**Appendix 12**

**CHEROKEE HEALTH SYSTEMS**

**CLINICAL PSYCHOLOGY INTERNSHIP**

**Intern Self-Assessment**

Intern Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Term \_\_\_ Initial \_\_\_ Mid-year \_\_\_ Final

The purpose of this assessment is to provide a frame of reference for developing and monitoring learning goals for your professional training. It is important to have an accurate assessment of your skill level.

This assessment will be read by your mentor and the Training Director and will be discussed with the training staff at Cherokee. It will assist in the planning of your individual goals throughout the training year. In looking at the assessment from each intern, the staff will also be able to determine some necessary program emphases for your intern group.

Instructions: Read each item. Think about your experience and training as well as the degree of your success in using that skill or model. For ratings, mark the number rating that most accurately describes your current level of skill development.

5 = Special strength - You believe you not only possess this skill, but that you could teach it to others, or serve as a model for others to emulate.

4 = Satisfactory strength - you can use this skill effectively.

3 = Developing - You are well on the way to acquiring satisfactory command of this skill, but not yet ready to use it with full confidence.

2 = Aware - You have an introductory knowledge of this skill, but are not proficient in it or ready to take on a responsibility that requires its use.

1 = Unfamiliar and interested - You are starting from scratch and have virtually no proficiency in this skill area, but have a real interest in learning it.

0 = Unfamiliar and uninterested - You are starting from scratch and have no proficiency in this skill area and have no real interest in learning it this year.

1. Rate your knowledge and skill in application of theory and research to clinical practice

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 0 | 1 | 2 | 3 | 4 | 5 |

2. Assessment, Diagnostic and Conceptual Skills

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 0 | 1 | 2 | 3 | 4 | 5 |

3. Intervention and Treatment Planning

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 0 | 1 | 2 | 3 | 4 | 5 |

4. Documentation and Case Management

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 0 | 1 | 2 | 3 | 4 | 5 |

5. Professional Consultation and Collaboration

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 0 | 1 | 2 | 3 | 4 | 5 |

6. Sensitivity to Individual and Cultural Diversity in Professional Work

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 0 | 1 | 2 | 3 | 4 | 5 |

7. Ethical standards in clinical practice

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 0 | 1 | 2 | 3 | 4 | 5 |

8. Professional Conduct

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 0 | 1 | 2 | 3 | 4 | 5 |

9. Professional Growth and Self Awareness

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 0 | 1 | 2 | 3 | 4 | 5 |

10. Public Advocacy, including knowledge of professional issues in psychology

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 0 | 1 | 2 | 3 | 4 | 5 |

Please provide a narrative response to the questions below.

1. Describe your overall goals for this training year:

2. Describe individual interests/areas in which you would like to specialize:

3. Describe your professional strengths:

5. Describe your areas of growth:

For mid-year and year-end assessments only:

Describe ways in which you have and have not made progress towards your original overall goals for this training year. Have your goals changed? If so, how?