New Stuff You’ll Love: Tools for the PCIT Terrain

Introducing: *Daily Care, PDI Readiness Checklist, PDI Courage, Graduation Planning, & Revised AIQ & ATC*

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OBJECTIVES

Introduce & explain how to use:

New
• Daily Care
• PDI Readiness Checklist
• PDI Courage
• Graduation Planning

Revised
• Assessment of Interaction Quality (AIQ)
• Assessment of Therapist Coaching (ATC)
CDI Daily Care

- Differentiates 5-minute special play from PRIDE skills used throughout the day
- Daily identify whether caregiver used selective attention
- Overall rating of child's day
- Back includes selective attention reminders
Daily Care

CDI Daily Care!

Children's Name: _______________________

<table>
<thead>
<tr>
<th></th>
<th>During 5 Minutes</th>
<th>Throughout the day</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>5-minute Special Play Time</td>
<td>What toys did you play with?</td>
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<tr>
<td>Monday</td>
<td>YES</td>
<td>NO</td>
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<td>Tuesday</td>
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<td>Saturday</td>
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<td>Sunday</td>
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Specific Skills to Practice Daily

Use your Relationship Enhancement Skills (PRIDE)

- **P** Praise the appropriate behavior that you see immediately
- **R** Use “reflection” to teach your child to listen and communicate
- **I** Model (Imitate & Model) the behavior you desire
- **D** Describe the behavior that you see or want to see that is appropriate
- **E** “Enjoy” your playtime with your child by having enthusiastic play

Use “physical positives” such as smiles, looking with eyes, hugs, kiss, sitting close. Reduce questions and commands.

Avoid NO, DON’T STOP, QUIT, & NOT

**WAYS TO USE SELECTIVE ATTENTION:**

- Stay silent.
- Turn your eyes away.
- Play with something else.
- Keep your facial expression blank.

Make your play really fun so that the child will want to play that activity. Compliment or praise another child’s appropriate behavior. Turn your back away.

**Praise child immediately when he/she begins behaving appropriately!**

**Behaviors to notice, describe, and praise:**

<table>
<thead>
<tr>
<th>Attitude</th>
<th>Concentrating</th>
<th>Minding</th>
<th>Softly</th>
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<tbody>
<tr>
<td>Big boy/girl voice</td>
<td>Cooperative</td>
<td>Patiently</td>
<td>Taking their time</td>
</tr>
<tr>
<td>Calmly</td>
<td>Following directions</td>
<td>Polite words</td>
<td>Taking turns</td>
</tr>
<tr>
<td>Carefully</td>
<td>Gently</td>
<td>Quiet</td>
<td>Using words</td>
</tr>
<tr>
<td>Caring</td>
<td>Hands to self</td>
<td>Quickly</td>
<td>Waiting</td>
</tr>
<tr>
<td>Choosing</td>
<td>In-door voice</td>
<td>Thinking things over</td>
<td></td>
</tr>
<tr>
<td>Cleaning up</td>
<td>Letting others talk</td>
<td>Saying nice things</td>
<td></td>
</tr>
<tr>
<td>Complying (first time)</td>
<td>Listening</td>
<td>Sharing</td>
<td></td>
</tr>
</tbody>
</table>

**How hard will it be for you to do your Daily Care this week?**

PDI Daily Care

- Circle PDI Homework step
  - Clean-up commands; 2-4 real life commands; all day commands; house rules
- Differentiates 5-minute special play from PRIDE skills used throughout the day
- Daily record how many timeouts used
- Overall rating of child's day
- Back includes BE DIRECT and space to write commands and house rules
PDI Daily Care!

