Student Comments:	Task Supervisor Comments (If	Field Director Comments
Describe your progress this	applicable)	
semester in relation to the 9	The student has completed her	
competencies and related	learning plan objectives at this	
behaviors as outlined your	time. The student has done	
learning plan.	amazing work this semester and	
In addition, please comment on	this year as well. The student is	
your development of professional	competent in all areas and has	
identity, development of	gone above and beyond to	
generalist social work	complete her field hours.	
knowledge, skills and attitudes	1	
and participation in the		
educational process.		
Competency 1 I value the		
NASW ethical principles in my		
practice as a social worker. An		
advanced practitioner should		
constantly seek further		
education and training while		
receiving regular supervision		
from superiors. I met with my		
field instructor and clinical		
director weekly during my		
practicum. I also completed		
various types of training and		
attended multiple conferences. I plan to continue additional		
training that will benefit my		
practice with foster children. I		
developed a therapeutic		
visitation training presentation		
that incorporates evidence-based		
models and policies to provide		
effective and supportive		
therapeutic visitation with		
biological families working		
towards reunification.		
Additionally, I created a short		
training on vicarious trauma and		
self-care for foster care		
professionals. I created		
literature-based PowerPoints and		
recorded the presentations for		

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each to be distributed to all Omni Chattanooga employees. I also understand the importance of keeping professionally written documentation in the field. I created a personal selfcare list that includes daily activities to meet my physical, mental, emotional, social, practical, and spiritual needs. I refer to this list daily to help myself prioritize self-care to minimize risks of compassion fatigue and burnout. I am fortunate enough to transition into the Omni Visions Level 3 Therapist position after my practicum. I will continue to practice ethical and professional behavior while committed to growth as an advanced practitioner. Competency 2 I appreciate diversity in my practice as a social worker. I understand that people come from different backgrounds with different life experiences. All of these factors should be recognized and valued when working with clients and forming a helping relationship. I use the person-in-environment perspective and learn the client's historical and current experiences when building rapport. I think that rapport is one of the most critical parts of a helping relationship, especially when engaging with diverse populations. I have worked with many diverse clients and families during my practicum this year. Self-assessment of my potential personal biases is the

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primary first step when working with clients that may differ from me. While it is helpful to utilize evidence-based practices and guides, such as the DSM 5 cultural formulation review, I also believe working with diversity warrants soft social and communication skills. I will continue to embrace diversity in my practice with foster youth and families. One of my favorite activities of the first half of my practicum was attending the Family Focused Treatment Association (FFTA) Annual Conference on diversity and resiliency for foster families. I learned a plethora of information to use in my practice with families. For the second half of the practicum, I created a training module PowerPoint of the key concepts learned during the conference. I was able to distribute this training module and related literature to all Chattanooga Omni Visions employees. Competency 3 I have learned the needs and risks of foster youth that age out of the system after their 18th birthday. Many of these young adults lack stable housing, family and social support, job skills, and simple life skills. Due to these needs, this population is at high risk for incarceration, unplanned pregnancies, homelessness, poverty, and substance abuse. I have worked closely with many of these youth as they prepare for their 18th birthday. We have

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collaboratively created plans for these youth to enter the extension of foster care services and establish independent living placements. I have worked closely with RISE UP, Chambliss, River City Youth Collective, Pathways, and Partnership to connect these teens to Chattanooga-based independent living programs. I will continue to work with foster youth and help connect to community resources to allow them a more successful transition into young adulthood. During my special project therapeutic visitation training, I included many social, economic, and environmental issues that biological family members face. The training presented how generational trauma is easily inherited, and foster care can be a cycle for some disadvantaged families. I focused on this to promote the necessity of approaching biological families in an unbiased manner. Often biological families do not receive empathy and compassion in the foster care field, which results in a decreased number of reunification. When reunification is not achieved, both the child, biological family, and the system all suffer. I will continue to keep this in mind when conducting therapeutic visitation with biological families in my future role as a Level 3 Therapist. Competency 4 I spent a substantial amount of

time reviewing evidence-based practices and related research during my practicum. For the second half of the practicum, I focused primarily on research benefiting therapeutic visitation. I found motivational interviewing, Parent-Child Interaction Therapy, Cognitive Behavioral Therapy, Acceptance and Commitment Therapy, and Play Therapy effective when interacting with foster youth and families. Also important to understand is Adverse Childhood Experiences (ACES). I started to use the ACES questionnaire and resiliency measure to understand better both the foster youth and the biological family members. These measures helped me to create a more individualized, focused treatment plan for the family. I also created needs assessment surveys to measure if Omni workers and supervisors felt they needed more training on therapeutic visitation. The surveys allowed me to understand what areas of therapeutic visitation that the workers felt they needed to learn most. I used these results when creating the training presentation. Competency 5 I spent a lot of time talking with DCS workers and independent living specialists to form advocacy plans targeted towards changing the extension of foster care policies. The specific area of concern is that eligibility requirements include that the

youth has to be enrolled in a school program and work a minimum of 80 hours a week. The main issue is that only some trade school programs offered through a university or community college setting are approved. This leaves many youth not eligible for the resources and funding of the extension service if they choose a trade program better suited for their career track. An example of this is one foster youth that enrolled in a cosmetology school that was specialized to teach how to do African American hair. DCS did not approve this program despite its similar curriculum track as others offered by Chattanooga State but focused exclusively on Caucasian-oriented cosmetology. I also worked closely on one foster family case. I advocated for supervised visitation with a former foster mother that was the only mother figure the foster girl knew in her life. This required extensive conversations and meetings with DCS and court hearings. Ultimately, the girl was granted contact with her former foster mother. The foster mother is currently petitioning for custody, and this could be the foster youth's chance at a forever family. Advocacy is a passion of mine. I see how much it is needed in the foster care field. I will continue to speak up and advocate for my clients and families. I believe it is necessary

to create a detailed advocacy plan that involves all professionals related to the case. The best form of advocacy is to recruit numerous individuals to join your efforts in helping the client and situation. Competency 6 I have learned the importance of engagement on the micro, mezzo, and macro levels. I spent a lot of time working with individual clients in therapy, foster and biological families, and other foster care professionals in the community. It is pertinent that social workers

learn how to engage not only with their clients but also other professionals. Foster care is a complex field and working as a team with various other workers is necessary to provide the best treatment and outcomes for the children. Reviewing and integrating evidence-based practices is essential for successful engagement. I have done this in my practicum and will continue to do so in my professional career. I have already started a supervision group that meets bi-weekly to discuss evidence-based strategies for engagement, assessment, intervention, and evaluation of individuals and systems. I feel fortunate to add this to my current schedule as I further my education and career in the field. Competency 7 I completed many diagnostic intakes with OCH. These intake interviews cover historical and current information concerning

medical, social, familial, financial, household, employment, and mental health. I gave provisional diagnoses after this intake process. This allowed me to spend a lot of time familiarizing myself with the DSM 5 and mental health diagnoses. I noticed a considerable amount of growth when working with the DSM 5 and diagnosing during practicum. I also learned from supervision with my field instructor and clinical directors that diagnoses are necessary to some extent for insurance and treatment planning purposes. Still, they should not be used to label or box a client during the helping relationship process. I also spent time assessing the needs of Omni Visions workers before planning and creating my special project training. I used the survey mentioned above to decide that therapeutic training would be a beneficial topic. I also made and distributed posttests to be completed after employees complete the training presentation. The workers have a couple of more months to complete the training and posttests. Fortunately, I will remain with Omni after my practicum, so I will have the chance to measure and review these posttests. Competency 8 I became familiar with various evidencebased interventions during practicum. These include CBT, TF-CBT, play therapy, Parenting for Resiliency, PCIT, TFTC,

motivational interviewing, acceptance and commitment therapy, person-in-environment perspective, and strengths-based practice. These interventions can be applied to most micro, mezzo, and macro situations. I believe that the intervention stage of the helping relationship can be the most pivotal point in treatment. I will continue to review research and evidencebased interventions that meet each client and family's needs and individual circumstances throughout my professional career. During the second half of practicum, I spent a lot of time studying evidence-based interventions beneficial when facilitating therapeutic visitation for families. The main ones used for the training I presented were PCIT, CBT, motivational interviewing, and acceptance and commitment therapy. I understand how all of these interventions allow for a safe and supportive rapport that will increase the chance of growth for the individuals and family dynamic. Competency 9 I have learned how the evaluation process is vital in treatment. I have been conditioned to see goals in a specific, measurable, attainable, realistic, and timely format. These components help individuals to stay on track and measure progress easily. I include SMART goals in all areas of treatment planning with clients. I also recommended that **Omni Visions upper**

management start having employees complete the Professional Quality of Life Scale (ProQOL) scale quarterly or more as needed. This will allow the employee and agency to monitor compassion fatigue, compassion satisfaction, and burnout closely. Compassion fatigue can easily lead to burnout, increasing the chance that employees will leave their employment or the foster care field entirely. Foster care is a complex and stressful field that exposes workers to secondary trauma when working with their clients directly. The rate of compassion fatigue and burnout is high and should be monitored and complemented by daily selfcare. I will use the ProQOL and my daily self-care checklist to help combat my own potential risks of compassion fatigue and burnout. I will also continue my career with the motivation to continuously utilize evaluation techniques with individuals, families, systems, and communities. Evaluation will provide guidance on what works or doesn't at any given moment, which is vital since each individual and system is unique and will respond to interventions differently.

I have reviewed and incorporated the Field Director's feedback on my mid-term learning plan. Yes	Field Instructor Comments The student has completed her learning plan objectives at this time. The student has done amazing work this semester and this year as well. The student is competent in all areas and has gone above and beyond to complete her field hours.	Final Grade: Pass Fail Incomplete
I have completed the required 500 field hours for the Advanced practicum. Yes	I have reviewed this evaluation, including comments and the number of approved hours. Yes	

Student: Click the "Student Final Submit" button below to send this form to your Task Supervisor (if applicable) and your Field Instructor for review/approval.

Actioned by Beckler, Jaclyn (488267) on 4/22/2021 11:46:51 AM

Task Supervisor: (If no Task Supervisor, Field Instructor must click below to send this form for review.)

Actioned by Patton, Alyson on 4/25/2021 5:37:45 PM

Field Instructor: Click the "Field Instructor Final Submit" button below to send this form to the student for review.

Has not been actioned

Field Director: Click the "Field Director Final Submit" button below to approve the grade for Final Learning Plan Evaluation.

Has not been actioned