

DOSAGE PRO_xBATION:

Staff Manual

December 2020

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Dosage Probation: Staff Manual

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The National Institute of Corrections, in partnership with the Center for Effective Public Policy, has developed this resource to highlight the innovative concept of dosage probation and to share the successes, challenges, and lessons learned. This model of community supervision is not yet fully tested.

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Research has shown that the risk of recidivism can be reduced, on average, by 30%¹ when effective interventions are applied. Interventions are most effective when they reflect core correctional practices—building professional alliance, effective case planning and management, skill practice to address a person’s most influential criminogenic needs, and appropriately using rewards and responses to noncompliance—and when there is sufficient time to devote to a person’s dynamic risk factors.²

This manual is designed to provide dosage probation officers with a roadmap they can follow for their appointments with probationers—from initial appointments to the development of case plans, skill building, and preparation for discharge. Each appointment has distinct goals, activities, and a structure³ to ensure it is purposeful and intentional. Departments are encouraged to tailor the information in the manual to their specific needs (e.g., inserting, where appropriate, the names of their risk/needs assessments, the titles of cognitive-behavioral tools available to dosage probation officers, the name of their electronic case notes system, references to departmental policies, etc.).

¹ Andrews, D. A. (2007). Principles of effective correctional programs. In L. L. Motiuk & R. C. Serin (Eds.), *Compendium 2000 on effective correctional programming*. Correctional Service Canada. https://www.csc-scc.gc.ca/005/008/com2000-chap_2-eng.shtml

² Bonta, J., Rugge, T., Scott, T.-L., Bourgon, G., & Yessine, A. K. (2008). Exploring the black box of community supervision. *Journal of Offender Rehabilitation*, 47(3), 248–270. https://www.researchgate.net/publication/228355242_Exploring_the_Black_Box_of_Community_Supervision

³ See Appendix A for the four-point structure underlying the appointments described in this manual.

Appointment Goals

- Build professional alliance.
- Model prosocial attitudes and skills.
- Establish supervision expectations.
- Lay the groundwork for the next appointment.

Step Appointment Activities⁴

- 1 Introduce dosage probation opportunities and expectations** by following the Role Script for Initial Supervision Appointment (Appendix D).
- 2 Review intake documents:** [enter any documents that must be reviewed with the probationer upon intake, such as the following].
 - Court Order
 - Victim Notification (if applicable)
 - Supervision Fee Schedule (if applicable)
- 3 Review the Dosage Tracking Worksheet** (Appendix E).⁵
- 4 Give and review a take-home assignment:**⁶ [insert the assignment title/description].
(The assignment should be related to identifying strengths or, if needed, addressing violation concerns.)
- 5 Ask the probationer to summarize the appointment** to ensure understanding.
- 6 If applicable, have the probationer document dosage credit** (up to 30 minutes).⁷ Indicate that when appointments focus on skill development, and programming begins, dosage credit amount will increase.
- 7 Document the appointment** in [insert the department's electronic case notes system]. (See Appendix G for types of notes that should be recorded for each appointment.)

⁴ In addition to the listed activities, appointments should consist of reinforcing positive efforts, rewarding positive behaviors, and responding to noncompliance effectively. (See Appendixes B and C for one framework that can be used when responding to prosocial and noncompliant behaviors.)

⁵ Some departments will use case management software to track dosage.

⁶ The nature of the assignment should adhere to the requirements specified in the department's *Counting Dosage Manual* and in the Counting Dosage Reminders (Appendix F).

⁷ It can be appropriate to provide some dosage credit for early appointments, even though they do not strictly meet the "counting dosage" requirements, to incentivize cooperation. Consider providing up to 30 minutes of credit, assuming the appointment follows the content/structure described above.

Appointment Goals

- Continue to build professional alliance.
- Understand strengths.
- Identify risk level and criminogenic needs (“risk factors”) by completing the [insert the department’s approved risk/needs assessment].
- Lay the groundwork for the next appointment.

Step Appointment Activities⁸

- 1 **Conduct a brief check-in** and review the take-home assignment: [insert the assignment title/description from Appointment 1].
- 2 **Complete** [insert the department’s approved risk/needs assessment]; indicate that assessment results will be discussed at the next appointment.
- 3 **Give and review a take-home assignment:** [insert the assignment title/description].⁹
(The assignment should be related to identifying rewards that are most meaningful to, and would have the most impact on, the probationer and how the rewards may be earned.)
- 4 **Ask the probationer to summarize the appointment** to ensure understanding.
- 5 **If applicable, have the probationer document dosage credit** (up to 30 minutes, plus time for completing the previous assignment).¹⁰ Remind the probationer that when appointments focus on skill development, and programming begins, dosage credit amount will increase.
- 6 **Document the appointment** in [insert the department’s electronic case notes system]. (See Appendix G for types of notes that should be recorded for each appointment.)
- 7 **Identify the probationer’s risk level** per [insert the department’s approved risk/needs assessment] and dosage hour target:
 - Insert risk levels and corresponding dosage targets for easy reference. For example:
 - **Moderate:** 100 dosage hours
 - **Moderate-high:** 200 dosage hours
 - **High:** 300 dosage hours

Identify whether, according to the assessment, the following are among the probationer’s five most influential criminogenic needs:

 - **antisocial cognition** (“thoughts and beliefs”),
 - **antisocial personality/temperament** (“coping/self-control skills”),
 - **antisocial associates** (“friends”),
 - **family/marital** (“family/relationships”), and
 - **substance abuse** (“alcohol and/or drug use”).

