

Describe the main problems

Can you think of a recent example when you felt.....?

Describe what happened.

Thoughts & Images, Emotions, Behaviours, Physical sensations (use 5 Aspects prompt form?)

Is this situation typical of what happens?

Where is it most likely to happen?

When does it happen?

Who are you most likely to be with?

How does it happen?

How often does this happen?

How distressing?

How long does it go on for when it happens?

How does it usually start?

What helps?
What makes things better?
E.g. avoidance, substances, safety behaviours

Impact
How does this problem affect your daily life? *work, home, family/friends, study*

Coping resources
What helps you cope generally? *Enjoyment, achievement, relationships, spirituality etc.*

What brings you to therapy now? At this time?

What do you hope to achieve in therapy? What will be different?

What medication do you take?

Do you use alcohol, drugs, tobacco, other substances? How much?

General mental state
Mood, concentration, memory, sleep, weight changes etc.

Risk – self-harm: thoughts, plans, likelihood to act etc.
Other risks (*neglect, aggression/violence, abuse etc*)

Previous therapy / treatment
What have you tried before? What helped? What didn't help?

Problem summary

Initial formulation (*or use separate sheet*)

Give brief explanation of CBT

Homework?

Check out understanding, any questions etc

Arrange next appointment

Prompt Sheet

Use if preferred as simple checklist / prompt sheet

Describe the main problems	
Can you think of a recent example when you felt.....? Describe what happened. <i>Thoughts & Images, Emotions, Behaviours, Physical sensations (use 5 Aspects prompt form?)</i>	
Is this situation typical of what happens? Where is it most likely to happen? When does it happen? Who are you most likely to be with? How does it happen?	
How often does this happen? How distressing? How long does it go on for when it happens? How does it usually start?	
What helps? What makes things better? <i>E.g. avoidance, substances, safety behaviours</i>	
Impact - How does this problem affect your daily life? <i>work, home, family/friends, study</i>	
Coping resources. What helps you cope generally? <i>Enjoyment, achievement, relationships, spirituality</i>	
What brings you to therapy now? At this time?	
What do you hope to achieve in therapy? What will be different?	
What medication do you take?	
Do you use alcohol, drugs, tobacco, other substances? How much?	
General mental state <i>Mood, concentration, memory, sleep, weight changes etc.</i>	
Risk – self-harm: thoughts, plans, likelihood to act etc. Other risks?	
Previous therapy / treatment <i>What have you tried before? What helped? What didn't help?</i>	
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