

Adult-Focused Family Behavior Therapy Child Welfare Supplement

Emergency Management

- Families sometimes come across domestic emergencies that require urgent attention
- Emergency Management Training assists in preventing and diffusing emergent situations.

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[illegible]

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Self-Control Form

- Distribute Self-Control form so that client may rate steps that were most effective in decreasing likelihood of drug use and increasing likelihood of desirable child care.

SELF-CONTROL FORM	
For each drug use or substance use episode, rate the steps that were most effective in decreasing likelihood of drug use and increasing likelihood of desirable child care.	
Step 1: Identify the problem	
Step 2: Identify the consequences	
Step 3: Identify the triggers	
Step 4: Identify the coping strategies	
Step 5: Identify the support system	
Step 6: Identify the consequences of drug use	
Step 7: Identify the consequences of drug use on child care	
Step 8: Identify the consequences of drug use on family	
Step 9: Identify the consequences of drug use on community	
Step 10: Identify the consequences of drug use on self	

Time to Practice Emergency Management!



EMERGENCY MANAGEMENT

Provider Prompting List

Initial Session

Client ID#: _____ Provider: _____ 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 provider 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 provider 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.

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___ 2. Record solution(s) in client's Primary Goals Worksheet.

- ___ b. At provider'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

___ a. 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:** _____

___ b. Solicit how rating was derived, and methods of improving intervention in future.

Provider's Rating of Client's Compliance With Intervention

___ a. Disclose provider'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 Provider's Rating of Client's Compliance Here:** _____

___ b. Disclose client's compliance rating.

___ c. Explain how rating was derived, and methods of improving performance in future.

End Time: _____ am / pm

EMERGENCY MANAGEMENT
Provider Prompting List
Future Session

Client ID#: _____ Provider: _____ 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 provider 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 provider'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

___ c. 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:** _____

___ d. Solicit how rating was derived, and methods of improving intervention in future.

Provider's Rating of Client's Compliance With Intervention

___ a. Disclose provider'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 Provider's Rating of Client's Compliance Here:** _____

___ b. Disclose client's compliance rating.

___ c. 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#: _____ Provider: _____ 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

EMERGENCY MANAGEMENT

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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								

EMERGENCY MANAGEMENT

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Catch My Child Being Good

- Catch My Child Being Good is aimed to help clients learn the most effective way to reinforce good behaviors and decrease poor behavior.

Recording Form

- Distribute Recording form so that client may record how and when they caught their child exhibiting good behavior.

CATCH MY CHILD BEING GOOD RECORDING FORM						
Child's Name	Parent's Name	Teacher's Name	Teacher's Name	Teacher's Name	Teacher's Name	Teacher's Name
1st	2nd	3rd	4th	5th	6th	7th
8th	9th	10th	11th	12th	13th	14th
15th	16th	17th	18th	19th	20th	21st
22nd	23rd	24th	25th	26th	27th	28th
29th	30th	31st	32nd	33rd	34th	35th
36th	37th	38th	39th	40th	41st	42nd
43rd	44th	45th	46th	47th	48th	49th
50th	51st	52nd	53rd	54th	55th	56th
57th	58th	59th	60th	61st	62nd	63rd
64th	65th	66th	67th	68th	69th	70th
71st	72nd	73rd	74th	75th	76th	77th
78th	79th	80th	81st	82nd	83rd	84th
85th	86th	87th	88th	89th	90th	91st
92nd	93rd	94th	95th	96th	97th	98th
99th	100th	101st	102nd	103rd	104th	105th

Time to Practice Catch My Child Being Good!



CATCH MY CHILD BEING GOOD

Provider Prompting List

Initial Session

Client ID#: _____ Provider: _____ Session #: _____ Session Date: ____/____/____

Materials Required:

- Catching My Child Being Good Recording Form
- Catching My Child Being Good Worksheetmk98

Begin Time: _____ am / pm

Present Rationale for Catching My Child Being Good (Adults Only)

- ___ a. CMCBG is designed to learn the most effective way to praise good behaviors. & ignore undesired behaviors.
- ___ b. Not appropriate to ignore if property is being damaged, or child is threat to self/others.
- ___ c. Express reason parent will do well with CMCBG.
- ___ d. Solicit how CMCBG will be helpful
- ___ e. Solicit questions.

Teach Client to Reinforce Desired Behaviors (Adults Only)

- ___ a. Review CMCBG techniques with client and sig. other
 - ___ 1. Attends: verbal description of desired behavior to child.
 - ___ 2. Descriptive praise: telling children exactly what they did that was liked.
 - ___ 3. Immediate reinforcement/immediate positive attention: earlier reinforcement after desired behavior is better.
 - ___ 4. Be Pleasant: laughing, smiling. Speaking in a soft, conversational tone of voice
 - ___ 5. Showing affection with touch: pat on head or back, feeling a child's arm when making a muscle, tickling (be specific as to what is appropriate), hugging, cuddling, bouncing.
 - ___ 6. Teaching when child shows interest: when the child spontaneously shows interest in something, tell the child something about the object.
 - ___ 7. Ask questions: It helps to ask kids how they feel about things or what they know.
 - ___ 8. Avoid criticism: Tell child what was liked and inform child how to make it better.
- ___ b. Instruct client to list several functional, interactive, and exciting activities for target child to participate in to catch their child being good.
 - ___ 1. Ask client what would be important in catching their child being good.
 - ___ 2. Have client select an activity that meets criteria (*provider can suggest activities if client needs assistance*).
- ___ c. Model CMCBG techniques w/provider enacting role of parent:
- ___ d. Solicit what was liked about modeled actions & point out CMCBG techniques client didn't notice.
- ___ e. Provide client with CMCBG Worksheet and attempt to determine each step was modeled or could have been.
 - If step missed ask client to give you an example and model step.
- ___ f. Instruct client to practice preceding techniques w/ provider acting as child.
 - ___ 1. Solicit what was liked about performance.
 - ___ 2. Praise client's effort & provide corrective feedback.

Teach Client to Ignore Undesired Behavior (Without Children)

- ___ a. State best to ignore undesired behavior unless property is being destroyed or threat to self/others.
- ___ b. Solicit examples of undesired behavior from client that would be appropriate to ignore.

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- ___ 1. Have client select an activity that meets criteria (*provider can suggest activities if client needs assistance*)
- ___ c. Model ignoring undesired behavior
 - Immediately look away.
 - Face should be emotionless.
 - Do not talk to or touch child.
- ___ d. Instruct client to practice ignoring providers enacting child's undesired behaviors.
 - ___ 1. Solicit what was liked about performance
 - ___ 2. Praise client's effort & provide corrective feedback

In Vivo play Activity (Adults & Children)

- ___ a. Instruct client to bring child back to room
- ___ b. Instruct client to play favorite play activity w/ child
- ___ c. Utilize CMCBG worksheet to prompt the following when client is practicing w/ child:
 - ___ 1. Modeling techniques and provide instructions to enhance performance
 - ___ 2. Descriptive praise for appropriate responding

Assign Catching My Child Being Good homework (Adults & Children)

- ___ a. Provide client w/ Catching My Child Being Good recording form.
- ___ b. Show client how to complete recording form.
- ___ c. Instruct client to record in vivo CMCBG that was performed w/ child as example.
- ___ d. Assign client to practice CMCBG two times a day.
 - ___ 1. Assess and solve potential obstacles that may prevent client from completing task.

Client's Assessment of Helpfulness of the Intervention

- ___ a. 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:** _____
- ___ b. Solicit how rating was derived, and methods of improving intervention in future.

Provider's Rating of Client's Compliance With Intervention

- ___ a. Disclose provider'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 Provider's Rating of Client's Compliance Here:** _____
- ___ b. Disclose client's compliance rating.
- ___ c. Explain how rating was derived, and methods of improving performance in future.

End Time: _____ am / pm

CATCH MY CHILD BEING GOOD
Provider Prompting List
Future Session

Client ID#: _____ Provider: _____ Session #: _____ Session Date: ____/____/____

Materials Required:

- Catching My Child Being Good Recording Form
- Catching My Child Being Good Worksheet

Begin Time: _____ am / pm

Review Homework (With Children)

- ___ a. Ask client to review several times child(ren) caught being good in previous week.
 - Refer to CMCBG recording sheet
- ___ 1. Praise for homework completion or instruct to complete in retrospect if incomplete.
- ___ b. Descriptively praise client for performance of CMCBG techniques.
 - ___ 1. Solicit & assist with any problems that may have occurred in performance.
- ___ c. Provide another copy of Catching My Child Being Good recording form & worksheet.
- ___ d. Instruct client to list several functional, interactive, and exciting activities for target child to participate in.
 - Select an activity that meets criteria (*provider can suggest activities if client needs assistance*).
- ___ e. Instruct client to practice CMCBG w/ child in session.
- ___ f. Provide corrective feedback and instruction to client while performing CMCBG.

Client's Assessment of Helpfulness of the Intervention

- ___ c. 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:** _____
- ___ d. Solicit how rating was derived, and methods of improving intervention in future.

Provider's Rating of Client's Compliance With Intervention

- ___ a. Disclose provider's rating of client's compliance using 7-point rating scale:
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 - 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 Provider's Rating of Client's Compliance Here:** _____
- ___ b. Disclose client's compliance rating.
- ___ c. Explain how rating was derived, and methods of improving performance in future.

End Time: _____ am / pm

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CATCH MY CHILD BEING GOOD RECORDING FORM

Client ID#: _____ Provider: _____ Session #: _____ Session Date: ____/____/____

Identify two 5-minute time periods that are convenient to practice catching your child being good, and record these times on the recording form. Write down what your child did that you liked, and how you caught your child being good (i.e. gave a hug, said something nice).

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Time:							
Activity:							
How did I Catch My Child Being Good?							
How did my child respond?							
Time:							
Activity:							
How did I Catch My Child Being Good?							
How did my child respond?							

CATCH MY CHILD BEING GOOD

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CATCH MY CHILD BEING GOOD WORKSHEET

<u>Ways to Catch My Child Being Good</u>	
Attends:	Give a verbal description of what the child is doing. For example: "Maria, you are coloring the picture of the doll."
Descriptive Praise:	Telling children exactly what they did that was liked. <i>For example:</i> "I love how you are coloring in the lines."
Immediate Reinforcement/Immediate Positive Attention:	The earlier the reinforcement is provided after desired behavior has occurred, the better.
Be Pleasant:	Laughing, smiling, and speaking in a soft, pleasant, conversational tone of voice.
Showing Affection With Touch:	Patting the child on the head or back, feeling a child's arm when making a muscle, hugging, or cuddling.
Teaching When Child Shows Interest:	When the child shows interest in something, tell the child something about it. <i>For example:</i> "Yes, that's a coloring book. You can mix these paint colors to make a new color to use in your book."
Ask Questions:	Ask the child how they feel or what they know about things. <i>For example:</i> "Do you know what colors you can mix to make green paint?"
Avoid Criticism:	Tell child what was liked and inform child how to make it better.
<u>Ways to Ignore Undesired Behavior</u>	
Immediately look away.	
Face should be emotionless .	
Do not talk to or touch child until undesired behavior has stopped.	



CATCH MY CHILD BEING GOOD

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Positive Practice Skills Training

- Children sometimes behave poorly when they either have not learned to behave otherwise, or when they are too young to understand.
- Positive Practice Skills Training assists in helping to teach children to replace undesired behaviors with desired behaviors.

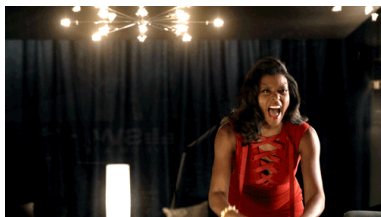
Recording Sheet

- Distribute Recording Sheet form so that client may record when and how they implemented positive practice protocols.

POSITIVE PRACTICE RECORDING SHEET		
Client ID#	First Name	Session #
Day	Desired Behavior Practiced	Number of Times Practiced
Mon		
Tue		
Wed		
Thurs		
Fri		
Sat		
Sun		

POSITIVE PRACTICE
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Take Out Your Positive Practice Protocols and Let's Practice!



POSITIVE PRACTICE
Provider Prompting List
Initial Session

Client ID#: _____ Provider: _____ Session #: _____ Session Date: ____/____/____

Materials Required:

- Positive Practice Record Sheet

Begin Time: _____ am / pm

Provide Rationale for Positive Practice (PP)

- ___ a. Children perform undesired behaviors due to insufficient learning or being too young.
- ___ b. PP best used when (1) child does undesired behavior for 1st time or (2) does undesired behavior more than 1x but not taught alternative positive behaviors.
- ___ c. Solicit an undesired behavior that is appropriate for PP.
- ___ d. PP involves having child practice desired behavior after undesired behavior is excused.
- ___ e. PP effective with other families.
- ___ f. Solicit questions and provide answers.

Positive Practice Implementation Guidelines (Include Caregiver & Caregiver's Significant Other)

- ___ a. Solicit what can be practiced for the following examples:
 - ___ 1. Child spills milk at dinner table due to reaching without asking to pass it.
 - ___ 2. Slamming door after argument b/c child doesn't know how to control emotions.
- ___ b. Solicit a couple of situations in which PP is applicable, including what behaviors can be practiced.

Teach caregiver to perform PP

- ___ a. Explain children often make excuses for their undesired behaviors.
- ___ b. Explain best to listen to excuse to avoid defensiveness & consequence w/ practice.
- ___ c. Explain if child doesn't give excuse caregiver can provide one.
- ___ d. Ask why it is important to excuse child for undesired behavior.
- ___ e. Explain PP involves excusing undesired behavior & instructing child to practice desired behaviors.
- ___ f. Model PP with caregiver acting as child.
 - ___ 1. Excuse undesired behavior
 - ___ 2. Instruct child to practice desired behavior.
- ___ g. Review following PP guidelines:
 - ___ 1. Instruct more practice when undesired behavior is *Serious or frequent*.
 - ___ 2. Practice should be pleasant for the child.
 - ___ 3. Assist child in correct responding whenever necessary.

Caregiver role-play of PP in simulated scenarios with provider acting as the child

- ___ a. Instruct caregiver to role-play PP for several undesired behaviors, after provider modeling.

Caregiver conducts PP in vivo with child

- ___ a. Solicit a recent situation in which PP would be applicable.
- ___ b. Instruct caregiver to perform at least 1 trial of positive practice with child using solicited situation.

Assign Homework

- ___ a. Provide caregiver w/ PP Recording Sheet.
- ___ b. PP should be attempted at home, whenever appropriate.

