PRACTICUM HANDBOOK *B*

PRACTICA REQUIREMENTS AND PROCEDURES FOR CLINICAL PSYCHOLOGY



VANDERBILT UNIVERSITY PSYCHOLOGY DEPARTMENTS INTEGRATED GRADUATE PROGRAM IN CLINICAL SCIENCE PEABODY COLLEGE

AND

COLLEGE OF ARTS & SCIENCE

SPRING 2024

Table of Contents

		Page
•	Clinical Training: Practica Requirements and Procedure	3
•	Requirements	3
•	Practica placement	4
•	Length of placement and practicum agreement	. 5
•	Summer traineeships	5
•	Pre-practicum	5
•	Commonly Asked Questions	5
•	Evaluation of students	6
•	Clinical Supervision Checklist	6
•	Supervision	6-8
•	Protocol for Monitoring Professional Conduct	. 8-9
•	Practicum site evaluation	10
•	Internship	10
•	Summary of Practicum Experience for Internship	.10
•	Additional Requirements and Information	10
•	Background Check and annual Compliance Training	.10
•	Outside clinical activities/employment	11
•	Malpractice Insurance	11

Clinical Training: Practica Requirements and Procedures

Purpose and Eligibility. Practicum is an integrated component of the clinical doctoral program in which students develop key clinical competencies by progressing through a structured and sequential process of professional training. Only students currently enrolled in the clinical program are eligible to enroll in a practicum. Practicum credit will be allowed only for practica completed at sites approved by the Directors of Clinical Training.

Requirements. All students in the integrated clinical science program must complete a course in Professional Ethics (PSY 8353) as a prerequisite to practicum. The distribution of practicum experience should ideally be balanced by exposure to different settings and populations (e.g., children, adults, families or couples, medical clinic, other office settings, etc.) and services provided (assessment, individual psychotherapy, group therapy, consultation). A maximum of six credit hours of the total required credit hours will be allowed from any one training site for the purposes of meeting *basic* practicum requirements. The specific course numbers and credit hour minimums may vary between Peabody and A & S, so students should consult with the respective DCT regarding course registration and allocation of their credit hours. All students should register for practicum in their respective department (Peabody is PSY 9950 and 9951; A&S is PSY 8323 - 8326). Every practicum experience should include course enrollment, even if it is audit only, so that the experience is documented on the student's transcript and covered under the university liability insurance. Pre-practicum experiences do not involve any course enrollment.

An on-campus biweekly seminar is required for all students enrolled in practicum. This on-campus seminar serves as a forum to: a) discuss issues that arise in the course of practicum; b) build competence in case formulation; c) monitor the quality and progress of student training experiences; d) develop interpersonal and clinical competence in professional case consultation; and e) expand and sharpen technical intervention skills in evidence-based models. Competence in the following core areas is addressed throughout the class: 1) ethical and legal decision-making and awareness/knowledge/conduct needed for a professional standard of care; 2) case conceptualization from multiple theoretical perspectives; 3) responsibilities in the supervisory relationship; 4) evidence-based protocols and methods; 5) history of psychopathology, assessment and clinical intervention; 6) cultural issues in psychological intervention; 7) life-span developmental perspective on psychopathology and intervention; and 8) self-reflection, self-care and supportive collegial relationships.

In any clinical setting, the actual time on site may vary somewhat from week to week, depending on the case flow and client attendance. Students and supervisors will complete a practicum agreement at the beginning of the placement, and in this agreement, specify the number of hours expected each week (on average) and how those hours are to be allocated. For example, students may stipulate 12-15 hours per week (maximum 15). Of this time, they would typically have 6 patient contact hours or 1-2 assessment batteries. The remaining hours would be allocated to primary supervision (always at least one hour of face-to-face supervision), possible secondary supervision, seminars, team meetings, record keeping and collateral communications, preparation, observation, or other related activities. All students are strongly encouraged to keep track of their clinical experience hours from the beginning, to monitor their progress and gather the information that will eventually be needed for internship application.

