

BAPTIST HEALTH
Jacksonville, Florida
CP Supervisor's Final Evaluation
Level 1 CP - Extended Unit, 2002-2003

Student: Paul Richardson Extended Unit Dates: 12/02-5/03

Supervisors: Larry D. Wagoner & Kimberly Corbin Credit: Granted Denied

This student has completed Level I Clinical Pastoral Education. Yes No

This evaluation has / has not been discussed with the student.

Student's Signature: _____ Date: _____

Supervisors' Signature: Kimberly Corbin Larry D. Wagoner Date: 7/1/03

This evaluation addresses the outcomes, goals, and objectives of Level I Clinical Pastoral Education.
See *Standards of the Association for Clinical Pastoral Education, 2002, #240, 2651.*

Evaluation Format

- Section I. Introduction to Student, Medical Center, CP Program
 - Section II. Learning Contract
 - Section III. Checklists: Professional Work Practices & Outcomes for Level I CP
 - Section IV. Summary Statements, Reflections, Recommendations
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SECTION I. Introduction:

The CP group consisted of Paul, 26 year old, Caucasian, Southern Baptist male; and a 69 year old, Caucasian, Southern Baptist male; a 62 year old, African American, United Methodist female; a 46 year old Caucasian Episcopal male; a 28 year old Caucasian, Presbyterian USA male; and a 54 year old, African American, Pentecostal Holiness female.

SECTION II. Student Learning Contract

1. Handle crisis situations:

Paul was quickly emersed into crisis ministry by having not only the first, but the most hectic on-call experience. He was proud of his survival and helpfulness. The way Paul reported his crisis ministry experiences revealed an ability to triage and consult. This was an asset of his throughout the unit. He is able to control his anxiety in challenging situations and present a calm and calming presence.

2. Learn to feel comfortable in the role and function of a chaplain:

Paul tended to bring cases in that revealed his discomfort and confusion. He was good at exploring, self inquiry, and experimentation. He also brought his authority

struggles as a parish clergy into the group for feedback. Paul is open with his pastoral identity and even in his quietness was able to incite patients and family to share.

3. Be more open:

The supervisors believe Paul to have been open and willing to share and express his vulnerability throughout the unit. His greatest challenge was his social skills regarding timing, assertiveness, and follow through of the feelings and needs he engaged the group about.

4. Be aware of inner feelings:

Church conflicts and perpetual inquiry from his supervisors had Paul finally more able to identify actual feelings in himself. He is very new at this and is only beginning to understand the need and the process of tracking his emotional process and the affects on others.

SECTION III. Checklists

*Scale: 1=Rarely 2=Sometimes 3=Frequently 4=Consistently

In order to receive credit for this unit of Level I Clinical Pastoral Education, the student must receive an average of 2.5 on all items in checklists.

00.	Professional Work Practices This CP student:	*See numbered scale below			
		1	2	3	4
a.	Abides by the Code of Ethics, Baptist Health, and the Professional Ethics Code, Association for Clinical Pastoral Education (ACPE).				X
b.	Follows Baptist Medical Center / Wolfson Children's Hospital's policies and procedures in patient, family, and staff interaction.				X
c.	Shows hospitality and interacts constructively with patients and families.				X
d.	Adheres to the dress code of the department.			X	
e.	Shows respect for patient privacy.				X
f.	Shows respect for patient confidentiality.				X
g.	Provides consistent pastoral care to assigned nursing units.				X
h.	Demonstrates promptness in responding to patient calls.				X
I.	Shows hospitality and interacts constructively with department peers and staff.		X		
j.	Demonstrates promptness in attending educational events.				X
k.	Demonstrates promptness in submitting educational assignments.				X
l.	Demonstrates professional communication skills regarding department assignments including on-call and sick days.				X
<p>Comments: He accommodated the procedures of the department. He frequently seemed to dress more casually than most ministers would in this setting. He needs to further hone his social/interpersonal relationship skills.</p>					

Outcome #1. The student will be able to articulate central themes of her or his religious heritage and theological understanding that inform one's ministry.

