

## Clinical Assessment of Modes

(Observer Version 2.0)

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Taylor, R.R. & Popova, E.S. (2015)

The purpose of our research study is to better understand the different ways that health care providers communicate with their patients in therapy. This questionnaire was designed to measure patient-provider interaction based on the Intentional Relationship Model (Taylor, 2008).

### PART 1: Overall Impressions

1. Overall, based on this session alone, how often did you observe incongruence in therapeutic mode use?

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

2. Overall, based on this session alone, how often did you observe mixed mode use?

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

3. Overall, based on this session alone, how often did you observe a mode mismatch between the provider and the needs of the patient?

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

#### Reference:

Taylor, R. R. (2008). *The intentional relationship: Occupational therapy and use of self*. Philadelphia, PA: F.A. Davis.

#### Citing this assessment:

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**A. Advocating Mode**

**1. The provider helped the patient get access to resources or people in the community in which he or she lives.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**2. The provider and patient talked about legal/educational/social rights for people with disabilities.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**3. The provider reminded the patient that other people like them shared similar experiences, feelings, and/or thoughts.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**4. The provider made the patient aware of individuals, social groups and/or places in the community that were not a part of the hospital or clinic.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**5. The provider helped the patient make contact with people who had a similar experience or disability.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**B. Collaborating**

**6. The provider allowed the patient to choose what would happen next.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**7. The provider made sure that the patient worked on what mattered most to him or her.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**8. The provider improved or changed something when the patient pointed out that it was not helpful.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**9. The provider said or did things that made the patient feel like he or she was an active participant and decision-maker in the therapy process.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**10. The provider gave the patient control over what he or she accomplished.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**C. Empathizing**

**11. The provider listened to the patient with true interest.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**12. The provider asked the patient questions with a high level of sensitivity such that the**

**patient felt comfortable.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**13. The provider tried to understand the patient's thoughts and feelings, no matter what they were.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**14. The provider shared something about his or her personal experience so that the patient did not feel alone.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**15. The provider tried hard to understand the patient's needs by listening, observing and/or asking as many questions as necessary.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**D. Encouraging**

**16. The provider pointed out what the patient was good at doing.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**17. The provider made the patient feel confident about what he or she was doing.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**18. The provider's positive attitude showed the patient that he or she believed the patient was ready to do something the patient thought he or she could not do.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**19. The provider said things that made the patient feel hopeful.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
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Never	Rarely	Occasionally	Frequently	Very Frequently
<b>20. The provider gave the patient a compliment or other kind of reward for something he or she did.</b>				
<input type="checkbox"/> Not attempted.				
<input type="checkbox"/> Attempted successfully:				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<input type="checkbox"/> Attempted but unsuccessful:				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently

<b>E. <u>Instructing</u></b>				
<b>21. The provider explained what was happening or told the patient what would happen next.</b>				
<input type="checkbox"/> Not attempted.				
<input type="checkbox"/> Attempted successfully:				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<input type="checkbox"/> Attempted but unsuccessful:				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently

<b>22. The provider told or demonstrated to the patient how to improve his or her performance or behavior.</b>				
<input type="checkbox"/> Not attempted.				
<input type="checkbox"/> Attempted successfully:				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<input type="checkbox"/> Attempted but unsuccessful:				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently

<b>23. The provider gave the patient clear directions.</b>				
<input type="checkbox"/> Not attempted.				
<input type="checkbox"/> Attempted successfully:				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**24. The provider showed a sense of conviction when making a recommendation.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**25. The provider taught the patient something.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**F) Problem-solving**

**26. The provider helped the patient to think about a problem or activity in a different way.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**27. The provider explained different alternatives when guiding the patient to make a decision or to complete an action.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently



Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**28. The provider helped the patient think about a problem in a clear-headed, non-emotional way.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**29. The provider helped the patient consider many different ways of doing things.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

**30. The provider helped the patient look at a problem by breaking it down into smaller parts.**

Not attempted.

Attempted successfully:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently

Attempted but unsuccessful:

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Very Frequently



**PART 3: Clinical Assessment of Suboptimal Responses**

**(Observer Version 2.0)**

**Taylor, R.R., Popova, E. & Wong, S. (2014)**

<b>1. The patient needed something and the provider made an excuse or did not adequately address the patient's need.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<b>2. The provider minimized or dismissed the patient's concerns or feelings.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<b>3. The patient showed a lack of understanding of what was happening during treatment and this was not fully addressed by the provider.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<b>4. The provider was uncomfortable around the patient.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<b>5. The provider was inappropriately cheerful or overly polite and the patient did not take comfort in it.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<b>6. The provider was overly critical or failed to acknowledge the patient or compliment the patient for trying.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<b>7. The provider was too casual with the patient, and it made the patient uncomfortable.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<b>8. The provider physically distanced him or herself from the patient.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently

**9. The provider talked over the patient, interrupted him or her and/or did not stop to hear what he or she was saying.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**10. The provider told the patient things about his or her personal life, political beliefs, religious beliefs, or otherwise imposed his or her personal opinions in a way that made the patient uncomfortable.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**11. The provider found humor in something the patient said or did during treatment and it made the patient uncomfortable.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**12. The provider shared judgmental glances or facial expressions with other health care professionals during treatment that the patient may have noticed.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**13. The provider was emotionally distant, too formal and/or was not fully present for the patient.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**14. The provider conveyed a feeling/undertone of condescension, judgment, or superiority.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**15. The provider referred to the patient with a pet name/nickname that the patient did not appear to appreciate.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**16. The provider was rushing the patient or rushing through treatment.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**17. The provider touched or handled the patient without any warning or touched the patient in a way that made him or her uncomfortable.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**18. The patient did not appear to trust the information that the provider provided.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**19. The provider was controlling or dominated the treatment in a way that made the patient uncomfortable.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**20. The provider focused too much on the patient's problems and not enough on his or her feelings or experience of treatment.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**21. The provider avoided answering the patient's questions directly.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**22. The provider talked about others in a negative or disparaging way in the patient's presence and it made the patient uncomfortable.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**23. The provider made jokes or used humor in a way that made the patient uncomfortable.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**24. The provider's expectations about what the patient could do were too high.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**25. The provider said things in a way that made the patient feel anxious or pessimistic about his or her situation/condition.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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**26. The provider responded to the patient's feedback, suggestion, or opinion in a defensive manner.**

1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
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<b>27. The provider openly argued with the patient in a way that was not helpful to the patient.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<b>28. The provider said something in a tone that was overly dramatic or patronizing to the patient.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<b>29. The provider used a shallow cliché, phrase, or idiom that was not helpful for the patient.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<b>30. The provider used technical language or did not speak to the patient in a way that the patient fully understood.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<b>31. The patient disclosed something personal to the provider and the provider's response was incomplete/inadequate.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<b>32. The provider did not listen carefully and showed a lack of understanding of the patient.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<b>33. The provider spoke to or otherwise regarded the patient in a way that conveyed a lack of sensitivity or respect toward the patient's diversity (i.e., race, ethnicity, religion, gender, sexual orientation, religious views or other personal characteristic).</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<b>34. The provider asked the patient questions that were too personal or were experienced as intrusive by the patient.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<b>35. The provider left too many decisions up to the patient and the patient appeared lost or overwhelmed.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently
<b>36. The provider was too analytical with the patient or tried to use logic that did not work for the patient.</b>				
1 Never	2 Rarely	3 Occasionally	4 Frequently	5 Very Frequently

## PART 4: Assessment of Patient Interpersonal Characteristics

### (Observer Version 2.0)

#### Taylor, R., & Popova, E. (2015)

1. **Communication Style** - the patient's approach to interpersonal communication using formal (e.g., spoken or signed language) and informal (e.g., gesture, facial expression) means

- Capable of formal/informal means of communication but refuses to communicate
- Reluctant to communicate and provides limited responses when questioned or encouraged
- Tangential, hyperv verbal, rambling or otherwise incoherent while communicating
- Acceptable/appropriate pace, quality, and quantity of communication
- Not able to assess (e.g., not able to communicate using formal or informal means)

**Notes:**

2. **Capacity for Trust** - the patient's approach to working with and trusting others

- Demonstrates lack of trust and is extremely cautious around everyone
- Demonstrates lack of trust in the provider through passive or nonverbal means
- Actively questions the adequacy, ultimate effectiveness, or safety of the provider's approach
- Engages in behaviors that test provider's level of commitment to continue working with the client
- Able to appropriately work with and trust others
- Not able to assess

**Notes:**

3. **Need for Control** - the degree to which a patient attempts to assume control over what is said and done during therapy

- Strives for an excessively high level of control over therapy
- Prefers to take the lead in therapy
- Prefers the provider to take the lead in therapy
- Indifferent, passive, or relinquishes all control to the provider
- Actively participates and shares control in an appropriate way with the provider
- Not able to assess

**Notes:**

4. **Capacity to Assert Needs** - the patient's ability to discuss what he or she wants from the provider

- Avoids recruiting assistance, making a request, or asking for support, even when something is needed
- Asserts needs in an indirect, ambivalent, or manipulative manner
- Asserts needs in an excessive or demanding manner
- Discusses needs openly, directly, and appropriately
- Not able to assess