Licensure considerations: All clinical work must be incorporated into the student's overall training and appropriately supervised so that no student is in a situation of unlicensed clinical practice. To count toward licensure in Tennessee, formal practica must be completed after 18 semester hours of required graduate coursework, including a course in ethics. At the doctoral licensure level, **Psychologist**, credits for practicum are typically not specifically counted. Completion of an APA accredited doctoral program in clinical psychology indicates that the practicum requirements for licensure are met in the state of Tennessee. Students enrolled in

the clinical training program are not required to have a license to participate in clinical practicum training, as the program ensures that a licensed HSP (health service provider) psychologist supervises all direct services delivered by practicum students.

Practica Placement

When: The primary application period for practicum is in the spring semester each year for the following academic year. Should an opportunity for practicum arise at a time other than this enrollment period, the student should contact either of the Associate Directors of Clinical Training (ADCTs) for authorization. Students must receive this authorization prior to enrolling in or beginning a practicum.

Planning: The student, his/her faculty advisor, and the Associate DCTs share joint responsibility for outlining a graded series of practicum experiences that fit the student's increasing competence and career objectives. Students will be advised each year as to current procedures for applying for practicum.

Practicum Kickoff: Each spring, the program sponsors a gathering of students and supervisors from each of the practicum sites, referred to as the "practicum kickoff." Each site supervisor gives a brief presentation concerning the opportunities available and is available for informal questions and discussion. The practicum kickoff allows for a yearly update of sites and supervisors and precedes student interviews and assignment.

Interview and Assignment: After the practicum kickoff, each student should submit a list of interview requests and an updated CV to the Associate DCTs in charge of practicum. These collective requests are reviewed before students are given the "go ahead" to initiate interviews. Additional sites for interviews may be recommended by the ADCTs to add to those requested by the student. Once this permission is given, it is the student's responsibility to arrange the interview, adhering to the dates set forth in the practicum application schedule. The student is also responsible for submitting any materials needed by the agency, such as a separate application, and a CV. If the student decides that they are no longer interested in an agency that they have requested, they should be sure to notify the ADCTs. **Prompt and responsible communication and adherence to directions given by program faculty is very important.**

Agency interviewers are asked to complete a brief Post-Practicum Interview Rating Scale (in Appendix of Forms file) for each student interview. This is designed to give students feedback about their interview performance that may be valuable in future interview situations. The ADCTs will take this under advisement and use the information to guide each student's progress.

After the interview period, the supervisor or site provides a rank-ordered listing of students who interviewed, noting any student who would not be an appropriate match, or who might benefit more from the placement after further experience. Students also submit final rank orderings by e-mail. Students should note any special circumstances that they think are important to placement decisions. All rank order preferences should be submitted in a timely manner as soon as interviews are completed.

The program faculty, including the ADCTs, DCTs and advisors are available throughout the application process for consultation. Students should not hesitate to arrange an appointment to talk about practicum options. In addition, more advanced students can provide excellent information about their practicum experiences. A listing of students who have experience at each site is included in the Appendix of Practicum Handbook A, the current listing of available sites.

Determination of practicum assignment is the responsibility of the ADCTs. After all information is gathered, the ADCTs discuss student and agency rankings and choices, and attempt to make the best possible match to meet the training needs of each student. Students, faculty and supervisors are then notified of the assignments. Occasionally, adjustments may be made if new information becomes available after the match has been set. However, it is important for all students to understand that it may not be possible to receive their first choice, and that they should make it clear prior to the match if they are unwilling to accept any of their listed alternatives.

Practicum agreement and length of placement. Practicum generally begins at the start of the fall term and ends at the conclusion of the spring term of the academic year. If it is acceptable to student, supervisor and the faculty, the placement may begin earlier or extend beyond the academic term. A practicum agreement (see Appendix of Forms file) should be discussed and completed within the first few weeks of practicum to establish a mutually agreeable training plan. This agreement will then be reviewed by the student's advisor and the ADCT, and any needed changes made. It should also be reviewed at the fall evaluation and possibly again in the spring, particularly with regard to updating goals and dates for conclusion, taking into consideration the student's progress and any circumstances or plans that may have developed over the course of the year.

