

The Role of Therapy Delivery and Clinic Organizational Factors in Explaining Therapist Effects for Trauma Focused Psychotherapies in the Veterans Health Administration

*Supplemental Materials 1. CPT and PE adherence rating forms, Sessions 1 through 7*

**Appendix A Cognitive Processing Therapy (with Account) Adherence Rating Forms Sessions 1 through 7**

<b>CPT with account</b>				
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>				
<b>Session 1 “Initial”</b>				
<b>Unique and Essential Elements</b>			<b>Yes</b>	<b>No</b>
1	Provided an overview of PTSD symptoms, a cognitive explanation of the development and maintenance of PTSD and a rationale of CPT.			
2	Presented an overview of the 12-session treatment.			
3	Therapist introduced the concept of stuck points.			
4	Therapist assigned the practice assignment (impact statement/stuck point log).			
CPT type (with account vs. without account) indicated?				
<b>Additional Information (not used for adherence scoring)</b>				
<i>Record scores in the note.</i>				
PCL-5				
PHQ-9				
Working Alliance Inventory SR				
<i>Record time in session documented in templated note</i>				
<i>Record modification types (tailoring, integration of another treatment, drift)</i>				

<b>CPT with account</b>		
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>		
<b>Session 2</b>		
<b>Unique and Essential Elements</b>	<b>Yes</b>	<b>No</b>
1	Therapist had patient read their Impact Statement.	
2	Discussed the meaning of the Impact Statement with focus on identifying Stuck Points.	
3	Therapist introduced the relationships between thoughts, feelings and behaviors.	
4	Therapist and Veteran reviewed the Identifying Emotions Handout	
5	Therapist introduced the A-B-C Worksheets and demonstrated how to complete them in session.	
6	Therapist assigned practice assignment to complete at least one A-B-C Worksheets each day.	
CPT type (with account vs. without account) indicated?		
<b>Additional Information (not used for adherence scoring)</b>		
<i>Record scores in the note.</i>		
PCL-5		
PHQ-9		
Working Alliance Inventory SR		
<i>Record time in session documented in templated note</i>		
<i>Record modification types (tailoring, integration of another treatment, drift)</i>		

<b>CPT with account</b>				
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>				
<b>Session 3</b>				
<b>Unique and Essential Elements</b>			<b>Yes</b>	<b>No</b>
1	a. Therapist reviewed homework (A-B-C Worksheets) with Veteran and helped further differentiate between thoughts and feelings.			
<b>OR</b> <i>(indicate 1a or 1b. Therapist gets credit if either is Yes)</i>				
	b. The Veteran did not complete any worksheets between sessions; therefore, the Veteran was asked to complete worksheets in session.			
2	Therapist helped the Veteran identify Stuck Points and add them to the Stuck Point Log			
3	Therapist introduced the trauma narrative and discussed the issues of avoidance.			
4	Therapist assigned: Trauma account and A-B-C Worksheets			
<b>Additional Information (not used for adherence scoring)</b>				
<i>Record scores in the note.</i>				
			PCL-5	
			PHQ-9	
			Working Alliance Inventory SR	
<i>Record time in session documented in templated note</i>				
<i>Record modification types (tailoring, integration of another treatment, drift)</i>				

<b>CPT with account</b>		
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>		
<b>Session 4</b>		
<b>Unique and Essential Elements</b>	<b>Yes</b>	<b>No</b>
1	Therapist reviewed the completed A-B-C Worksheets with Veteran.	
2a	2a. Therapist had patient read the Trauma Account aloud	
<b>OR</b> ( <i>indicate 2a or 2b. Therapist gets credit if either is Yes</i> )		
2b	If Veteran did not bring the assigned trauma account to session, the therapist asked the Veteran to recount the account in session and to complete an ABC Worksheet on avoidance	
3	Therapist helped the Veteran go through the trauma account to identify stuck points using Socratic Questioning	
4	Therapist helped Veteran connect feelings to thoughts.	
5	Therapist used Socratic questioning to identify stuck points from Account.	
6	Therapist assigned practice assignment to re-write trauma account and to continue using A-B-C Worksheets, completing at least one each day	
<b>Additional Information (not used for adherence scoring)</b>		
<i>Record scores in the note.</i>		
	PCL-5	
	PHQ-9	
	Working Alliance Inventory SR	
<i>Record time in session documented in templated note</i>		
<i>Record modification types (tailoring, integration of another treatment, drift)</i>		

