

# Psychoeducation: Assessment Feedback and Introducing TF-CBT



**STEPS**  
SUPERVISION TO ENHANCE  
PRACTICE STUDY | WASHINGTON

## BEHAVIORAL REHEARSAL GUIDELINES

Shannon Dorsey, PhD | University of Washington | dorsey2@uw.edu

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.

### CHOICE

For clinicians about to cover Psychoeducation, you will need to decide whether you want to practice a **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.

- Meeting with children and parents separately is recommended so that level of information can be tailored and child/parent can talk freely.

### PROMPT FOR THERAPIST

Please show me how you would provide feedback on the trauma exposure and symptoms assessment and describe TF-CBT.

### SUPERVISOR INSTRUCTIONS

None.

### EXPECTATIONS

- \* **Summarizes assessment results**
  - Explains posttraumatic stress (PTS) feelings, thoughts, behaviors
  - Explains **child's PTS is high, would benefit from treatment**
  - **Invites 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

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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