**Emergency Management**

**Therapist Prompting List**

Initial Session

Client ID#: \_\_\_\_\_\_\_\_\_ Clinician: \_\_\_\_\_\_\_\_\_\_\_ Session #: \_\_\_\_\_\_\_\_\_\_\_ Session Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Materials Required:**

* Emergency Management & Safety Checklist

**Begin Time:** \_\_\_\_\_\_\_\_\_ am / pm

**Provide Rationale to the Client**

\_\_\_a. Families sometimes encounter domestic related emergencies that need immediate attention

\_\_\_b. Provide a few examples of home emergencies (e.g., eviction, physical fights, home hazards)

\_\_\_c. When emergencies occur, or are a threat to occur, it’s difficult to focus on other treatment goals

\_\_\_d. This intervention is aimed at preventing and ameliorating emergencies

\_\_\_e. State intervention has been successful w/ other clients

\_\_\_f. State why intervention is expected to be successful w/ client

\_\_\_g. Solicit & answer questions

**Complete and Review the Assurance of Emergency Management and Safety Checklist**

* Instruct Client to complete Assurance of Emergency Management and Safety Checklist
* ***If all items are marked “not present,” skip step “a” and complete “b” below:***
* ***If there are any items marked “present” or “may soon occur,” complete steps “a-b" below for current situation:***

\_\_\_a. At therapist discretion, discuss emergencies endorsed “present” or “may soon occur” that client would like to discuss

\_\_\_1. Attempt to briefly define the emergency.

* If the issue is not found to be an emergency, skip to next item marked “present” or “may soon occur” OR go to “b” below if no other items are marked “present” or “may soon occur.”
* If the issue is an emergency, complete the following steps:

\_\_\_a. Instruct/assist client in identifying 1st antecedent relevant to identifying the emergency.

***Note:*** Backwards chaining may be used to teach clients to recognize and target initial antecedents that may have occurred earlier in the response chain, thus acting to "prevent" future problems. Or, if immediate intervention is necessary, backward chaining is unnecessary, and the individual should initiate the trial by stating "stop!" without a cue and attempt to eliminate the problem (i.e., I'm sitting here in front of the therapist and I yell, Stop!").

\_\_\_b. Instruct/assist client in saying “Stop!” aloud forcefully.

\_\_\_c. Instruct/assist client in stating 1 negative consequence of emergency for self.

\_\_\_d. Instruct/assist client in stating 1 negative consequence for friends/loved ones.

\_\_\_e. Instruct/assist client in relaxation: 5-10 seconds of deep breathing and/or muscle relaxation.

\_\_\_f. Instruct/assist client in generating solutions to the emergency situation.

\_\_\_g. Instruct/assist client in evaluating the pros and cons of each solution.

\_\_\_h. Instruct/assist client in imaging doing one of the solutions.

\_\_\_i. Instruct/assist client in imagining telling a loved one about resolving the emergency.

\_\_\_j. Instruct/assist client in stating several positive consequences that might result from resolving the emergency.

\_\_\_2. Record solution(s) in client’s Primary Goals Worksheet.

\_\_\_b. At therapist’s discretion, select several items endorsed as “not present,” query and/or praise how situations were prevented.

* Query validity of items suspected to be present or soon to occur, but not endorsed, and intervene as necessary, consistent with steps for "a" above.
* If items marked “not present” are found to be soon to occur or present, complete step ‘a’ above.

|  |
| --- |
| **Client’s Assessment of Helpfulness of the Intervention*** 1. After stating client should not feel obligated to provide high scores, as an honest assessment helps better address client needs, solicit how helpful client thought intervention was using the following 7-point rating scale:

**7** = extremely helpful, **6** = very helpful, **5** = somewhat helpful, **4** = not sure, **3** = somewhat unhelpful, **2** = very unhelpful, **1** = extremely unhelpful  * **Record Client’s Rating Here:**\_\_\_\_\_\_
	1. Solicit how rating was derived, and methods of improving intervention in future.

