



DOCTORAL INTERNSHIP IN CLINICAL & COMMUNITY PSYCHOLOGY

Supervisor Evaluation of Psychology Fellow

(Revised 01-01-2025)

Fellow: _____ **Supervisor:** _____

Facility and Placement(s): _____

Instructions: Each fellow should have one evaluation form that covers the entire academic year. Update this form during each evaluation period (October, February, and June), building a comprehensive record of the fellow's progress. Please complete all evaluations electronically using this template.

Supervisors: For each evaluation period (October, February, and June):

- Section A: Insert the date the evaluation was completed.
- Section B: Indicate the methods used to assess competencies during the current evaluation period.
- Section C: Review the Competency Rating Scale.
- Section D: Provide a numerical rating **for each competency and each category** (*non-shaded boxes; category ratings do not have to be numerical means*). Insert "NA" for any competency or competency category that cannot be rated. Comments for each competency category are optional, but encouraged
- Section E: Include a comprehensive summary of the fellow's progress for each evaluation period. Please include in the narrative summary *specific behavioral descriptors* that highlight the fellow's demonstration of competencies.
- Once completed, type your name as your electronic signature and enter the current date. Meet with the fellow to jointly review the evaluation. The fellow can add optional comments before electronically signing and dating the form. After the review, the fellow will electronically forward the signed document to their Primary Adviser with a copy to you.
- Save the document as follows: [Fellow Last Name], Eval[Period]-, and [Year] (e.g., *AdamsEval1-2024*).

Fellows: For each evaluation period (October, February, and June):

- Review and discuss the completed evaluation with your supervisor.
- Add optional comments at the end of the form, type your name and the date to sign it, and electronically forward the document to your Primary Adviser with a copy to your supervisor.

Section A. Evaluation Period Completed with Fellow (Insert the date (##-##-####) for each of the following):

July – October _____ November-February _____ March - June _____

Section B. Methods used to Assess Competencies (Place an 'x' in the box for all that applied during this evaluation period):

Assessment Method	OCT	FEB	JUN	Assessment Method	OCT	FEB	JUN
Direct Observation				Review of 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):			

Section C: Competency Rating Scale

Rating	Expected Competency Level During Internship				5 Advanced Proficiency
	1 Beginning Proficiency	2 Basic Proficiency	3 Developing Proficiency	4 Readiness for Practice Proficiency	
Typical developmental level:	Early or mid-practicum	Internship entry	Internship mid-year	Internship exit level/postdoc entry	Postdoc/entry for advanced specialty practice
Skill level:	Learning basic skills	Has acquired basic skills	Developing more advanced skills	Flexibly integrating a range of skills	Flexibly integrating skills at an advanced level
Nature of weekly required supervision:	Supervisor sets agenda	Supervisor sets agenda with fellow input	Agenda set jointly by supervisor and fellow	Fellow largely sets agenda with supervisor input	Seeks consultation on an as needed basis
Direction required:	Very frequent and explicit	Frequent and explicit	Moderate and decreasing	Occasional	Infrequent
Structure required:	Very high	High	Moderate	Low	Very minimal

*Note. Ratings of N/A (not applicable/observed) are made if there are no supervisor ratings for that competency.

Section D. Competency Ratings

Category I: Communications and Interpersonal Skills.	Jul-Oct	Nov-Feb	Mar-Jun
A. Communicates effectively. <ol style="list-style-type: none"> 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. <ol style="list-style-type: none"> 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. <ol style="list-style-type: none"> Maintains appropriate boundaries (e.g., sharing of personal information, personal touch, dual relationships). Acknowledges and tolerates others' feelings and attitudes, including those expressed toward them. Allows and facilitates patients' exploration of emotionally laden issues. Maintains emotional equilibrium and judgment when faced with interpersonal conflict and patient distress. Recognizes and uses problem solving strategies to address interpersonal conflicts. Offers and accepts feedback constructively. 			
D. Demonstrates self-awareness as a professional. <ol style="list-style-type: none"> Identifies and monitors personal attitudes, values, beliefs, individual and cultural identities, and their typical role in groups. Recognizes how others experience them and the impact of self on others. Uses personal reactions to inform work with patients and other professionals. Adjusts professional behavior based on awareness of self and awareness of impact on others. 			
Overall Rating for this Competency Category (This rating integrates all supervisor numerical ratings.)			
Comments on Communications and Interpersonal Skills Competency (<i>Optional</i>). Comments should Integrate supervisors' feedback for this competency):			

