6 months
4. Career Development - Maintain 10 hours/week between 4-8 months of the year.

Work as Therapy is the Career Development requirement until it is met.

After 8 months in DBT-ACES:

5. Work as Therapy – Maintain 10 hours/week, if not yet met 6 month requirement
6. Career Development - Maintain 20 hours/week between 4-8 months of the year.

Work as Therapy hours will serve as some of the Career Development hours until the requirement is met.

¹ If you do not meet any of these requirements, you will be suspended from DBT-ACES until you meet them. As soon as you meet them, you will come back to DBT-ACES right away and you will still receive 12 full months of treatment.

From *DBT-ACES Skills Training Manual* by Comtois, Carmel, & Linehan, 2021. Permission to copy or share this handout is granted to the purchasers of this book only for use within their DBT team or within their own practice (see license for details).

Time Line and Key Dates for Current Standard DBT Patients
(not applicable to new referrals for DBT-ACES)

Client Name: _____

Therapist Name: _____

First Session with DBT therapist

___/___/___

First Skills Group Session (start date for 12 months of therapy)

___/___/___

Completed all skills modules one time (about 6 months): Client introduced to DBT-ACES and DBT team reviews client's progress so far in standard DBT

During repeat of 1st and 2nd skills modules: ___/___/___ through ___/___/___ Client applying for DBT-ACES and DBT team monitoring client progress relative to DBT-ACES requirements

By end of 2nd repeated skills module: ___/___/___ DBT team review of DBT-ACES application and client progress and Director Interview (Any DBT-ACES interfering behaviors are identified)

First half of last skills module: Resolution of DBT-ACES interfering behaviors (if any)
___/___/___ through ___/___/___

Month before the end of Standard DBT: ___/___/___ If DBT-ACES interfering behaviors not resolved, stop application process, feedback to client of how and when to re-apply, focus on ending DBT well and planning for next steps.

End of Standard DBT (or later if waiting): Admitted to DBT-ACES program ___/___/___

DBT-ACES Application Checklist

- DBT-ACES client application**
 - Review with your therapist/intake clinician to be sure you understand it
 - Complete on your own (often easiest to do in stages rather than all at once)
 - Have your current therapist or the intake clinician review a draft and suggest changes so you can revise before submitting to Director (or DBT-ACES Leader)
- DBT-ACES Career Plan**
 - Provide specific activities as planned throughout the DBT-ACES year
 - Show how Work as Therapy and Career Development requirements will be met completely and on time
- Employment Resume**
 - Please write (or update) a resume that you can use for your Work as Therapy job searching which starts your first week of DBT-ACES
 - Review your resume with your therapist or intake clinician before submitting
- DBT skills test (not included in this packet)**
 - Arrange with appropriate clinical or intake staff to take DBT skills test
 - Study for test (and complete pre-tests if you want to)
 - Take test (we will grade it and get you your score)
 - If < 75% correct, develop study plan with your therapist or intake clinician
 - Retake exam (repeat as needed – rarely is)
- DBT Individual Therapist Performance Evaluation**
 - Give Performance Evaluation form to DBT individual therapist (current or most recent) and confirm when they will complete and give to the Director
 - Confirm with therapist that Performance Evaluation sent to Director

An Individual Therapist Interim Performance Evaluation is included if you would like feedback early so you and your therapist can address any issues before the final Performance Evaluation due (*do not turn in Interim Performance Evaluation*).
- DBT Skills Group Leader Performance Evaluation**
 - Give Performance Evaluation to a Skills Group leader (current or most recent) and confirm when they will complete and give to the Director
 - Confirm with group leader that Performance Evaluation sent to Director

A Group Leader Interim Performance Evaluation form is included if you would like feedback early so you and your therapist can address any issues before the final Performance Evaluation is due (*do not turn in Interim Performance Evaluation*).
- Director Interview and Commitment Decision**
 - Submit application, career plan, and resume to therapist or intake clinician
 - Schedule a 60 min appointment with the Director (or DBT-ACES Leader).
 - Discuss interview with therapist or intake clinician to learn how to prepare
 - Complete Director Interview
 - If steps are recommended to increase your readiness, complete them
 - After Director Interview, review your commitment to DBT-ACES with your current or previous therapist or someone else whose opinion you respect and find Wise Mind about if and when to start DBT-ACES
 - Confirm with therapist or intake staff your commitment to DBT-ACES

When all are checked off, you are done!! Thanks for your hard work.

DBT-ACES Client Application Form

Client name	Client signature	Date
Therapist name	Therapist signature	Date

Instructions to client: This DBT-ACES Application Form is designed to help you focus on what you would like to achieve and what you need to do to be successful in DBT-ACES. To start DBT-ACES right after standard DBT, this application must be submitted two months before you graduate standard DBT.

Section I: What do you want from DBT-ACES?

1. Briefly describe your vision for a *productive working life outside mental health treatment and independent of financial support from a disability program or friends /family*. What do you aim to be doing 5 years after DBT-ACES is over?

2. Develop Your DBT-ACES Career Plan

A career plan helps you determine your skills and interests, what career best suits your talents, and what skills and training you need for your chosen career. By developing a career plan, you can focus on what you want to do and how you are going to get there.

GET STARTED:

1. Decide on your career ambitions, which can help you focus more clearly on possibilities available to you.
 - a. A career ambition can be as specific as the job you want to do, such as becoming a teacher or surgeon, or can be more broad such as be a particular field you want to work in such as education or medicine.
 - b. Rather than limiting your future, a career ambition can help you discover career possibilities you wouldn't have otherwise. There are several job possibilities with any chosen career. For instance, if you choose a medical career, you may want to be a pharmacy tech, scientist, a nurse, or a doctor.
 - c. A career ambition can also guide you into doing what you want with your life – the lifestyles of scientists, nurses, and pharmacy techs are quite different (e.g., when they work, how long they work, what money they make, do they primarily lead or follow, do they work alone or with others...).
 - d. Note, write what your wise mind knows now. (If you learn that you would prefer another ambition during DBT-ACES, then it makes sense to change and you can revise your career plan at that time.)
2. Determine what you need to do to prepare for your chosen career. Do you need special training? If so, find out what schools offer the training you need. Also, determine what kind of experience you will need to be successful in the career. Consider an internship or volunteer work as a way to get work experience in your career field. Do you have enough emotional stamina? Do you need to save money? The answers to these questions help you decide what your career activities will be.

WRITE A DETAILED PLAN in a separate document and attach to this application after it is reviewed and approved by your individual therapist or the intake clinician.

Your plan should contain:

- Description of your long-term dream or ambition (e.g. five or ten years from now)
- Description of the specific career activities you will do during the DBT-ACES year.
For each activity, specify:
 - What is it (e.g., work at XX, class in YY at ZZ...) and do you already have it set up? If not, include your steps to make it happen on time.
 - Time frame for it (e.g., job all year, school during fall quarter...)
 - Which Recovery Goals will that activity help you achieve?

You do not have to have more than one or two activities as long as they hit the key Recovery Goals for you and make sense with your long-term ambition

Section II: Self-Assessment of DBT-ACES Recovery Goals and Related Issues

1. Please note how far you have come on each of these recovery goals that are the focus of DBT-ACES. Use the following scale
- 0 = Not thought about it or talked about it
 - 1 = Thought or talked about it, no action, don't want to
 - 2 = Thought or talked about it, no action, want to
 - 3 = Tried to do/get it but couldn't
 - 4 = Trying to do it, can do/have it, once or twice
 - 5 = Trying to do it, can do/have it, not reliably
 - 6 = Do/have this reliably, still have problems being effective
 - 7 = Do/have this reliably, this problem is essentially solved

Recovery Goals	Start of DBT	Now
Living Wage Employment and Off Psychiatric Disability		
Choose a career path to living wage employment knowing its fit with your wise mind values and talents as well as the practical issues of pay, health insurance, leave and retirement benefits, hours, shift times, required training or certification, and routes to advancement.		
Demonstrates capability to financially support yourself (and your family) in your chosen career without psychiatric disability payments or partner/family's income		
Demonstrate capability to financially support yourself (and your family) in at least one fall-back job without psychiatric disability payments or partner/family's income (if needed)		
Sufficient health insurance to maintain health care and medications		
Better than 90% follow-through at work on attendance, being on time, appropriate dress and manner, following directions, and job tasks		
Interpersonal Proficiency		
Interpersonally easy to work/be with – even with difficult people and during stressful times		
Demonstrate capability to regulate emotional expression and actions and find wise mind in all interpersonal situations – even with difficult people and during stressful times		
Know your wise mind personal limits and act on them with yourself, employer, friends, family, colleagues, and members of your community		
Receive praise, raises, promotions, and offers for more desirable jobs and roles within your community		
Life Outside Work (<i>note – these categories are expected to overlap</i>)		
Have at least a couple of local and/or long-distance friends whose values align with yours		
Have at least one person or group for casual interactions (e.g. lunchroom, church, coffee, movie, book club, volunteer organization)		

Recovery Goals (cont)	Start of DBT	Now
Have at least one close support with whom you experience intimacy and discuss private issues (who is not your therapist)		
Have at least one local person or group who would notice you were not around and would take action to find you.		
Be an active member of an organized recreational activity that is either fun or meaningful and not related to mental health (e.g. volunteer organization, church, sports teams, Spanish lessons, ballroom dancing)		
Disengage from relationships with family members that are ineffective or destructive		
Disengage or end friendships that are ineffective or destructive		
Choose relationships based on evidence that they are compatible in their lifestyle, needs, and values		
Take steps to find an effective and rewarding romantic relationship (if desired)		
Emotional Proficiency		
Able to experience negative emotions building, staying, and falling mindfully – not avoiding, rushing them along, or mentally moving into a different moment.		
Able to experience positive emotions building, staying, and falling mindfully – not avoiding, rushing them along, or mentally moving into a different moment.		
Able to reduce problematic emotions effectively and fast enough to prevent them leading to problems.		
Self-Management		
Have an effective method for managing your monthly budget and one-time expenses (e.g. new tires) so you stay within your income		
Sufficient emergency fund savings to cover 3 months of living expenses in case you lose your job		
Have an effective method of savings for things you would enjoy.		
Have an effective method for getting out of debt/getting debt to a reasonable level		
Have an effective method for managing your time that spends your time in line with your wise mind values.		
Have an effective method for managing your time that gets key things done on time.		
Have an effective method for managing your time that balances work, leisure, household, and down time.		
Have an effective method of preventing illness and psychiatric symptoms from impacting your functioning.		
Have an effective method of managing chronic illness or pain to minimize its impact on your quality of life		

Section II: Self-Assessment of DBT-ACES Interfering Behaviors

1. Describe the 3 problem behaviors which most interfere with leading a life worth living and/or reaching your vision of a productive life. Examples might include self-harm behavior/urges, substance abuse/urges, eating disorder/urges, health care over-utilization, or non-adherence to medical recommendations. For each one describe (a) the problem behavior, (b) what circumstances tend to trigger the behavior, (c) the effective strategy you are taking to increase your control over the behavior, (d) the frequency of the problem behavior at the start of DBT, and (e) the frequency of the problem behavior now.

(a) Problem behavior	(b) Circumstances that trigger	(c) Effective alternative strategy	(d) Freq at start	(e) Freq now

2. Identify 10 judgments, assumptions, or interpretations of yourself or others that still cause you problems these days and describe the effective reframe you practice instead.

Judgment, Assumption, Interpretation	Reframe into Description of Situation and Impact on You, Self-Validation
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.

3. Describe 3 situations or circumstances that tend to elicit willfulness that interferes with your progress toward living wage employment, social belonging, or self-management. Also describe the behavior that sometimes results from this willfulness and an effective alternative that you use. Examples include: "When I wake up feeling depressed, I sometimes get willful and think to myself 'Why bother?' and just go back to bed. Instead, I now practice opposite action and get into the shower." "When my friend Bobby tells me I can sometimes be hard to take, I sometimes get willful and tell them off. Instead, I now practice GIVE to help Bobby feel more relaxed with me."

When...

...I sometimes...

...a more effective strategy I have been able to use instead is...

When...

...I sometimes...

...a more effective strategy I have been able to use instead is...

When...

...I sometimes...

...a more effective strategy I have been able to use instead is...

4. Think about all the people in your life these days. It is likely that some of these people inadvertently reinforce your avoidance of difficult situations, avoidance which may keep you away from self-sufficiency, stuck in disability or dependence, and/or impact your ability to maintain employment or care for yourself. For example, a well-meaning friend might subtly urge you to go to the hospital instead of using skills to handle difficult feelings. A health care provider might encourage you to use more medication instead of using skills that have been effective in the past. A relative might continue paying your debt if you don't have enough money to cover it. Or a buddy might think they're helping by encouraging you to stay home from work when you are anxious rather than finding a way to make going to work possible. These behaviors tend to be reasonable or viable only in a mental health or other dependency environment.

Describe 3 examples of your dependent behaviors that interfere with self-sufficiency, and how someone in your life may be inadvertently reinforcing it. Then describe what you are doing to try to reduce their problematic or ineffective influence on you.

Dependency behavior	How it's being reinforced	What I'm doing to reduce negative influence

Section III: Addressing Medical and Physical Limitations and Fit with DBT-ACES

1. Describe any medical or physical difficulties or limitations you have. Include both what it is/they are as well as specific examples of how they limit your day-to-day functioning.

2. If you believe that, in the next 1-2 years, your medical or physical difficulties do or will impair your ability to work sufficiently to make a living wage so you do not need financial support from others, please describe.

In DBT-ACES, we have a slogan “contingencies create capabilities” which is similar to the expression that “necessity is the mother of invention”. This means that humans are inherently capable of more in the face of consequences. Contingencies (aka consequences) organize human behavior and focus attention toward achieving a goal. The working world makes use of this phenomenon because you get fired or lose pay if you miss work. In DBT-ACES, we make use of the phenomenon by having requirements such as Career Activities and Work as Therapy. The consequence for not meeting a requirement is suspension from the DBT-ACES program until that requirement is met.

We are concerned that DBT-ACES could be a poor fit for you if your medical or physical difficulties prevent you from working. Please consider and discuss with your therapist, medical provider(s), and other people you respect whether meeting DBT-ACES contingencies is in your best interest. If this does not sound like the program for you, please work with your individual therapist to find a treatment that is a better fit or delay your application to DBT-ACES to when physical difficulties are resolved. If you want to pursue DBT-ACES now and think meeting these requirements will not negatively impact your medical or physical problems, please describe how DBT-ACES makes sense for you.

What will you do if medical or physical difficulties arise or get worse during DBT-ACES in order to both take care of yourself and continue in the program and meet program requirements? What strategies have worked in the past? How have you demonstrated you can and will use them?

Section IV: Addressing Treatment Interfering Behaviors

1. Describe the steps you are taking to be more effective in health care settings. Examples might include replacing your use of emergency rooms with outpatient experts, being more direct or honest with your provider, reducing the number of health care providers you consult, or following prescribed treatments more effectively. Be as specific as possible by using frequencies (e.g., 2 times per month) or percentages (e.g., 15% of the time).

2. Describe 3 situations or circumstances that tend to elicit therapy-interfering willfulness in you. Also describe the therapy-interfering behavior that sometimes results from your willfulness and an effective alternative that you use to be more effective in therapy. Examples might include: "When my therapist asks me to assess how I came to a problem behavior, I sometimes get willful and tell her how it wasn't my fault. Now I practice radical acceptance and participation." "When my group leader asks me to get back on topic, I sometimes get willful and shut down. Now I practice GIVE; following directions with an easy manner that validates the request."

When...

...I sometimes...

...a more effective strategy I have been able to use instead is...

When...

...I sometimes...

...a more effective strategy I have been able to use instead is...

When...

...I sometimes...

...a more effective strategy I have been able to use instead is...

5. Describe 3 additional problem behaviors which most interfere with your full participation in treatment (i.e., therapy-interfering behavior). Examples might include incomplete homework assignments, missing or late, being too emotionally dysregulated in session to learn effectively or not meeting productive behavior targets. For each one describe (a) the problem behavior, (b) what circumstances tend to trigger it, (c) the effective alternative strategy you are using instead, (d) the frequency of the problem behavior at the start of DBT, and (e) the frequency now.

(a) Problem behavior	(b) Circumstances that trigger	(c) Effective Alternative Strategy	(d) Freq at start	(e) Freq now

Thank you, you have completed the DBT-ACES client application and we appreciate your thoughtfulness and willingness.

DBT-ACES Individual Therapist Interim Performance Evaluation

Candidate: _____ Evaluation Completed by: _____

DBT Start date: _____ Date of this evaluation: _____

Purpose: The purpose of conducting this Performance Evaluation is to provide feedback to improve the quality of treatment and promote the candidate's development in preparation for DBT-ACES as well as in social and employment settings.

Performance Rating Categories: Consider the candidate's performance in each category and designate the level that most accurately describes his/her performance.

- **O** – Outstanding. The candidate consistently exceeds expectations requiring little or no coaching or feedback.
- **E** – Exceeds Expectation. Results clearly exceeds expectations on a regular basis. Performance is of high quality and is achieved on a consistent basis.
- **M** – Meets Expectation. Competent & dependable performance level. Meets the performance standards and objectives without constant follow-up/direction though intermittent coaching may be needed.
- **I** – Improvement Needed/Unsatisfactory. The candidate does not meet performance expectations on a regular basis and has difficulty following through with tasks. Requires regular and consistent follow-up and/or coaching.
- **N/A** – Not applicable or too soon to rate.

I. GENERAL FACTORS

1. ___ **Quality** – The extent to which homework, diary cards, assignments and work is completed thoroughly and correctly. Is clear, prepared, and ready to participate. Challenges and pushes self in areas in target areas. Shows a strong desire to learn and helpful in modeling and teaching others.