⁸ In addition to the listed activities, appointments should consist of modeling prosocial attitudes and skills, reinforcing positive efforts, rewarding positive behaviors, and responding to noncompliance effectively. (See Appendixes B and C for one framework that can be used when responding to prosocial and noncompliant behaviors.)

⁹ The nature of the assignment should adhere to the requirements specified in the department’s *Counting Dosage Manual* and in the Counting Dosage Reminders (Appendix F).

¹⁰ It can be appropriate to provide some dosage credit for early appointments, even though they do not strictly meet the “counting dosage” requirements, to incentivize cooperation. Consider providing up to 30 minutes of credit, assuming the appointment follows the content/structure described above, as well as credit for the time the probationer spent completing the previous assignment, as per the department’s *Counting Dosage Manual* and the Counting Dosage Reminders (Appendix F). Note that some departments will use case management software to track dosage.

Appointment Goals

- Understand meaningful rewards.
- Share assessment results and dosage requirement based upon risk level.
- Assess motivation and thinking.
- Lay the groundwork for the next appointment.

Step Appointment Activities¹¹

- 1 **Conduct a brief check-in** and review the take-home assignment: [insert the assignment title/description from Appointment 2].
- 2 **Share assessment results** and conduct an exercise to explore criminogenic needs.¹² (Facilitate an exercise designed to help the probationer reflect on how their risk factors have influenced their life.)
- 3 **Share the dosage hours target**; remind the probationer of the intention to build a collaborative case plan to achieve dosage hours.
- 4 **Give and review a take-home assignment**: [insert the assignment title/description].¹³ (The assignment should be related to a more in-depth look at which criminogenic needs have been the most impactful and why.)
- 5 **Ask the probationer to summarize the appointment** to ensure understanding.
- 6 **If applicable, have the probationer document dosage credit** (up to 30 minutes, plus time for completing the previous assignment).¹⁴ Remind the probationer that when appointments focus on skill development, and programming begins, dosage credit amount will increase.
- 7 **Assess the degree of the probationer's behavior change** prior to the probationer leaving.¹⁵
- 8 **Document the appointment** in [insert the department's electronic case notes system]. (See Appendix G for types of notes that should be recorded for each appointment.)

¹¹ In addition to the listed activities, appointments should consist of modeling prosocial attitudes and skills, reinforcing positive efforts, rewarding positive behaviors, and responding to noncompliance effectively. (See Appendixes B and C for one framework that can be used when responding to prosocial and noncompliant behaviors.)

¹² The nature of the intervention should adhere to the requirements specified in the department's *Counting Dosage Manual* and in the Counting Dosage Reminders (Appendix F).

¹³ The nature of the assignment should adhere to the requirements specified in the department's *Counting Dosage Manual* and in the Counting Dosage Reminders (Appendix F).

¹⁴ It can be appropriate to provide some dosage credit for early appointments, even though they do not strictly meet the "counting dosage" requirements, to incentivize cooperation. Consider providing up to 30 minutes of credit, assuming the appointment follows the content/structure described above, as well as credit for the time the probationer spent completing the previous assignment, as per the department's *Counting Dosage Manual* and the Counting Dosage Reminders (Appendix F). Note that some departments will use case management software to track dosage.

¹⁵ Some, but not all, departments require evidence of a probationer's behavior change before the probationer is discharged. If this evidence is required, the degree of behavior change should be assessed three times: 1) at the third appointment, 2) when 50% of dosage hours have been completed, and 3) when 100% of dosage hours have been completed. For more information on assessing behavioral change, see the department's *Behavioral Indicators Assessment Manual*.

Appointment Goals

- Continue to build professional alliance.
- Collaborate with the probationer on the primary criminogenic need(s) to be included in the case plan.
- Lay the groundwork for the next appointment.

Step Appointment Activities¹⁶

- 1 **Conduct a brief check-in** and review the take-home assignment: [insert the assignment title/description from Appointment 3].
- 2 **Agree on the one or two most influential criminogenic needs** to be included in the case plan; keep in mind the five most influential criminogenic need areas specified in the department's *Counting Dosage Manual* and in the Counting Dosage Reminders (Appendix F).
- 3 **Give and review a take-home assignment:** [insert the assignment title/description].¹⁷
(The assignment should be related to steps the probationer can take to positively influence the chances of success. If stabilization/responsivity concerns exist, an assignment that explores what these needs are may be given as well.)
- 4 **Ask the probationer to summarize the appointment** to ensure understanding.
- 5 **If applicable, have the probationer document dosage credit** (up to 30 minutes, plus time for completing the previous assignment).¹⁸ Remind the probationer that when appointments focus on skill development, and programming begins, dosage credit amount will increase.
- 6 **Document the appointment** in [insert the department's electronic case notes system]. (See Appendix G for types of notes that should be recorded for each appointment.)

¹⁶ In addition to the listed activities, appointments should consist of modeling prosocial attitudes and skills, reinforcing positive efforts, rewarding positive behaviors, and responding to noncompliance effectively. (See Appendixes B and C for one framework that can be used when responding to prosocial and noncompliant behaviors.)

¹⁷ The nature of the assignment should adhere to the requirements specified in the department's *Counting Dosage Manual* and in the Counting Dosage Reminders (Appendix F).

¹⁸ It can be appropriate to provide some dosage credit for early appointments, even though they do not strictly meet the "counting dosage" requirements, to incentivize cooperation. Consider providing up to 30 minutes of credit, assuming the appointment follows the content/structure described above, as well as credit for the time the probationer spent completing the previous assignment, as per the department's *Counting Dosage Manual* and the Counting Dosage Reminders (Appendix F). Note that some departments will use case management software to track dosage.

Appointment Goals

- Continue to build professional alliance.
- Identify the first two case plan goals.
- Teach the cognitive model (“the link between thoughts, feelings, and actions”).
- Lay the groundwork for the next appointment.

Step Appointment Activities¹⁹

- 1 **Conduct a brief check-in** and review the take-home assignment: [insert the assignment title/description from Appointment 4].
- 2 **Identify and secure agreement on the first two case plan goals** (action steps come later).
 - One goal should target the need area that drives the majority of problematic behavior.
 - The second goal should address another one of the five most influential criminogenic needs or a stabilization concern.
- 3 **Teach the cognitive model** by discussing the connection between thoughts, feelings, and actions. Together, complete an exercise designed to apply the model to a risky life situation. Explain that you will be returning to this model throughout supervision.
- 4 **Give and review a take-home assignment:** [insert the assignment title/description].²⁰
(The assignment could be another opportunity to practice the cognitive model. Alternatively, if responsivity issues are evident, consider an assignment related to addressing these issues.)
- 5 **Ask the probationer to summarize the appointment** to ensure understanding.
- 6 **Discuss the importance of getting and being open to feedback**, and have the probationer provide structured feedback about the appointment before leaving.²¹
- 7 **Have the probationer document dosage credit** for participation in the appointment, completion of the previous assignment, and any programming, as per the department’s *Counting Dosage Manual* and the Counting Dosage Reminders (Appendix F).²²
- 8 **Document the appointment** in [insert the department’s electronic case notes system]. (See Appendix G for types of notes that should be recorded for each appointment.)

¹⁹ In addition to the listed activities, appointments should consist of modeling prosocial attitudes and skills, reinforcing positive efforts, rewarding positive behaviors, and responding to noncompliance effectively. (See Appendixes B and C for one framework that can be used when responding to prosocial and noncompliant behaviors.)

²⁰ The nature of the assignment should adhere to the requirements specified in the department’s *Counting Dosage Manual* and in the Counting Dosage Reminders (Appendix F).

²¹ A structured feedback survey should be used. It may be completed verbally, in writing, or using some combination of the two.

²² Some departments will use case management software to track dosage.

Appointment Goals

- Reinforce the cognitive model.
- Make the connection between risk factors and skills.
- Further explore responsivity factors for case planning.
- Introduce SMART action steps for case plan goals.
- Continue developing the initial case plan.

Step Appointment Activities²³

- 1 **Conduct a brief check-in**, reinforce the steps in the cognitive model, and review the take-home assignment: [insert the assignment title/description from Appointment 5].
- 2 **Revisit the two agreed-upon case plan goals**; review how the goals link to key life areas (criminogenic needs) being addressed in the case plan; revise the goals if needed; discuss any specific stabilization/responsivity needs and how these might be accommodated in the case plan.
- 3 **Discuss the connection between risk factors and skills** (i.e., building specific skills that relate to life areas [criminogenic needs] that have been a challenge in the past will prevent problems in the future). Then, select a skill associated with each case plan goal (e.g., learning how to respond to peer pressure can be a helpful skill when the goal is to avoid trouble with friends).
- 4 **Discuss how to work toward the case plan goals**. Introduce the idea of action steps and SMART criteria.
- 5 **Give and review a take-home assignment**: [insert the assignment title/description].²⁴
(The assignment should be to identify at least a few SMART action steps for each case plan goal; one step for each goal should be to work on the skill that was identified earlier in the appointment.)
- 6 **Ask the probationer to summarize the appointment** to ensure understanding.
- 7 **Have the probationer document dosage credit** for participation in the appointment, completion of the previous assignment, and any programming, as per the department's *Counting Dosage Manual* and the Counting Dosage Reminders (Appendix F).²⁵
- 8 **Document the appointment** in [insert the department's electronic case notes system]. (See Appendix G for types of notes that should be recorded for each appointment.)

²³ In addition to the listed activities, appointments should consist of continuing to build professional alliance, modeling prosocial attitudes and skills, reinforcing positive efforts, rewarding positive behaviors, and responding to noncompliance effectively. (See Appendixes B and C for one framework that can be used when responding to prosocial and noncompliant behaviors.)

²⁴ The nature of the assignment should adhere to the requirements specified in the department's *Counting Dosage Manual* and in the Counting Dosage Reminders (Appendix F).

²⁵ Some departments will use case management software to track dosage.

Appointment Goals

- Finalize the initial case plan.
- Begin skill practice to achieve risk reduction.
- Introduce the appointment card.