POSITIVE PRACTICE

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- ___ c. One PP per day may be recorded in the PP Worksheet.
___ d. Record situation that was role played in session in the PP Recording Sheet.

Client's Assessment of Helpfulness of the Intervention

- ___ a. 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:** _____
- ___ b. Solicit how rating was derived, and methods of improving intervention in future.

Provider's Rating of Client's Compliance With Intervention

- ___ a. Disclose provider'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 Provider's Rating of Client's Compliance Here:** _____
- ___ b. Disclose client's compliance rating.
___ c. Explain how rating was derived, and methods of improving performance in future.

End Time: _____ am / pm

POSITIVE PRACTICE
Provider Prompting List
Future Session

Client ID#: _____ Provider: _____ Session #: _____ Session Date: ____/____/____

Begin Time: _____ am / pm

Review of homework in subsequent sessions

- ____ a. Instruct caregiver to review PP situations that were performed since last contact, and provide corrective feedback for each, whenever necessary.

Client's Assessment of Helpfulness of the Intervention

- ____ c. 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:** _____

- ____ d. Solicit how rating was derived, and methods of improving intervention in future.

Provider's Rating of Client's Compliance With Intervention

- ____ a. Disclose provider'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 Provider's Rating of Client's Compliance Here:** _____

- ____ b. Disclose client's compliance rating.

- ____ c. Explain how rating was derived, and methods of improving performance in future.

End Time: _____ am / pm

POSITIVE PRACTICE RECORDING SHEET

Client ID#: _____ Provider: _____ Session #: _____ Session Date: ____/____/____

	Desired Behavior Practiced	Number of Times Practiced
Mon		
Tues		
Wed		
Thurs		
Fri		
Sat		
Sun		

POSITIVE PRACTICE

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- All children disobey parent commands to some extent.
- Child Compliance Training helps to teach clients how to instruct, warn and enforce consequences for disobedience by helping to get children to follow instructions.

- Distribute Recording Sheet form so that client may record child's noncompliance and the steps the client took to rectify the behavior

[illegible]

A close-up of Pikachu hugging a person's leg. The person is wearing a white sneaker with red and yellow flame-like patterns. Pikachu is yellow with red cheeks and a lightning bolt tail, looking happy with its eyes closed.

CHILD COMPLIANCE TRAINING

Provider Prompting List

Initial Session

Client ID#: _____ Provider: _____ Session #: _____ Session Date: ____/____/____

Materials Required:

- Child Compliance Training Recording Form
- Child Compliance Worksheet

Begin Time: _____ am / pm

Provide Rationale for Child Compliance Training (CCT; Client & Adolescent & Adult Significant Others) State or ask the following:

- ___ a. Most children have disobeyed parent commands to some extent.
- ___ b. CCT involves learning to make effective instructions, warnings & consequences for noncompliance.
- ___ c. CCT helps get children to do what they're instructed to do.
- ___ d. Ask client how CCT could be helpful.
- ___ e. Mention how CCT could be helpful.
- ___ f. Solicit questions.

Teach Client How to Make a Command/ Directive (Client & Adolescent & Adult Significant Others)

- ___ a. Brainstorm effective strategies in making effective directions/commands.
- ___ b. Model how to make an effective command including the following:
 - ___ 1. Say please
 - ___ 2. Briefly state what action is being requested
 - ___ 3. Briefly state when the action is requested.
- ___ c. Ask what was liked about modeled performance.
- ___ d. Assure rationale for each component step in command is understood (i.e. say please to model politeness)
 - ___ 1. Point out "could" was not used because it sends a mixed message.
- ___ e. Instruct client to role play commands until done properly.
 - ___ 1. Praise and assist, as necessary.

Teach Client When to Make a Command/ Directive (Client & Adolescent & Adult Significant Others)

- ___ a. Brainstorm methods of preparing children to be more likely to do what they are told, including:
 - 1. Stating child is a great helper.
 - 2. Kissing child.
 - 3. Massaging child.
 - 4. Hugging child.
 - 5. Making first command/directive easy to accomplish and heavily praising compliance.
 - 6. Waiting until child is not busy or upset.

Role-playing CCT (Client & Adolescent & Adult Significant Others)

- Provide client with the **CCT WORKSHEET**
- Model following CCT steps for situation in which client refuses to pick up an object and consequence is losing television for the next hour:
 - ___ a. (Step 1) = Make a directive
 - Wait 5 seconds for child to comply
 - ___ b. (Step 2) = Repeat directive w/ warning to initiate an undesired consequence

CHILD COMPLIANCE TRAINING

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- Wait 5 seconds for child to comply
- ___ c. (Step 3) = Initiate undesired consequence if child does not comply (if child complied say thanks)
- ___ d. Solicit what was liked about modeled performance
- ___ e. Assure client understands each of following CCT techniques:
 - ___ 1. Use level tone throughout
 - ___ 2. Start directive by saying "please"
 - ___ 3. Wait 5 seconds before giving warning
 - ___ 4. Wait 5 seconds before initiating consequence
 - ___ 5. Firmly implement consequence immediately after noncompliance
- ___ f. Instruct to perform CCT for the same modeled situation w/ provider pretending to be noncompliant child until all steps done properly w/out prompting (make prompts throughout role-play).
 - ___ 1. Discuss what was liked about performance.

Reviewing Consequences (Client & Adolescent & Adult Significant Others)

- ___ a. Using examples, state undesired consequences should:
 - ___ 1. Be easy to provide
 - ___ 2. Be easy to monitor
 - ___ 3. Don't initiate consequences when upset or angry
 - ___ 4. Use natural consequences (e.g., can't drive child to friend's house if won't wash car)
- ___ b. Do one of the following:
 - If unknown, solicit client's feelings about corporal punishment.
 - If client has expressed a desire to use other methods of discipline, praise this decision and skip steps 3-4
 - If client has endorsed corporal punishment, complete steps 3-4 below.
- ___ c. Indicate spankings can be effective, at least initially.
- ___ d. Indicate research and other parents show spankings are associated w/ unwanted side effects, including:
 - ___ 1. Child may learn to tolerate pain, making it necessary to increase aversiveness of spanking over time.
 - ___ 2. Often results in child attempting to avoid the punisher, especially later in life.
 - ___ 3. Increases other undesired behaviors that are not punished with spanking
 - ___ 4. Leads to lying in order to avoid future spankings
 - ___ 5. Associated with child being aggressive & acting out with others.
 - ___ 6. Doesn't teach how to do the desired behavior.
 - ___ 7. Child may accidentally get hurt
 - ___ 8. May get parent in trouble by others who misunderstand parent's good intentions.
- ___ e. Solicit a list of several behaviors client recently asked child(ren) to perform that were refused.
 - ___ 1. Assist parent in generating appropriate consequences for these behaviors.

Role-playing CCT with Time Out as Consequence (Client & Adolescent & Adult Significant Others)

- ___ a. Suggest time away from reinforcement is ideal consequence
 - For example, time out for younger children or being grounded from friends for older youth.
 - ***If client's children are over the age of 12, skip to step 6***
- ___ b. Solicit understanding of time-out.
 - Model the 3 CCT steps using time out as consequence consistent w/ following (client pretends to be noncompliant child):
 - ___ 1. 1 min. in time out chair per yr. of age for children 3 - 11 years only.
 - ___ 2. Put time out chair in corner, away from noise (e.g., TV, window) and a few feet from wall.
 - ___ 3. Demonstrate passive resistance to keep child in time out chair (i.e. hand open above wrists of child, elbows on chest of child)
 - ___ 4. Instruct client to stay close to child during time out but to not engage or look at them.
 - ___ 5. Ignore undesired behaviors during time out (e.g., tantrums, yelling, rolling eyes back).

- ___ 6. If child is yelling or making noise in timeout, client will have to wait for the child to be quiet for at least 5 seconds after timeout period before allowing child out.
Note: Client will want to have at least 45 minutes to conduct the initial timeout in case child becomes distraught.
- ___ 7. When timeout period has ended, inform child that they **can** come out when they're ready.
- ___ 8. After timeout immediately bring child back to original situation and repeat first 3 steps.
- ___ c. Explain & model that after consequence is implemented, child should be brought back to situation where noncompliance occurred, & CCT steps should be repeated using another consequence or repeating time-out.
- ___ d. Instruct client to model CCT using time-out as consequence (provider pretends to be noncompliant child).
- ___ 1. Assist client in performing all steps, fading out assistance until client is able to perform w/out prompts.
- ___ 2. Ask what was liked about client's performance.
- ___ 3. Solicit if anything would be done differently.
- ___ e. Instruct client to play an interactive game with child, and at some point in the game instruct child to do a task (e.g., get a tissue), & implement CCT w/ child if noncompliance occurs.
- Provider should provide coaching and support for caregiver throughout interaction.
- ___ f. Explain how to complete CCT Recording Form using client's role-play performance as example.
- ___ g. Assign client to practice CCT prior to next session, & summarize the experiences in CCT Recording Form.

Client's Assessment of Helpfulness of the Intervention

- ___ a. 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:** _____
- ___ b. Solicit how rating was derived, and methods of improving intervention in future.

Provider's Rating of Client's Compliance With Intervention

- ___ a. Disclose provider'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 Provider's Rating of Client's Compliance Here:** _____
- ___ b. Disclose client's compliance rating.
- ___ c. Explain how rating was derived, and methods of improving performance in future.

End Time: _____ am / pm

CHILD COMPLIANCE TRAINING
Provider Prompting List
Future Session

Client ID#: _____ Provider: _____ Session #: _____ Session Date: ____/____/____

Materials Required:

- Child Compliance Training Recording Form
- Child Compliance Worksheet

Begin Time: _____ am / pm

- ____ a. Instruct client to provide completed CCT recording form.
____ 1. Praise homework completion or instruct to complete in retrospect if incomplete.
- ____ b. Descriptively praise client for performance of CCT skills, as indicated in the CCT Recording Form.
____ 1. Solicit questions, provide answers, and engage in CCT role-plays, whenever possible.
- ____ c. Provide assignment to practice CCT, and record responses in the CCT Recording Form.

Client's Assessment of Helpfulness of the Intervention

- ____ c. 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:** _____
- ____ d. Solicit how rating was derived, and methods of improving intervention in future.

Provider's Rating of Client's Compliance With Intervention

- ____ a. Disclose provider'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 Provider's Rating of Client's Compliance Here:** _____
- ____ b. Disclose client's compliance rating.
- ____ c. Explain how rating was derived, and methods of improving performance in future.

End Time: _____ am / pm

CCT RECORDING FORM (Managing Compliance)

Directions: For each day of the week record the behavior that your child refused to do, circle yes or no (Y/N) if you were able to complete each step below and what consequence was used.

Assignment	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
What was the behavior my child refused to do?							
Was I able to:							
1) Wait 5 seconds & repeat command w/ warning to consequence.	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
2) Wait 5 seconds & thank child if compliant or initiate consequence if didn't do what asked.	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
3) Bring child back to original situation & repeat 1st 3 steps after consequence is provided	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
What was my consequence?							

CHILD COMPLIANCE TRAINING

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CHILD COMPLIANCE WORKSHEET

Step 1 = Make a command

Step 2 = Wait 5 seconds for child to comply

Step 3 = Repeat command w/ warning to initiate an undesired consequence

Step 4 = Wait 5 seconds for child to comply

Step 5 = Initiate undesired consequence if child does not comply.



NOTE: After consequence is initiated, it is recommended to bring child back to situation in which child did not do what was asked, and repeat the steps.

CHILD COMPLIANCE TRAINING

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Home and Safety Beautification

- Accidents due to unattended hazards in the home are a leading cause of injury and even death for young children.
- The Home Safety and Beautification protocols aim to make the home safe and more beautiful.

Home and Safety Beautification

- Review checklists for each room with client, and mutually decide with client and family how to rate the safety of each room.

Room		Safety		Beautification	
Room	Checklist	Room	Checklist	Room	Checklist
Living Room	1. Check for tripping hazards (e.g., loose rugs, clutter). 2. Check for fire hazards (e.g., candles, space heaters). 3. Check for electrical hazards (e.g., overloaded outlets, frayed cords). 4. Check for furniture stability (e.g., wobbly chairs, unstable tables). 5. Check for pet safety (e.g., loose wires, toxic plants).	Bedroom	1. Check for tripping hazards (e.g., loose rugs, clutter). 2. Check for fire hazards (e.g., candles, space heaters). 3. Check for electrical hazards (e.g., overloaded outlets, frayed cords). 4. Check for furniture stability (e.g., wobbly chairs, unstable tables). 5. Check for pet safety (e.g., loose wires, toxic plants).	Bathroom	1. Check for slip hazards (e.g., wet floors, loose rugs). 2. Check for fall hazards (e.g., unstable ladders, wobbly stools). 3. Check for fire hazards (e.g., candles, space heaters). 4. Check for electrical hazards (e.g., overloaded outlets, frayed cords). 5. Check for pet safety (e.g., loose wires, toxic plants).

Time to Practice Home and Safety Beautification!



HOME SAFETY AND BEAUTIFICATION

Provider Prompting List

Initial Session

Client ID#: _____ Provider: _____ Session #: _____ Session Date: ____/____/____

Materials Required:

- HSB Checklist for all rooms and exterior of home

Begin Time: _____ am / pm

Present Rationale for Home Safety and Beautification to Client and adult significant other(s)

- ___ a. Households contain many potential hazards that are overlooked.
- ___ b. Hazards are situations in which someone may get hurt.
- ___ c. Home accidents are a leading cause of death and injury for young children.
- ___ d. Home safety and beautification tours are aimed at making the home safe and beautiful.
- ___ e. With the caregiver's permission, the provider and entire family will tour the home.
- ___ f. Room(s) may be excluded from the tour if the caregiver wishes, although it is recommended that all rooms be examined.

Motivate the client and her significant others for this intervention

- ___ a. Ask family why it would be important to perform safety and beautification tours.
- ___ b. Ask caregiver if there are any rooms in the house that should be "off-limits."
- ___ c. Ask caregiver if the safety tour should be implemented immediately or during the next session.

Complete the Home Safety and Beautification Form

- ___ a. Use HSB checklists for exterior of home and all rooms that are present in the home.
 - *Do not include rooms that the caregiver wants to have excluded from the tours.*

Conduct the tour of the home

- ___ a. Upon entering each room, show checklist for the room, and mutually decide with client & family the following for each Safety and Appearance item:
 - ___ 1. Obtain a treatment priority rating (0=not present, 4=present/high priority).
 - Record each priority rating in checklist.
 - Provide rationales when clients do not agree with hazards identified by provider.
 - Query clients how items may be hazardous or not contribute to child development.
 - ___ 2. Assist in brainstorming plans to fix items rated 2.
 - Record agreed upon plans in "Notes" section for each item.
 - Praise suggestions that are consistent with a clean, safe and beautiful home.
 - Provide solutions.
 - ___ 3. Assist in fixing items rated 3 or above.
 - Praise solutions and efforts in fixing items to be clean, safe, and beautiful.
 - Make suggestions in fixing items to be clean, safe and beautiful.
 - If item not fixed completely brainstorm method of fixing completely.
 - Help family implement solutions.
 - Record method of fixing item completely in "Notes" section of item.
- ___ b. Assign family task of completing the safety and beautification plans outlined in "Notes" section.

Client's Assessment of Helpfulness of the Intervention

___ a. 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:** _____

___ b. Solicit how rating was derived, and methods of improving intervention in future.

Provider's Rating of Client's Compliance With Intervention

___ a. Disclose provider'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 Provider's Rating of Client's Compliance Here:** _____

___ b. Disclose client's compliance rating.

___ c. Explain how rating was derived, and methods of improving performance in future.

End Time: _____ am / pm

HOME SAFETY AND BEAUTIFICATION

Provider Prompting List

Future Session

Client ID#: _____ Provider: _____ Session #: _____ Session Date: ____/____/____

Materials Required:

- Completed HSB Checklist from Initial Session

Begin Time: _____ am / pm

Review tour with Client and adult significant other(s)

- ___ a. Review each assignment family had in improving safety and appearance of home.
 - See “Notes” section for each item in each room.
- ___ b. Praise improvements or intentions to improve the home’s safety and appearance.
- ___ c. Assist in generating methods /performing activities that improve home’s safety and appearance.

Client’s Assessment of Helpfulness of the Intervention

- ___ c. 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:** _____
- ___ d. Solicit how rating was derived, and methods of improving intervention in future.

Provider’s Rating of Client’s Compliance With Intervention

- ___ a. Disclose provider’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 Provider’s Rating of Client’s Compliance Here:** _____
- ___ b. Disclose client’s compliance rating.
- ___ c. Explain how rating was derived, and methods of improving performance in future.

End Time: _____ am / pm

KITCHEN
☐ Rated ☐ Not Rated ☐ Self-Report ☐ Not Applicable

NAME/ID: _____

Treatment Priority Ratings:
Safety (S): 0 = not present, 1 = present, no priority, 2 = present, minimal priority, 3 = present, moderate priority, 4 = present, high priority

Appearance (A): 0 = not present, 1 = present, no priority, 2 = present, minimal priority, 3 = present, moderate priority, 4 = present, high priority

Toxins	S	Notes	Heavy/Tipsy Objects	S	Notes	Needs Clean Up	A	Notes	
1. Medications			25. Furniture			41. Clothes			
2. Cleaning supplies			26. Boxes			42. Counters/Tables			
3. Detergents			27. Appliances (blender)			43. Floor/Wall/Ceiling			
4. Paint, solvents			28. Artwork			44. Dog feces			
5. Alcohol or Drugs			29. Other:			45. Bug infestation			
6. Pesticides						46. Food left out			
7. Other:						47. Clutter			
Electrical Hazards	S	Notes				48. Dishes in sink			
8. Outlets exposed			Small Objects	S	Notes	49. Other:			
9. Appliances and tools			30. List:			Aesthetic Needs	A	Notes	
10. Empty light sockets						50. Furniture is worn/torn			
11. Exposed/frayed wires						51. Appliances are malfunctioning			
12. Other:						52. Carpet, Rug, or floor worn			
		Probs. w/ Air Quality	S	Notes	53. Light bulbs missing or burnt out				
Sharp Objects	S	Notes	31. Poor ventilation			54. Décor absent			
13. Knives/skewers, pins, scissors, needles			32. Too hot			55. Walls unpainted			
14. Corners			33. Too Cold			56. Other:			
15. Tools			34. Mildew/mold						
16. Nails/splinters			35. Doors/windows drafty						
17. Other:			36. Other:						
Food & Nutrition Needs	S	Notes							
18. 4 food groups absent									
19. Food is spoiled			Other Risks	S	Notes				
20. Junk food accessible			37. Floor/wall/ceiling in disrepair/holes						
21. Other:			38. Weapons (gun, p.spray)						
Home Access/Security	S	Notes	39. Porn or sex toys						
22. Windows won't lock/broken			40. Other:						
23. Doors won't lock/broken									
24. Other:									
OVERALL ROOM RATINGS									
#57. Safety (S)			#58. Appearance (A)						
0	1	2	3	4	0	1	2	3	4