Summer Traineeships: Sometimes students will want to begin their practicum placement over the summer, or they may be interested in the limited number of <u>paid</u> summer traineeships such as counselor positions at the Kennedy Center camp programs. Interviews for paid positions are generally announced separately, and the agency retains the sole right to select the candidates they desire, so this is separate from the matching procedure for unpaid practica. Otherwise, starting a placement in the summer, or limiting it to the summer should be discussed as part of the general practicum application process.

Pre-Practicum: Pre-practicum is an optional, limited exposure to practicum that occurs in the second year of the program or in the summer prior to third year. The goal of pre-practicum is to introduce a student to a clinical setting by "shadowing" a supervisor as preparation for entering that or another practicum. It should include approximately four hours per week of either observation or limited clinical tasks such as behavioral observations in the school setting or test administration with supervision. Pre-practicum may also take place in the context of clinical research activities. We do not maintain a formal list of pre-practicum sites, but several sites could potentially serve this purpose, especially those focused on clinical assessment. Pre-practicum plans are usually made at the end of students' first year, after the practicum placement process is completed. Students can initiate this process by discussing options with their advisor and the ADCTs.

COMMONLY ASKED QUESTIONS ABOUT PRACTICUM

- Q. "How do I choose the best placement to meet my needs?"
- A. Review the descriptions in Handbook A, which is updated every spring. Attend the practicum kickoff and ask questions. Discuss your professional goals and possible choices with your advisor and the ADCT or DCT. Agency interviews are a time for supervisors to evaluate you as a prospective practicum student, but also for you to ask

questions about the practicum. It is essential to be flexible about your options and to have three or four acceptable choices for any given year.

- Q. "How many agencies should I list as choices?"
- A. Students can usually be placed in one of their top three choices, although it may be necessary to interview at four or five sites if a limited number of spots in the selected choices limit the degrees of freedom in the overall group match. The ADCT's will provide guidance on how many interviews you will need each year and may suggest additional interviews as the process develops.
- Q. "What if none of these practica meet my needs?"
- A. Please clearly identify your needs, preferably in writing, in consultation with your advisor. Contact the ADCTs for an appointment. We will work together to develop an appropriate practicum placement.
- Q. "What if I decide, after submitting my interview requests, that I am no longer interested in one or more of the agencies I listed?"
- A. It is advisable to follow through on all interviews. If you are certain that you are not interested in the practicum, then you must call the agency representative to cancel your interview. Failure to do this is unprofessional. It is often valuable to stretch a bit by interviewing at places you might not list as top priority, although it is not beneficial to interview somewhere that you consider to be a mismatch for your needs.
- Q. "Is it possible to take practicum in the summer?"
- A. Some sites offer summer practicum training. It may also be possible to do a summer/fall, or spring/summer practicum. Check agency descriptions for details.
- *Q.* "Can I create my own practicum experience?"
- A. Specific options can be discussed. With any option, there must be qualified supervision by an independently licensed psychologist (HSP). Remember that any work involving client contact must be documented in the manner described in the "Requirements" section above.

EVALUATION OF STUDENTS

Evaluation of student progress is conducted jointly by student, supervisor on site, and practicum class faculty (ADCTs). Practicum class faculty monitor progress and adequacy of supervision throughout the year. Near the end of each semester, the ADCT will send evaluation forms to the supervisors via online survey. These forms are returned to practicum faculty members who will review the supervisor's detailed ratings and feedback. The final course grade is determined by the ADCT responsible for course enrollment. Students are graded on the basis of individual progress and mastery of goals set at the outset of their practicum experience in conjunction with class participation. In general terms, an "A" should indicate satisfactory

progress, a "B" should indicate limited progress with substantial need for improvement, and a "C" should indicate unsatisfactory progress toward competency.

Completion of evaluations is a collaborative process between program faculty, supervisors and each student. Timely completion of evaluations is important for a number of reasons, including the commitment to provide student feedback at predictable intervals as well as the need to meet deadlines for grade submission set by the University.

