

Оценка соблюдения принципов терапии  
Унифицированный протокол трансдиагностического лечения эмоциональных расстройств

**Установочный модуль: Введение**

ФИО: \_\_\_\_\_

ФИО эксперта: \_\_\_\_\_

Дата: \_\_\_\_\_

Дата оценки: \_\_\_\_\_

**I. Обзор текущих жалоб у пациента**

Задача для этой части сессии — лучше понять проблемы пациента.

Соблюдение принципов:

Делал ли терапевт следующее (отметить только наличие или отсутствие):

☐ Да ☐ Нет (1) Обзор прелылуших диагнозов с опорой на оценку со стороны самого пациента.

☐ Да ☐ Нет (2) Выяснение специфических для этого пациента симптомов и их влияния на жизнь пациента.

**II. Знакомство с программой терапии**

Задача для этой части сессии — познакомить пациента с унифицированным протоколом трансдиагностического лечения эмоциональных расстройств.

☐ Да ☐ Нет (3) Познакомил пациента с концептуализацией.

☐ Да ☐ Нет (4) Помог пациенту понять основные задачи терапии и то, как выполнение этих задач поможет разобраться с тревогой и проблемами настроения.

☐ Да ☐ Нет (5) Обзор основных навыков, которым пациент обучится в ходе лечения.

Задача для этой части сессии — познакомить пациента с общим форматом терапии, включая характер и важность постоянной оценки и практики между сессиями.

Соблюдение принципов:

Делал ли терапевт следующее (отметить только наличие или отсутствие)

☐ Да ☐ Нет (6) Объяснил роль терапевта (совместное исследование).

- ☐ Да ☐ Нет (7) Обзор структуры сессии (включая число и продолжительность).
- ☐ Да ☐ Нет (8) Обзор важности постоянной оценки происходящего (как терапевт и клиент могут обозначить проблему, отследить улучшение и скорректировать лечение).
- ☐ Да ☐ Нет (9) Обсуждение важности межсессионных практик (тренировка навыков, применение в «реальной жизни»).
- 

Задачи для этой части сессии — подвести базу под самонаблюдение и объяснить, как использовать Overall Anxiety Severity and Interference Scale (OASIS), Overall Depression Severity and Interference Scale (ODSIS), и Дневник улучшений, чтобы фиксировать происходящие эмоциональные переживания и отслеживать прогресс в ходе лечения.

Соблюдение принципов:

Делал ли терапевт следующее (отметить только наличие или отсутствие):

- ☐ Да ☐ Нет (10) Подвел базу под запись эмоциональных переживаний на регулярной основе.
- ☐ Да ☐ Нет (11) Познакомил с OASIS, ODSIS и Дневником улучшений.

V. Домашнее задание:

- 
- ☐ Да ☐ Нет (12) Выдал материалы и задания, соответствующие данной сессии.

## Установочный модуль: Введение

### Продолжительность:

\_\_\_\_\_ (1) Продолжительность сессии 1

☐ Да    ☐ Нет    (1a) 45—75 минут

### Непредусмотренные приемы:

(2) Терапевт использовал приемы, которые не включены в это пособие или общую модель терапии?

☐ Да            ☐ Нет

(2a) Если да, опишите:

\_\_\_\_\_

### Итоговая оценка:

(3) \_\_\_\_\_ % — рассчитайте долю *применимых* пунктов, которые были выполнены, включая пункт «Продолжительность сессии» на этой странице.

### Дополнительные критерии:

(4) Оцените качество общения с пациентами (тепло, открытость, уважение, юмор и пр.):

0	1	2	3	4	5
Плохо	На грани	Приемлемо	Достаточно	Хорошо	Отлично

(5) Оцените, до какой степени терапевт включался во взаимодействие с пациентом и пытался вовлечь в лечение (напр., сократические вопросы, проверка понимания и усвоения, совместная работа над заданием, учет мнения и предложений пациента, обращение к подходящим для пациента примерам):

0	1	2	3	4	5
Плохо	На грани	Приемлемо	Достаточно	Хорошо	Отлично

(6) Оцените, как терапевт справился с сессией (напр., удержание пациента над заданием, эффективное использование времени, логичная последовательность, мягкие переходы)

0	1	2	3	4	5
Плохо	На грани	Приемлемо	Достаточно	Хорошо	Отлично

(7) Оцените, насколько терапевт понимает принципы лечения и способен донести информацию на том уровне, чтобы ее понял пациент.

0	1	2	3	4	5
Плохо	На грани	Приемлемо	Достаточно	Хорошо	Отлично

**Общая оценка сессии:**

(8) Пожалуйста, дайте сессии общую оценку, приняв во внимание, насколько терапевту удалось преподнести ключевые моменты лечения и выполнить основные задачи.

0	1	2	3	4	5
Плохо	На грани	Приемлемо	Достаточно	Хорошо	Отлично

(9) **Успешно/ безуспешно:**

☐ Успешно            ☐ Безуспешно

Важно: «Успешно» = Сессия длилась как минимум 30 минут. Процент соблюдения принципов — 80 или выше, сессия получила оценку 3 и выше.

*Дополнительные комментарии эксперта:*

## Сессия 1: Дополнительные критерии

### **1. Насколько пациент воспринимал терапевта и его/ее действия во время сессии?**

Оценка основывается на **словесном** поведении во время сессии. Оценка 0 выставляется, если пациент открыто сопротивлялся (напр., отказывался говорить, делиться информацией или примерами, ругал терапевта или метод/пособие или демонстрировал низкую мотивацию выполнять домашнее задание). Оценка 4 выставляется, если пациент готов воспринимать информацию и действия терапевта (словесно соглашается, отмечает, что пригодится информация, навыки или пособие, или выражает готовность выполнять домашнее задание изо всех сил). Оценка 2 выставляется, если пациент говорит безразличным тоном или вообще не проговаривает, интересно ему или нет (напр., часто использует минимальные средства выражения, такие как «ага», без какой-либо заметной окраски).

0	1	2	3	4
Вообще не воспринимает	Едва ли воспринимает	Нейтрально (безразличен)	Средне восприимчив	Очень восприимчив

### **2. Пожалуйста, оцените, насколько пациент усвоил информацию:**

Оценка основывается непосредственно на **словесном** поведении по время сессии (укажите Н/Б, если нет никакой информации). Особое внимание следует уделить информации, полученной во время обзора домашней работы в начале сессии. Показатели усвоения: правильное использование терминов, уместные вопросы по поводу принципов, уместные/соответствующие ответы и примеры. Показатели недостатка усвоения: недоумение относительно идеи или смысла упражнения, когда его ясно описали; неспособность ответить на простые вопросы или привести уместные примеры; утверждения, идущие в разрез с принципами терапии (напр.: «Я пытался мысли более позитивно, как мы и обсуждали»); общие слова, такие как: «Я просто не понимаю». Сессии, где пациент усвоил отдельные принципы, но упускает другие, могут получить оценку 1, 2, или 3.

Н/Б	0	1	2	3	4
Невозможно оценить, так как недостаточно информации	Полное отсутствие усвоения принципов	Ограниченное усвоение	Приемлемый уровень усвоения	Умеренно высокий уровень усвоения	Наивысший уровень усвоения

### 3. Пожалуйста, оцените уровень усвоения навыков:

Оценка основывается на **словесном** поведении по время сессии (укажите Н/Б, если нет никакой информации). Особое внимание следует уделить информации, полученной во время обзора домашней работы в начале сессии, а также отработке навыков в ходе сессии (напр., когнитивное переосмысление). Показатели усвоения: способность самостоятельно применять навыки в соответствующем контексте; способность применять навыки гибко (ad hoc); многократное использования навыков (мониторинг за день). Показатели недостаточного усвоения: никаких попыток применить навыки в течение недели; неспособность самостоятельно применять навыки в соответствующем контексте; неспособность применять навыки гибко (ad hoc). Попытки применять навыки (лишь отчасти успешно) или недостаток самостоятельности (напр., наблюдения по двум дням вместо недели) получают оценку 1, 2 или 3.

Н/Б	0	1	2	3	4
Невозможно оценить, так как недостаточно информации	Полное отсутствие усвоения, неспособность самостоятельно применять навыки.	Ограниченное усвоение	Приемлемый уровень усвоения	Умеренно высокий уровень усвоения	Наивысший уровень усвоения — способность самостоятельно применять навыки.

Therapist Adherence Rating Scale  
Unified Protocol for Treatment of Emotional Disorders

**Модуль 1: Создание мотивации для включенности в терапию**

ФИО: \_\_\_\_\_

Эксперт: \_\_\_\_\_

Дата:  
1.1 \_\_\_\_\_

Дата оценки: \_\_\_\_\_

**I. Создание мотивации:**

Задача этого модуля — помочь пациенту взрастить мотивацию, чтобы добиться большей включенности в терапию и лучшего результата.

**Соблюдение принципов:**

Делал ли терапевт следующее (отметить только наличие или отсутствие):

- ☐ Да   ☐ Нет   (1) Объяснил, что такое мотивация и как она важна для результата.
- ☐ Да   ☐ Нет   (2) Помог пациенту оценить «за» и «против» изменений или стабильности.
- ☐ Да   ☐ Нет   (3) Помог пациенту очертить задачи терапии и посильные шаги на пути к их решению.

**II. Домашнее задание:**

Делал ли терапевт следующее (отметить только наличие или отсутствие):

- ☐ Да   ☐ Нет   (4) Выдал материалы и задания, соответствующие данной сессии.
- Примеры:
- Объяснить, как пользоваться OASIS и ODSIS и оценивать степень тревоги и депрессии с помощью Дневника улучшений.
  - Если не успели на сессии, попросить пациента заполнить Лист балансировки решений, обозначив «за» и «против» поведенческих изменений.

Если не успели на сессии, попросить пациента заполнить Лист целеполагания в терапии, разработанный для того, чтобы пациенты смогли представить ясные и конкретные задачи для поведенческих изменений.

## **Module 1: Overall Rating**

### **Session Duration:**

\_\_\_\_\_ (1) Duration of session 1.1

☐ Yes   ☐ No   (1a) Session duration is between 45-75 minutes for all sessions

### **Disallowed interventions:**

(2) Therapist implemented interventions that are not included in this manual or model of treatment?

☐ Yes   ☐ No

(2a) If Yes, describe:

\_\_\_\_\_

### **Adherence Summary Score:**

(3) \_\_\_\_\_ % Overall Adherence- calculate the percentage of *applicable* items that were completed, including the session duration item at the top of this page

### **Additional Therapist Ratings:**

(4) Rate the quality of the therapist's rapport with the patient (e.g. warmth, openness, respect, humor):

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(5) Rate the extent to which the therapist engaged in interactive exchange with patient and tried to involve them in the treatment (e.g. use of Socratic questioning, checked the patient's understating or recall of information, worked collaboratively on assignments, sought the patient's opinions or suggestions, used patient relevant examples):

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(6) Rate the therapist's ability to manage the session (e.g. kept the patient on task, used time effectively, proceeded logically, made smooth transitions)

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(7) Rate the therapist understanding of treatment concepts and their ability to deliver information at a level the patient can understand.

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent



**Overall Session Rating:**

(8) Please provide an overall rating for this treatment session, taking into consideration how effectively the therapist presented key treatment elements and met the primary goals of the session.

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(9) **Pass/ Fail:**

☐ Pass      ☐ Fail

Note: “Pass” = The session duration was at least 30 minutes. Overall adherence is 80% or greater and/ or the session was rated as being at least “adequate.”

*Write any additional comments below:*

## **Module 1: Additional Expert Rater Items**

### **1. How receptive was the patient to the therapist and his/her interventions in this session?**

This rating should be based directly on the patient's **verbal** behavior in the session. A rating of "0" should be given if the patient is openly resistant to the therapist and her/his interventions (e.g., refuses to talk, provide information or examples, denigrates the therapist or the treatment/workbook, or expresses low likelihood of completing homework). A rating of "4" should be given if the patient is very open to the information being provided and the therapist's interventions (expresses verbal agreement, remarks on the helpfulness of the information being provided, the skill being taught, or the workbook, or expresses intention to give the homework assignment their best effort. A rating of "2" can be given when the patient sounds indifferent or does not verbalize any interest or disinterest in what is being discussed (e.g., frequent use of minimal verbal responses, such as "okay" without any noticeable affect).

2.	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
	Very Unreceptive	Moderately Unreceptive	Neutral (indifferent)	Moderately Receptive	Very Receptive

### **Please rate the patient's level of perceived knowledge acquisition:**

This rating should be based directly on the patient's **verbal** behavior in the session (rate N/A if no information is provided). Particular attention should be given to the information gathered during the homework review at the beginning of the session. Specific indicators of knowledge acquisition include: appropriate use of treatment terms/concepts, appropriate questions related to concepts, and appropriate/relevant responses and examples. A lack of knowledge of treatment concepts include: confusion about a concept or the function of an exercise after it was clearly described; inability to answer simple questions or provide examples related to concepts; statements that are contradictory to the concept (e.g., "I tried to make myself think more positively about my situation like we talked about"); obvious statements, such as "I just don't get it." Sessions in which the patient clearly exhibits some knowledge of a concept(s), while a lack of knowledge of others, would be rated either 1, 2, or 3.

<b>N/A</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Could not be rated due to lack of information - no indication in either direction	Complete lack of knowledge of treatment concepts.	Limited degree of knowledge of treatment concepts	Sufficient degree of knowledge of treatment concepts	Moderately high degree of knowledge of treatment concepts	Highest degree of knowledge of treatment concepts.

**3. Please rate the level of perceived skill acquisition:**

This rating should be based directly on the patient's verbal behavior in the session (rate N/A if no information is provided). Particular attention should be given to the information gathered during the homework review at the beginning of the session as well as in-session practice of treatment skills (e.g., cognitive reappraisal). Specific indicators of skill acquisition include: ability to use skill(s) independently and in appropriate contexts; ability to use skill(s) flexibly (ad hoc); evidence of repeated practice of skill(s) (can include daily monitoring). Specific indicators of a lack of skill acquisition include: no attempt(s) to practice skill during the week; inability to use skill(s) independently and in appropriate contexts; inability to use skill(s) flexibly (ad hoc). An attempt to practice a skill (with only partial success) or limited independent practice (e.g., monitored and recorded two days instead of everyday) would be rated either a 1, 2, or 3.

<b>N/A</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Could not be rated due to lack of information - no indication in either direction	Complete lack of skill acquisition- unable to practice/employ skills/strategies independently.	Limited degree of skill acquisition	Sufficient degree of skill acquisition	Moderately high degree of skill acquisition	Highest degree of skill acquisition - able to competently practice/employ skills/strategies independently.

Therapist Adherence Rating Scale  
Unified Protocol for Treatment of Emotional Disorders

**Module 2: Психобразование и оценка эмоционального опыта**

Subject ID: \_\_\_\_\_

Rater Initials: \_\_\_\_\_

Session Date(s):

Date Rated: \_\_\_\_\_

2.1 \_\_\_\_\_

2.2 \_\_\_\_\_

**I. Обзор д/з:** \_\_\_\_\_

Делал ли терапевт следующее (отметить только наличие или отсутствие):

- ☐ Yes ☐ No (1) Для всех сессий в модуле: обзор OASIS, ODSIS, а также Дневника \_\_\_\_\_  
улучшений
- ☐ Yes ☐ No (2) Обзор д/з и оценка сложностей в заполнении форм
- ☐ Yes ☐ No ☐ N/A (3) Если пациент некомплаентный, разбор лучших способов  
добиться выполнения д/з

**II. Часть 1- Эмоциональная осведомленность:**

Цель этой часть модуля — дать представление о: функциональной природе эмоций,  
Трехкомпонентной модели и эмоционально обусловленном поведении (ЭОП).

Делал ли терапевт следующее (отметить только наличие или отсутствие)

- ☐ Yes ☐ No (4) Помог пациенту понять, как важная функция эмоций.
- ☐ Yes ☐ No (5) Познакомил с понятием об *эмоционально обусловленном поведении* (ЭОП).
- ☐ Yes ☐ No (6) Познакомил с Трехкомпонентной моделью и помог пациенту начать  
идентифицировать свои состояния в ее рамках

**Часть 2- Осознание и отслеживание эмоционального ответа:**

Цель этой часть модуля — дать представление об АРКе  
эмоционального опыта и выученных реакций.

