EMDR Consultee Performance Checklist

**Rate each task from 0-5. 0 = Has not started task.**

 **1 = Struggling.**

 **2 = Acceptable.**

 **3 = Average.**

 **4 = Good.**

 **5 = Very Good**

**Trauma Informed Therapist**

\_\_\_\_\_Understands what trauma is and how it occurs

\_\_\_\_\_Recognizes behaviors and symptoms related to trauma

\_\_\_\_\_Demonstrates an ability to explain trauma to clients

\_\_\_\_\_Able to describe the Adaptive Information Processing model

**Three Pronged Approach**

\_\_\_\_\_Able to describe the three-pronged approach

\_\_\_\_\_Understands future template

\_\_\_\_\_Completes all three prongs for each target addressed

**History Taking and Treatment Planning**

\_\_\_\_\_Collection of a thorough trauma informed bio-psycho-social history

\_\_\_\_\_Completion of trauma/loss history

\_\_\_\_\_Effectively create and implement case formulation and treatment planning

\_\_\_\_\_Understands and can determine if client meets EMDR selection criteria

\_\_\_\_\_Can identify an appropriate stepping-stone memory to start with

\_\_\_\_\_Can determine target sequencing and appropriate target selection

**Preparation**

\_\_\_\_\_Can adequately explain the EMDR process to the client

\_\_\_\_\_Understands mechanics of EMDR (seating, distance, speed, etc.).

\_\_\_\_\_Effectively teaches client’s resource tools such as safe/calm place, RDI, relaxation breaths, etc.

\_\_\_\_\_Effectively involves other family members/supports when appropriate

**Assessment**

\_\_\_\_\_Obtains an appropriate image

\_\_\_\_\_Effectively obtains a negative cognition NC

\_\_\_\_\_Effectively obtains a positive cognition PC

\_\_\_\_\_Uses Value of Cognition scale to rate PC

\_\_\_\_\_Obtains emotions

\_\_\_\_\_Obtains the SUDS

\_\_\_\_\_Obtains the location in the body

\_\_\_\_\_Sets up target quickly

**Desensitization**

\_\_\_\_\_Able to guide client through set-up to begin first round

\_\_\_\_\_Understands when to use long vs. short sets of EM’s

\_\_\_\_\_Consistently able to stay out of the way and “go with that.”

\_\_\_\_\_Understands when to utilize a cognitive interweave

\_\_\_\_\_Understands the different types of cognitive interweaves

\_\_\_\_\_Understands when to ask for SUDS rating

\_\_\_\_\_Understands when to go back to target

\_\_\_\_\_Manages abreactions effectively

\_\_\_\_\_Knows how to work with cluster memories

\_\_\_\_\_Knows when desensitization is complete (0 and no change)

**Installation**

\_\_\_\_\_Asks if PC still fits or if there’s something that fits better

\_\_\_\_\_Asks for VOC on PC

\_\_\_\_\_Asks client to pair memory with PC

\_\_\_\_\_Can identify and address any blocking beliefs

\_\_\_\_\_Takes client all the way to VOC of 7 for PC and no change

Body Scan

\_\_\_\_\_Uses body scan with client

\_\_\_\_\_Knows to continue until body scan is clear

Closure

\_\_\_\_\_Able to close down an incomplete session (container, safe place, etc.).

\_\_\_\_\_Does a check-in with client on experience of session

\_\_\_\_\_Effectively explains to clients about effects of processing and what to expect

**Re-evaluation**

\_\_\_\_\_Always completes a check-in at start of session

\_\_\_\_\_Asks about target addressed last time

\_\_\_\_\_Knows how to continue with a target left from last session

\_\_\_\_\_Knows what target to address next

**Other**

**\_\_\_\_\_Read Eye Movement Desensitization and Reprocessing Basic Principals, Protocols and Procedures by Francine Shapiro**

**\_\_\_\_\_Completed at least one video’s for consultant’s review**

**\_\_\_\_\_Completed any readings and assignments given by consultant**