It is expected that the supervisor will go over his/her evaluation with the student prior to submitting it to the practicum faculty. Copies of the supervisors' evaluations are kept in a student's program files and may be read by the student, the student's advisor, and other clinical faculty members.

CLINICAL SUPERVISION CHECKLIST FOR STUDENTS AND SUPERVISORS

The training objective is for each student to develop practical competence in assessment, specific evidence-based interventions, professional communications, conduct, management of limits, and adherence to ethical standards and relevant laws governing the practice of psychology. We support the use of supervision for guiding the acquisition of a full range of professional skills. We expect that trainees and supervisors will address clinical techniques as well as professional and ethical issues with the assumption that all are relevant to acquiring practical competence.

Supervision should focus on specific case monitoring and skill training and be fully consistent with the Rules Governing Psychologists (Chapters 1180-1-4) as promulgated by the Tennessee Board of Examiners in Psychology. Students and supervisors are encouraged to review these rules, especially under the scope of practice stipulations in chapters 2-4, for further information concerning respective supervisory responsibilities under the law. To ensure that students receive supervision that conforms to these rules of practice and the APA ethics code (esp. Standards 3.05, 3.08, 7.04, 7.06, and 7.07), we require the following:

- a practicum agreement completed at the start of the placement;
- adequate monitoring of student activity, with never less than one hour per week of supervision;
- communication occurs regularly with the program faculty;
- evaluations are completed in a timely manner;
- practicum agreement be reviewed as part of the fall evaluation and any substantial changes discussed with the ADCTs;
- no sexual or any other potentially exploitive multiple relationships occur between students and supervisors.

If a student seems to have personal problems that may be interfering with competent performance of their practicum duties, the ADCTs should be contacted for further advisement. If the student is having difficulty of any sort in their placement, it is expected that they or their supervisor will promptly seek consultation from one or both of the ADCTs.

In the spirit of collaboration and contribution to the students' overall professional development, we hope that most typical challenges can be dealt with through discussion and informal negotiation. Concerns or conflicts should not be avoided, but rather viewed as part of the development of professional competencies. Please use the following protocol as a reference to facilitate communication between trainees, supervisors, and the training program faculty.

Goals for Supervision

	Ensure com	pete	nce of serv	ices deli	vered.					
	Ensure appr	ropria	ate standar	ds of car	e are	maintained.				
competenci		the	trainee's	applied	skill	development	and	acquisition	of	clinical

Structure of Supervision

Student is currently enrolled and in good standing in the graduate training program.
Supervisor is a licensed Psychologist with an HSP designation, or is supervised by HSP Psychologist.
Practicum hours should be allocated to allow sufficient time for supervision and other activities to facilitate skill acquisition. For every 6 hours of direct service, the student should receive 1- 2 hours of supervision. Additional supervision beyond this minimum may be necessary and desirable, as requested by either student or supervisor.
Specific terms of training experience are documented in the practicum agreement at the beginning of the training experience, and signed by the trainee, supervisor, student's advisor, and an ADCT. Any substantial updates (e.g., added activity, date changes) should be reviewed by the practicum faculty.
Trainee and supervisor jointly set goals for specific skill development.
Supervision focuses on specific monitoring of all cases seen by the student.
Supervisor assists the student in learning how to construct an appropriate clinical record.
Supervisor determines the adequacy of trainee's preparation for specific tasks, and assigns readings, or other homework to enhance the student's preparation.
Whenever feasible, the student augments case summaries with audio or videotape, or direct observation of performance to assist the supervisor in monitoring the case, and providing feedback.
At least once per semester, the supervisor directly observes the student's performance using one or more of the following methods: joint interview; co-lead therapy session or group; one-way mirror observation; live video stream; or review of video recording. Audio recording alone is not sufficient.
The student provides sufficient case information to allow the supervisor to monitor the diagnosis, treatment plan, intervention, and outcome of services.
The student reports any unusual occurrences immediately to the supervisor.
The supervisor provides regular, formal feedback concerning the student's performance.
If needed, the student is responsible for requesting additional supervisory structure for skill development beyond that initially offered or recommended by the supervisor.
Both student and supervisor are responsible for discussing any disagreements until

Both student and supervisor are aware of the following protocol for resolving concerns or conflicts that may arise in the supervisory experience.

