

Decisional Capacity Assessment Questions
IRB: H190127
CDST

Participant ID #: _____ Date: _____ Total Score: _____

1. What is the purpose of the study that was just described to you?

Score = 2 for:

- **Compare CDST to active control (Goal-Focused Supportive Contact group)**
- **Help Veterans engage in assertive decision-making practices with their treatment team**
- **Asses different treatment components between the CDST and active control groups**

Score:

2. What makes you want to consider participating in this study?

Score = 2 for:

- **Feel empowered**
- **Share my experiences**
- **Help others**
- **Improve mental health care for Veterans/Veterans with SMI**

Score:

3. Do you have to be in this study if you do not want to participate?

Score = 2 for:

- **No**

Score:

4. If you withdraw from this study, will you still be able to receive regular treatment at the VA?

Score = 2 for:

- **Yes**

Score:

5. If you participate in this study, what activities would you do?

Score = 2 for:

- **Attend ten hour-long group sessions held over ten weeks**
- **Complete a set of assessments, including three individual interviews that will be audio recorded**
- **Complete at-home practice if participating in CDST**

Score:

6. What are the potential risks that people may experience if they participate in this study?

Score = 2 for:

- **Feeling uncomfortable, stressed, or having other negative emotions due to discussing negative experiences in group therapies**
- **Short-term anxiety or discomfort from trying to change patient-provider dynamics**
- **We do not expect any significant risks.**

Score:

7. Will the interviews be audio recorded?

Score = 2 for:

- **Yes**

Score:

8. If you have questions or concerns about this study, where can you find information to contact someone about this?

Score = 2 for:

- **In the IRB form**
- **Ask Emily Treichler**
- **Ask a study staff member**

Score: