

YEAR-END CLINICAL FEEDBACK

Student: _____

Year in Program: _____

Supervisor: _____

Date of Eval: _____

Mode of Supervision (check all supervision methods employed in working with this student)

____ Student report

____ Viewed portions of sessions outside supervision

____ Viewed entire sessions outside supervision

____ Viewed session clips in supervision

____ Role play/practice tests in supervision

____ Rated therapy tapes or scored protocols

____ Other (please specify: _____)

Cases Supervised (include details about age, type of presenting problem; can be specific for small caseload or more general for large caseloads):

Directions:

This evaluation form contains 3 parts. **Section 1** includes skills that should be evaluated for **all** students, whether observed in assessment or therapy. **Section 2** should be completed for students you have observed conducting **therapy**. **Section 3** should be completed for students you have observed conducting **assessment** (e.g., psychoeducational, neuropsychological assessment). **Section 4** should be completed for **all** students.

In making your ratings, please consider the student's current year in the program as well as his/her level of familiarity with the therapeutic modality or client population. That is, we would like your impressions of how closely the student meets each skill/competency that would be expected for someone at a similar level of training. Ratings at either end of the scale must be commented on in the sections provided. Most students have areas of relative strength or weakness, and can benefit from feedback about his/her level of competence, so please consider using the ratings to help make these differentiations.

Please use the following scale in your evaluation of student competencies:

- B = Below training level; more extensive attention/focus is required in this area to be at expected level of skill/competency development
- M = Meets expectations for current level of education; student is performing at the level expected of similarly experienced individuals at this point in the program
- S = Strength; a strength in this competency relative to other competency domains for this student
- N/A = Not applicable or not enough information to rate

SECTION 1. GENERAL CLINICAL AND INTERPERSONAL COMPETENCIES

- _____ **1. Recognition and Judgment for Ethical and Legal Issues** (*e.g., recognition of ethical or legal issues when they arise; appropriately handling crises or responding effectively to ethical and legal issues; appropriate referrals to other services when indicated.*)
- _____ **2. Professional Behavior** (*e.g., appropriate dress; punctuality; responsibility, availability; appropriate follow through with clients, such as contacting clients after no-shows, following up in a timely manner to reschedule sessions, planning vacations thoughtfully and communicating about time off/clinic closures with supervisor and client, and collecting payments regularly*)
- _____ **3. Professional Boundaries** (*e.g., able to form a friendly, warm bond with clients without violating professional boundaries*)
- _____ **4. Working Alliance Development** (*e.g., ability to establish initial working rapport in an expedient manner to facilitate disclosure and engagement with testing or therapy; ability to express empathy and warmth; ability to provide encouragement to persist with difficult therapy tasks or assessment*)
- _____ **5. Knowledge of Research and Willingness to Expand Knowledge** (*e.g., knowledge of standardization/ psychometric issues related to assessment strategies; knowledge of relevant research in psychopathology, assessment, intervention and other literatures; uses this knowledge to inform therapy or assessment; knowledge of diagnostic systems and their strengths and weaknesses*)
- _____ **6. Multicultural Competence** (*e.g., awareness of own cultural identity and uses self-appraisal to consider how this might impact therapy or assessment; knowledge and respectfulness of diversity; active consideration of diversity in assessment, conceptualization, and/or treatment planning and implementation; ability to work effectively and engage diverse clients; brings up issues of diversity in supervision*)
- _____ **7. Resource Request and Use** (*e.g., asks for needed resources; follows through by reading or searching for recommended resources; independently attempts to locate resources or consult literature*)
- _____ **8. Responsiveness to Supervision** (*e.g., provides videos, scoring protocols, and other clinical materials to supervisor in a timely and reliable manner; accepts and integrates feedback; enthusiastic and involved in supervision; follows through with recommended readings; works collaboratively with supervisor*)

SECTION 1. GENERAL CLINICAL AND INTERPERSONAL COMPETENCIES (CONTINUED)

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_____ **9. Use of Supervision Time** (*e.g., productive use of supervision time; student has prepared for supervision and has particular aspects of therapy/assessment s/he would like assistance with; seeks out supervision as needed*)

_____ **10. Peer Supervision and Feedback** (*e.g., able to provide appropriate feedback to peers during group supervision; responsive to feedback from peers in group supervision; able to integrate feedback into one's self-assessment and professional performance; receives feedback non-defensively; expresses disagreements with feedback appropriately*)

_____ **11. Consultation; Working and Communicating with Other Professionals** (*e.g., ability to work collegially with other professionals, including mental health providers, teachers, physicians, and researchers; provide and receive feedback non-defensively from peers/other professionals (if relevant); ability to be respectful of support staff and participate with treatment team (if relevant); follow-up with other providers to support continuity of care*)

_____ **12. Record Keeping and Clinical Documentation** (*e.g., ability to provide accurate, clear, and timely ongoing record keeping regarding therapy progress, contacts with clients, and/or assessment progress/visits; organized and disciplined approach to writing and maintaining notes and writing intakes/termination summaries and reports; writes in a professional style that could be interpreted by clients or other mental health professionals; documentation contains relevant information without being overly inclusive*)

Comments on any of the General Clinical and Interpersonal Competencies (PLEASE PROVIDE COMMENTS, ESPECIALLY FOR HIGH OR LOW RATINGS; USE AS MUCH SPACE AS YOU NEED).

