**Group Therapy Note Template Series**

**CBT for Insomnia (CBT-I)**

|  |  |
| --- | --- |
| **Group Format:** | Six 90-minute sessions |
| **Outcome measure/s:** | ESS & ISI |
| **Outcome measure frequency:** | Administered before each session |
| **Note Template Version:** | 1.0 |



Cognitive Behavioral Group Therapy for Insomnia

Session #1 – Introduction to Cognitive Behavioral Therapy for Insomnia

Content: During this session, group participants reviewed group expectations and confidentiality. Psychoeducation on sleep and CBT-I was provided including typical sleep requirements, the 3P Model of Insomnia, and diagnostic criteria for Insomnia. Treatment goals were determined and participants were also instructed on the use of the Sleep Log. Baseline information was collected through administration of the Insomnia Severity Index (ISI) and the Epworth Sleepiness Scale (ESS) before group began. The patient scored a # on the ISI and a # on the ESS.

Patient was/was not an active participant in group.

The patient’s mood was \_\_\_\_\_\_\_\_\_\_ and affect was \_\_\_\_\_\_\_\_\_\_. The patient reported/denied suicidal or homicidal ideation/behaviors. Patient reported current pain as a \_\_\_\_\_ (0= No Pain, 10 = As bad as it could be). Pt referred for pain management YES/NO.

Homework: The patient was assigned to complete a baseline sleep log.

Plan: Continued Group CBT for Insomnia.



Cognitive Behavioral Group Therapy for Insomnia

Session #2 – Stimulus Control & Sleep Restriction

Content: Reviewed and taught patient how to score baseline sleep log. During this session, group participants developed a plan to implement stimulus control strategies and sleep restriction using the *Sleep Guidelines* and *New Healthy Sleep Habits* handouts*.* Provided rationale via CBT-I principles to reinforce this strategy. Clinical data was collected through administration of the Insomnia Severity Index (ISI) and the Epworth Sleepiness Scale (ESS) before group began. The patient scored a # on the ISI and a # on the ESS. Sleep efficiency was %. Provided new personalized sleep plan.

Patient was/was not an active participant in group. Patient did/did not do homework exercises.

The patient’s mood was \_\_\_\_\_\_\_\_\_\_ and affect was \_\_\_\_\_\_\_\_\_\_. The patient reported/denied suicidal or homicidal ideation/behaviors. Patient reported current pain as a \_\_\_\_\_ (0= No Pain, 10 = As bad as it could be). Pt referred for pain management YES/NO.

Homework: Implement new sleep plan, continue sleep log, and read provided handouts.

Plan: Continued Group CBT for Insomnia.



Cognitive Behavioral Group Therapy for Insomnia

Session #3 – Sleep Titration & Relaxation

Reviewed homework and scored sleep log. Titrated sleep schedule using sleep log parameters, problem solved barriers to adherence to schedule, and reinforced successes. During this session, introduced role of stress and worry in insomnia, provided *Monitoring Responses to Stress* log and delineated emotional and physical responses. Practiced \_\_-minute diaphragmatic and progressive muscle relaxation exercise. Clinical data was collected through administration of the Insomnia Severity Index (ISI) and the Epworth Sleepiness Scale (ESS) before group began. The patient scored a # on the ISI and a # on the ESS. Sleep efficiency was %. Provided new personalized sleep plan.

Patient was/was not an active participant in group. Patient did/did not do homework exercises.

The patient’s mood was \_\_\_\_\_\_\_\_\_\_ and affect was \_\_\_\_\_\_\_\_\_\_. The patient reported/denied suicidal or homicidal ideation/behaviors. Patient reported current pain as a \_\_\_\_\_ (0= No Pain, 10 = As bad as it could be). Pt referred for pain management YES/NO.

Homework: Continue sleep plan and sleep log, complete stress log, practice relaxation daily, and read provided handouts.



Cognitive Behavioral Group Therapy for Insomnia

Session #4 – Sleep Titration & Cognitive Strategies

Reviewed homework, scored sleep log, and titrated sleep schedule. Used previously assigned stress log and *Life Events Rating Scale* to demonstrate individual differences in stress response. Introduced ABC model of role of thoughts in emotional/physical/behavioral responses, reviewed alarming vs reassuring thoughts, and completed example of replacing alarming thoughts with reassuring thoughts. Clinical data was collected through administration of the Insomnia Severity Index (ISI) and the Epworth Sleepiness Scale (ESS) before group began. The patient scored a # on the ISI and a # on the ESS. Sleep efficiency was %. New personalized sleep plan provided.

Patient was/was not an active participant in group. Patient did/did not do homework exercises.

The patient’s mood was \_\_\_\_\_\_\_\_\_\_ and affect was \_\_\_\_\_\_\_\_\_\_. The patient reported/denied suicidal or homicidal ideation/behaviors. Patient reported current pain as a \_\_\_\_\_ (0= No Pain, 10 = As bad as it could be). Pt referred for pain management YES/NO.

Homework: Continue sleep plan and sleep log, practice relaxation daily, complete ABC worksheet, and read provided handouts.



Cognitive Behavioral Group Therapy for Insomnia

Session #5 – Sleep Titration & Cognitive Strategies

Reviewed homework, scored sleep log, and titrated sleep schedule. Completed significant review of strategies for adherence to stimulus control and sleep restriction since this is challenging to practice. Used assigned ABC worksheet to practice replacing alarming thoughts with reassuring thoughts related to misconceptions about insomnia and behavioral treatment. Clinical data was collected through administration of the Insomnia Severity Index (ISI) and the Epworth Sleepiness Scale (ESS) before group began. The patient scored a # on the ISI and a # on the ESS. Sleep efficiency was %. New personalized sleep plan provided.

Patient was/was not an active participant in group. Patient did/did not do homework exercises.

The patient’s mood was \_\_\_\_\_\_\_\_\_\_ and affect was \_\_\_\_\_\_\_\_\_\_. The patient reported/denied suicidal or homicidal ideation/behaviors. Patient reported current pain as a \_\_\_\_\_ (0= No Pain, 10 = As bad as it could be). Pt referred for pain management YES/NO.

Homework: Continue sleep plan and sleep log, practice relaxation daily, and read provided handouts.



Cognitive Behavioral Group Therapy for Insomnia

Session #6 – Review/Final Group

Reviewed homework, scored sleep log, and titrated sleep schedule. This was the final session of CBT-I group. This session focused on relapse prevention. Reviewed progress toward goals from initial session. Introduced specific strategies to maintain treatment gains, including provision of sleep hygiene information and continued practice of strategies learned over the course of group. Participants were provided a blank sleep log and instructed to use on own to continue adjusting sleep schedule as needed. Post treatment assessment information was collected. The patient scored a # on the ISI (pre-treatment score was #) and a # on the ESS (pre-treatment score was #). Sleep efficiency % was reported as %. The patient was also asked to complete a satisfaction survey and indicate their desire for any additional services.

The patient’s mood was \_\_\_\_\_\_\_\_\_\_ and affect was \_\_\_\_\_\_\_\_\_\_. The patient reported/denied suicidal or homicidal ideation/behaviors. Patient reported current pain as a \_\_\_\_\_ (0= No Pain, 10 = As bad as it could be). Pt referred for pain management YES/NO.

Plan: Termination from CBT-I group was completed. No further contact expected between this participant and group leader(s). Participant was referred back to primary behavioral health provider for additional services/follow-up (if needed), or chart closure if goals have been met.