DOCTORAL INTERNSHIP IN CLINICAL & COMMUNITY PSYCHOLOGY <u>ADVISOR</u> EVALUATION OF PSYCHOLOGY FELLOWS (Revised 2-11-20)

Fellow		_ Advisor	
Facility & Plac	ements	<u>—</u>	
Instructions:			
	use <u>one</u> evaluation form for the entire e) are added to a single form. Complet		ons for each evaluation period (October, ically using this MS Word template.
Place the curso	r where you want to type. <u>Do Not U</u>	se the Tab Key to	move through the document.
a. Save the b. Section c. Section d. Section that into summar f. Section summar reminde compete insert th (optiona you to fo For Fellows: F a. Review an b. Add option	A: Insert the date the evaluation was c B: Indicate all methods you used to as C: Review the Competency Rating Sca D: For the evaluation period, complete egrates the numerical ratings from or that integrates supervisor comme E: At the end of this form, write a sur- y integrates all supervisor ratings and ed to include specific behavioral des- encies in their narrative summary. We date of signature; review the evaluatally, sign electronically, and date the doc orward to the Training Office.	Eval of [fellow last ompleted. sess the competence ale. e ONLY an overall each supervisor. A contained for each compensary that integrate comments into a firm criptors that high When done, type you ion with the fellow cument. The fellow ebruary, and June): leted evaluation. sign it electronically	ries during the current evaluation period. Il numerical rating for each competency advisors may also write an optional petency. es the fellow's progress for that period. This mal narrative summary. Advisors are light fellows' demonstration of pur name as your electronic signature and regard as the fellow to insert comments of then returns the document electronically to
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Section A: Da	te Evaluation Completed with Fellov	v (Insert dates for e	each of the following):
July – Oct Eva	1 Nov – Feb E	Eval	Mar – Jun Eval
Section B: Me period:	ethods Used to Assess Competencies	(place an X in the l	box for all that apply during this evaluation
Oct Feb Ju		Oct Feb Jun	
	Direct Observation		Review of other written work
	Videotape		QA data or clinical measures
	Audiotape		Feedback from staff & supervisors
	Case presentations		Feedback from peers
	Discussion of work		Feedback from patients & families
	Review of documentation		Other (specify):

→ Expected Competency Level During Internship ←

RATING →	1 Beginning proficiency	2 Basic proficiency	3 Developing proficiency	4 Intermediate proficiency	5 Advanced proficiency
Typical developmental level:	Early or mid- practicum	Internship entry	Internship mid- year	Internship completion	Post-internship
Skill level:	Learning basic skills	Has acquired basic skills	Developing more advanced skills	Flexibly integrating a range of skills	Competence at an advanced level
Supervision required:	Extensive with close supervision	Frequent	Routine	Minimal	Functions independently
Nature of supervision:	Supervisor sets agenda	Supervisor sets agenda with fellow input	Agenda set jointly by supervisor & fellow	Fellow largely sets agenda with supervisor input	Seeks consultation on an as needed basis
Direction required:	Very frequent & explicit	Frequent & explicit	Moderate & decreasing	Occasional	Infrequent
Structure required:	Very high	High	Moderate	Low	Very minimal

^{*}Note: Ratings of NA (not applicable/not observed) are made if there are no supervisor ratings for that competency.

Advisors only complete an overall numerical rating for each competency that integrates the numerical ratings from all supervisors. They also may complete an optional comment for each competency.

Section D: Competency Ratings				
Category I: Communication & Interpersonal Skills		Ratings		
Competencies & Their Elements	Jul - Oct	Nov - Feb	Mar -Jun	
A. Communicates effectively				
1. Listens attentively to others				
2. Identifies differences in communication needs across contexts and intended recipients and adjusts communications accordingly				
3. Demonstrates a thorough grasp of professional language and concepts and uses them appropriately and clearly in oral and written communications				
4. Produces and comprehends written work that is organized, comprehensive and well-integrated				
B. Forms positive relationships with others				
1. Develops, maintains, and effectively terminates therapeutic relationships with individuals receiving professional services				
2. Develops and maintains productive working relationships with colleagues,				
communities, organizations, supervisors and supervisees				
3. Interacts in a manner that is honest, straightforward, and flexible				
4. Expresses genuine interest in others, providing them support and encouragement				
5. Displays compassion and empathy toward others, including those dissimilar from oneself				
C. Manages complex interpersonal situations				
1. Maintains appropriate boundaries (e.g., sharing of personal information, personal touch, dual relationships)				

2. Acknowledges and tolerates others' feelings and attitudes, including those expressed toward them		
3. Allows and facilitates patients' exploration of emotionally laden issues		
Maintains emotional equilibrium and judgment when faced with interpersonal conflict and patient distress		
5. Recognizes and uses problem solving strategies to address interpersonal conflicts		
6. Offers and accepts feedback constructively		
D. Demonstrates self-awareness as a professional		,
1. Identifies and monitors personal attitudes, values, beliefs, individual and cultural		
identities, and their typical role in groups		
2. Recognizes how others experience them and the impact of self on others		
3. Uses personal reactions to inform work with patients and other professionals		
4. Adjusts professional behavior based on awareness of self and awareness of impact		
on others		
Comments on Communication & Interpersonal Skills Compe	tency:	
(Integrates supervisor comments for this competency. Optional - May be lej	t blank.)	
Overall Rating for this Competency Category		
(This integrates all supervisor numerical ratings)		

Category II: Individual and Cultural Diversity		Ratings		
Competencies & Their Elements	July- Oct	Nov - Feb	Mar- June	
A. Demonstrates awareness of diversity and its influence				
1. Identifies the various dimensions of individual and cultural diversity (e.g., age, ra ethnicity, national origin, language, socioeconomic status, gender, gender identity sexual orientation, religion, spiritual beliefs, physical and mental ability)	<i>V</i> ,			
2. Recognizes and appreciates complexities inherent to individual and cultural diver (e.g., intersectionality)	rsity			
3. Recognizes the potential influence of individual and cultural diversity on others are on the interactions between individuals, groups and systems of care	nd			
4. Explores and monitors how s/he or they are influenced by individual and cultural characteristics and experiences				
5. Moves beyond recognition and identification toward an integrated and developed framework for working with populations that are diverse				
B. Develops effective relationships with culturally diverse individuals,				
families, and groups				
1. Recognizes and respects differences between self and others				
2. Communicates in patient's preferred language or uses interpreter services as need	ed			
3. Explores with patients their individual and cultural identities and the meaning of t identifications to them				
4. Recognizes and responds appropriately to the impact of individual and cultural diversity in clinical, consultative, and supervisory relationships				
C. Applies knowledge of individual and cultural diversity in practice				
1. Selects assessment instruments, uses assessment tools, and interprets findings with	hin			
the context of patients' linguistic and cultural characteristics and identities				
2. Considers individual and cultural characteristics and identities in developing				
treatment plans and selecting, modifying, implementing, and monitoring intervent	lions			
3. Is aware of and integrates knowledge of individual and cultural diversity across				
aspects of professional role (intervention, assessment, consultation, research,				
leadership, etc.)				
4. Connects patients to culturally responsive services and resources5. Recognizes, brings attention to, and/or addresses disparities in access to services	0.5			
other forms of discrimination	OI			

D. Pursues professional development about individual and cultural diversity		
1. Recognizes the limitations in their abilities to work with individuals from diverse		
backgrounds		
2. Reviews and applies relevant literature and practice guidelines on providing services		
to diverse populations		
3. Seeks supervision to enhance their abilities to work with individuals from diverse		
backgrounds		
4. Pursues continuing education and multicultural experiences to enhance their abilities		
to work with individuals from diverse backgrounds		
Comments on Individual & Cultural Diversity Competency:		
(Integrates supervisor comments for this competency. Optional - May be left blank	.)	
		,
Overall Rating for this Competency Category		
(This integrates all supervisor numerical ratings)		

Category III: Professional Values, Attitudes and Behavior		Ratin	gs
Competencies & Their Elements	July- Oct	Nov - Feb	Mar- June
A. Displays professional behavior			
1. Maintains appropriate personal hygiene and professional attire			
2. Utilizes appropriate language and non-verbal communications, including in difficult interactions			
3. Demonstrates sound judgement in their responses to routine, complex and/or challenging situations			
4. Responds professionally in increasingly complex situations with a level of independence that matches their professional role			
5. Clarifies expectations and engages in behavior appropriate for their professional role and adjusts behavior to the setting and situation			
B. Engages in self-assessment and self-reflection			
1. Uses multiple methods to routinely assess professional strengths and areas for growth			
(e.g., supervision, peer supervision/consultation, audio/video recordings, patient feedback)			
2. Is open, receptive, and responsive to feedback around performance and professional functions			
3. Recognizes and observes the limits of personal knowledge and skills			
4. Recognizes changes in the field that require the development of new or enhanced competencies			
C. Demonstrates accountability			
1. Acts responsibly (e.g., organizes workload; completes assigned duties efficiently;			
keeps appointments; honors commitments; follows policies, procedures, and administrative requirements)			
2. Demonstrates reliability (e.g., arrives on time, completes work on time, documents in an accurate and timely manner)			
3. Remains available and accessible as their role requires			
4. Acknowledges and assumes responsibility for errors, lapses in judgment, and			
deviations from professional ethics and values			
D. Demonstrates professional identity			
1. Exhibits knowledge of the profession and awareness of issues central to the field			
2. Reflects the professional value of life-long learning by pursuing continuing education			
3. Articulates and pursues professional and career goals4. Demonstrates emerging leadership skills			

E. Engages in the self-care essential for functioning effectively as a psychologist 1. Uses multiple self-care approaches to maintain health and wellness 2. Uses positive coping strategies to tolerate ambiguity and uncertainty and to manage stress 3. Recognizes personal challenges and addresses them so as to minimize their impact on professional performance Comments on Professional Values, Attitudes and Behavior (Integrates supervisor comments for this competency. Optional - May be left to the second of the sec			
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Overall Rating for this Competency Category (This integrates all supervisor numerical ratings)			

Category IV: Ethical and Legal Standards		Rating	gs	
Competencies & Their Elements	July- Oct	Nov - Feb	Mar- June	
A. Demonstrates awareness of ethical and legal standards applicable to				
Health Service Psychology practice, training, and research				
1. Recognizes the ethical values and principles held by professional psychology and the institutions in which they work				
2. Demonstrates awareness of relevant laws, regulations, rules and policies governing				
health service psychology practice at the organizational, local, state, regional and federal levels				
3. Demonstrates awareness of specific concepts that underlie the above laws, regulations				
and policies (e.g., informed consent, confidentiality, mandated reporting) 4. Articulates own ethical values and priorities				
B. Recognizes and manages ethical and legal issues in Health Service				
Psychology practice, training, and research				
1. Adheres to all ethical and legal standards in all professional activities				
2. Recognizes and helps others recognize ethical and legal issues as they arise				
3. Demonstrates a clear decision-making process in the development and				
implementation of plans to resolve ethical and legal issues				
4. Takes appropriate action when others behave in an unethical or illegal manner				
5. Seeks supervision or consultation on ethical and legal issues				
C. Adheres to the APA Ethical Principles and Code of Conduct				
1. Strives to benefit others and do no harm				
Develops relationships of trust with others and accepts responsibility for their behavior				
3. Maintains personal integrity				
Promotes fairness and justice				
5. Respects the dignity, worth, and rights of all people				
Comments on Ethical & Legal Standards:				
(Integrates supervisor comments for this competency. Optional - May be left	blank.)			
Overall Rating for this Competency Category (This integrates all supervisor numerical ratings)				

Category V: Assessment		Ratings		
Competencies & Their Elements	July- Oct	Nov - Feb	Mar- June	
A. Conducts clinical interviews				
 Quickly establishes rapport with individuals being interviewed Formulates relevant and culturally responsive interview questions Conducts semi-structured interviews 				
B. Appropriately selects and applies evidence-based assessment methods				
1. Screens referrals and identifies clear goals for assessments				
2. Selects psychometrically sounds assessment methods and tools that draw from the best empirical literature and that are relevant to assessment aims				
3. Administers methods and tools accurately and efficiently				
4. Scores and interprets results				
C. Collects and integrates data				
1. Obtains and integrates multiple sources of information (e.g., observations, historical information, interview data, test results, information from collateral sources, and				
findings from the literature)				
2. Demonstrates current knowledge of diagnostic classification systems and awareness				
of cultural (and other) limitations of such systems				
3. Uses above systems to classify and differentiate functional and dysfunctional behaviors as well as identify strengths and protective factors				
4. Formulates case conceptualizations that demonstrate a clear understanding of				
behavior within its context (e.g., familial, societal, cultural, social, etc.)				
5. Formulates treatment recommendations that arise from collected data				
6. Uses alternative, non-diagnostic approaches to conceptualizing individuals and their environments, groups, and organizations				
D. Summarizes and reports data				
1. Writes clear, accurate and timely integrated reports				
2. Communicates findings and recommendations clearly to patients and other providers3. Recognizes and reports the strengths and limitations of assessments and findings				
Comments on Assessment:				
(Integrates supervisor comments for this competency. Optional - May be left to	blank.)			
Overall Rating for this Competency Category (This integrates all supervisor numerical ratings)				
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Category VI: Intervention		Ratings		
Competencies & Their Elements	July- Oct	Nov - Feb	Mar- June	
A. Formulates case conceptualizations and treatment plans				
1. Collaborates with patients and families to identify goals and plans				
2. Links case conceptualizations and treatment plans to assessments				
3. Utilizes at least one theoretical orientation and theory of change				
4. Selects appropriate evidence-based interventions and best practices				
B. Implements evidence-based interventions				
1. Displays clinical skills with a wide range of evidence-based interventions, patients				
and patient service needs				
2. Implements interventions with fidelity and adapts them to honor diversity				
characteristics and contextual factors as is appropriate				
3. Recognizes and manages problems and issues that arise with interventions				
4. Modifies and adapts evidence-based approaches effectively when a clear evidence-				
base is lacking				

C. Monitors the impact of interventions			
1. Routinely evaluates progress toward service delivery goals			
2. Measures outcomes			
3. Modifies intervention methods and treatment goals based on evaluation findings			
4. Monitors and adapts own role and performance with the intervention			
Comments on Intervention:			
(Integrates supervisor comments for this competency. Optional - May be left to	blank.)		
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Overall Rating for this Competency Category			
(This integrates all supervisor numerical ratings)			
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Catagory VII: Consultation and Interpretossional/Interdisciplinary			
Category VII: Consultation and Interprofessional/Interdisciplinary		Rating	2S
and Systems-Based Practice			
	July- Oct	Nov - Feb	Mar- June
Competencies & Their Elements	Oct	reb	June
A. Provides consultation (e.g., case-based, group, organizational systems)			
1. Forms effective consultative relationships			
 Clarifies and refines referral questions and consultation goals Develops and implements a consultation plan, recognizing the individual, group, 			
organizational, and systems issues that may impact it 4. Communicates consultation results and recommendations			
B. Engages in interprofessional/interdisciplinary collaboration			
1. Demonstrates awareness and respect of the roles, beliefs, values, practices and			
contributions of other professionals, providers, patients, family, and community			
members			
2. Contributes psychological information while working flexibly with others to develop			
and implement a plan of care			
3. Represents their professional opinions, encourages others to express their opinions, and			
works to resolve differences of opinion or conflicts			
4. Integrates behavioral healthcare with other services (e.g., primary and specialty			
medical care; rehabilitative, recovery, vocational, residential and social services)			
5. Shares and receives information from others in a sensitive manner when authorized by			
the patient and permissible under applicable laws, regulations, policies, and ethical			
codes			
C. Engages in systems-based practice			
1. Delivers care using knowledge of healthcare benefits, coverage limits, utilization			
management procedures, billing, and reimbursement			
2. Analyzes and understands problems within organizations and systems from individual,			
interpersonal, group, and intergroup perspectives			
3. Recognizes the potential influence of group memberships on the behavior of			
individuals in organizations and systems			
4. Responds appropriately to problems within organizations and systems given their role			
Comments on Consultation, Interprofessional/Interdisciplinary and Systems		Practio	ce:
(Integrates supervisor comments for this competency. Optional - May be left b	tank.)		
Overall Rating for this Competency Category			
(This integrates all supervisor numerical ratings)			
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Category VIII: Supervision	Ratings		
	July- Oct	Nov - Feb	Mar- June
Competencies & Their Elements	Oct	reb	June
A. Seeks and uses supervision effectively			
1. Establishes strong working relationships with supervisors of diverse practice			
orientations			
Clarifies broad personal goals for supervision and specific agendas items for supervisory sessions			
3. Seeks supervision routinely and when specifically needed (e.g., complex cases,			
unfamiliar patients or services, ethical and legal issues, strong personal reactions to			
patients)			
4. Uses multiple methods to provide supervisors with timely, accurate information about			
their work and is open to being observed			
B. Uses supervisory feedback to improve performance			
1. Accepts feedback without being overly defensive			
2. Acknowledges challenges and areas for professional growth			
3. Follows supervisors' direction			
4. Adjusts professional behavior based on feedback			
C. Facilitates peer supervision/consultation			
1. Leads peer supervision/consultation groups			
2. Structures the groups using an explicit method to guide discussions by peers of their			
work Mointains a constructive and supportive environment within the groups			
3. Maintains a constructive and supportive environment within the groups4. Gives constructive and supportive feedback to peers			
D. Provides individual supervision (if applicable)			
1. Establishes supportive supervisory relationships with explicit roles and responsibilities			
for supervisor and supervisee (or does so by engaging in simulated practice of			
supervision)			
2. Uses multiple methods to monitor the quality of care provided and assess supervisee			
level of development, strengths, and learning needs (e.g., observation; audio and video			
recording; case discussion and presentations; review of documentation; clinical			
measures; QA data; and feedback from others)			
3. Uses an explicit model of supervision and multiple methods to ensure the quality of			
care being provided and to address supervisee learning needs (e.g., case discussion,			
feedback, instruction, modeling, coaching, providing publications) 4. Provides feedback that is direct, clear, timely, behaviorally anchored, and mindful of			
the impact on the supervisee and supervisory relationship			
5. Maintains accurate and timely documentation of supervision and supervisee			
performance			
6. Requests and uses feedback from supervisees to improve the quality of supervision			
Comments on Supervision:			
(Integrates supervisor comments for this competency. Optional - May be left bl	ank.)		
Overall Rating for this Competency Category			
(This integrates all supervisor numerical ratings)			

Category IX: Research & Scholarship	Ratings		
Competencies & Their Elements	July- Oct	Nov - Feb	Mar- June
A. Displays critical scientific thinking			

Demonstrates scholarly curiosity and routinely questions assumptions	
2. Understands and values evidence-based practice	
3. Formulates questions that can be addressed by the literature, research, and program	
evaluation	
4. Critically evaluates and shares ideas with others through teaching and scholarly writing	
B. Uses the scientific literature1. Accesses, summarizes, and evaluates the literature related to their professional	
activities	
2. Discusses the relevant literature in case conferences, lectures, and/or professional	
presentations	
3. Applies the scientific literature to their work (e.g., clinical, consultation, research,	
program evaluation, quality assurance)	
C. Implements scientific methods	
1. Selects and implements methods appropriate to the question, setting, and/or	
community	
2. Uses scientific methods to evaluate interventions and programs and to engage in	
continuous quality improvement	
3. Manages, analyzes, and interprets quantitative and qualitative data4. Collaborates with other professionals, persons in recovery, family members, and	
stakeholders in developing questions, implementing methods, and understanding	
results	
5. Contributes to the preparation of manuscripts, technical reports, case studies, or other	
scholarly work	
Comments on Research & Scholarship:	
(Integrates supervisor comments for this competency. Optional - May be left blank.)	
Overall Rating for this Competency Category	
Overall Rating for this Competency Category (This integrates all supervisor numerical ratings)	
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FEBRUARY EVALUATION	
Advisor's Overall Assessment of Progress: Place an X in one box.	
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Advisor's Integrative Summary of Fellow Progress. This summary integrates all supervisor raccomments into a narrative summary. Identify strengths, areas for growth, and major concerns. Adveminded to include specific behavioral descriptors that highlight fellows' demonstration of conthis narrative summary. Please consider providing feedback/progress that addresses each of the coareas.	visors are npetencies in
Psychology Fellow's Comments: These comments are optional.	
Advisor's signature (Signatures indicate that the advisor and fellow have discussed this evaluation)	Date
JUNE EVALUATION	
Advisor's Overall Assessment of Progress: Place an X in one box.	
Fellow has made adequate progress in developing the core competencies that I am assessing. Fellow has NOT made adequate progress in developing the core competencies that I am assessing.	ng.
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