Step Appointment Activities²⁶

- 1 **Conduct a brief check-in** and review the take-home assignment: [insert the assignment title/description from Appointment 6].
- 2 **Finalize the case plan.** Have the probationer sign a copy and give it to them for future reference.²⁷
- 3 **Teach skill practice.** Explain the importance of skill practice; discuss the steps involved in one of the skills associated with a case plan goal; ask the probationer to write down the steps; address any questions about the steps; demonstrate the skill for the probationer; clarify and repeat as needed; switch roles and have the probationer practice the skill; affirm effort and give feedback as needed; debrief ambivalence and concerns about using the skill; and graduate complexity when the timing is right.²⁸ Pick a situation related to the case plan where the probationer can practice the skill. Explain to the probationer that, periodically during supervision, you will be conducting skill practice sessions together.
- 4 **Give and review a take-home assignment:** [insert the assignment title/description].²⁹
[The assignment should involve skill practice in an appropriate situation and written reflection on the experience.]
- 5 **Provide the probationer with an appointment card**—a card or other tool they can use to remind them of the goal and skill they are working on, their associated take-home assignment, and other information deemed necessary for the probationer to prepare for the next appointment.
- 6 **Have the probationer document dosage credit** for participation in the appointment, completion of the previous assignment, and any programming, as per the department's *Counting Dosage Manual* and the Counting Dosage Reminders (Appendix F).³⁰
- 7 **Document the appointment** in [insert the department's electronic case notes system]. (See Appendix G for types of notes that should be recorded for each appointment.)

²⁶ In addition to the listed activities, appointments should consist of continuing to build professional alliance, modeling prosocial attitudes and skills, reinforcing positive efforts, rewarding positive behaviors, and responding to noncompliance effectively. (See Appendixes B and C for one framework that can be used when responding to prosocial and noncompliant behaviors.)

²⁷ It is recommended that the probationer be provided with a folder to help them organize and maintain important case management documents throughout supervision (e.g., case plan, worksheets, take-home assignments, appointment cards, etc.). The folder will also be evidence of their accomplishments and can be a source of pride for them.

²⁸ See Appendix H for more details about how to conduct skill practice sessions.

²⁹ The nature of the assignment should adhere to the requirements specified in the department's *Counting Dosage Manual* and in the Counting Dosage Reminders (Appendix F).

³⁰ Some departments will use case management software to track dosage.

Appointment 8 and Beyond

Approximate Duration: 20–30 Minutes/Appointment

Appointment Goals

- Dynamically manage the case plan.
- Manage appointment time effectively by targeting a skill to be developed and teaching the skill.
- Use tools to facilitate behavior change.

Step Appointment Activities³¹

- 1 **Conduct a brief check-in** and review the take-home assignment from the previous appointment.
- 2 **Teach and practice a skill** related to the probationer's most influential criminogenic need(s) as described in the case plan, using structured cognitive-behavioral tools, as per the department's *Counting Dosage Manual* and the Counting Dosage Reminders (Appendix F).
- 3 **Review the case plan** and determine if any changes or updates are needed.
- 4 **Give and review a take-home assignment.**³² Remember to keep each assignment focused on a specific skill that will help the probationer address a criminogenic need included in the case plan, and to provide the probationer with more opportunities to deepen their learning by practicing the skill in their day-to-day setting.
- 5 **Fill out a new appointment card** to reflect the primary case plan goal, specific skill being developed and associated take-home assignment, and other information deemed necessary for the probationer to prepare for the next appointment.
- 6 **Have the probationer provide structured feedback** about the appointment before leaving (follow the established schedule).³³
- 7 **Have the probationer document dosage credit** for participation in the appointment, completion of the previous assignment, and any programming, as per the department's *Counting Dosage Manual* and the Counting Dosage Reminders (Appendix F).³⁴ Remember to assess the probationer's degree of behavioral change when 50% of dosage hours have been completed.³⁵
- 8 **Document the appointment** in [insert the department's electronic case notes system]. (See Appendix G for types of notes that should be recorded for each appointment.)

³¹ In addition to the listed activities, appointments should consist of continuing to build professional alliance, modeling prosocial attitudes and skills, reinforcing positive efforts, rewarding positive behaviors, and responding to noncompliance effectively. (See Appendixes B and C for one framework that can be used when responding to prosocial and noncompliant behaviors.)

³² The nature of assignments should adhere to the requirements specified in the department's *Counting Dosage Manual* and in the Counting Dosage Reminders (Appendix F).

³³ A structured feedback survey should be used at appropriate intervals (as a general rule, monthly, but less often if the probationer provides feedback in other ways). It may be completed verbally, in writing, or using some combination of the two.

³⁴ Some departments will use case management software to track dosage.

³⁵ The degree of a probationer's behavior change should be assessed three times during probation: 1) at the third appointment, 2) when 50% of dosage hours have been completed, and 3) when 100% of dosage hours have been completed. For more information on assessing behavioral change, see the department's *Behavioral Indicators Assessment Manual*.

Preparation for Discharge (Multiple Appointments)

Approximate Duration: 20–30 Minutes/Appointment

Appointment Goal

- Prepare for successful discharge.

Step Appointment Activities³⁶

- 1 **Conduct a brief check-in** and review the take-home assignment from the previous appointment.
- 2 **Develop a release readiness plan.** Work with the probationer to begin filling out worksheets designed to address triggers and stabilization needs.³⁷
- 3 **Build family and/or community support** by addressing ways in which family members can assist the probationer to successfully stay out of the justice system.
- 4 **Give and review a take-home assignment.**³⁸ Remember to keep each assignment focused on a specific skill that will help the probationer address a criminogenic need included in the case plan, and to provide the probationer with more opportunities to deepen their learning by practicing the skill in their day-to-day setting.
- 5 **Fill out a new appointment card** to reflect the primary case plan goal, specific skill being developed and associated take-home assignment, and other information deemed necessary for the probationer to prepare for the next appointment.
- 6 **Have the probationer document dosage credit** for participation in the appointment, completion of the previous assignment, and any programming, as per the department's *Counting Dosage Manual* and the Counting Dosage Reminders (Appendix F). Remember to assess the probationer's degree of behavioral change when 100% of dosage hours have been completed.³⁹
- 7 **Document the appointment** in [insert the department's electronic case notes system]. (See Appendix G for types of notes that should be recorded for each appointment.)

