**CBH Diploma Level 4 Assessment Questions**

General Notes

## Format

Responses should be 400-600 words. Detailed references are not required because the emphasis is on the student's own reflection and common sense solutions to everyday problems in clinical practice, etc. However, where texts are cited references should be given in Harvard style at the end of the question.

Generally, students should be showing evidence of specific knowledge and skills at this level and some analysis. They should therefore be encouraged to go beyond simply "listing" information, and instead to explain, describe and summarise with some analysis of different ideas or techniques, and think through their more subtle implications in different contexts. They should try to spot exceptions to rules and ways of dealing with potential problems associated with certain situations or techniques, etc. Quotations are the words of another person and cannot contribute much to the students' mark so given the word-limit, they should be encouraged to paraphrase ("put things in your own words") to show comprehension rather than including direct quotations.

The notes below give examples of typical points to be looked for and some "musts" that are required for a minimum pass mark (6/10). This is not a prescriptive process and markers should use their discretion when marking, taking into account the students paper overall. If a student clearly understands a point as evidenced in one or more of their answers but fails to mention a specific point in one particular question the marker should reference this to explain why they have passed a question, even in the absence of that specific point in the question they’re marking, referring them to other questions and feedback. The grading table is below, the mark and narrative should be included on the marked paper i.e. 7 / 10 Sound Answer. Half marks should not be used.

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| Fail Outcome | | | Pass Outcome | | | | |
| 0 – 1  Extremely Poor | 2 – 3  Very poor | 4 – 5  Poor | 6  Pass | 7  Sound  Answer | 8  Good | 9  Very good | 10  Excellent |
| Irrelevant or very seriously flawed answer.  No answer given. | Seriously incomplete  Major flaws. Several significant omissions or errors. | Some significant omissions  or errors. | Evidence of evaluation and analysis  Some omissions or errors | Evidence of evaluation and analysis  Some minor  omissions or errors. | Evidence of evaluation and analysis.  Few minor omissions or errors | Clear evidence of evaluation, analysis  and reflection | Very clear evidence of evaluation, analysis and reflection.  Complete answer |

National Occupational Standards Unit 1: Assess Client’s Needs

* 1. **a) Describe the factors that determine whether a client is suitable for hypnotherapy in terms of their goals, personal circumstances, etc. b) Provide *three* examples of unsuitable clients or requests (*other* *than* common contra-indications).**

NB: This question is distinguished from psychiatric contra-indications to treatment, which falls under another NOS heading.

**1.2 a) What did you learn about interviewing and assessing clients from the initial consultation classroom exercise? B) Reviewing your documentation, identify and describe *five* key aspects of the initial consultation.**

**1.3 a) Outline the role of rapport *and* the working alliance in therapy, b) factors that contribute to its development and c) factors that might undermine or interfere with the working alliance. d) Reflect on your own ability to cultivate a therapeutic alliance. e) Outline your understanding of a rupture and f) outline how you might handle any ruptures or problems?**

**1.4 Outline the pros and cons of using different tests / convincers to assess your client’s hypnotic responsiveness in a therapy session. b) Identify and describe three different suggestion tests to assess hypnotic responsiveness in a therapy session.**

**1.5 Hypnotic Skills Training, to teach clients about hypnosis and to teach them self-hypnosis is an important aspect of CBH.  a) Summarise your understanding of Hypnotic Skills Training approaches and methods and b) discuss how you intend to use these to facilitate your client's responsiveness to hypnotic suggestion.**

**1.6 a) Outline the respective roles and responsibilities of therapist and client in successful hypnotherapy. b) Provide an example of how you would describe these roles to the client and c) explain the rationale for hypnosis *and* suggestion to them.**

## National Occupational Standards Unit 2: Conduct Hypnotherapy Treatment

**2.1 a) Reviewing your feedback forms from classroom practical sessions, describe the role of hypnotic induction, deepening and emerging techniques and b) describe *three* different induction techniques and *three* deepening techniques used in hypnotherapy.**