SECTION 2. THERAPY COMPETENCIES (FEEL FREE TO DELETE SECTION IF ONLY SUPERVISED ASSESSMENT)

Please use the following scale in your evaluation of student competencies.

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_____ **1. Session Management** (*e.g., ability to control session without being intrusive; ability to set and follow through with session agenda/plan; ability to listen to client effectively while still working toward implementing therapeutic techniques*)

_____ **2. Client Affect Awareness and Management** (*e.g., ability to tolerate and effectively use negative client affect; ability to be sensitive to, and aware of, client affect as it arises in session; ability to discuss emotional responses with client*)

_____ **3. Therapist Emotional Responses** (*e.g., ability to recognize and make therapeutic use of own emotional reactions toward client; ability to recognize if personal issues, such as anxiety, are interfering with therapy progress*)

_____ **4. Maintaining Therapeutic Alliance** (*e.g., ability to recognize and repair ruptures in the therapeutic alliance; ability to maintain a relatively consistent, strong alliance across the course of treatment*)

_____ **5. Implementation of Empirically Supported Treatments** (*e.g., ability to explain treatment rationale and progress to client; ability to employ treatment techniques reliably, effectively, and collaboratively with clients*)

_____ **6. Problem Solving** (*e.g., ability to implement treatment techniques flexibly, responsive to client agenda and barriers to treatment; ability to problem solve in therapy to address lack of treatment response, need to modify techniques to accommodate client presenting problem or preferences; ability to recognize problems that arise in therapy and understand how they affect treatment*)

_____ **7. Case Formulation** (*e.g., ability to form and present a conceptual model for presenting problems which takes into account multiple aspects of the case; typically conceptualizes cases using a major empirically-supported treatment framework, but individualized to client; able to use formulation to guide treatment and problem solve*)

SECTION 2. THERAPY COMPETENCIES (CONTINUED)

Please use the following scale in your evaluation of student competencies.

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_____ **8. Outcome Monitoring** (*e.g., consistently monitors client progress and outcome, in quantifiable terms; uses this information to plan/alter treatment, to identify potential treatment problems, and/or to provide feedback to client*)

_____ **9. Treatment Planning and Goal Setting** (*e.g., ability to formulate treatment goals based on conceptualization and in collaboration with client; identify strategies and techniques which could be used to approach these goals; ability to form a treatment plan based on conceptualization and client collaboration; follows through with plans identified for treatment sessions*)

Comments on any of the Therapy Competencies (PLEASE PROVIDE COMMENTS, ESPECIALLY FOR HIGH OR LOW RATINGS; USE AS MUCH SPACE AS YOU NEED).

SECTION 3. ASSESSMENT COMPETENCIES (FEEL FREE TO DELETE SECTION IF ONLY SUPERVISED THERAPY)

Please use the following scale in your evaluation of student competencies.

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- _____ **1. Select Appropriate Tests for Referral Question** (*e.g., knowledge of appropriate instruments for referral question and other relevant problems to evaluate for or rule out; ability to provide a rationale for why particular tests may be most appropriate for the referral questions*)
- _____ **2. Clinical Interview** (*e.g., able to direct clinical interview to be both comprehensive and efficient for evaluating referral questions; ability to express empathy in interview to engage client while proceeding efficiently*)
- _____ **3. Test Administration, Scoring, and Interpretation** (*e.g., ability to administer, score and interpret tests appropriately; ability to identify when client breaks are required or identify factors which may impact test validity; ability to efficiently administer tests and plan ahead for testing battery, such as practicing administering, ensuring tests are available, scoring protocols in a timely manner for supervision*)
- _____ **4. Integrate Assessment Data** (*e.g., ability to take diverse tests employed and integrate the results; ability to propose explanations for why test results may support differing conclusions; ability to integrate all testing information into a coherent report*)
- _____ **5. Propose and Defend Diagnostic Conclusions** (*e.g., ability to generate diagnostic impressions based on assessment data and articulate the reasons for them; ability to clearly describe these impressions in the written report*)
- _____ **6. Ability to Formulate Recommendations** (*e.g., ability to generate recommendations based on diagnoses, client areas of strength and weakness identified in testing, and the research literature; ability to clearly articulate these recommendations in the written report*)
- _____ **7. Communication of Test Results** (*e.g., ability to communicate test results to client in a coherent and sensitive manner; ability to communicate with other professionals about test results*)

SECTION 3. ASSESSMENT COMPETENCIES (CONTINUED)

Comments on any of the Assessment Competencies (PLEASE PROVIDE COMMENTS, ESPECIALLY FOR HIGH OR LOW RATINGS; USE AS MUCH SPACE AS YOU NEED).

SECTION 4. OPEN-ENDED RESPONSES (COMPLETE FOR ALL STUDENTS)

Please describe the student's major assets/strengths.

Please describe any problem areas/areas of relative weakness/directions for growth that the student and their next supervisor should attend to (be as specific as possible; please make sure to address any 1 or 2 ratings here, if relevant)

Supervisor signature indicates this form was prepared by and approved by the listed supervisor. Student signature indicates the student has received all feedback contained within this evaluation.

Supervisor Signature: _____

Student Signature: _____