

## IDENTIFYING TREATMENT-INTERFERING BEHAVIOR (TIB)

Patient Name: \_\_\_\_\_

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

Form Completed By: \_\_\_\_\_

**What is a TIB?** *A TIB is any behavior that is incompatible or directly interferes with a person's ability to participate in treatment successfully. This behavior is important to address because it can prevent people from overcoming problems. A TIB is not defined by a person's intention, but by the outcome of the behavior. For example, a man who misses therapy sessions to take care of an ill family member is not necessarily trying to disrupt his treatment, but the outcome of his behavior interferes with treatment – in other words, he does not receive the care he needs. For this reason, his pattern of missing sessions would be considered a TIB, no matter why he does it. Also, a TIB is not an isolated event. Typically, it is an ongoing pattern of behavior. Missing one session is probably not a problem, but missing several sessions would be considered a TIB.*

**Instructions:** *Please check each TIB listed below that is exhibited by this patient. If there is more than one TIB, circle the number of the one you feel should be addressed first.*

- \_\_\_\_\_ 1. Does not acknowledge having a problem.
- \_\_\_\_\_ 2. Does not adequately or consistently acknowledge the problem's severity or its impact on others.
- \_\_\_\_\_ 3. Does not identify clear goals for treatment.
- \_\_\_\_\_ 4. When discussing the nature of the problem or the treatment plan, argues with the treatment team, dismisses the things they say, or lectures them.
- \_\_\_\_\_ 5. Attempts to change the focus of sessions to issues not on the treatment plan.
- \_\_\_\_\_ 6. Has difficulty explaining the treatment plan or the rationale behind it.
- \_\_\_\_\_ 7. Has difficulty answering questions in a timely fashion (e.g., provides information not relevant to the question, provides too much detail, does not respond).
- \_\_\_\_\_ 8. Is frequently late or does not show up for treatment sessions.
- \_\_\_\_\_ 9. Has difficulty following the treatment plan (e.g., does not complete therapy assignments, doesn't take medication as prescribed) when:  
\_\_\_\_\_ accompanied by staff    \_\_\_\_\_ not accompanied by staff.
- \_\_\_\_\_ 10. Provides information to the treatment team that is either inaccurate, misleading, or inconsistent (e.g., does not adequately report difficulties, reports different things to different staff members, leaves out critical details)
- \_\_\_\_\_ 11. Engages in, threatens to engage in, or hints at engaging in self-destructive acts.
- \_\_\_\_\_ 12. Speaks or acts in a way that makes other patients or members of the treatment team feel physically threatened.
- \_\_\_\_\_ 13. Other: \_\_\_\_\_