<b>CPT with account</b>				
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>				
<b>Session 5</b>				
<b>Unique and Essential Elements</b>			<b>Yes</b>	<b>No</b>
1	Therapist reviewed completed A-B-C Worksheets with Veteran and helped the Veteran challenge distorted beliefs			
2	Therapist had patient read second Trauma Account aloud and helped Veteran identify additional stuck points.			
3	Therapist targeted cognitions about blame/guilt for cognitive restructuring using Socratic Questioning.			
4	Therapist introduced Challenging Questions to aid in challenging stuck points.			
5	Therapist assigned practice assignment: Therapist assigned stuck points to be challenged from the stuck point log. Veteran was asked to complete at least one Challenging Questions Worksheet each day.			
<b>Additional Information (not used for adherence scoring)</b>				
<i>Record scores in the note.</i>				
			PCL-5	
			PHQ-9	
			Working Alliance Inventory SR	
<i>Record time in session documented in templated note</i>				
<i>Record modification types (tailoring, integration of another treatment, drift)</i>				

<b>CPT with account</b>				
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>				
<b>Session 6</b>				
<b>Unique and Essential Elements</b>			<b>Yes</b>	<b>No</b>
1	Therapist and Veteran reviewed the Veteran's completed Challenging Questions Worksheet(s).			
2	Therapist helped the Veteran focus on stuck points related to self-blame and hindsight bias.			
3	Therapist introduced Patterns of Problematic Thinking Worksheet.			
4	Therapist assigned practice assignment: Complete one Problematic Thinking Patterns Worksheet each day.			
<b>Additional Information (not used for adherence scoring)</b>				
<i>Record scores in the note.</i>				
			PCL-5	
			PHQ-9	
			Working Alliance Inventory SR	
<i>Record time in session documented in templated note</i>				
<i>Record modification types (tailoring, integration of another treatment, drift)</i>				

<b>CPT with account</b>				
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>				
<b>Session 7</b>				
<b>Unique and Essential Elements</b>			<b>Yes</b>	<b>No</b>
1	Therapist and Veteran reviewed Veteran's completed Problem Thinking Patterns Worksheets.			
2	Therapist introduced Challenging Beliefs Worksheet as a method of self-guided cognitive restructuring.			
3	An example stuck point was used to illustrate the use of the worksheet.			
4	Therapist introduced the Safety Module.			
5.	Therapist assigned practice assignments: To complete one Challenging Belief Worksheet each day, with at least one of these addressing Safety			
<b>Additional Information (not used for adherence scoring)</b>				
<i>Record scores in the note</i>				
			PCL-5	
			PHQ-9	
			Working Alliance Inventory SR	
<i>Record time in session documented in templated note</i>				
<i>Record modification types (tailoring, integration of another treatment, drift)</i>				

**Appendix B. Cognitive Processing Therapy (without Account) Adherence Rating Forms**  
*Sessions 1 through 7*

<b>CPT without account</b>				
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>				
<b>Session 1 “Initial” (same as CPT with account)</b>				
<b>Unique and Essential Elements</b>			<b>Yes</b>	<b>No</b>
1	Provided an overview of PTSD symptoms, a cognitive explanation of the development and maintenance of PTSD and a rationale of CPT.			
2	Presented an overview of the 12-session treatment.			
3	Therapist introduced the concept of stuck points.			
4	Therapist assigned the practice assignment (impact statement/stuck point log).			
CPT type (with account vs. without account) indicated?				
<b>Additional Information (not used for adherence scoring)</b>				
<i>Record scores in the note.</i>				
PCL-5				
PHQ-9				
Working Alliance Inventory SR				
<i>Record time in session documented in templated note</i>				
<i>Record modification types (tailoring, integration of another treatment, drift)</i>				