This Week’s PDC Focus
(circle):
1. Clean-up Commands
2. 2-4 Real Life Commands
3. All Day Commands
4. House Rules

During 5 Minutes

<table>
<thead>
<tr>
<th>5-Minute Special Play Time?</th>
<th>What toys did you play with?</th>
<th>Circle PRIDE skills used today</th>
<th>Number of Time Outs for Disobeying PDI Commands</th>
<th>Overall, how was your child today? (circle one)</th>
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<tbody>
<tr>
<td>Monday</td>
<td>YES</td>
<td>Praise Reflect imitate Describe Enjoy</td>
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<td>YES</td>
<td>Praise Reflect imitate Describe Enjoy</td>
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</table>

Throughout the Day

<table>
<thead>
<tr>
<th>PRAISE</th>
<th>Reflect</th>
<th>imitate</th>
<th>Describe</th>
<th>Enjoy</th>
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<tbody>
<tr>
<td>☑️</td>
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UC DAVIS

CHILDREN’S HOSPITAL

Specific Skills to Practice Daily

Use your Relationship Enhancement Skills (PRIDE)

P: Praise the appropriate behavior that you see immediately
R: Use “reflection” to teach your child to listen and communicate
I: Model (imitate & Model) the behavior you desire
D: Describe the behavior that you see or want to see that is appropriate
E: “Enjoy” your playtime with your child by having enthusiastic play.

Use “physical positives” such as smiles, looking with eyes, hugs, kisses, sitting close.
Reduce questions and commands.
Avoid NO, DON'T STOP, QUIT, & NOT

Behavior to notice, describe, and praise:

- Attitude
- Big boy/girl voice
- Calmly
- Carefully
- Caring
- Choosing
- Cleaning up
- Complying (first time)

BE DIRECT when you give commands

- Be Specific about what you want your child to do
- Every command positively stated (tell your child what TO DO)
- Developmentally Appropriate (within your child’s abilities)
- Individual (ONE command at a time)
- Respectful and polite (model respectful words – please)
- Essential Commands Only (only give commands when necessary)
- Carefully Time Explanations (tell your child why they need to listen)
- Tone of Voice Neutral (stay calm so your child stays calm)

Specific Commands to Use this week:

1.  
2.  
3.  
4.  

How hard will it be for you to do your Daily Care this week?


UC DAVIS Children's Hospital

Unpublished Manuscript
PDI Readiness Checklist

READ THROUGH THE FOLLOWING ITEMS AND CHECK THOSE THAT APPLY:

RISK OF DROPOUT
If any of the items below are checked there may be a high risk of dropout.
☐ Client is at CDI 9 or above
☐ Parent seems defeated and hopeless about achieving mastery or completing PCC
☐ Parent is canceling on a regular basis (e.g., 2 out of 4 sessions per month)

EXPECTATIONS FOR FAMILY SKILL ACQUISITION
If any of the below items are checked, you may need to be more flexible about mastery for the family.
☐ Child has cognitive delays, ASD, or IDD
☐ Parent's language skills are poor, has cognitive delays, mental health problems (e.g., depression), or has been out of rehab < 1yr.
☐ Environment-Cultural barriers, parent is non-residential

SELF-MONITORING
Self-monitoring questions: Are all of the below items checked? If so, it is likely that you have done all that you can to engage the caregiver
☐ I reviewed a recent video of a coaching session; parent was responsive to my coaching
☐ I used level 3 coaching to point out the positive effects. I have noticed when the parent uses the PRIDE skills.
☐ The parent demonstrated that he/she knows what the PRIDE skills are and can use them without line feeding.
☐ I have had the WACB/Skill Acquisition: Homework talk-talking to the parent about the connection between children’s improvement and parent commitment to homework.