Category II: Individual and Cultural Diversity.	Jul-Oct	Nov-Feb	Mar-Jun
A. Demonstrates awareness of diversity and its influence. <ol style="list-style-type: none"> Identifies the various dimensions of individual and cultural diversity (e.g., age, race, ethnicity, national origin, language, socioeconomic status, gender, gender identity, sexual orientation, religion, spiritual beliefs, physical and mental ability). Recognizes and appreciates complexities inherent to individual and cultural diversity (e.g., intersectionality). Recognizes the potential influence of individual and cultural diversity on others and on the interactions between individuals, groups and systems of care. Explores and monitors how s/he or they are influenced by individual and cultural characteristics and experiences. 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. <ol style="list-style-type: none"> Recognizes and respects differences between self and others. Communicates in patient's preferred language or uses interpreter services as needed. Explores with patients their individual and cultural identities and the 			

<p>meaning of these identifications to them.</p> <p>4. Recognizes and responds appropriately to the impact of individual and cultural diversity in clinical, consultative, and supervisory relationships.</p>			
<p>C. Applies knowledge of individual and cultural diversity in practice.</p> <p>1. Selects assessment instruments, uses assessment tools, and interprets findings within the context of patients' linguistic and cultural characteristics and identities.</p> <p>2. Considers individual and cultural characteristics and identities in developing treatment plans and selecting, modifying, implementing, and monitoring interventions.</p> <p>3. Is aware of and integrates knowledge of individual and cultural diversity across aspects of professional role (intervention, assessment, consultation, research, leadership, etc.).</p> <p>4. Connects patients to culturally responsive services and resources.</p> <p>5. Recognizes, brings attention to, and/or addresses disparities in access to services or other forms of discrimination.</p>			
<p>D. Pursues professional development about individual and cultural diversity.</p> <p>1. Recognizes the limitations in their abilities to work with individuals from diverse backgrounds.</p> <p>2. Reviews and applies relevant literature and practice guidelines on providing services to diverse populations.</p> <p>3. Seeks supervision to enhance their abilities to work with individuals from diverse backgrounds.</p> <p>4. Pursues continuing education and multicultural experiences to enhance their abilities to work with individuals from diverse backgrounds.</p>			
<p>Overall Rating for this Competency Category (This rating integrates all supervisor numerical ratings.)</p>			
<p>Comments on Individual and Cultural Diversity Competency (<i>Optional</i>. Comments should integrate supervisors' feedback for this competency):</p>			

Category III: Professional Values, Attitudes, and Behavior.	Jul-Oct	Nov-Feb	Mar-Jun
<p>A. Displays professional behavior.</p> <p>1. Maintains appropriate personal hygiene and professional attire.</p> <p>2. Utilizes appropriate language and non-verbal communications, including in difficult interactions.</p> <p>3. Demonstrates sound judgement in their responses to routine, complex and/or challenging situations.</p> <p>4. Responds professionally in increasingly complex situations with a level of independence that matches their professional role.</p> <p>5. Clarifies expectations and engages in behavior appropriate for their professional role and adjusts behavior to the setting and situation.</p>			
<p>B. Engages in self-assessment and self-reflection.</p> <p>1. Uses multiple methods to routinely assess professional strengths and areas for growth (e.g., supervision, peer supervision/consultation, audio/video recordings, patient feedback).</p> <p>2. Is open, receptive and responsive to feedback around performance and professional functions.</p>			

<ul style="list-style-type: none"> 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. 			
<p>C. Demonstrates accountability.</p> <ul style="list-style-type: none"> 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. 			
<p>D. Demonstrates professional identity.</p> <ul style="list-style-type: none"> 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 goals. 4. Demonstrates emerging leadership skills. 			
<p>E. Engages in the self-care essential for functioning effectively as a psychologist.</p> <ul style="list-style-type: none"> 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 to minimize their impact on professional performance. 			
<p>Overall Rating for this Competency Category (This rating integrates all supervisor numerical ratings.)</p>			
<p>Comments on Professional Values, Attitudes, and Behavior Competency (<i>Optional</i>. Comments should Integrate supervisors' feedback for this competency):</p>			

Category IV: Ethical and Legal Standards.	Jul-Oct	Nov-Feb	Mar-Jun
<p>A. Demonstrates awareness of ethical and legal standards applicable to Health Service Psychology practice, training, and research.</p> <ul style="list-style-type: none"> 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. 			
<p>B. Recognizes and manages ethical and legal issues in Health Service Psychology practice, training, and research.</p> <ul style="list-style-type: none"> 1. Adheres to all ethical and legal standards in all professional activities. 			

<ol style="list-style-type: none"> 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. 			
<p>C. Adheres to the APA Ethical Principles and Code of Conduct.</p> <ol style="list-style-type: none"> 1. Strives to benefit others and do no harm. 2. Develops relationships of trust with others and accepts responsibility for their behavior. 3. Maintains personal integrity. 4. Promotes fairness and justice. 5. Respects the dignity, worth, and rights of all people. 			
<p>Overall Rating for this Competency Category (This rating integrates all supervisor numerical ratings.)</p>			
<p>Comments on Ethical and Legal Standards Competency (<i>Optional</i>. Comments should integrate supervisors' feedback for this competency):</p>			

Category V: Assessment.	Jul-Oct	Nov-Feb	Mar-Jun
<p>A. Conducts clinical interviews.</p> <ol style="list-style-type: none"> 1. Quickly establishes rapport with individuals being interviewed. 2. Formulates relevant and culturally responsive interview questions. 3. Conducts semi-structured interviews. 			
<p>B. Appropriately selects and applies evidence-based assessment methods.</p> <ol style="list-style-type: none"> 1. Screens referrals and identifies clear goals for assessments. 2. Selects psychometrically sound 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 Scores and interprets results. 			
<p>C. Collects and integrates data.</p> <ol style="list-style-type: none"> 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. 			

<p>D. Summarizes and reports data.</p> <ol style="list-style-type: none"> 1. Writes clear, accurate and timely integrated reports. 2. Communicates findings and recommendations clearly to patients and other providers. 3. Recognizes and reports the strengths and limitations of assessments and findings. 			
<p>Overall Rating for this Competency Category (This rating integrates all supervisor numerical ratings.)</p>			
<p>Comments on Assessment Competency (<i>Optional</i>. Comments should Integrate supervisors' feedback for this competency):</p>			

Category VI: Intervention.	Jul-Oct	Nov-Feb	Mar-Jun
<p>A. Formulates case conceptualizations and treatment plans.</p> <ol style="list-style-type: none"> 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. 			
<p>B. Implements evidence-based interventions.</p> <ol style="list-style-type: none"> 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. 			
<p>C. Monitors the impact of interventions.</p> <ol style="list-style-type: none"> 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. 			
<p>Overall Rating for this Competency Category (This rating integrates all supervisor numerical ratings.)</p>			
<p>Comments on Intervention Competency (<i>Optional</i>. Comments should Integrate supervisors' feedback for this competency):</p>			

Category VII: Consultation and Interprofessional/ Interdisciplinary and Systems-Based Practice.	Jul-Oct	Nov-Feb	Mar-Jun
<p>A. Provides consultation (e.g. case-based, group, organizational systems).</p> <ol style="list-style-type: none"> 1. Forms effective consultative relationships. 2. Clarifies and refines referral questions and consultation goals. 			

<ol style="list-style-type: none"> 3. Develops and implements a consultation plan, recognizing the individual, group, organizational, and systems issues that may impact it. 4. Communicates consultation results and recommendations. 			
<p>B. Engages in interprofessional/interdisciplinary collaboration.</p> <ol style="list-style-type: none"> 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. 			
<p>C. Engages in systems-based practice.</p> <ol style="list-style-type: none"> 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. 			
<p>Overall Rating for this Competency Category (This rating integrates all supervisor numerical ratings.)</p>			
<p>Comments on Consultation and Interprofessional/ Interdisciplinary and Systems-Based Practice (<i>Optional</i>). Comments should integrate supervisors' feedback for this competency):</p>			

Category VIII: Supervision.	Jul-Oct	Nov-Feb	Mar-Jun
<p>A. Seeks and uses supervision effectively.</p> <ol style="list-style-type: none"> 1. Establishes strong working relationships with supervisors of diverse practice orientations. 2. 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. 			
<p>B. Uses supervisory feedback to improve performance.</p> <ol style="list-style-type: none"> 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. 			

<p>C. Facilitates peer supervision/consultation.</p> <ol style="list-style-type: none"> 1. Leads peer supervision/consultation groups. 2. Structures the groups using an explicit method to guide discussions by peers of their work. 3. Maintains a constructive and supportive environment within the groups. 4. Gives constructive and supportive feedback to peers. 			
<p>D. Provides individual supervision (if applicable).</p> <ol style="list-style-type: none"> 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. 			
<p>Overall Rating for this Competency Category (This rating integrates all supervisor numerical ratings.)</p>			
<p>Comments on Supervision Competency (<i>Optional</i>. Comments should Integrate supervisors' feedback for this competency):</p>			

Category IX: Research & Scholarship.	Jul-Oct	Nov-Feb	Mar-Jun
<p>A. Displays critical scientific thinking.</p> <ol style="list-style-type: none"> 1. 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. 			
<p>B. Uses the scientific literature.</p> <ol style="list-style-type: none"> 1. 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). 			
<p>C. Implements scientific methods.</p>			

Fellow's Comments (Optional):

Supervisor's Signature

Date

Fellow's Signature

Date

(Signatures indicate that the supervisor and fellow have discussed this evaluation)

JUNE EVALUATION

Supervisor's Overall Assessment of Progress (Place an 'x' in one box).

<input type="checkbox"/>
<input type="checkbox"/>

The fellow has made adequate progress in developing the core competencies that I am assessing.

The fellow has **not** made adequate progress in developing the core competencies that I am assessing.

Supervisor's Integrative Summary of Fellow Progress:

[insert text here...]

Fellow's Comments (Optional):

Supervisor's Signature

Date

Fellow's Signature

Date

(Signatures indicate that the supervisor and fellow have discussed this evaluation)