Writing Student Evaluations
Jennifer Leib, LCSW-C
jleib@health.umd.edu
University of Maryland, College Park
Health Center, Mental Health Service
Evaluations: One More Thing to Do?

- Why evaluations are important
- Making them work for you
Making the Evaluation Process More Manageable

“We only hire people who are willing to take on more than they can handle.”
Things to Keep in Mind When Preparing to Write an Evaluation

- Evaluations are continual, not a static representation of one day or week
- Remember the learning contract?
- Examples, examples, examples!
Writing the Advanced Clinical Evaluation

- Differences between Fall & Spring semesters
- Importance of the narrative section
- Be specific
Writing the Advanced Clinical Evaluation

- Considerations
  - Caseload
  - Adjustment to the agency
  - Supervisors’ Meeting
  - Weekly Staff Meeting
  - Case Conference
  - Thirst for learning?
Using Supervision to Guide Your Evaluation

- Psychotherapy – teaching an art
- Parallel process of supervision
- Incremental feedback
What to Look for in Supervision to Create the Evaluation

- Arrive on time
- Appropriate attire (agency specific)
- Have an agenda – ownership of supervision
- Timely completion of paperwork
- Thoroughness of clinical notes
- Basic vs. advanced questions
- Boundaries – with supervisor & with clients
- Ability to contain personal issues
- Confidence level
- Willingness to take appropriate risks
- Understands & is able to use the DSM to diagnose
What to Look for in Supervision to Create the Evaluation, continued

- Awareness of cultural implications & differences
- Understands connections between theory & practice
- Open to feedback
- Ability to implement interventions taught in supervision
- Awareness of transference & counter-transference
- Ability to implement use of self in session
- Process vs. content (ability to sit with feelings)
- What it’s like to sit with them / Energy
- Parallel process of supervision
Involving Your Student in the Evaluation Process

- No surprises!
- Have your student write a list of their strengths & areas for work
- Reviewing the evaluation with your student
- Reference letters as a learning tool
Examples of Evaluations from an Advanced Clinical Placement
Examples: Positive Feedback

- P. is well liked by clinic staff, has made appropriate referrals for clients to see psychiatrists and has sought out staff to assist her with different parts of her learning process. P. demonstrates tremendous respect, warmth and care for all of her clients. She is aware of and maintains appropriate boundaries. P. has demonstrated keen awareness of non-verbal communication in her clients, has been willing to take appropriate risks despite trepidation, has a nice sense of humor and is open to feedback and desirous of improving her clinical skills.

- M. demonstrates respect for all of her clients and actively seeks to learn strategies that will assist with her clients’ self-awareness and healing. She is aware of and maintains appropriate boundaries. M. has worked hard to create a safe psychological space for her clients and is starting to see change in some of her cases.
Giving Constructive Feedback

- Sandwich theory
- Use of language
  - Areas for work
  - Opportunities for change
- Pick your battles
  - Too many areas that need change can feel overwhelming or defeatist to students
- Make sure your feedback is constructive
  - Acknowledge when you see incremental change towards the desired behavior
Examples: Areas for Work

- P. is working on understanding and using counter-transference. She is continuing to work on: expressing her voice in staff meetings / conferences and managing her anxiety and fears about her ability to make competent decisions while working with clients.

- S. is working on: simplifying and streamlining his clinical notes, allowing clients to take ownership of psychotherapy sessions, sitting with client’s feelings, becoming more comfortable with silence and managing his own anxiety about being a new clinician. He is making progress with completing paperwork in a timely manner and managing multiple cases per day.

- K. is continuing to work on: processing the ‘here and now’ with clients and in supervision, developing and using an increased sense of self-awareness and taking time between sessions to process her clinical experience with each client.
Differences Between Satisfactory & Exceptional Evaluations
Examples: Satisfactory Work

• C. has adjusted well to the University of Maryland, Mental Health Service. She is meeting expectations of a student at this stage of the learning process.

• G. is working on building up his caseload and is learning to manage having multiple clinical appointments in a day. He is co-facilitating a psycho-educational support group for students with anxiety. With each group session, he seems to be getting more comfortable with participating in sessions and making interventions.

• T. completes paperwork in a timely fashion and asks thoughtful questions about her cases. She attends weekly case conference meetings & at times participates in the discussion.
Examples: Exceptional Work

- L. continues to be a fantastic student and a pleasure to supervise. She continues to handle difficult situations with patience & professionalism. For example, L. recently faced a very complicated & delicate situation in which she witnessed a client get sent to the hospital via emergency petition. L. uses supervision effectively to process challenges & seek feedback. L. has taken risks in supervision through self-expression and subsequently is better able to take appropriate risks in her role as a therapist. L.’s sense of confidence as a clinician seems to be increasing.

- B. has developed an authentic and powerful use of self that has proven to promote transformative growth in her clients. She has become more aware of counter-transference and has used this insight to help her maintain solid boundaries with clients. B. has grown with respect to both the content and process of psychotherapy.
More Examples: Exceptional Work

- S. worked with challenging clients with current suicidal ideation and mania. It was reassuring to be able to trust her judgment. She has a clear sense of boundaries and is willing to seek consultation when needed. S. has developed an excellent use of self which has greatly benefited her clients. She is able to make insightful connections between clients’ histories and current functioning and is able to use the therapeutic relationship to provide clients with useful feedback.

- D. developed an advanced understanding of parallel process and clinical use of self. She willingly accepted feedback and was able to explore issues of counter-transference. D. is professional, attentive and a fast learner. She consistently demonstrated compassion and respect for her clients and often sought out additional resources to aid her clinical work.
Questions?