

Supervisor Assessment Report (SAR) 2017

Final: 09.12.16



NLPtCA Supervisor Assessment Report (SAR)

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SAR1: Before Completing This Report

IMPORTANT: Please read the Guidelines for the Supervisor Assessment Report (Appendix 06a) BEFORE filling in this report. The Guidelines document is numbered and relates to sections 1-26 of this report.

SAR2: Declaration of Applicant

Name of applicant:

I am the applicant named above. I hereby request and authorise my supervisor to reveal any information s/he considers relevant to the NLPtCA Accrediting Team so that they can verify any points arising from this report.

Signed:

Dated:

SAR3: Supervisor Eligibility

I am a recognised NLPtCA Supervisor: **YES / NO**

If Yes, please continue to SAR4.

If No, has the applicant received approval for you to complete this report? **YES / NO**

If Yes, please continue to SAR4.

If No, please refer to the General Guidelines, GG2 before proceeding.

SAR4: Supervisor Details

Name:

UKCP Registration Number:

BACP Registration Number:

BPS Registration Number:

Member of other organisation:

Master Practitioner qualification: date & school

Address:

Telephone:

email:

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SAR5: Declaration of Supervisor

I declare that the above psychotherapist in training is attending/has attended regular supervision with me.

I am fully aware of, and comply with the Code of Ethics of NLPtCA and I understand that under this code my ultimate responsibility is to the welfare of the clients of the applicant.

I am fully covered by my insurance as a psychotherapist and I have appropriate and adequate supervision myself.

To the best of my knowledge and belief, I state that the above applicant is practising Neurolinguistic Psychotherapy with his/her clients in a safe, effective and professional manner.

I understand that if I have concerns about the clinical competence or ethical practice of the applicant I am obliged to raise my concerns directly with the applicant in the first instance.

Thereafter, if I am still uncertain about his/her abilities and behaviour as a Neurolinguistic Psychotherapist, I must contact my own supervisor or appropriate colleague for assistance.

If I still cannot resolve the issues I must contact the NLPtCA for the name of the Complaints Officer and write in confidence with the details of any problem or concern. Failure to do this will be in breach of the Code of Ethics of NLPtCA by which I am bound.

SIGNATURE OF SUPERVISOR:

Date:

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SAR6-11: History of Supervision (to date of application)

- 6 Name of applicant:

- 7 Please describe the type of supervision the applicant has undertaken with you, e.g. 1:1 face-to-face; group (specify number of members); other (please specify):

- 8 When did you start supervising this applicant?

- 9 Please describe any personal or professional relationship (other than supervisory) you have had with the applicant (e.g. as a business partner, trainer, therapist, etc.):

- 10 Please specify the hours of supervision, average length and frequency of sessions you have supervised the applicant. **Please also verify the number of supervised client hours that the applicant accrued during each of these years. From 2018 this table will include confirmation of secondary supervision.** Primary supervision must have been completed over a period of at least 3 years. For at least 2 of the 3 years prior to the date of application, applicants must have had regular (eg monthly) one to one, face to face supervision as a mandatory requirement. If you have supervised the applicant for longer than this period please provide details:

| | 2012/13 | 2013/14 | 2014/15 | 2015/16 | 2016/17 |
|--|---------|---------|---------|---------|---------|
| Annual hours of primary supervision | | | | | |
| Average length of session | | | | | |
| Average frequency of sessions | | | | | |
| Number of Supervised Client Hours | | | | | |

- 11 It is mandatory for you to have observed the applicant working live with clients on at least two separate occasions in the last year before their application (see Supervisor Guidelines, SARG20-26). You may, however, have additional in-vivo evidence obtained in previous years. Please, give details below of your in-vivo evidence, i.e. how many times in the last four years, and by what means did you observe the applicant :

| | Number of Times | Year Seen |
|------------------------|-----------------|-----------|
| Live Observation | | |
| Video Recording | | |
| Audio Recording | | |
| Verbatim Transcript | | |
| Other (please specify) | | |
| TOTAL | | |

