



The CONTROL

**(COgNitive Therapy for depRessiOn in tubercuLosis treatment) to improve
outcomes for depression and TB in Pakistan and Afghanistan**

Funded by: RIGHT3, NIHR

Reference: NIHR201773

“Training of Trial Site Coordinators for Recording CBT
Sessions”

Dec 13th, 2024

Khyber Medical University

EXECUTIVE SUMMARY

Training plays a pivotal role in ensuring the successful implementation and sustainability of projects by enhancing the competencies of key personnel. A one-day training session was arranged for the trial site coordinators on 13th December 2024 at the Committee Room, Office of Research Innovation and Commercialization, Khyber Medical University. Site coordinators are responsible for managing all aspects of audio recordings, including their handling, storage, and secure transfer for fidelity

The primary objectives of the training were to demonstrate the practical use of the recording devices and address operational challenges. Participants engaged in hands-on activities and troubleshooting exercises, which significantly improved their understanding of the devices' functionality. Feedback collected from attendees indicated that the training was highly beneficial. However, it also highlighted the need for follow-up sessions to ensure sustained competency and effective implementation. This report highlights the details of this training session designed to equip site coordinators with the skills necessary to efficiently record Cognitive Behavioral Therapy (CBT) sessions.

INTRODUCTION

The **CONTROL program** aims to integrate **Cognitive Behavioral Therapy (CBT)** for depression into routine tuberculosis (TB) care. A systematic approach to intervention delivery session audio recording was established to ensure fidelity in delivering CBT interventions. The training session was organized for site coordinators to equip them with the necessary skills and knowledge for effectively implementing the Standard Operating Procedure (SOP) on audio recordings. This training focused on maintaining intervention fidelity and ensuring ethical and secure audio data management.

The training was facilitated by **Dr Fatima Khalid Qazi**, Data Analyst in the CONTROL study. The session was attended by eighteen participants including Dr. Shaista Rasool (CONTROL Post-Doc fellow), Dr. Rubab Farooqi (CONTROL Trial Coordinator), and below mentioned site staff.

- Wania Aiman
- Dr. Shafaq Zahoor
- Zeeshan Khan
- Asad Ullah
- Dr. Emraan Seerat
- Dr. Mehboob
- Hassam Ul Haq
- Owais Paracha
- Dr. Somia
- Mahnoor Majid
- Dr. Kanwal Safeer
- Rida Zarkaish
- Shumaila
- Mehmood
- Dr. Shavana Bangash
- Aftab Sahar

Proceedings:

The session began with greetings from **Dr Fatima Khalid Qazi**, who introduced the objectives of the **Process Evaluation** with a particular focus on recording CBT sessions. She



emphasized that recording these sessions is critical in tracking and assessing therapy outcomes. Dr Fatima highlighted that this practice ensures fidelity and consistency in delivering **CBT intervention** across various sites. She explained that independent evaluators

would conduct fidelity checks using specified tools, such as the CTS-R scale and CBT assessment tool. Furthermore, the recordings would serve to evaluate whether DOTS facilitators adhered to the CBT manual during the sessions, ensuring **standardized** and **effective implementation** of the **CBT** intervention.

The training covered several key aspects essential for implementing the **SOP** effectively. The **session identification**



process was explained in detail, highlighting the **randomization method** used to select participant IDs for recording to ensure an unbiased representation of sessions. During the technical training on audio recordings, participants were guided on preparing and using **recording devices**,



including steps to ensure the devices were fully charged, had sufficient storage, and were

functioning correctly before sessions. Coordinators were also instructed to select **quiet locations** to optimize recording quality. The informed consent process was emphasized, with detailed explanations on obtaining **consent** from facilitators and attendees, ensuring participants fully understood their rights and the purpose of the recordings. **Data storage and security protocols** were a critical part of the



