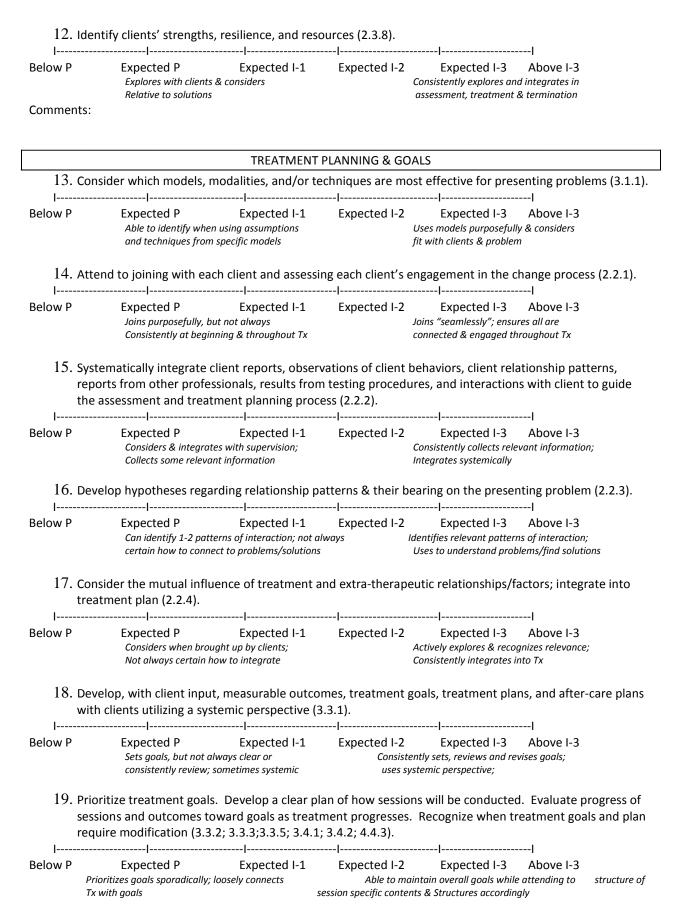
# LEWIS & CLARK GRADUATE SCHOOL OF EDUCATION AND COUNSELING Department of Counseling Psychology