<b>CPT without account</b>		
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>		
<b>Session 2 (same as CPT with account)</b>		
<b>Unique and Essential Elements</b>	<b>Yes</b>	<b>No</b>
1	Therapist had patient read their Impact Statement.	
2	Discussed the meaning of the Impact Statement with focus on identifying Stuck Points.	
3	Therapist introduced the relationships between thoughts, feelings and behaviors.	
4	Therapist and Veteran reviewed the Identifying Emotions Handout	
5	Therapist introduced the A-B-C Worksheets and demonstrated how to complete them in session.	
6	Therapist assigned practice assignment to complete at least one A-B-C Worksheets each day.	
CPT type (with account vs. without account) indicated?		
<b>Additional Information (not used for adherence scoring)</b>		
<i>Record scores in the note.</i>		
PCL-5		
PHQ-9		
Working Alliance Inventory SR		
<i>Record time in session documented in templated note</i>		
<i>Record modification types (tailoring, integration of another treatment, drift)</i>		

<b>CPT without account</b>				
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>				
<b>Session 3</b>				
<b>Unique and Essential Elements</b>			<b>Yes</b>	<b>No</b>
1	a.	Therapist reviewed homework (A-B-C Worksheets) with Veteran and helped further differentiate between thoughts and feelings.		
<b>OR</b> <i>(indicate 1a or 1b. Therapist gets credit if either is Yes)</i>				
	b.	The Veteran did not complete any worksheets between sessions; therefore, the Veteran was asked to complete worksheets in session.		
2		Therapist helped the Veteran identify Stuck Points and add them to the Stuck Point Log		
3		Therapist assigned: A-B-C Worksheets ( <i>NOTE: NO Trauma account assigned</i> )		
<b>Additional Information (not used for adherence scoring)</b>				
<i>Record scores in the note.</i>				
			PCL-5	
			PHQ-9	
			Working Alliance Inventory SR	
<i>Record time in session documented in templated note</i>				
<i>Record modification types (tailoring, integration of another treatment, drift)</i>				

<b>CPT without account</b>				
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>				
<b>Session 4</b>				
<b>Unique and Essential Elements</b>			<b>Yes</b>	<b>No</b>
1	Therapist reviewed completed A-B-C Worksheets with Veteran and helped the Veteran challenge distorted beliefs			
2	Therapist targeted cognitions about blame/guilt for cognitive restructuring using Socratic Questioning.			
3	Therapist introduced Challenging Questions to aid in challenging stuck points.			
4	Therapist assigned practice assignment: Therapist assigned stuck points to be challenged from the stuck point log. Veteran was asked to complete at least one Challenging Questions Worksheet each day.			
<b>Additional Information (not used for adherence scoring)</b>				
<i>Record scores in the note.</i>				
			PCL-5	
			PHQ-9	
			Working Alliance Inventory SR	
<i>Record time in session documented in templated note</i>				
<i>Record modification types (tailoring, integration of another treatment, drift)</i>				

<b>CPT without account</b>				
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>				
<b>Session 5</b>				
<b>Unique and Essential Elements</b>			<b>Yes</b>	<b>No</b>
1	Therapist and Veteran reviewed the Veteran's completed Challenging Questions Worksheet(s).			
2	Therapist helped the Veteran focus on stuck points related to self-blame and hindsight bias.			
3	Therapist introduced Patterns of Problematic Thinking Worksheet.			
4	Therapist assigned practice assignment: Complete one Problematic Thinking Patterns Worksheet each day.			
<b>Additional Information (not used for adherence scoring)</b>				
<i>Record scores in the note.</i>				
			PCL-5	
			PHQ-9	
			Working Alliance Inventory SR	
<i>Record time in session documented in templated note</i>				
<i>Record modification types (tailoring, integration of another treatment, drift)</i>				

<b>CPT without account</b>				
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session</i>				
<b>Session 6</b>				
<b>Unique and Essential Elements</b>			<b>Yes</b>	<b>No</b>
1	Therapist and Veteran reviewed Veteran's completed Problem Thinking Patterns Worksheets.			
2	Therapist introduced Challenging Beliefs Worksheet as a method of self-guided cognitive restructuring.			
3	An example stuck point was used to illustrate the use of the worksheet.			
4.	Therapist assigned practice assignments: To complete one Challenging Belief Worksheet each day			
<b>Additional Information (not used for adherence scoring)</b>				
<i>Record scores in the note.</i>				
			PCL-5	
			PHQ-9	
			Working Alliance Inventory SR	
<i>Record time in session documented in templated note</i>				
<i>Record modification types (tailoring, integration of another treatment, drift)</i>				

<b>CPT without account</b>					
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>					
<b>Session 7</b>					
<b>Unique and Essential Elements</b>			<b>Yes</b>	<b>No</b>	
1	Therapist and Veteran reviewed Veteran's completed Challenging Beliefs Worksheets to challenge stuck points and generate alternative beliefs				
2	Therapist assisted Veteran in challenging beliefs generated by Veteran in session using the Challenging Beliefs Worksheet.				
3	Therapist introduced the Safety Module. NOTE: You will find this in Additional Session Information				
4.	Therapist assigned practice assignments: To review the handout and complete one Challenging Belief Worksheet each day, with at least one of these addressing Safety				
<b>Additional Information (not used for adherence scoring)</b>					
<i>Record scores in the note.</i>					
			PCL-5		
			PHQ-9		
			Working Alliance Inventory SR		
<i>Record time in session documented in templated note</i>					
<i>Record modification types (tailoring, integration of another treatment, drift)</i>					

**Appendix C. Prolonged Exposure Adherence Rating Forms Sessions 1 through 7**

<b>PE</b>				
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>				
<b>Session 1</b>				
<b>Unique and Essential Elements</b>			<b>Yes</b>	<b>No</b>
1	Provided psychoeducation and introduced PE treatment for PTSD			
2	Presented treatment rationale, focusing on describing factors that maintain trauma-related fears and symptoms. Also described key elements of PE including imaginal and in-vivo exposure procedures			
3	Administered trauma interview and identified the traumatic memory that will be addressed during imaginal exposure.			
	Index Trauma:			
4	Therapist presented rationale for breathing retraining, taught breathing retraining, made breathing retraining tape for Veteran			
5	Therapist assigned homework (read rationale, breathing retraining 3x daily and audiotape session 1x)			
<b>Additional Information (not used for adherence scoring)</b>				
<i>Record scores in the note.</i>				
		PCL-5		
		PHQ-9		
		Working Alliance Inventory SR		
<i>Record time in session documented in templated note</i>				
<i>Record modification types (tailoring, integration of another treatment, drift)</i>				

<b>PE</b>			
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>			
<b>Session 2</b>			
<i>(Session 2 may be split into 2a and 2b. If this is the case, therapist will select this in the template and you should rate 2a and 2b separately (see rating sheet for 2a and 2b. 2a and 2b items are combined for scoring PE session 2)</i>			
<b>Unique and Essential Elements</b>		<b>Yes</b>	<b>No</b>
1	Therapist reviewed homework <i>(This is used for scoring item 1)</i>		
	Homework done? <i>(This is not part of the score for therapist adherence)</i>		
2	Therapist discussed common reactions to trauma with the patient.		
3	Viewed education tape		
4	Presented rationale for in vivo exposure.		
5	Therapist introduced the Subjective Units of Distress Scale (SUDS) and established anchor points.		
6	Therapist and the patient developed in vivo exposure hierarchy.		
	Primary themes of Veterans in-vivo hierarchy include:		
7	Therapist assigned in vivo exposure homework. <i>(NOTE: do not need to rate other homework)</i>		
<b>Additional Information (not used for adherence scoring)</b>			
<i>Record scores in the note.</i>			
		PCL-5	
		PHQ-9	
		Working Alliance Inventory SR	
<i>Record time in session documented in templated note</i>			
<i>Record modification types (tailoring, integration of another treatment, drift)</i>			

