Louisiana State University Health Sciences Center
Child & Family Counseling Clinic
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Parent Consultation Feedback Form

Parent's (s) Name(s):_____ Child's Name: __ _____

Parents: Please note any changes requested below. These forms are to be completed prior to your scheduled family session without your child. This form will aid the therapist in working better with you and your child. Please complete to the best of your knowledge, if you do not have any information for a section, please write N/A.

***Significant Happenings: _____**

Positive Changes: _____

Issues That Have Remained the Same:_____

Changes of Concern (i.e., regression, increate in maladaptive/inappropriate behavior, decrease in appropriate/adaptive behavior): _____

_____

***What stressors are evident in my life? What stressors are evident in my child's life? _____**

_____

***What I Learned About My Child? What I Learned About Myself?): (i.e., feelings child expressed, themes in child's play; my feelings, what I am getting better at with my child, challenge(s) for me: _____**
_____

_____

What I am looking to learn today or talk about today:
_____

_____.

What am I Doing that is Contributing to/Hindering My Child's Growth?

_____

_____.

What is My Part in the Process Currently? What Changes Have/Am I Making?

_____

_____.

Needs: _____

_____.

How Am I Meeting My Own Needs?
_____

_____.

Other/Additional Information Needing To Be Reported:

Please rate the following items on the scale at they apply to you, with 1 meaning "not at all" and 5 meaning "very much." Provide short details where requested.

My role is _____(mother, supporter, resource, friend, etc) in reference to my child's presenting issues.

I see my role (circled or written down above) in my child's presenting issues.

1 2 3 4 5

Not at all Very Much

I find therapy is beneficial for my child. Why?

1 2 3 4 5

Not at all Very Much

My level of anxiety/stress when applying the skills learned through consultations at home. What specifically?

1 2 3 4 5

Not at all Very Much

It is important for me to use skills at home. Which do you find work best or that you enjoy using the most?

1 2 3 4 5

Not at all Very Much

I have been accurately using the skills provided in my caregiver consultations.

1 2 3 4 5

Not at all Very Much

I am able to see how the skills make a difference for my child when I use them. How?

1 2 3 4 5

Not at all Very Much

I have made changes in my parenting skills with my child. What changes?

1 2 3 4 5

Not at all Very Much

I have made changes in the relationship with my child. What changes?

1 2 3 4 5

Not at all Very Much

I see my child making changes. What changes?

1 2 3 4 5

Not at all Very Much

I see my child developing new coping skills. Which ones have you observed?

1 2 3 4 5

Not at all Very Much

I understand my child's point of view. What have you discovered?

1 2 3 4 5

Not at all Very Much

I am able to understand what my child needs in relationship to his needs, desires, wants, etc. What are these?

1 2 3 4 5

Not at all Very Much

I feel like the therapist and I are working in a partnership.

1 2 3 4 5

Not at all Very Much

I would like the therapist to provide me feedback on my parenting skills. Which ones specifically?

1 2 3 4 5

Not at all Very Much

I would like the therapist to provide me feedback on my relationship with my child.

1 2 3 4 5

Not at all Very Much

My level of anxiety/stress about my child's presenting issues.

1 2 3 4 5

Not at all Very Much

My level of anxiety/stress about parent consultations.

1 2 3 4 5

Not at all Very Much

The dynamics in the family are changing. What do you observe?

1 2 3 4 5

Not at all Very Much

I believe that every family member hat a part in my child's presenting issues.

1 2 3 4 5

Not at all Very Much

***Questions obtained from Child Parent Relationship Therapy program by:** *Landreth, G.L. & Bratton, S. C. (2006).* Child parent relationship therapy (CPRT): A 10-session filial therapy model. *New York, NY: Routledge.*

Assessment questions developed from mining report by: Steen, R.L. (2010). Parent consults: Beyond engagement. Association for Play Therapy Mining Report. October, 2010. Retirieved from www.a4pt.org.