



PCIT Training Trainee: _____

PCIT Agency: _____

PCIT for TRAUMATIZED CHILDREN

TRAINER (ToT) COMPETENCIES FOR PCIT THERAPISTS

ADHERENCE TO THE ESSENTIAL COMPONENTS OF PCIT

- Standardized pre/post treatment measurement – ECBI/DPICS
- Inclusion of CDI and PDI
- Coding interactions with the DPICS
- In vivo coaching of the parent-child dyad
- Inclusion of the PRIDE and selective attention/ignoring concepts
- Use of homework
- At least 50% of session spent coaching
- Agency provides appropriate space and equipment, and allows therapists to participate in ongoing training and consultation.

MINIMUM REQUIREMENTS FOR BECOMING A PCIT TRAINER

- Trainer must: 1) have a master's degree or higher in the mental health field; 2) complete all requirements to be a PCIT therapist; 3) provide documentation of having completed 4 cases with good outcomes (at least close to DPICS mastery Mid and Post-treatment, at least a 10 point drop in ECBI T-score); 4) continue to provide PCIT services.
- Completion of PCIT-TC web course.
- Complete 4 cases according to UC Davis completed cases criteria.
- Remain current with PCIT research and advancements by attending regional meetings, annual PCIT conferences and other resources (i.e. PCIT Listserve, etc.)
- Read revised or updated training handouts, training curriculum, PCIT book (McNeil & Hembree-Kigin, second edition, 2010), and selected research articles.

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PHASE I: FUNDAMENTAL AND SKILL-BUILDING TRAINING

Date	Approved by	Experiential Competency
		1.1 Complete 10 Hour PCIT –TC Web Course
		1.2 Code with 80% accuracy using DPICS-TC (latest version) on a 5-minute CDI and a 5-minute PDI observational assessment.
		<i>Post- Web Course Skill Building</i>
		1.3 Conduct Post-Web Course Skill Building using Guidelines in UCD ToT Manual
		1.4 Insure that trainees meet minimum requirements for working with live clients by meeting Mastery Criteria for Child-Directed Interaction (CDI) Skills in five-minute role-plays,
		1.5 Insure that trainees are able to code video of parent-child interaction using DPICS with 80% accuracy
		1.6 Review with trainees Objectives & Goals of PCIT using information from clinical interview, pre-measures and behavioral observation
		1.7 Insure that trainees understand the process of teaching PCIT skills (i.e., explain, demonstrate, role-play).
		1.8 Conduct role-play of CDI & PDI Coaching to insure their understanding of process and familiarity with equipment
		1.9 Conduct role-play to prepare trainee for Graduation to insure trainees' understanding of criteria for graduation

PHASE II: EXPERIENTIAL TRAINING

Date	Approved by	Experiential Competency
		<i>Intake and Assessment</i>
		2.1 Prepare trainees so that they are able to administer & interpret standardized behavioral measurements in assessment & for treatment planning (e.g., to develop treatment goals).
		2.2 Prepare trainees so that they are able to conduct structured behavioral observations (DPICS) as part of the assessment process, and use the information in treatment planning.
		2.3 Code along with trainees during DPICS sessions, take notes on parent-child interactions in PDI, and Clean Up, to help with coding accuracy and case conceptualization.

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		2.4 Prepare trainees to effectively debrief parents after DPICS observation, orient them to PCIT, conveying acceptance of family and cultural values, and prepare them for the next session.
		2.5 Prepare trainees to identify ways to engage parents in the treatment process.
		<i>Child-Directed Interaction Didactic</i>
		3.1 Prepare trainees by role-play, teaching, and planning to insure their ability to conduct a CDI teaching session (prepared with needed forms, accurately and effectively teach).
		3.2 Able to perceive strengths and deficits in teaching, and provide constructive feedback on trainee role plays and teaching performance to improve trainees' teaching skills.
		3.3 Review with trainees effects of environmental factors on teaching and coaching strategies to use with their clients in PCIT.
		3.4 Prepare trainees for teaching session wrap-up: to plan homework, explain and provide rationale for completing homework.
		3.5 Review with trainees which toys are appropriate for special play time with different clients.
		3.6 Insure that trainees continue to model CDI Skills during all interactions with parent and child from the outset of contact to termination of session.
		<i>Child-Directed Interaction Coaching Sessions</i>
		4.1 Prepare trainees for session check-in reviewing progress, concerns, and completion of homework.
		4.2 Code along with trainees during coaching sessions so that they can be signed off on DPICS coding accuracy.
		4.3 Code CDI coaching with 80% accuracy three times with their ToT trainer, using Coach Coding Manual in the UCD PCIT ToT Manual.
		4.4 Give useful feedback to trainees on their coaching using results of Coach Coding to help build coaching skill.
		4.5 Able to perceive strengths and deficits in trainees' coaching using ToT Session Checklist in the UCD PCIT ToT Manual, and provide constructive feedback to improve trainees' coaching skills.