ADEQUACY OF SKILL ACQUISITION
Parent is close to mastery (within 70% of mastery – e.g., 7-7.7 and 4 or 5) AND any of the following items are checked? If so, parent may have adequate skill acquisition.
☐ Parent is able to ignore child's mildly inappropriate behaviors
☐ Parent consistently masters at least one PRIDE skill in a coaching session
☐ Parent improves after coaching, as measured by coding at the start and end of a coaching session; performs better when using flashcards
☐ Parent reports successes using PRIDE skills; reports doing homework

What is the quality of the parent-child interaction? (Are the below items checked? If so, parent-child relationship may be considered as sufficiently strong to proceed.)
☐ I assessed the dyad using the AID and got mostly 2s and 3s in the Parent Behaviors section
☐ I assessed the dyad using the AID and got mostly 2s and 3s in the Parent-Child Interactions section

IF: RISK OF DROPOUT OR LOWERED EXPECTATIONS AND SELF-MONITORING = YES
AND ADEQUATE SKILL ACQUISITION = YES
THEN: FAMILY MAY BE MOVED ON TO PDI
PDI Readiness Checklist

Four key questions:

1. What is the risk of dropout?
2. Reflecting on your expectations for this client, should they be performing better?
3. Have you done everything you can to engage the parent and reinforce their skills?
4. Have they acquired enough skills to be able to succeed in PDI?
PDI Readiness Checklist

How do you assess the risk of dropout?

1. Is the family at CDI9 or above?
2. Does the parent seem discouraged about ever achieving mastery? Is there a drop in their engagement and effort?
3. Is there a drop in their attendance?
PDI Readiness Checklist

How do you assess & set expectations?

1. Does child have cognitive delays, ASD, IDD?
2. Is parent an English language learner?
3. Does parent have cognitive deficits?
4. Does parent have mental health problems?
5. Are there cultural barriers?
6. Does parent live with the child?
PDI Readiness Checklist

How do you assess yourself?

1. Review a video recording of a session.
   - How does parent respond to your coaching?
   - Are you pointing out the positive effects of parent using PRIDE skills?
   - Can parent use PRIDE skills without your line feeding?

2. Have you had the WACB-Homework talk?

3. Check in with your team.
PDI Readiness Checklist

How do you know if parent is close to mastery?

1. Is parent scoring at 70% of mastery or better? (7-7-7 and 4 or 5)
2. Is parent consistently at mastery of one of the PRIDE skills each week, but not all at once?
3. Does parent’s skill improve after coaching?
4. Does parent report successes using PRIDE skills?
PDI Readiness Checklist

Using this information to decide PDI readiness

IF

1. RISK OF DROPOUT OR LOWERED EXPECTATIONS = YES
2. AND SELF-MONITORING = YES
3. AND ADEQUATE SKILL ACQUISITION (close to mastery and strong relationship) = YES

THEN: FAMILY MAY BE MOVED ON TO PDI
PDI Courage

• This new form is designed to help build caregiver & clinician courage for starting PDI.
• When children have a history of defiant & disruptive behavior, it's hard for adults to say/do anything that might cause that behavior.
• Starting PDI Takes Courage!
PDI Courage

When children have a history of defiant and disruptive behavior, it’s hard for adults to say/do anything that might cause that behavior. This is why starting PDI takes courage.

Clinician Introduction of PDI Courage to Caregivers: You can say “Teaching your child new behaviors is hard. You might have tried to do it in the past and it didn’t go well. Maybe your child had a really embarrassing tantrum, they got really upset, said mean things, or it even ruined the day. I have a few questions for us to talk about – they will help us think about what you can do to prepare to teach your child to listen.”

Caregiver Discussion Questions:
- Is there any behavior that your child might display in PCIT that you’re scared/worried about? Fearful that it might show up?
- Is there something that might really hurt your feelings or make you question if you’re being a good parent/mom/dad?
- Are you worried that your child will physically hurt you? Similar to how they/others have hurt you?
- Is there anything that might be really stressful and make you feel overwhelmed?
- How confident (scale 1-10) are you that your child will listen when you give a direction?
- Is there anyone in the home that could get in the way of you giving a direction or doing a time out?
- Are you ready to start practicing giving directions? Do you realize that your child might not listen to your directions when you first start practicing?
- Do you sometimes feel heartbroken/guilty whenever you hear your child cry or tantrum?
- Are you unsure how giving directions and doing time out are going to help your child listen more?
- Do you wonder: “What is the point?” “Can this hurt my child?”
- Have you tried time out before and question if it will work now? Are you willing to try it in PCIT?
- Does time out feel awkward – it’s very different than typical parenting in your family or culture.