Both student and supervisor understand that although clinical responsibility is shared for supervised cases, the supervisor retains final clinical responsibility, authority and

Protocol for Monitoring Professional Conduct

liability.

Students will regularly discuss their supervisory experiences with practicum faculty. For settings where a training director oversees the supervisory input of multiple staff members, we also recommend that the trainee meet at least once per term with that training director to review his or her overall experience. This will enhance the learning process and allow discussion of concerns without having to reach a "problematic" threshold.

Trainees understand that supervisors <u>must</u> be kept fully informed about any outside consultations the trainee plans to seek concerning any case over which the supervisor holds direct responsibility. The trainee is responsible for fully informing the supervisor about any actions or consultations related to their cases. Trainees also understand that the practicum faculty (ADCTs) must be kept apprised of all developments at the practicum training site. Any unusual occurrences, special clinical challenges, or clinical crises should be discussed with an ADCT. The ADCT's are available for consultation via phone, text or email and can usually respond either immediately or within a few hours.

If there is an impasse in communication with a supervisor, an ethical/legal concern has developed, or an ethical/legal violation appears imminent, the training program faculty (ADCT and/or DCT) should be contacted by the student, the supervisor, or site director (or all 3). The program faculty will meet with the student, with the supervisor or training director, and possibly conjointly as a group to attempt to reach one of the following possible resolutions:

- a. A plan for guiding the student toward a more productive involvement may be outlined.
- b. The program faculty may encourage the supervisor to seek consultation.
- c. The student's practicum agreement or relative duties may be modified.
- d. The supervisory assignment may be changed or modified.
- e. The student's term at the specific placement may be terminated, with appropriate provisions for transfer or termination of clients. The student may be transitioned to a different placement.
- f. Depending on the situation, the student may be subject to further review within the clinical program and sponsoring department if there appear to be any issue of willful unprofessional conduct. An ad hoc review committee consisting of representatives from the clinical area group and the Director of Graduate Studies will review the facts and determine if further University review should be pursued. If so, the departmental ad hoc committee will refer the case to the Dean

of the Graduate School, who will determine the appropriateness of review by either of two University committees, the Honor Council or the Legal Council. Any student who is thought to have willfully committed an ethical or legal violation will be subject to departmental disciplinary review and possible dismissal from the clinical graduate training program,

- g. The student may discuss any grievance issues with the DCT or the Director of Graduate Studies or refer to the Department of Psychology Manual of Standard Operating Procedures.
- h. If a personal issue relevant to the student's ability to continue or complete a practicum becomes known to the program DCT or practicum faculty, the program will contact the practicum site for further discussion and decision pending details specific to the situation. The program will make efforts to assist any student who may be experiencing physical or mental impairments that interfere with competent performance of training-related duties.
- i. If an ethical violation has occurred involving a supervisor and it can not be resolved sufficiently through informal means, a report to the State Board of Examiners in Psychology will be made, provided that doing so does not violate confidentiality rights of any clients.

PRACTICUM SITE EVALUATION

At the end of each placement, students will be asked to complete an evaluation of the practicum agency, and his/her supervisor. Feedback will be shared with supervisors at the discretion of the ADCTs. The student has the option of requesting a meeting with the ADCT at any time during practicum to discuss evaluation of the site. Periodically, the ADCTs will conduct a site visit of each practicum site to evaluate key aspects of the setting.

INTERNSHIP

All clinical students are required to successfully complete an approved clinical psychology internship. There are three requirements for internship eligibility. First, students must have met all of the course and practica requirements of the department and the clinical area. Second, each student must have the approval of his or her advisor and the Director of Clinical Training to apply for internship. A prime consideration here is the progress of the student's dissertation research. For example, the student whose dissertation proposal will not be approved by the time of internship selection day may not be given permission to apply. The deadline for dissertation proposal approval is October 15 to obtain permission to apply for internship. Third, the internship program must be APA/CPA approved or APPIC listed. An internship that is not APA approved or APPIC listed could be an obstacle to future licensure for clinical practice however, as some states specifically require an APA approved internship.

