

Clinical Concentration Requirements

Mission and Training Objectives

In 2004, the clinical faculty decided to adopt a clinical-science training model. In short, we see clinical psychology in all of its forms as a scientific enterprise, and it is our aim to train students in the philosophy, fundamental principles, and methods of behavioral science so that they may contribute to the scientific literature and/or effectively apply scientific values and methods in any professional domain. This does not mean that we seek to restrict the research and clinical activities of our students to a narrow range of clients and empirically supported practices with little room for creativity or innovation. Rather, it means that we want our students to bring a critical skepticism to new and existing knowledge claims, to have a firm grasp of the fundamental principles in the foundational areas of psychology, to generate and espouse only testable and falsifiable theories, and to be able to apply appropriate empirical methods and analyses in their attempts to understand, predict, and influence behavior in all professional settings.

In line with these objectives, we have designed a curriculum that is intended to provide students with:

- 1) the research skills appropriate for making independent contributions to the empirical and theoretical foundations of clinical psychology;
- 2) effective training in evidence-based psychological interventions;
- 3) the ability to think critically about human psychological functioning;
- 4) an understanding of the core content domains underlying psychological science;
- 5) the background skills allowing them to teach psychology courses in their area of expertise.

The clinical curriculum was designed with these objectives in mind.

Required courses for clinical students.

In addition to the courses required of all students (see page 8), clinical students are required to take the following courses: Introduction to Clinical Science, Seminar in Psychopathology, Clinical Interviewing, Pre-Clinical Practicum, Psychological Evaluation: Cognitive and Neuropsychology Functions, Psychological Evaluation: Personality Functions, Evaluation Lab, Practicum in Psychological Evaluation, Diversity Issues in Clinical Psychology, Clinical Ethics, Empirically Supported Interventions, Case Formulation, three clinical electives, and the courses necessary to satisfy the APA foundation requirements. Clinical students are not required to complete a minor or secondary concentration.

Clinical Electives. Clinical electives are intended to provide students with more in-depth exposure to the literature concerned with specific interventions and treatment populations. At least one of a variety of courses, such as Empirically Supported Treatments for Substance Abuse, Empirically Supported Interventions with Children and Adolescents, Assessment Procedures with Children and Adolescents, Trauma, Empirically Supported Treatments of Anxiety and Panic, Acceptance and Commitment Therapies, Health Psychology Interventions, etc, will be offered each semester, and students, in consultation with their advisors, are free to take the electives that are best suited to their specific interests and career plans.

APA Foundation Courses. In accord with the training requirements of the American Psychological Association (APA) and the certification/licensure requirements of most states, every clinical student must demonstrate competence in several specific areas. Competence is

normally demonstrated by completing three or more hours of graduate level coursework with a grade of B or better. The full list of APA foundation requirements along with courses that may be used to satisfy them are presented below. Note that many of these requirements are satisfied by the core clinical courses.

A. The breadth of scientific psychology, its history, its research methods, and its applications. This involves exposure to the current body of knowledge in:

1. Biological Aspects of Behavior.

Required course:

Psych 540 Biological Basis of Behavior

2. Cognitive and *Affective Aspects of Behavior.

Required course:

Psych 561 Cognitive Processes

*The affective part of this breadth requirement will be addressed in sections throughout several other required courses. These courses include: Biological Aspects of Behavior, Cognitive Processes, Social Interaction, Advanced Developmental Psychology, and Psychopathology.

3. Social Aspects of Behavior.

Required course:

Psych 578 Social Interaction

4. History and Systems of Psychology.

Required course:

Psych 511 History and Systems of Psychology

5. Psychological Measurement.

Required courses:

Psych 533 Psychological Evaluation: Cognitive and Neuropsychology Functions

Psych 534L Practicum in Psychological Evaluation

Psych 535 Psychological Evaluation: Personality Functions

6. Research Methodology.

Required courses:

Psych 502 Design and Analysis of Experiments

Psych 504L Design and Analysis of Experiments Laboratory

Psych 505 Research Seminar

7. Techniques of Data Analysis.

Required courses:

Psych 501 Advanced Statistics

Psych 503L Advanced Statistics Laboratory

B. The scientific, methodological, and theoretical foundations of practice in professional psychology. This involves exposure to the current body of knowledge in:

1. Individual Differences in Behavior.

Required courses:

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| Psych 532 | Seminar in Psychopathology |
| Psych 533 | Psychological Evaluation: Cognitive and Neuropsychology Functions |
| Psych 534L | Practicum in Psychological Evaluation |
| Psych 535 | Psychological Evaluation: Personality Functions |

2. Human Development.

Required course:

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| Psych 521 | Advanced Developmental Psychology |
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3. Psychopathology.

Required course:

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| Psych 532 | Seminar in Psychopathology |
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4. Professional Standards and Ethics.

Required courses:

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| Psych 600L | Clinical Interviewing |
| Psych 600L | Pre-Clinical Practicum |
| Psych 650 | Clinical Ethics |

C. Diagnosing or defining problems through psychological assessment, and both formulating and implementing intervention strategies. This involves exposure to the current body of knowledge in:

1. Theories and Methods of Assessment and Diagnosis.

Required courses:

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|------------|---|
| Psych 532 | Seminar in Psychopathology |
| Psych 533 | Psychological Evaluation: Cognitive and Neuropsychology Functions |
| Psych 535 | Psychological Evaluation: Personality Functions |
| Psych 600L | Clinical Interviewing |
| Psych 600L | Case Formulation |

2. Effective Intervention; Consultation and Supervision; Evaluating the Efficacy of Interventions.

Required courses:

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| Psych 650 | Empirically Supported Treatments |
| Psych 650 | Clinical Electives [students must take 3 such courses] |
| Workshop | Supervision: Theory and Methods |
| Workshop | Psychological Consultation: Theory, Methods, and Practice |

D. Issues of cultural and individual diversity.

Required course:

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| Psych 650 | Diversity/Multicultural Issues in Clinical Psychology |
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E. Attitudes essential for life-long learning, scholarship inquiry, and professional problem solving.

Required courses:

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| Psych 551 | Graduate Problems |
| Psych 599 | Master's Thesis (if applicable) |
| Psych 699 | Dissertation |

Again, because most of these APA foundation requirements are satisfied by the core clinical courses, most students will need to take one additional course in each of the following areas: Biological Aspects of Behavior, Cognitive and Affective Aspects of Behavior, Social Aspects of Behavior, and Human Development.

Schedule of Courses - Fall of Year 1 through Spring of Year 3.

Presented below is a typical course schedule from the fall semester of the first year through the fall semester of the third year. Please note that this is a tentative schedule, as the specific semester in which a course is offered may vary depending on faculty teaching loads, sabbaticals, and other factors. In consultation with their advisors, students should plan to take their clinical electives, foundation courses, and other course requirements (e.g., History and Systems) as best fits their schedules, their research activities, and their educational objectives.

Year 1

Fall

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| Psych 650 | Introduction to Clinical Science (3 hrs) |
| Psych 600L | Clinical Interviewing (1 hr) |
| Psych 650 | Case Conference (1 hr) |

Spring

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| Psych 632 | Seminar in Psychopathology (3 hrs) |
| Psych 600L | Pre-Clinical Practicum (1 hr) |
| Psych 650 | Case Conference (1 hr) |

Year 2

Fall

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| Psych 533 | Psychological Evaluation: Cognitive and Neuropsychology Functions (3 hrs) |
| Psych 535 | Psychological Evaluation: Personality Functions (3 hrs) |
| Psych 600L | Evaluation Lab (1 hr) |
| Psych 650 | Case Conference (1 hr) |

Spring

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|------------|---|
| Psych 534L | Practicum in Psychological Evaluation (3 hrs) |
| Psych 650 | Empirically Supported Treatments (3 hrs) |
| Psych 650 | Diversity/Multicultural Issues in Clinical Psychology (3 hrs) |
| Psych 650 | Case Conference (1 hr) |

Year 3

Fall

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| Psych 650 | Clinical Ethics (3 hrs) |
| Psych 631L | Practicum in Psychotherapy with Adults (1-3 hrs) |
| Psych 650 | Clinical Elective (3-6 hrs) |

Spring

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| Psych 650 | Case Formulation (2 hrs) |
| Psych 631L | Practicum in Psychotherapy with Adults (1-3 hrs) |
| Psych 650 | Clinical Elective (3-6 hrs) |
| | Initiate preliminary exam |

Case Conference: Case conferences are held bi-weekly during the fall and spring semesters and are scheduled early Friday mornings in an attempt to minimize schedule conflicts. Unless otherwise excused, all pre-internship clinical students are required to attend case conferences and to enroll in the course for one hour of credit every semester from the fall of the first year until internship. The primary objective of the case conference series is to provide an opportunity for all of the clinical faculty and students to come together to hear and discuss either an actual clinical case or a presentation relevant to clinical science. While conference presenters include advanced clinical students, faculty, and community professionals, the primary presenters are students enrolled in the Case Formulation course. This course is typically offered in the spring of the third year, once most students have obtained clinical cases. The purpose of the course is to facilitate the process of formulating clinical cases within a clinical science model. Requiring students in this course to present at case conferences derives from the clinical faculty's belief that there is a mutual benefit to both presenters and attendees when case formulations are subject to a dialectical process of open discussion and exploration.

Clinical training, therapy, supervision, and practica.

Clinical students begin their professional training during the first year with the Clinical Interviewing (fall) and Pre-Clinical (spring) courses. In the Clinical Interviewing course, students conduct intake interviews at the Psychology Clinic under the supervision of the course instructor. In the Pre-Clinical practica, students become familiarized with the procedures and policies of the Clinic and continue intake interviews under the supervision of the Clinic Director. Students are also introduced to general ethical and professional issues, especially those that pertain to working in a clinic setting. Throughout the second year, core courses and practica focus on training in psychological assessment. Although students do not typically begin seeing therapy clients until the fall semester of the third year, interested students with sufficient preparation and experience may begin supervised psychotherapy with one client during the spring semester of the second year.

Beyond the second year of training, all clinical students are required to maintain the equivalent of a minimum caseload of two psychotherapy clients during every semester in residence. This rate of psychotherapy training will enable the student to acquire the minimum number of required clinic hours (500) in three years (See Clinic Orientation Manual for additional details on acquiring and recording Clinic hours). Exceptions to this typical two-client psychotherapy caseload may be approved by petitioning the clinical committee. One example of a request would be a student who wished to substitute ongoing assessment experience at the clinic for one of his/her psychotherapy cases one semester. A second example of a request would be a student who wished to cut back somewhat one semester (e.g., to finish comprehensive or preliminary examinations) when he/she had already accumulated many more than the expected number of clinic hours that year.

The process of picking up a case typically begins with the student reviewing the Clinic's Waiting List, and then consulting with the student's clinical supervisor. It is the student's responsibility to maintain the requisite caseload (assuming cases are available at the Clinic). Any student seeing clients at the Clinic is required to keep timely case notes, including but not limited to: (1) an intake summary, (2) a case note entry for every session, and (3) a termination summary filed immediately upon closing or transfer of a case. The keeping of proper, timely, and accurate case notes is a serious ethical and legal responsibility.

Supervision is available both from faculty and from community professionals who volunteer professional time to supervise graduate students. Supervision is normally on an hour-for-hour

basis (one hour of supervision per hour of psychotherapy), although arrangements vary. Particulars of arranging supervision can be obtained from the Clinic Orientation Manual. In general, the Director of Clinical Training (DCT) will survey the students at the start of each semester to determine who is in need of a new supervisor, and whether the student has preferences. After determining the availability of potential supervisors, assignments will be made.