How to Prepare to be Courageous in PDI:
- Caregiver Preparation: explore the above caregiver discussion questions and help the caregiver develop a PCIT consistent plan or strategy for managing it.
- Child Preparation: inform the child that you will be starting PDI and what that will look like. This can be done at check in/out. You can explain “[child name] playtime is going to be different now, mom/dad is going to be practicing giving you directions. That can be hard for kids so I wanted to tell you about it before we start. When you follow directions ____ and when you don’t follow directions _____. For younger children or those with less developed language the change in special playtime from CDI to PDI can be modeled (e.g. use of Mr. Bear).
- PCIT Room Preparation: carefully select toys, limit the number of toys, limit the furniture.
- Family Preparation: include other caregivers who live in the home or who also participate in the child’s parenting.
- Home Preparation: discuss the home set up with the caregiver. It may be helpful to sketch an outline of the home with the caregiver and think through where they would do timeout.
- Prepare to Succeed: You can share something like “I have many families have learned PDI and had a lot of success in getting their child to listen and have less tantrums. I am trained to coach parents to manage difficult child behaviors.” Take Courage, start PDI and plan to succeed.

Graduation Planning

- This new form provides a goal setting approach to help families in PCIT visualize the finish line.

- The strategies are designed to help the therapist and caregiver collaborate on a plan for completing PCIT.
Graduation Planning

Successfully completing CDI & POI can sometimes feel unattainable. This is especially true when there are numerous factors affecting PCIT progress. Mapping out a plan for how to achieve the family’s PCIT goals and graduate can help make the steps clearer and more manageable.

What is Graduation Planning? It’s a goal setting approach to help families in PCIT visualize the finish line. The strategies are designed to help the therapist and caregiver collaborate on a plan for completing PCIT.

Who is it for?
- Caregivers feeling overwhelmed by PCIT. Receiving coaching is difficult for them.
- Caregivers feeling hopeless about finishing PCIT.
- Caregivers who have a high no-show rate.
- Caregivers who have trouble buying into PCIT.
- Caregivers who are motivated to graduate PCIT.

When should you start Graduation Planning?
- It’s never too early to set a goal. You can start graduation planning in CDI.
- Whenever any of the above caregiver concerns are present.
- At the start of or during PDI.

Clinician Introduction of Graduation Planning: You can say “You’ve been working really hard to learn and practice PCIT skills in the clinic and at home. You might be wondering how many more skills we have left and when you can expect to be done with coaching. I would like to talk to you about planning for yours and [child’s name]’s PCIT graduation.”

Strategies for Graduation Planning?
- Have the caregiver set a graduation date.
- Make a graduation certificate. Date the certificate and show the family.
- Map out remaining coaching sessions on a calendar. Use the UCD PDI coaching grid to outline the steps (see sample calendar).
- Contract for the finish line. You can describe your coaching commitment and the caregiver can outline theirs (e.g. do special play time at least 5x a week).
- Congratulate small successes (e.g. thanks for showing up on time).
- Relate your positive expectation that they can make it (e.g. you’re really great at _, I believe that you’ll learn ___ too").
- Shop for your proverbial prom dress/tux. Make any special preparations for the graduation party (e.g. playing with a preferred toy, having a special snack, wearing a special outfit such as a princess crown or superhero outfit).
- Make post-graduation plans (e.g. “when [child’s name] and I graduate, we will do ___”). This can be something that they would not have been able to do prior to the child learning how to comply (e.g. go someplace in the community).
- Involve the child in graduation planning where possible.