training, where site coordinators learned about

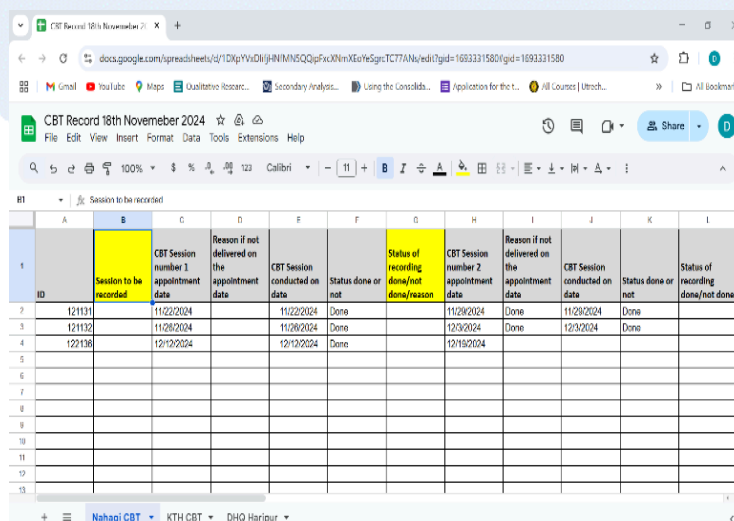
file naming conventions, secure data transfer, access control, and maintaining backups to protect data from unauthorized access. Furthermore, practical guidance on troubleshooting common technical issues was shared to enable coordinators to handle challenges effectively during the recording process. It was highlighted during the discussion that changing the name of a recording requires the recorder to be connected to a **laptop**. Dr. Fatima emphasized the importance of ensuring that all **recorders** are thoroughly **checked and operational**. She further stressed that recordings must be conducted daily, with clear identification of the session details and the name of the facility explicitly mentioned.

Following this, Mr. Owais Paracha initiated a brief question-and-answer session, posing the important question: “**What should be done if a patient refuses to be recorded due to inconvenience despite having signed the consent form?**” In response, it was clarified that the **recording should not be conducted in such cases**. However, the refusal and the reason provided by the patient must be documented on the relevant sheet to maintain proper records.

Another participant, Mr. Hessam Ulhaq, asked, “**What should be done if the recorders are not functioning properly?**” In response, it was emphasized that daily checks are essential to ensure the recorders are in proper working condition. Any issues detected during these checks should be **promptly addressed and resolved** to prevent disruptions in the process.

Dr. Shaista suggested adding a column to the CBT sheet after the ID to record whether the session has been documented.

Additionally, another column should be added at the end of each session to indicate the recording status as "done," "not done," or the reason for not doing it. This way, the site coordinator will update the sheet daily.



ID	CBT Session number 1 appointment date	Reason if not delivered on the appointment date	CBT Session conducted on date	Status done or not	Status of recording done/not done/reason	CBT Session number 2 appointment date	Reason if not delivered on the appointment date	CBT Session conducted on date	Status done or not	Status of recording done/not done
1	12/11/24		11/22/2024	Done		11/28/2024		11/28/2024	Done	
2	12/11/24		11/28/2024	Done		12/3/2024		12/3/2024	Done	
3	12/11/24		12/13/2024	Done		12/13/2024		12/13/2024	Done	
4										
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13										

Toward the session's conclusion, the site coordinators engaged in a collaborative briefing, sharing insights and feedback. This was followed by hands-on practice with the provided recorders, during which they reviewed and assessed the audio quality to ensure optimal



functionality.

The training successfully achieved its primary objectives of familiarizing the site coordinators with the recording equipment and preparing them to document CBT sessions effectively.

Moving forward, consistent technical support

and periodic follow-up training will be essential to sustain the quality of recordings and address any emerging challenges.

Training Agenda

Time (HOURS)	Title of the session	Resource person
02:00-02:15	Introduction to the resource persons and workshop participants and Distribution of SOP documentation and contact information for support.	Dr. Fatima Khalid
02:16-02:30	Learning outcomes of the workshop and overview of the workshop contents	Dr. Fatima Khalid
02:31-02:50	Purpose of CBT session Recordings	
02:51-03:10	Hands-on Practice Session on Recorders	
03:11-03:50	Discussion and Q&A	Dr. Fatima Khalid and Dr Shaista Rasool
03:51-04:00	Vote of thanks and Closing remarks	