01.	Religious/Theological Self-Understanding This CP student demonstrates:	1	2	3	4
a.	Capacity to identify themes of her/his religious heritage that inform her/his ministry.				X
b.	Capacity to identify themes in her/his theological understanding that inform her/his ministry.				X
<p>Comments: Paul has a consistent, moderate, Baptist theology. He is mostly open to other denominations and faith group beliefs and opinions. Again, in the socialization of this, Paul was often unaware of how his choice of words and expressions might have a negative affect on others. He is often excused for this due to his demeanor of innocence. He seems well read in systematic theologies.</p>					

Outcome #2. The student will be able to identify and discuss major life events and relationships that impact on personal identify as expressed in pastoral functioning.

02.	Personal/Professional Self-Understanding This CP student demonstrates:	1	2	3	4
a.	Capacity to identify events within her/his personal life story (including family of origin) that have impact on his/her personal way of relating as a pastoral care giver.			X	
b.	Capacity to discuss relationships within her/his personal life story (including family of origin) that have impact on her/his personal way of relating as a pastoral care giver.			X	
<p>Comments: Paul can do this identifying and processing, but upon being prompted by others. He is still in the initial stage of staying cognizant of such for himself and drawing from his own life experiences as metaphors.</p>					

Outcome #3. The student will be able to demonstrate the ability to initiate helping relationships.

03.	Initiative in helping relationships. This CP student demonstrates:	1	2	3	4
a.	Capacity to introduce him/herself as chaplain to patients, families, and staff.				X
b.	Capacity to inquire about patient/person to find out who they are.			X	
c.	Capacity to inquire about the facts of the person's hospitalization/ illness story.			X	
d.	Capacity to inquire about the person's/patient's concerns and feelings.			X	
e.	Capacity to inquire about the person's patient's religious history.				X
f.	Capacity to initiate spiritual care, including prayer, scripture, ritual.				X
g.	Capacity to initiate the ending of a pastoral visit.			X	
<p>Comments: Paul knows well how to convey himself as explicit minister. He clearly affirms for himself the intentional caring reason for his presence. In the social and dialogical aspects he retains shyness and hesitance often appearing as if he is intruding to elicit information and stories from others. He will need to develop more boldness and become more deliberate in how he manages the pastoral conversation and concludes the visits in order to successfully leave the patients and families with a clear sense of support and blessing.</p>					

Denomination/Faith Group: Ron Rowe

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PLEASE ATTACH THE FOLLOWING TO YOUR APPLICATION:

1. A reasonably full account of your life, including important events, relationships with people who have been significant to you, and the impact these events and relationships have had on your development. Describe your family of origin, your current family relationships and your educational growth dynamics.
2. A description of the development of your religious life, including events and relationships that affected your faith and currently inform your belief systems.
3. A description of the development of your work (vocation) history, including a chronological list of positions and dates.
4. An account of an incident in which you were called to help someone, including the nature of the request, your assessment of the "problem", what you did, and a summary evaluation. If you have had previous CPE, include this information in verbatim form.
5. Your impression of Clinical Pastoral Education and your educational goals, including how this training will be used to meet your goals for doing ministry.
6. Application fee if required by center.
7. Admissions Interview: If you are not being interviewed at the center to which you are applying, you will need to obtain an admissions interview summary prepared by an ACPE supervisor or another person satisfactory to the center to which you are applying. If the written summary is not yet available, please indicate the following:

Admission Interview conducted by _____

Address _____

Telephone () _____ Date Interview Conducted _____

THOSE WITH PREVIOUS CPE SHOULD COMPLETE THE FOLLOWING: *

1. Copies of previous CPE evaluations written by you and your supervisor.
2. What are your personal and professional goals and how will continued training aid that process?

*PLEASE NOTE: CPE Residency programs usually require an in-person interview in their admissions process.

SIGNATURE OF APPLICANT _____

DATE _____ SOCIAL SECURITY # _____

Print and Postal Mail/Send this application directly to the **CENTER or **CLUSTER** to which you are applying !!**

Application for Clinical Pastoral Education

Print and Postal Mail/Send this application directly to the CENTER or CLUSTER to which you are applying !!

Application is for: _____ Winter _____ Spring _____ Summer _____ Fall _____ Extended _____ Year

Earliest Date You Can Begin: As soon as possible

Name Paul Richardson

Email address paulrichardson82@msn.com

Present Mailing Address 119 Lucille Ln. Fitzgerald, GA 31750 Telephone 229-425-2366

Permanent Address Same

Telephone 229-423-4061

Denomination/Faith Group Affiliation Baptist

Association, Conference, Diocese, Presbytery, Synod _____

Present Position: Pastor of Fellowship Baptist Church Ordained ? Yes Date: 2-23-03

EDUCATION:

Degree

College: Mississippi College

Bachelor of Arts

Seminary: McAfee School of Theology

Master of Divinity

Graduate Study _____

PREVIOUS CLINICAL PASTORAL EDUCATION:

Dates	Center	Supervisor
Dec. 03-May 04	Baptist Medical Center of Jacksonville	Larry Wagoner & Kim Corbin
_____	_____	_____
_____	_____	_____

Outcome #4. The student will be able to initiate peer group and supervisory consultation and receive feedback about his/her ministry practice.

04a.	Initiative in seeking peer group consultation and in receiving peer group feedback. This CP student demonstrates:	1	2	3	4
a.	Capacity to initiate discussion with peers about the strengths and limits of his/her pastoral care for patients, families, staff.				X
b.	Capacity to initiate discussion with peers about those personal strengths and limits that affect his/her pastoral care for others.				X
c.	Capacity to receive and make use of peer feedback about his/her ministry.			X	
d.	Capacity to receive and make use of peer feedback about those personal strengths and limits that affect his/her pastoral care for others.			X	
04b.	Initiative in seeking supervisory consultation and in receiving supervisory feedback: This CP student demonstrates:	1	2	3	4
e.	Capacity to initiate discussion with supervisor about the strengths and limits of his/her pastoral care for patients, families, and staff.				X
f.	Capacity to initiate discussion with supervisors about those personal strengths and limits that affect his/her pastoral care for others.				X
g.	Capacity to receive and make use of supervisory feedback about his/ her ministry.			X	
h.	Capacity to receive and make use of supervisory feedback and those personal strengths and limits that affect his/her pastoral care for others.			X	

Comments: Paul seems to be successful and consistent in asking for and receiving consultation about his personal and professional concerns. However, peers and supervisors do not usually know what he does with it. At times he shows a need and desire for a mentor and a counselor beyond this CP experience, but has not followed through with a thorough discussion and plan.

Outcome #5. The student risks offering appropriate and timely feedback.

05.	Giving feedback. This CP student demonstrates:	1	2	3	4
a.	Capacity to offer constructive support and challenge to his/her peers in group learning settings.			X	
b.	Ability to provide sensitive and timely support, as appropriate, in pastoral care to patients, families, and staff.			X	

Comments: Regarding peers, Paul is often 'on target' but he hesitates to wait for approval and interest. If he doesn't get it he usually retreats. Regarding patients, families, and staff, Paul is warm and caring, but since he is only starting to become aware of his own feelings, he is limited in exploring the breadth and depth of others. He seems very motivated to continue working on this.

Outcome #6. The student utilizes a clinical method of learning.

