

## Behavioral Health Support Specialist Summative Assessment Example for Practicum Option 1

**Description:** This is a template for a site supervisor evaluation of a BHSS practicum student. The form allows for both quantitative and qualitative feedback to help the student understand the meaning of the scores in a particular meta-competency. The UW BHSS Clinical Training Program recommends that this work be a shared effort between program faculty and site supervisors when a program assesses certain competencies through classroom or lab-based methods during the practicum experience. Additionally, it may be a helpful practice to encourage students to complete a self-assessment for the purpose of discussion with a site supervisor and program faculty. The evaluation may be a guide for completing mid-term formative assessments.

Scores of 0 or 1 should be accompanied by a competency development plan (also called remediation plan or corrective action plan) and additional time to demonstrate satisfactory scores. If any meta-competency area is scored as not observed, the bachelor’s program needs to identify a means of assessing the competency area.

**Instructions:** Circle the competency or competencies being evaluated in practicum. Write or type in the score column using the following scale: 1=Does not meet expectations; 2=Beginning to demonstrate competency; 3=Developing competency; 4=Proficient for bachelor level; NO=Not Observed. Write any comments including examples of observations in the clinical setting.

1. Health Equity			
#	<i>Competency</i>	<i>Skills and/or Attitudes</i>	<i>Score</i>
a.	Recognize impact of health disparities on patient engagement	Incorporates a patient’s social determinants of health into brief interventions for common mental and behavioral health conditions when appropriate.	
b.	Practice use of inclusive communication that supports healthcare equity.	Demonstrates ability to accommodate accessibility needs of a patient in healthcare and behavioral healthcare settings.	
		Utilizes appropriate and respectful terms to identify patients and patient populations.	
		Self corrects when errors are made in use of respectful terminology to reference patients and patient populations.	
Comments:			

2. Helping Relationships			
#	Competency	Skills and/or Attitudes	Score
a.	Develop supportive and effective working alliance with patients and their support networks.	Demonstrates attending skills	
		Uses supportive listening skills	
		Builds working alliance	
		Demonstration of positive regard for patients	
b.	Engage patients to enhance participation in care.	Demonstrates patience with persons in early stage of change.	
c.	Facilitate group psychoeducation.	Demonstrate skills in building group cohesion.	
		Use group techniques to guide interaction of members.	
		Support personal safety of each group member.	
d.	Utilize strategies from trauma informed care.	Apply principles of trauma informed care to all aspects of the helping relationship.	
Comments:			

3. Cultural Responsiveness			
#	Competency	Skills and/or Attitudes	Score
a.	Demonstrate openness and interest in all aspects of cultural identity prioritized by the patient.	Demonstrate commitment to minimize the impact of own cultural worldviews on interactions with patients and care delivery through regular self-reflection and use of supervision.	
b.	Develop knowledge of a patient's cultural identities and provide services responsive to this identity.	Assess aspects of a patient's cultural background and identities that are most important to them.	
		Appreciate how a patient's cultural identity(ies) might serve as a source of strength, support, or resilience.	

c.	Identify culturally congruent goals and activities respectful of family, spiritual, and cultural traditions.	Collaborate with patients to assess and incorporate cultural healing methods they practice into interventions, as relevant.	
d.	Practice cultural humility in helping relationships.	Show willingness to repair helper relationship when needed.	
Comments:			

4. Team Based Care and Collaboration			
#	Competency	Skills and/or Attitudes	Score
a.	Integrate professional identity and scope of practice within a healthcare team.	Display confidence in explaining BHSS role to team members.	
b.	Practice interprofessional communication.	Value brief, clear, concise, and timely communication between team members.	
c.	Contribute to teams and teamwork.	Demonstrate flexibility and adaptability when working with a team.	
Comments:			

5. Screening and Assessment			
#	Competency	Skills and/or Attitudes	Score
a.	Utilize appropriate standardized screening tools to identify common behavioral health conditions.	Administer evidence-based screening tools, utilizing aids to improve accessibility as appropriate.	
b.	Conduct a suicide risk assessment and provide appropriate intervention under supervision.	Administer a standardized screening tool such as the CSSR-S.	
		Identify level of suicide risk with supervisor or consultant.	
		Design a collaborative safety plan with a patient.	
c.	Conduct a patient-centered biopsychosocial assessment	Gather information supporting a biopsychosocial assessment using a common template or framework in healthcare	

		Value the BHSS role in assisting the healthcare team to complete a holistic assessment of patient symptoms.	
d.	Use measurement-based care to support stepped care approaches and adjust the type and intensity of services to the needs of the patient.	Review patient progress on behavioral health measures in regular supervision and response to interventions.	
Comments:			

6. Care Planning and Care Coordination			
#	Competency	Skills and/or Attitudes	Score
a.	Contribute to the development of a whole health care plan and Stay Well plan with the patient, the patient's support network, and healthcare team members.	Co-develop and support the whole health care plan and/or Stay Well Plans with patients.	
b.	Maintain a registry to systematically track patient treatment response to interventions.	Use registry data to identify and prioritize patients to discuss as part of supervision, team meetings, or case review sessions.	
c.	Ensure the flow and exchange of information among patients, patients' support networks, and linked providers.	Practice information sharing within team context based on information relevant to patient behavioral healthcare.	
		Demonstrate confidence in setting limits based on privacy and confidentiality policies, rules, and laws.	
d.	Facilitate referrals to social and community-based services outside of the clinic (housing assistance, food banks, vocational rehabilitation, substance use disorder treatment, etc.).	Document, track, and follow up with patients regarding referrals.	

e.	Demonstrate accurate documentation of services provided and summaries of contact with linked providers in the patient record.	Document patient healthcare records in a way that respects individual requests as well as standard confidentiality guidelines	
f.	Recognize the interaction between behavioral health conditions, chronic physical health conditions, and associated symptoms.	Provide psychoeducation about how actions individuals take can affect their health, both positively and negatively.	
Comments:			

7. Interventions			
#	Competency	Skills and/or Attitudes	Score
a.	Use motivational enhancement strategies to engage patients and foster shared decision making with patients, their support network, and the care team.	Elicit patient preferences regarding treatment and self-management options.	
b.	Provide psychoeducation to patients and their support network about behavioral health conditions and treatment options consistent with recommendations from the healthcare team.	Utilize psychoeducation to provide skills training for self-management of BH conditions.	
c.	Apply distress tolerance, problem solving, and relaxation techniques to reduce impact of acute stress.	Apply systematic approaches using education, modeling, and teach back methods.	
d.	Apply brief treatment strategies for mild-to moderate depression, based	Apply compilation of rewarding activities, activity scheduling, and homework review.	

	on cognitive behavioral principles and BA.		
e.	Apply brief treatment strategies for mild-to moderate anxiety, based on cognitive behavioral principles and BA.	Apply comprehensive CBT-A with patients.	
f.	Utilize a screening, brief intervention, and referral (SBIRT) approach appropriate to patient alcohol or substance use problems.	Integrate principles of harm reduction into the Brief Negotiated Interview.	
g.	Demonstrate a clear understanding of brief treatment and differentiate from long term psychotherapy.	Assess patient progress to identify barriers to improvement, problem solve options with patient and revise care planning, including stepping up to high-intensity interventions when needed.	
Comments:			
Legal, Ethical and Professional			
#	Competency	Skills and/or Attitudes	Score
a.	Identify and apply federal and state laws to practice.	Appreciate relationship between law and professional behavior.	
b.	Integrate foundations of interprofessional ethics into practice.	Apply ethical principles in day-to-day care delivery and resolve dilemmas using an ethical decision-making model.	
c.	Utilize supervision and consultation to guide practice.	Appreciate role of supervisor overseeing BHSS practice.	
d.	Engage in continuous reflective practice in all professional helping relationships.	Value ongoing personal development through mindful reflection on self in relationship to others.	
Comments:			

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Competency Development Plan		
#	Competency	Skills or Attitudes to Demonstrate
Comments:		