**2.2 a) Reviewing your classroom practical forms, summarise what you have learned about the range of techniques and strategies used to address different client presenting problems in hypnotherapy.  b) Give one example of a client presenting problem and c) the methods you would use to treat them.**

## National Occupational Standards Unit 3: Teach Clients Self-Help

**3.1 As part of your treatment plan you elect to teach your client self-hypnosis. a) How would you approach this and b) describe which techniques you could use? c) How would you support your client to learn and practice**

**3.2 a) What did you learn about assigning behavioural tasks to clients? b) Provide at least  *two* examples of situations where you would assign different types of behavioural homework to clients between sessions?**

**3.3 a) What did you learn about assigning cognitive ("thinking") tasks to clients? b) Provide at least  *two* examples of situations where you would assign different types of cognitive homework to clients between sessions.**

## National Occupational Standards Unit 4: Professional and Ethical Issues

**4.1 Read the GHR code of ethics. a) What relevance does this document have for your practice of hypnotherapy? b) Outline the requirements of clause 2 and what this means to your practice and c) outline *two* further clauses and your understanding of what they mean to your practice**

**4.2 a) Describe those issues which fall within the basic sphere of competence of a hypnotherapist and b) outline an exception, a case that you would consider outside your sphere of competence**

**4.3 a) Explain the role of reflective practice in hypnotherapy. b) How would you reflect on the effectiveness of your approach with individual clients?**

**4.4 a) What is clinical supervision? b) What are the different forms it can take? c) Explain exactly what obligations you have to a professional body, such as GHR, in terms of supervision.**

**4.5 a) Summarise the role of client confidentiality in hypnotherapy. b) What limitations or exceptions apply to confidentiality?**

**4.6 a) Summarise the main laws which affect the practice of hypnotherapy. b) Explain your duty of care and c) the role of informed consent in treatment.**

**4.7 a) Outline the risks associated with false memory syndrome and spontaneous or deliberate “abreaction” in hypnotherapy. b) How would you reduce those risks or manage their consequences. c) outline the college’s position on the use of regression in therapy, d) What further risks and contra-indications are associated with hypnotherapy in general?**

## National Occupational Standards Unit 5: Apply Theory to Hypnotherapy

**5.1 a) Describe these *four* approaches to hypnotherapy; cognitive, behavioural, Ericksonian and hypno-analytic. b) Describe one specific therapeutic techniques used in cognitive-behavioural hypnotherapy.**

**5.2 a) Explain the difference between neurosis and psychosis and b) why this is relevant to hypnotherapy. c) Describe the major categories of anxiety disorder.**

**5.3 a) Explain the difference between state and nonstate theories of hypnosis and b) Explain what this means for effective hypnotherapy. c) Provide an account of the factors emphasised in nonstate models.**

**5.4 a) Outline the role of evidence-based practice in hypnotherapy. b) How do you propose to stay up to date with this evidence? C) What sources of evidence do you plan to draw upon in your practice and why?**

**5.5 a) Summarise he typical “rules of suggestion” *and* b) other factors contributing to effective use of suggestion. c) Explain the different forms which suggestion can take.**

**5.6 a) Explain the rationale, function, and application of the traditional hypnotic eye-fixation induction.**

**5.7 a) Discuss and outline the historical relationship between hypnotism and mesmerism. b) How does this relate to modern hypnotherapy?**

**5.8 Describe and discuss some of the common misconceptions clients may have about hypnosis. b) provide 2 examples and how you would respond to these**

Verbs

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| Describe | Provide a broad range of detailed information about the subject or item in a logical way. |
| Identify | Apply an in-depth knowledge to give the main points accurately. |
| Outline | Identify or describe the main points. |
| Summarise | Give the main ideas or facts in a concise way to develop key issues. |
| Discuss | Write a detailed account which includes contrasting perspectives. |
| Explain | Apply reasoning to account for how something is or to show understanding of underpinning concepts. Responses could include examples to support these reasons. |