What are the 5 Components of a Comprehensive DBT Service?

Your programme must meet all five of these functions:

1. **Structure the environment to promote clients’ skilful behaviour**
   - In a Standard Outpatient Service this is done at an organisational level and via family or marital interventions.

2. **Ensure clients have extra help to generalise skills to their natural environment**
   - In a Standard Outpatient Service this is done with out-of-hours telephone coaching from the primary therapist.

3. **Enhance clients’ capabilities by formally teaching them skills**
   - Enhance therapists’ capability & motivation in a Consult Group, in a Standard Outpatient Service this is done in a weekly skills training group.

4. **Improve clients’ motivation & reduce factors impeding progress**
   - In a Standard Outpatient Service this is done on an organisational level and via family or marital interventions.

5. **Enhance therapists’ capability & motivation in a Consult Group**
   - In a Standard Outpatient Service this is done with out-of-hours telephone coaching from the primary therapist.

In DBT, a community of therapists treat a community of clients, and so the Therapists’ Consult Group is at the heart of your DBT programme; if you do not attend a regular consult group, you are not doing DBT; however, you may have to be creative about how and where your group meets, for example using video-conferencing or alternating venues.

There are many challenges to meeting all five functions if your setting varies from the standard out-patient service. You may have to change the methods by which some of the functions are met, but you must be able to identify how they are each being delivered.

If you are in a specialist area, it may be helpful to confer with more established DBT teams in your specific field, for example in acute in-patient or forensic settings. British Isles DBT Training can help by putting you in contact with others in your speciality.