EMDR Fidelity Checklist

Sanilac County Community Mental Health Authority

|  |  |  |
| --- | --- | --- |
| **COMPETENCY AREA** | **MET** | **NOT MET** |
| **Care Manager/Clinician provides trauma screening and assessment on a regular basis.** |  |  |
| **Clinician identifies possible EMDR processing targets (past, present, and future).** |  |  |
| **Appropriately uses the “affect scan/floatback technique”, if information is not obtained from direct questioning, to identify past events related to current disturbance.** |  |  |
| **Proposes and discusses treatment plan (focused on past adverse life experiences (ALE), current triggers, and future goals) with individual.** |  |  |
| **Clinician offers a coherent explanation/rationale for EMDR.** |  |  |
| **Clinician offers clear instructions to the individual about his/her role.** |  |  |
| **Provides appropriate physical preparation.**- Arranges chairs for “ships in the night” position if using EMs.- Introduces and explains use of other bilateral stimulation(BLS) and associated technology if relevant.- Establishes comfortable distance/speed for facilitationof eye movements (EMs) and/or BLS. |  |  |
| **Offers a coherent explanation/rationale for the Safe/Calm Place exercise. Helps the individual identify an appropriate Safe/Calm Place.** |  |  |
| **Offers a coherent explanation/rationale for resource development and installation work. Asks individual to identify what qualities (capacities, strengths, feelings, beliefs, etc.) he/she****needs to manage this situation.** |  |  |
| **Obtains feedback on experience since last session (e.g., symptoms; behaviors; reactions to present triggers; new thoughts, insights, or information; dreams; and any new or associated material that may have emerged). Reviews log with client if available.** |  |  |
| **Assesses the previous target by asking the client to bring up the memory, incident, or trigger addressed in the previous session (appropriate only if client has had a previous processing****session). Asks client what he/she notices and, more specifically elicits information about the following elements, as appropriate:***a. Image**b. Emotions**c. SUD (0-10)**d. Body Sensations/ Locations**e. Positive Cognition and VOC (1-7)**(If positive cognition or future template previously addressed)* |  |  |
| **Upon completion of Installation Phase, facilitates a body scan. Asks individual to hold in mind the original incident/experience and the positive cognition while bringing attention to different parts of the body, starting with the head and working downward. Asks individual to report on what he/she notices.** |  |  |
| **Provides appropriate closure.***a. Chooses appropriate termination point.**b. Provides support/normalizes experience.**c. Adequately debriefs.**d. Predicts possibility of continued processing between sessions.* |  |  |
| **Helps individual identify a future behavioral goal (related to a challenging recent experience, present trigger, or potential new situation).** |  |  |
| **If individual encounters blocks, anxieties, or fears, intervenes appropriately.***a. Focuses individual’s attention on disturbance/body sensation and**facilitates EMs/BLS.**b. Problem-solves with individual to increase sense of mastery with**future template scene; introduces relevant skills, information,**or resources.**c. Introduces cognitive interweave.**d. Redirects individual to past or present targets that may need**additional attention and processing.* |  |  |

Explanation of any unmet competency areas: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Future plan to move toward appropriate fidelity of the model: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Clinician Name/Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Individual Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Case Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_