

**The Georgia Department of Corrections
Office of Reentry Services
Thinking for A Change (T4C) Facilitator
Competency Evaluation Form**

Site:	Evaluation Date:
Facilitator:	Initial Enrollment:
Date group started:	Current Enrollment:
Class Time:	Attendance:
Session/Lesson:	Gender:
Evaluator:	Overall Score: <u> </u> /100

A	Facility and Preparation	Yes	No	NA	Pts
1	Was the room size adequate for the group and were the seats set up in a horseshoe or circular formation?				2
2	Has the facilitator attended the required Boosters per SOP?				5
3	Did the facilitator and participants arrive to begin the group on time and did the group end on time?				2
4	Were DR's and/or extra homework given as evidence of enforcement of rules (i.e., thinking reports, additional assignments)?				2
5	Did the facilitator have rules and sanctions regarding missing groups, tardiness, classroom behavior, and participation posted in the room?				2
6	Was the number of participants within guidelines based on the start date?				2
Subtotal: <u> </u> /15					
Comments:					

B	Group Process/Organization	Yes	No	NA	Pts
7	Did the facilitator review key points from the previous lesson?				2
8	Did all the participants review their homework and was it written on the correct supplements?				2
9	Did the facilitator adhere to the lesson plan for the day?				2
10	Did the facilitator model the skill correctly to the class prior to allowing them to attempt it?				4
11	Did each of the participants model the new skill as the main actor?				3
12	Were the participants corrected if they did not role model the skill correctly?				2
13	Did the facilitator use a variety of instructional strategies (overhead, transparencies, flipcharts, PowerPoint Slides, dry erase board)?				3
14	Was the facilitator's pace balanced so it was not too slow or too fast?				2
15	Did the facilitator's summary of the lesson at the end cover key issues of the lesson?				2
Subtotal: <u> </u> /22					
Comments:					

Retention Schedule: Upon completion, this competency evaluation form should be kept on file, for review by Office of Reentry Services, for one (1) year.

C	Facilitation/Delivery and Response to Participant's Use of Skills	Yes	No	NA	Pts
16	Did the facilitator allow the offenders to figure out that their thinking is what's causing the behavior without telling them?				2
17	Was the facilitator objective/open-minded towards participants?				2
18	Did the facilitator ensure that the group understood the skill/concepts being taught?				3
19	Was the facilitator able to motivate participants to learn and practice a new skill?				3
20	Did the facilitator pay attention to cognitive processes instead of content? Did the facilitator concentrate on the thinking behind the behavior and not get caught up in the situation or just going through the lesson?				4
21	Did the offender practice the skill until they did the skill correctly?				4
22	Was there a balance between participants and coach's discussion where the facilitator did not dominate the group process?				4
23	Did the facilitator pay attention to the participant's need for opportunities to practice?				2
24	Did the offender understand the skill before the facilitator moved on to the next point?				2
25	Did the facilitator deal effectively and appropriately with participants who dominated the group discussions?				2
Subtotal:					<u>28</u>
Comments:					

D	Sensitivity to Participant's Feelings	Yes	No	NA	Pts
26	Did the facilitator keep the participants safe from ridicule from other participants?				2
27	Was the facilitator able to identify the participant's feelings, beliefs, thoughts, or attitudes that will assist in self-discovery and self-awareness?				2
28	Did the facilitator demonstrate empathy with participants and show respect?				2
29	Did the facilitator confront participants without demeaning them?				2
30	Did the facilitator have professional detachment and set boundaries with participants (did not discuss personal issues, avoids inappropriate use of authority, keeps an appropriate leadership (not friendship) role with participants)?				2
Subtotal:					<u>10</u>

E	Paperwork	Yes	No	NA	Pts
31	Was an individual interview conducted with each participant prior to beginning class?				2
32	Were Pre- and Post-Tests scored and entered in SCRIBE?				2
33	Is the facilitator completing the class sign-in sheet and accountability rosters correctly?				2
34	Was the Program Data Form correct and submitted within 24 hours for entry into SCRIBE?				2
35	Are the Participant Feedback Forms being utilized when the participant is terminated from class?				2
36	Did the facilitator use the correct supplements for homework and classroom assignments?				2
37	Were the participants given skill cards?				3
38	Did the facilitator have a copy of the Breakfast Club clip?				4
39	Did participants transfer out of program due to non-security issues?				4
40	Are missed classes being made up and then documented in SCRIBE?				2
Subtotal:					<u>25</u>
Overall Score: <u>100</u>					

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Paperwork Review: SCRIBE active list, SCRIBE termination list, Program Data Form, Offender Incarcerated Report, Class Sign-In Sheet, Pre and Post-Tests, Participant Feedback Forms, PIC Eligible Offenders, Activity Rosters, Dorm Rosters, Master Schedule, and Training Records.

Next Booster (s):
Facilitator Comments: