

American Balint Society
BALINT LEADER CANDIDATE
SUPERVISION REPORT

LEADER/CANDIDATE'S NAME _____ DATE OF GROUP _____

SUPERVISOR'S NAME _____ DATE OF SUPERVISION _____

Please rate the individual's competency from 1 (not at all) to 5 (to a great extent)

QUALITY OF CASE AND GROUP CLIMATE	1	2	3	4	5
The case presented was unusually complicated					
The presenter appeared responsive to the leader's attempts to be helpful					
The group appeared responsive to the leader's intervention					
CANDIDATE'S LEADER BEHAVIOR	1	2	3	4	5
Set rules and boundaries as necessary					
Protected presenter and members from cross examination and attack					
Cultivated a climate of non-judgement and trust					
Made clear interventions					
Intervened when necessary in a timely and effective way					
Tolerated well uncertainties of the case					
Elaborated, reflected and clarified thoughts and feelings					
Noted moods, themes, topics present or avoided by the group					
Allowed interventions to play out					
Encouraged exploration of both the doctor's and the patient's perceptions					
Reflected an understanding of doctor and patient					
Kept the group focused on the case and the doctor-patient relationship					
Helped group speculate, hypothesize, diverge in understanding the doctor-patient relationship					
Used images and metaphors effectively					
Avoided monopolizing the group					
Was flexible in handling unique individual and group needs					
Stayed out of a therapist/teaching role					
Helped the group reach an understanding of the presenter's difficulties with this patient					

CANDIDATE'S DEBRIEFING	1	2	3	4	5
Can articulate a clear goal or intent for the group					
Can articulate an understanding of the dynamics of the case					
Can describe and self-evaluate his/her own interventions or absence of interventions					
Can receive and integrate feedback on his/her leadership					
OVERALL	1	2	3	4	5
Overall, this candidate was effective in facilitating the group					
Do you have any reservations about this candidate becoming a certified Balint group leader?	Yes	No			

Comment further with examples or clarifications of your ratings.

Report Completed by _____ Signature _____ Date _____ Report Reviewed by _____ Signature _____ Date _____

RETURN A COPY OF THIS REPORT ASAP TO: Katie Margo MD; Coordinator of Supervision; American Balint Society; 426 Carpenter Lane, Philadelphia, PA 19119; e-mail: margok@uphs.upenn.edu.