

### **Suggested protocol for selecting and training clinicians in *Seeking Safety***

The following suggestions may help facilitate the selection of clinicians to conduct the *Seeking Safety* treatment. At this point, these are based on a combination of experience in the outcome research on the treatment as well as clinical implementation in a variety of settings. Further research is needed to validate these procedures scientifically.

#### **Selection**

Conduct a “try-out”: have a potential clinician actually conduct one or two audiotaped sessions using the manual with a real client. Note that the clinician is not trained in *Seeking Safety* prior to this “try-out”; rather, s/he is asked to simply read Chapters 1 and 2 of the *Seeking Safety* book, and to select a sample topic to try out (three sample sessions topics are provided on the website under section “Sample *Seeking Safety* topics”, or can be xeroxed from the *Seeking Safety* book). After reading these, s/he conducts the audiotaped session with a real client. At the end of the session, the client completes two scales: (a) “Selecting a Therapist Questionnaire”; and (b) “End of Sessiona Questionnaire”. The latter scale is from the *Seeking Safety* book, chapter 2; the former can be obtained by emailing Lisa Najavits (info@seekingsafety.org). Note that it is very important that the client is told that the clinician will NOT see the rating scales, and that the client be given an envelope in which to put the scales after completing them, seal them, and sign across the back; the envelope is then given to a staff member (NOT to the clinician). Clients are much more likely to provide honest feedback when conducted in this way. Also, clients do not put their name on the scale, but just initials, and date and topic of the session. In addition, the audiotape of the session is listened to by the person who is in charge of hiring, and is evaluated on the *Seeking Safety Adherence Scale*, which can also be obtained by emailing Lisa Najavits (info@seekingsafety.org). It is ideal if the adherence scale can be completed by someone who is very familiar with the treatment, and has conducted it.

This procedure allows an evaluation of whether the clinician is a good match for the treatment, has been used for several years, and appears to be a very simple, time-effective, and useful method. It also allows potential clinicians to self-evaluate whether or not they like the treatment. These procedures appear far more helpful than any particular formal criteria, such as professional degree, training, or experience. If the clinician conducts a session and feels it did not go well, s/he can do additional sessions until s/he feels a tape of sufficient quality has been attained. However, again, it is suggested that the clinician not be coached or trained prior to any tape. Clinicians who are a good match for the treatment tend to be able to conduct a solid session of the treatment, following its format and conveying its content, without formal training. Formal training, once a clinician is hired, allows the opportunity to supervise the clinician in more detail.

Note that the clinician either selects a client from her or his own clinical practice (telling the client that it is a one-time evaluation that s/he would like to do to apply for the

job), or the agency may want to provide a client. The client should be reasonably similar to typical clients of *Seeking Safety*, i.e., some recent impulsive behavior, and preferably both substance abuse and PTSD issues. Formal diagnostic criteria are not required, but rather, basically a severe enough client to see how the clinician does. The client needs to be honest (i.e., will give both positive and negative feedback). Based on experience, having the agency provide a client is sometimes best, as the agency then knows the client. Be sure to tell the client the purpose of the taping, and convey that the client is not being evaluated at all, but rather only the potential clinician is being evaluated as part of the hiring process. Let the client know that feedback from a real client is one of the best hiring procedures available, and empowers the client to have an impact on ensuring that high-quality clinicians are selected. Note that clients are not paid for participating in the session.

It may be necessary to check whether the agency has policies on audiotaping a client. However, since the tape is used only for the hiring procedure and then erased, and is not used for research or for any on-going use, most agencies permit such taping, and generally it would not need Internal Review Board oversight. A simple release form stating these facts may be required by the agency, to give to the client.

## **Training**

1) Read the *Seeking Safety* book (see the section “How to obtain the book” on this website).

2) See also the following articles (see the section “Articles to Download” on this website):

- “Training Clinicians in the *Seeking Safety* Treatment Protocol for Posttraumatic Stress Disorder and Substance Abuse”.
- “Implementing *Seeking Safety* therapy for PTSD and substance abuse: Clinical guidelines”
- “Clinicians' views on treating posttraumatic stress disorder and substance use disorder”.

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