Enrollment in the Practicum in Psychotherapy with Adults (631L) is typically required during every fall and spring semester (but not the summer) in residence beyond the second year of training. Students should enroll under their clinical supervisors' section numbers for the practicum. Students with more than one supervisor should enroll for at least one hour under each supervisor's section number. Continuous enrollment in 631 is required as a condition of being in good standing for students beyond the second year of training who are in residence in Albuquerque until they have reached the 500-hour minimum. The only exception to this requirement pertains to students who are conducting therapy through approved external practicum sites under the supervision of a community professional. In order to remain in good standing, these students must enroll in Psych 600L (Practicum) for each semester during which therapy is conducted through an external site.

Clinical students are required to obtain psychotherapy supervision from at least three different members of the Department faculty (but not including adjunct faculty) during their course of training. This provides exposure to a range of styles and viewpoints, and avoids excessive reliance on the time and talents of any particular supervisor. The Clinic Director can be used as one of the three required faculty supervisors.

In addition to three faculty supervisors, students may request outside supervisors or placements at external practicum sites. **Before a student begins working with an outside supervisor or at an external practicum site, the supervisor or site must be approved by the clinical faculty.**

Typically, this requires submitting for review by the clinical committee the potential supervisor's vita and/or a description of the practicum site including the professional duties to be performed by the student, the credentials of the professionals who will provide supervision, and the methods and frequency of supervision. Outside supervisors will be contacted periodically to check on students' progress, and at the end of every academic year or termination of the practicum, they will be asked to provide an evaluation of the student's work. Students will also be asked to evaluate his/her supervisory and practica experiences. The Clinic Director is primarily responsible for organizing these evaluations.

There are a number of external practica already approved either for course credit or, in some cases, for pay. These include the UNM Department of Psychiatry, the Albuquerque Veterans Administration Medical Center, Programs for Children, the UNM Center for Developmental Disability, the UNM Department of Pediatrics, the UNM Neuropsychology Clinic, and the Milagro Clinic.

Provision of professional services by students

Clinical students sometimes engage in the provision of professional services outside the Department. APA ethical standards govern all students enrolled in APA clinical programs and stipulate that no psychologist (or student) should provide professional services unless he or she (1) has been properly trained to provide the service, and (2) is properly supervised prior to certification.

For this reason, **the Department requires that any student who intends to provide any professional service (including assessment, therapy, consultation, etc.) must give prior notification and receive approval from the Department.** The “Notification of Intent to Provide Professional Services” form is available from either the Graduate Student Advisor or the Main Office, and must be signed by your advisor, the DCT, and the Chair of the Department. **Providing any professional service without receiving this prior approval is a violation of APA ethical standards.** This form need not be filed for services provided within the context of regular classes, practica, or work at the Clinic supervised by our faculty. The form must be filed, however, whether or not you receive payment for the services provided.

Personal psychotherapy

The Clinic Director maintains a list of community professionals who have volunteered to provide psychotherapy for graduate students in our Department at a reduced or waived fee. Clinical students are encouraged to consider receiving personal psychotherapy as a part of their training. The professional therapists volunteering their time represent a wide range of therapeutic perspectives and expertise. Arrangements for personal therapy are made through the Clinic Director only, and confidentiality is assured.

Clinical Internship

All clinical students must complete a formal pre-doctoral internship, typically in their sixth year of training. Students are required to complete their preliminary examinations and have an approved dissertation proposal **before applying** for internship. The DCT will not certify a student’s readiness for internship if these conditions are not met. Because internship applications are due in November, this effectively means that students must have an approved dissertation proposal by October of the year that they intend to apply for internship. The DCT holds a meeting each fall with all students who are considering or planning to go on internship the following year. Participants in the meeting share information about identifying potential sites, the application process, and application strategies.

It is highly recommended that students defend their dissertations before going off on internship. Unless the dissertation is defended or a leave of absence is taken, students must continuously enroll in a minimum of three dissertation hours each semester they are on internship. Note that the Office of Graduate Studies (see OGS Guidelines) requires students to be enrolled during the semester in which they complete their degree requirements, so a leave of absence may render students ineligible to graduate in the semester they complete their internships. Students who successfully defend their dissertations before leaving for internship are required to enroll in a one hour internship course while on internship. This is a considerably less expensive alternative to enrolling for dissertation hours and, again, is highly recommended.

Petitioning the Clinical Committee

As mentioned throughout this document, students may petition the clinical committee for a number of reasons including approval of courses or external supervisors, extensions of deadlines, etc. All petitions should be endorsed first by the student’s faculty advisor and then presented to the DCT. The DCT will then bring the petition before the clinical committee. The committee will discuss the petition and recommend a course of action to the DCT, who will then communicate the outcome to the student. All petitions should specify the reasons for the request and, when appropriate, should be accompanied by pertinent or documenting information.

The Clinical Preliminary Examination

In 2005, the clinical committee decided to establish a preliminary examination process that is different from the comprehensive examination process adopted by the other areas of concentration, which is described in Appendix D of this document. The preliminary examination is a step toward advancement to candidacy for the Ph.D., demonstrating that the student is prepared to undertake the pursuit of knowledge at an advanced and more independent level, and specifically to begin the doctoral dissertation. The preliminary examination is not intended to be comprehensive, testing the student's mastery of any and all topics in the field of study. The demonstration of broad psychological knowledge occurs in other ways within the predoctoral program, particularly through successful completion of the required sequence of graduate coursework.

Although students normally complete their master's degree before beginning their preliminary examination, this is not required. All clinical students initiate the preliminary examination process no later than the end of the spring semester of the third year and complete the defense no later than the end of the fall semester of the fourth year. In some instances, the process may be initiated earlier in the third year, if both the student and the student's advisor agree that the student is ready. Students who wish to initiate the process before the spring semester of the third year should petition the clinical committee for approval to do so.

Students may complete the preliminary examination in either of two ways. Both of these involve the independent preparation of scholarly work that is presented and defended to an appointed three-member faculty committee. All Department faculty and The Clinic Director are eligible to serve on all student committees, including the preliminary examination committee. Occasionally, professionals from outside the Department with particular expertise in a student's area of interest may serve on the preliminary examination committee. Students in consultation with their advisors determine which of the two options would best serve their career development. Details of the two options along with their respective evaluations criteria are presented in Appendix D.

Yearly Reviews

Near the end of each academic year, all clinical students meet with a three-member clinical faculty committee for a yearly review. The purpose of the review is to assess students' progress, give and get feedback, provide support and guidance, and address problems. The committee members are selected by the DCT and include the student's advisor and two members of the clinical faculty with similar research interests or who have served as an instructor or supervisor for the student. Students are required to complete their annual progress reports (Appendix G) before the scheduled meeting, and a formal meeting-report form (Appendix H) is completed and signed by both the student and his/her advisor at the end. Meetings last between 30 and 60 minutes. The meeting-report form outlines the structure and main topics of discussion, but any topic is open for discussion and exploration. Students are encouraged to ask questions, seek feedback, and comment upon faculty feedback. For each student, course performance, degree progress, research productivity, clinical activities, career objectives, teaching experiences, practica placements, and overall progress are discussed, with an eye toward providing recommendations for the next year. As stated earlier, all students are expected to obtain a B or better in all coursework. Progress toward timely completion of major milestones (e.g., proposing Master's Thesis, Preliminary Exams, etc.) is reviewed in relation to the Department's requirements for remaining in good standing (Appendix F). Department guidelines for rating student research activity are presented in Appendix E. Written summaries of the yearly reviews are provided to each student and placed in their files.