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SAR12: Signatures of Supervisor and Applicant

SIGNATURE OF SUPERVISOR:

Date:

SIGNATURE OF APPLICANT:

Date:

SUMMARY ASSESSMENT: SEE SAR GUIDELINES 13-18

Please tick ONE box for EACH criterion 13.1 to 18.2 and sign and date each page

| | | |
|---|---|---|
| <p>BOX A: I have sufficient evidence the applicant has demonstrated to me that they fulfil UKCP clinical competence and ethical practice requirements for:</p> | <p>BOX B: I have sufficient evidence the applicant does NOT meet UKCP clinical competence and ethical practice requirements for:</p> | <p>BOX C: I do NOT have sufficient evidence to decide:</p> |
|---|---|---|

SAR13: Relationship with Client

| | BOX A | BOX B | BOX C |
|--|-------|-------|-------|
| 13.1 Due regard for client safety | | | |
| 13.2 Appropriate management of physical and psychological boundaries | | | |
| 13.3 Capacity to recognise clients with severely disturbed mental health | | | |
| 13.4 Appropriate rapport and responsiveness to client feedback | | | |

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SAR14: Relationship with Self

| | BOX A | BOX B | BOX C |
|--|-------|-------|-------|
| 14.1 Due regard for personal safety. | | | |
| 14.2 An awareness of their own process and behaviour and its effect on the client; the effect of the therapeutic relationship on the applicant; and appropriate use of self-monitoring and self-supervision before, during and after sessions. | | | |
| 14.3 An appropriate level of confidence matched to current competence, and an understanding of limitations of competence and experience, with appropriate subsequent referral. | | | |
| 14.4 Recognition of areas of development and requisite action. | | | |

Please tick ONE box for EACH criterion 13.1 to 18.2 and sign and date each page

| | | |
|--|--|--|
| BOX A: I have sufficient evidence the applicant has demonstrated to me that they fulfil UKCP clinical competence and ethical practice requirements for: | BOX B: I have sufficient evidence the applicant does NOT meet UKCP clinical competence and ethical practice requirements for: | BOX C: I do NOT have sufficient evidence to decide: |
|--|--|--|

SAR15: RELATIONSHIP WITH METHODOLOGY OF NLPt

| | BOX A | BOX B | BOX C |
|---|-------|-------|-------|
| 15.1 Working from an experiential constructivist perspective, respecting the uniqueness of each individual's map of the world and operating within the Presuppositions of NLPt. | | | |
| 15.2 Using behavioural modelling to gather information, to define problems and desired outcomes, to detect patterns, and to determine appropriate interventions. | | | |
| 15.3 Integrated application of a range of theory and practice of NLPt showing flexibility of behaviour and approach in response to each individual client. | | | |

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15.4 Ability to remain outcome-orientated, track the client-process and monitor progress towards the client's desired outcome.

| | | |
|--|--|--|
| | | |
|--|--|--|

SAR16: Clinical Application of Psychotherapy Studies in:

The Application Form relates to the critical understanding of these studies, this section relates to the clinical application.

16.1 Human development

16.2 Psychopathology (including psychopharmacology)

16.3 Sexuality and Gender

16.4 Ethics

16.5 Research methods

16.6 Social science

16.7 Other psychotherapies

| BOX A | BOX B | BOX C |
|-------|-------|-------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Please tick ONE box for EACH criterion 13.1 to 18.2 and sign and date each page

| | | |
|--|--|--|
| BOX A: I have sufficient evidence the applicant has demonstrated to me that they fulfil UKCP clinical competence and ethical practice requirements for: | BOX B: I have sufficient evidence the applicant does NOT meet UKCP clinical competence and ethical practice requirements for: | BOX C: I do NOT have sufficient evidence to decide: |
|--|--|--|

