

Behavioral Rehearsal Guidelines

Psychoeducation: Assessment Feedback & Introducing TF-CBT

Page 1 of 2



For clinicians about to cover Psychoeducation, you will need to decide on focus: **caregiver or child session**. Choose based on either a) your experience with the clinician's skill or b) clinician's thoughts about which would be most helpful to practice in advance of the next session.

- Separate meetings are recommended so that level information can be tailored; child/parent can talk freely.

Remember approximately 5-10 minutes. Do not review the goals of the behavioral rehearsal task with the clinician. This is meant to provide an estimate of clinician fidelity for this component. Do not interrupt the therapists rehearsing to provide feedback. After the rehearsal, provide feedback on both strengths and needed improvements. If the therapist rehearses a 2nd/3rd time, only rate the first rehearsal.

Therapist prompt: *Please show me how you would provide Psychoeducation to [caregiver OR client]. Include feedback on the trauma exposure and symptoms assessment and describe TF-CBT.*

EXPECTATIONS

- * **Summarizes assessment results**
 - Explains posttraumatic stress (PTS) feelings, thoughts, behaviors
 - Explains **child's PTS high, would benefit from treatment**
 - **Allows for client questions, agreement/disagreement**
- * **Normalizes** the child's experience
 - Others have experienced similar experiences, feelings and thoughts
- * **Highlights child/family strengths** to inspire hope
 - e.g., caregiver support predicts best outcomes for kids; evidence of child's strengths even now
- * **Gives description of treatment**, may include:
 - Treatment duration (12-20 sessions)
 - TF-CBT Components (described in lay language)
 - Expectations: Caregiver participation; skill building; out-of-session practice
 - Connects treatment to identified difficulties/client goals
 - Research effectiveness evidence — 80% kids get better
- * **Tone is confident, positive and hopeful**
 - Mentions/names the trauma
 - Does not lower voice when discussing the trauma
 - Clearly conveys hope

Given the time you had for the role play, how well did the clinician do on the main elements*?

0 Extremely Poor | 1 Poor | 2 Fair | 3 Adequate | 4 Good | 5 Excellent | 6 Perfect

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Page 2 of 2



STEPS

SUPERVISION TO ENHANCE
PRACTICE STUDY | WASHINGTON

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FEEDBACK	
Strengths (Adherence & Skill)	
Areas to Improve (Adherence & Skill)	

Other topics or common challenges you might want to discuss with the clinician...

- Feedback on any other measures besides the CPSS?
- Feedback to other parties (child/caregiver/noncustodial parent/etc.) not included in the behavior rehearsal?
- How might caregiver respond to this information?
 - ♦ How might you respond to a caregiver who does not believe the trauma occurred?
- How do you get agreement on treating trauma exposure-related symptoms as the main goal, TF-CBT as the plan?
 - ♦ Will help with handling crises of the week later and provides a foundation to come back to if homework noncompliance