³⁶ In addition to the listed activities, appointments should consist of modeling prosocial attitudes and skills, reinforcing positive efforts, rewarding positive behaviors, and responding to noncompliance effectively. (See Appendixes B and C for one framework that can be used when responding to prosocial and noncompliant behaviors.)

³⁷ The nature of interventions should adhere to the requirements specified in the department's *Counting Dosage Manual* and in the Counting Dosage Reminders (Appendix F).

³⁸ The nature of assignments should adhere to the requirements specified in the department's *Counting Dosage Manual* and in the Counting Dosage Reminders (Appendix F).

³⁹ The degree of a probationer's behavior change should be assessed three times during probation: 1) at the third appointment, 2) when 50% of dosage hours have been completed, and 3) when 100% of dosage hours have been completed. For more information on assessing behavioral change, see the department's *Behavioral Indicators Assessment Manual*.

Appendix A: Four-Point Appointment Structure

It is recommended that when working toward risk reduction, dosage probation officers spend approximately 30 minutes in one-on-one appointments with probationers, with the majority of that time devoted to addressing criminogenic needs. Each appointment should consist of a check-in, review, intervention, and take-home assignment, as described below. The timing of each part of the appointment can be adjusted proportionally for appointments of different lengths.

Check-In

DURATION: 6–7 minutes

Goals

- ☐ Build rapport
- ☐ Prepare for the interaction by checking for crises (“clearing the fog”)
- ☐ Monitor compliance with conditions

Activities

- ☐ Ask what has transpired since the last appointment
- ☐ Ask how the person is doing
- ☐ Ask about progress on conditions/rules

Review

DURATION: 6–7 minutes

Goals

- ☐ Ensure take-home assignment was completed
- ☐ Check for learning

Activities

- ☐ Review previous skill practice
- ☐ Review take-home assignment

Intervention

DURATION: 15 minutes

Goals

- ☐ Teach and demonstrate prosocial skill

Activities

- ☐ Teach new skill
- ☐ Demonstrate new skill
- ☐ Practice new skill
- ☐ Give feedback

Take-Home Assignment

DURATION: 2 minutes

Goals

- ☐ Transfer skill to day-to-day environment
- ☐ Increase dosage (through repetition) and complexity

Activities

- ☐ Give an assignment related to skill practice

Appendix B: Linking Positive Choices to Goals

For positive reinforcement to have an impact, it must be genuine, immediate, customized, specific, and meaningful. However, perhaps more effective than offering probationers positive reinforcement is increasing their intrinsic motivation to engage in positive behaviors. One of the best ways to do this is to have them articulate how engaging in positive behavior has resulted in positive outcomes in the past (i.e., helped them get closer to their goals) and how it can continue to help them in the future.

There are six steps involved in linking positive choices to goals:

1. Identify the goal you wish to reinforce and the positive choice the probationer made.

“You have been very clear that long-term sobriety is very important to you. Congratulations on not using drugs when your friend offered them to you!”

2. Ask the probationer to identify the connection between their positive choice and their long-term goal.

“How did your choice not to use drugs help you get closer to your goal of long-term sobriety?”

3. Ask the probationer how they were able to make this positive choice.

“How was it that you were able to choose not to use drugs?”

4. Ask the probationer to identify other goals they might achieve if they continue to make this choice.

“What other goals will you achieve if you continue to choose not to use drugs?”

5. Ask the probationer, on a scale of 1 to 10, how confident they are that they can continue to make this choice.

“On a scale of 1 to 10, how confident are you that you will be able to choose not to use drugs the next time a situation like this arises?”

6. Ask the probationer to name one thing that would help increase their confidence.

“What is one thing that would help increase your level of confidence even further?”

Appendix C: Linking Harmful Choices to Goals

Responses to noncompliant behavior should be swift, certain, and fair. However, probationers are most likely to change their negative behavior when they intrinsically realize how their negative behavior is harming their ability to reach their goals.

There are six steps involved in linking harmful choices to goals:

1. Identify the goal you wish to reinforce and the harmful choice the probationer made.

“You have been very clear that long-term sobriety is very important to you. Let’s talk about the fact that you used drugs when your friend offered them to you.”

2. Ask the probationer to identify the connection between their harmful choice and their long-term goal.

“How did your choice to use drugs when your friend offered them to you affect your long-term goal of sobriety?”

3. Ask the probationer to identify other goals that would be negatively affected if they continue this behavior.

“What other goals might be at risk if you continue to choose to use drugs?”

4. Ask the probationer what they would do differently in the future.

“What could you do differently the next time you are in a situation like this that would lead to a better outcome for you?”

5. Ask the probationer, on a scale of 1 to 10, how confident they are that they can make a different choice in the future.

“On a scale of 1 to 10, how confident are you that you will be able to choose not to use drugs the next time a situation like this arises?”

6. Ask the probationer to name one thing that would help increase their confidence.

“What is one thing that would help increase your level of confidence even further?”

Appendix D: Role Script for Initial Supervision Appointment

The following script is designed to communicate a consistent message about the roles of the dosage probation officer and the probationer, and to discuss the expectations associated with being on dosage probation.

