

FBT ONGOING TRAINING MEETING

___1. Assure providers' materials accessible

- Audio recordings of meetings
- Reports needing supervisor signature (if applicable)
- Intervention protocols reviewed for others' to assist protocol adherence (if performed)

___2. Initial brief presentation of all cases

- ___a. Each provider reports:
- # of clients on caseload & of clients seen since last ongoing training
 - # of clients unable to be contacted through engagement calls & steps to assure future engagement calls w/ each client that was unable to be reached
 - Incidents needing to be addressed immediately

___3. Full presentation of select cases

- ___a. Supervisor decides, w/ providers' input, which cases are reviewed first.
 ___b. Cases are reviewed according to the following:

<input type="checkbox"/> <u>If new case:</u>	<input type="checkbox"/> <u>If case has been presented before:</u>
1. Client demographics	1. Client demographics (& idiosyncratic info. to jar memory)
2. Reason for referral	2. Reason for referral
3. Strengths from assessment	3. Meeting number
4. Goal-worthy areas from assessment	4. Approximate % of scheduled meetings attended
5. Conceptualization of case (i.e. how probs. developed, how maintained)	5. Who in meeting, & how to get more people engaged in future meetings
6. Intervention plan	6. Attempts to contact client & family since last meeting
7. Plans for next meeting	7. Interventions completed
8. Review of audio recording (optional)	8. Non-attendance issues if any
a. Supervisor determines what reviewed	a. probs that may have influenced non-attendance
9. Review of client records (optional)	b. plans to increase future attendance
	9. Problems that occurred in last meeting, if any
	10. Positive effects noted
	11. Intervention plan for next meeting
	12. Review of audio recording or role-play (optional)
	a. Sup. determines what reviewed.
	13. Review of client records (optional)

___4. Protocol adherence

- ___a. The provider assigned to review protocol adherence in last ongoing training provides feedback:
- ___1. Provide the % of steps completed.
 - ___2. Review strengths relevant to therapeutic style & methods of assuring adherence.
 - ___3. Review what can be done to enhance protocol adherence.
- ___b. Assign a provider with most no shows, lowest protocol adherence, or demonstrating training need to review another's audio-recording for protocol adherence.
- ___1. Record who was assigned review in Protocol Adherence Form.
- ___c. Providers indicate/verify accessibility of session audio-tapes obtained during past week.