06.	Clinical method. This CP student demonstrates:	1	2	3	4
a.	Capacity to see experience with patients and peers as opportunity to learn as well as to serve.				X
b.	Capacity to develop and utilize a learning contract.				X
c.	Ability to share learning issues with peers and supervisors.				X
d.	Ability to utilize pastoral case conference, pastoral skills seminar, didactic seminar, interpersonal relations seminar, theological reflection seminar.				X
e.	Capacity for clinical writing that is concrete, focused, clear.				X
f.	Capacity to utilize reading in clinical learning method.				X
g.	Ability to be emotionally and intellectually available in supervisory sessions.			X	
h.	Ability to relate to department supervisory staff in various professional roles.			X	
I.	Capacity to reflect upon and evaluate supervisory relationships.		X		
j.	Capacity to take responsibility for learning.				X

Comments: Paul is fully aware of the clinical method of learning, and is able to utilize it effectively. Confrontation and process dialogue is new to Paul, but he is gradually growing accustomed. He continues to stay a little leery of facing up to feelings, especially the sensitive and strong ones, and he shies away from much ownership of transference dynamics.

Outcome #7. The student demonstrates the ability to integrate into pastoral practice conceptual understanding presented in the curriculum.

07.	Theory/practice integration. This CP student demonstrates:	1	2	3	4
a.	Capacity to engage conceptual learning in didactics and assigned reading.				X
b.	Capacity in required written assignments to summarize conceptual learning from curriculum events.				X
c.	Capacity to use conceptual frameworks from didactics and assigned reading in reflection on ministry with patients (especially in required verbatim materials).				X

Comments: The cognitive and didactic area is a strength for Paul. He is able to offer his own thoughts and interpretations. He shows evidence of taking new knowledge into the clinical setting for some experimentation. Paul was able to come forth descriptively about himself through the use of the genogram. He may need to use an informed, clinical curiosity as his means of accessing his and others private worlds.

Outcome #8. The student demonstrates the ability to identify personal strengths and weaknesses as related to future goals of pastoral ministry.

08.	Personal strengths and weaknesses/future goals. This CP student demonstrates:	1	2	3	4
a.	Capacity to identify and discuss strengths that are part of his/her pastoral ministry.				X
b.	Capacity to identify and discuss weaknesses that are part of his/her pastoral ministry.				X
c.	Capacity to formulate continuing pastoral formation goals, based on identified strengths.			X	
<p>Comments: Peers' feedback about Paul's strengths included: intelligent, good listener, quiet, appears nice, dedicated, consistent, and focused. Their list of weaknesses included: passivity, too overly focused, lack of self confidence, and need to be more assertive. Paul received all this non-defensively, was able to ponder the relevance, and was able to do some dialoguing with peers regarding the ramifications. An issue is whether he places this in a position of importance and planning in his life. He is strongly encouraged to stay attuned to these and not postpone using helpful resources for discernment and counsel.</p>					

Section IV. Summary:

Paul made excellent use of this CP unit taking it seriously and making strides in developing the pastoral caregiving aspect of ministry. Paul's non-defensive posture made it easier for him to learn. He has a boyish innocence that is usually experienced as warm and sensitive. He does stay more cognitive than feeling oriented and tends to be socially inhibited. He is an excellent candidate for more CP units and personal therapy if he so chooses. Paul has a good beginning regarding become more self aware and attuned to others' concerns. He needs more interpersonal intensity to further enhance his seasoning of personal and pastoral confidence. We wish him well as he returns to full time in the parish.

Paul has successfully completed this one full unit of Level I Clinical Pastoral Education according to the Standards of the Association for Clinical Pastoral Education, Inc.

This Center is accredited to offer ACPE/CP and is accredited by the Association for Clinical Pastoral Education, Inc., 1549 Clairmont Road, Suite 103, Decatur, GA 30033. Phone 404-320-1742.

We wish to express our gratitude to the School of Pastoral Care, North Carolina Baptist Hospitals Chaplaincy and Pastoral Education, Winston-Salem, NC for permission to adopt their evaluation instrument.