Specific Examples/Comments:

2. ___ **Independence/Reliability** - Ability to work independently with little or no direction, ability to complete tasks, treatment recommendations, and homework without prompting in a consistent and regular manner with consistent and regular follow through. Minimal outside coaching is needed and able to manage difficulties between sessions on own using skills they have learned

Specific Examples/Comments:

3. ___ **DBT Knowledge** - Possesses and demonstrates a thorough understanding and working knowledge of all components of DBT skills; including problem solving, reducing barriers to effective behaviors, efficient follow through, ability to recite emotion regulation, distress tolerance, mindfulness and interpersonal effectiveness skills with minimal prompting and shows consistent willingness and ability to generalize relevant DBT skills to necessary environments as needed in treatment, with friends and family, and across relevant social and public contexts.

Specific Examples/Comments:

4. ___ **Interpersonal Relationships / Validation/ GIVE Skills** – The extent to which the candidate is able to work and communicate well with therapists, group leaders and participants, friends, family, and others in their environment. Able to communicate effectively using active listening, validation and compromise, while refraining from threats, judgments and overly focusing on what they deem fair or unfair. Shows consistent ability to validate others even when they disagree and refrains from criticizing and complaining in most situations.

Specific Examples/Comments:

5. ___ **Communication Verbal and Written** – The extent to which the candidate demonstrates clear and effective communication (includes listening, nonverbal communication and body language) in individual and group settings across multiple contexts. Is able to make clear direct requests using DEAR MAN, describing the facts and expressing their opinions non-defensively, providing adequate reinforcement and initiating negotiation when needed.

Specific Examples/Comments:

6. ___ **Social Integration** – This measures the extent in which the candidate is successfully able to adapt to and structure their environment to promote effective behavior as well as personal and social achievement. This includes adapting behavior to the social cues of those around them, ignoring others’ dysfunctional behavior and building and shaping more responsibility and/or social relationships to encourage greater success.

Specific Examples/Comments:

7. ___ **Leadership**– The extent to which the candidate exhibits and models effective coping, interpersonal skills, and behavior. Is able to act out of wise mind, being skillful, acting with integrity, and confidence consistently being interpersonally effective in clinical, education, social and employment arenas. Is able to take initiative, frequently challenging oneself in target areas doing more than the minimum without being prompted.

Specific Examples/Comments:

8. ___ **Problem Identification**- Able to troubleshoot and foresee potential barriers and problems and develop ways to approach the situation and/or cope ahead with a proactive solution.

Specific Examples/Comments:

9. ___ **Problem solving and Decision Making** – Demonstrates ability to make sound and proper decisions by defining and identifying the problem, analyzing the causes, drawing on personal expertise and internal resources to be able to find adequate solution. When unable solve a problem, is able to demonstrate needed flexibility and remain on the path of effective behavior toward goals.

Specific Examples/Comments:

10. ___ **Mental Flexibility** – Extent to which the candidate is adaptable, takes direction, goes with the flow and can generate behavior in the service of being effective that may not be consistent with their own urges, thoughts or emotions.

Specific Examples/Comments:

1. ___ **Attendance and Timeliness** – The extent to which the candidate is punctual, returns from breaks on time and has an acceptable overall attendance record. Notifies people when running late or absent and cancels with more than 24 hours notice and is flexible with rescheduling. This also includes returning phone calls, emails, texts in a timely and efficient manner.

Attendance last 8 weeks:

Lateness last 8 weeks:

Specific Examples/Comments:

Additional comments:

Areas of strength and success:

Areas in need of improvement:

DBT-ACES Individual Therapist Performance Evaluation

Candidate: _____ Evaluation Completed by: _____

DBT Start date: _____ Date of this evaluation: _____

Purpose: The purpose of conducting this Performance Evaluation is to provide feedback to improve the quality of treatment and promote the candidate's development in preparation for DBT-ACES as well as in social and employment settings.

Performance Rating Categories: Consider the candidate's performance in each category and designate the level that most accurately describes his/her performance.

- **O** – Outstanding. The candidate consistently exceeds expectations requiring little or no coaching or feedback.
- **E** – Exceeds Expectation. Results clearly exceeds expectations on a regular basis. Performance is of high quality and is achieved on a consistent basis.
- **M** – Meets Expectation. Competent & dependable performance level. Meets the performance standards and objectives without constant follow-up/direction though intermittent coaching may be needed.
- **I** – Improvement Needed/Unsatisfactory. The candidate does not meet performance expectations on a regular basis and has difficulty following through with tasks. Requires regular and consistent follow-up and/or coaching.
- **N/A** – Not applicable or too soon to rate.

I. GENERAL FACTORS

11. ___ **Quality** – The extent to which homework, diary cards, assignments and work is completed thoroughly and correctly. Is clear, prepared, and ready to participate. Challenges and pushes self in areas in target areas. Shows a strong desire to learn and helpful in modeling and teaching others.

Specific Examples/Comments:

12. ___ **Independence/Reliability** - Ability to work independently with little or no direction, ability to complete tasks, treatment recommendations, and homework without prompting in a consistent and regular manner with consistent and regular follow through. Minimal outside coaching is needed and able to manage difficulties between sessions on own using skills they have learned

Specific Examples/Comments:

13. ___ **DBT Knowledge** - Possesses and demonstrates a thorough understanding and working knowledge of all components of DBT skills; including problem solving, reducing barriers to effective behaviors, efficient follow through, ability to recite emotion regulation, distress tolerance, mindfulness and interpersonal effectiveness skills with minimal prompting and shows consistent willingness and ability to generalize relevant DBT skills to necessary environments as needed in treatment, with friends and family, and across relevant social and public contexts.

Specific Examples/Comments:

14. ___ **Interpersonal Relationships / Validation/ GIVE Skills** – The extent to which the candidate is able to work and communicate well with therapists, group leaders and participants, friends, family, and others in their environment. Able to communicate effectively using active listening, validation and compromise, while refraining from threats, judgments and overly focusing on what they deem fair or unfair. Shows consistent ability to validate others even when they disagree and refrains from criticizing and complaining in most situations.

Specific Examples/Comments:

15. ___ **Communication Verbal and Written** – The extent to which the candidate demonstrates clear and effective communication (includes listening, nonverbal communication and body language) in individual and group settings across multiple contexts. Is able to make clear direct requests using DEAR MAN, describing the facts and expressing their opinions non-defensively, providing adequate reinforcement and initiating negotiation when needed.

Specific Examples/Comments:

16. ___ **Social Integration** – This measures the extent in which the candidate is successfully able to adapt to and structure their environment to promote effective behavior as well as personal and social achievement. This includes adapting behavior to the social cues of those around them, ignoring others’ dysfunctional behavior and building and shaping more responsibility and/or social relationships to encourage greater success.

Specific Examples/Comments:

17. ___ **Leadership**– The extent to which the candidate exhibits and models effective coping, interpersonal skills, and behavior. Is able to act out of wise mind, being skillful, acting with integrity, and confidence consistently being interpersonally effective in clinical, education, social and employment arenas. Is able to take initiative, frequently challenging oneself in target areas doing more than the minimum without being prompted.

Specific Examples/Comments:

18. ___ **Problem Identification**- Able to troubleshoot and foresee potential barriers and problems and develop ways to approach the situation and/or cope ahead with a proactive solution.

Specific Examples/Comments:

19. ___ **Problem solving and Decision Making** – Demonstrates ability to make sound and proper decisions by defining and identifying the problem, analyzing the causes, drawing on personal expertise and internal resources to be able to find adequate solution. When unable solve a problem, is able to demonstrate needed flexibility and remain on the path of effective behavior toward goals.

Specific Examples/Comments:

20. ___ **Mental Flexibility** – Extent to which the candidate is adaptable, takes direction, goes with the flow and can generate behavior in the service of being effective that may not be consistent with their own urges, thoughts or emotions.

Specific Examples/Comments:

2. ___ **Attendance and Timeliness** – The extent to which the candidate is punctual, returns from breaks on time and has an acceptable overall attendance record. Notifies people when running late or absent and cancels with more than 24 hours notice and is flexible with rescheduling. This also includes returning phone calls, emails, texts in a timely and efficient manner.

Attendance last 8 weeks:

Lateness last 8 weeks:

Specific Examples/Comments:

Additional comments:

Areas of strength and success:

Areas in need of improvement:

DBT-ACES Group Skills Leader Interim Performance Evaluation

Candidate: _____ Evaluation Completed by: _____

DBT Start date: _____ Date of this evaluation: _____

Purpose: The purpose of conducting this Performance Evaluation is to provide feedback to improve the quality of treatment and promote the candidate's development in preparation for DBT-ACES as well as in social and employment settings.

Performance Rating Categories: Consider the candidate's performance in each category and designate the level that most accurately describes his/her performance.