Делал ли терапевт следующее (отметить только наличие или отсутствие)

- ☐ Yes ☐ No (7) Познакомил с АРКой эмоционального опыта.
- ☐ Yes ☐ No (8) Обсудил выученные реакции.

III. Домашнее задание: \_\_\_\_\_

Делал ли терапевт следующее (отметить только наличие или отсутствие) :

☐ Yes   ☐ No   (9) Выдал материалы и задания, соответствующие данной сессии.

Например:

- Объяснил, как пользоваться OASIS и ODSIS и оценивать степень тревоги и депрессии с помощью Дневника улучшений.
- Попросил пациента разложить хотя бы одно переживание по Трехкомпонентной модели \_\_\_\_\_
- Попросил пациента использовать формы Мониторинга эмоций и ЭОП \_\_\_\_\_

## **Module 2: Overall Rating**

### **Session Duration:**

\_\_\_\_\_ (1) Duration of session 2.1  
\_\_\_\_\_ (1a) Duration of session 2.2

☐ Yes   ☐ No   (1b) Session duration is between 45-75 minutes for all sessions

### **Disallowed interventions:**

(2) Therapist implemented interventions that are not included in this manual or model of treatment?

☐ Yes   ☐ No

(2a) If Yes, describe: \_\_\_\_\_

### **Adherence Summary Score:**

(3) \_\_\_\_\_ % Overall Adherence- calculate the percentage of *applicable* items that were completed, including the session duration item at the top of this page

### **Additional Therapist Ratings:**

(4) Rate the quality of the therapist's rapport with the patient (e.g. warmth, openness, respect, humor):

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(5) Rate the extent to which the therapist engaged in interactive exchange with patient and tried to involve them in the treatment (e.g. use of Socratic questioning, checked the patient's understating or recall of information, worked collaboratively on assignments, sought the patient's opinions or suggestions, used patient relevant examples):

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(6) Rate the therapist's ability to manage the session (e.g. kept the patient on task, used time effectively, proceeded logically, made smooth transitions)

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(7) Rate the therapist understanding of treatment concepts and their ability to deliver information at a level the patient can understand.

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

**Overall Session Rating:**

(8) Please provide an overall rating for this treatment session, taking into consideration how effectively the therapist presented key treatment elements and met the primary goals of the session.

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(9) **Pass/ Fail:**

☐ Pass      ☐ Fail

Note: “Pass” = The session duration was at least 30 minutes. Overall adherence is 80% or greater and/ or the session was rated as being at least “adequate.”

*Write any additional comments below:*

## **Module 2: Additional Expert Rater Items**

### **1. How receptive was the patient to the therapist and his/her interventions in this session?**

This rating should be based directly on the patient's **verbal** behavior in the session. A rating of "0" should be given if the patient is openly resistant to the therapist and her/his interventions (e.g., refuses to talk, provide information or examples, denigrates the therapist or the treatment/workbook, or expresses low likelihood of completing homework). A rating of "4" should be given if the patient is very open to the information being provided and the therapist's interventions (expresses verbal agreement, remarks on the helpfulness of the information being provided, the skill being taught, or the workbook, or expresses intention to give the homework assignment their best effort. A rating of "2" can be given when the patient sounds indifferent or does not verbalize any interest or disinterest in what is being discussed (e.g., frequent use of minimal verbal responses, such as "okay" without any noticeable affect).

<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Very Unreceptive	Moderately Unreceptive	Neutral (indifferent)	Moderately Receptive	Very Receptive

### **2. Please rate the patient's level of perceived knowledge acquisition:**

This rating should be based directly on the patient's **verbal** behavior in the session (rate N/A if no information is provided). Particular attention should be given to the information gathered during the homework review at the beginning of the session. Specific indicators of knowledge acquisition include: appropriate use of treatment terms/concepts, appropriate questions related to concepts, and appropriate/relevant responses and examples. A lack of knowledge of treatment concepts include: confusion about a concept or the function of an exercise after it was clearly described; inability to answer simple questions or provide examples related to concepts; statements that are contradictory to the concept (e.g., "I tried to make myself think more positively about my situation like we talked about"); obvious statements, such as "I just don't get it." Sessions in which the patient clearly exhibits some knowledge of a concept(s), while a lack of knowledge of others, would be rated either 1, 2, or 3.

<b>N/A</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Could not be rated due to lack of information - no indication in either direction	Complete lack of knowledge of treatment concepts.	Limited degree of knowledge of treatment concepts	Sufficient degree of knowledge of treatment concepts	Moderately high degree of knowledge of treatment concepts	Highest degree of knowledge of treatment concepts.



**3. Please rate the level of perceived skill acquisition:**

This rating should be based directly on the patient's verbal behavior in the session (rate N/A if no information is provided). Particular attention should be given to the information gathered during the homework review at the beginning of the session as well as in-session practice of treatment skills (e.g., cognitive reappraisal). Specific indicators of skill acquisition include: ability to use skill(s) independently and in appropriate contexts; ability to use skill(s) flexibly (ad hoc); evidence of repeated practice of skill(s) (can include daily monitoring). Specific indicators of a lack of skill acquisition include: no attempt(s) to practice skill during the week; inability to use skill(s) independently and in appropriate contexts; inability to use skill(s) flexibly (ad hoc). An attempt to practice a skill (with only partial success) or limited independent practice (e.g., monitored and recorded two days instead of everyday) would be rated either a 1, 2, or 3.

<b>N/A</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Could not be rated due to lack of information - no indication in either direction	Complete lack of skill acquisition- unable to practice/employ skills/strategies independently.	Limited degree of skill acquisition	Sufficient degree of skill acquisition	Moderately high degree of skill acquisition	Highest degree of skill acquisition - able to competently practice/employ skills/strategies independently.

Therapist Adherence Rating Scale  
Unified Protocol for Treatment of Emotional Disorders

**Module 3: Тренировка эмоциональной осведомленности**

Subject ID: \_\_\_\_\_

Rater Initials: \_\_\_\_\_

Session Date(s):

Date Rated: \_\_\_\_\_

3.1 \_\_\_\_\_

3.2 \_\_\_\_\_

**I. Обзор д/з:** \_\_\_\_\_

Делал ли терапевт следующее (отметить только наличие или отсутствие):

☐ Yes ☐ No (1) Для всех сессий в модуле: обзор OASIS, ODSIS, а также Дневника \_\_\_\_\_  
улучшений

☐ Yes ☐ No (2) Обзор д/з и оценка сложностей в заполнении форм

☐ Yes ☐ No ☐ N/A (3) Если пациент некомплаентный, разбор лучших способов  
добиться выполнения д/з

**II. Emotional Awareness Training:**

The goal of this portion of the module is to have the patient practice nonjudgmental, present-focused awareness in an emotional experience.

Did the therapist do the following (indicate only presence or absence):

☐ Yes ☐ No (4) Introduce nonjudgmental emotion awareness.

☐ Yes ☐ No (5) Introduce present-focused awareness.

☐ Yes ☐ No (6) Conduct an in-session emotion awareness exercise.

☐ Yes ☐ No (7) Have the patient practice techniques using a musical mood induction.

**III. Homework Assignment:**

Did the therapist do the following (indicate only presence or absence):

☐ Yes ☐ No (8) Выдал материалы и задания, соответствующие данной сессии.  
Например:

- Объяснил, как пользоваться OASIS и ODSIS и оценивать степень тревоги и депрессии с помощью Дневника улучшений.
  - Instruct the patient to continue using the Monitoring Emotions and EDBs in Context form.
- \_\_\_\_\_

- Have the patient practice nonjudgmental, present-focused awareness using the exercise and record experiences on the Nonjudgmental Present-Focused Emotion Awareness form.
- Have the patient practice present-focused awareness and record on the Anchoring in the Present form.
- Ask the patient to listen to two songs in his or her own music collection that have strong personal meaning associated with them and record reactions to the songs on the Mood Induction Recording form.

### **Module 3: Overall Rating**

#### **Session Duration:**

\_\_\_\_\_ (1) Duration of session 3.1  
\_\_\_\_\_ (1a) Duration of session 3.2

☐ Yes   ☐ No   (1b) Session duration is between 45-75 minutes for all sessions

#### **Disallowed interventions:**

(2) Therapist implemented interventions that are not included in this manual or model of treatment?

☐ Yes   ☐ No

(2a) If Yes, describe: \_\_\_\_\_

#### **Adherence Summary Score:**

(3) \_\_\_\_\_ % Overall Adherence- calculate the percentage of *applicable* items that were completed, including the session duration item at the top of this page

#### **Additional Therapist Ratings:**

(4) Rate the quality of the therapist's rapport with the patient (e.g. warmth, openness, respect, humor):

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(5) Rate the extent to which the therapist engaged in interactive exchange with patient and tried to involve them in the treatment (e.g. use of Socratic questioning, checked the patient's understating or recall of information, worked collaboratively on assignments, sought the patient's opinions or suggestions, used patient relevant examples):

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(6) Rate the therapist's ability to manage the session (e.g. kept the patient on task, used time effectively, proceeded logically, made smooth transitions)

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(7) Rate the therapist understanding of treatment concepts and their ability to deliver information at a level the patient can understand.

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

**Overall Session Rating:**

(8) Please provide an overall rating for this treatment session, taking into consideration how effectively the therapist presented key treatment elements and met the primary goals of the session.

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(9) **Pass/ Fail:**

☐ Pass      ☐ Fail

Note: “Pass” = The session duration was at least 30 minutes. Overall adherence is 80% or greater and/ or the session was rated as being at least “adequate.”

*Write any additional comments below:*

### **Module 3: Additional Expert Rater Items**

#### **1. How receptive was the patient to the therapist and his/her interventions in this session?**

This rating should be based directly on the patient's **verbal** behavior in the session. A rating of "0" should be given if the patient is openly resistant to the therapist and her/his interventions (e.g., refuses to talk, provide information or examples, denigrates the therapist or the treatment/workbook, or expresses low likelihood of completing homework). A rating of "4" should be given if the patient is very open to the information being provided and the therapist's interventions (expresses verbal agreement, remarks on the helpfulness of the information being provided, the skill being taught, or the workbook, or expresses intention to give the homework assignment their best effort. A rating of "2" can be given when the patient sounds indifferent or does not verbalize any interest or disinterest in what is being discussed (e.g., frequent use of minimal verbal responses, such as "okay" without any noticeable affect).

<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Very Unreceptive	Moderately Unreceptive	Neutral (indifferent)	Moderately Receptive	Very Receptive

#### **2. Please rate the patient's level of perceived knowledge acquisition:**

This rating should be based directly on the patient's **verbal** behavior in the session (rate N/A if no information is provided). Particular attention should be given to the information gathered during the homework review at the beginning of the session. Specific indicators of knowledge acquisition include: appropriate use of treatment terms/concepts, appropriate questions related to concepts, and appropriate/relevant responses and examples. A lack of knowledge of treatment concepts include: confusion about a concept or the function of an exercise after it was clearly described; inability to answer simple questions or provide examples related to concepts; statements that are contradictory to the concept (e.g., "I tried to make myself think more positively about my situation like we talked about"); obvious statements, such as "I just don't get it." Sessions in which the patient clearly exhibits some knowledge of a concept(s), while a lack of knowledge of others, would be rated either 1, 2, or 3.

<b>N/A</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Could not be rated due to lack of information - no indication in either direction	Complete lack of knowledge of treatment concepts.	Limited degree of knowledge of treatment concepts	Sufficient degree of knowledge of treatment concepts	Moderately high degree of knowledge of treatment concepts	Highest degree of knowledge of treatment concepts.

**3. Please rate the level of perceived skill acquisition:**

This rating should be based directly on the patient's verbal behavior in the session (rate N/A if no information is provided). Particular attention should be given to the information gathered during the homework review at the beginning of the session as well as in-session practice of treatment skills (e.g., cognitive reappraisal). Specific indicators of skill acquisition include: ability to use skill(s) independently and in appropriate contexts; ability to use skill(s) flexibly (ad hoc); evidence of repeated practice of skill(s) (can include daily monitoring). Specific indicators of a lack of skill acquisition include: no attempt(s) to practice skill during the week; inability to use skill(s) independently and in appropriate contexts; inability to use skill(s) flexibly (ad hoc). An attempt to practice a skill (with only partial success) or limited independent practice (e.g., monitored and recorded two days instead of everyday) would be rated either a 1, 2, or 3.

<b>N/A</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Could not be rated due to lack of information - no indication in either direction	Complete lack of skill acquisition- unable to practice/employ skills/strategies independently.	Limited degree of skill acquisition	Sufficient degree of skill acquisition	Moderately high degree of skill acquisition	Highest degree of skill acquisition - able to competently practice/employ skills/strategies independently.

Therapist Adherence Rating Scale  
Unified Protocol for Treatment of Emotional Disorders

**Module 4: Когнитивная оценка и переоценка**

Subject ID: \_\_\_\_\_

Rater Initials: \_\_\_\_\_

Session Date(s):

Date Rated: \_\_\_\_\_

4.1 \_\_\_\_\_

4.2 \_\_\_\_\_

**I. Обзор д/з:** \_\_\_\_\_

Делал ли терапевт следующее (отметить только наличие или отсутствие):

- ☐ Yes ☐ No (1) Для всех сессий в модуле: обзор OASIS, ODSIS, а также Дневника улучшений
- ☐ Yes ☐ No (2) Обзор д/з и оценка сложностей в заполнении форм
- ☐ Yes ☐ No (3) Если пациент некомплаентный, разбор лучших способов  
☐ N/A добиться выполнения д/з

**II. Когнитивная оценка и переоценка:**

Цель этой части модуля — помочь пациенту увидеть, как мысли могут влиять на эмоциональное переживание

Делал ли терапевт следующее (отметить только наличие или отсутствие)

- ☐ Yes ☐ No (4) Объяснил отношения взаимовлияния между мыслями и эмоциями.
- ☐ Yes ☐ No (5) Познакомил с понятием автоматической оценки (суждения)
- ☐ Yes ☐ No (6) Познакомил с понятием ловушки мышления и научил их различать
- ☐ Yes ☐ No (7) Познакомил с понятием когнитивной переоценки и научил пациента ею пользоваться, чтобы развить мыслительную гибкость

**III. Домашнее задание:**

Делал ли терапевт следующее (отметить только наличие или отсутствие)

- ☐ Yes ☐ No (8) Выдал материалы и задания, соответствующие данной сессии.  
Например:
- Объяснил, как пользоваться OASIS и ODSIS и оценивать степень тревоги и депрессии с помощью Дневника улучшений.



- Попросил пациента поработать в Технике нисходящей стрелы, чтобы определить основные автоматические суждения для предыдущих д/з
- Попросил использовать форму Идентификации и оценки автоматических суждений, чтобы отслеживать их, а также возникающие эмоции.
- Если пациент готов, объяснил, как выработать хотя бы одно альтернативное суждение для каждого автоматического и попросил записать в последнюю колонку форму Идентификации и оценки

## **Module 4: Overall Rating**

### **Session Duration:**

\_\_\_\_\_ (1) Duration of session 4.1  
\_\_\_\_\_ (1a) Duration of session 4.2

☐ Yes   ☐ No   (1b) Session duration is between 45-75 minutes for all sessions

### **Disallowed interventions:**

(2) Therapist implemented interventions that are not included in this manual or model of treatment?

☐ Yes   ☐ No

(2a) If Yes, describe: \_\_\_\_\_

### **Adherence Summary Score:**

(3) \_\_\_\_\_ % Overall Adherence- calculate the percentage of *applicable* items that were completed, including the session duration item at the top of this page

### **Additional Therapist Ratings:**

(4) Rate the quality of the therapist's rapport with the patient (e.g. warmth, openness, respect, humor):

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(5) Rate the extent to which the therapist engaged in interactive exchange with patient and tried to involve them in the treatment (e.g. use of Socratic questioning, checked the patient's understating or recall of information, worked collaboratively on assignments, sought the patient's opinions or suggestions, used patient relevant examples):

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(6) Rate the therapist's ability to manage the session (e.g. kept the patient on task, used time effectively, proceeded logically, made smooth transitions)

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(7) Rate the therapist understanding of treatment concepts and their ability to deliver information at a level the patient can understand.

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

**Overall Session Rating:**

(8) Please provide an overall rating for this treatment session, taking into consideration how effectively the therapist presented key treatment elements and met the primary goals of the session.

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(9) **Pass/ Fail:**

☐ Pass      ☐ Fail

Note: “Pass” = The session duration was at least 30 minutes. Overall adherence is 80% or greater and/ or the session was rated as being at least “adequate.”

*Write any additional comments below:*

## **Module 4: Additional Expert Rater Items**

### **1. How receptive was the patient to the therapist and his/her interventions in this session?**

This rating should be based directly on the patient's **verbal** behavior in the session. A rating of "0" should be given if the patient is openly resistant to the therapist and her/his interventions (e.g., refuses to talk, provide information or examples, denigrates the therapist or the treatment/workbook, or expresses low likelihood of completing homework). A rating of "4" should be given if the patient is very open to the information being provided and the therapist's interventions (expresses verbal agreement, remarks on the helpfulness of the information being provided, the skill being taught, or the workbook, or expresses intention to give the homework assignment their best effort. A rating of "2" can be given when the patient sounds indifferent or does not verbalize any interest or disinterest in what is being discussed (e.g., frequent use of minimal verbal responses, such as "okay" without any noticeable affect).

<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Very Unreceptive	Moderately Unreceptive	Neutral (indifferent)	Moderately Receptive	Very Receptive

### **2. Please rate the patient's level of perceived knowledge acquisition:**

This rating should be based directly on the patient's **verbal** behavior in the session (rate N/A if no information is provided). Particular attention should be given to the information gathered during the homework review at the beginning of the session. Specific indicators of knowledge acquisition include: appropriate use of treatment terms/concepts, appropriate questions related to concepts, and appropriate/relevant responses and examples. A lack of knowledge of treatment concepts include: confusion about a concept or the function of an exercise after it was clearly described; inability to answer simple questions or provide examples related to concepts; statements that are contradictory to the concept (e.g., "I tried to make myself think more positively about my situation like we talked about"); obvious statements, such as "I just don't get it." Sessions in which the patient clearly exhibits some knowledge of a concept(s), while a lack of knowledge of others, would be rated either 1, 2, or 3.

<b>N/A</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Could not be rated due to lack of information - no indication in either direction	Complete lack of knowledge of treatment concepts.	Limited degree of knowledge of treatment concepts	Sufficient degree of knowledge of treatment concepts	Moderately high degree of knowledge of treatment concepts	Highest degree of knowledge of treatment concepts.

**3. Please rate the level of perceived skill acquisition:**

This rating should be based directly on the patient's verbal behavior in the session (rate N/A if no information is provided). Particular attention should be given to the information gathered during the homework review at the beginning of the session as well as in-session practice of treatment skills (e.g., cognitive reappraisal). Specific indicators of skill acquisition include: ability to use skill(s) independently and in appropriate contexts; ability to use skill(s) flexibly (ad hoc); evidence of repeated practice of skill(s) (can include daily monitoring). Specific indicators of a lack of skill acquisition include: no attempt(s) to practice skill during the week; inability to use skill(s) independently and in appropriate contexts; inability to use skill(s) flexibly (ad hoc). An attempt to practice a skill (with only partial success) or limited independent practice (e.g., monitored and recorded two days instead of everyday) would be rated either a 1, 2, or 3.

<b>N/A</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Could not be rated due to lack of information - no indication in either direction	Complete lack of skill acquisition- unable to practice/employ skills/strategies independently.	Limited degree of skill acquisition	Sufficient degree of skill acquisition	Moderately high degree of skill acquisition	Highest degree of skill acquisition - able to competently practice/employ skills/strategies independently.

Therapist Adherence Rating Scale  
Unified Protocol for Treatment of Emotional Disorders

**Module 5: Избегание и ЭОП**

Subject ID: \_\_\_\_\_

Rater Initials: \_\_\_\_\_

Session Date(s):

Date Rated: \_\_\_\_\_

5.1 \_\_\_\_\_

5.2 \_\_\_\_\_

**I. Обзор д/з:** \_\_\_\_\_

Делал ли терапевт следующее (отметить только наличие или отсутствие):

☐ Yes ☐ No (1) Для всех сессий в модуле: обзор OASIS, ODSIS, а также Дневника улучшений

☐ Yes ☐ No (2) Обзор д/з и оценка сложностей в заполнении форм

☐ Yes ☐ No (3) Если пациент некомплаентный, разбор лучших способов  
☐ N/A добиться выполнения д/з

**II. Часть 1- Эмоциональное избегание:**

\_\_\_\_\_ Цель этой части модуля — познакомить с понятием эмоционального избегания и обсудить привычные паттерны, которые пациент использует, чтобы избежать эмоциональной реакции

Делал ли терапевт следующее (отметить только наличие или отсутствие):

☐ Yes ☐ No (4) Познакомил с понятием эмоционального избегания.

☐ Yes ☐ No (5) Рассказал о различных типах стратегий избегания и обсудил их вклад в негативный цикл эмоционального ответа.

☐ Yes ☐ No (6) Помог пациенту распознать его собственные стратегии.

☐ Yes ☐ No (7) Продемонстрировал парадокс эмоционального и избегания.

**Часть 2- Новое об ЭОП:** \_\_\_\_\_

\_\_\_\_\_ Цель этой части модуля — заново познакомить с понятием *эмоционально обусловленного поведения* и помочь пациенту понять, как оно поддерживает эмоциональный ответ

Делал ли терапевт следующее (отметить только наличие или отсутствие):

☐ Yes ☐ No (8) Углубил понятие *эмоционально обусловленного поведения* (ЭОП).

☐ Yes ☐ No (9) Обосновал рациональные аргументы против.

☐ Yes ☐ No (10) Помог распознать неадаптивное ЭОП и развить тенденцию к альтернативным вариантам действий.

---

III. Домашнее задание:

Делал ли терапевт следующее (отметить только наличие или отсутствие):

☐ Yes ☐ No (11) Выдал материалы и задания, соответствующие данной сессии.

Например:

- Объяснил, как пользоваться OASIS и ODSIS и оценивать степень тревоги и депрессии с помощью Дневника улучшений. \_\_\_\_\_
- Попросил пациента заполнить Лист стратегий эмоционального избегания
  - Попросил пациента заполнить форму для Изменения ЭОП
  - Подготовил пациента к эмоциональной экспозиции, поддержав его в готовности вовлечься в ситуации, связанные со сложными эмоциями и объяснил, как оставаться осознанным во время переживания

## **Module 5: Overall Rating**

### **Session Duration:**

\_\_\_\_\_ (1) Duration of session 5.1  
\_\_\_\_\_ (1a) Duration of session 5.2

☐ Yes   ☐ No   (1b) Session duration is between 45-75 minutes for all sessions

### **Disallowed interventions:**

(2) Therapist implemented interventions that are not included in this manual or model of treatment?

☐ Yes   ☐ No

(2a) If Yes, describe: \_\_\_\_\_

### **Adherence Summary Score:**

(3) \_\_\_\_\_ % Overall Adherence- calculate the percentage of *applicable* items that were completed, including the session duration item at the top of this page

### **Additional Therapist Ratings:**

(4) Rate the quality of the therapist's rapport with the patient (e.g. warmth, openness, respect, humor):

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(5) Rate the extent to which the therapist engaged in interactive exchange with patient and tried to involve them in the treatment (e.g. use of Socratic questioning, checked the patient's understating or recall of information, worked collaboratively on assignments, sought the patient's opinions or suggestions, used patient relevant examples):

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(6) Rate the therapist's ability to manage the session (e.g. kept the patient on task, used time effectively, proceeded logically, made smooth transitions)

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(7) Rate the therapist understanding of treatment concepts and their ability to deliver information at a level the patient can understand.

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent



**Overall Session Rating:**

(8) Please provide an overall rating for this treatment session, taking into consideration how effectively the therapist presented key treatment elements and met the primary goals of the session.

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(9) **Pass/ Fail:**

☐ Pass      ☐ Fail

Note: “Pass” = The session duration was at least 30 minutes. Overall adherence is 80% or greater and/ or the session was rated as being at least “adequate.”

*Write any additional comments below:*

## **Module 5: Additional Expert Rater Items**

### **1. How receptive was the patient to the therapist and his/her interventions in this session?**

This rating should be based directly on the patient's **verbal** behavior in the session. A rating of "0" should be given if the patient is openly resistant to the therapist and her/his interventions (e.g., refuses to talk, provide information or examples, denigrates the therapist or the treatment/workbook, or expresses low likelihood of completing homework). A rating of "4" should be given if the patient is very open to the information being provided and the therapist's interventions (expresses verbal agreement, remarks on the helpfulness of the information being provided, the skill being taught, or the workbook, or expresses intention to give the homework assignment their best effort. A rating of "2" can be given when the patient sounds indifferent or does not verbalize any interest or disinterest in what is being discussed (e.g., frequent use of minimal verbal responses, such as "okay" without any noticeable affect).

<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Very Unreceptive	Moderately Unreceptive	Neutral (indifferent)	Moderately Receptive	Very Receptive

### **2. Please rate the patient's level of perceived knowledge acquisition:**

This rating should be based directly on the patient's **verbal** behavior in the session (rate N/A if no information is provided). Particular attention should be given to the information gathered during the homework review at the beginning of the session. Specific indicators of knowledge acquisition include: appropriate use of treatment terms/concepts, appropriate questions related to concepts, and appropriate/relevant responses and examples. A lack of knowledge of treatment concepts include: confusion about a concept or the function of an exercise after it was clearly described; inability to answer simple questions or provide examples related to concepts; statements that are contradictory to the concept (e.g., "I tried to make myself think more positively about my situation like we talked about"); obvious statements, such as "I just don't get it." Sessions in which the patient clearly exhibits some knowledge of a concept(s), while a lack of knowledge of others, would be rated either 1, 2, or 3.

<b>N/A</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Could not be rated due to lack of information - no indication in either direction	Complete lack of knowledge of treatment concepts.	Limited degree of knowledge of treatment concepts	Sufficient degree of knowledge of treatment concepts	Moderately high degree of knowledge of treatment concepts	Highest degree of knowledge of treatment concepts.

**3. Please rate the level of perceived skill acquisition:**

This rating should be based directly on the patient's verbal behavior in the session (rate N/A if no information is provided). Particular attention should be given to the information gathered during the homework review at the beginning of the session as well as in-session practice of treatment skills (e.g., cognitive reappraisal). Specific indicators of skill acquisition include: ability to use skill(s) independently and in appropriate contexts; ability to use skill(s) flexibly (ad hoc); evidence of repeated practice of skill(s) (can include daily monitoring). Specific indicators of a lack of skill acquisition include: no attempt(s) to practice skill during the week; inability to use skill(s) independently and in appropriate contexts; inability to use skill(s) flexibly (ad hoc). An attempt to practice a skill (with only partial success) or limited independent practice (e.g., monitored and recorded two days instead of everyday) would be rated either a 1, 2, or 3.

<b>N/A</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Could not be rated due to lack of information - no indication in either direction	Complete lack of skill acquisition - unable to practice/employ skills/strategies independently.	Limited degree of skill acquisition	Sufficient degree of skill acquisition	Moderately high degree of skill acquisition	Highest degree of skill acquisition - able to competently practice/employ skills/strategies independently.

Therapist Adherence Rating Scale  
Unified Protocol for Treatment of Emotional Disorders

**Module 6: Физическая осведомленность и толерантность**

Subject ID: \_\_\_\_\_  
\_\_\_\_\_

Rater Initials: \_\_\_\_\_

Session Date(s): \_\_\_\_\_  
6.1 \_\_\_\_\_  
6.2 \_\_\_\_\_

Date Rated: \_\_\_\_\_

I. Обзор д/з:

Делал ли терапевт следующее (отметить только наличие или отсутствие):

☐ Yes ☐ No (1) Для всех сессий в модуле: обзор OASIS, ODSIS, а также Дневника \_\_\_\_\_  
улучшений

☐ Yes ☐ No (2) Обзор д/з и оценка сложностей в заполнении форм

☐ Yes ☐ No ☐ N/A (3) Если пациент некомплаентный, разбор лучших способов  
добиться выполнения д/з

II. Awareness and Tolerance of Physical Sensations:

The goal of this portion of the module is to help the patient understand how physical feelings can influence emotional experience.

Делал ли терапевт следующее (отметить только наличие или отсутствие)

☐ Yes ☐ No (4) Помог пациенту определить, какие физические ощущения связаны с эмоциями

☐ Yes ☐ No (5) Помог пациента лучше понять, в какой степени физические ощущения определяют его эмоциональный ответ.

☐ Yes ☐ No (6) Провел упражнение на провокацию неприятных физических ощущений.

III. Домашнее задание: \_\_\_\_\_

Делал ли терапевт следующее (отметить только наличие или отсутствие):

☐ Yes ☐ No (7) Выдал материалы и задания, соответствующие данной сессии.  
Например:

- Объяснил, как пользоваться OASIS и ODSIS и оценивать степень тревоги и депрессии с помощью Дневника улучшений. \_\_\_\_\_
- Проинструктировал пациента, как вызывать у себя физические ощущения, и попросил записать в Форму провокации симптомов

## **Module 6: Overall Session Rating**

### **Session Duration:**

\_\_\_\_\_ (1) Duration of session 6.1  
\_\_\_\_\_ (1a) Duration of session 6.2

☐ Yes   ☐ No   (1b) Session duration is between 45-75 minutes for all sessions

### **Disallowed interventions:**

(2) Therapist implemented interventions that are not included in this manual or model of treatment?

☐ Yes   ☐ No

(2a) If Yes, describe: \_\_\_\_\_

### **Adherence Summary Score:**

(3) \_\_\_\_\_ % Overall Adherence- calculate the percentage of *applicable* items that were completed, including the session duration item at the top of this page

### **Additional Therapist Ratings:**

(4) Rate the quality of the therapist's rapport with the patient (e.g. warmth, openness, respect, humor):

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(5) Rate the extent to which the therapist engaged in interactive exchange with patient and tried to involve them in the treatment (e.g. use of Socratic questioning, checked the patient's understating or recall of information, worked collaboratively on assignments, sought the patient's opinions or suggestions, used patient relevant examples):

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(6) Rate the therapist's ability to manage the session (e.g. kept the patient on task, used time effectively, proceeded logically, made smooth transitions)

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(7) Rate the therapist understanding of treatment concepts and their ability to deliver information at a level the patient can understand.

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

**Overall Session Rating:**

(8) Please provide an overall rating for this treatment session, taking into consideration how effectively the therapist presented key treatment elements and met the primary goals of the session.

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(9) **Pass/ Fail:**

☐ Pass      ☐ Fail

Note: “Pass” = The session duration was at least 30 minutes. Overall adherence is 80% or greater and/ or the session was rated as being at least “adequate.”

*Write any additional comments below:*

## **Module 6: Additional Expert Rater Items**

### **1. How receptive was the patient to the therapist and his/her interventions in this session?**

This rating should be based directly on the patient's **verbal** behavior in the session. A rating of "0" should be given if the patient is openly resistant to the therapist and her/his interventions (e.g., refuses to talk, provide information or examples, denigrates the therapist or the treatment/workbook, or expresses low likelihood of completing homework). A rating of "4" should be given if the patient is very open to the information being provided and the therapist's interventions (expresses verbal agreement, remarks on the helpfulness of the information being provided, the skill being taught, or the workbook, or expresses intention to give the homework assignment their best effort. A rating of "2" can be given when the patient sounds indifferent or does not verbalize any interest or disinterest in what is being discussed (e.g., frequent use of minimal verbal responses, such as "okay" without any noticeable affect).

<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Very Unreceptive	Moderately Unreceptive	Neutral (indifferent)	Moderately Receptive	Very Receptive

### **2. Please rate the patient's level of perceived knowledge acquisition:**

This rating should be based directly on the patient's **verbal** behavior in the session (rate N/A if no information is provided). Particular attention should be given to the information gathered during the homework review at the beginning of the session. Specific indicators of knowledge acquisition include: appropriate use of treatment terms/concepts, appropriate questions related to concepts, and appropriate/relevant responses and examples. A lack of knowledge of treatment concepts include: confusion about a concept or the function of an exercise after it was clearly described; inability to answer simple questions or provide examples related to concepts; statements that are contradictory to the concept (e.g., "I tried to make myself think more positively about my situation like we talked about"); obvious statements, such as "I just don't get it." Sessions in which the patient clearly exhibits some knowledge of a concept(s), while a lack of knowledge of others, would be rated either 1, 2, or 3.

<b>N/A</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Could not be rated due to lack of information - no indication in either direction	Complete lack of knowledge of treatment concepts.	Limited degree of knowledge of treatment concepts	Sufficient degree of knowledge of treatment concepts	Moderately high degree of knowledge of treatment concepts	Highest degree of knowledge of treatment concepts.



### 3. Please rate the level of perceived skill acquisition:

This rating should be based directly on the patient's verbal behavior in the session (rate N/A if no information is provided). Particular attention should be given to the information gathered during the homework review at the beginning of the session as well as in-session practice of treatment skills (e.g., cognitive reappraisal). Specific indicators of skill acquisition include: ability to use skill(s) independently and in appropriate contexts; ability to use skill(s) flexibly (ad hoc); evidence of repeated practice of skill(s) (can include daily monitoring). Specific indicators of a lack of skill acquisition include: no attempt(s) to practice skill during the week; inability to use skill(s) independently and in appropriate contexts; inability to use skill(s) flexibly (ad hoc). An attempt to practice a skill (with only partial success) or limited independent practice (e.g., monitored and recorded two days instead of everyday) would be rated either a 1, 2, or 3.

N/A	0	1	2	3	4
Could not be rated due to lack of information - no indication in either direction	Complete lack of skill acquisition - unable to practice/employ skills/strategies independently.	Limited degree of skill acquisition	Sufficient degree of skill acquisition	Moderately high degree of skill acquisition	Highest degree of skill acquisition - able to competently practice/employ skills/strategies independently.

Therapist Adherence Rating Scale  
Unified Protocol for Treatment of Emotional Disorders

**Module 7: Интероцептивная и ситуационная эмоциональная экспозиция**

Subject ID: \_\_\_\_\_

Rater Initials: \_\_\_\_\_

Session Date(s): \_\_\_\_\_

Date Rated: \_\_\_\_\_

7.1 \_\_\_\_\_ 7.4 \_\_\_\_\_

7.2 \_\_\_\_\_ 7.5 \_\_\_\_\_

7.3 \_\_\_\_\_ 7.6 \_\_\_\_\_

**I. Обзор д/з: \_\_\_\_\_**

Делал ли терапевт следующее (отметить только наличие или отсутствие):

☐ Yes ☐ No (1) Для всех сессий в модуле: обзор OASIS, ODSIS, а также Дневника \_\_\_\_\_  
улучшений

☐ Yes ☐ No (2) Обзор д/з и оценка сложностей в заполнении форм

☐ Yes ☐ No ☐ N/A (3) Если пациент некомплаентный, разбор лучших способов  
добиться выполнения д/з

**II. Интероцептивная и ситуационная эмоциональная экспозиция:**

The goal of this portion of the module is to confront strong emotions through emotion exposures.

Делал ли терапевт следующее (отметить только наличие или отсутствие):

☐ Yes ☐ No (4) Помог пациенту понять смысл эмоциональной экспозиции.

☐ Yes ☐ No (5) Разработал вместе с пациентом иерархию эмоционального и ситуационного  
изгнания.

☐ Yes ☐ No (6) Разработал эффективные экспозиционные упражнения

☐ Yes ☐ No (7) Помог пациенту противостоять сильным эмоциям в ходе экспозиции.

**III. Домашнее задание: \_\_\_\_\_**

Делал ли терапевт следующее (отметить только наличие или отсутствие):

☐ Yes ☐ No (8) Выдал материалы и задания, соответствующие данной сессии.  
Например:

- Объяснил, как пользоваться OASIS и ODSIS и оценивать степень тревоги  
и депрессии с помощью Дневника улучшений. . \_\_\_\_\_

- Попросил пациента практиковать экспозиция хотя бы три раза в неделю и записывать результаты в форму (Форма записи эмоциональной экспозиции).

## **Module 7: Overall Rating**

### **Session Duration:**

\_\_\_\_\_ (1) Duration of session 7.1                      (1c) \_\_\_\_\_ Duration of session 7.4  
\_\_\_\_\_ (1a) Duration of session 7.2                      (1d) \_\_\_\_\_ Duration of session 7.5  
\_\_\_\_\_ (1b) Duration of session 7.3                      (1e) \_\_\_\_\_ Duration of session 7.6

☐ Yes    ☐ No    (1f) Session duration is between 45-75 minutes for all sessions

### **Disallowed interventions:**

(2) Therapist implemented interventions that are not included in this manual or model of treatment?

☐ Yes                      ☐ No

(2a) If Yes, describe: \_\_\_\_\_

### **Adherence Summary Score:**

(3) \_\_\_\_\_ % Overall Adherence- calculate the percentage of *applicable* items that were completed, including the session duration item at the top of this page

### **Additional Therapist Ratings:**

(4) Rate the quality of the therapist's rapport with the patient (e.g. warmth, openness, respect, humor):

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(5) Rate the extent to which the therapist engaged in interactive exchange with patient and tried to involve them in the treatment (e.g. use of Socratic questioning, checked the patient's understating or recall of information, worked collaboratively on assignments, sought the patient's opinions or suggestions, used patient relevant examples):

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(6) Rate the therapist's ability to manage the session (e.g. kept the patient on task, used time effectively, proceeded logically, made smooth transitions)

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(7) Rate the therapist understanding of treatment concepts and their ability to deliver information at a level the patient can understand.

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

**Overall Session Rating:**

(8) Please provide an overall rating for this treatment session, taking into consideration how effectively the therapist presented key treatment elements and met the primary goals of the session.

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(9) **Pass/ Fail:**

☐ Pass      ☐ Fail

Note: “Pass” = The session duration was at least 30 minutes. Overall adherence is 80% or greater and/ or the session was rated as being at least “adequate.”

*Write any additional comments below:*

## **Module 7: Additional Expert Rater Items**

### **1. How receptive was the patient to the therapist and his/her interventions in this session?**

This rating should be based directly on the patient's **verbal** behavior in the session. A rating of "0" should be given if the patient is openly resistant to the therapist and her/his interventions (e.g., refuses to talk, provide information or examples, denigrates the therapist or the treatment/workbook, or expresses low likelihood of completing homework). A rating of "4" should be given if the patient is very open to the information being provided and the therapist's interventions (expresses verbal agreement, remarks on the helpfulness of the information being provided, the skill being taught, or the workbook, or expresses intention to give the homework assignment their best effort. A rating of "2" can be given when the patient sounds indifferent or does not verbalize any interest or disinterest in what is being discussed (e.g., frequent use of minimal verbal responses, such as "okay" without any noticeable affect).

<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Very Unreceptive	Moderately Unreceptive	Neutral (indifferent)	Moderately Receptive	Very Receptive

### **2. Please rate the patient's level of perceived knowledge acquisition:**

This rating should be based directly on the patient's **verbal** behavior in the session (rate N/A if no information is provided). Particular attention should be given to the information gathered during the homework review at the beginning of the session. Specific indicators of knowledge acquisition include: appropriate use of treatment terms/concepts, appropriate questions related to concepts, and appropriate/relevant responses and examples. A lack of knowledge of treatment concepts include: confusion about a concept or the function of an exercise after it was clearly described; inability to answer simple questions or provide examples related to concepts; statements that are contradictory to the concept (e.g., "I tried to make myself think more positively about my situation like we talked about"); obvious statements, such as "I just don't get it." Sessions in which the patient clearly exhibits some knowledge of a concept(s), while a lack of knowledge of others, would be rated either 1, 2, or 3.

<b>N/A</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Could not be rated due to lack of information - no indication in either direction	Complete lack of knowledge of treatment concepts.	Limited degree of knowledge of treatment concepts	Sufficient degree of knowledge of treatment concepts	Moderately high degree of knowledge of treatment concepts	Highest degree of knowledge of treatment concepts.

**3. Please rate the level of perceived skill acquisition:**

This rating should be based directly on the patient's verbal behavior in the session (rate N/A if no information is provided). Particular attention should be given to the information gathered during the homework review at the beginning of the session as well as in-session practice of treatment skills (e.g., cognitive reappraisal). Specific indicators of skill acquisition include: ability to use skill(s) independently and in appropriate contexts; ability to use skill(s) flexibly (ad hoc); evidence of repeated practice of skill(s) (can include daily monitoring). Specific indicators of a lack of skill acquisition include: no attempt(s) to practice skill during the week; inability to use skill(s) independently and in appropriate contexts; inability to use skill(s) flexibly (ad hoc). An attempt to practice a skill (with only partial success) or limited independent practice (e.g., monitored and recorded two days instead of everyday) would be rated either a 1, 2, or 3.

<b>N/A</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Could not be rated due to lack of information - no indication in either direction	Complete lack of skill acquisition- unable to practice/employ skills/strategies independently.	Limited degree of skill acquisition	Sufficient degree of skill acquisition	Moderately high degree of skill acquisition	Highest degree of skill acquisition - able to competently practice/employ skills/strategies independently.

Therapist Adherence Rating Scale  
Unified Protocol for Treatment of Emotional Disorders

**Module 8: Предотвращение срывов**

Subject ID: \_\_\_\_\_

Rater Initials: \_\_\_\_\_

Session Date(s):  
8.1 \_\_\_\_\_

Date Rated: \_\_\_\_\_

**I. Обзор д/з:** \_\_\_\_\_

Делал ли терапевт следующее (отметить только наличие или отсутствие):

☐ Yes ☐ No (1) Для всех сессий в модуле: обзор OASIS, ODSIS, а также Дневника \_\_\_\_\_  
улучшений

☐ Yes ☐ No (2) Обзор д/з и оценка сложностей в заполнении форм

☐ Yes ☐ No ☐ N/A (3) Если пациент некомплаентный, разбор лучших способов  
добиться выполнения д/з

**II. Достижения, поддержка, профилактика:** \_\_\_\_\_

Цель этой части модуля — обзор прогресса и стратегий, которые помогут справиться с  
трудностями в будущем.

Принципы протокола:

Делал ли терапевт следующее (отметить только наличие или  
отсутствие):

☐ Yes ☐ No (4) Обзор навыков совладания с эмоциями.

☐ Yes ☐ No (5) Обзор прогресса в терапии.

☐ Yes ☐ No (6) Определение и разбор повседневных/возможных триггеров.

☐ Yes ☐ No (7) Обобщение навыков и постановка целей для дальнейшего  
прогресса.



## **Module 8: Overall Session Rating**

### **Session Duration:**

\_\_\_\_\_ (1) Duration of session 8.1

☐ Yes   ☐ No   (1a) Session duration is between 45-75 minutes for all sessions

### **Disallowed interventions:**

(2) Therapist implemented interventions that are not included in this manual or model of treatment?

☐ Yes   ☐ No

(2a) If Yes, describe:

\_\_\_\_\_

### **Adherence Summary Score:**

(3) \_\_\_\_\_ % Overall Adherence- calculate the percentage of *applicable* items that were completed, including the session duration item at the top of this page

### **Additional Therapist Ratings:**

(4) Rate the quality of the therapist's rapport with the patient (e.g. warmth, openness, respect, humor):

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(5) Rate the extent to which the therapist engaged in interactive exchange with patient and tried to involve them in the treatment (e.g. use of Socratic questioning, checked the patient's understating or recall of information, worked collaboratively on assignments, sought the patient's opinions or suggestions, used patient relevant examples):

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(6) Rate the therapist's ability to manage the session (e.g. kept the patient on task, used time effectively, proceeded logically, made smooth transitions)

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(7) Rate the therapist understanding of treatment concepts and their ability to deliver information at a level the patient can understand.

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

**Overall Session Rating:**

(8) Please provide an overall rating for this treatment session, taking into consideration how effectively the therapist presented key treatment elements and met the primary goals of the session.

0	1	2	3	4	5
Poor	Marginal	Fair	Adequate	Good	Excellent

(9) **Pass/ Fail:**

☐ Pass      ☐ Fail

Note: “Pass” = The session duration was at least 30 minutes. Overall adherence is 80% or greater and/ or the session was rated as being at least “adequate.”

*Write any additional comments below:*

## **Module 8: Additional Expert Rater Items**

### **1. How receptive was the patient to the therapist and his/her interventions in this session?**

This rating should be based directly on the patient's **verbal** behavior in the session. A rating of "0" should be given if the patient is openly resistant to the therapist and her/his interventions (e.g., refuses to talk, provide information or examples, denigrates the therapist or the treatment/workbook, or expresses low likelihood of completing homework). A rating of "4" should be given if the patient is very open to the information being provided and the therapist's interventions (expresses verbal agreement, remarks on the helpfulness of the information being provided, the skill being taught, or the workbook, or expresses intention to give the homework assignment their best effort. A rating of "2" can be given when the patient sounds indifferent or does not verbalize any interest or disinterest in what is being discussed (e.g., frequent use of minimal verbal responses, such as "okay" without any noticeable affect).

<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Very Unreceptive	Moderately Unreceptive	Neutral (indifferent)	Moderately Receptive	Very Receptive

### **2. Please rate the patient's level of perceived knowledge acquisition:**

This rating should be based directly on the patient's **verbal** behavior in the session (rate N/A if no information is provided). Particular attention should be given to the information gathered during the homework review at the beginning of the session. Specific indicators of knowledge acquisition include: appropriate use of treatment terms/concepts, appropriate questions related to concepts, and appropriate/relevant responses and examples. A lack of knowledge of treatment concepts include: confusion about a concept or the function of an exercise after it was clearly described; inability to answer simple questions or provide examples related to concepts; statements that are contradictory to the concept (e.g., "I tried to make myself think more positively about my situation like we talked about"); obvious statements, such as "I just don't get it." Sessions in which the patient clearly exhibits some knowledge of a concept(s), while a lack of knowledge of others, would be rated either 1, 2, or 3.

<b>N/A</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Could not be rated due to lack of information - no indication in either direction	Complete lack of knowledge of treatment concepts.	Limited degree of knowledge of treatment concepts	Sufficient degree of knowledge of treatment concepts	Moderately high degree of knowledge of treatment concepts	Highest degree of knowledge of treatment concepts.

**3. Please rate the level of perceived skill acquisition:**

This rating should be based directly on the patient's verbal behavior in the session (rate N/A if no information is provided). Particular attention should be given to the information gathered during the homework review at the beginning of the session as well as in-session practice of treatment skills (e.g., cognitive reappraisal). Specific indicators of skill acquisition include: ability to use skill(s) independently and in appropriate contexts; ability to use skill(s) flexibly (ad hoc); evidence of repeated practice of skill(s) (can include daily monitoring). Specific indicators of a lack of skill acquisition include: no attempt(s) to practice skill during the week; inability to use skill(s) independently and in appropriate contexts; inability to use skill(s) flexibly (ad hoc). An attempt to practice a skill (with only partial success) or limited independent practice (e.g., monitored and recorded two days instead of everyday) would be rated either a 1, 2, or 3.

<b>N/A</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Could not be rated due to lack of information - no indication in either direction	Complete lack of skill acquisition- unable to practice/employ skills/strategies independently.	Limited degree of skill acquisition	Sufficient degree of skill acquisition	Moderately high degree of skill acquisition	Highest degree of skill acquisition - able to competently practice/employ skills/strategies independently.