Myiche (Le noviman Couthern.edu The Cognitive Therapy Scale Session 2 and Beyond

Part I. Cognitive Therapy Structure
Part I. Cognitive Therapy Structure  13 14 1. Mood Check anxlety need to define Scale O-D  O Therapist did not perform a mood check. Be more intentional - this  O Therapist did a mood check that was vague or incomplete. And across as  2 Therapist did a mood check that was vague or incomplete. On by the way.  4 Therapist worked with the client to perform a mood check that was sufficient. (Mustuse a 1-
319 1. Mood Check anxiety release 120 more Intentional - this
2 Therapist did not perform a mood check. The respective of the across as
4 Therapist worked with the client to perform a mood check that was sufficient. (Must use a 1-
4 Therapist worked with the client to perform a mood check that was sufficient. (Must use a 1- 10 scale here)
Self 6 Therapist worked with client to perform a mood check that made a connection between the
feelings and a level of intensity.
O 2. Agenda Did not see tus.
O Therapist did not set agenda.
2 Therapist set agenda that was vague or incomplete.
4 Therapist worked with client to set a mutually satisfactory agenda that included specific target
problems (e.g., anxiety at work, dissatisfaction with marriage).
6 Therapist worked with client to set an appropriate agenda with target problems, suitable for
the available time. Established priorities and then followed agenda.
3 Update from previous session (focus should be on cognitions)  5 Chol O Therapist did not provide a bridge from the previous session.  Therapist provided a bridge that was vague or incomplete.  Therapist asked the client appropriate questions regarding the previous session and addressed the client's responses appropriately.  Therapist asked the client appropriately.
3 Update from previous session (focus should be on cognitions)
School Unerapist did not provide a bridge from the previous session.
A Therapist asked the client appropriate questions regarding the previous session and a large
time to 4 Inerapist asked the client appropriate questions regarding the previous session and addressed in a family the client's responses appropriately.
family the client's responses appropriately.  6 Therapist effectively asked questions of client's perception of the previous session and after
addressed the client's responses. The bridge furthered the client's understanding of the
therapeutic process.
4. Review Homework Thought record fell stress
スパウ U Therapist did not attempt to review the homework from the previous session with the client.
2 Therapist had significant difficulties reviewing homework or did so vaguely in a manner that
did not target specific cognitive/behavioral changes (e.g., did not ask client for progress on
mndontiff previously assigned homework, did not discuss behavioral assignments, adaptive statements)
* Y 4 I Nerdolst reviewed previous nomework and assigned "standard" cognitive therapy homework
generally relevant to issues dealt with in session. Homework was explained in sufficient detail.  6 Therapist reviewed previous homework by having the client read aloud the assignment from
6 Therapist reviewed previous homework by having the client read aloud the assignment from the previous session, used scaling questions to rate client's progress, reviewed any behavioral
assignments and checked for lessons learned, and discussed which assignments would be
helpful to continue during the coming week
A untime will a ship
3'45 5 Prioritizing the Agenda 13al amo . Octor Alice
0 Therapist did not attempt to prioritize the agenda.
2 Therapist summarized the agenda in a manner that was vague or incomplete.
4 Therapist worked with client to summarize the topics and collaboratively prioritize the agenda
assignments and checked for lessons learned, and discussed which assignments would be helpful to continue during the coming week.  3.45 5. Prioritizing the Agenda 13 almee learned.  O Therapist did not attempt to prioritize the agenda.  2 Therapist summarized the agenda in a manner that was vague or incomplete.  4 Therapist worked with client to summarize the topics and collaboratively prioritize the agenda items.  Clement in the summarize the topics, collaboratively prioritize the agenda items, appropriately move discussion items of less importance to a future session, and then.
depused 6 Therapist worked with client to summarize the topics, collaboratively prioritize the agenda
items, appropriately move discussion items of less importance to a future session, and then,