# Marriage, Couple and Family Therapy Program

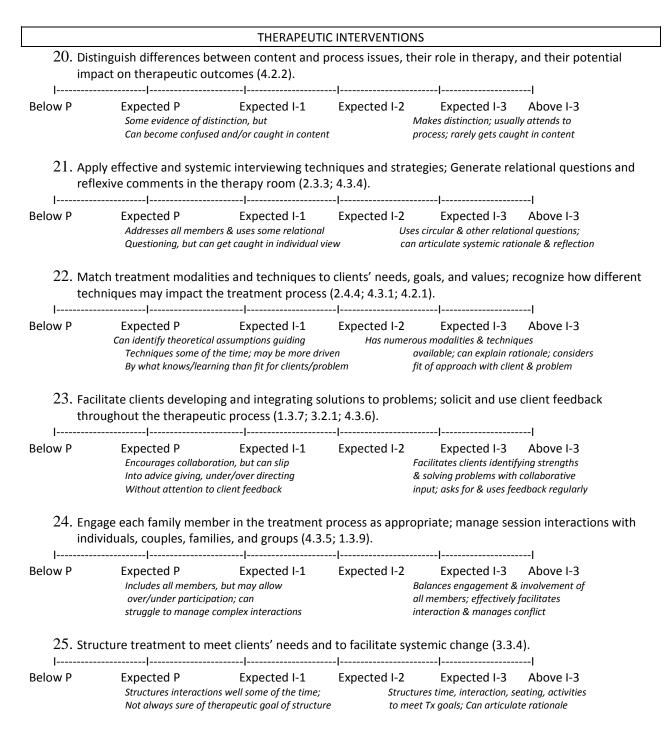
## **SUPERVISEE EVALUATION FORM**

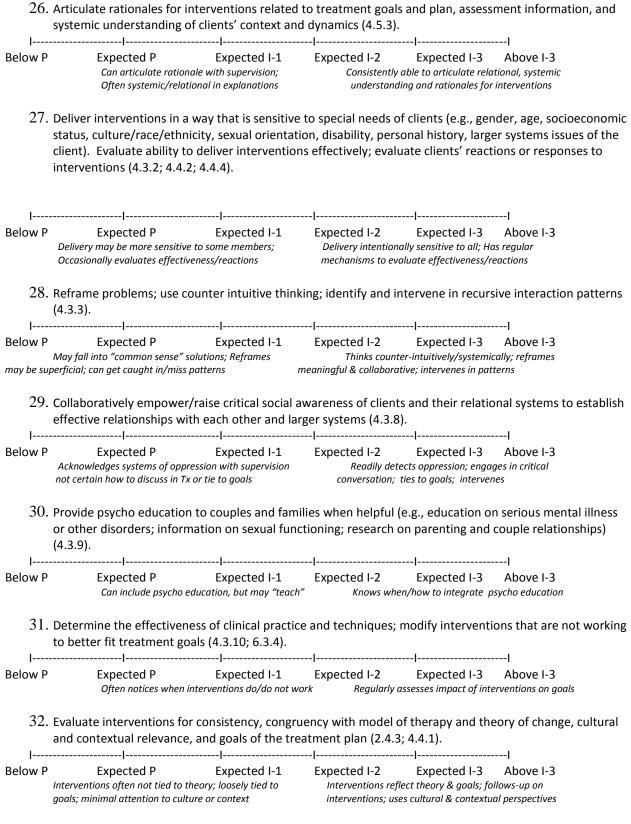
Supervis	see Name:			Date:		
Practicu	m/Internship Site:			Term:		
Supervis	sor:			Summer 1	(Practicum)	-
				Fall		
				Spring		
				Summer 2		
with the masupervise C. Storm & We suggest possible. C	wing areas of competence reflect the prission and training philosophy of the or and supervisee. The format builds & T. Todd, The reasonable complete syst that both parties fill the form and pronce the conversation has taken placernship instructor. A copy needs to respect to the conversation of the copy needs to respect to the conversation of the copy needs to respect to the conversation.	Lewis & Clark MCFT on an evaluation do externic supervisor res prepare to discuss the e and any adjustment	program. This evaluation cument written by Storn source guide. e supervisee's progress u ts are made, the form sh	n form is designed to not not not not not not not not not	guide a conversatio ell, T. & Vincent, B. ting specific examp igned and turned in	n between (1997). In eles when to the
	cicum; I-1= End of internship 1		•	·		
			NCLUDING TREATM			
1.	Explain practice setting rules and duty to care to client or Inform all clients and legal gureporting (1.3.4; 1.3.5; 1.5.3;	legal guardian; ol uardians of limita 5.3.3).	otain consent to tre tions to confidentia	atment from all r lity and paramete	esponsible pers ers of mandator	ions.
Below P			Expected I-2	Expected I-3 riews all necessary info	Above I-3	ocess
	Gather and review intake info	ors (1.3.1).				,
Below P		Expected I-1	Expected I-2 Obi		Above I-3 ormation	
3.	Determine who should atten familial resources); facilitate	involvement of a	II necessary particip	pants (1.3.2; 1.3.3	).	extra-
Below P		Expected I-1 ut not	Expected I-2  Consistently, e	Expected I-3  ffectively includes mu ationale for when & w	Above I-3 Itiple members;	
4. I	Establish, maintain & monito					3.6).
Below P	Expected P Connects with clients but may form alliances with some; attends to allia	_		Expected I-3 with all; able to fluidly nange; attends to allia		

	Elucidate presenting problem from the perspect			
I Below P	Expected P Expected I-1  Attempts to understand all clients' points of view But tends to agree with some over others	Expected I-2 Consist	Expected I-3 ently understand perspec sent multiple views to end	Above I-3 tives of all; able
	Evaluate clients' outcomes for the need to cont			
Below P				Above I-3 s goals; Knows
	Move to constructive termination when treatment and aftercare plans (3.3.9; 4.3.11).			
Below P	Expected D Expected L-1	Evnected I-2	Expected I-3 ently aware of progress to ively terminates & develop	Above I-3
Commei	nts:			
		Γ& DIAGNOSI		
	Understand the effects that psychotropic and or process (3.1.3).			
Below P	·	-		Above I-3 medications;
9.	Consider physical/organic, social, psychological, emotional/interpersonal symptoms. Elicit a releunderstand the context of the clients' problems	evant and acco	urate biopsychosocia	
		.	·	
Below P	Expected P Expected I-1 Considers with supervision; Collects some relevant information		Expected I-3 Consistently collects rele Considers influence on p	vant information;
	Diagnose and assess client behavioral and relati 2.4.2).	•		
I Below P		Expected I-2	Expected I-3 Consistently includes cor problems/diagnosis rela	Above I-3 ntext and describes
11.	Administer and interpret results of assessment dynamics using a genogram (2.3.4; 2.3.6).	instruments, i	ncluding assessing fa	amily history and
I		.		I
Below P	·	-	•	Above I-3 ppropriate &

