UNIVERSITY OF DENVER

DEPARTMENT OF PSYCHOLOGY

HANDBOOK FOR CLINICAL STUDENTS

2020-2021

Introduction

This handbook complements, but does not replace, the psychology department and graduate school handbooks for graduate students. Students need to be familiar with the rules and requirements in all three handbooks, as all are applicable to them. Students have the option of either meeting the curriculum requirements described in this handbook that were in place when they enrolled in the department or meeting the curriculum requirements in the clinical handbook from the current year. Students cannot, however, mix the two sets of rules, meeting some requirements from the year of enrollment, and other requirements from the current year. Additionally, the current year of the graduate school handbook is the one to be used regarding general policies (e.g. incompletes, grade appeals, etc.). Please remember that the handbooks that students received when they matriculated are the ones that apply (unless the student informs of us of a desire to use a more recent handbook.). The DCT or the assistant to the DCT can provide an electronic copy upon request.

It is, however, strongly recommended that students review the latest version of the handbook as well as the version they received at the time of matriculation. Although the requirements are based on the year of matriculation, many updates about other matters are added to the handbook. Virtually all these updates are reported in the clinical area minutes that are shared with graduate students and faculty on an annual basis, but one may not remember this information years after reading the minutes.

Mission of Program

Our mission is to help advance the field of clinical psychology—both by the research we do and through the students we train. This mission is reflected in five emphases that make our program unique.

1. Clinical Science—We believe that the practice of clinical psychology requires a stronger scientific/research foundation. We ascribe to a clinical science model, and belong to the Academy of Psychological Clinical Science, a coalition of doctoral training programs that share a common goal of producing and applying scientific knowledge to the assessment, understanding and amelioration of human problems.

2. Clinical Child Psychology—Children and families are underserved populations. As clinical scientists, we believe the field needs a stronger knowledge base regarding developmental psychopathology. It also needs to develop and implement more effective assessment and intervention techniques for children and families from diverse backgrounds.

Accredited by the APA in clinical psychology, our program is one of the few programs that emphasizes training in clinical child psychology and one of the very few that approaches clinical child psychology from a clinical science model. All of our clinical faculty, rather than just one or two, have special interests in children and families.

While we maintain an emphasis on children and families, students also receive training in adult psychopathology, assessment, and psychotherapy, and have opportunities to do clinical work with adult clients individually and as couples. Students are additionally trained to work with parents, family members, teachers, and community members in their roles that are relevant to children.

3. Developmental Cognitive Neuroscience—Our program is one of the few programs in the world that offers graduate training in clinical child neuropsychology. All students in our program receive at least a year of such training. Many clinical students are also part of the developmental cognitive neuroscience program in which they receive more extensive training in clinical child neuropsychology and can pursue careers in this specialty.

4. An Emphasis on Diversity and Inclusive Excellence. All students are trained to be sensitive to individual differences and the many dimensions of diversity in approaching research and clinical issues; they also learn the importance of continued personal and professional growth relevant to inclusive excellence. Both research and clinical opportunities exist for working with diverse populations. Further detail is provided in the Diversity and Inclusive Excellence statement below.

5. An Emphasis on the Public Good. The University's vision is to be a great private university dedicated to the public good. Consistent with the University's vision, our research, our training of students, and clinical service contribute to the public good—locally, nationally, and internationally. This value is manifested in various opportunities for doing community-based research which is a distinctive feature of our program.

Program Aims

<u>Aim 1:</u> To produce Ph.D. psychologists who have the requisite knowledge and skills for entry into the field of clinical psychology.
<u>Aim 2:</u> To produce Ph.D. psychologists who can contribute to scientific knowledge
<u>Aim 3.</u> To produce Ph.D. psychologists who can carry out science-based clinical work.
<u>Aim 4:</u> To produce Ph.D. psychologists who approach their work with knowledge of and sensitivity to ethical issues and to developmental, cultural, and individual differences.
<u>Aim 5:</u> To produce Ph.D. psychologists who can advance the field of clinical psychology by using clinical science.

Degree Flexibility

We aspire to have all our faculty, students, and graduates help advance the field of clinical child psychology. Our program, however, is characterized by a high degree of flexibility and a wide range of apprenticeship opportunities, providing students opportunities to develop specializations of their choice.

Our graduates work in a diverse array of professional careers, including clinical science research careers in universities, institutes, and medical schools, but also as teaching positions, scientifically based clinical practice, public service and public policy.

We want our graduates to be leaders in whatever career choice they make.

Diversity and Inclusive Excellence

The University of Denver's statement on diversity is presented in the following paragraphs. Our program makes a concerted effort to carry out those ideals in our research, in our clinical work, in the classroom and in our relationships with clients and our colleagues.

We believe that one mark of a leading university is its commitment to diversity and the concomitant practice of recognizing and valuing the rich experiences and world views of individuals and groups.

Diversity yields many benefits to institutions that successfully cultivate diversity within their educational, research and community service activities. By achieving and maintaining a multicultural constituency of administrators, faculty, students and staff, an institution successfully connects with the demographic reality of society. The institution gains an edge in educational and research opportunities and in preparing students for living and working in an increasingly diverse and global society.

The University of Denver community is strongly committed to the pursuit of excellence by including and integrating individuals who represent different groups as defined by race, ethnicity, gender, sexual orientation, socioeconomic background, age, disability, national origin and religion.

The University's commitment to diversity in particular requires that we attract members of historically under-represented racial and ethnic groups. To create a rich academic, intellectual and cultural environment for everyone, our concern must extend beyond representation to genuine participation.

Our commitment must entail the creation of initiatives and programs designed to capitalize on the benefits of diversity in education, research and service. In sum, our actions must speak louder than our words. We also believe that in order to achieve our goals, we must create a campus climate with an ethos of respect, understanding and appreciation of individual and group differences. We must encourage the pursuit of social justice within and outside the institution.

A positive campus climate requires the University's sincere willingness to include all its diverse stakeholders in the decision-making process. No individual or group can be marginalized or systematically excluded. We aim for change within the University and ultimately, beyond the University. We seek to be leaders in the creation of a more inclusive and just world.

Accreditation

The clinical psychology program has been fully accredited in clinical psychology since 1964 by the American Psychological Association which can be contacted at:

Office of Program Consultation and Accreditation
American Psychological Association
750 First Street NE
Washington, D.C., 20002

Website: APA accreditation site
Phone: 202-336-5979
Fax: 202-336-5978

Course Requirements

120 credits are now required for the Ph.D. The specific requirements concerning statistics, ethics, and other department requirements are delineated in the department's handbook of study and in the graduate bulletin. Students must get a grade of B- or better in order for a course to count as meeting a specific content requirement such as Research Design (A limited amount of C work is permissible for meeting the requirement of taking 120 hours of graduate coursework. See Graduate Bulletin). The following is a summary of the requirements at this time. In addition to the departmental requirements, students must take the following courses:

Clinical Science

    PSYC 4565   Systems of Psychotherapy and
    PSYC 4512   Proseminar in Psychopathology

Clinical Assessment (both required)

    PSYC 4411   Assessment - Cognitive
    PSYC 4413   Assessment – Psychopathology (Social, Emotional, and Behavioral)

Research Design

    PSYC 4295   Research Design and Inference

Multicultural Competency

    PSYC 4571   Multicultural Issues in Mental Health

Quantitative

    PSYC 4300   Correlation & Regression

    Advanced Stat Course (1 from below):
    PSYC 4330   Analysis of Variance
    PSYC 4350   Structural Equation Modeling for the Social Sciences
    PSYC 4355   Multilevel Modeling for the Psychological Sciences:
                   Theory and Applications

Departmental Cores (25 credits required)

    PSYC 4002   *Proseminar in Human Memory and Cognition*
    PSYC 4021   *Proseminar in Social Psychology*
    PSYC 4526   *Proseminar in Cognitive Neuroscience*
           OR   PSYC 4525   *Proseminar in Developmental Neuropsychology*
           OR   PSYC 4262   *Proseminar in Affective Neuroscience*
    PSYC 4032   *Proseminar in Developmental Proseminar: Social/Emotional)*
    PSYC 4033   *Developmental Proseminar: Biological Processes*

Other Required Courses

      PSYC 4920   Ethics in Psyc Research & Practice (2 credits)
      PSYC 4925   Clinical Ethics and Professional Issues (2 credits)
      (The two ethics courses are typically taken simultaneously).

Advanced Clinical

This requirement is met by two advanced clinical courses and a rotation in the Child Neuropsychology Clinic. One of the advanced clinical courses must be an intervention course other than the required PSYC 4565 Systems of Psychotherapy (e.g. PSYC 4566 Systems of Psychotherapy II, PSYC 4620 Advances in Couples Interventions, PSYC 4625 Marital/Couples Therapy—Diverse Populations, PSYC 4518 Readings in Family Therapy). PSYC 4085 Stress & Health and PSYC 4688 Clinical Psychopharmacology are also advanced clinical courses, but do not meet the intervention course requirement study on Clinical Psychopharmacology.

DCN students currently are expected to do a year rotation in the Developmental Neuropsychology Clinic, seeing 8 cases. Non-DCN students currently are expected to do a year rotation in the Developmental Neuropsychology Clinic, currently seeing 6 cases. Caseloads may, however, change because of Clinic needs and supervision availability. Note: Other clinical and/or research practica credits do not count toward this requirement.

Counting a Course Twice
A single course cannot be counted toward two requirements. The one exception to this rule is certain courses such as Psych 4085 Stress and Health count as part of the DCN tool and advanced clinical. This exception was made because DCN students have additional requirements that would serve as tools from the clinical perspective.

Courses in Other Departments
Students need to receive advance approval from the area head and department chair to take a course outside the department. The approval should be obtained at least a quarter in advance. Many courses in other departments would be appropriate to take, but there are some courses in other departments that would not meet departmental requirements even though their titles may be similar. Additionally, courses that are not directly related to our training program cannot even be used to meet the 120-hour credit requirement.

Planning the Coursework
Coursework in the first year is pretty fixed (unless students have had prior graduate courses). After the first year, however, students should plan out the next three years of course work. Advanced students can be helpful and obtaining a copy of this year's course schedule and last year's schedule can provide some idea of what is likely to be offered. Typically, courses are offered every other year, and one of the core courses in each area is offered every year. However, this is not always the case because the relevant faculty might not always be available to offer the course. We try to keep students informed of these developments, but one implication of this is that it is to have some flexibility in course planning. Putting off requirements until the fourth year can entail some risk as the course may not be offered or may not be

offered at a time it can be taken. On the other hand, students may decide it is better to defer such a requirement because there is some course that is important for them to take earlier in their training.

Licensure Requirements
The website (https://www.du.edu/ahss/psychology/media/documents/licensure2020.pdf) contains a table indicating whether we believe we do or do not meet the educational requirements for licensure in each state and territory. At the same time, we cannot guarantee that our curriculum meets the requirements of the licensure boards in a particular state or territory as the regulations may change or be interpreted differently by the board. Licensure boards in some states do review transcripts and syllabi to determine if specific types of courses have been taken, especially core classes. Thus, it is a good idea to make sure the required courses are on the transcript and that you have retained a copy of all your syllabi; if a student takes an independent study as a means of meeting a requirement, the independent study should have the name of that requirement. Getting the name on the independent study requires an extra piece of paperwork; see the Graduate Program Administrator for details. Simply sitting in a class and not taking it for credit could pose problems in documenting that the class was taken. There may also be other additional requirements for licensure in these or other states or by credentialing agencies that we are unaware of. Students may want to examine the licensure laws of places they may end up residing.

Clinical Caseload Expectations Overview

Over the last few years, internship sites have been developing guidelines for the amount of clinical experience they expect applicants to accrue prior to application. As part of this development, many internship sites now list *minimum* number of *direct service* hours expected of applicants in order to be considered for internship training. (Direct service hours refer to face-to-face client contact in therapy, assessment, or consultation; however, during the COVID-19 pandemic, telehealth hours also count as direct hours. More information is below). Most students attain the requisite minimum hours listed by internship sites favored by students and our program. Nevertheless, in order to maintain our strong record of internship placement at some of the very best programs in the country, the clinical area has developed a set of guidelines for clinical training. These guidelines are outlined below along with the typical number of direct service hours per clinical experience. These guidelines or requirements for caseloads are subject to change during the graduate career. For example, it is possible that students will be expected to carry more cases in one of the clinics because of the need for cases to be seen in a timely manner. Alternatively, it is possible that a caseload may be lower because of limitations in available cases or supervisors.

Year 2
Developmental Neuropsychology Clinic
  DCN Students: 8 cases (totaling approximately 80 hours)
  Non-DCN Students 6 cases (totaling approximately 60 hours)

Evidence-Based Therapy Clinic
  2 weekly treatment cases (totaling approximately 80 hours)
  Students will be carrying two therapy cases per hour of supervision.

Year 3
Evidence-Based Therapy Clinic
  4 assessment cases (totaling approximately 40 hours)

Comprehensive Assessment Clinic
  3 weekly treatment cases (totaling approximately 120 hours)
  Students will be carrying three cases per hour of supervision.

Year 4
Evidence-Based Therapy Clinic
  2 weekly cases (totaling approximately 80 hours)
  Students will be carrying two cases per .75 hour of supervision.

Externship
  (5 to 8 clinical hours/week) (totaling 225–300 hours)

Year 5
Evidence-Based Therapy Clinic
3weekly cases (totaling approximately 120 hours)
 Students will be carrying three cases per hour of supervision.

These guidelines reflect what we expect students in different years will carry in 2020-2021. In the following years, we plan to reduce the number of cases in year 4 to 0 cases. Based on these guidelines, a typical student will accrue approximately 500 direct clinical hours by the end of year 4. Additional hours for internship applications can be accrued during year 5, at least up to the point of internship application around November 1. We recommend checking periodically to see if you are accumulating a sufficient number of hours as it can be difficult to catch up on the number of accumulated hours.

On average, many of the internship sites that our students attend list a minimum number of hours between 500 and 1000. Clinical research practica activities such as treatments delivered as part of a study, assessments of patients in a treatment study, and comprehensive diagnostic reports may also contribute to direct hours or support activities as practica if they are appropriately supervised and sanctioned by the area. When these hours are included with the foregoing clinical guidelines, students clearly exceed the minimum requirements of internship programs. We think that it is best, however, that these clinical research practica be considered as supplementary hours and not substitutes for traditional clinical hours. Thus, if one is trying to reach a goal of 500 or more direct hours, the preponderance of those hours should be from traditional clinical practica. The clinical faculty did not precisely indicate what a "preponderance of hours" was, because what is more important than a number per se is one's need to acquire the requisite breadth and depth in clinical work. Thus, if someone is primarily interested in clinical child psychology, they should probably treat a range of cases that might include different problems and treatment approaches. For example, one might want a PMT case, a CBT case, and a DBT or trauma case; one might some variation in the age and nature of the presenting problem. If one were primarily interested in neuropsychology, they would want to insure they had significant depth in neuropsychological assessments. If one were interested in adults, they would want to obtain relevant experiences with different kinds of problems and approaches with adults (e.g. couples work, CBT and perhaps DBT or ACT for different problems). Acquiring the breadth and depth of experiences and acquiring skills are much more important than hours per se. Some of these experiences and competencies can be acquired in clinical research experiences, but students will need traditional clinical experience to acquire others. Hence, we have described clinical research hours as supplementary. If a student does not expect to acquire collateral experiences such as those described in the paragraph, they should increase the amount of clinical experience that is acquired in the Developmental

Neuropsychology Clinic or CCFP. Students may also want to acquire additional assessment cases on externship as some internships could view our minimum number of assessment cases as relatively low. We encourage students might want to review their hours, experiences, and skills periodically with academic advisors, the director of the CCFP, or other faculty.

All clinical and clinical research practica must be approved in advance by the area. A list of approved practica is periodically circulated to students and faculty. A copy of this document can be obtained from the Director of Clinical Training at any time. This document also describes the criteria for a sanctioned practica. If a faculty member or student is interested in adding a new practica to the list, they should contact the Director of Clinical Training.

Each evaluation of clinical work on a practica or externship, including clinical research practica, must be based partially on a direct observation. Documentation of this observation is done as part of the standard clinical evaluation form.   Evaluations are done at least yearly, and often more frequently, and thus observations must be done at least yearly, and often more frequently. If a student has more than one supervisor conduct evaluations of a student on a practica or externship, each supervisor will need to conduct an evaluation for each evaluation period. Video observations are encouraged, but audiotapes are acceptable.

Students are required to keep track of their clinical hours on Time2Track. As part of the annual review, the academic supervisor and Director of Clinical Training will look at the number of hours accumulated that year to ensure that the report is accurate. APPIC is considering requiring that every supervisor verify the direct hours of the cases that they supervised each semester/quarter. This may or may not occur because some organizations have expressed concerns about the additional burden this may place on both students and supervisors. However, it would be a good idea to be prepared to do this if this policy becomes instituted. There are two ways you can do this on Time2Track. First, as part of tracking hours you indicate what the setting is. For example, you might indicate that it is the CCFP. But you could also break this down further and have subsettings such as a CCFP-Holm-Denoma setting, a CCFP Manczak setting, a CCFP-McGrath setting, etcetera. Second, it also appears that you can indicate who the supervisor is as a separate field—at least on the Time2Track app.

Additionally, it is important to keep track of telehealth and telesupervision; Telehealth can count if it meets the following requirements. Telehealth, for the purposes of the AAPI, focuses on two-way, interactive videoconferencing as the modality by which telehealth services are provided. In order to count the hours delivered using this technology the focus of the clinical application should include diagnostic and therapeutic services. Clinical applications of telehealth encompass diagnostic, therapeutic, and forensic modalities across the lifespan. Common applications include pre-hospitalization assessment and post-hospital follow-up care, scheduled and urgent outpatient visits, psychotherapy and consultation. This does not include phone sessions or clinical supervision. All services must be appropriately supervised by a licensed. Telesupervision did not count in the past, but currently counts toward direct hours during the pandemic. It will be important to keep track of what does and does not count when we return to primarily providing face-to-face work. Please note that not all states count these types of hours toward licensure and you should carefully review particular state regulations.

Finally, if you ask anyone who has applied to internships, they will tell you how important it is to meticulously keep ongoing records of clinical hours rather than trying to reconstruct them at a later point.

First Year Expectations

Typical Course Load
Research Design/Inference, Systems I or Psychopathology, Assessment – Cognitive, Assessment-Psychopathology (Social, Emotional, and Behavioral), Regression/Correlation are typically taken in the first year (plus one other course).

First Year Research Proposals
   1. Even before arriving on campus, students are encouraged to select an initial research mentor and begin working in an apprentice relationship.

   2. By the end of the Spring quarter, students will be expected to have proposed their master's thesis. Their proposal can take the form of a traditional prospectus or a grant proposal.

   3. The proposal will be reviewed by a committee of three, including at least one clinical faculty member. At least two members should come outside of the student's primary lab. Students can have more than three members on a committee, including individuals who are not on DU faculty (e.g. CU faculty). These individuals would have voting rights, just like the other members. (Approval by the Graduate School is required at the Ph.D. level).   Part of the committee's responsibility will be to determine the feasibility of completing the project on time. Thus, it will be important for members to distinguish between ideal and essential changes.

   4. Introductions to MA/Ph.D. proposals (and defenses) should a) be an overview of the topic (vs. a description of why the student was interested in the topic). b) should be approximately 5 minutes long and definitely should not exceed 10 minutes, c) may involve PowerPoint if desired, and d) are optional.

   5. If the student has not proposed by July 1, they may be placed on monitoring status. Please note that it is ultimately the student's responsibility for completing the proposal and having a meeting on time; difficulty in arranging a meeting in a short time is not a sufficient excuse. Students are encouraged to try to complete their proposals and contact their committees early as meeting times can be difficult to arrange in June. The monitoring status is continued until a) the MA/second year proposal is successfully proposed, b) October 1 of the second year, or c) there are sufficient problems to warrant being moved to probationary status or termination.

   6. If the student has not successfully proposed by October 1 of their second year, they may be placed on probationary status. This deadline will be enforced except under highly unusual circumstances; in such cases, the student may petition the area for an extension.

   7.   Students entering with an approved MA are also expected to develop a plan for their research. Specifically, the advisor and student should develop a short-written research plan for the first two years no

later than the end of the Fall quarter of the first year._Such plans should involve a written product such as a Ph.D. proposal, an NRSA proposal, journal submission, or chapter. The project should entail an extensive immersion into research. The student's progress will be evaluated on this plan.

    8. Students are required to successfully complete the Institutional Review Board's Education Program for the Protection of Human Subjects in Research sometime during their first year here.

Clinical Work
There is no clinical work in the first academic year. Students typically begin work in the Neuropsychology Clinic in the summer or the Fall of the second year.

Summer
Ours is a 12-month program and students typically continue research, and some clinical casework in the summer and breaks. Summer financial support is not guaranteed but students usually manage an RA, teaching a class, or a job placement. The entire Center for Child and Family Psychology will be closed for two weeks in early August. In addition, the Neuropsychology Clinic will be closed for part of July. Specific dates can be obtained from the clinic directors. Students should try to schedule all discretionary summer travel during the clinic closure. Being gone at other times causes a disruption to clinical care, and also can interfere with training activities.

Transferring Credits
Credits from prior graduate work need to be transferred in by the end of the first quarter.

Second Year Expectations

Typical Course Load
Six courses meeting requirements or electives. The following courses would be good courses to take in your second year if they are offered and you did not take them in your first year.

PSYC 4565	Systems of Psychotherapy
PSYC 4512	Proseminar in Psychopathology
PSYC 4571	Multicultural Issues in Mental Health
PSYC 4920	Ethics in Psychological Research & Practice
PSYC 4925	Clinical Ethics and Professional Issues

An advanced clinical course would be another good course to take, as you need to take two. One can also begin taking courses for a tool or core requirements. As a general rule, it is a good idea to take content courses and not independent studies until later, because most students will need to take 18 courses to meet requirements. You can only take 6-7 courses per year, and it is a good idea to complete almost all requirements by the end of your third year as scheduling conflicts can occur between externships and course offerings in your fourth year. It is also important to remember that most courses are only offered every other year.

Clinical Work
Students participate in the Child Neuropsychology Clinic. DCN students are expected to see 8 assessment cases in the Child Neuropsychology Clinic, and non-DCN students are expected to see 6 cases. Additionally, all students should see 2 weekly treatment cases in the CCFP.

Clinical case conference: In the summer after the second year, students will present a clinical case to current grad students and faculty. The goal is for the internalizing and externalizing teams to share with each other the work they have been doing before the advance to their 3rd year team. These presentations will be approximately 30 minutes. A rubric of how to structure the case conference will be shared with students in Spring as they prepare their cases.

Second Year Project

   1. Second year students will give 10-minute presentations of their research to the area at the beginning of the Fall quarter.

   2. By the end of the second year (July 1), students will be expected to present a completed research project. This project may take the form of a) traditional master's thesis, b) an article to be submitted for publication, or c) a meta-analysis of some literature. The key features of such a project is that the student, a) is an expert in an area, b) knows what has and has not been done previously, c) has a project that contributes to knowledge, d) has conducted the data analyses, and e) has written the project. (Authorship of any papers, however, actually submitted should be negotiated separately.)

   3. Once again, this product will be reviewed by the committee of three--the chair and two other readers. The advisor and committee are expected to take into account these time deadlines in approving any research plans. Committee members will be asked to distinguish between essential changes and ideal changes.

   4. Sometimes research plans may change after a student has proposed their master's or Dissertation. For example, this might happen if an NRSA is not funded or a sample is more difficult to obtain than anticipated. In this case, the student may petition their advisor and committee describing a revised plan. Depending on the magnitude of the change, the committee may decide to approve it or to request a second proposal meeting. Some studies may also yield null results or otherwise prove unsuccessful. In such instances, students may want to talk with their advisor about the possibility of doing an alternative study rather than writing up a project that is unlikely to be publishable. Advisors differ in whether it is better use of time to reflect up and write up null results, or to do an alternative project.

   5. MA/second year projects are due on July 1 of the second year. If the student has not successfully defended by July 1 of their second year, they may be placed on monitoring status. The monitoring status is continued until a) the MA is successfully defended, b) February 15th of the third year, or c) there are sufficient problems to warrant being moved to probationary status or termination.

   6. If the student has not successfully defended by February 15 of the third academic year, they may be placed on probationary status. This deadline will be enforced except under highly unusual circumstances; in such cases, the student may petition the area for an extension.

   7. In general, it is expected that all projects will be completed by the end of the second year, as the purpose is to get people's feet wet (vs. constructing a new theory of human behavior). In some unusual circumstances, a project may require additional time (e.g., the subjects are difficult to obtain). Anticipated "extra time" should be discussed and negotiated at the time of the first-year project meeting. If extra time is required, students should explain what they would do in their second year that is normally done later so that overall they stay on schedule.

8. Faculty vary in their willingness or enthusiasm about holding prospectus or defense meetings during breaks or summer. Some prefer these times, but others are reluctant to schedule meetings during such times. Students are encouraged to discuss this issue when selecting committee members.

9. The graduate school requires that all requirements for the MA be completed by 5 years. Any petition to the graduate school for a time extension of MA requirements must be submitted to and approved by the area. To ensure that the procedure for reviewing student progress is consistent, academic and research advisors are not permitted to request that the graduate school provide such an extension.

10. It is important for students to publish their master's Thesis if the results are sufficiently strong. This is important for students' professional development and for the viability of the labs, as productivity is a major factor in getting grant renewals.

Third Year Expectations

Typical Course Load
This year consists of one or two courses per quarter, completing various requirements, adding electives and sometimes independent studies for one's research or course credit for clinical work. These independent studies and clinical practica courses may be repeated, but typically students only enroll for independent study or clinical practica for credit when they are not taking other courses because students will want to complete as many course requirements as possible by the end of their third year to avoid potential conflicts with externships

Clinical Work
Typically, students are part of the Assessment team, and are expected to see 4 assessment cases in the CCFP. They are also expected to see 3 weekly treatment cases. During winter quarter of the third year, students who are at year level in their professional competencies and deemed ready for externship by the clinical faculty can apply for an externship that they will do in their fourth year.

Externship Skills
Below is a list of skills that need to be developed in the second and third years to prepare for ongoing clinical work in-house, on externship, and on internship. These skills will be particularly important for beginning externship, where the caseload will go up and the supervision ratio will go down. Supervisors in-house and on externship will be expecting students to be able to do these things (or to be able to learn to do them early in the case work).

This list is intended to be a general guide for what students should pay attention to as they gather clinical skills and is not meant to suggest that students should be a master of each of these skills by the middle of the third year. Students will not necessarily be taught these skills per se, but instead some will be learned from experience and in some cases students will need to take the initiative to learn them. Hopefully, this list will prove to be a helpful way of judging one's progress and identifying skills that may need attention.

- Be familiar with administrative procedures and policies for the setting, such as record keeping and storage.

- Write SOAP/GIRP notes appropriately (note that not all externship cites use the same format for process notes, but the basic skill of documenting the interventions in a concise fashion will be needed in all settings)
- Make productive use of supervision time
  - Come to supervision knowing what cases or case issues should be discussed
  - Select sections of a tape or recording for supervisors to review
- Write case reports and summaries efficiently
- Develop a case formulation/conceptualization and be able to research/select potential interventions
- Summarize and present case information in a comprehensive yet concise fashion (e.g., for supervisor/team review, case presentations to multidisciplinary teams)
- Be able to effectively consult and provide feedback to other service providers (e.g., teachers, social workers, child protective services, etc.)
- Know protocol for emergency/crisis interventions (including emergency hospitalization, abuse reporting, etc.)
- Know how to select, administer, and score appropriate assessment measures
- Be able to measure and track treatment progress over time
- Know what questions to ask during an intake session for an assessment evaluation.
- Know how to evaluate suicide and how to address suicidal/homicidal concerns.
- For neuropsychological evaluation, be familiar with medical diagnoses and how they affect behavior and cognitive performance.
- Know how to write short (5-7 pages) neuropsychological reports effectively and personalize them to each patient.
- Know how to discuss important and sensitive information during a ~1-hour feedback session.
- Know what services can be provided by schools by law through an Individualized Education Plan or 504-Plan and what additional services are provided by other community organizations.
- Know basic information on health insurance and what can parents/patients do to navigate the system.
- Take advantage of unique clinical training experiences offered both internally and externally (e.g., take Couples therapy course, provide group therapy, put on a couples' seminar or parenting workshop, attend external trainings such as TF-CBT training).
- Be able to utilize and implement therapy manuals without intensive supervisor input (don't always depend on supervisors to provide case-by-case and session-by-session supervision).
- Be familiar with/have access to some widely used evidence-based therapy manuals
- Use culturally sensitive assessments and interventions.
- Recognize cultural diversity
- Understand that systemic and structural factors significantly impact the psychosocial and economic development of different racial, ethnic, and cultural groups
- Help clients to understand their own sociocultural identification.
- Understand the interaction of culture, gender, and sexual orientation on behavior and needs.
- Be an advocate for best practices.
- Be able to work with other professionals, including other therapists and physician, such as when medicine has been prescribed
- Set and maintain good boundaries with a client. Know when to refuse or refer out a case.
- Be familiar with ethical/professional issues.

Fourth- and Fifth-Year Expectations

Typical Course Load
This is one or two courses per quarter, completing various requirements, adding electives and sometimes research practicum credits. Students should register for 10 credits each quarter, so they reach 120 hours by the end of Spring quarter of the fourth year. If they are not taking a course, they should register for independent study.

Research
Students need to successfully propose their dissertation by the end of April in order to apply for internship the following year.

Clinical Work
In their fourth-year students have an externship and see two weekly cases in the CCFP. In their fifth year they see three weekly cases. Students typically apply for internships in their fifth or sixth year.

Support
The faculty discuss potential financial support positions for advanced students; sometimes the faculty will try to locate or generate a support position for advanced students. Although the faculty do try to be helpful, it is ultimately the fifth or sixth year student's responsibility for obtaining support.

Residency
Students are required to be in residency for the four years they are taking courses. In most instances, students remain in residency the year after completing coursework. Being in residency is highly advantageous to a student's training and progress, but in some unusual cases, a student may desire not to be in residency during the final year before internship for personal reasons. In these instances, the student should petition the area to not be in residency. The area faculty will approve/disapprove the petition on the basis of whether the student is making adequate progress in their research and other aspects of the program and whether the student will be ready for internship without the additional training and evaluation of clinical progress that requires being in residency.

Grants

NRSA
Some students, especially those on a research career track, may want to apply for an NRSA. Students should talk to their research mentor about whether this would be appropriate, as it does depend on the student's specific interests, credentials, and the independence of the project. If students are interested, here is the current set of submission dates.

Application Submission Dates	Initial Review Dates	Range of Likely Start Dates
Early April	June/July	Sept./Dec.
Early August	Oct./Nov.	Jan./March

Early December	Feb./March	May/July

Unfortunately, it is typically taking two submissions for an application to be funded, and one does not get feedback in time to submit the revision in time for the next cycle. What that means is that if students would like to have one of these in the fourth and fifth year, they will probably need to submit in April of the second year (with the idea being that it would be resubmitted in December of the 3rd year.) Students can submit later but they will not be likely to have the award for as long. NRSA's are intended to support dissertation work, so that means students need to have their master's done well ahead of the actual deadline, so that they can prepare a proposal that could serve as a dissertation in time for the April or perhaps August submission. And even if that date does not appear feasible, students probably want to try for as early of a deadline as possible, so plan the research progress accordingly. Involvement in other studies and papers also strengthens the application substantially.

NSF
NSF offers a graduate support mechanism for early graduate students (1st and 2nd year). Students in our program have been funded by this mechanism recently. While NSF is open to funding the research of clinical students, the content of the grant has to have basic science implications. Research work that is exclusively clinically focused will be a better fit for NIH/NRSAs.

Autismspeaks, Autism Science Foundation, Weatherstone Fellowships, American Association of Pediatrics, and APA (Dissertation Awards and Early Graduate Student Research Awards) all have grants to support graduate student research.

Externships

It is required that students complete an externship, which is usually done in the fourth year, though] training needs and professional goals may occasionally lead to externships being done in the fifth year, An externship needs to involve at least 15 hours per week for a calendar year. If the externship is only 15 hours a week, students are encouraged to acquire some additional clinical experience to make up for the reduced number of clinical hours they are likely to end up with. This can be done by (a) asking the placement to see some additional cases in the placement. Some externships placements involving 15 or fewer hours per week have indicated this might be possible depending on pragmatic considerations such as when the student is available (b) students could acquire additional hours through various clinical research projects, or (c) students may be able to carry an additional case or two in the CCFP although this depends on whether we have sufficient supervision resources. Regardless of what route is taken, it is the student's responsibility to make arrangements for the additional clinical experience.

If the externship placement entails less than 15 hours per week, students should arrange to increase the hours to at least 15 hours a week or plan on doing two such externships sequentially. In effect this means that students should plan on being here for a sixth year, as it would be very challenging to do two externships at the same time both in terms of time and scheduling. Moreover, the department does not guarantee funding in the sixth year, although we often have been able to provide it. Finally, many of the externships with fewer hours per week are more specialized, which may or may not be a good idea depending on your career goals; ; students are encouraged to talk to their advisors.

Students must have the area's approval to apply for externships; readiness for externship is evaluated in the Fall quarter of the third year. Students who are at year level in their professional competencies and deemed ready for externship by the clinical faculty can apply for an externship that they will do in their fourth year. All externships must have been reviewed and approved by the area. Sometimes externships require contracts with the University. These contracts need to be approved by the University legal department. Thus, it is important that such contracts be immediately brought to the DCT's attention. Ultimate acceptance of the placement may depend on the being able to come to an agreement regarding a contract.

As part of the process of applying for externships and internships, some sites conduct background checks that students will be responsible for paying for (approximately $40-50). Some sites also do a drug test as part of that background check. Although the state of Colorado has legalized marijuana, externship sites and other professional sites have the right to both not offer you a position and terminate you if you fail them. In fact, they can do this even if you have a prescription and only use marijuana away from the work setting.

The program will work with you in finding an appropriate externship or internship, but if you are unable to find one after repeated efforts, you will not be able to complete the program as these clinical experiences are required. This has never occurred in the history of our program.

Forum for Externship
Students who are on externships will be assigned a clinical supervisor who will have periodic discussions with them about their externships.

Other Responsibilities
Externships should be planned so that they do not conflict with other responsibilities, such as being a TA, as this may jeopardize having a TA and associated stipend support.

Multiple Externships
Taking multiple externship placements typically slows down the research progress of students in the program and is usually not essential for obtaining a competitive internship. You should carefully consider whether a second externship placement is warranted if you are planning a research career. Students opting for a clinical service or training career might benefit from exposure to multiple training sites. Students should consult with research and academic advisors regarding whether an additional externship should be done in their particular case.

Other Training Sites
Doctoral training involves collaboration and partnerships with multiple training sites, including practicum placements, doctoral internship training programs, and others, such as research labs and other academic departments. Communication between doctoral training programs and these training partners is of critical importance to the overall development of competent new psychologists. Therefore, regular communication about students' performance and progress must occur between the program faculty and other training partners, and that the content from this communication will contribute to regular evaluation of the student's progress.

Dissertations

Dissertation Proposal Format
Students may submit a dissertation prospectus in the form of a grant proposal, as well as a traditional prospectus. Such a strategy could help facilitate obtaining money to support the student's doctoral research. The final version of the dissertation, however, would need to be in the format required by the University.

A dissertation proposal does not have a minimum length, but needs to be sufficiently comprehensive that the committee can evaluate the proposed work. In fact, NRSA grant proposals are equivalent in length to a 10-page proposal (single-spaced). Similarly, if the student is proposing to use the "journal articles" format, the proposal may also be relatively short. Finally, advisors vary in their expectations regarding the expected length of a traditional dissertation proposal, so it is important to discuss this in advance.

The fact that the student may have written a short proposal does not, however, change the expectation that the student has a comprehensive understanding of the general topic and be able to answer questions on all aspects of the topic. In fact, all students should expect that a significant proportion of the proposal and defense meeting will be focused on the general topic of the research, and not just the particular study design.

We also recognized that sometimes people sometimes want to do a larger project if they get an NRSA than they can without one. The faculty would be supportive of such a contingency plan in designing dissertations.

Dissertation Format
In the traditional dissertation format, a student is expected to write a series of chapters which include (a) a comprehensive review of the literature in the introduction, (b) detailed information about the methods, (c) a comprehensive set of analyses, and (e) an extensive discussion of the findings. Advisors vary in their expectations regarding the expected length of a traditional dissertation, so it is important to discuss this in advance.

In addition to the traditional dissertation format, dissertations can take a "journal articles format". In this case, the dissertation would consist of an introduction, which discusses the general focus of the research and explains how the two papers are united conceptually, at least two articles prepared for subsequent submission for publication, and a conclusion, which integrates the findings of the different articles.

If the "journal articles" format is used, the articles need to be on the same general topic; it cannot simply be two manuscripts on any topic. One of the manuscripts can, however, be prepared prior to the proposal meeting. These manuscripts cannot be based on the research done for a master's thesis, though they could be a follow-up of that line of research.

There is no difference between the two formats in terms of expectations regarding independence of the work, scope of the project, knowledge of the literature, comprehensiveness of the analyses, or understanding of the implications of the findings. The proposal and defense meetings are also expected to be similar in nature, covering both the specific project and general field. Thus, the difference is simply a matter of how the project is written up. We consider the decision to write in a traditional or journal articles format to be a strategic one that takes into account one's career aspirations. On the one hand, it may be a little easier to write a dissertation in the traditional format as one does not have to write

two introductions, two methods, two results, and two discussion sections, though single versions of these chapters are likely to be longer in the traditional format. One also does not have to write a general introduction and conclusion, though some of this material is likely to appear in the introduction and discussion chapters of a traditional dissertation. It will be easier to convert journal articles dissertation into submissions for publication than it is to convert one written in a traditional format. Moreover, one of the papers in a journal article format can be prepared in advance of a prospectus meeting. Sometimes, however, it can be challenging to parse up a dissertation into two papers that would be publishable. Students should work with their dissertation advisor on selecting a format. Similarly, it is recommended that the student tell the committee what format they are planning to use prior to the meeting; the student and committee should discuss the format and expectations regarding the dissertation at the time of the prospectus meeting, so that there is no misunderstanding. This is particularly important if there are committee members who are not in the clinical area.

Timing
It is in everyone's best interest to have completed your dissertation prior to internship.   The process of doing a dissertation is more rewarding and easier when a student is in residence. Many internships are more likely to accept applicants whom they believe will have completed their dissertation before internship. Having finished one's dissertation allows one to focus on their internship experience and not have to spend their evenings and weekends working on their dissertation. Defending the dissertation before internship also means it is more likely that the dissertation can be published prior to applying for jobs. In order to facilitate completing the dissertation before internship, the deadline for successfully proposing a dissertation is April 30th the year prior to applying for internships. Students, however, are encouraged to consider an even earlier proposal date, as some external and internal awards, such as the Deans Dissertation Fellowship can have earlier deadlines.

Dissertation Committee
Unless there is some unusual circumstance, Ph.D. committees are expected to have at least 5 members--the chair, three other readers and an outside chair for the defense. (Note that the requirement of 3 readers is more than required by the Graduate School). At least one member of the clinical faculty on a half-time or more appointment must be on the initial planning committee. At least two members must be outside of the students' primary lab. Normally, a member of the full-time Psychology department faculty chairs the committee. A student wishing an exception to this policy, such someone other than a full-time faculty as chair, may petition the clinical faculty.

Dissertation Support
The graduate student handbook contains a list of potential sources for receiving support for dissertation work. There are both internal support sources (i.e., Deans Dissertation Fellowship) and external sources: APA, CDC, & NIH (NRSA's), SSHRC (for Canadian citizens), Woodrow Wilson Foundation, the American Association of University Women, and the Society for the Science of Clinical Psychology (www.sscpweb.org).

Final Candidacy
Advancement is initiated by the Graduate Program Administrator after the prospectus is approved and tool requirements completed. Advancement to final candidacy should be accomplished no later than one quarter prior to the expected date of completion of requirements for the degree. In no case can a student be graduated the same quarter they are advanced to final candidacy.

Experiences at DU
As part of the APA self-study, we gather descriptive information about students' experiences at DU. As part of the process of applying for graduation, students need to complete a survey describing their experiences at DU. Graduates will also be asked to complete short surveys every year till they are licensed, and a longer survey 2 and 5 years after graduation.

Internships

Preparing for Internship
Students are encouraged to periodically talk to faculty about the kind of internship they would like, and how they may best prepare for such an internship. In addition to your research and academic advisors, students may want to speak with faculty with expertise in a particular field (i.e., child clinical,

neuropsychology, pediatric psychology, health psychology) to discuss current information about programs and ideal preparation.

Applying for Internship
At the end of the winter quarter, interested students should tell the Director of the CCFP that they would like to apply for internships the following year (and go the year after that). The area will review the student's clinical evaluations and number of hours and discuss the student's readiness. The student will need to have a sufficient number of direct clinical hours and attained all the requirements for the Profession Wide Competencies except the publication and 2 presentation requirements. Dissertations must also be successfully proposed no later than April 30 of the year before the student is applying for internships. Students will be told whether we believe that they will or will not be ready for internship. Some students will be given suggestions about training experiences for the subsequent year. If there are unaddressed concerns that could interfere with internship applications and success, those will be raised with the student. Before actually applying, paperwork on one's CCFP cases will need to be up to date in order to receive a letter from the Director of Clinical Training.

Selection of an Internship
Internships need to be APA approved; if students would like to apply to one that is not APA approved, they will need the area's approval. If students were to accept a non-accredited internship without the permission of the clinical area, the clinical area is likely to not consider the internship placement to be acceptable and obtaining a second acceptable internship would be very difficult. Once students have applied and visited internship sites, they will list the order of preferences in the APPIC match process. Students have an ethical obligation to accept their match choice for the internship. If they do not accept the match, there may be significant consequences that are implemented by either the program or APPIC.

Internship Length
APA requires that an internship must be a minimum of 12 months long. However, if the internship is completed at the end of August, students may "walk" in the August ceremony. They will need to apply for graduation following the standard steps and deadlines, but include a letter sent to the Director of Clinical training from the internship indicating that they are in good standing and that they anticipate successfully completing the internship. Students will walk in the graduation and be listed but will not actually graduate until they have completed the internship. Students will then need to have a second letter sent to us and the graduate school indicating that they have successfully completed the internship. This letter should arrive no later than September 1 as federal regulations require such documentation by

early September. Students will then receive their diploma with an August date. If students fail to complete the internship successfully, do not provide prompt documentation of completion, or otherwise have not completed a requirement, they will not receive the diploma or graduate at that time.

Internship Class Registration
Each quarter during internship, students are required to sign up for our psychology course <u>PSYC 6981 Internship.</u> They do not, however, receive a grade for this course.

Internship Certification
In order to graduate, you must provide documentation from the internship site that you successfully completed the internship. Both the DCT and the Graduate Program Administrator should be provided this documentation as soon as possible.

<u>Additional Requirements and Competencies</u>

1) Preliminary Candidacy. Advancement to preliminary candidacy is the program's equivalent of a comprehensive examination. As such, it entails a review of all aspects of the students' training to date, including their scholarly writing, their clinical work, their coursework, and their progress toward the attainment of the standards held by the program.

Students are expected to inform the Graduate Program Administrator when they have defended their master's thesis (be it a formal or informal thesis). The Graduate Program Administrator will then send a memo telling them that they will be considered for initial advancement to doctoral candidacy. The Graduate Program Administrator will forward the material to their academic advisor and inform the Director of Clinical Training, who will schedule the review at an upcoming next area meeting regarding student issues.

After the review, the student will be informed whether they have been advanced or not or if the review was deferred until a later date. (FYI, sometimes students need to wait a quarter before being officially advanced, but we try to do the review when we have an opportunity). Students who come in with a master's degree cannot be considered for advancement to candidacy until the Spring evaluation of their first year at the earliest.

2) **Advanced Integrative Knowledge of Basic Discipline-Specific Content Areas**. Students are required to acquire graduate-level knowledge that entails integration of at least two of the following content areas: affective, biological, cognitive, social, or developmental aspects of behavior. This advanced integrative knowledge in these content areas by taking three of the following courses.

PSYC 4526	Proseminar in Cognitive Neuroscience
PSYC 4525	Proseminar in Developmental Neuropsychology
PSYC 4262	Proseminar in Affective Neuroscience
PSYC 4032	Developmental Prosem: Social/Emotional
PSYC 4033	Developmental Prosem: Biological Processes

3) **Profession-Wide Competencies.** Students need to successfully attain the following nine Profession-Wide Competencies. These competencies, their elements, how they are measured, and the minimum

level of achievement are described in the following tables. (It should be noted that some of the required training for these competencies are also listed as requirements elsewhere in the handbooks (e.g., the Research Design and Inference Course, the master's thesis, and Doctoral dissertation are all listed under Research Competency and also discussed elsewhere).

If the student does not meet the minimum level of achievement, they may be placed on monitoring status, probation, or dismissed from the program. If they remain in the program, a remedial program will be developed so that they reach a level of achievement comparable to the minimum level of achievement.

(i) Research
Elements   • Demonstrate the substantially independent ability to formulate research or other scholarly activities (e.g., critical literature reviews, dissertation, efficacy studies, clinical case studies, theoretical papers, program evaluation projects, program development projects) that are of sufficient quality and rigor to have the potential to contribute to the scientific, psychological, or professional knowledge base.   • Conduct research or other scholarly activities.   • Critically evaluate and disseminate research or other scholarly activity via professional publication and presentation at the local (including the host institution), regional, or national level.
Required Training: a) Take PSYC 4295 Research Design and Inference.   b) Complete one graduate course that will enhance Research competencies. PSYC 4350 Structural Equation Modeling & PSYC4355 Multilevel Modeling most commonly taken. (Note, however, only one course is required to meet the competency, but the Departmental tool requirement entails two courses or their equivalent—not just one).   c) Successfully propose, carry out, and defend an independent research project in the form of a master's thesis,   d) Successfully propose, carry out, and defend an independent research project in the form of a doctoral dissertation thesis.   e) Give two authored or co-authored posters or talks accepted for presentation at scientific conferences.   f) Have one authored or co-author publications   g) Competently complete all research activities with reference to research skills.
How outcomes are measured: a) Grades in courses   b) Review of Tool Proposal to determine if courses will enhance research competencies; grades in courses.   c) Review of M.A. proposal and thesis by committee of three faculty members.   d) Approval of dissertation proposal and defense by committee of five faculty members   e) Review of Proposal by Scientific Conference   f) Review of Per by Editor   g) Ratings of four research items on the Research Evaluation Form and on the Annual Evaluation Form

Minimum level of achievement
   a) Grade of B-
   b) Grade of B-
   c) Proposal is approved by committee; student passes oral defense.
   d) Proposal is approved by committee; student passes oral defense.
   e) Acceptance of two conference presentations/posters by the time of applying for graduation.
   f) Acceptance of paper by Editor by the time of applying for graduation.
   g) Ratings of at least "At Year Level" on overall research competency item and the majority of the three specific research competency element items on Annual Evaluation Form on the year prior to applying for internship.

(ii) Ethical and legal standards

Elements
   - Be knowledgeable of and act in accordance with each of the following:
     o the current version of the APA Ethical Principles of Psychologists and Code of Conduct;
     o Relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels; and
     o Relevant professional standards and guidelines.
   - Recognize ethical dilemmas as they arise and apply ethical decision-making processes in order to resolve the dilemmas.
   - Conduct self in an ethical manner in all professional activities.

Required Training:
   a) Take PSYC 4920 Ethics in Psychological Research & Practice
   b) Take PSYC 4925 Clinical Ethics and Professional Issues
   c) Competently complete all research activities with reference to ethical and legal standards
   d) Competently complete all clinical activities with reference to regarding ethical and legal standards

How outcomes are measured:
   a) Grades
   b) Grades
   c) Ratings on four ethical and legal standards items on the Research Evaluation Form and on the Annual Evaluation Form
   d) Ratings on four ethical and legal standards items on the Clinical Evaluation Form and on the Annual Evaluation Form.

Minimum level of achievement
a) Grade of B- or better.
b) Grade of B- or better.
c) Ratings of at least "At Year Level" on overall ethical and Legal standards item and the majority of the three specific ethical and legal Standard element items on the Annual Evaluation Form on the year prior to applying for internship.
d) Ratings of at least "At Year Level" on overall ethical and legal standards item and the majority of the three specific ethical and legal standards element items on the Annual Evaluation Form on the year prior to applying for internship.

(iii) Professional values, attitudes, and behaviors
Elements
• Behave in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others.
• Engage in self-reflection regarding one's personal and professional functioning; engage in activities to maintain and improve performance, well-being, and professional effectiveness.
• Actively seek and demonstrate openness and responsiveness to feedback and supervision.
• Respond professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.

Required Training
a) Take PSYC 4920 Ethics in Psychological Research & Practice
b) Take PSYC 4925 Clinical Ethics and Professional Issues.
c) Competently complete all research activities with reference to communication and interpersonal skills.
d) Competently complete all clinical activities with reference to communication and interpersonal skills.

How outcomes are measured:
a) Grades.
b) Grades.
c) Ratings on five professional values, attitudes, and behaviors items on the Research Evaluation Form and on the Annual Evaluation Form.
d) Ratings on five professional values, attitudes, and behaviors items on the Clinical Evaluation Form and on the Annual Evaluation Form.

Minimum level of achievement
a) Grade of B- or better.
b) Grade of B- or better.
c) Ratings of at least "At Year Level" on overall professional values, attitudes, and behaviors items and majority of four professional values, attitudes, and behaviors element items on Annual Evaluation Form on the year prior to applying for internship.
d) Ratings of at least "At Year Level" on overall professional values, attitudes, and behaviors items and majority of four professional values, attitudes, and behaviors element items on Annual Evaluation Form on the year prior to applying for internship.

(iv) Communications and interpersonal skills
• Develop and maintain effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services.
• Produce and comprehend oral, nonverbal, and written communications that are informative and well-integrated; demonstrate a thorough grasp of professional language and concepts.
• Demonstrate effective interpersonal skills and the ability to manage difficult communication well.
a) Give two authored or co-authored posters or talks accepted for presentation at scientific conferences.
b) Have one authored or co-authored publication.
c) Competently complete all research activities with reference to communication and interpersonal skills.
d) Competently complete all clinical activities with reference to communication and interpersonal skills.

How outcomes are measured:
a) Review of proposal by scientific conference
b) Review of paper by Editor.
c) Ratings on four communications and interpersonal skills items on the Research Evaluation Form and on the Annual Evaluation Form.
d) Ratings on four communications and interpersonal skills items on the Clinical Evaluation Form and on the Annual Evaluation Form.

Minimum level of achievement
a) Acceptance of two. conference posters or presentations by scientific conference by the time of applying for graduation.
b) Acceptance of paper by Editor by the time of applying for graduation.
c) Ratings of at least "At Year Level" on four communication and interpersonal skill items on Annual Evaluation Form on the year prior to applying for internship.
d) Ratings of at least "At Year Level" on four communication and Interpersonal skill items on Annual Evaluation Form on the year prior to applying for internship.

(v) Assessment

Element
- Demonstrate current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology.
- Demonstrate understanding of human behavior within its context (e.g., family, social, societal and cultural).
- Demonstrate the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process.
- Select and apply assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collect relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient.
- Interpret assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective.
- Communicate orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.

Required training
 a) Take PSYC 4411 Assessment: Cognitive.
 b) Take PSYC 4413 Assessment: Psychopathology (Social, Emotional, and Behavioral)
 c) Conduct 10 assessments in the Developmental Neuropsychology Clinic (DNC) and/or Clinic for Child and Family Psychology (CCFP).
 d) Competently complete all other clinical assessments in subsequent training.
 e) Successfully complete APA approved internship.

How outcomes are measured:
 a) Grades.
 b) Grades.
 c) Ratings on seven assessment items on the Clinical Evaluation Form and on the Annual Evaluation Form.
 d) Ratings on seven assessment items on the Clinical Evaluation Form and on the Annual Evaluation Form.
 e) Year End Report from Internship.

Minimum level of achievement
 a) Grade of B- or better.
 b) Grades of B- or better.
 c) Ratings of at least "At Year Level" on overall assessment competency item and majority of six assessment element items on the Annual Evaluation Form at the end of the third year after completing required assessment training,
 d) Ratings of at least "At Year Level" on overall assessment item and majority of six assessment element items on Annual Evaluation Form on the year prior to applying for internship.
 e) Report that successfully completed internship.

(vi) Intervention

Elements
    • Establish and maintain effective relationships with the recipients of psychological services.
    • Develop evidence-based intervention plans specific to the service delivery goals.
    • Implement interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.
    • Demonstrate the ability to apply the relevant research literature to clinical decision making.
    • Modify and adapt evidence-based approaches effectively when a clear evidence-base is lacking.
    • Evaluate intervention effectiveness, and adapt intervention goals and methods consistent with ongoing evaluation.

Required training
    a) Take PSYC 4565 Systems of Psychotherapy,
    b) Take PSYC 4566 Systems of Psychotherapy II, or PSYC 4620 Advances in Couples Intervention, or 4625 Marital Therapy – Diverse Populations, or PSYC 4518 Readings in Family Therapy.
    c) Successfully carrying an ongoing caseload of therapy in the CCFP. (Currently Year 2: 2 therapy cases; Year 3: 3 therapy cases; Year 4: 2 therapy cases; Year 5: 3 therapy cases).
    d) Successfully complete a yearlong externship in fourth year of program.
    e) Successfully complete APA-approved internship.

How outcomes are measured:
    a) Grades.
    b) Grades.
    c) Ratings on seven intervention items on the Clinical Evaluation Form and on the Annual Evaluation Form.
    d) Ratings on seven intervention items on the Clinical Evaluation Form and on the Annual Evaluation Form.
    e) Year End Report from Internship.

Minimum level of achievement
    a) Grades of B- or better.
    b) Grades of B- or better.
    c) Ratings of at least "At Year Level" on overall Intervention competency item and majority of six specific intervention competency element items on Annual Evaluation Form on the year prior to applying for internship.
    d) Ratings of at least "At Year Level" on an overall intervention competency item and majority of six specific intervention competency element items on Annual Evaluation Form after completing externship for internship.
    e) Report that successfully completed internship.

(vii) Supervision
Element   • Demonstrate knowledge of supervision models and practices.

Required training   a) Take PSYC 4925 Clinical Ethics and Professional Issues.
How outcomes are measured: a) Grades.
Minimum level of achievement   a) Grades of B- or better.

Training Standards

Earning a degree from the Clinical Psychology Doctoral Program requires mastery of a coherent body of knowledge and skills. Doctoral students must acquire substantial competence in the discipline of clinical psychology as specified in the American Psychological Association (APA) Standards of Accreditation and must be able to relate appropriately to clients/patients, fellow students, faculty and staff members, and other health care professionals. Combinations of cognitive, behavioral, emotional, intellectual, and communication abilities are required to perform these functions satisfactorily. These skills and functions are not only essential to the successful completion of the Clinical Psychology Doctoral Program, but they are also necessary to ensure the health and safety of clients/patients, fellow students, faculty and staff members, and other health care providers.

In addition to required academic achievement and proficiency, the Technical Standards described below set forth non-academic qualifications the Clinical Psychology Doctoral Program considers essential for successful completion of its curriculum. Therefore, in order to be admitted to, to successfully progress through, to be approved for internship, and subsequent graduation from the Clinical Psychology Doctoral Program, applicants for admission and current students in the Clinical Psychology Doctoral Program must satisfy these Technical Standards. Students who are unable to meet these standards may be recommended for remediation or may be terminated from the program, consistent with policies articulated in the Clinical Program Handbook.

    I.   Attitudinal, Behavioral, Interpersonal, and Emotional Attributes

Doctoral students must be able to relate to clients/patients, fellow students, faculty and staff members, and other health care providers with honesty, integrity, and dedication and in a non-discriminatory manner. They must be able to understand and use the power, special privileges, and trust inherent in the psychologist-client/patient relationship for the client/patient's benefit and to know and avoid the behaviors that constitute misuse of this power. Doctoral students must demonstrate the capacity to examine and deliberate effectively about the social and ethical questions that define psychologists' roles and to reason critically about these questions. They must be able to identify personal reactions and responses, recognize multiple points of view, and integrate these appropriately into clinical decision making. In research teams, doctoral students must demonstrate the ability to interact appropriately with research participants, other students, and faculty and staff members. Doctoral students must be able to collaborate well with others on joint projects (e.g., effectively accept and provide input).

A clinical psychology student must be of sufficient emotional health to utilize fully their intellectual ability, to exercise good judgment, to complete client/patient care responsibilities promptly, and to relate

to clients/patients, families, fellow students, faculty and staff members, other health care providers with courtesy, compassion, maturity, safety, and respect for dignity. The ability to participate collaboratively and flexibly as a member of an inter-professional team is essential. Doctoral student must display this emotional health in spite of multiple and varied academic, teaching, and research responsibilities, in addition to clinical training expectations. Doctoral students must be able to modify behavior in response to constructive criticism. They must be open to examining personal attitudes, perceptions, and beliefs that may negatively impact client/patient care and professional relationships. Doctoral students must be able to take responsibility for their behavior, which includes being open to feedback from their supervisors, academic instructors, and research advisors. Doctoral students must be open and empathic with others and show respect for different viewpoints, perspectives, and opinions. They must strive to work collaboratively with others in the classroom, laboratory, clinic, and in all other academic or professional settings. They must convey genuine interest in other people and demonstrate affect tolerance (i.e., appropriately manage and contain emotions in academic and professional settings). As an essential part of conducting research or clinical practice, doctoral students effectively tolerate uncertainty and ambiguity. They must be emotionally mature (e.g., intellectually and emotionally open to and appropriate when receiving feedback). Doctoral students must be able to appropriately advocate for their own needs in the workplace They must also seek the resources and build the relationships needed to advance in their academic or professional career.

The study and ongoing practice of clinical psychology often involves taxing workloads and requires appropriate management of stressful situations. A doctoral student must develop the physical and emotional stamina to maintain a high level of functioning in the face of multiple demands on their time and energy. Part of maturing in the profession is also knowing one's limits and working effectively with supervisors and external support systems to maintain a high level of consistent clinical care even when personal stressors and situations arise. Furthermore, it is essential and ethically required that a doctoral student be willing and able to acknowledge the need for and to accept professional help if they need it and before the student's functioning significantly impacts the student's clinical work or other responsibilities in the program.

II. Intellectual Skills

Doctoral students must possess a range of intellectual skills that allows them to master the broad and complex body of knowledge that comprises clinical psychology education.

Doctoral students must be able to critically evaluate their own and others' research, including the ability to identify limitations in the research literature or design of a specific study, to critique a manuscript as an ad hoc reviewer, and to "make psychological sense" of their own data. They must be able to use theory to inform the conceptualization, design, and interpretation of research. Additionally, doctoral students must be able to effectively understand the theoretical literature in their identified substantive research area, to appropriately discuss this literature in individual and group lab meetings, and to integrate their understanding into scientific writing and presentations. They must further demonstrate an ability to generate novel hypotheses and to design a study that follows from those hypotheses.

Doctoral students must be able to analyze and synthesize information from a wide variety of sources and must demonstrate sophisticated critical thinking skills. They must be able to learn effectively through a variety of modalities including, but not limited to classroom instruction, clinical supervision, small group discussion, individual study of materials, independent literature review, preparation and presentation of written and oral reports, and use of computer-based technology.

Because the practice of psychology is governed by the ethical principles set forth in the current APA Ethics Code and by current state and federal laws, a clinical psychology doctoral student must have the capacity to learn and understand these ethical standards and legal requirements and to perform consistent with those principles and mandates as a student in the Clinical Psychology Doctoral Program.

III. Communication Skills

Doctoral students must be able to ask effective questions, to receive answers perceptively, to record information about client/patients, and to provide effective psychoeducation to clients/patients. They must be able to communicate effectively and efficiently with clients/patients, their families, fellow students, faculty and staff members, clinical supervisors in varied practicum settings, and with other members of the health care team. This includes verbal and non-verbal communication (e.g., interpretation of facial expressions, affects, and body language). Mastery of both written and spoken English is required, although applications from students who are bilingual or multilingual, deaf and hard of hearing students, and students with speech and language disorders will be given full consideration. Use of a trained intermediary or other communications aide may be appropriate if this intermediary functions only as an information conduit and does not serve integrative or interpretive functions.

Commitment to Non-Discrimination

The University is committed to equality of educational opportunity. The University does not discriminate in offering access to its educational programs and activities on the basis of age, color, creed, disability, gender, gender expression, gender identity, genetic information, national origin, race, religion, sex, sexual orientation, or veteran status.

A doctoral student with a diagnosed psychiatric disorder or other physical, mental, or emotional disability may participate in the Clinical Psychology Doctoral Program so long as the condition is managed sufficiently with or without reasonable accommodation to permit the student to satisfy the requirements of the Clinical Psychology Doctoral Program, including these Training Standards. Students who seek reasonable accommodations for disabilities must contact the University's Disability Services Program 303.871.2372 located on the 4th floor of Ruffatto Hall; 1999 E. Evans Ave. The Office will determine a student's eligibility for and recommend appropriate accommodations and services.

Training Emphasis

Our program is a clinical scientist program that places emphasis on empirically supported assessments and treatments. One implication of this is that we do not provide training in many assessment and treatment techniques that appear not to have strong empirical support. These would include, but not be limited to, Rorschachs and other projectives, and play therapy. If a student is interested in obtaining such training, they will be responsible for obtaining that training, using their own resources. Similarly, our students are provided broad training that make them competitive for many excellent internships and jobs; there are, however, some internships and positions that have different emphases and thus, our students may not be particularly competitive for internships that are not aligned with our training goals.

Our program is an accredited clinical psychology program. As such, we try to provide broad training in clinical work. At the same time, we offer particular specializations in work with children, families, and couples. If a student is interested in additional specialized training in other facets of clinical work, they

should talk to the clinic director and may need to seek out and develop such training experiences. For example, past students have successfully sought out training experiences in public health, policy, and experiences working with populations of specific interest. The student, however, will be primarily responsible for locating and arranging these additional experiences. Moreover, such experiences do not substitute for the core training experiences of the program; they should be considered experiences that supplement one's core training in clinical child psychology, which will need to be done first so that one will have the foundational skills to build upon.

Summary of Requirements

The following is an overview of the program's requirements. It is, however, simply intended to be a brief overview. It is not intended to be a complete delineation of the requirements; any additional details or requirements that are delineated in the Handbook for Clinical Students, the Department of Psychology Official Handbook of Graduate Studies, or Graduate Policies and Procedures also apply.

a) At least two years of residency in the program.
b) Successful completion of 120 hours of graduate coursework. At least 60 hours of the required 120 hours must be content courses. At least 48 of these 60 content hours must be taken in the Psychology Department.
c) Successful completion of all course requirements delineated in the Psychology Department Handbook and Clinical Program Handbook. Successful completion is defined by a grade of B- or better. The following courses are required for a degree in clinical psychology.

Clinical Science

    PSYC 4565   Systems of Psychotherapy and
    PSYC 4512   Proseminar in Psychopathology

Clinical Assessment (both required)

    PSYC 4411   Assessment - Cognitive
    PSYC 4413   Assessment – Psychopathology (Social, Emotional, and Behavioral)

Research Design

    PSYC 4295   Research Design and Inference

Multicultural Competency

    PSYC 4571   Multicultural Issues in Mental Health

Quantitative

      PSYC 4300   Correlation & Regression

      Advanced Stat Course (1 from below):

      PSYC 4330   Analysis of Variance
      PSYC 4350   Structural Equation Modeling for the Social Sciences
      PSYC 4355   Multilevel Modeling for the Psychological Sciences:
                          Theory and Applications

   Departmental Cores (20 credits required)

      PSYC 4002   Proseminar in Human Memory and Cognition
      PSYC 4021   Proseminar in Social Psychology
      PSYC 4526   Proseminar in Cognitive Neuroscience
           OR   PSYC 4525   Proseminar in Developmental Neuropsychology
           OR   PSYC 4262   Proseminar in Affective Neuroscience
      PSYC 4032   Proseminar in Developmental Psychology II (Social/Emotional
      PSYC 4033   Developmental Proseminar: Biological Processes

   Other Required Courses

      PSYC 4920   Ethics in Psyc Research & Practice
      PSYC 4925   Clinical Ethics and Professional Issues

d) Research Tool

Students select a diverse range of tools, such as in policy, public health, research on diverse populations, statistics, or developmental psychology (please see Department Handbook for guidelines for proposing your own tool). For a DCN Clinical student, this requirement is met by the tool courses listed in the Departmental Handbook in the Developmental Cognitive Neuroscience Program Requirements section.

e) Advanced Clinical

This requirement is met by two advanced clinical courses and a rotation in the Child Neuropsychology Clinic. One of the advanced clinical courses must be an intervention course other than the required PSYC 4565 Systems of Psychotherapy (e.g. PSYC 4566 Systems of Psychotherapy II, PSYC 4620 Advances in Couples Interventions, PSYC 4625 Marital/Couples Therapy—Diverse Populations, PSYC 4518 Readings in Family Therapy). PSYC 4085 Stress & Health and PSYC 4688 Clinical Psychopharmacology are also advanced clinical courses, but do not meet the intervention course requirement.

DCN students currently are expected to do a year rotation in the Developmental Neuropsychology Clinic, seeing 8 cases. Non DCN students currently are expected to do a year rotation in the Developmental Neuropsychology Clinic, currently seeing 6 cases. Caseloads may, however, change

because of Clinic needs and supervision availability. <u>Note:</u> Other clinical and/or research practica credits do not count toward this requirement.

f) Successful completion of a master's Thesis, which is approved by a committee of three faculty members.
g) Being Advanced to Initial Candidacy by the clinical faculty.
h) Being Advanced to Final Candidacy which is defined as successfully proposing a dissertation and completing tool requirements.
i) Successful completion of a Ph.D. Dissertation which is approved by a committee of four, typically five, faculty.
j) Successful completion of an externship as evidenced by being rated "at year level" on overall clinical development.
k) Successful completion of an APA approved internship as reported by the internship director.
l) Successfully completing the Integrative Knowledge of Basic Discipline-Specific Content Areas Requirement.
m) Successfully completing the additional requirements for 9 Program Wide Competencies.

<u>Graduation</u>

You are solely responsible for ensuring that the graduate office has all the documents required for graduating. It is strongly recommended that you periodically check with the graduate office and annually meet with the department's Graduate Program Administrator to determine whether your material is complete. If your material is not complete, you may miss a deadline and delay your graduation,

<u>Planning for the Future</u>

1. Students should keep careful records of their own, which should include records of clinical hours (using Time2track), copies of research, teaching, and clinical evaluations, syllabi of all courses, and any memos approving any action, especially any waiver of rules.

 2. Students may also want to consider putting a copy of their credentials at a credentials bank. The Association of State and Provincial Boards (ASPB) has a credentials bank where you can file documents you may need for licensure (e.g. syllabi, transcripts, etcetera). It has been free for students and interns, and now is free for everyone (except for a nominal administrative fee). Students are strongly encouraged to bank credentials, because it can be quite challenging finding or obtaining documents years later.

  3. ASPPB also encourages people to take EPPP, the licensure exam, as soon as possible after graduation.

 4. Be aware that waivers (e.g. not having to take a particular course) can cause subsequent problems in licensure. This is not to suggest that such special considerations would not be an appropriate thing to do—just that it could have unforeseen circumstances

5. We are accredited in clinical psychology (vs. clinical child psychology)_ and thus, graduates' vita and other descriptions should indicate that you received a degree in clinical psychology (vs. child clinical psychology). If students do a dissertation on children, adolescents, or families, they can describe themselves as getting a Ph.D. in Clinical Psychology with a Major Area of Study in Clinical Child

Psychology. If they did their dissertation on adults, they can either describe themselves getting a Ph.D. in Clinical Psychology with an emphasis in Clinical Child Psychology or getting a Ph.D. in Clinical Psychology.

Advising Process

1. Each student will be assigned an academic advisor who is a faculty member in the clinical area. The academic advisor is meant to be an additional support system to the student. Academic advisors meet with students on at least an annual basis to review the past year and plan for the upcoming year. This academic advisor will present the information from the student's annual reviews to the clinical faculty and summarize feedback to give to the student. The intention of academic advisors it to cultivate a mentorship relationship that extend beyond the primary research lab. The academic advisor can be a helpful external perspective on difficulties that might arise during progression through the program. We also encourage students to cultivate mentoring relationships with a diverse array of clinical or nonclinical faculty hat align with their interests and career goals. Thinking of mentorship as a team of people, both peers and faculty, who can support different aspects of a student's career goals is a helpful perspective.

2. The Director of Clinical Training meets with each class at the beginning of each academic year. Students are also encouraged to meet with their individual academic advisor as needed, especially early on in their academic career.

Yearly Evaluation

Please consult the departmental handbook regarding the general process of evaluation and the different categories of standing (e.g., good standing, monitoring, probation, and termination). The following is the specific procedure which the area implements at the beginning of the Spring quarter for all students.

1. Clinical feedback forms should be completed with all supervisors. Please remember to complete and keep the evaluation when the case has finished, as the feedback will be more accurate and valuable at that time than months later. If the case is ongoing, students should complete a feedback form at the time of the annual evaluation. In house supervisors should have the forms, but students may need to bring them to supervisors at outside placements.

2. Some clinical externships have their own form. They do not need to repeat any narrative comments on our form, but they do need to complete the ratings on our form as they are needed to determine if a student is ready to apply for internships. Both forms should be submitted to the area.

3. Students on internship do not need to complete clinical evaluations as they will be sent by the internship to us at the end of the internship year. Students do need to submit research evaluation forms if they were still working on their dissertation or other research at DU. They also need to complete the department's annual evaluation form.

4 .Research feedback forms should be completed once a year from everyone the student is doing research with (not just the primary mentor). (Students on internship and post-internship only need forms from their primary mentor).

5. One's research and clinical evaluation partially depends on what one's career plans are. For example,

students planning for a research career will need to publish more than those who are seeking a clinical career. Accordingly, students are encouraged to discuss their career plans, and advisors are encouraged to take career paths into consideration in providing their evaluations.

6. The annual evaluation form that is distributed by the department should be completed by ALL students.   As this is an online survey, students should ask the Graduate Program Administrator for an Excel copy of the information and include that copy in the area review (see step 7). Students should make sure they include their grades and indicate the current number of direct clinical hours they have accrued.

7. Once the clinical, research, and departmental forms have been completed, they should be given to the academic advisor--not the Graduate Program Administrator, not the DCT. (Please give them as a set and not individually.) Students on internship or post-internship will only be submitting research and departmental forms.

8. The review process will not be conducted until the advisor has this material. Students and advisors may also want to meet prior to the faculty review. This meeting can be helpful if the student would like to give input for the review or would like a particular issue addressed.

9. The advisor will bring the material concerning the student to a clinical faculty meeting. The advisor will summarize the information they have obtained and ask for additional input on particular issues. Then the area will have the opportunity to candidly discuss a student. The academic advisor will complete the Annual Review form, reflecting this discussion and the evaluations from the supervisors. At the end of this discussion, the faculty will determine if the student is in good standing or not. If the student is not in good standing, the faculty will determine whether they should be placed on monitoring status, probationary status, or terminated from the program. The advisor also completes an Annual Evaluation Form that summarizes the discussion and overall evaluation. All students receive a copy of the Annual Evaluation Form.

10. Students and faculty alike feel that the most useful feedback comes directly from the individual supervisors. The academic advisor, however, will meet with students in residence to discuss the comments made at the meeting, the overall review, career planning, etc. The advisor and student will review the Annual Evaluation Form, as aspects of the evaluations of the Profession Wide Competencies are reflected on this form. For students applying for internship in the following year or later, the advisor and student should make sure that the Annual Evaluation Form is complete. Specifically, the form needs to indicate whether the student is at below/at/above expected level for each of the nine primary competencies categories and all of the specific elements of each competency. For students in the earlier years, the Annual Evaluation Form may not be complete as some competencies may not yet be applicable (e.g., supervision, consultation, or intervention).

11. If the student feels that a particular evaluation letter is misrepresentative, they may request reconsideration from the supervisor, or insert a letter of rebuttal into the file.

12.   Once the forms are completed, the advisor will give the annual review form to the Graduate Program Administrator who will file it in the students' cumulative record.

13. After the review has been conducted, the student will receive a letter indicating whether they are in good standing or not. (Descriptions of good status, monitoring status, probation, and termination are presented in Department Handbook).

14. If the student does not obtain the reviews from their supervisors in time for the yearly evaluation meetings held during Spring Quarter, they will not be reviewed, and they will be informed that they are not in good standing.

15. If a student is placed on monitoring status or probation, they will meet with the DCT and receive a letter describing the nature of the concerns, what steps need to be taken to address those concerns, and the timeline for making those steps. If the student is terminated from the program, they will meet with the DCT and receive a letter describing the nature of the concerns.

16. Monitoring status indicates some concerns about research, clinical, or academic work or professional behavior, but the concerns are not serious enough at the time to warrant disciplinary action. As such, we do not have to report that students have been on monitoring status when they apply for internships. At the same time, it is important that students address any concerns in a timely manner as concerns that have not been effectively addressed in a timely manner could lead to probation, which is a disciplinary action and is reported when students apply for internship, which would likely affect success in matching with an internship.

17. Students cannot be advanced to initial or final candidacy or apply for internship or graduation unless they are in good standing.

18. Students should keep a copy of their annual evaluations and their supervisor rating forms, as well as copies of course or TA evaluations.

Ethical Conduct and Professional Behavior

1. It is the student's responsibility to be familiar with Program, Department, and University regulations concerning academic integrity, student and faculty responsibilities, and degree and program requirements. Additionally, students are expected to know and adhere to the APA's ethical standards and guidelines for professional activities as well as the law and regulations governing the activities of psychologists in the State of Colorado. Violations of University, APA, or Colorado codes, regulations or law may lead to sanctions including separation from the Program and University.

2. Although there is not currently a formal dress code, it is important to remember that clients and research participants are seen in the building, and thus, it is important to dress appropriately, even if students are not seeing a client or research participant.

3. As a professional, especially one in the clinical field, students should carefully consider what they post on social media, personal websites/blogs, and dating apps.   It is not uncommon for fellow professionals, potential employers, internship sites, or clients to either seek out or encounter such information. Legal authorities are looking at websites for evidence of illegal activities.

Although signature lines are ways of indicating uniqueness and philosophy, one is not in control of where the emails will ever end up and might affect how others view students as a professional.

Quotations on personal philosophy, religious beliefs, and political attitudes might cause unanticipated adverse reactions from other people. Similarly, greetings on answering machines and voicemail messages that might be entertaining to peers, express individuality, and indicate a sense of humor, may not portray a professional image. If cell phones or home telephones are used for professional purposes (research, teaching, or clinical activities), be sure the greeting is appropriate and professional in demeanor and content.

If students identify themselves as a graduate student in our program, then we have some interest in how they portray themselves. If they report doing something unethical or illegal in a public forum (i.e., social media, website), then that content may be used by the program to determine disciplinary actions, including termination from the program. As a preventive measure, the Program advises that students (and faculty) approach online content includes personal information carefully. Is there anything posted that one would not want the program faculty, employers, family, or clients to read or view?

4. In a related vein, the following is the University's social media policy, which applies to the student as an employee. Online personas, and the content that is published, should be consistent with the University of Denver's values, brand guidelines, social media guidelines, policies and professional standards:

   a. Public communications concerning the University of Denver, faculty, staff and all employees of the University and any other affiliates of the University of Denver must follow University of Denver policies. Accordingly, employee complaints regarding alleged discrimination, unlawful harassment, or safety issues should be made consistent with the complaint procedures in the employee handbook.

   b. Social media communications are individual interactions, not organizational communications, unless managing a University's sponsored site in an official capacity. Employees can be held personally liable for their posts. For this reason, employees should use common sense and exercise caution with regards to exaggeration, obscenity, guesswork, copyrighted materials, legal conclusions and derogatory remarks or characterizations.

   c. If students discuss work-related matters online that are within the area of job responsibility, they must disclose their affiliation with the University.

   d. Students may not disclose any sensitive, proprietary, confidential, legal or financial information about the University or individuals affiliated with the University. They may not disclose information protected under FERPA, HIPAA, or other laws or regulations.

   e. While students may respectfully disagree with the University actions, policies or leadership decisions, they may not attack personally or post material that is obscene, defamatory, discriminatory, harassing, libelous or threatening with regard to the University, employees of the University or any affiliates of the University.

f. All University of Denver social media accounts must be registered with University Communications and follow University of Denver brand guidelines.

Please consult with Human Resources if there are any questions about the appropriateness of publishing information relating to the University, its faculty, staff or any affiliates

6. Students' DU email addresses are posted on the departmental website and the university website. Students are encouraged to keep a separate personal account (perhaps on Gmail as many do). You should university accounts to communicate with clients, often using encryption through DU's system to ensure privacy. The clinic has an email account specific to the clinic which will enable you to communicate with clients without using your individual work email.

7. If a student has been convicted of a felony or are convicted of a felony while in training, they should consider discussing the issue with the DCT as it can pose significant problems for placements, internships, or licensure.

8. In our APA-accredited program, we are committed to a training process that ensures that graduate students develop the knowledge, skills, and attitudes to work effectively with members of the public who embody intersecting demographics, attitudes, beliefs, and values. When graduate students' attitudes, beliefs, or values create tensions that negatively impact the training process or their ability to effectively treat members of the public, the program faculty and supervisors are committed to a developmental training approach that is designed to support the acquisition of professional competence. We support graduate students in finding a belief- or value-congruent path that allows them to work in a professionally competent manner with all clients/patients.

For some trainees, integrating personal beliefs or values with professional competence in working with all clients/patients may require additional time and faculty support. Ultimately though, to complete our program successfully, all graduate students must be able to work with any client placed in their care in a beneficial and noninjurious manner. Professional competencies are determined by the profession for the benefit and protection of the public; consequently, students do not have the option to avoid working with particular client populations or refuse to develop professional competencies because of conflicts with their attitudes, beliefs, or values.

Spanish Language Training and Tool Resources

If you wonder about your Spanish proficiency level
-You could take DU's free proficiency exam
(http://www.du.edu/ahss/cwlc/testing/incomingstudents.html). This will give you at least a basic idea of your current reading ability level as it relates to Spanish vocab and grammar.
-You could take the STAMP assessment. This provides a detailed, formal assessment of reading, writing, speaking, and listening. It costs $50 and is administered through DU's Center for World Languages and Cultures. You can register for a specific date on which to take the test by going here:
http://www.du.edu/ahss/cwlc/testing/grad_proficiency.html

Improving your Spanish language skills/ability level
The DU library subscribes to several free language proficiency development tools:
http://library1.du.edu/site/about/rosettaStone.php
Some classes in GSSW are taught in Spanish.

DU's Center for World Languages and Cultures
Spanish tutoring is offered through DU during weeks 2-10 of the fall, winter, and spring quarters in Sturm Hall room 201. Tutoring is free to all DU students and is first come, first served, on a drop-in basis. As an alternative to attending a tutoring session, you can also attend open chat sessions with a native Spanish speaker (also in Sturm Hall room 201). No tutoring or chat sessions are held during finals or over the summer, winter or spring breaks. For a schedule of tutoring appointments and chat sessions, see: http://www.du.edu/ahss/cwlc/tutoring/index.html

Immersion study
There are many options for psychologists who want to do an immersion period working with Spanish speakers. A couple of example programs are outlined below:

1. The Encuentros School (http://www.learnspanishinmexico.com/pros.html). One of our students did this program a couple of years ago and here is what she had to say about it: "I did two weeks of classes at the Encuentros school, in Cuernavaca, Mexico. Jeannie Andersen, an American woman married to a Mexican man, owns the company, and the school is run out of their beautiful house. The psychology part was pretty personalized based on my training needs, which was nice."
2. Alliant International University's California School of Professional Psychology conducts a five-week summer immersion program at its Mexico City campus (https://www.alliant.edu/cspp/programs-degrees/spanish-language-cultural/mexico-immersion-program.php). For the first four weeks, students live with local families and attend classes on Latin American and liberation psychology. They also travel into the countryside and visit with indigenous healers to learn about traditional healing practices in a rural community, says professor Jason Platt, PhD, who leads the group. Student have the opportunity to learn about Mexican culture and practice Spanish language skills.
3. Ecuador Professional Preparation Program (http://www.ecuadorppp.com/four-week-cultural-immersion-experience/).

Externships for Child Clinical students who are interested in providing services in Spanish

Denver Health has a child track in which you can see young children who speak primarily Spanish and during which you can get supervision in Spanish.

Research relevant training for working with diverse populations
APA holds an advanced summer institute called "Research Methods with Diverse Racial and Ethnic Groups." Some of the topic areas of this institute's training focused on community work and research

methods relevant to immigrant and Latino populations.

See more at: http://www.apa.org/science/resources/ati/res-diversity.aspx

What can count toward my "Tool?"

In the past, students have used one of the classes offered by the GSSW as part of their tool proposal. One student, for instance, used SOWK 4749 and the APA "Research Methods with Diverse Racial and Ethnic Groups" as part of a tool that they called Research Methods and Statistics with a Focus on Multicultural Populations. Certain higher-level immersion programs have also sometimes been approved of as part of a tool. However, it is unlikely that basic Spanish language classes (e.g., those offered through DU's Language Department and typically falling in the 1000 or 2000 level) will be approved as part of a tool. Per department policy, all tools must be approved by your area; therefore, concrete feedback on what might be approved can only be obtained on a case-by-case basis. Please contact the DCT if you have specific questions.

Student Employment and Activities Outside of the Program

1.   Students engage in many activities not officially part of the training program. Often students are asked to participate in activities due to their specialized training and interests, either as volunteers and consultants or as paid staff for an agency, institution, business, or program. Students may seek such opportunities to gain experience, to fulfill personal interests or for income. The Clinical Psychology Program makes no *a priori* restrictions on the nature or number of these outside activities, except as covered by its Ethical Principles requirements. The program faculty assumes students will use sound judgment in deciding to participate in which outside activities and not misrepresent their credentials or involvement of the program in such activities.

2.   Although some employment or activity opportunities can clearly enhance a student's training experience, others are far less valuable from a training standpoint. Before accepting a job or volunteer position, students should consider whether it will provide a useful training experience that is consistent with their professional goals.

3.   Students are strongly urged to discuss their plans for outside employment/activities with their advisor before making definite plans and commitments. Often it is difficult to judge how much a student can work outside the program while still making adequate progress within the program. Advisors can help to decide which course of action, all things considered, is optimal for training.

4.   All students are required to be fulltime students in their preinternship years; in fact, the program does not allow a student to be part-time. Students must inform the DCT about each quarter of any outside activities (related or not) which entails 10 hours or more of work/activity. Such activities could raise questions about whether the student is a fulltime student.

5.   What students do outside of the Program reflects on the Program. Thus, it is the student's responsibility to see that all work they perform is consistent with the ethical guidelines of the American Psychological Association and with state and federal statutes. This responsibility holds for program-related duties as well as non-program employment or activities. Students should be aware that any violations of statutes and ethical guidelines could affect their status in the program and later license eligibility status. If there is any ambiguity, students should seek advice from the DCT about whether

the work is appropriate to do without having the credentials of a psychologist.

6.   Students are also responsible for informing those associated with the outside activities that their work is unrelated to their university affiliation and ensure that no public claim of a relationship is permitted.

7.   Students and their employers are fully liable for work students perform outside of the program. Students are not covered by university professional liability insurance when performing work that is not associated with a program requirement. Students should consult with their prospective employer regarding professional liability coverage before accepting clinical employment.

8.   After completing their internships, if a student has not completed all requirements for the program, students may need to take a paid position. It is important to remember, however, that there is an 8-year limit for completing all requirements, and taking such a position—especially a fulltime position- may jeopardize one's ability to complete all requirements on time.

Disabilities

1. If a student has a disability/medical issue protected under the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act and needs to request accommodations, please make an appointment with the **Disability Services Program** (DSP); 303.871.2372 located on the 4th floor of Ruffatto Hall; 1999 E. Evans Ave. Information is also available on line at http://www.du.edu/disability.dp. See the *Handbook for Students with Disabilities.*

2. Often accommodations are done at the individual course level. Because the Ph.D. in psychology involves a systematic and sequential program of training, accommodations can be also considered from an overall programmatic perspective. If a student is requesting this kind of accommodation, they should follow the procedure described in the prior paragraph and then contact the Director of Clinical Training. We are not allowed to make accommodations unless these procedures are followed.

Terminal Master's.

Occasionally, a student may determine that they do not want to complete a Ph.D., or the area may deem that is not an appropriate option. In such instances, a student may be awarded a terminal master's if they have completed all the requirements for a master's degree.

Offering Psychological Services

Students cannot present themselves as a psychologist or offer psychological services until they have received a Ph.D. and become licensed (or are being supervised for licensure). They cannot present themselves professionally as a graduate student in our program without our approval. This would include both volunteer opportunities as well as work opportunities.

Student Selection and Support

Our philosophy is to admit a small number of very talented students, all of whom we expect to graduate from our program. Our main interest is in providing a supportive atmosphere for clinical and research growth and in sustaining a student financially. We seek to provide financial support for all students in the first four years. So far, we've been successful partly because we limit the number of students and partly because of our adequate final resources (e.g., teaching assistantships, and research assistantships). We strongly encourage interested students to consider applying for individual NRSAs, NSF grants, individual APA Minority Fellowships, or other fellowships/grants described in this handbook. These awards offer significant advantages to the student.

Other Sources of Support

Other sources of support are described in the Psychology Department Handbook and the University Graduate Bulletin. These include resources on campus, affinity groups, and due process and grievance procedures.

Repayment of Loans

The National Institutes of Health (NIH) repays outstanding student loans through its extramural Loan Repayment Programs (LRPs). The LRPs target researchers who are or will be conducting nonprofit biomedical or behavioral research, and the application cycle opens September 1. The five extramural LRPs are Clinical Research, Pediatric Research, Health Disparities Research, Contraception and Infertility Research, and Clinical Research for Individuals from Disadvantaged Backgrounds.

Competition/Cooperation

Graduate program cultures range from competitive to cooperative. Ours, by long tradition, tilts heavily toward the cooperative and that is one of our important strengths. Learning is not only more fun; it is often more effective in a cooperative context. At the same time, students are encouraged to do the best they can; excellence is valued and essential for obtaining desired clinical and research positions. We expect our students to be as productive as they can be in all domains.

Academic Honesty

You are expected to abide by DU's academic honor code: http://bulletin.du.edu/graduate/academic-and-student-support-services-policies-and-procedures/student-conduct/honor-code/   All work you submit should be entirely your own. The use of sources (ideas, quotations, paraphrases) must be properly acknowledged and documented. Violations will be taken seriously. For the consequences of academic dishonesty, refer to the University of Denver website on Citizenship and Community Standards: http://bulletin.du.edu/graduate/academic-and-student-support-services-policies-and-procedures/student-conduct/honor-code/ . If you are in doubt regarding any aspect of these issues, please consult with your instructors or research mentors before you submit any relevant work.

Criminal Record

A criminal history may be a potential barrier for students during their academic and professional career. These barriers include:(a) difficulty passing background checks required for research and teaching assistantships ,(b) difficulty or inability to secure an externship or internship, which is required for the degree, (c) difficulty or inability to obtain licensure and (d) difficulty or inability to obtain employment as a clinical psychologist. No student is required to disclose any aspect of their background to the program, but students are encouraged to seek consultation, at their discretion, if additional information is needed.