



Evaluation of PsyD Practicum Student Progress*

How to Use This Form

1. The primary purpose of this evaluation form is to provide formal feedback to students about their performance at the *midpoint* and *end* of the practicum.
2. The qualitative comments provided by the supervisor are essential in providing more specific feedback about areas of strength and areas for development that may be more challenging for the student. It is important that *both* areas of strength and areas for development be addressed.
3. This evaluation is also important in identifying areas of concern and remediating those areas in a timely fashion.
4. The evaluation is also used to determine whether a student is ready for residency and is helpful to the program in preparing recommendation letters for residency applications. Therefore, we encourage practicum supervisors to include comments and specific examples.
5. Evaluations should be completed and reviewed with the student and then signed by the student, the supervisor(s), and the Practicum Course Instructor. **NOTE:** Students must provide copies of all practicum documents, including this completed evaluation form, to the MUN PsyD Secretary.
6. Unless designated as a **mandatory** section, please omit sections that are not relevant to your work with the student by indicating that the section is N/A.
7. The student is required to submit the completed evaluation form to the MUN PsyD Secretary for the student's file. The PsyD secretary will then send a copy of the evaluation to the practicum supervisor and the Practicum Course Instructor.

Student: _____ Date: _____

Supervisor(s): _____ Semester: _____

Practicum Site: _____

Practicum Course Instructor: _____

Time point: Midpoint _____ or End _____

ASSESSMENTS:

Types of referral questions:

Types of assessment instruments used/learned:

Number of assessments completed:

Number of integrated reports¹ completed:

INTERVENTION:

Types of presenting problems:

Types of intervention (e.g., group, individual) and therapy modality (e.g., CBT, psychodynamic, etc.) used/learned:

Number of clients seen: Individual _____ Couples _____ Group _____

Number of Direct Client Hours: Midpoint _____ End _____

CONSULTATION:

Number of consultations provided: _____

Types of consultation (e.g., team conference, school staff, nursing home staff, etc.):

Student's Signature

Supervisor's Signature

Date

Date

¹ According to APPIC, an integrated report includes a review of history, results of an interview and the findings of at least two psychological tests.

COMPETENCY-BASED EVALUATION

This evaluation form is based on a competency-based approach. **Competence** refers to 1) knowledge, 2) skills, 3) judgment, and 4) diligence in an area.

Knowledge involves having absorbed and understood a body of information sufficient to understand and conceptualize the range of professional issues we can reasonably expect to encounter.

Skill is the ability to effectively apply knowledge in actual practice.

Judgment involves knowing when to apply which skills under what circumstances. It also involves self-reflection regarding how our own values, attitudes, experiences and social context influence our actions, interpretations, choices and recommendations. Judgment is much harder to assess and is usually indirectly addressed during supervised experience.

Diligence involves consistently attending to our knowledge, skills and judgment and being careful to give priority to our clients' needs over any other concerns. Diligence involves a willingness to work hard to provide the best service for every client, and in honestly evaluating our own skills and seeking training when appropriate.

*College of Alberta Psychologists document *Definitions: Foundational Knowledge and Core Competencies*, pages 2- 3.
[http://www.cap.ab.ca/Portals/0/pdfs/Definitions%20Knowledge%20Competencies%20\(March%2019.%202016\).pdf](http://www.cap.ab.ca/Portals/0/pdfs/Definitions%20Knowledge%20Competencies%20(March%2019.%202016).pdf)

Explanation of Rating Scale

Competency Level	NA	1	2	3	4	5
	Not assessed/ not applicable	Basic competency not present	Possesses basic competency in foundational or functional area; still needs extensive supervision & consultation	Developing competencies in foundational or functional area appropriate to year in program; substantial supervision required	Competent to take substantial responsibility for carrying out major, professional functions, tasks, duties/roles under minimal supervision & consultation	Practices professional psychology at advanced level of competency in substantive areas of practice; supervision or consultation only as needed
<p><u>Years 1 and 2</u></p> <p>Standards for junior students, students with limited experience, or students practicing in a new area</p>		*Start of program level; at mid-year evaluation, indicates unsatisfactory progress, requires remediation	Expected skill level at mid-year evaluation	Expected end-of-year level of competence	Competent beyond minimum expectations	Competency greatly exceeds expectations
<p><u>Year 3+</u></p> <p>Standards to evaluate student readiness for internship: Minimal Requirements for Internship Eligibility</p>		*Deficiencies unlikely to be remedied during program	*Start of program level; at mid-year evaluation, indicates unsatisfactory progress, requires remediation	Expected program skill level at mid-year review	Expected end-of-program level of competence; meets minimal pre-internship requirements	Unusually advanced; comparable to graduated or independent practitioner skill level

***Unacceptable Progress** - A rating of 1 in Years 1 or 2 or a rating of 1 or 2 in Year 3 indicates that the student is seen as not meeting expectations in a specific area(s) of the practicum. Supervisor(s) and Practicum Course Instructors need to communicate with the PsyD Director of Clinical Training to determine required actions. Overall failure of a practicum would likely result from egregious violations of NLPB Standards of Professional Conduct, CPA Code of Ethics, or institutional policies OR failure to adequately complete a Remediation Plan OR significant issues around clinical or professional competence.)

ASSESSMENT – use comments to expand on strengths and areas for development

	1	2	3	4	5	N/A	Comments
1. Knowledge of assessments (knows various appropriate tests, psychometric issues).							
2. Pre-assessment skills (preparation, negotiating referral question, information review, measure selection)							
3. Skill in conducting assessment (interview, engages client, manages test behaviour, administration and scoring).							
4. Assessment interpretation skills (integrates relevant info)							
5. Report writing skills (addresses referral question; completed in timely manner; coherent conceptualization with meaningful recommendations)							
6. Feedback skills (shares findings with client in a clear, helpful, and timely manner; maintains rapport).							
7. Overall rating of student’s knowledge, skills, judgment and diligence in assessment.							

Comments and examples: *(required for any ratings of 1 or 2):*

DIAGNOSIS - use comments to expand on strengths and areas for development

	1	2	3	4	5	N/A	Comments
1. Knowledge of DSM-5 or other relevant diagnostic systems. Recognizes strengths/limitations of diagnostic approaches							
2. Skills in identifying relevant diagnoses, and in differential diagnosis.							
3. Skills in implementing planned interventions (explains intervention to client; relevant to client goals)							
4. Skills in developing and maintaining therapeutic alliance (may include managing ruptures to relationship; negotiating termination)							
5. Overall rating of student's knowledge, skills, judgment and diligence in diagnosis.							

Comments and examples: *(required for any ratings of 1 or 2):*

INTERVENTION – INDIVIDUAL - use comments to expand on strengths and areas for development

	1	2	3	4	5	N/A	Comments
1. Knowledge in intervention (understands range of presenting issues; aware of variety of interventions and frameworks relevant to placement)							
2. Case conceptualization skills (recognizes relevant issues; adapts conceptualization during therapy)							
3. Skills in implementing planned interventions (explains intervention to client; relevant to client goals)							
4. Skills in developing and maintaining therapeutic alliance (may include managing ruptures to relationship; negotiating termination)							
5. Overall rating of student’s knowledge, skills, judgment and diligence in individual intervention.							

Comments and examples: *(required for any ratings of 1 or 2):*

INTERVENTION SKILLS – COUPLE OR FAMILY - use comments to expand on strengths and areas for development

	1	2	3	4	5	N/A	Comments
1. Knowledge in intervention (understands range of presenting issues; aware of variety of interventions and frameworks relevant to couples/families)							
2. Case conceptualization skills (recognizes relevant issues; adapts conceptualization during therapy; able to move from individual to couple/family framework)							
3. Skill in implementing interventions (explains intervention to clients; relevant to clients' goals)							
4. Skill in developing and maintaining therapeutic alliance (may include managing ruptures to relationship; managing couple/family dynamics; negotiating termination)							
5. Overall rating of student's knowledge, skills, judgment and diligence in family/couple intervention.							

Comments and examples: *(required for any ratings of 1 or 2):*

INTERVENTION SKILLS – GROUP - use comments to expand on strengths and areas for development

	1	2	3	4	5	N/A	Comments
1. Knowledge in intervention (understands range of presenting issues; aware of variety of interventions and frameworks relevant to groups)							
2. Case conceptualization skills (recognizes relevant issues; adapts conceptualization during therapy; able to move from individual to group framework)							
3. Skill in implementing interventions (explains intervention to clients; relevant to clients' goals).							
4. Skill in developing and maintaining therapeutic alliance (may include managing ruptures to relationship; managing group dynamics; negotiating termination)							
5. Overall rating of student's knowledge, skills, judgment and diligence in group intervention.							

Comments and examples: *(required for any ratings of 1 or 2):*

INTERDISCIPLINARY SKILLS – COLLABORATION AND CONSULTATION

	1	2	3	4	N/A	N/Y	Comments
1. Knowledge of role of psychology in consultation and working in collaborative fashion (e.g., interdisciplinary team work)							
2. Consultation skills (clarifies consult question; case conceptualization useful for referral source; offers pragmatic recommendations)							
3. Team work skills (contributes to team assessments; coordinated intervention approach; offers understandable psychology perspective and suggestions)							
4. Knowledge of other disciplines' contributions and respect for their unique perspectives.							
5. Assertive while remaining sensitive to the feelings of others.							
6. Overall rating of student's knowledge, skills, judgment and diligence in interdisciplinary team skills – collaboration and consultation.							

Comments and examples: *(required for any ratings of 1 or 2):*

MANDATORY AWARENESS AND APPLICATION OF ETHICS AND STANDARDS OF PSYCHOLOGY

	1	2	3	4	5	N/A	Comments
1. Understanding and appreciation of respect for the dignity of persons (CPA Ethical Principle I).							
2. Understanding and appreciation of responsible caring (CPA Ethical Principle II).							
3. Understanding and appreciation of integrity in relationships (CPA Ethical Principle III).							
4. Understanding and appreciation of responsibility to society (CPA Ethical Principle IV).							
5. Demonstrates knowledge and ability to apply relevant legislation and NLPB Standards of Professional Conduct.							
6. Awareness of ethical issues and is proactive when appropriate.							
7. Addresses conflict between legal and ethical standards of practice (NLPB Standards or CPA principles).							

Comments and examples: *(required for any ratings of 1 or 2):*

*Adapted for MUN PsyD Program from Edmonton Consortium Residency Evaluation Form and University of Saskatchewan Practicum Evaluation Form
 August 2022

MANDATORY - AWARENESS AND KNOWLEDGE OF ISSUES OF INDIVIDUAL DIFFERENCES AND DIVERSITY

	1	2	3	4	5	N/A	Comments
1. Knowledge around client experiences related to diversity (e.g., culture, religion, gender, gender identity, ethnicity, sexual orientation, SES, rural-urban, ability, etc.).							
2. Knowledge around limitations when working with clients from historically marginalized populations (e.g., barriers to service).							
3. Identifies, addresses and learns from diversity issues (solicits information from client regarding individual differences/ diversity; seeks out knowledge through readings, and continued education).							
4. Sensitivity to and understanding of own individual and diversity differences relative to the client and how these similarities and differences may affect the relationship.							

Comments and examples: *(required for any ratings of 1 or 2):*

*Adapted for MUN PsyD Program from Edmonton Consortium Residency Evaluation Form and University of Saskatchewan Practicum Evaluation Form August 2022

MANDATORY - CONSUMER AND IMPLEMENTOR OF RESEARCH WITHIN HEALTH CARE TO SUPPORT EVIDENCE-BASED PRACTICE

	1	2	3	4	5	N/A	Comments
1. Finds and uses research to guide clinical practice.							
2. Understands and demonstrates scientific perspectives and analytic skills in work.							
3. Appreciates importance of program evaluation and outcome measurement.							
4. Overall rating of student's integration of clinical practice and research.							

Comments and examples: *(required for any ratings of 1 or 2):*

ADDITIONAL COMMENTS AND EXAMPLES