6:48-CBT	st definition-	Fortune Telle	NJ Company	
7.35 609.00	successfully followed the	e agenda throughout the session	on – at times helpfully guiding the	e client /
ام ا	back to the topics.	Ī	0:18-Mako you de	eli
Rewater	successfully followed the back to the topics.	· · · · · · · · · · · · · · · · · · ·	0:18-Make you fe Avoid The	5!
0621 3	6. Working on one problem	and teaching cognitive skills (W	orking with cognitive distortions	and .
$v_i \supset \mathcal{J}_{\mathcal{A}}$	automatic thoughts)			
1.53	O Therapist did not addres	s cognitive distortions/automa		
Tthomas	2 Therapist noticed cogniti	ve distortions, but did not effe		
If you do not brins	4 Therapist addressed cogi		ately offered a tool to the client	
Jan rade	to help with the distortion	aitive distortions in a way that	the client clearly understand	D-fortune
as then	and was able to make proc	ress about in the session	the client clearly understood C.  thought	10/100
you will	and was able to make prog	icas about in the session.	thought -	telling
not. 4	7. Collaboratively setting ho	mework 19.50	so it right then	ب پ
emide		ان من عن cognitive-behavioral technique:	s. Instead, used a case-managem	ent
J	approach or focused on	a case-management problem.	· ·	
MM	2 Therapist selected cognit	ive-behavioral techniques; hov	vever, the overall strategy for bri	nging
Diogram	about change either see	emed vague <i>or</i> did not seem pr	omising in helping the patient. O	R used
dynuch - 8		case-management problem.		
relieve 10-8	incorporated cognitive	conerent strategy for change to	hat showed reasonable promise therapeutic issue which was also	and .
215 (	touched on at the end		merapeutic issue which was also	e de la companya de l
what time of			incorporated the most appropri	ate o v
Jun haul Mez		chniques which he/she review		11C
the thoughts?		21:3/0	1. Ibcr-	
200	8. Providing a summary and	eliciting feedback 21,500	heedback- clied it hear	/ Stanger
5,00 olusicas	O Therapist did not summa	rize session or ask for feedback	« Clidy thear	- Summung
PhoPhects ?	Z Triciapist elicited sollle li	seapack from the client, but all	u not ask enough questions to be	esure
pularyou.	the client understood the t	nerapist's line of reasoning qui	ring the session <i>or</i> to ascertain w ed a mediocre summary of the se	hether
l'az li hest do			ed a mediocre summary of the se ent understood the therapist's lir	
102-West do			lient's reactions to the session. Ti	
is I andence	therapist adjusted his or he	er behavior in response to the f	eedback, when appropriate. Gav	e an
1:5U evidence to support	effective summary of the se	ession		
5:32	6 Therapist was especially a	adept at eliciting and respondir	ng to verbal and nonverbal feedb	ack
DITTO BALLYC	throughout the session and	f provided an effective summar	ry at end of session and elicited o	lient ~4
(3 Ch MANNEY )	feedback.	802-1011 Deneb	-allan't name c	t
ia ellect C	hang thought	1017 fell fru	end	
on (appear		(8, 1, 101, 1)	a. da Mattoria	usero.
Part II:	General Therapeutic Skills	1000, Can 40	ry at end or session and elicited of outdon't name co end ou do that for you so whole so back I how much she lac	295K
1)		Than (	s where so back i	-
<u>~1</u> :	1. Reconnection with the Clie	ent	how much she la	lieves
	U Therapist did not greet th	e client warmly or genuinely		
		out did not connect and adjust attunement with client at key ti	to client mood/emotional state	. Then,
•		consistent attunement with the		then
		Will till	Stopped- Whap it up-	alove Athe
			you gust	anapy
	•	2	Clop pact-	tru to
			S. Please	ity itup
			whaputup	100-
			νiλ1/1 lA.	W VUX

- 2. Understanding, listening, and empathy
  - O Therapist repeatedly failed to understand what the client explicitly said, thus consistently missing the point. Therapist demonstrated poor empathy skills.
  - 2 Therapist was usually able to reflect or rephrase what the client explicitly said, but repeatedly failed to respond to more subtle communication. Limited ability to listen and empathize.
  - 4 Therapist generally seemed to grasp the client's "internal reality" as reflected by both what the client explicitly said and what the client communicated in more subtle ways. Reflected both content and feelings empathetically in the session.
  - 6 Therapist seemed to understand the client's "internal reality" thoroughly and was adept at communicating this understanding through appropriate verbal and nonverbal responses to the client. Excellent listening and empathic skills.
- 3. Collaboration
  - 0 Therapist did not attempt to set up a collaboration with the client.
  - 2 Therapist attempted to collaborate with the client, but had difficulty *either* defining a problem that the client considered important *or* establishing rapport.
  - 4 Therapist was able to collaborate with the client, focus on a problem that both client and therapist considered important, and establish rapport.
  - 6 Collaboration seemed excellent; therapist encouraged client as much as possible to take an active role during the session so therapist and client could function as a "team."
- 4. Pacing and Efficient Use of Time
  - O Therapist made no attempt to structure therapy time. Session seemed aimless.
  - 2 Session had some direction, but the therapist had significant problems with structuring or pacing (too little structure, inflexible about structure, too slowly paced, too rapidly paced).
  - 4 Therapist was reasonably successful at using time efficiently. Therapist maintained appropriate control over flow of discussion and pacing.
  - 6 Therapist used time efficiently by tactfully limiting peripheral and unproductive discussion, and by pacing the session as rapidly as was appropriate for the client.
- 7 \_\_\_\_5. Professionalism
  - 0 Neither the setting nor the therapist appearance met a professional level standard
  - 2 Either the setting was not appropriate (noisy, not private, sitting at a table) or the therapist was not in professional attire.
  - 4 Both the setting and the therapist's appearance were appropriate for the session.
  - 6 The setting and the therapist provided/demonstrated a high degree of professional appearance.

Inviticed this several times—

You were animated! Try to be aware of

Saying UK, OK, OK so much! You have an

Saying UK, OK, OK so much! You have an

up beat presence which is nice—this was

a good practice run—tighten up the professionalism

a good practice run—tighten up the professionalism

a little—I think tweating a few thing

will help you make a select fund violeo.

## Part III. Overall Ratings and Comments

1. How would you rate the clinician overall in this session, as a cognitive therapist?

	0	1	2	3	4	5	6	
	Poor	Barely	Mediocre	Satisfactory	Good	Very Good	Excellent	
L	_,	Adequate						

2. Comments and Suggestions for Therapist's Improvement: fact to demonstrating of Muissa - this was a soud Start to demonstrating the skills for your funal video - Be sure to set the organian of your session. At 11:53 your dispersor near the beginning of your session. At 11:53 your dispersor of your session. At 11:53 your dispersor of your session. At 11:53 your dispersor of your session. At 10:53 your dispersor of the following outline to challenge the thought put the factor of the following outline to challenge the thought page to see how much she believes the thought now - hope fully the how much she believes the thought now - hope fully the how much she believes the for feedback, didn't the demonstrating though.

20-Minute Points Rubric

## Student Name:

Required Elements	Score of	Score	Score	Score	Did
65 points total available	4 or	of 3 = 4	of 2 = 3	of 1= 1	not
•	higher= 5				do = 0
1. Mood Check		4			
2. Agenda	-	1			0
3. Update from previous session	5	-			
4. Review Homework	5				
5. Prioritizing the Agenda	5				
<ol><li>Working on 2 problems and teaching cognitive skills</li></ol>		4			
7. Collaboratively setting homework	5				
8. Providing a summary and eliciting feedback			3	, , ,	
9. Reconnection with the Client	6				
10. Understanding, listening, and empathy	2				
11. Collaboration	15				
12. Pacing and Efficient Use of Time	5				
13. Professionalism	5				
Comments:					
Total score:					