Appendix A
Professional Performance Fitness Evaluation (PPFE1)

Student:_________________________________________ Semester/Year____________________________________
Faculty members:_________________________________ Date:________________________

Note: A score of 0 or 1 in any category will enter that student into a process of review and re-review of fitness to practice.
*Reassessment will be conducted by a faculty committee comprised of 3 or more faculty members to assess fitness to practice.

*Modified from SWT Counseling Program PCPE Form (2000)
Professional Performance Fitness Evaluation: PPFE2

Student: __________________________ Semester/Year __________________________
Faculty member: __________________ Date: __________

N = Insufficient opportunity to observe.
0 = Still does not meet criteria for program level in this domain.
1 = Now meets criteria marginally and/or inconsistently for program level.
2 = Now meets criteria for program level adequately.
3 = Exceeds criteria for program level.

Competence: N 0 1 2 3 *(If rated “0 or 1” in this category, each of the following attributes must be reassessed)*:
N 0 1 2 3 Demonstrates cognitive and sensory capacities needed to effectively and professionally interact with clients, students, & faculty.
N 0 1 2 3 Demonstrates interpersonal skills*** necessary to effectively and professionally interact with clients, students, faculty, and staff:
N 0 1 2 3 Demonstrates interpersonal skills*** necessary to enhance professional relationships with peers, faculty and staff:

*(**examples of such interpersonal skills include, but are not limited to, mood control, appropriate boundaries, & clear communication skills)*

Interpersonal Fitness: N 0 1 2 3 *(If rated “0 or 1” in this category, each of the following attributes must be assessed)*:
N 0 1 2 3 Exhibits interpersonal fitness necessary to provide effective counseling interventions with clients or work with other students.
N 0 1 2 3 Exhibits interpersonal characteristics that enhance her or his ability to work with clients and professionally interact with others.

Integrity: N 0 1 2 3 *(If rated “0 or 1” in this category, each of the following attributes must be assessed)*:
N 0 1 2 3 Refrains from making statements that are false, misleading or deceptive:
N 0 1 2 3 Avoids improper and potentially harmful dual relationships:
N 0 1 2 3 Respects the fundamental rights, dignity and worth of all people:
N 0 1 2 3 Respects cultural, individual, and role differences, including but not limited to those due to age, gender, race, ethnicity,
national origin, religion, sexual orientation, disability, language, and socioeconomic status:

Maturity: N 0 1 2 3 *(If rated “0 or 1” in this category, each of the following attributes must be assessed)*:
N 0 1 2 3 Demonstrates appropriate self-control (e.g., anger control, impulse control) in interactions with faculty, peer, staff, and clients.
N 0 1 2 3 Demonstrates the ability to receive and use feedback from peers, faculty, staff, & supervisors to enhance skills or performance.
N 0 1 2 3 Exhibits appropriate levels of self-assurance, confidence, and trust in her or his own abilities.
N 0 1 2 3 Exhibits awareness of own belief systems, values, needs and limitations and of the potential effects of these on her or his work.
N 0 1 2 3 Follows professionally recognized problem solving processes, such as seeking to informally solve problems first with the
individual(s) with whom problems may exist before using appropriate grievance procedures if necessary.

Professional Responsibility/Fitness (summative assessment): N 0 1 2 3
Conducts her or himself in an ethical manner that promotes confidence in the counseling profession, and relates to clients, peers, staff, professors and others in a manner consistent with recognized professional standards.

Faculty Recommendations/Notes:

Student Response:

*Modified from SWT Counseling Program PCPE Form (2000)*
Counseling Skills and Abilities:

Demonstrates the ability to establish relationships in which a therapeutic working alliance can be established: N 0 1 2 3

Demonstrates therapeutic communication skills with clients including:

- Creating appropriate structure: Setting the boundaries of the helping frame and maintaining boundaries throughout the work such as setting parameters for meeting time and place, maintaining time limits, etc. N 0 1 2 3
- Understanding content: Understanding the primary elements of the client’s story. N 0 1 2 3
- Understanding context: Understanding the uniqueness of the story elements and their underlying meanings. N 0 1 2 3
- Responding to feelings: Identifying and addressing feelings therapeutically. N 0 1 2 3
- Congruence: Genuineness, external behavior consistent with internal affect. N 0 1 2 3
- Establishing and communicating empathy: Taking the perspective of the client without over identifying, and communicating this experience to the client. N 0 1 2 3
- Non-verbal communication: Effective use of head, eyes, hands, feet, posture, voice, attire, etc. N 0 1 2 3
- Immediacy: Staying in the here-and-now. N 0 1 2 3
- Timing: Responding at the optimal moment. N 0 1 2 3
- Intentionality: Responding with a clear understanding of therapeutic intention. N 0 1 2 3
- Self-disclosure: Skillful and carefully-considered for a specific therapeutic purpose. N 0 1 2 3

Demonstrates awareness of power differences in the therapeutic relationship and manages these differences therapeutically. N 0 1 2 3

Collaborates with the client to establish clear therapeutic goals. N 0 1 2 3

Facilitates movement toward client goals or facilitates effective discussion in the classroom. N 0 1 2 3

Demonstrates the capacity to match appropriate interventions to the presenting clinical profile in a theoretically consistent manner. N 0 1 2 3

Creates a safe clinical/classroom environment. N 0 1 2 3

Demonstrates analysis and resolution of ethical dilemmas. N 0 1 2 3

Recommendations/Notes: (any actions required, need for follow-up evaluation, student comments)

“I have been provided the opportunity to review this evaluation” Student Signature: ____________________________ Date: __________

Faculty present: _________________________

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