

LC PARTICIPANT TRAINING AGREEMENT

(v. July 2023)

These are the minimum training component requirements for all CPP Learning Collaborative (LC) participants. Those who complete these requirements will be invited to be on the CPP roster.

CPP Learning Collaborative Components
 Component 1: Participate in the initial core CPP Didactic Training, Learning Session 1 (LS1) 18 content hours minimum <i>understand that:</i> I am expected to participate in all content hours of the core CPP didactic training. * We encourage all participants to work with their supervisors and colleagues to identify coverage to address client related issues in their absence in the same way as vacation scheduling.
 What happens if I have an emergency and need to be absent: If I have an emergency (medical, court proceeding, etc), I will contact my supervisor and the CPP trainer immediately What happens if I miss any portion of LS1? I understand that: If I miss LS1 for my cohort, my training time and work with families will not count towards rostering until I complete that learning session. If I miss more than 15 minutes of any portion of LS1, my supervisor and I are responsible for documenting which sections (hours/days) of the agenda I miss then sharing this with the trainer. The CPP training team will also be tracking attendance. I will need to make up all missed content. There may be an additional cost that I may be responsible for in order to complete make-up training.
 Component 2: CPP manual I understand that I am: Required to read the entire CPP manual: Lieberman, A.F., Ghosh Ippen, C., & Van Horn, P. (2016). Don't Hit My Mommy: A Manual for Child-Parent Psychotherapy with Young Children Exposed to Violence and Other Trauma, Second Edition. Washington, DC: Zero to Three Strongly recommended to read: Lieberman, A.F. & Van Horn, P. (2008). Psychotherapy with Infants and Young Children: Repairing the Effects of Stress and Trauma on Early Attachment.

New York: The Guilford Press.

Component 3: Provide CPP to children under age 6 who have experienced at least one
traumatic event I understand that I am expected to:
Work with a minimum of 4 families
 At least 2 cases must be treated for at least 16 sessions in the Core Intervention Phase At least 1 of the two must have started at the beginning and included a full foundational phase Both cases must have included dyadic sessions following the session where the child is introduced to CPP using the CPP Triangle The other two cases must be seen for at least 4 face-to-face (in person or telehealth) sessions
 All cases must include a child under age 6 who had experienced at least one traumatic event; separation from a primary caregiver is included as a traumatic event Complete all case work within 3 years of completing this 18-month LC.
I understand that if my role changes from clinician to supervisor within the first 6 months of the 18 month Learning Collaborative then my caseload requirement can change from 4 to 2 cases at that time.
What happens if my cases don't meet the minimum requirements? Possible exceptions:
 <u>1 of the 4 cases</u> may involve either: a. A pregnant mother or a baby under 18 months of age, where the caregiver's experience of trauma or other mental health conditions (e.g. depression) is the primary reason for referral; or
b. A child who has experienced a trauma but is age 6 at referral. On occasion a trainer may grant an exception if a child is under 8 but has significant developmental delays.
 Note: Case requirements may be completed after an LC has ended provided: a. The therapist treated at least one case for at least 16 sessions during the LC, b. The therapist completed the components of the LC, and c. The therapist continues to receive CPP reflective supervision (minimum twice monthly) at with a supervisor who has been trained in CPP until they complete this requirement.
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Component 4: Participate in weekly reflective CPP supervision I understand that:
 I am expected to participate in reflective supervision provided by a CPP supervisor CPP reflective supervision is distinct from administrative supervision. Yet, there may be aspects of administrative follow-up that are directly related to the clinical care of my CPP cases.
 I am expected to participate in reflective CPP supervision for a minimum of 2x per month, separate from the consultation calls for: 1 hr for individual supervision or
 1.5 hr for group supervision with only 2-3 supervisees
 What happens if I don't have a CPP reflective supervisor? Possible exception: Two licensed therapists can form a reflective peer supervision group provided, both therapists are participating in a CPP Learning Collaborative or the other therapist has already completed a CPP Learning Collaborative.

