

RECEIVED

## Course Information

DEC 10

Date Submitted: 7/24/2015

Current Prefix and Number: FAM - Family Sciences, FAM 787 SUPERVISED PRACTICE COUPLE/FAM THERAPY

OFFICE OF THE  
SENATE COUNCIL

Other Course:

Proposed Prefix and Number: FAM 787

What type of change is being proposed?

Major Change

Should this course be a UK Core Course? No

## 1. General Information

a. Submitted by the College of: AGRICULTURE, FOOD AND ENVIRONMENT

b. Department/Division: Family Sciences

c. Is there a change in 'ownership' of the course? No

If YES, what college/department will offer the course instead: Select...

e. Contact Person

Name: Ronald Werner-Wilson

Email: rjwern2@uky.edu

Phone: 257-7750

Responsible Faculty ID (if different from Contact)

Name:

Email:

Phone:

f. Requested Effective Date

Semester Following Approval: Yes OR Effective Semester:

## 2. Designation and Description of Proposed Course

a. Current Distance Learning (DL) Status: N/A

b. Full Title: SUPERVISED PRACTICE OF COUPLE/FAMILY THERAPY

Proposed Title: SUPERVISED PRACTICE OF COUPLE/FAMILY THERAPY

c. Current Transcript Title: SUPERVISED PRACTICE COUPLE/FAM THERAPY

Proposed Transcript Title: SUPERVISED PRACTICE COUPLE/FAM THERAPY

d. Current Cross-listing: none

Proposed – ADD Cross-listing :

Proposed – REMOVE Cross-listing:

e. Current Meeting Patterns

LECTURE: 1-6

Proposed Meeting Patterns

PRACTICUM: 1-6

f. Current Grading System: Graduate School Grade Scale

Proposed Grading System: *Letter (A, B, C, etc.)*

g. Current number of credit hours: 1 - 6 (variable)

Proposed number of credit hours: 1-6

h. Currently, is this course repeatable for additional credit? Yes

Proposed to be repeatable for additional credit? Yes

If Yes: Maximum number of credit hours: 18

If Yes: Will this course allow multiple registrations during the same semester? Yes

2i. Current Course Description for Bulletin: Intensive study of skills, issues, or treatment procedures in couple and family therapy. May be repeated under different subtitles to a maximum of six credits.

Proposed Course Description for Bulletin: Intensive study of skills, issues, or treatment procedures in couple and family therapy. May be repeated to a maximum of eighteen credits.

2j. Current Prerequisites, if any: Admission to the CFT master's program

Proposed Prerequisites, if any: Admission to the CFT master's program

2k. Current Supplementary Teaching Component:

Proposed Supplementary Teaching Component:

3. Currently, is this course taught off campus? No

Proposed to be taught off campus? No

If YES, enter the off campus address:

4. Are significant changes in content/student learning outcomes of the course being proposed? No

If YES, explain and offer brief rationale:

5a. Are there other depts. and/or pgms that could be affected by the proposed change? No

If YES, identify the depts. and/or pgms:

5b. Will modifying this course result in a new requirement of ANY program? No

If YES, list the program(s) here:

6. Check box if changed to 400G or 500: No

## Distance Learning Form

Instructor Name:

Instructor Email:

Internet/Web-based: No

Interactive Video: No

Hybrid: No

1. How does this course provide for timely and appropriate interaction between students and faculty and among students? Does the course syllabus conform to University Senate Syllabus Guidelines, specifically the Distance Learning Considerations?

2. How do you ensure that the experience for a DL student is comparable to that of a classroom-based student's experience? Aspects to explore: textbooks, course goals, assessment of student learning outcomes, etc.

3. How is the integrity of student work ensured? Please speak to aspects such as password-protected course portals, proctors for exams at interactive video sites; academic offense policy; etc.

4. Will offering this course via DL result in at least 25% or at least 50% (based on total credit hours required for completion) of a degree program being offered via any form of DL, as defined above?

If yes, which percentage, and which program(s)?

5. How are students taking the course via DL assured of equivalent access to student services, similar to that of a student taking the class in a traditional classroom setting?

6. How do course requirements ensure that students make appropriate use of learning resources?

7. Please explain specifically how access is provided to laboratories, facilities, and equipment appropriate to the course or program.

8. How are students informed of procedures for resolving technical complaints? Does the syllabus list the entities available to offer technical help with the delivery and/or receipt of the course, such as the Information Technology Customer Service Center (<http://www.uky.edu/UKIT/>)?

9. Will the course be delivered via services available through the Distance Learning Program (DLP) and the Academic Technology Group (ATL)? NO

If no, explain how student enrolled in DL courses are able to use the technology employed, as well as how students will be provided with assistance in using said technology.

10. Does the syllabus contain all the required components? NO

11. I, the instructor of record, have read and understood all of the university-level statements regarding DL.

Instructor Name:

SIGNATURE|LGRABAU|Larry J Grabau|FAM 787 CHANGE College Review|20150724

SIGNATURE|ZNNIKO0|Roshan Nikou|FAM 787 CHANGE Graduate Council Review|20151210

### Course Change Form

https://myuk.uky.edu/sap/bc/soap/rfc?services=

Generate R

Open in full window to print or save

Attachments:

Upload File

ID	Attachment
Delete 5201	FAM 787 Syllabus (Summer 2015).Revised.doc
Delete 5592	FAM 787 Syllabus (Summer 2015).Revised Student Lea

1

NOTE: Start form entry by choosing the Current Prefix and Number  
 (\*denotes required fields)

<b>Current Prefix and Number:</b> FAM - Family Sciences FAM 787 SUPERVISED PRACTICE COUPLE/FAM THERAPY		<b>Proposed Prefix &amp; Number:</b> (example: PHY 401G) FAM 787 <input checked="" type="checkbox"/> Check if same as current
What type of change is being proposed?		<input checked="" type="checkbox"/> Major Change <input type="checkbox"/> Major - Add Distance Learning <input type="checkbox"/> Minor - change in number within the same hundred series, exce 799 is the same "hundred series" <input type="checkbox"/> Minor - editorial change in course title or description which does change in content or emphasis <input type="checkbox"/> Minor - a change in prerequisite(s) which does not imply a chan course content or emphasis, or which is made necessary by the eli or significant alteration of the prerequisite(s) <input type="checkbox"/> Minor - a cross listing of a course as described above
Should this course be a UK Core Course? <input type="radio"/> Yes <input checked="" type="radio"/> No If YES, check the areas that apply: <input type="checkbox"/> Inquiry - Arts & Creativity <input type="checkbox"/> Composition & Communications - II <input type="checkbox"/> Inquiry - Humanities <input type="checkbox"/> Quantitative Foundations <input type="checkbox"/> Inquiry - Nat/Math/Phys Sci <input type="checkbox"/> Statistical Inferential Reasoning <input type="checkbox"/> Inquiry - Social Sciences <input type="checkbox"/> U.S. Citizenship, Community, Diversity <input type="checkbox"/> Composition & Communications - I <input type="checkbox"/> Global Dynamics		
<b>1. General Information</b>		
Submitted by the College of: AGRICULTURE, FOOD AND ENVIRONMENT		Submission Date: 7/24/2015
Department/Division: Family Sciences		
Is there a change in "ownership" of the course? <input type="radio"/> Yes <input checked="" type="radio"/> No    If YES, what college/department will offer the course instead? Select...		
* Contact Person Name: Ronald Werner-Wilson    Email: rjwern2@uky.edu    Phone: 257-7750		
* Responsible Faculty ID (if different from Contact):    Email:    Phone:		
Requested Effective Date: <input checked="" type="checkbox"/> Semester Following Approval    OR    Specific Term: 2		
<b>2. Designation and Description of Proposed Course.</b>		
Current Distance Learning(DL) Status:		<input checked="" type="radio"/> N/A <input type="radio"/> Already approved for DL* <input type="radio"/> Please Add <input type="radio"/> Please Drop
*If already approved for DL, the Distance Learning Form must also be submitted <u>unless</u> the department affirms (by checking this box ) that the proposed chang affect DL delivery.		
Full Title: SUPERVISED PRACTICE OF COUPLE/FAMILY THERAPY		Proposed Title: * SUPERVISED PRACTICE OF COUPLE/FAMILY THERAPY
Current Transcript Title (if full title is more than 40 characters): SUPERVISED PRACTICE COUPLE/FAM THERAPY		
Proposed Transcript Title (if full title is more than 40 characters): SUPERVISED PRACTICE COUPLE/FAM THERAPY		
Current Cross-listing:		OR

	<input checked="" type="checkbox"/> N/A	Currently <sup>3</sup> Cross-listed with (Prefix & Number):	none		
Proposed – ADD <sup>2</sup> Cross-listing (Prefix & Number):					
Proposed – REMOVE <sup>2,4</sup> Cross-listing (Prefix & Number):					
<b>e. Courses must be described by at least one of the meeting patterns below. Include number of actual contact hours<sup>5</sup> for each meeting pattern</b>					
Current:	Lecture 1-6	Laboratory <sup>2</sup>	Recitation	Discussion	Indep. Study
	Clinical	Colloquium	Practicum	Research	Residency
	Seminar	Studio	Other:	Please explain:	
Proposed: *	Lecture	Laboratory <sup>2</sup>	Recitation	Discussion	Indep. Study
	Clinical	Colloquium	Practicum 1-6	Research	Residency
	Seminar	Studio	Other:	Please explain:	
<b>f. Current Grading System:</b>	Graduate School Grade Scale				
<b>Proposed Grading System:*</b>	<input checked="" type="radio"/> Letter (A, B, C, etc.) <input type="radio"/> Pass/Fail <input type="radio"/> Medicine Numeric Grade (Non-medical students will receive a letter grade) <input type="radio"/> Graduate School Grade Scale				
<b>g. Current number of credit hours:</b>	1 - 6 (variable)		<b>Proposed number of credit hours:*</b>	1-6	
<b>h.* Currently, is this course repeatable for additional credit?</b>					<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>* Proposed to be repeatable for additional credit?</b>					<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>If YES:</b>	<b>Maximum number of credit hours:</b>			18	
<b>If YES:</b>	<b>Will this course allow multiple registrations during the same semester?</b>				<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>i. Current Course Description for Bulletin:</b>					
Intensive study of skills, issues, or treatment procedures in couple and family therapy. May be repeated under different subtitles to a maximum of six credits.					
<b>* Proposed Course Description for Bulletin:</b>					
Intensive study of skills, issues, or treatment procedures in couple and family therapy. May be repeated to a maximum of eighteen credits.					
<b>j. Current Prerequisites, if any:</b>					
Admission to the CFT master's program					
<b>* Proposed Prerequisites, if any:</b>					
Admission to the CFT master's program					
<b>k. Current Supplementary Teaching Component, if any:</b>					
<input type="radio"/> Community-Based Experience					

		<input type="radio"/> Service Learning <input type="radio"/> Both
	<i>Proposed Supplementary Teaching Component:</i>	<input type="radio"/> Community-Based Experience <input type="radio"/> Service Learning <input type="radio"/> Both <input type="radio"/> No Change
3.	Currently, is this course taught off campus?	<input type="radio"/> Yes <input checked="" type="radio"/> No
*	Proposed to be taught off campus?	<input type="radio"/> Yes <input checked="" type="radio"/> No
	If YES, enter the off campus address:	
4.*	Are significant changes in content/student learning outcomes of the course being proposed?	<input type="radio"/> Yes <input checked="" type="radio"/> No
	If YES, explain and offer brief rationale:	
5.	Course Relationship to Program(s).	
a.*	Are there other depts and/or pgms that could be affected by the proposed change?	<input type="radio"/> Yes <input checked="" type="radio"/> No
	If YES, identify the depts. and/or pgms:	
b.*	Will modifying this course result in a new requirement <sup>2</sup> for ANY program?	<input type="radio"/> Yes <input checked="" type="radio"/> No
	If YES <sup>2</sup> , list the program(s) here:	
6.	Information to be Placed on Syllabus.	
a.	<input type="checkbox"/> Check box if changed to 400G or 500.	<input type="checkbox"/> If changed to 400G- or 500-level course you must send in a syllabus and you must include the differentiation between under and graduate students by: (i) requiring additional assignments by the graduate students; and/or (ii) establishing different grad in the course for graduate students. (See SR 3.1.4.)

<sup>1</sup>See comment description regarding minor course change. *Minor changes are sent directly from dean's office to Senate Council Chair.* If Chair deems the change as "not minor," the form will be sent to the appropriate academic Council for normal processing and contact person is informed.

<sup>2</sup>Courses are typically made effective for the semester following approval. No course will be made effective until all approvals are received.

<sup>3</sup>Signature of the chair of the cross-listing department is required on the Signature Routing Log.

<sup>4</sup>Removing a cross-listing does not drop the other course – it merely unlinks the two courses.

<sup>5</sup>Generally, undergrad courses are developed such that one semester hr of credit represents 1 hr of classroom meeting per wk for a semester, exclusive of any lab meeting. Lab meeting generally requires at least two hrs per wk for a semester for 1 credit hour. (See SR 6.2.1.)

<sup>6</sup>You must also submit the Distance Learning Form in order for the course to be considered for DL delivery.

<sup>7</sup>In order to change a program, a program change form must also be submitted.

**FAM 787:  
SUPERVISED EXPERIENCE IN THE  
PRACTICE OF MARRIAGE AND FAMILY THERAPY**

**University of Kentucky  
Department of Family Sciences  
Sumer, 2015**

Supervisor: Ronald Jay Werner-Wilson, Ph.D.  
Office: 315 Funkhouser  
Phone: 859.257.7750 (office); 859.494.8336 (mobile)  
E-mail: [ronald.werner-wilson@uky.edu](mailto:ronald.werner-wilson@uky.edu)  
Group Supervision: Tuesdays from 11:00-12:30  
Individual Sup.:

9:00 to 10:30 – Individual Supervision with Lekie and Cortnie  
12:45 to 2:15 – Teresa and Jillian  
2:30 to 4:00 – Lucia and Patrick

Course Objectives:

1. Maintain an appropriate caseload.
2. Attend all assigned meetings of class/group supervision.
3. Make at least two clinical case presentations during group supervision.
4. Fully participate in all supervision by providing respectful feedback to peers.
5. Demonstrate clinical competencies, based on training level, as identified in syllabus.
6. Demonstrate ability to conceptualize cases and develop interventions from a relational/systemic perspective that is attentive to therapy process issues.
7. Demonstrate ability to conceptualize cases and develop interventions that are sensitive to multiple dimensions of diversity, including attention to sex differences (including gender and power), race/ethnicity, family form, sexuality, etc.

Student Learning Outcomes:

Family Sciences faculty in the CFT emphasis identified several student learning outcomes applicable to CFT basic core competencies that includes sensitivity to multiple dimensions of diversity, including attention to sex differences (including gender and power), race/ethnicity, family form, sexuality, etc. FAM 686 is an opportunity for you to demonstrate the skills and knowledge you have acquired in each of the following student learning outcomes.

1. *Outcome 1: Admission to Treatment:* Students will be able to formulate and apply skills necessary to establish a therapeutic contract.
2. *Outcome 2: Clinical Assessment and Diagnosis:* Students will be able to differentiate and evaluate the issues to be addressed in therapy.
3. *Outcome 3: Treatment Planning and Case Management:* Students will be able to direct the course of therapy and extra-therapeutic activities.
4. *Outcome 4: Therapeutic Interventions:* Students will be able to ameliorate the clinical issues identified.



5. *Outcome 5: Legal Issues, Ethics, and Standards:* Students will identify and implement statutes, regulations, principles, values, and mores of MFT's.

### Accommodation for Disabilities

***Any student needing accommodation for a disability should present their approved accommodation request form from Disability Services to the instructor in order to plan accommodations.***

### Individual Supervision

Individual supervision will take place once a week. If you cannot attend weekly individual supervision, it is your responsibility to notify the supervisor as soon as possible to re-schedule a supervision session for that week. Likewise, the supervisor will notify you as soon as possible when the need to re-schedule supervision arises.

Supervisees are expected to arrive on time and be prepared for supervision. Being prepared includes having a case ready to present in supervision. When using a video of therapy, the clip should be appropriately cued for presentation. If live supervision is scheduled, supervisees need to prepare a back-up case to present in the event that the client cancels or no-shows for the therapy session.

Policies and Procedures: Students are expected to know and follow all Family Center policies and procedures, as outlined in the Clinician's Handbook. Please refer to the handbook when you have a question. It is recommended you keep the copy that you received in FAM 687, in your filing cabinet drawer so you can refer to it when a question arises. If you are unable to find your answer in the handbook, please see the Family Center Director.)

You will need to purchase a video camera and tripod for recording sessions in your assigned school. You are required to record every session of therapy and group. The following equipment is "good enough". You may choose to purchase a better quality camera but remember, all equipment stays in the clinic in a locked drawer.

<http://www.walmart.com/ip/Vivitar-DVR426HD-LIC/21607754>

<http://www.walmart.com/ip/Vivitar-DVR508-BLK/21607760>

<http://www.walmart.com/ip/Targus-Red-6-Aluminum-Tabletop-Tripod-TGT-CT7/10370959>

You will also need to purchase a locked box to carry the camera while in transit to your school and back to the clinic. Video cameras are to remain in a locked drawer in the clinic office.

### Group Supervision

You will be expected to make at least two case presentations this semester. Prior to group supervision you should (a) review the video recording and have it cued to the point you wish to start, and (b) complete a Case Presentation form. During your presentation, you should manage time so that there is adequate time to review video and obtain feedback.

<u>Task</u>	<u>Time</u>
1. Provide a brief summary of relevant case material and identify goals for supervision. Include a genogram.	5 – 10 minutes

2. Show a relevant video clip.
3. Case discussion

20 – 25 minutes  
35 – 60 minutes

### Responsibilities for Those Providing Feedback

- Provide respectful feedback.
- Provide feedback that is relational/systemic that is sensitive to therapy process and group supervision dynamics.

### Paperwork

Paperwork will be reviewed on an ongoing basis; that is, the supervisor will review the case file when you present the case in supervision. Supervisees are responsible for ensuring that inactive case files are closed. Supervisees are expected to have all case notes fully written. Supervisees are strongly encouraged to write case notes immediately after a session. Monthly client contact sheets need to be turned in on the last day of the month. Bring all your files to the last supervision session of the month, as they will be reviewed during that meeting.

Client files are frequently audited by undergraduate students. You, your supervisor, and the Family Center Director will be sent an email with the results of the audit. You are expected to make the necessary revisions and submit to your supervisor for verification of completion by the next scheduled individual supervision.

Client contact should be reported based on the following increments:

- 10-20 minutes will count as .25 hours. If the session is less than ten minutes, it probably doesn't have clinical relevance.
- 21-35 minutes will count as .50 hours.
- 36-49 minutes will count as .75 hours.
- 50-69 minutes will count as 1.00 hour.
- 70-80 minutes will count as 1.25 hours.
- 81-95 minutes will count as 1.50 hours.
- 96-109 minutes will count as 1.75 hours
- 110-169 minutes will count as 2.00 hours

At the end of the semester, for students continuing in the clinic, all inactive cases must be closed, and all active cases need to be current (i.e. case notes completed, monies collected, assessments completed, client contact record up-to-date) for a grade to be assigned. At the end of the semester, for students finishing in the clinic, all cases must be closed and other tasks accomplished.

### Confidentiality

All supervision participants are expected to keep information shared during supervision confidential. Client confidentiality must be respected within the context of supervision; supervisees are expected to notify all clients at the initial therapy session that all cases receive supervision, and that client information may be shared within supervision, yet client information shared will not extend beyond the parameters of supervision. Similarly, supervision is a growth experience for supervisees. Personal information shared by supervisees is expected to stay within the parameters of supervision. The

supervisor will also maintain and respect supervisees' confidentiality in supervision. Please be aware that information shared by supervisees in supervision may be shared among MFT faculty. Supervisees are being trained in Marriage & Family Therapy at an academic institution. Some sharing of supervision information is likely as faculty continue to ensure the personal and professional growth of students. Information shared by supervisees in supervision will not be shared with other students or in the classroom setting.

The supervisor may video record supervision sessions.

### Other Expectations

One purpose of supervision for supervisees is to grow as clinicians. The supervisor role includes guiding, encouraging, and at times directing supervisees to think beyond their current realm and to try new therapeutic techniques. Supervisees are expected to be open to new ideas provided by the supervisor and other supervisees. Supervisees will be asked at the beginning of supervision to provide goals to work on throughout the supervisory process. The supervisor will provide additional goals for supervisees to work on in supervision.

Supervisees and the supervisor are expected to follow AAMFT ethical guidelines at all times. The supervisor is to be notified of any and all crisis incidents prior to filing paperwork or otherwise interacting with outside authorities, such as when a client poses a danger to him/herself, others, in cases of suspected child or elder abuse/neglect, or when police are called on a client's behalf or in any regards to a case. Supervision notification is required in such cases to ensure that ethical and legal issues are properly addressed, as well as for liability issues. If you have a case that involves the court system, suicide/homicide, or abuse in any way, you must keep your supervisor updated on the case weekly—at a minimum—and more often if the supervisor requests more frequent reports.

Supervisees are to carry liability insurance. A copy of current liability insurance needs to be provided to the supervisor before supervisees can begin or continue in the clinic.

### Conflict Resolution

If a conflict arises between supervisees or between the supervisor and a supervisee, supervision participants are expected to first attempt to directly resolve the matter with the supervisor or fellow supervisee. If this initial attempt between students is unsuccessful, please contact the Family Center Director. If there is a conflict between a student and their supervisor that is unresolved, please contact the Program Director. If the conflict is between the student and the Family Center Director or the Program Director, please contact Dr. Ann Vail, Director of the School of Human Environmental Sciences.

### Evaluation of Supervisor

Supervisees are expected to formally evaluate the supervisor at the end of the semester. Formal evaluation of the supervisor will include regular fill-in course evaluations (which are anonymous) AND an Evaluation of Supervisor and Supervision form to be completed during finals week.

## Grading

Individual supervision will be weighted 50%; group supervision will be weighted 30% and completion of paperwork, following clinic policies, phone duty, working professionally in your assigned school and other Family Center responsibilities will be weighted 20%. The grade for Family Center responsibilities will be assigned by the Family Center Director.

Attached to the present syllabus is a copy of the Basic Skills Evaluation on which you will be, in part, evaluated. You will evaluate yourself, as well as your supervisor evaluating you with this form on two occasions--we will meet mid-semester and during finals week to assess your progress in Practicum. If you have any concerns about your progress or grade, please speak to your supervisor immediately. Evaluation of supervisees is an ongoing process. The supervisor will communicate with supervisees about serious/major problems if they are apparent before mid-semester.

Grading criteria will be objective as well as subjective. Because your clinical skills depend on your developmental level, grading of you in this regard will be subjective (depending on the supervisee's developmental level). This is your second semester working with clients as a CFT Intern, so you are considered a novice therapist.

## Developmental Competencies

	Novice Supervisee	Intermediate Supervisee	Advanced Supervisee
<u>Competencies</u>			
Case Management	H	M	L
Therapeutic Relationship	H	M	L
Perceptual	H	M	L
Conceptual	L	H	H
Structuring	H	M	L
Intervention	L	H	L
Professional Development	L	M	H

H = High Emphasis, M = Moderate Emphasis, L = Low Emphasis

## Competencies Evaluated

### *General Case Management Competencies*

Therapist's ability to fulfill agency/clinic responsibilities and coordinate their caseload.

### *Therapeutic Relationship Competencies*

Therapist's skill at establishing and maintaining an ongoing relationship with clients.

### *Perceptual Competencies*

Therapist's ability to observe interaction.

### *Conceptual Competencies*

Therapist's skill at integrating these observations with theory with sensitivity to client diversity.

### *Structuring Competencies*

Therapist's ability to adequately direct therapy.

*Intervention Competencies*

Therapist's abilities of purposely behaving in a way to facilitate change with sensitivity to client diversity.

*Professional Development Competencies*

Therapist's ability to use resources to promote their growth and present themselves as marriage and family therapists.

CASE PRESENTATION FORM

Therapist: \_\_\_\_\_ # of sessions: \_\_\_\_\_ session #: \_\_\_\_\_

Client info:    Name                    Age                    Gender                    Ethnicity                    SES                    Occupation

- 1.
- 2.
- 3.
- 4.
- 5.

Relevant Background Information for Each Participant:

Societal influences: \_\_\_\_\_

\_\_\_\_\_

Relational/Systemic Issues:

Life Cycle Stage: \_\_\_\_\_

\_\_\_\_\_

Family influences: \_\_\_\_\_

\_\_\_\_\_

Support network: \_\_\_\_\_

\_\_\_\_\_

Therapy Process:

Presenting problem: \_\_\_\_\_

\_\_\_\_\_

Risk assessment (abuse, violence, suicide): \_\_\_\_\_

\_\_\_\_\_

Client Goals: \_\_\_\_\_

\_\_\_\_\_

FIRO Issues (inclusion, power/control, affection): \_\_\_\_\_

\_\_\_\_\_

Phase of Therapy (Alexander, 1988): \_\_\_\_\_

\_\_\_\_\_

Describe Each Dimension of Therapeutic Alliance (Goals, Task, Bond):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

In this case, how does gender and power influence client goals? \_\_\_\_\_

\_\_\_\_\_

In this case, how does gender and power influence therapeutic process? \_\_\_\_\_

\_\_\_\_\_

Theoretical approach(es) used: \_\_\_\_\_

\_\_\_\_\_

Self-of-therapist issues related to this case: \_\_\_\_\_

\_\_\_\_\_

Other professionals involved with the case: \_\_\_\_\_

\_\_\_\_\_

What am I looking for from Group? \_\_\_\_\_

\_\_\_\_\_

## BASIC SKILLS EVALUATION DEVICE®

Therapist \_\_\_\_\_ Date \_\_\_\_\_

Supervisor \_\_\_\_\_ Experience Level \_\_\_\_\_

<b>Conceptual Skills</b>	Inadequate Information	Deficient	Below Expectation	Meets Expectation	Exceeds Expectation	Exceptional Skills
1. Knowledge Base						
2. Systems Perspective						
3. Familiarity with Therapy Model						
4. Self as Therapist						

Comments:

<b>Perceptual Skills</b>	Inadequate Information	Deficient	Below Expectation	Meets Expectation	Exceeds Expectation	Exceptional Skills
1. Recognition Skills						
2. Hypothesizing						
3. Integration of theory practice						

Comments:

<b>Executive Skills</b>	Inadequate Information	Deficient	Below Expectation	Meets Expectation	Exceeds Expectation	Exceptional Skills
1. Joining						
2. Assessment						
3. Hypothesizing						
4. Interventions						
5. Communication Skills						
6. Personal Skills						
7. Session Management						

Comments:



<b>Professional Skills</b>	<b>Inadequate Information</b>	<b>Deficient</b>	<b>Below Expectation</b>	<b>Meets Expectation</b>	<b>Exceeds Expectation</b>	<b>Exceptional Skills</b>
1. Supervision						
2. Recognition of Ethical Issues						
3. Paperwork						
4. Professional Image						
5. Professional Conduct						

Comments:

<b>Evaluation Skills</b>	<b>Inadequate Information</b>	<b>Deficient</b>	<b>Below Expectation</b>	<b>Meets Expectation</b>	<b>Exceeds Expectation</b>	<b>Exceptional Skills</b>
1. Evaluation of Therapy						
2. Evaluation of Self						

Comments:

<b>Theory</b> <small>(Use Preferred Model)</small>	<b>Inadequate Information</b>	<b>Deficient</b>	<b>Below Expectation</b>	<b>Meets Expectation</b>	<b>Exceeds Expectation</b>	<b>Exceptional Skills</b>
Knowledge of Theory						
Utilizes Theory in Practice						
Recognizes Strengths and Weakness of Theory						

Comments:

©Thorana S. Nelson, PhD