## Graduation Planning Calendar

**Sample 3 Month Calendar (Mon. – Fri.)**

### September 2017

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<tr>
<th>Monday</th>
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<tr>
<td>4.</td>
<td>5.</td>
<td>PDI Teach</td>
<td></td>
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<tr>
<td>11.</td>
<td>12.</td>
<td>6. PDI Courage &amp; Graduation Planning</td>
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<tr>
<td>18.</td>
<td>19.</td>
<td>13. PDI #1: Intro &amp; Practice Minding</td>
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<td>25.</td>
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<td>20. PDI #2: Giving Effective Commands</td>
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<td>27. PDI #3: Commands &amp; TO Practice</td>
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### October 2017

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<td>9.</td>
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<td>4. PDI #4: Introduce House Rules</td>
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<td>16.</td>
<td>17.</td>
<td>11. PDI #5: Introduce Public Behavior</td>
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<td>25.</td>
<td>26.</td>
<td>25. PDI #7: Wrapping up</td>
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### November 2017

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<tbody>
<tr>
<td>1.</td>
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<td>PDI #7: Wrapping up</td>
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Assessment of Interaction Quality (AIQ)

- Revised questions
- Revised wording
- 3 point Likert Scale
- 1 additional question
Using the AIQ

It contains great level 3 coaching statements!

#4. It is so easy for you to use the PRIDE skills, and you’re so relaxed!

#7. You have such a warm tone of voice!

#12. Josh reacts so positively to your praise!

#17. Your positive attention has really improved Josh’s behaviors!
Assessment of Therapist Coaching (ATC)

Assesses 5 Domains

1. Sensitivity
2. Warmth
3. Pace & Flow
4. Knowledge
5. Treatment Fidelity

Changes

• Revised wording
• 3 point Likert
# Assessment of Therapist Coaching

## SENSITIVITY
1. Parent responds to therapist's coaching by following suggestions
2. Parent does not respond to coaching by changing subject or talking over parent
3. Therapist explains reasons for doing things in ways that are meaningful to the parent
4. Therapist's praise is rewarding for parent.
5. Gives feeling of working as team with the parent.
6. Coaching is effective in facilitating change in the child's behavior.
7. Coaching shows that therapist understands parent and child behavior and the quality of the parent-child relationship.

## WARMTH
8. Praise is genuine
9. It is easy for the therapist to praise the parent; and the therapist is relaxed doing it.
10. Has warm tone of voice.
11. Gives sense that he/she likes the parent & child.
12. Corrects parent effectively when warranted.

## PACE & FLOW
13. Coaching is timed well
14. Coaching is balanced appropriately between leading, following, and explaining.
15. Not too talkative. Gives parent a chance to act and speak.
16. Takes advantage of opportunities to "show and tell."

## KNOWLEDGE
17. Can coach a time out calmly and confidently
18. Coaches parent to ignore effectively when child misbehaves.
19. Knows and is able to give parent information about child development.

## KNOWLEDGE (CONT'D)
20. Knows and is able to give parent information about effects of trauma
21. Explanations give parent the sense that his/her coaching has a larger purpose
22. Able to easily articulate functions of behaviors
23. Labels verbalizations correctly

## TREATMENT FIDELITY
24. Therapist praises or describes child's positive qualities related to treatment goals.
25. Describes parent's and child's behaviors or attitudes related to treatment goals
26. Remains positively and actively engaged in coaching for half an hour.
27. Conducts 5-minute coding, gives feedback, and makes feedback sensible to parent.
28. Recognizes when parent needs to be corrected.
RECAP

1. Daily Care
2. PDI Readiness
3. PDI Courage
4. Graduation Planning
5. Revisions to
   - AIC
   - ATC
WRAP UP & QUESTIONS
CONTACT US

Website:  pcit.ucdavis.edu

Web Course:  pcit.ucdavis.edu/pcit-web-course

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