LEWIS & CLARK GRADUATE SCHOOL OF EDUCATION AND COUNSELING DEPARTMENT OF COUNSELING PSYCHOLOGY ART THERAPY PROGRAM

Art Therapy Internship Supervisee Evaluation

| ite: | ee:Supervisor Name: | | | | | | |
|--|--|-----------------------|------|-------|--------|--|-------|
| ncouraged to identify the | n 4 in each of the following categ e strengths of students in their he student performance is <i>unso</i> | comments; however, pl | ease | e pro | vide | spec | ific |
| 1 = Unsatisfactory | 2 = Needs Improvement | 3 = Appropriate | | 4 = | Excep | otion | al |
| Contacts supe Understands site pol Understands site p L Enga | Adherence to internship site policies Reliability 1 2 3 4 Reliability 1 2 3 4 Attendance 1 2 3 4 Punctuality 1 2 3 4 Takes initiative and works independently in the full capacity of providing art 1 2 3 4 Takes initiative and works independently in the full capacity of providing art 1 2 3 4 Therapy in internship setting Contacts supervisor in a timely manner if schedule challenges arise 1 2 3 4 Complies to dress code expectations 1 2 3 4 Demonstrates appropriate time management 1 2 3 4 Understands site policy on confidentiality 1 2 3 4 Understands site policy on the boundaries of the professional relationship 1 2 3 4 Understands site policy and protocol on reporting client safety concerns 1 2 3 4 Understands rights and responsibilities as a supervisee 1 2 3 4 Engages with internship site staff in a professional manner 1 2 3 4 Ability to analyze situations and arrive at an appropriate decision 1 2 3 4 | | | | | NA N | |
| | | | | | 4 4 | NA NA | |
| Gen | eral investment in & reflection of | | 1 | 2 | 3 | 4 | NA |
| you have for the studen | eria what recommendations fo t? e the student's working knowle | · | | | | | ty do |

Clinical Skills

Please rate the student 1-4 in each of the following categories and comment as needed. Supervisors will provide specific recommendations when the student performance is *unsatisfactory* or *needs improvement* in the boxes below.

| 1 = Unsatisfactory | 2 = Needs Improvement | 3 = Appropriate | 4 = Exceptiona | | al | | |
|---|---|----------------------------|----------------|-----|------|------|-----|
| Overall Therapy Skills | | | | | | | |
| Reports/documents accurate observations of participant engagement | | | | | 3 | 4 | NA |
| , , , , , , , , , , , , , , , , , , , | • | ective art interventions | 1 1 | 2 | 3 | 4 | NA |
| | Communicates rationa | ale of art interventions | 1 | 2 | 3 | 4 | NA |
| | Demonstrates facility with a | variety of art materials | 1 | 2 | 3 | 4 | NA |
| Su | accessfully teaches art techniqu | es and skills as needed | 1 | 2 | 3 | 4 | NA |
| Initiates set-up ir | the art therapy room/space ar | nd utilized it effectively | 1 | 2 | 3 | 4 | NA |
| Demonstrates approp | riate design of art activities for | the clients with regard | 1 | 2 | 3 | 4 | NA |
| | • | thology, and potential | | | | | |
| | Establishes appropriate bour | ndaries with the clients | 1 | 2 | 3 | 4 | NA |
| Skills in Individual (1:1) A | rt Therapy | | | | | | |
| | Opens 1:1 sessions with approp | | 1 | 2 | 3 | 4 | NA |
| | ensitive and appropriate interac | | 1 | 2 | 3 | 4 | NA |
| Formulates art | therapy treatment goals and a | • • • | 1 | 2 | 3 | 4 | NA |
| | | ntions with population | | _ | | | |
| | Demonstrates skill to bring | closure to 1:1 sessions | 1 | 2 | 3 | 4 | NA |
| Skills in Art Therapy Grou | ıps | | | | | | |
| Succes | sfully opens groups with approp | | 1 | 2 | 3 | 4 | NA |
| Demonstrates leadership skills in group treatment | | | 1 | 2 | 3 | 4 | NA |
| | ate group art therapy interventi | | 1 | 2 | 3 | 4 | NA |
| Facilitates closure of gr | oup sessions with sensitivity to | • | 1 | 2 | 3 | 4 | NA |
| | | and ability | | | | | |
| | ns and/or goals will address th | e student's clinical grov | /th a | and | deve | lopm | ent |
| towards the final evalua | ition period? | | | | | | |
| 1. | | | | | | | |
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| 2. | | | | | | | |
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| 3. | | | | | | | |
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Supervision Skills

Please rate the student 1-4 in each of the following categories and comment as needed.

| 1 = Unsatisfactory | 2 = Needs Improvement | 3 = Appropriate | | 4 = | Excep | otion | al |
|--|---|----------------------------|--------|------|---------|--------|-------|
| | Accor | tivoly sooks supopyision | 1 | 2 | 2 | 4 | NA |
| Utilizes sunervision tir | ne to ask challenging therapy | tively seeks supervision | 1 1 | 2 | 3 | 4 | NA |
| Othizes supervision th | Identifies their own pers | | 1 | 2 | 3 | 4 | NA |
| Ability to ide | ntify transference issues and | • | 1 | 2 | 3 | 4 | NA |
| - | inter-transference issues and | · · | 1 | 2 | 3 | 4 | NA |
| Demonstr | ates appropriate level of self-c | onfidence as a clinician | 1 | 2 | 3 | 4 | NA |
| Integrates feedback in | to clinical behavior from week | ly supervision meetings | 1 | 2 | 3 | 4 | NA |
| What is your observation | n of this person's self-confide | nce? | | | | | |
| Please describe how the behavior: | student integrates feedback | from weekly supervision | ı me | etin | gs int | :o cli | nical |
| | Practice to identify specific ethical issures arch as well as proactively | | | | | tting | , and |
| What ethical issues/topi | cs have been identified as mo | est appropriate to this po | pul | atio | n? | | |
| What resources would y ongoing discussion? | ou recommend the student in | dependently explore to | pre | pare | e for t | his | |

| In-Service Presentation Please indicate the (planned or implemented) date of the In-Service Presentation | <i>:</i> | | | | |
|--|------------------|------------------|------------------|--------|----------------|
| Student is expected to complete an in-service within the first semester of their in the student 1-4 in each of the following categories and comment as needed. Sup to identify the strengths of students in their comments; however, please provide recommendations when the student performance is <i>unsatisfactory</i> or <i>needs imp</i> below. | ervi e spe | sors ecific | are e | encou | ıraged |
| 1 = Unsatisfactory 2 = Needs Improvement 3 = Appropriate | | 4 = | Exce | ption | al |
| The In-Service Presentation was appropriate to the needs of the setting The student demonstrated initiative and worked independently in planning the art therapy In-Service Presentation Successfully advocated for the art therapy profession through presentation General investment in & reflection on the learning experience | 1 1 1 1 | 2 2 2 2 | 3 3 3 3 | 4 4 4 | NA NA NA |
| Please provide specific feedback from the In-Service Presentation: | | | | | |
| Art Therapy Assessment Skills | | | | | |
| What are the facilities and programmatic structures that are in place to make for art therapy assessments? If none or minimal, what measures are being tal current structures? | | | | - | ate |
| What (art or non-art based) assessment tools have been taught to the studen | t int | ern | at the | e site | ? |
| What additional art therapy assessment tools are appropriate for this site? Ho utilized? | ow a | ire t | hey b | eing | |

Please rate the student 1-4 in each of the following categories and comment as needed. Use "Not Applicable" (NA) as your answer if the internship site DOES NOT utilize art therapy assessments. Supervisors will provide specific recommendations when the student performance is *unsatisfactory* or *needs improvement* in the boxes below.

| 1 = Unsatisfactory | 2 = Needs Improvement | 3 = Appropriate | | 4 = | Exce | otion | al |
|---------------------------|------------------------------------|--|-------|------|--------|--------|------|
| | | | | _ | - | ۱. | |
| , | • | pased assessment tools | 1 | 2 | 3 | 4 | NA |
| | Understands site policies and pr | • | 1 | 2 | 3 | 4 | NA |
| | nically appropriate timing for as | | 1 | 2 | 3 | 4 | NA |
| • | atient status is appropriate, acci | • | 1 | 2 | 3 | 4 | NA |
| Successfully o | lemonstrates what is revealed t | nrough the art therapy nent into clinical terms | 1 | 2 | 3 | 4 | NA |
| | assessi | nent into clinical terms | | | | | |
| Comments: | | | | | | | |
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| Documentation Skills | | | | | | | |
| What documentation sl | vills have been taught? | | | | | | |
| Wilat documentation Si | dis nave been taugnt: | | | | | | |
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| Please rate the student 1 | -4 in each of the following categ | ories and comment as n | need | led. | Use " | Not | |
| | answer if the internship side DC | | | | | | |
| | pecific recommendations when | the student performance | ce is | uns | atisfo | actor | y or |
| needs improvement in the | e boxes below. | | | | | | |
| 1 = Unsatisfactory | 2 = Needs Improvement | 3 = Appropriate | | 1 - | Exce | ation | al |
| 1 - Olisatisfactory | 2 – Needs Improvement | 5 – Appropriate | | 4 - | EXCE | JUUII | aı |
| | Familiar with site | documentation system | 1 | 2 | 3 | 4 | NA |
| Documentation of pa | atient status is appropriate, acc | • | 1 | 2 | 3 | 4 | NA |
| | rates what is revealed through | - | 1 | 2 | 3 | 4 | NA |
| , | | duct into clinical terms | | | | | |
| Able to articula | te goals and appropriate therap | | 1 | 2 | 3 | 4 | NA |
| | ar Serve area albertale record | treatment plan | _ | _ | | | |
| | | _F - | | | | I | |
| Please provide two (2) r | ecommendations which will a | dress the student's doc | um | enta | tion | skills | : |
| 1. | | | | | | | |
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| 2. | | | | | | | |
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| Any additional comments: | |
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| Evaluation Acknowledgement | |
| This evaluation has been reviewed by: | |
| 2.2.2.2.2 | |
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| Supervisor Signature / Date | Student Signature / Date |
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