Remediation Procedures and Termination Guidelines

Although the purpose of the annual review is primarily to provide support and encouragement, there are times when students fail to meet Department expectations in one or more of the domains listed above. In those cases, the annual review is used to develop a remediation plan. The first step in formulating this plan is to assess the reasons why expectations were not met. In many cases, there were unforeseen circumstances or circumstances beyond the student's control. Examples include unforeseen personal or family circumstances, illnesses, unexpected difficulties obtaining research participants, or unexpected problems with experimental procedures. In these cases, guidelines are generally adjusted to accommodate the student's special circumstances, and a plan is developed to help the student get back on track.

In other situations, however, more specific remediation plans are necessary, and contingencies for continued enrollment in the program may be put in place:

Unsatisfactory Course Performance: If a student fails to achieve a B or better in a required course, the committee consults with the course instructor(s) about the reasons for the student's course performance and discusses possible remediation. In most cases, students are simply required to retake the course. Occasionally the instructor might recommend that the student simply review the course material on his/her own, and then retake the final exam. This would most commonly occur if the student performed reasonably well during the semester, but then had an uncharacteristically difficult time on the final exam, such that the final grade was not a B. On the other hand, if the instructor believes that the student lacks adequate preparation for the course, remedial courses or a course of directed study may be recommended. For example, if a student earns below a B in a statistics course, the instructor could recommend that the student demonstrate mastery in a more basic statistics course prior to retaking the department's required statistics course. In those rare cases when a student fails to satisfactorily complete the remediation process or it is determined that the student may be unable to master the course material, the clinical committee meets to consider termination from the program. Again, this is a rare event, and the clinical committee exhausts all reasonable options before arriving at this decision.

If a student's cumulative grade point average falls below 3.0, university policy dictates that the student will be placed on academic probation [see 2007-2008 UNM Catalog: The Graduate Program, pp 72-73].

Unsatisfactory Degree Progress: Students not making satisfactory degree progress (Appendix F) for reasons other than extenuating circumstances are given a clear timetable for completing one or more requirements, and a consequence is outlined in the event that this is not accomplished. Failure to meet this timetable would be grounds for the clinical committee to consider termination from the program. Additionally students who are not making satisfactory degree progress lose priority for funding. Although most students in this situation will still receive funding, occasionally the funding lines are exhausted before that student is reached on the priority list.

Unsatisfactory Research Productivity: Students who fail to maintain at least satisfactory research productivity (Appendix E) for reasons other than extenuating circumstances may also lose priority for funding. However, as long as they are in satisfactory degree progress, they would not, for this reason, be considered eligible for termination.

Clinical Privileges/Impaired Clinician: Clinical privileges are the privileges of clinical doctoral students to provide psychological services within the Psychology Department and the Clinic and at certain settings outside the department which have been approved as part of the student's course of studies. Clinical privileges are automatically granted to students admitted for graduate study in psychology with a major in clinical psychology. Clinical privileges may be suspended or restricted for the protection of clients or to maintain the professional standards of the profession of psychology. The Clinical Committee's Policy on Clinical Privileges describes the circumstances under which clinical privileges may be suspended or restricted if a clinical student becomes impaired in carrying out their clinical duties. The purpose of this policy is to strike a balance between protecting the client, the department and the profession of psychology on the one hand, while simultaneously treating the student-clinician with respect and compassion. (see complete policy, Appendix M).

In some cases, the clinical committee may decide that the problems are sufficiently severe that the student is permanently dismissed from clinical work, and thus is terminated from the clinical program.

A student who is terminated from the clinical program may seek admittance to one of the non-clinical programs. In order for a student to transfer into a non-clinical program, the student first must locate a new mentor within 6 months of termination from the clinical program. The new mentor would then bring the student's case forward to the area committee for discussion and approval.