- **O** – Outstanding. The candidate consistently exceeds expectations requiring little or no coaching or feedback.
- **E** – Exceeds Expectation. Results clearly exceeds expectations on a regular basis. Performance is of high quality and is achieved on a consistent basis.
- **M** – Meets Expectation. Competent & dependable performance level. Meets the performance standards and objectives without constant follow-up/direction though intermittent coaching may be needed.
- **I** – Improvement Needed/Unsatisfactory. The candidate does not meet performance expectations on a regular basis and has difficulty following through with tasks. Requires regular and consistent follow-up and/or coaching.
- **N/A** – Not applicable or too soon to rate.

I. GENERAL FACTORS

21. ___ **Quality** – The extent to which homework, diary cards, assignments and work is completed thoroughly and correctly. Is clear, prepared, and ready to participate. Challenges and pushes self in areas in target areas. Shows a strong desire to learn and helpful in modeling and teaching others.

Specific Examples/Comments:

22. ____ **Independence/Reliability** - Ability to work independently with little or no direction, ability to complete tasks, treatment recommendations, and homework without prompting in a consistent and regular manner with consistent and regular follow through. Minimal outside coaching is needed and able to manage difficulties between sessions on own using skills they have learned

Specific Examples/Comments:

23. ____ **DBT Knowledge** - Possesses and demonstrates a thorough understanding and working knowledge of all components of DBT skills; including problem solving, reducing barriers to effective behaviors, efficient follow through, ability to recite emotion regulation, distress tolerance, mindfulness and interpersonal effectiveness skills with minimal prompting and shows consistent willingness and ability to generalize relevant DBT skills to necessary environments as needed in treatment, with friends and family, and across relevant social and public contexts.

Specific Examples/Comments:

24. ____ **Interpersonal Relationships / Validation/ GIVE Skills** – The extent to which the candidate is able to work and communicate well with therapists, group leaders and participants, friends, family, and others in their environment. Able to communicate effectively using active listening, validation and compromise, while refraining from threats, judgments and overly focusing on what they deem fair or unfair. Shows consistent ability to validate others even when they disagree and refrains from criticizing and complaining in most situations.

Specific Examples/Comments:

25. ____ **Communication Verbal and Written** – The extent to which the candidate demonstrates clear and effective communication (includes listening, nonverbal communication and body language) in individual and group settings across multiple contexts. Is able to make clear direct requests using DEAR MAN, describing the facts and expressing their opinions non-defensively, providing adequate reinforcement and initiating negotiation when needed.

Specific Examples/Comments:

26. ___ **Social Integration** – This measures the extent in which the candidate is successfully able to adapt to and structure their environment to promote effective behavior as well as personal and social achievement. This includes adapting behavior to the social cues of those around them, ignoring others’ dysfunctional behavior and building and shaping more responsibility and/or social relationships to encourage greater success.

Specific Examples/Comments:

27. ___ **Leadership**– The extent to which the candidate exhibits and models effective coping, interpersonal skills, and behavior. Is able to act out of wise mind, being skillful, acting with integrity, and confidence consistently being interpersonally effective in clinical, education, social and employment arenas. Is able to take initiative, frequently challenging oneself in target areas doing more than the minimum without being prompted.

Specific Examples/Comments:

28. ___ **Problem Identification**- Able to troubleshoot and foresee potential barriers and problems and develop ways to approach the situation and/or cope ahead with a proactive solution.

Specific Examples/Comments:

29. ___ **Problem solving and Decision Making** – Demonstrates ability to make sound and proper decisions by defining and identifying the problem, analyzing the causes, drawing on personal expertise and internal resources to be able to find adequate solution. When unable solve a problem, is able to demonstrate needed flexibility and remain on the path of effective behavior toward goals.

Specific Examples/Comments:

30. ___ **Mental Flexibility** – Extent to which the candidate is adaptable, takes direction, goes with the flow and can generate behavior in the service of being effective that may not be consistent with their own urges, thoughts or emotions.

Specific Examples/Comments:

3. ___ **Attendance and Timeliness** – The extent to which the candidate is punctual, returns from breaks on time and has an acceptable overall attendance record. Notifies people when running late or absent and cancels with more than 24 hours notice and is flexible with rescheduling. This also includes returning phone calls, emails, texts in a timely and efficient manner.

Attendance last 8 weeks:

Lateness last 8 weeks:

Specific Examples/Comments:

Additional comments:

Areas of strength and success:

Areas in need of improvement:

DBT-ACES Group Skills Leader Performance Evaluation

Candidate: _____ Evaluation Completed by: _____

DBT Start date: _____ Date of this evaluation: _____

Purpose: The purpose of conducting this Performance Evaluation is to provide feedback to improve the quality of treatment and promote the candidate's development in preparation for DBT-ACES as well as in social and employment settings.

Performance Rating Categories: Consider the candidate's performance in each category and designate the level that most accurately describes his/her performance.

- **O** – Outstanding. The candidate consistently exceeds expectations requiring little or no coaching or feedback.
- **E** – Exceeds Expectation. Results clearly exceeds expectations on a regular basis. Performance is of high quality and is achieved on a consistent basis.
- **M** – Meets Expectation. Competent & dependable performance level. Meets the performance standards and objectives without constant follow-up/direction though intermittent coaching may be needed.
- **I** – Improvement Needed/Unsatisfactory. The candidate does not meet performance expectations on a regular basis and has difficulty following through with tasks. Requires regular and consistent follow-up and/or coaching.
- **N/A** – Not applicable or too soon to rate.

I. GENERAL FACTORS

31. ___ **Quality** – The extent to which homework, diary cards, assignments and work is completed thoroughly and correctly. Is clear, prepared, and ready to participate. Challenges and pushes self in areas in target areas. Shows a strong desire to learn and helpful in modeling and teaching others.

Specific Examples/Comments:

32. ____ **Independence/Reliability** - Ability to work independently with little or no direction, ability to complete tasks, treatment recommendations, and homework without prompting in a consistent and regular manner with consistent and regular follow through. Minimal outside coaching is needed and able to manage difficulties between sessions on own using skills they have learned

Specific Examples/Comments:

33. ____ **DBT Knowledge** - Possesses and demonstrates a thorough understanding and working knowledge of all components of DBT skills; including problem solving, reducing barriers to effective behaviors, efficient follow through, ability to recite emotion regulation, distress tolerance, mindfulness and interpersonal effectiveness skills with minimal prompting and shows consistent willingness and ability to generalize relevant DBT skills to necessary environments as needed in treatment, with friends and family, and across relevant social and public contexts.

Specific Examples/Comments:

34. ____ **Interpersonal Relationships / Validation/ GIVE Skills** – The extent to which the candidate is able to work and communicate well with therapists, group leaders and participants, friends, family, and others in their environment. Able to communicate effectively using active listening, validation and compromise, while refraining from threats, judgments and overly focusing on what they deem fair or unfair. Shows consistent ability to validate others even when they disagree and refrains from criticizing and complaining in most situations.

Specific Examples/Comments:

35. ____ **Communication Verbal and Written** – The extent to which the candidate demonstrates clear and effective communication (includes listening, nonverbal communication and body language) in individual and group settings across multiple contexts. Is able to make clear direct requests using DEAR MAN, describing the facts and expressing their opinions non-defensively, providing adequate reinforcement and initiating negotiation when needed.

Specific Examples/Comments:

36. ___ **Social Integration** – This measures the extent in which the candidate is successfully able to adapt to and structure their environment to promote effective behavior as well as personal and social achievement. This includes adapting behavior to the social cues of those around them, ignoring others’ dysfunctional behavior and building and shaping more responsibility and/or social relationships to encourage greater success.

Specific Examples/Comments:

37. ___ **Leadership**– The extent to which the candidate exhibits and models effective coping, interpersonal skills, and behavior. Is able to act out of wise mind, being skillful, acting with integrity, and confidence consistently being interpersonally effective in clinical, education, social and employment arenas. Is able to take initiative, frequently challenging oneself in target areas doing more than the minimum without being prompted.

Specific Examples/Comments:

38. ___ **Problem Identification**- Able to troubleshoot and foresee potential barriers and problems and develop ways to approach the situation and/or cope ahead with a proactive solution.

Specific Examples/Comments:

39. ___ **Problem solving and Decision Making** – Demonstrates ability to make sound and proper decisions by defining and identifying the problem, analyzing the causes, drawing on personal expertise and internal resources to be able to find adequate solution. When unable solve a problem, is able to demonstrate needed flexibility and remain on the path of effective behavior toward goals.

Specific Examples/Comments:

40. ___ **Mental Flexibility** – Extent to which the candidate is adaptable, takes direction, goes with the flow and can generate behavior in the service of being effective that may not be consistent with their own urges, thoughts or emotions.

Specific Examples/Comments:

4. ___ **Attendance and Timeliness** – The extent to which the candidate is punctual, returns from breaks on time and has an acceptable overall attendance record. Notifies people when running late or absent and cancels with more than 24 hours notice and is flexible with rescheduling. This also includes returning phone calls, emails, texts in a timely and efficient manner.

Attendance last 8 weeks:

Lateness last 8 weeks:

Specific Examples/Comments:

Additional comments:

Areas of strength and success:

Areas in need of improvement: