**Part A (to be completed shortly after the consultation):**

1. How do you feel when completing this worksheet (now)?

2. What was noteworthy for you in our last visit? Thoughts, emotions, new perspectives?

3. On a scale of 0-10, how would you rate the following?

Not at all > A little > Somewhat > Very important > Significant

1       2       3       4       5       6       7       8       9       10

a) Efficacy / utility of the consultation: / 10

What helped you?

What did not help you?

b) How did you feel connected with your therapist ?    / 10

c) How did you feel committed / involved in the discussion ? / 10

d) How present were you during the consultation ? / 10

e) How emotionally connected did you feel ? / 10

4. What could make your consultation more useful or make it a better experience?

5. Is there something that you struggled to say or ask?

6. Did you experience something in our consultation which is similar to your difficulties or problems in everyday life?

7. What risks did you take during the consultation or what progress have you made that could translate into / positively impact your daily life?

8. How much were you open responding to questions numbered 1 to 6 (percentage) :%