Component 5: Participate in CPP consult calls I understand that:
 I am expected to fully attend a minimum of 23 consult calls during the 18-month LC If I miss more than 15 minutes of a call, that call will not count towards this total. If I am actively engaging in another activity that limits my ability to participate fully (e.g. running errands, driving) that call will not count towards this total
\Box It is beneficial to the call group when my camera is on for the majority of the call.
 What happens if I can't participate in the minimum of 23 calls during the 18 month period? Consultants will provide at least 33 calls in the 18 month period, which should enable therapists to meet the minimum requirement. If a therapist is out on leave, the therapist, supervisor, and consultant will make a completion plan If the system or agency has continued training, the therapist typically joins the next call. In some instances, the therapist may be able to participate in an external consultation call after the LC ends Note: There may be a cost to participate in external calls.
Component 6: Case Presentation
I understand that I am expected to:
Present at least two times on 2 different cases either during a CPP consultation calls or Learning Session 2 or Learning Session 3:
 Present on active CPP cases, the case should clearly be at least in the Foundational Phase according to Foundational Phase Procedural Fidelity The presentation should demonstrate clear evidence that there is a shared CPP framework between therapist and caregiver(s) that is relational and links experiences to current functioning Present on at least 1 case that is in the Core or Closing Phase of CPP If a therapist is unable to present on 2 different cases, when the therapist presents the 2nd time on the same case, the case should significantly further into Core Intervention phase (more than 16 sessions in Core Intervention) or Closing phase.
Share my CPP Case Presentation Template and clinical material (process note, audio or video).
 A case presentation will be considered incomplete, when submitted <i>without</i> clinical material such as a video/audio clip or process note/recording Process recordings can be of assessment sessions; in such instances, we will think together about ports of entry during this phase.
 Ideally, my supervisor should be on the call when I present. If I am not licensed, my supervisor must be on the call when I present.
 What happens if I don't present at least twice with process material? Time permitting, participants will be given an additional opportunity to present a case with a process note/recording Note: Process recordings can be of assessment sessions, collateral sessions with the caregiver as well as dyadic sessions.
Component 7a: Participate in Intensive CPP Competency Building Workshops - Learning
Session 2 (LS2)
 12 content hours minimum, that are typically held 6 months after LS1
 I understand that I am expected to participate in all content hours of LS2 We encourage all participants to work with their supervisors and colleagues to identify coverage to attend to client related issues in their absence in the same way as vacation scheduling.
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Component 7b:Participate in Intensive CPP Competency Building Workshops - Learning Session 3 (LS ₃)
 12 content hours minimum, that are typically held 6 months after LS2 I understand that I am expected to participate in all content hours of LS3 We encourage all participants to work with their supervisors and colleagues to identify coverage to attend to client related issues in their absence in the same way as vacation scheduling.
 What happens if I miss a day or more than 15 minutes of LS2 or LS3? If I miss any portion of LS2 or LS3, and I wish to be rostered, my trainer will attempt to connect me with opportunities to make-up the training time and learning, I understand that this is not guaranteed, I understand that if I miss more than 15 minutes of LS2 or LS3, my supervisor and I are responsible for documenting which sections (hours/days) of the agenda I miss then sharing this with the trainer. The CPP training team will also be tracking attendance. I understand that I will need to make up all missed content. I understand that there may be an additional cost that I may be responsible for in order to complete make-up training. There may be a cost, and I may have to travel to a makeup session should a virtual session not be available. To be rostered, I will need to complete all makeup activities according to the timeline outlined by the CPP trainer. <i>EMERGENCY ABSENCES</i>: If I have an emergency (medical, court proceeding, etc), I will contact my supervisor and the CPP trainer immediately to inform them of my absence.
Component 8: Fidelity Monitoring (see below)
Fidelity requirements vary by cohort due to the current lack of a CPP data system to allow for consistent entry of fidelity data. Your trainer will tell you the requirements for your cohort.
 I understand that I am expected to complete and submit: Therapist fidelity forms to my supervisor for a minimum of 2 cases (Ideally one high challenge and one low challenge case) If a "fidelity case" terminates prior to completing 16 sessions (excluding Foundational Phase), begin fidelity monitoring with another case Review form with agency supervisor Supervisor fidelity instrument as scheduled by my supervisor Consultation fidelity instrument as scheduled by my CPP trainer
Note: If the CPP trainer has serious concerns about my ability to implement CPP to fidelity (e.g. not able to meet procedural fidelity, serious challenges conducting dyadic treatment, concerns with the way safety is addressed), the trainer/consultant will discuss their concerns with me, my supervisor and our agency administrator. Significant breaches in fidelity that are not addressed by the therapist will prevent rostering.
l understand that:

Educational and Licensure Requirements

I understand that at the start of training, I must be a Master's or doctoral level psychotherapist with a degree in a mental health discipline. *Note:*

This training is not considered intensive enough for students (e.g. practicum students nor interns) to learn the model.

Unlicensed master's and doctoral level staff are eligible for participation on the roster only if:

- There is a licensed agency staff member who supervises that team member and participates in the LC for the duration of the training OR
- There is a licensed agency supervisor already trained in CPP who supervises that team member.

All training sessions, learning sessions, and consult calls must be conducted by either endorsed CPP trainers or approved CPP apprentice trainers.

Upon completion of all minimum training requirements along with educational and licensure requirements, you will receive a certificate of completion, and you will be invited to the national Child-Parent Psychotherapy roster.

By signing here, you acknowledge that you understand and agree with the minimum requirements for completing an implementation-level course in Child-Parent Psychotherapy.

Therapist name (please print)

Therapist Signature & Date

Agency name (please print)