therapist feedback sheet

Name of therapist:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (or initials) of client: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What the therapist did well, e.g.

* Establishing the therapy relationship
* Creating trust and rapport
* Effective communication (listening, questions, use of silence)
* Challenging and raising insight
* Helping create action plans towards goal achievement
* Evaluating progress during sessions and the relationship.

What the therapist could do to make it even better:

Any other comments

Client initials/signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_