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| **Evaluation Sheet – Session Facilitation**  **[CBT-R Session]** | | | | | | | | Sheet ID:  **B-II** |
| 1. **Session Information** | | | | | | | | |
| Date: |  | | | Time: |  | | | |
| Facility: |  | | | | | | | |
| Session Numbers and Topics: | |  | | Number of Participants: | | |  | |
| 1. **Facilitator Information** | | | | | | | | |
| Name: |  | | Designation: | | |  | | |
| 1. **Evaluator Information** | | | | | | | | |
| Name: |  | | Designation | | |  | | |

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| **Standard Operating Procedure (SOP) of CBT-R Session** | | |
| **Facilitation Steps** | **Facilitator’s Actions** | **Standard Time Allocation** |
| 1. Check-in | 1. Give greetings and introductory remarks for icebreaking 2. Explain which CBT sessions to review and the session proceeding today | 5 min |
| (Repeat the steps 2–6 below for each CBT session to review) | | |
| 1. Session Overview | 1. Briefly review what has been learned previously in light of the session objectives | 15 min  (x 3 CBT sessions)\* |
| 1. Text Review | 1. Review the text content in an interactive manner with participants (but do not read aloud the whole texts) 2. Allow participants to ask questions |
| 1. Exercise Review | 1. Review the exercise in an interactive manner with participants |
| 1. Discussion | 1. Facilitate discussion on selected questions |
| 1. Highlight | 1. Reflect important points of the session |
|  | | |
| 1. Summary | 1. Summarize the content reviewed today 2. 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** |
| --- | --- | --- | --- |
| 1. **CBT Content** | | | |
| 1. Accurate teaching | Give accurate information that is based on the literature rather than a belief system | 3 2 1 |  |
| 1. 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 |  |
| 1. Exploring measurable behavior changes | Give concrete examples that lead to measurable behavior changes | 3 2 1 |  |
| 1. Referencing other CBT sessions | Reference CBT topics from other sessions | 3 2 1 |  |
| 1. Use of CBT terminology | Adequately explain and apply the CBT terminology used in the Patient’s Workbook | 3 2 1 |  |
| 1. Limited process commentary | Limit the application of process comments | 3 2 1 |  |
| 1. **Motivational Interview (MI) Facilitation Style** | | | |
| 1. Adequate listening attitude | Face to the speaker, smile, and gently nod while a participant talks | 3 2 1 |  |
| 1. Positive reinforcement and affirmations with empathy | Apply cheerleading, coaching, encouraging, and/or affirming styles with empathy | 3 2 1 |  |
| 1. 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 witha low educational background who are less talkative. However, it should be used as a last resort.* | 3 2 1 |  |
| 1. Reflective listening with empathy | Apply reflective listening with empathy (at least one reflection for every three questions) | 3 2 1 |  |
| 1. Summarizing responses | Periodically summarize responses of participants | 3 2 1 |  |
| 1. Using open-ended questions | Mostly use open-ended questions that require more than one to two words to answer | 3 2 1 |  |
| 1. Limited self-disclosure of the facilitator | Limit referencing the facilitator’s own experience | 3 2 1 |  |
| 1. Non-authoritative attitude | Avoid showing an authoritative attitude toward participants or asking them to speak in an authoritative tone | 3 2 1 |  |
| 1. 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 |  |
| 1. No sarcasm | Avoid being rude, biting or cutting to participants | 3 2 1 |  |
| 1. **Management of Group Discussion** | | | |
| 1. All members’ participation in discussion | 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 |  |
| 1. Facilitating interactions between participants | Facilitate interactions between participants during discussion instead of sticking to bilateral communications between the facilitator and participants | 3 2 1 |  |
| 1. 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 |  |
| 1. 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 |  |
| 1. **Elements of CBT Session** | | | |
| 1. Use of Patient’s Workbook | Make all the participants use the Patient’s Workbook throughout the session | 3 2 1 |  |
| 1. Text review | Explain digested content instead of reading the whole texts, giving opportunities to participants to share their understanding | 3 2 1 |  |
| 1. Group wrap-up | Finish by highlighting important points and summarizing the content reviewed | 3 2 1 |  |
| 1. Adherence to SOP | Largely adhere to the steps specified in the SOP | 3 2 1 |  |
| 1. **Time Allocation** | | | |
| 1. Session duration | Spend 60 minutes and do not finish earlier | 3 2 1 |  |

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| *Overall comments and suggestions to the facilitator:* |

*Signature of Evaluator: Date:*