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		4.6 Able to perceive strengths and deficits in the way trainees relate to parents, and provide constructive feedback.
		4.7 Teach trainees how to build PCIT skills in different types of parents: e.g., identifying easier/harder PCIT skills, progressing to less directive coaching
		4.8 Teach trainees to recognize and understand the meaning of qualitative aspects of parent-child interaction, and use this information when coaching.
		4.9 Teach trainees to assess the family's accomplishments during a session, so that they can provide encouraging feedback to parents.
		4.10 Prepare trainee(s) for coaching session wrap-up: plan homework, explain and provide rationale for completing homework.
		4.11 Trainer consistently checks that trainees document parent and child progress, strengths, concerns, and track skill mastery on frequency chart
		Mid-Treatment Assessment
		5.1 Teach trainees to assess clients' readiness for transition to Parent-Directed Interaction phase of treatment using weekly observational assessment.
		5.2 Direct trainees to administer standardized measures for re-assessing treatment goals
		5.3 Work with trainees to help them develop treatment goals for their clients for PDI phase of treatment
		5.4 Prepare trainees to describe "Strategies to Manage Behavior" and emphasize the importance of continuing to use PRIDE skills
		Parent-Directed Interaction Didactic Session
		6.1 Prepare trainees to teach and demonstrate rules for giving effective commands (BE DIRECT)
		6.2 Prepare trainees to teach and demonstrate importance of praise for compliance (COMMAND-COMPLY-PRAISE)
		6.3 Teach trainees how to role-play 'practice-minding' and teaches the difference between easier and more difficult commands
		6.4 Prepare trainees to select, teach, and demonstrate time-out warning and time-out process most suited to the client's needs

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		6.5 Prepare trainees to teach consistent process for managing time-out refusal
		<i>Parent-Directed Interaction Coaching Sessions</i>
		7.1 Code during the weekly PDI coding on BE DIRECT/Discipline sequence along with trainee(s) during coaching sessions
		7.2 Code PDI Coaching with 80% accuracy with the ToT trainer, using Coach Coding Manual in the UCD PCIT ToT Manual.
		7.3 Help trainees to effectively coach “easy” and “hard” to follow play commands, and to ‘practice-mind’ before ‘real life’ or more challenging commands.
		7.4 Insure that trainees know when and how to be directive in their coaching, and when to follow the parent’s lead
		7.5 Help trainees develop a list of ‘real life’ directions they can have parents use, and develop plan for implementing consequences
		7.6 Prepare trainees to accurately explain the House Rules procedure
		7.7 Prepare trainees to accurately explain Behavioral Management/ Public Behaviors procedures
		7.8 Prepare trainees to develop PDI homework, selecting commands to build parents’ skills at home
		7.9 Teach trainees to assess client readiness for treatment termination based on compliance at home, school, session, and willingness to cooperate with time-out
		<i>Post-Treatment Assessment</i>
		8.1 Teach trainees to assess need for further therapy (e.g., trauma-focused therapy, social skills group) or adjunct services (e.g., home-based services, school consultation, medication assessment)
		8.2 Prepare trainees so that they are able to conduct structured 15-minute behavioral assessment to measure parent’s achievement of skill acquisition and child’s compliance.
		8.3 Prepare trainees so that they are able to use standardized behavioral measures (CBCL, ECBI, PSI, TSCYC, and TAI) to assess achievement of treatment objectives.

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		8.4 Instruct trainees to provide parent and child with certificate verifying achievement of skill
		8.5 Teach trainees how to document progress/objectives achieved and develop a discharge plan

Verification of Training Completion:

UCD PCIT Trainer

Date

PCIT ToT Trainee

Date

Name of ToT's PCIT Trainee (1)

Date

Name of ToT's PCIT Trainee (2)

Date

PCIT TRAINER TRACKING

PCIT Training Trainee: _____

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	Trainee	Client Initials	PRE			MID			POST			Date completed			
			ECBI Int/Prob	LP	BD	RF	ECBI Int/Prob	LP	BD	RF	ECBI Int/Prob		LP	BD	RF
	Jessie	JoRu	132	3	1	5	110	8	10	12	90	7	8	15	
			15				11				6				
1.															
2.															
3.															
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