SAR17: Relationship With Other Professionals

17.1 Appropriate utilisation of supervision.

17.2 A willingness to work with and manage referrals from, and interaction with, other professionals and agencies.

| BOX A | BOX B | BOX C |
|-------|-------|-------|
| | | |
| | | |

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SAR18: Practice Management

| | BOX A | BOX B | BOX C |
|--|-------|-------|-------|
| 18.1 A structured approach to history taking and case notes; an efficient and secure method of record keeping; and an effective management of case load. | | | |
| 18.2 Professional literature; premises; pre-therapy discussion/interview; agreeing contracts including finance and time frames; and how to handle a complaint. | | | |

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SAR19: Other Evidence

- If you ticked any Box B. above for criteria 13.1 to 18.2, “Applicant does NOT meet the requirements” please give details of your evidence for EACH of the criteria indicated here:

- If you ticked any Box C. above for criteria 13.1 to 18.2, “I do NOT have sufficient evidence” in one or more categories, this does not preclude accreditation as the applicant may be able to provide the evidence in other ways.

Please give:

- Any evidence you do have, even if it is not yet sufficient, and
- The evidence you would require to be able to make an assessment, here:

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SAR20-22 MANDATORY EXAMPLES

Please provide your evidence in the format outlined in the current Guidelines for Supervisors for this section (Appendix 06a). It is recommended that you very carefully read the notes in the Guidelines (Appendix 06a) before completing these examples.

Please detail your evidence (including the source of your evidence) that the applicant has demonstrated to you, sufficient clinical competence and ethical practice which fulfills UKCP requirements in the areas described below.

SAR20: FIRST MANDATORY EXAMPLE, (from section 13 above, Relationship with Client, category 13.2)

13.2 Appropriate management of physical and psychological boundaries.

SAR21: SECOND MANDATORY EXAMPLE (from section 14 above, Relationship with Self, category 14.2)

14.2 An awareness of the applicant's own process and behaviour and its effect on the client; the effect of the therapeutic relationship on the applicant; and appropriate use of self-monitoring and self-supervision before, during and after sessions.

SAR22: THIRD MANDATORY EXAMPLE (from section 15 above, Relationship with Methodology of NLPt, category 15.2)

15.2 Use of behavioural modelling to gather information, to define problems and desired outcomes, to detect patterns, and to determine appropriate interventions. Your evidence should demonstrate your understanding of behavioural modelling as part of a therapeutic process, giving the contextual information to support this understanding. For example, the purpose of the intervention within the process, why it was chosen at that point in therapy and the result of the intervention in the context of the therapeutic process.

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SAR23-25 ELECTIVE EXAMPLES

Please provide your evidence in the format outlined in the current Guidelines for Supervisors for this section (Appendix 06a). It is recommended that you very carefully read the notes in Appendix 06a before completing these examples.

Please detail your evidence (including the source of your evidence) that the applicant has demonstrated to you, sufficient clinical competence and ethical practice which fulfills UKCP requirements in the areas described below.

SAR23: FIRST ELECTIVE EXAMPLE from section 13 above, Relationship with Client. Select from either category 13.1, 13.3 or 13.4

*[Insert description of the criteria you have selected from category 13 as listed above — unless you are a **second** supervisor in which case the Registrar may request that you choose a different elective criteria, e.g. from category 16.]*

SAR24: SECOND ELECTIVE EXAMPLE from section 14 above, Relationship with Self. Select from either category 14.1, 14.3 or 14.4

*[Insert description of the criteria you have selected from category 14 as listed above — unless you are a **second** supervisor in which case the Registrar may request that you choose a different elective criteria, e.g. from category 16.]*

SAR25: THIRD ELECTIVE EXAMPLE from section 15 above, Relationship with Methodology of NLPt. Select from either category 15.1, 15.3 or 15.4

*[Insert description of the criteria you have selected from category 15 as listed above — unless you are a **second** supervisor in which case the Registrar may request that you choose a different elective criteria, e.g. from category 16.]*

SAR26: OPTIONAL OTHER EXAMPLE(S)