There are two primary messages: 1) the dosage probation officer has two roles (assisting the probationer in avoiding a return to illegal behavior and holding the probationer accountable), both of which are equally important; and 2) there are measures that the probationer can take during and in between appointments that will contribute to their success. This is particularly true in light of the structure of dosage probation, which provides the probationer the opportunity to have a great deal of control over the length of their supervision.

You will want to make these words your own, but the primary message should be delivered as described below.

Overview

- Frequency and length of our appointments
- My roles
 - Help you be successful
 - Hold you accountable
- My expectations of you
 - Be honest
 - Show effort
- What it means to be on dosage probation
 - Your dosage level (100, 200, 300 hours, based on assessment)
- How dosage credit is earned
 - Time spent together focusing on building success skills
 - Time spent on assignments between appointments
 - Time spent in (pertinent) programming
- Dosage Tracking Worksheet
- When discharge happens
 - You meet your court-ordered conditions
 - You complete your dosage hours
 - You demonstrate that you have built that skills that will ensure your success
 - You follow the rules of supervision
- We'll conduct periodic reviews to gauge progress

Script

- First, I want to talk about how often we'll be meeting. Then, I want to talk with you about my role in our work together—and yours. Then, we'll talk some specifics about what it means to be on dosage probation. Sound okay?
- We are going to be spending the next _____ (months/years) working together. I thought it would be a good idea to describe my role during that time and talk about what I hope we can work on during our time together. We will be meeting on a regular basis. To start out, we will meet once a week. Our initial appointments will be longer ones, generally about an hour. One appointment will likely be even longer than that—maybe 90 minutes—and some might be a bit shorter. After these initial appointments, we'll meet for roughly 30 minutes per appointment. Sometimes an appointment may be longer and other times it may be shorter, but, on average, you can expect about 30 minutes. Over time, how frequently we meet will depend to a large degree on you. If things are going well, then, after a few months, we might decrease the frequency of our appointments. If things are not going as well, our appointments could actually increase in frequency.
- I see my role in two ways. My first role is to help you succeed. When I say “help you succeed,” I mean to help you work on the things that will keep you out of the justice system in the future. But, you can't be successful on supervision if you're not complying with the rules, so my second role is to hold you accountable to those rules. If you don't follow your conditions, we will need to discuss what is getting in the way and what I can do to help you address any barriers you might be experiencing. Do you have any questions about this part?
- In order for us to achieve these goals, I have two expectations. The first is that we are honest with each other. For example, if you miss an appointment, be up-front about what happened. We will not be able to work together without a sense of trust between us. You should expect no less of me. You can expect me to be straight with you at all times.
- Second, show effort. You have court conditions to fulfill, and we have some things that we need to work on together. During the course of supervision, we will be working on skills that can help you stay out of the justice system. These skills are related to the risk areas identified in an assessment we'll be completing. Some of this work will involve you completing worksheets that we'll be talking over during our appointments; some of it will involve you completing assignments between appointments. I don't expect you to be perfect with everything we work on, but I do expect you to give your best effort.
- If you are honest with me about what is happening and if you show effort, your supervision will be much easier and, more importantly, helpful to your long-term success. Any questions so far?
- Alright, let's talk about what it means to be on dosage probation then.

- By being on dosage probation, you have an opportunity to earn early discharge from supervision. But this is going to require some work on your part, and if you've been on supervision before, this might be a different experience for you.
- The purpose of dosage probation is to work as closely with you as possible to make sure that you are able to stay out of the justice system in the future. Is that something you are interested in working on too?
- Great. So here is how this works. Your supervision will end when all of your court-ordered conditions and dosage hours are completed successfully.
- Dosage hours are determined on the basis of an assessment we will complete together. There are three dosage levels:
 - Level 1 = 100 dosage hours
 - Level 2 = 200 dosage hours
 - Level 3 = 300 dosage hours.
- Dosage hours begin once community supervision starts.
- We will be working together to develop a plan to meet these dosage hours. We'll call this your dosage case plan. That plan will include a set of activities we agree will help you be successful in the future.
- Only activities associated with key life areas—as determined by the assessment—will be counted toward dosage (i.e., thoughts and beliefs, coping/self-control skills, friends, family/relationships, and alcohol and/or drug use).
- There are a few ways you'll be able to work on these areas—and earn credit toward your dosage hours. Those include work we do together in our appointments, written assignments you complete between our appointments, and some—maybe all—of the programs you participate in.
- I know this is a lot of information. Let me pause here for a second and see what questions you may have at this point.
- Okay: a couple of last pieces of information. To keep track of your progress, we will record your dosage hours credit on a dosage tracking worksheet. I'll show that to you in a bit.
- I said before that your supervision will end when all of your court-ordered conditions and dosage hours are completed successfully. Completing dosage hours successfully means not only accumulating the required dosage hours but also showing evidence that completing your hours has helped you build the skills that will help you to stay crime-free.
- We will periodically assess your progress toward meeting these goals and discuss how you are doing. We'll talk about any changes that need to be made in order for you to successfully complete your dosage probation. There will be no surprises; as I said before, we'll be honest with each other, and you'll know exactly how you are doing and, in this way, what your progress toward discharge is.

- Like all other people on probation, you will be expected to follow the standard rules and conditions of supervision. We'll review these in a few minutes, and something I'm going to ask you to do is to think about which of these conditions might be a challenge for you. We'll want to put some plans in place right away to make sure you don't violate your conditions. My job is to help you be successful. That's what I want, and I'm pretty sure that's what you want too. Have I got that right? So we want to look ahead to the things that could cause a problem and do our best to prevent those problems from occurring in the first place.
- What are your reactions to all of this? How does it sound to you?
- Can I get your agreement on the things we've reviewed?
- Great! Let's get started!

Appendix E: Dosage Tracking Worksheet

Dosage Tracking Worksheet

Name: _____

Dosage Hour Activity Key

A Anger Management
 C Cog Class
 S Substance Abuse Tx
 H Homework
 P Skills Practice
 F Family Tx
 Other
 Other
 Other
 Other

Month: _____

Week	Thoughts and Beliefs Number of Hours of Programming	Coping Skills Number of Hours of Programming	Friends Number of Hours of Programming	Family/Relationships Number of Hours of Programming	Drug and Alcohol Use Number of Hours of Programming
1	<div> <div>1/4</div> <div>1/2</div> <div>3/4</div> <div>1</div> <div>1 1/4</div> <div>1 1/2</div> <div>1 3/4</div> <div>2</div> <div>2 1/4</div> <div>2 1/2</div> <div>2 3/4</div> <div>3</div> <div> </div> <div> </div> </div>	<div> <div>1/4</div> <div>1/2</div> <div>3/4</div> <div>1</div> <div>1 1/4</div> <div>1 1/2</div> <div>1 3/4</div> <div>2</div> <div>2 1/4</div> <div>2 1/2</div> <div>2 3/4</div> <div>3</div> <div> </div> <div> </div> </div>	<div> <div>1/4</div> <div>1/2</div> <div>3/4</div> <div>1</div> <div>1 1/4</div> <div>1 1/2</div> <div>1 3/4</div> <div>2</div> <div>2 1/4</div> <div>2 1/2</div> <div>2 3/4</div> <div>3</div> <div> </div> <div> </div> </div>	<div> <div>1/4</div> <div>1/2</div> <div>3/4</div> <div>1</div> <div>1 1/4</div> <div>1 1/2</div> <div>1 3/4</div> <div>2</div> <div>2 1/4</div> <div>2 1/2</div> <div>2 3/4</div> <div>3</div> <div> </div> <div> </div> </div>	<div> <div>1/4</div> <div>1/2</div> <div>3/4</div> <div>1</div> <div>1 1/4</div> <div>1 1/2</div> <div>1 3/4</div> <div>2</div> <div>2 1/4</div> <div>2 1/2</div> <div>2 3/4</div> <div>3</div> <div> </div> <div> </div> </div>
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Total Hours by Risk Factor					

Total Hours by Activity:

A Anger Management
 C Cog Class
 S Substance Abuse Tx
 H Homework
 P Skills Practice
 F Family Tx
 Other
 Other
 Other
 Other

Target Number of Dosage Hours:
 —
 Total Number of Hours in Previous Months:
 —
 Total Number of Hours This Month:
 =
 Total Number of Hours Remaining:

Appendix F: Counting Dosage Reminders

- Only activities directly associated with a person’s criminogenic needs—as determined through an actuarial risk/needs assessment—will “count” toward dosage. Furthermore, only activities associated with the following criminogenic needs will be counted:
 - antisocial cognition (thoughts and beliefs),
 - antisocial personality/temperament (coping/self-control skills),
 - antisocial associates (friends),
 - family/marital (family/relationships), and
 - substance abuse (alcohol and/or drug use).
- Although educational and other activities (e.g., watching crime/drug prevention videos, attending a victim panel, completing community service) may be in probationers’ best interests, required by the court, or appropriate for purposes of increasing community well-being and safety, they do not address the five most influential criminogenic needs and, therefore, will not be counted toward dosage.
- Similarly, although employment activities are an important part of a prosocial lifestyle—and probationers under dosage probation will be encouraged to obtain/maintain work and achieve self-sufficiency—activities related to employment will not count toward dosage.
- In order for activities to count toward dosage, the activities must have a cognitive-behavioral framework. For example:
 - Group and individual work that is designed to teach prosocial thinking and skills—including through skill practice—counts.
 - Take-home assignments that are designed to help probationers develop prosocial attitudes and behaviors count, provided there is evidence that probationers in fact did the work. For example, worksheets should be completed in their handwriting or probationers must be able to describe what they did/learned in such a way that it is clear the work was completed in earnest.
- To increase the likelihood that the recidivism reduction purposes of dosage probation will be achieved, probationers must be fully “present” and actively engaged in these interventions to acquire dosage hours. For example:
 - Attending a cognitive group and actively participating in discussions and skill practice counts; absenting oneself from discussions and skill practice does not count.
 - Completing a worksheet and being able to discuss what was learned counts; filling out a worksheet and being unable to substantively discuss it does not count.
- Furthermore, some portions of the time probationers spend participating in cognitive-behavioral interventions may not count toward the dosage target. For example:
 - If the first 15 minutes of a cognitive group is spent with a general check-in (e.g., collecting fees, discussing which teams will play in the Super Bowl), this time does not count. If the

next 75 minutes consists of facilitated group work in which a probationer is active and engaged, this counts.