<b>PE</b>			
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>			
<b>Session 2a</b>			
<b>Unique and Essential Elements</b>		<b>Yes</b>	<b>No</b>
1	Therapist reviewed homework <i>(This is used for scoring item 1)</i>		
	Homework done? <i>(This is not part of the score for therapist adherence)</i>		
2	Therapist discussed common reactions to trauma with the patient.		
3	Viewed education tape		
4	Therapist assigned homework.		
<b>Additional Information (not used for adherence scoring)</b>			
<i>Record scores in the note.</i>			
	PCL-5		
	PHQ-9		
	Working Alliance Inventory SR		
	<i>Record time in session documented in templated note</i>		
<i>Record modification types (tailoring, integration of another treatment, drift)</i>			

<b>PE</b>				
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>				
<b>Session 2b</b>				
<b>Unique and Essential Elements</b>			<b>Yes</b>	<b>No</b>
1	Therapist reviewed homework <i>(This is used for scoring item 1)</i>			
	Homework done? <i>(This is not part of the score for therapist adherence)</i>			
2	Presented rationale for in vivo exposure.			
3	Therapist introduced the Subjective Units of Distress Scale (SUDS) and established anchor points.			
4	Therapist and the patient developed in vivo exposure hierarchy.			
	Primary themes of Veterans in-vivo hierarchy include:			
5	Therapist assigned in vivo exposure homework. <i>(NOTE: do not need to rate other homework)</i>			
<b>Additional Information (not used for adherence scoring)</b>				
<i>Record scores in the note.</i>				
		PCL-5		
		PHQ-9		
		Working Alliance Inventory SR		
		<i>Record time in session documented in templated note</i>		
<i>Record modification types (tailoring, integration of another treatment, drift)</i>				

<b>PE</b>		
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>		
<b>Session 3</b>		
	<b>Unique and Essential Elements</b>	<b>Yes</b> <b>No</b>
1	Therapist reviewed homework and gave feedback	
2	Therapist explained rationale for imaginal exposure.	
3	Therapist gave the patient instructions to carry out the imaginal exposure (revising and recounting the traumatic memory) in the session.	
4	Completed first imaginal exposure with ___ repetitions for approximately 60 minutes.	
5	Processed the imaginal exposure (revising and recounting) experience with the patient.	
6	Therapist assigned homework (audiotape of session 1x, audiotape of imaginal daily, completion of assigned in-vivo exercise, breathing retraining).	
<b>Additional Information (not used for adherence scoring)</b>		
<i>Record scores in the note.</i>		
	PCL-5	
	PHQ-9	
	Working Alliance Inventory SR	
<i>Record time in session documented in templated note</i>		
<i>Record modification types (tailoring, integration of another treatment, drift)</i>		

<b>PE</b>				
<i>Indicate the presence (yes) or absence (no) of each of the <b>unique and essential elements</b> included in the templated chart note specific to each session. If a note is out of sequence, check and rate intervening untemplated notes. If a protocol session is repeated (e.g., more than one session of the same protocol number), rate each instance of the protocol session.</i>				
<b>Session 4,5,6,7</b>				
<b>Unique and Essential Elements</b>			<b>Yes</b>	<b>No</b>
1	Therapist reviewed homework and gave feedback			
2	Revisited trauma through imaginal exposure for 30-45 minutes.			
	Number repetitions of the memory:			
3	Worked toward hot spots.			
	Veteran identified ___ hot spots.			
4	Worked on hot spots.			
5	Processed the patient's reactions to the imaginal exposure (revising and recounting)			
6	Therapist assigned in-vivo and imaginal exposure homework as well as other homework.			
<b>Additional Information (not used for adherence scoring)</b>				
<i>Record scores in the note.</i>				
		PCL-5		
		PHQ-9		
		Working Alliance Inventory SR		
<i>Record time in session documented in templated note</i>				
<i>Record modification types (tailoring, integration of another treatment, drift)</i>				