**Therapist’s Rating of Client’s Compliance With Intervention*** + - * 1. Disclose therapist’s rating of client’s compliance using 7-point rating scale:

**7** = extremely compliant, **6** = very compliant, **5** = somewhat compliant, **4** = neutral, **3** = somewhat noncompliant, **2** = very noncompliant, **1** = extremely noncompliant * Factors that contribute to compliance ratings are:
	+ Attendance
	+ Participation and conduct in session
	+ Homework completion
	+ **Record Therapist’s Rating of Client’s Compliance Here:**\_\_\_\_\_\_
		- * 1. Disclose client’s compliance rating.
				2. Explain how rating was derived, and methods of improving performance in future.
 |

**End Time:** \_\_\_\_\_\_\_\_\_ am / pm

**Emergency Management**

**Therapist Prompting List**

Future Session

Client ID#: \_\_\_\_\_\_\_\_\_ Clinician: \_\_\_\_\_\_\_\_\_\_\_ Session #: \_\_\_\_\_\_\_\_\_\_\_ Session Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Materials Required:**

* Emergency Management & Safety Checklist
* Self-Control Rating Form

**Begin Time:** \_\_\_\_\_\_\_\_\_ am / pm

* Instruct Client to complete Assurance of Emergency Management and Safety Checklist
* ***If all items are marked “not present,” skip step “a” and complete “b” below:***
* ***If there are any items marked “present” or “may soon occur,” complete steps “a” & “ b" below for each emergency situation:***

\_\_\_a. Discuss emergencies endorsed “present” or “may soon occur” that client would like to eliminate.

\_\_\_1. Attempt to briefly define emergency.

* + - Complete following steps (all steps located in Self Control Rating Form).

\_\_\_a. Instruct/assist client in identifying 1st antecedent relevant to identifying the emergency.

***Note:*** Backwards chaining may be used to teach clients to recognize and target initial antecedents that may have occurred earlier in the response chain, thus acting to "prevent" future emergencies. Or, if immediate intervention is necessary, backward chaining is unnecessary, and the individual should initiate the trial by stating "stop!" without a cue and attempt to eliminate the problem (i.e., I'm sitting here in front of the therapist and I yell, Stop!").

\_\_\_b. Instruct/assist client in saying “Stop!” aloud forcefully.

\_\_\_c. Instruct/assist client in stating 1 negative consequence of emergency for self.

\_\_\_d. Instruct/assist client in stating 1 negative consequence for friends/loved ones.

\_\_\_e. Instruct/assist client in relaxation: 5-10 seconds of deep breathing and/or muscle relaxation.

\_\_\_f. Instruct/assist client in generating solutions to the emergency situation.

\_\_\_g. Instruct/assist client in evaluating the pros and cons of each solution.

\_\_\_h. Instruct/assist client in imaging doing one of the solutions.

\_\_\_i. Instruct/assist client in imagining telling a loved one about resolving the emergency.

\_\_\_j. Instruct/assist client in stating several positive consequences that might result from resolving the emergency.

\_\_\_2. Record solution(s) in client’s Primary Goals Worksheet.

\_\_\_b. At therapist’s discretion, select several items endorsed as “not present,” query and/or praise how situations were prevented.

* + - Query validity of items suspected to be present or soon to occur, but not endorsed, and intervene as necessary, consistent with steps for "a" above.
		- If items marked “not present” are found to be soon to occur or present, complete step ‘a’ above.

|  |
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| **Client’s Assessment of Helpfulness of the Intervention*** 1. After stating client should not feel obligated to provide high scores, as an honest assessment helps better address client needs, solicit how helpful client thought intervention was using the following 7-point rating scale:

**7** = extremely helpful, **6** = very helpful, **5** = somewhat helpful, **4** = not sure, **3** = somewhat unhelpful, **2** = very unhelpful, **1** = extremely unhelpful  * **Record Client’s Rating Here:**\_\_\_\_\_\_
	1. Solicit how rating was derived, and methods of improving intervention in future.

**Therapist’s Rating of Client’s Compliance With Intervention*** + - * 1. Disclose therapist’s rating of client’s compliance using 7-point rating scale:

**7** = extremely compliant, **6** = very compliant, **5** = somewhat compliant, **4** = neutral, **3** = somewhat noncompliant, **2** = very noncompliant, **1** = extremely noncompliant * Factors that contribute to compliance ratings are:
	+ Attendance
	+ Participation and conduct in session
	+ Homework completion
	+ **Record Therapist’s Rating of Client’s Compliance Here:**\_\_\_\_\_\_
		- * 1. Disclose client’s compliance rating.
				2. Explain how rating was derived, and methods of improving performance in future.
 |

**End Time:** \_\_\_\_\_\_\_\_\_ am / pm

**Emergency Management and Safety Checklist**

For each item below, circle if the emergency is “not present,” “present,” or “may soon occur.” “Not present” means the item is not present in your home since the last session, “present” means the item is currently an emergency requiring immediate attention, and “may soon occur” means the item is expected to occur in the near future.

Client ID#: \_\_\_\_\_\_\_\_\_ Clinician: \_\_\_\_\_\_\_\_\_\_\_ Session #: \_\_\_\_\_\_\_\_\_\_\_ Session Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

|  |
| --- |
| Do you feel the need to work on this today? |
| **1.** Adult to adult aggression/violence  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **2.** Adult to child aggression/violence  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **3.** Child to child aggression/violence  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **4.** Aggression/violence to yourself  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **5.** Not having enough food  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **6.** Illness or need for medical attention  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **7.** Bills are overdue (e.g., water, power, rent car payments/insurance etc…)  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **8.** Unsanitary/unclean conditions in home  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **9.** Difficulty getting basic needs from caseworker | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **10.** Difficulty getting basic needs from FBT team  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **11.** Sexual Assault  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **12.** Custody Issues  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **13.** Court Hearing  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **14.** Plans to move  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **15.** Substance use  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **16.** Exposed to potential HIV risk behavior  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **17.** Missing Sessions  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **18.** Transportation  | Not present **/** Present **/** May Soon Occur | Yes **/** No |
| **19.** Other  | Not present **/** Present **/** May Soon Occur | Yes **/** No |

**Self-Control Form**

For each drug use or childcare trial, record a word to describe the situation, then grade steps 1-9 using a 0-100% scale of correctness (0%=forgot to do step, 100%=perfect). When using the rating form during homework, it is not necessary to record the pre- and post-likelihood ratings. Record which step helped the most in decreasing the likelihood of drug use, or increasing the likelihood of doing the most effective caretaking behavior.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Trial # and date  |  |  |  |  |  |  |  |  |
| Word to describe situation  |  |  |  |  |  |  |  |  |
| **1)** Stop!  |  |  |  |  |  |  |  |  |
| **2)** One bad thing for self  |  |  |  |  |  |  |  |  |
| **3)** One bad thing for others  |  |  |  |  |  |  |  |  |
| **4)** Take a deep breath & relax  |  |  |  |  |  |  |  |  |
| **5)** State 4 solutions  |  |  |  |  |  |  |  |  |
| **6)** Evaluate 4 solutions w/ pros and cons  |  |  |  |  |  |  |  |  |
| **7)** Imagine doing 1 or more solution(s)  |  |  |  |  |  |  |  |  |
| **8)** Imagine telling someone about using the solution brainstormed  |  |  |  |  |  |  |  |  |
| **9)** State positive things that will happen as a result of using the solution  |  |  |  |  |  |  |  |  |
| Pre-Likelihood rating  |  |  |  |  |  |  |  |  |
| Post-Likelihood rating  |  |  |  |  |  |  |  |  |
| Step that helped the most and why it helped the most  |  |  |  |  |  |  |  |  |