**OPCP-L5 Tutor or Peer Skills Observation Feedback Sheet**

Counsellor …………………………………………………………… Client …………………………………………………………..

Observer (Tutor or Peer) …………………………………..… Date …………………………………………………………….

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| **Establishing a safe online or phone therapeutic setting:** |
| How did the counsellor assess the client's suitability and any immediate risk or safety concerns for online or phone counselling, and how did it influence the session?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_How did the counsellor establish personal and professional boundaries in the session? |
| How was a collaborative working agreement for online and or phone counselling negotiated to establish the session focus and goals?How did the counsellor establish rapport and trust within the online and or phone medium with the client at the beginning of the session? |
| **Developing an online or phone therapeutic relationship:** |
| How did the counsellor’s use of self, contribute to creating meaningful online and or phone therapeutic connections during the session? |
| How effectively did the counsellor apply their chosen modality within the online or phone counselling context, and were any challenges encountered? |
| What online and or phone skills and techniques were demonstrated during the session? |
| How did the counsellor respond to any changes in the client's needs or goals throughout the session? |

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| **Ending and evaluating an online or phone therapy session:** |
| How did the counsellor check that the client was safe to end the online and or phone session? |
| How did the counsellor demonstrate an awareness of diversity issues that could affect access to online and or phone counselling?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Did the counsellor demonstrate a clear understanding of their own online and or phone competencies and limitations in this session? |
| How was the client's confidentiality and data protection maintained appropriately during the online or phone session? |

Any other comments.

Observer signature: ………………………………………………….