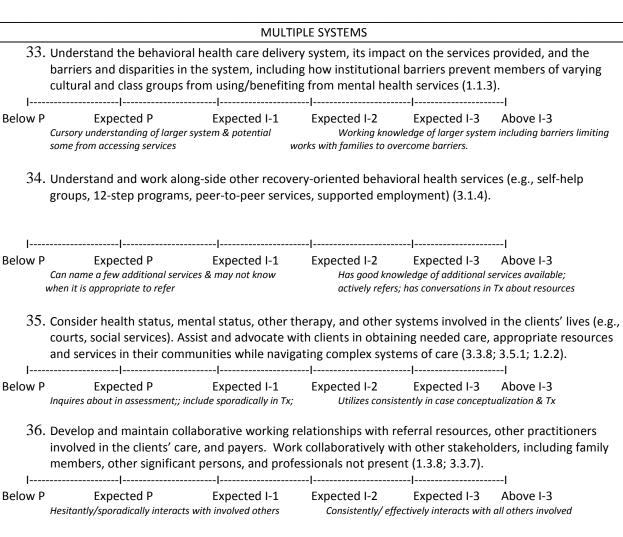


Comments:





Comments:



37. Respect multiple perspectives (e.g., clients, team, supervisor, practitioners from other disciplines who are involved in the case) (4.5.1).

|----------| Expected P Expected I-2 Below P Expected I-1 Expected I-3

Acknowledges and listens to others; might be Respectful of others' perspectives while able to assert own dismissive and/ or timid asserting own perspective. perspective

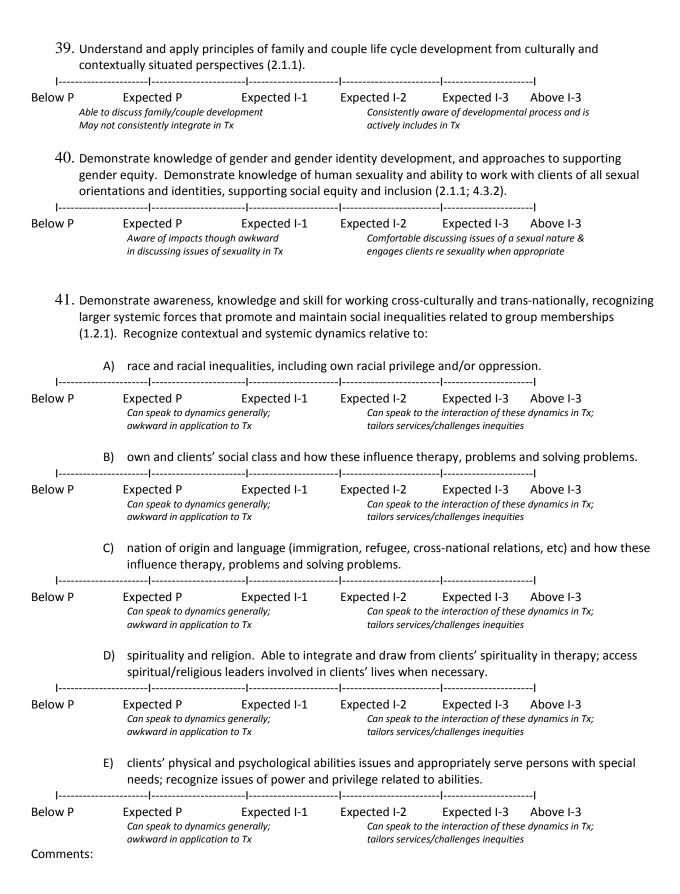
Comments:

#### **CONTEXTUAL & DEVELOPMENTAL**

38. Understand principles of human development across the life span; provide assessments and deliver developmentally appropriate services to clients, such as children, adolescents, adults and elders within culturally and contextually situated perspectives (2.1.1; 2.3.2).

Below P Expected P Expected I-1 Expected I-2 Expected I-3 Above I-3 Discuss when prompted & can consider how Tailors services to fit with current developmental level

services might be tailored to context & development and contextual variables.



