Evaluation Sheet – Session Facilitation [CBT-R Session]			
	Time:		
	Number of Participants:		
Name: Designat			
Name: Designation			
	Designat	Time: Number of Participants: Designation:	

Standard Operating Procedure (SOP) of CBT-R Session			
	Facilitation Steps	Facilitator's Actions	Standard Time Allocation
1.	Check-in	a. Give greetings and introductory remarks for icebreaking	E main
		b. Explain which CBT sessions to review and the session proceeding today	5 min
(Re	peat the steps 2	-6 below for each CBT session to review)	
2.	Session Overview	c. Briefly review what has been learned previously in light of the session objectives	
3.	Text Review	d. Review the text content in an interactive manner with participants (but do not read aloud the whole texts)	
		e. Allow participants to ask questions	15 min (x 3 CBT
4.	Exercise Review	f. Review the exercise in an interactive manner with participants	sessions)*
5.	Discussion	g. Facilitate discussion on selected questions	
6.	Highlight	h. Reflect important points of the session	
7.	Summary	i. Summarize the content reviewed today	40
		j. Allow participants to ask questions, if any	10 min

^{*} Based on the assumption that three CBT sessions are reviewed. The time allocation will be adjusted if the number of CBT sessions to review is different.

Evaluation Standards		Evaluation* Score	Comments	
I.	CBT Content		l l	
1.	Accurate teaching	Give accurate information that is based on the literature rather than a belief system	3 2 1	
2.	Exploring high- risk behaviors	Adequately connect the session topic with high-risk or potential relapse situations and measures to avoid such situations	3 2 1	
3.	Exploring measurable behavior changes	Give concrete examples that lead to measurable behavior changes	3 2 1	
4.	Referencing other CBT sessions	Reference CBT topics from other sessions	3 2 1	
5.	Use of CBT terminology	Adequately explain and apply the CBT terminology used in the Patient's Workbook	3 2 1	
6.	Limited process commentary	Limit the application of process comments	3 2 1	
II.	Motivational Int	erview (MI) Facilitation Style		
7.	Adequate listening attitude	Face to the speaker, smile, and gently nod while a participant talks	3 2 1	
8.	Positive reinforcement and affirmations with empathy	Apply cheerleading, coaching, encouraging, and/or affirming styles with empathy	3 2 1	
9.	Eliciting participants' motivations to speak out	Elicit participants' motivations to speak out voluntarily during discussion instead of rotating or nominating speakers Note: Rotating or nominating speakers may be unavoidable in some groups, especially of participants mostly with a low educational background who are less talkative. However, it should be used as a last resort.	3 2 1	
10.	Reflective listening with empathy	Apply reflective listening with empathy (at least one reflection for every three questions)	3 2 1	
11.	Summarizing responses	Periodically summarize responses of participants	3 2 1	
12.	Using open-ended questions	Mostly use open-ended questions that require more than one to two words to answer	3 2 1	
13.	Limited self- disclosure of the facilitator	Limit referencing the facilitator's own experience	3 2 1	
14.	Non-authoritative attitude	Avoid showing an authoritative attitude toward participants or asking them to speak in an authoritative tone	3 2 1	
15.	No confrontation	Avoid attacking, harsh, disrespectful, and mean-spirited responses; just take no notice of, or give mild non-supportive remarks on, participants' inappropriate behavior/comments	3 2 1	
16.	No sarcasm	Avoid being rude, biting or cutting to participants	3 2 1	

^{*} Evaluation Score:

	Eval	uation Standards	Evaluation* Score	Comments
III.	Management of	Group Discussion		
17.		Direct all members to pay attention to other participants' talks during discussion instead of dropping their eyes on Patient's Workbook, and give opportunities to all the participants to speak evenly	3 2 1	
18.	Facilitating interactions between participants	Facilitate interactions between participants during discussion instead of sticking to bilateral communications between the facilitator and participants	3 2 1	
19.	Limited interruption of participants' talk	Allow participants to complete a sentence and avoid talking over them—however, respectfully control a lengthy talk in a manner that does not demotivate the speaker	3 2 1	
20.	Focusing on the discussion topic	Control discussion and do not allow it to deviate too much from the discussion topic Note: In particular, participants' talk on personal histories of drug use tends to be lengthy. They can share such stories to a certain extent, but the facilitator should adequately redirect the group to the discussion topic.	3 2 1	
IV.	Elements of CB	T Session		
21.	Use of Patient's Workbook	Make all the participants use the Patient's Workbook throughout the session	3 2 1	
22.	Text review	Explain digested content instead of reading the whole texts, giving opportunities to participants to share their understanding	3 2 1	
23.	Group wrap-up	Finish by highlighting important points and summarizing the content reviewed	3 2 1	
24.	Adherence to SOP	Largely adhere to the steps specified in the SOP	3 2 1	
V. Time Allocation				
25.	Session duration	Spend 60 minutes and do not finish earlier	3 2 1	

Overall comments and suggestions to the facilitator:	
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Signature of Evaluator:	Date:

^{*} Evaluation Score: