Child-Centered Play Therapy Session Clinical Notes

Client name _____ Date _____ Time of session _____

Counselor _____ Session no. _____ Length of session _____

Transitioned into session

☐ enthusiastically   ☐ wearily   ☐ anxiously   ☐ irritably   ☐ tentatively   ☐ excitedly

☐ boastfully   ☐ begrudgingly   ☐ calmly   ☐ inquisitively   ☐ merrily   ☐ _____

as evidenced by _____

Toys used

☐ action heroes/soldiers	☐ cars/trucks	☐ animals: domestic, zoo, dinosaurs, _____
☐ bop bag/egg cartons/socker bopper	☐ dress-ups/masks	☐ water
☐ baby dolls/bottle	☐ telephone	☐ camera
☐ dollhouse/small figures	☐ guns/handcuffs/rope	☐ puppets
☐ crayons/markers/whiteboard/paint	☐ swords/noodles/shields	☐ kitchen/dishes/food
☐ sand/miniatures	☐ doctor kit	☐ money/cash register
☐ blocks/Legos	☐ basketball/hoop/balls	☐ _____

Themes

☐ helpless/inadequacy	☐ loneliness	☐ aggression/revenge
☐ confusion	☐ self-esteem/self-worth	☐ fears/anxiety
☐ safety/security/protection	☐ good versus evil	☐ nurturing/self-care/healing
☐ anger/sadness	☐ death/loss/grieving	☐ trust/betrayal
☐ _____	☐ _____	

Subjective feelings expressed

HAPPY: relieved, satisfied, pleased, delighted, excited, surprised, silly, _____

SAD: disappointed, hopeless, pessimistic, discouraged, lonely, _____

ANGRY: impatient, annoyed, frustrated, mad, mean, jealous, _____

AFRAID: vulnerable, helpless, distrustful, _____

Session narrative

Include subjective feelings and themes, significant verbalizations, "firsts," additive or cycling play, description of role, or other content.

_____

_____

_____

_____

_____

Prosocial behaviors displayed

☐ manners   ☐ care taking   ☐ self-control

☐ sharing   ☐ respect   ☐ picking up

☐ empathy   ☐ mutuality   ☐ apologizing

☐ problem solving   ☐ _____   ☐ _____

Limits set and response of the child

_____

_____

_____

Transitioned out of session

☐ enthusiastically   ☐ wearily   ☐ anxiously   ☐ irritably   ☐ tentatively   ☐ excitedly

☐ boastfully   ☐ begrudgingly ☐ calmly   ☐ inquisitively ☐ merrily   ☐ _____

as evidenced by _____

Reminders/other notes

_____

_____

_____

_____

Self-Supervision Form for Child-Centered Play Therapy Sessions

Date _____ Date of review _____

Child's name _____ Age _____ Session no. _____

1. List feelings expressed by the child. Put an "X" next to feelings you reflected. Put an "O" next to feelings you could have reflected.

☐ _____   ☐ _____

☐ _____   ☐ _____

☐ _____   ☐ _____

☐ _____   ☐ _____

☐ _____   ☐ _____

☐ _____   ☐ _____

☐ _____   ☐ _____

☐ _____   ☐ _____

☐ _____   ☐ _____

☐ _____   ☐ _____

2. My overall responses to child's feelings. Give examples and evidence.

   • Were they accurate?

   • Were they complete?

   • Were they timed appropriately?

   _____

   _____

3. Which of the child's feelings, if any, did I not respond to appropriately?

   _____

   _____

4. What kind of error was committed in responding inappropriately? (Give specific examples.)

- Failure to respond at all.
- Failure to respond until much later.
- Addressing action instead of feeling.
- Mislabeling of feelings.
- Failure to match own degree of emotion with that expressed by child.

_____

_____

5. Frequency of responses. (Give specific examples.)

- Balanced.
- Too few responses made to demonstrate understanding and acceptance of child.
- Too much talking.
- Failure to make succinct responses.
- Play-by-play description.
- Too much interest to unimportant details.
- Other?

_____

_____

6. Were limits enforced appropriately?

- Too many. (What's the evidence?)
- Too few. (How do you know?)
- Not enforced? (Why not?)
- Other?

_____

_____

7. Was structuring provided appropriately? (How do you know?)

- Opening
- Five minutes
- One minute
- Closing
- Was timing appropriate?

_____

_____

8. Was factual information provided appropriately? If not, how was the error made?

- Refused to provide an answers, reflecting child's wish for an answer beyond a reasonable point.
- Too much information provided, more than required.
- Misleading information provided, avoiding facing the truth.

_____

_____

9. Proximity

- Too close.
- Too far away.
- Child looked uncomfortable with distance.
- Adult looked uncomfortable with distance.

_____

_____

10. Language

Adult used language appropriate for the child's age and cognitive development.

Give three examples.

_____

_____

_____

11. Control of adult's feelings. Give examples.

    - Adequate.
    - Own opinions, evaluations, judgments crept in.
    - Voice revealed contradictory feelings.
    - Appeared uninterested, distracted.

    _____

    _____

12. Adult carried off technique(s) comfortably? If not, what was evidence to suggest otherwise?

    - Adult seemed uncomfortable. How?
    - Child criticized or rebuffed technique(s).

    _____

    _____

13. Adult is comfortable with child's direction of the session. Does not attempt to divert by open or subtle means. If not, explain the error.

    _____

    _____

14. Apparent themes in the child's play.

    _____

    _____

15. What did you like about the child?

    _____

    _____

16. What about this child reminds you of yourself?

    _____

    _____

17. What's your overall feeling about the session?

_____

_____

18. Most positive aspect of session.

_____

_____

19. Aspects to work on.

_____

_____

20. How was the process of completing this supervision form for you?

_____

_____

Additional notes

Child-Centered Play Therapy Implementation Checklist

Level of Strategy Implementation

Program Area/Quality Indicator	None	Minimal	Moderate	Complete	Exemplary
1. Introduction to Therapy					
Implementation Indicator 1.1: Building rapport with the client The therapist establishes a trusting relationship with the participating child.	①	②	③	④	⑤
Implementation Indicator 1.2: Assuring confidentiality The therapist successfully assures the parent(s) or caregiver(s) that all information disclosed will be kept strictly confidential. The therapist also assures the participating client, but only if he or she is capable of understanding the issues relating to confidentiality.	①	②	③	④	⑤
Implementation Indicator 1.3: Gathering background information The therapist collects information in a comprehensive manner to permit a thorough understanding of the phenomenological perspective of the child.	①	②	③	④	⑤
Implementation Indicator 1.4: Orientation to the program The therapist provides an introduction to child-centered play therapy, highlighting the key features and articulating the expected course of the intervention.	①	②	③	④	⑤
Implementation Indicator 1.5: Encouraging involvement The therapist uses a variety of techniques (including the use of toys) to facilitate child involvement, play, and verbalizations.	①	②	③	④	⑤

Program Area/Quality Indicator	Level of Strategy Implementation				
	None	Minimal	Moderate	Complete	Exemplary
Implementation Indicator 1.6: Developing and using an appropriate play therapy environment	①	②	③	④	⑤
The therapist introduces and uses appropriate playroom materials.					

2. Treatment

Implementation Indicator 2.1: Structuring the relationship	①	②	③	④	⑤
The therapist introduces the parameters and nature of the play therapy relationship.					
Implementation Indicator 2.2: Acknowledging the culture of children	①	②	③	④	⑤
The therapist acknowledges and demonstrates appreciation of the developmental and sociocultural perspectives of the child.					
Implementation Indicator 2.3: Role-playing to identify feelings, and behaviors	①	②	③	④	⑤
The therapist and the child engage in role-play to help the child identify feelings and behaviors.					
Implementation Indicator 2.4: Establishing limits	①	②	③	④	⑤
The therapist sets limits, as needed, to provide additional structure to sessions and to maintain safety.					
Implementation Indicator 2.5: Therapeutic responses	①	②	③	④	⑤
The therapist provides ongoing responses calibrated to help the child in feeling understood, in becoming aware of his or her responsibility in the therapeutic relationship, and in gaining insight into his or her behavior.					

Level of Strategy Implementation

Program Area/Quality Indicator	None	Minimal	Moderate	Complete	Exemplary
Implementation Indicator 2.6: Role-playing and play to improve coping skills The therapist and the child act out scenarios to provide an opportunity for the child to practice coping skills and to utilize a problem-solving approach to difficult situations.	①	②	③	④	⑤
Implementation Indicator 2.7: Outcome indicators for clients with family problems When family problems are diagnosed, the therapist works to establish a range of outcomes intended to improve, where needed, the child's communication, relational, and coping skills.	①	②	③	④	⑤
Implementation Indicator 2.8: Outcome indicators for clients with educational problems When educational problems are indicated, the therapist works to establish a range of outcomes intended to improve, where needed, the child's communication, relational, and coping skills.	①	②	③	④	⑤
Implementation Indicator 2.9: Outcome indicators for clients with mental health problems When mental health problems are diagnosed, the therapist works to establish a range of outcomes intended to improve, where needed, the child's communication, social, and emotional coping skills.	①	②	③	④	⑤