CBT Session Structure Checklist

Part 1. Session details and how to mark

Item	Entry
Therapist or trainee	
Reviewer and role	
Date of review	
Session reviewed	
Client initials or code	
Elements to focus on	

The therapist marks the session first in the Self column, from notes or a recording. A supervisor or peer marks the same recording in the Reviewer column. Write what was said or done as the evidence, with the minute where you can.

Mark	What it means
Yes	The element took place and did its job.
Partly	The element was brief, incomplete or out of order.
No	The element was missing when the session called for it.
N/A	The element did not apply to this session, for example an Action Plan review after a session that set no plan.

Session summary

Include: the client's main concerns, where the session sits in treatment and anything the reviewer should know.

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Part 2. The beginning of the session

Element and what to look for	Self	Reviewer	Evidence from the session
Mood check Asks how the client has felt over the past week, with a rating or a brief measure, and what the client makes of any change			
Risk check Asks about hopelessness and thoughts of suicide or harm, and puts any risk first on the agenda			
Medication and other treatment When relevant, asks about prescribed medication, side effects and other treatment			
Initial agenda Asks what the client wants help with today, names each topic in a few words and adds the therapist's own topics			
Update on the week Asks what happened since the last session, including what went well, and links it to the last session			
Action Plan review Reviews what the client did on last week's Action Plan, what got in the way and what the client learned			
Prioritizing the agenda Ranks the topics with the client, agrees where to start and how to divide the time, and moves other topics to a later session			

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Part 3. The middle and end of the session

Element and what to look for	Self	Reviewer	Evidence from the session
Work on the first agenda item Chooses an intervention with a rationale and the client's agreement, carries it out and checks how well it worked			
Further agenda items Moves to a second or third item if time allows, with the client's agreement			
Periodic summaries Sums up in the client's own words, asks the client to sum up after a topic and marks the move to the next part			
Action Plan items along the way Sets Action Plan items in writing as the work on each topic produces them			
Final summary The therapist or the client sums up the most important points of the session			
Check on the new Action Plan Reviews each item for the coming week and asks how likely the client is to do it			
Feedback Asks what the client thought of the session, including anything that bothered the client or that the therapist got wrong			

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Part 4. Pacing and next steps

Time spent on each part

Include: the minutes when each part started and ended, and any part that ran long or short.

Part of the session	Minutes	Notes
Beginning		
Middle		
End		

Departures from the structure and the reasons

Include: when the session left the usual order, why, and whether the therapist and the client decided it together.

Strengths in this session

Include: two or three things the therapist did well, with the words the therapist used.

One change to try next session

Include: the element to work on, what the therapist will say or do differently and how to practice it first.

Therapist's reflection

Include: how the Self and Reviewer columns compare, and questions for supervision.

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Clinician guide: using the CBT session structure checklist

- **When it fits.** Use the checklist after a regular CBT session, from your notes or from a recording made with the client's consent, or in supervision. Beck (2021) uses the same structure in every session after the first, and the first therapy session has a structure of its own.
- **Review the recording.** Beck (2021) advises reviewing a recording of the session to see how the structure came across to the client, and having a peer, colleague or supervisor review it too. The therapist marks the Self column first, and the reviewer marks the same minutes.
- **Mark elements wherever they occur.** Beck (2021) separates the elements for clarity and notes that experienced therapists often weave them together. Mark an element as present wherever it took place in the session.
- **Record departures and their reasons.** Beck (2021) sets the agenda aside when a client or another person is at risk, when a problem upsets the client too much to focus on anything else, when following the agenda would strain the therapeutic relationship, or when something more urgent comes up. Record each departure and its reason in Part 4. Mark the elements set aside for one of these reasons as N/A, and mark elements missed for other reasons Partly or No.
- **Choose one change at a time.** Pick one element to work on before the next review, and practice it in a role-play first. Beck (2021) recommends role-plays for therapists who are learning to structure sessions.

Adapted from the description of session structure in Beck (2021). The layout and wording are original.

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Completed example: Lena (a fictional client)

Lena, 46, is in CBT for depression at a community clinic. Her therapist, J.K., a counseling trainee, marked this checklist after their sixth session on November 12, 2026, and J.K.'s supervisor, Dr. P.S., marked the same recording on November 17. Lena, J.K., Dr. P.S. and every detail of the session are invented.

Part 1. Session details and how to mark

Item	Entry
Therapist or trainee	J.K., second-year counseling trainee
Reviewer and role	Dr. P.S., clinical supervisor (J.K. marked the Self column first)
Date of review	November 17, 2026
Session reviewed	Session 6, recorded November 12, 2026, all 52 minutes
Client initials or code	L.R.
Elements to focus on	Initial agenda, prioritizing the agenda and the end of the session

Session summary

Lena has had low mood since her divorce, and her PHQ-9 has dropped from 19 to 14 over five sessions. J.K. wants help with starting on time and leaving room for the end.

Part 2. The beginning of the session

Element and what to look for	Self	Reviewer	Evidence from the session
Mood check	Yes	Yes	PHQ-9 was 14, down from 16. Asked what helped: "I walked three times."
Risk check	Yes	Yes	Asked about hopelessness and thoughts of suicide. Lena described neither.
Medication and other treatment	Yes	Yes	No changes to her antidepressant. She saw her doctor last week.
Initial agenda	Partly	Partly	Set at minute 14, after the story of her sister's visit. Topics: "my sister" and "sleep."
Update on the week	Yes	Partly	Asked mostly about the hard parts of the week. The walks came up only in the mood check.
Action Plan review	Yes	Yes	Walked on 3 of 5 days. Lena: "I sleep better on days I walk."
Prioritizing the agenda	No	No	Started on her sister without ranking the topics or dividing the time.

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Part 3. The middle and end of the session

Element and what to look for	Self	Reviewer	Evidence from the session
Work on the first agenda item	Yes	Yes	Found the thought “She thinks I’m a failure,” weighed it with two questions and role-played what to say to her sister.
Further agenda items	No	No	No time for sleep, and no decision with Lena about moving it.
Periodic summaries	Partly	Partly	One summary at minute 31, in J.K.’s words. Lena did not sum up.
Action Plan items along the way	Yes	Yes	A text to her sister and a new coping card, written down at minute 40.
Final summary	Partly	Partly	J.K. summed up in the last minute, with no time for Lena to add anything.
Check on the new Action Plan	No	Partly	Read the plan aloud without asking how likely Lena was to do it.
Feedback	No	No	The session ended at minute 52 with no request for feedback.

Part 4. Pacing and next steps

Time spent on each part

Part of the session	Minutes	Notes
Beginning	0 to 16	The agenda came late, after the account of the visit.
Middle	16 to 49	One topic only.
End	49 to 52	The summary was rushed, and the session ran 2 minutes over.

Departures from the structure and the reasons

After the mood check, the account of her sister’s visit ran until minute 14, and J.K. did not stop to agree with Lena on how to use the time.

Strengths in this session

A caring mood check with a measure. A careful look at the thought about her sister, and a role-play that Lena chose herself.

One change to try next session

Ask for agenda topics by minute 5, name each one in a few words and agree with Lena how to split the time. Practice the gentle interruption with Dr. P.S. first.

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Therapist's reflection

> I marked myself higher than Dr. P.S. on the update. I worry that interrupting will feel rude to Lena. Question for supervision: how do I set the agenda when a client starts with a long story?

Dr. P.S. and J.K. watched the first 15 minutes of the recording together and compared the Self and Reviewer columns. They role-played a gentle interruption to name an agenda topic, and J.K. wrote out how she will ask for topics and split the time at the next session. They agreed to review session 8 with a new copy of the checklist.

References and further reading

Books for clinicians

Beck, J. S. (2021). *Cognitive behavior therapy: Basics and beyond* (3rd ed.). Guilford Press. ISBN 978-1-4625-4419-6.

Research

Goldberg, S. B., Baldwin, S. A., Merced, K., Caperton, D. D., Imel, Z. E., Atkins, D. C., & Creed, T. (2020). The structure of competence: Evaluating the factor structure of the Cognitive Therapy Rating Scale. *Behavior Therapy, 51*(1), 113–122.

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