- If a probationer sits in the probation waiting room text messaging for 15 minutes, this does not count. If a dosage probation officer spends 10 minutes discussing a probationer's transportation problems, current address and phone number, and a favorite football team's recent win, this does not count. If the next 20 minutes are spent working on one of the probationer's most influential criminogenic needs, this counts.
- For purposes of ease, dosage will be counted in 15-minute increments (rounding up or down to the nearest 15 minutes).
 - For example, a 25-minute intervention would be rounded up to 30 minutes of dosage, while a 20-minute intervention would be rounded down to 15 minutes of dosage.
 - A 5-minute intervention would not count toward dosage; the duration is simply too short to have an impact.
- Using these guidelines, counting dosage is a matter of understanding the nature of the activity, the level of a person's engagement in the activity, and the amount of time spent invested in it.
 - The exception to this is a take-home assignment. The amount of time spent on a take-home assignment will be more difficult to ascertain. For purposes of consistent documentation, a take-home assignment will be given 15, 30, or 45 minutes of dosage, depending upon the dosage probation officer's assessment of the relative ease or complexity of the assignment for the person and the amount of work invested, as follows:
 - 15 minutes: Simple assignment; relatively easy for the probationer; minimal effort required; assignment completed satisfactorily.
 - 30 minutes: Moderate assignment; required more time and thought on the probationer's part; assignment completed satisfactorily.
 - 45 minutes: Difficult assignment involving more time reflecting, writing, and/or practicing a skill; assignment completed satisfactorily.

Appendix G: Recommended Contact Notes

Inquire, and record notes, about each of the following at every appointment.

1. Check-In

- a. Police contact (Y/N) (If yes, describe)
- b. Alcohol/drug use/issues (Y/N) (If yes, describe)
- c. Current address
- d. Current phone
- e. Crisis encountered/addressed (Y/N/N/A) (If yes, describe)

2. Review

- a. Discussed prior appointment/assignment (Y/N)

3. Intervention

- a. Criminogenic need addressed (Which need?)
- b. Skill taught (Y/N) (If yes, which skill?)
- c. Skill practiced (Y/N)
- d. Assignment given (Y/N) (If yes, what assignment?)

4. Other

- a. Behaviors and responses (Which behavior and response?)
- b. Appointment length (Rounded to nearest 5 minutes)
- c. Dosage amount (Following “Counting Dosage” criteria)

Appendix H: The Sequential Steps of Skill Practice

Conducting skill practice sessions involves following a series of steps that fall into three categories: teach and demonstrate, practice and reinforce, and graduate complexity.

Teach and Demonstrate

Steps	Description	Sample Dialogue Around Skill Practice
Teach the skill	Review the skill step by step.	"There are five steps to problem solving. I am going to go through these with you one at a time. When we are done, you will have learned how to better solve current or future problems."
Demonstrate the skill	Show how the skill is conducted.	"Today, as we discussed, we are going to work on dealing with the frustrations you are having with your boss. To start, I'm going to demonstrate how you might handle the situation."
Point to head	This indicates that you are talking to yourself, and it precipitates action.	(Pointing to head) "My boss is driving me crazy. She keeps giving me more and more things to do when she knows that I don't have the time to do them."
Drop hand and point to head again	This indicates that you are exploring alternative thoughts.	(Drop hand, point to head again) "My boss is giving me more responsibility. She knows that I'm capable of taking care of everything."
Ask for clarification and repeat if necessary	Once the skill is demonstrated, seek feedback. Don't assume that the person understood what they saw. Repeat the demonstration as necessary.	"How did that appear to you? What did I do that you thought made sense? What could I have done better? Is this something you think you can do? Why or why not?"

Practice and Reinforce

Steps	Description	Sample Dialogue Around Skill Practice
Have the person practice	Using the same techniques (point to head; drop hand and point again), have the person practice.	"Okay, now let's switch roles and you give it a try."
Provide feedback	Give the person feedback on how they did (not how well they performed in the skill practice but how they managed the content of the practice). Be specific.	"You really did a great job of voicing frustration with your boss in a respectful way. You asked for a private conversation and you used 'Ma'am' when you spoke to her."

Steps	Description	Sample Dialogue Around Skill Practice
Debrief	At the end, debrief the practice, exploring any ambivalence or concerns the person may have about applying the skill.	"How did this go? How comfortable do you feel with the skills we practiced in the situation with your boss?"

Graduate Complexity

Steps	Description	Sample Dialogue Around Skill Practice
Give a take-home assignment	Have the person practice the skill in their natural environment (work, school, home, living environment) and be prepared to ask how it went at your next appointment. If helpful, suggest that the person make notes about their experiences.	"So, you've agreed that you'll give this a try and address your concerns with your boss in the way you did here today. We'll talk about how it went when we see each other next. You might want to make some notes about what went well and didn't go as well so it stays fresh in your mind. Good luck!"
Review	At your next appointment, review what you covered the last time you were together.	"Can you remind me of the things we worked on at our last appointment?"
Process take-home assignment	After reviewing the content of the last skill practice, process the person's experiences applying the skill.	"So tell me, what was your experience with your boss when you used the techniques we practiced?"
Increase the difficulty	Once the person gains proficiency and appears to be able to demonstrate the skill without much difficulty, graduate the complexity of the skill by increasing the difficulty of the situation.	"I'm glad your boss was so receptive. That's great. But now I'd like to play out what would happen if she were not as receptive. Let's see what that would look like and how you might handle the situation then."
Build the skill	Make the situation more difficult and continue to practice. If necessary, demonstrate the more complex skill.	"This is getting more difficult. Let's switch roles and let's see if we can work on another way to manage the situation."