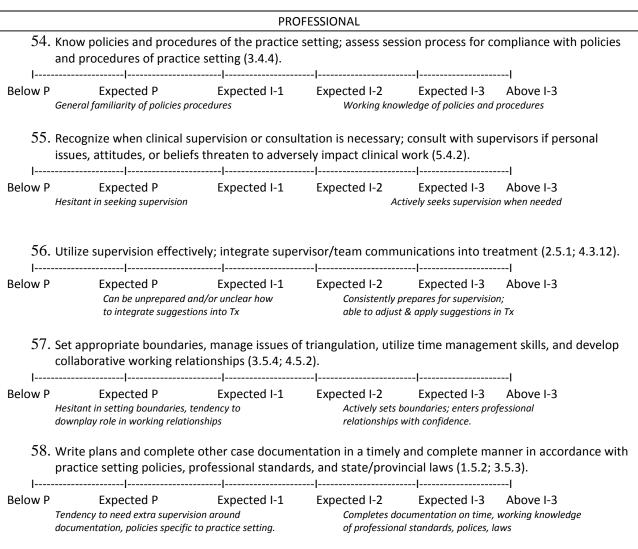
## MANAGING CONFLICT & RISK

42.	. Defuse intense and chaotic situations to enh the safety of all participants (4.3.7).	ance the ability to effo	ectively engage i	n therapy and ensure			
<b> </b>			-				
Below P	Expected P Expected I-1  Hesitant in intense situations, tendency to internalize stress of situation	Engages intense	Expected I-3 situations while stay on is not internalized.	ying balanced;			
	Evaluate level of risks; manage risks, crises, a						
	Expected P Expected I-1  Aware of agency policies/procedures with high risk situations; tentative in assessing risk.	Expected I-2		Above I-3			
	44. Screen and develop adequate safety plans for substance abuse, child and elder maltreatment, domestic violence, physical violence, potential self-harm/suicide, abuse or violence. Report information to appropriate authorities as required by law (2.3.5; 5.3.4; 5.3.6).						
•	Expected P Expected I-1	Expected I-2	•	Above I-3			
	. Participate in case-related forensic and legal going to court) (3.5.2).						
•	Expected P Expected I-1 Requires extra supervision when proceeding.	Expected I-2	Expected I-3	Above I-3			
Comme	nts:						
	KNOWLEDGE	& USE OF RESEARCH					
46.	. Use current MFT and other research (using k			e and quantitative			
I	research) to inform clinical practice (6.3.2).		-	·I			
Below P	•	Expected I-2	Expected I-3 rch relevant to situat	Above I-3			
	Recognize informal research processes involvopportunities for therapists and clients to pa	rticipate in clinical res	search when app	ropriate (6.2.1).			
Below P	Expected P Expected I-1	Expected I-2	Expected I-3	Above I-3			
	Limited awareness of personal bias; awkward in presenting available research opportunities		nal bias; confident pro Tx	esenting research			

8

	SE	LF OF THE THERAPIST				
	Aware of own cultural heritage, life expinfluence definitions of normality-abno					
I Below P	Expected P Expected  Ability to identify some personal influences and how they might impact treatment provided.	I-1 Expected I-2	Expected I-3 with clarity personal influence	Above I-3		
	Monitor attitudes, personal well-being, impact the therapy process adversely o to clients and treatment process (3.4.5	r create vulnerability f 4.4.6).	or misconduct. Monit	or personal reactions		
Below P		I-1 Expected I-2	Expected I-3	Above I-3		
	Demonstrate awareness and sensitivity client intersecting identities and social	roles; maintain humilit	y; use privilege to pro	mote social equity.		
Below P		I-1 Expected I-2 we in Tx Aware of p		Above I-3		
<b>5</b> 1		LEGAL& ETHICAL				
51.	. Know and follow the AAMFT Code of Ethics, standards of practice, and State Laws and regulations for the practice of marriage/couple and family therapy (5.1.1; 5.1.2). Understand the legal requirements and limitations, as well as case management issues, for working with vulnerable populations (e.g., minors)					
I	(1.5.1). 	l		.I		
Below P		I-1 Expected I-2 Working k	•	Above I-3		
	Recognize ethical dilemmas in practice standards of practice apply; monitor iss standards. Understand and use approp supervisors; recognize when legal consilegal dilemmas emerge (5.4.1).	ues related to ethics, I riate processes for ma ultation is necessary; t	aws, regulations, and paid with the sethical decisions; ake appropriate action	professional seek guidance from when ethical and		
Below P		I-1 Expected I-2		Above I-3		
	Evaluate case for appropriateness for the recognize issues that might suggest refeappropriately when necessary; practice	erral for specialized ev within defined scope	aluation, assessment, of practice and compe	or care and refers tence (1.2.3; 1.4.1).		
Below P		I-1 Expected I-2		Above I-3		

#### Comments:



Comments:

OVERALL ASSESSMENT						
l					1	
	Expected P					
Note any dis	agreement between	supervisor and super	rvisee about this ev	aluation:		
Goals (list at	least 3):					
1.						
2.						
3.						
4.						
5.						
Supervisor S	ignature:		D	ate:		
Commenter C			-			
Supervisee S	ignature:		D	ate:		