

## DIALOG+ Adherence Scale (for DIALOG+ manual)

The DIALOG+ adherence scale is composed of 16 items and has been developed in order to test adherence to protocol and treatment distinctiveness. Most of its items assess clinician behaviours specific to the administration of the DIALOG+ procedure (e.g. selection of domains for further discussion, the four-step approach). The total score range is 0-28.

Variable name	Variable	Score
<i>Satisfaction</i>	<b>1. How many domains does the client rate his/her satisfaction on?</b>	
	0 – no items are rated	
	1 – more than three items are rated	
	2 – more than nine items are rated	
<i>Additional help</i>	<b>2. Does the clinician ask if additional help is needed in the domains?</b>	
	0 – clinician does not ask in any domains	
	1 – clinician asks in at least three domains	
	2 – clinician asks in at least nine domains	
<i>Use of iPad</i>	<b>3. Does the clinician share the iPad with the patient?</b>	
	0 – clinician and patient do not share the iPad	
	1 – clinician and patient share the iPad some of the time	
	2- clinician and patient share the iPad most of the time	
<i>Comparison</i>	<b>4. Does the clinician compare current ratings with a previous session?</b>	
	0 – clinician does not compare ratings	
	1 – clinician compares some of the ratings with previous ones	
<i>Positive</i>	<b>5. Does the clinician use positive (a score of 5 or higher) or improved scores to initiate the review of ratings?</b>	
	0 – clinician does not mention that the patient has any positive scores <b>or</b> that any scores have improved in the current or previous session	
	2 – clinician mentions positive scores or improved scores and makes a positive comment about current/previous scores including: positive reinforcements, questions about how to continue.	
<i>Special attention to mental health</i>	<b>6. Does the clinician ask whether the patient feels distressed or concerned by any symptoms or experiences associated with their mental health problem?</b>	

	0 – clinician does not explicitly ask	
	1 – clinician asks the patient about their distress/concern with respect to their mental health	
<i>Number of domains</i>	<b>7. How many domains does the clinician select to review?</b>	
	0 – clinician chooses more than three domains to discuss initially	
	1 – clinician chooses at least one domain to review (they may choose more than one, or come back to choose another during the session)	
<i>Patient involvement</i>	<b>8. Does the clinician involve the patient in selecting which domains to discuss?</b>	
	<ul style="list-style-type: none"> <li>This applies to both domains selected alongside the rating scale completion, as well as the selecting of domains after the completion of the rating scale.</li> </ul>	
	0 - clinician does not invite the patient to discuss which domains to choose	
	1 – clinician and patient decide which domains to review during the rating of the satisfaction scale	
	2- clinician and patient discuss domains to review together after completion of the satisfaction scale	
<i>Selection of domains</i>	<b>9. Are these criteria used to select the domains?</b>	
	<ul style="list-style-type: none"> <li>The satisfaction is below 4</li> <li>Additional help is requested</li> <li>Mental health – patient is concerned/distressed</li> <li>If none of these criteria are met domains with a score of at least 4, or scores deteriorated since the last meeting, are selected.</li> </ul>	
	0 – clinician does not appear to use any of the criteria to select the domains	
	1 – clinician seems to apply some criteria to select domains, but is not systematic	
	2 – clinician systematically selects the domains using the criteria	
You will now rate the four-step approach (questions 10-16). Please use the supplement to record ratings for all domains discussed. Record here the highest scoring domain.		<b>Domain rated:</b>
<i>Step 1: Understanding</i>	<b>10. Does the clinician explore negative aspects (may include reasons for dissatisfaction/concern) and positive aspects (may include existing strengths, coping strategies) of the current situation in the chosen domain?</b>	
	0 – clinician does not ask or patient does not offer the reasons for either negatives or positives of the current situation	
	1 – clinician and patient discuss negative <b>or</b> positives aspects of the current situation	
	2 – clinician and patient discuss <b>both</b> negatives <b>and</b> positives of the current situation	

<p><i>Step 2: Looking forward</i></p>	<p><b>11. Does the clinician ask the patient to consider desired improvements to the current situation in the chosen domain? Techniques for doing this may include:</b></p> <ul style="list-style-type: none"> <li>• Encouraging the patient to describe an improvement in positive terms and not as the absence of a problem? For example “<i>I would finally have the energy to get a part time job</i>”, rather than “<i>I would not feel as tired all the time.</i>”</li> <li>• Asking about the ‘best case scenario’ or asking them to imagine what changes they would like to see</li> <li>• Asking what immediate, small changes that the patient would like to achieve</li> <li>• Asking the patient to describe the specific signs/behaviours indicating a desired improvement</li> </ul>
	<p>0 – clinician does not ask about or the patient does not offer improvements to the current situation</p> <p>1 – clinician and patient discuss some information about improvements to the current situation. The clinician may use only one or two techniques for finding out what the patient would like to improve</p> <p>2 - clinician and patient discuss a number of ways there may be improvements to the current situation. The clinician may use three or more techniques to find out about improvements to the situation</p>
<p><i>Step 3: Exploring options</i></p>	<p><b>12. Does the clinician encourage the patient to consider all possible options that could be pursued to achieve the changes that they would like in the chosen domain? This may include the following parties:</b></p> <ul style="list-style-type: none"> <li>• Patient themselves</li> <li>• The clinician or service</li> <li>• Other people</li> </ul>
	<p>0 – clinician does not ask the patient to list any options that could be pursued by any party</p> <p>1 – clinician asks the patient what options can be pursued by at least one party</p> <p>2 – clinician asks the patient what options can be pursued by all 3 parties (patient <b>and</b> clinician/service <b>and</b> other people)</p>
<p><i>Step 4: Agreeing on actions</i></p>	<p><b>13. Does the clinician agree and document the action(s) to be taken and who will take action in the chosen domain? Note that either the patient or the clinician may take the lead in suggestions for action.</b></p>
	<p>0 – neither the clinician nor the patient summarise and/or document any suggestions for action in the chosen domain</p> <p>1 –clinician and/or patient discuss what action(s) will be taken in the chosen domain, who will take action and this is summarised verbally OR documented</p> <p>2 –clinician and/or patient agree on what action(s) will be taken in the chosen domain, who will take action and this is summarised AND documented by the clinician</p>
<p><i>4 step procedure order</i></p>	<p><b>14. Does the clinician follow the order of the four-step approach as specified in the treatment manual in the chosen domain (1. Understanding, 2. Looking forward, 3. Exploring options, 4. Agreeing on actions)?</b></p>

	0 – clinician does not follow the correct order in the chosen domain	
	1 – clinician follows the correct order in the chosen domain	
<i>Recording of action items</i>	<b>15. Does the clinician only record action items once all four steps have been completed?</b>	
	0 – clinician is typing 'action items' throughout the four-step discussion	
	1 – clinician is typing 'action items' from step-3 'exploring options' onwards	
	2 – clinician only records 'action items' after the four-step discussion	
<i>Appropriate action items</i>	<b>16. Does the clinician record appropriate action items?</b>	
	0 – clinician does not record any defined actions	
	1 – clinician records some defined actions, but also 'understanding' statements/notes	
	2 – clinician consistently records clear, brief and defined actions	

	Total
DIALOG procedure (items 1-9. Max score 15)	
Four-step procedure (items 10-16. Max score 13)	
Max total 28	