HOME SAFETY & BEAUTIFICATION

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BATHROOM: Description		<input type="checkbox"/> Rated <input type="checkbox"/> Not Rated <input type="checkbox"/> Self-Report <input type="checkbox"/> Not Applicable				NAME/ID: _____		
Treatment Priority Ratings: Safety (S): 0 = not present, 1 = present, no priority, 2 = present, minimal priority, 3 = present, moderate priority, 4 = present, high priority Appearance (A): 0 = not present, 1 = present, no priority, 2 = present, minimal priority, 3 = present, moderate priority, 4 = present, high priority								
Toxins	S	Notes	Heavy/Tipsy Objects	S	Notes	Needs Clean Up	A	Notes
1. Medications			21. Furniture			38. Tub/shower/toilet		
2. Cleaning supplies			22. Boxes			39. Clothes		
3. Detergents			23. Appliances (iron)			40. Counters/Tables		
4. Paint, solvents			24. Artwork			41. Floor/Wall/Ceiling		
5. Alcohol or Drugs			25. Other:			42. Dog feces		
6. Pesticides						43. Bug infestation		
7. Other:						44. Food left out		
						45. Clutter		
						46. Other:		
Electrical Hazards	S	Notes	Small Objects	S	Notes	Aesthetic Needs	A	Notes
8. Outlets			26. List:			47. Furniture is worn/torn		
9. Appliances (blow dryer, curling iron, radio)						48. Appliances are malfunctioning		
10. Empty light sockets						49. Carpet, Rug, or floor worn		
11. Exposed/frayed wires						50. Light bulbs missing or burnt out		
12. Other:						51. Décor absent		
						52. Walls unpainted		
						53. Other:		
Sharp Objects	S	Notes	Air Quality	S	Notes			
13. Razors, hair pins, scissors, needles			27. Poor ventilation					
14. Corners			28. Too hot					
15. Tools			29. Too Cold					
16. Nails/splinters			30. Mildew/mold					
17. Other:			31. Doors/windows drafty					
			32. Other:					
Other Risks	S	Notes						
33. Floor/wall/ceiling in disrepair/holes								
34. Weapons (gun, p.spray)								
35. Porn or sex toys								
Home Access/Security	S		Notes	36. Plumbing (problem)				
18. Windows won't lock/broken			37. Other:					
19. Doors won't lock/broken								
20. Other:								

OVERALL ROOM RATINGS										
#54. Safety (S)					#55. Appearance (A)					
0	1	2	3	4	0	1	2	3	4	

HOME SAFETY & BEAUTIFICATION
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FAMILY ROOM: Description ☐ Rated ☐ Not Rated ☐ Self-Report ☐ Not Applicable **NAME/ID:**

Treatment Priority Ratings:

Safety (S): 0 = not present, 1 = present, no priority, 2 = present, minimal priority, 3 = present, moderate priority, 4 = present, high priority

Appearance (A): 0 = not present, 1 = present, no priority, 2 = present, minimal priority, 3 = present, moderate priority, 4 = present, high priority

Toxins	S	Notes	Heavy/Tipsy Objects	S	Notes	Needs Clean Up	A	Notes	
1. Medications			25. Furniture			41. Clothes			
2. Cleaning supplies			26. Boxes			42. Counters/Tables			
3. Detergents			27. Appliances (stereo)			43. Floor/Wall/Ceiling			
4. Paint, solvents			28. Artwork			44. Dog feces			
5. Alcohol or Drugs			29. Other:			45. Bug infestation			
6. Pesticides						46. Clutter			
7. Other:						47. Other:			
Electrical Hazards	S	Notes							
8. Outlets exposed			Small Objects	S	Notes	Aesthetic Needs	A	Notes	
9. Appliances & tools			30. List:			48. Furniture is worn/torn			
10. Empty light sockets						49. Appliances are malfunctioning			
11. Exposed/frayed wires						50. Carpet, Rug, or floor worn			
12. Other:						51. Light bulbs missing or burnt out			
Sharp Objects	S	Notes	Probs. w/ Air Quality	S	Notes				
13. Knives, pins, scissors, needles			31. Poor ventilation			52. Décor absent			
14. Corners			32. Too hot			53. Walls unpainted			
15. Tools			33. Too Cold			54. Other:			
16. Nails/splinters			34. Mildew/mold						
17. Other:			35. Doors/windows drafty						
Food & Nutrition Needs	S		Notes	36. Other:					
18. 4 food groups absent				Other Risks		S	Notes		
19. Food is spoiled		37. Floor/wall/ceiling in disrepair/holes							
20. Junk food accessible		38. Weapons (gun, p.spray)							
21. Other:		39. Porn or sex toys							
Home Access/Security	S	Notes	40. Other:						
22. Windows won't lock/broken									
23. Doors won't lock/broken									
24. Other:									

OVERALL ROOM RATINGS

#55. Safety (S)					#56. Appearance (A)				
0	1	2	3	4	0	1	2	3	4

HOME SAFETY & BEAUTIFICATION

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Concluding Performance Intervention & Planning for Success

Solicit & provide strengths of family relevant to maintaining:

- great family relationships
- personal achievements
- treatment goals

Instruct family in exchanging what is appreciated about each other,
including provider.

Contact Information

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