**Notes:**

5. **Response to Change or Challenge** - the patient's ability to respond to a change or challenge, including patient's response to an aspect of treatment that causes pain or discomfort

- Becomes irritated or angry
- Becomes fearful or anxious
- Becomes demoralized or self-doubting
- Shuts down, gives up, or avoids
- Accepts change, challenge or frustration and attempts to manage it appropriately
- Not able to assess

**Notes:**

6. **Affect** - the patient's expression of emotion

- Consistently demonstrates highly emotional or dramatic presentation
- Demonstrates emotional regulation difficulties (e.g., occasionally demonstrates periods of intense emotion)
- Does not demonstrate expected level of emotion given the circumstance (e.g., apathetic)
- Demonstrates inappropriate emotion that is inconsistent with the circumstance (e.g., laughs when presented with sad news)
- Emotional reactions are appropriate, consistent with the circumstances, and match the content of what is being communicated (e.g., shows emotion in a usual/expected manner)
- Not able to assess

**Notes:**

7. **Predisposition to Giving Feedback** - the degree to which the patient is comfortable with and predisposed towards providing feedback to the provider

- Does not provide feedback, even when solicited
- Only provides positive feedback
- Provides feedback in a protective, reluctant, or indirect manner
- Provides feedback in a excessive, critical, or overly negative manner
- Provides solicited and unsolicited feedback in an appropriate and acceptable manner
- Not able to assess

**Notes:**

8. **Capacity to receive positive feedback** - the patient's level of comfort with receiving positive feedback and the patient's response to this feedback (e.g., feedback on what the patient is doing well)

- Dismisses, ignores or minimizes feedback
- Becomes irritated, insulted or angry
- Becomes defensive
- Accepts feedback and responds appropriately



Not able to assess

**Notes:**

9. **Capacity to receive negative feedback** - the patient's level of comfort with receiving negative feedback and the patient's response to this feedback (e.g., feedback on what the patient should improve or change)

- Dismisses, ignores or minimizes feedback
- Becomes self-critical or deflated
- Becomes passive-aggressive
- Becomes defensive
- Becomes overtly angry
- Accepts feedback and responds appropriately
- Not able to assess

**Notes:**

10. **Response to Human Diversity** – the patient's response to a wide range of differences that distinguish individuals from one another

- Refuses to work with or otherwise rejects the provider because of his or her personal characteristics or appearance
- Shows disrespect for the provider's personal characteristics
- Questions the provider about his or her personal characteristics or appearance
- Makes general proclamations about preferences for certain characteristics
- Respectful of ways in which the provider differs and able to discuss differences in an appropriate manner
- Not able to assess

**Notes:**

11. **Orientation Toward Relating** - the level at which the patient expects and prefers the therapeutic relationship to be conducted

- Prefers a formal or business-like relationship characterized by structure and emphasis on tasks of therapy rather than his or her emotions and feelings
- Prefers a logical or analytical approach when disclosing his or her emotions and feelings and does not appear to want or take comfort in an emotional or empathic response from the provider
- Expresses a desire for empathy when disclosing his or her emotions and feelings and appears to be comforted by provider's emotional or empathic response
- Expresses a desire for an excessive level of care, empathy, or emotion from the provider and may show signs of dissatisfaction with the usual professional boundaries
- Not able to assess

**Notes:**

**12. Preference for Touch** - the patient's personal preference and interpretation of touch

- Difficulty with touch is a symptom that is the focus of therapy or derives from a pain state (e.g., allodynia or complex regional pain syndrome)
- Clearly articulated an aversion to any form of touch (e.g., technical or comfort based)
- Physically shrinks away from or shows emotional signs of discomfort with any form of touch (e.g., technical or comfort based)
- Tolerates touch when it serves the technical purposes of therapy but rejects any form for comfort based touch
- Responds positively to technical and comfort based touch
- Initiates or asks for caring touch from the provider
- Not able to assess

**Notes:**

**13. Capacity for Reciprocity** - the capacity of giving and sharing between patient and the provider

- Does not initiate any act of reciprocity, gratitude or acknowledgement of the provider as an individual
- Capable of a minimal level of reciprocity and acknowledges the provider through small gestures or brief glances
- Capable of engaging in an appropriate level of reciprocity (e.g., thanking the provider for his or her efforts, talking about concerns, feelings and reactions openly with the provider, showing an interest in the provider as a person)
- Not able to assess

**Notes:**

## PART 5: Qualitative Assessment of Patient Interpersonal Characteristics

(Observer Version 2.0)

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Taylor, R. (2008)

Scoring for Patient Characteristics Rating Scale is *qualitative*. Please make any additional notes relevant to the session and the provider-patient interaction that were not adequately captured elsewhere in the space below.