Remember the proverb, "A stitch in time saves nine." At the time you're applying for practicum, your pre-doctoral internship may be the last thing on your mind. However, please do consider the following points.

- 1. You are **strongly** advised to keep a de-identified written record of client contacts, assessments, and other practicum activities. Internship applications request detailed tabulations of assessment, consultation and therapy experiences acquired through practicum. ALTHOUGH THIS MAY SEEM IRRELEVANT NOW, IT IS GUARANTEED TO SAVE A GREAT DEAL OF TIME IN THE FUTURE.
- 2. The number of practicum hours required by the Clinical Psychology Program meets APA accreditation requirements. However, you may wish to consider gaining additional clinical experience over and above program requirements to gain focused experience in a specific area
- 3. Internship applicants who have a range of clinical experiences (e.g., different populations, treatment modalities, assessment instruments, integrative reports) are very competitive. Your advisor and the practicum faculty can assist you in ensuring appropriate breadth of practicum experience.

SUMMARY OF PRACTICUM EXPERIENCE FOR INTERNSHIP APPLICATION

Becoming familiar with the internship application format early in your practicum training will help you a great deal in organizing the summary data from your practicum experiences. A full and most current application is available at www.appic.org. For more information on internship, also check www.apa.org/agaps. The following is from the instructions for the AAPI application.

Copyright restriction prevents further duplication of the application form, so you are advised to check the APPIC website for the most up-to-date information.

The data requested is comprehensive, but there is no expectation that an intern applicant would have had all the experiences listed, administered all of the assessment instruments, or be licensed as a mental health practitioner.

ADDITIONAL CLINICAL PROGRAM REQUIREMENTS AND INFORMATION

Background Check and Annual Compliance Training: To comply with requirements of Vanderbilt University Medical Center for the protection of patients served, all students must fulfill the screening requirements of medical center volunteers. This includes completion of a background check prior to beginning the practica series, and specific annual learning courses as stipulated each year in the practicum course syllabus.

Outside clinical activities/employment. Advanced clinical students may be presented with the opportunity of employment in settings involving the delivery of psychological services. Departmental policy is consistent with that of the American Psychological Association and the Tennessee licensing law in requiring the Ph.D. degree and appropriate licensure for independent delivery of psychological services. All students are required to receive adequate supervision for clinical work, regardless of whether the activity is undertaken for practicum credit, as provided in Tennessee Rules and Regulations governing the practice of psychology.

To avoid any potential violation of state licensing laws, <u>all</u> clinical activities undertaken by unlicensed students must be considered a training experience. Any non-practicum clinical activity (whether paid or unpaid) undertaken by any clinical student that involves the delivery of psychological services must have the prior approval of the DCT or ADCT, who will review the supervisory arrangements, determine compliance with the Tennessee Practice Act, assess any potential conflicts of interest with other obligations and responsibilities of the student and insure that the student receives an adequate training experience.

Malpractice Insurance. As long as an individual is enrolled as a Vanderbilt graduate student, they are covered by the University's malpractice policy. The student <u>may</u> also be covered by malpractice arrangements made by individual agencies. If a student is not formally enrolled (such as during the summer) but is considered a student in good standing in the department, and the clinical activities have been formally structured as a training experience (see above), then the University's malpractice coverage is still in force. When the student initiates formal internship at another location, the malpractice coverage is arranged through the internship agency.

Appendix of Forms - please see separate file for latest updates of the following forms:

- 1. Practicum Interview Rating Scale and Post-practicum interview rating scale
- 2. Practicum Training Plan and Agreement
- 3. Supervisor evaluation of student (accessed via REDCap)
- 4. Student evaluation of supervisor (accessed via REDCap)

Practicum/Post-Practicum Interview Rating Scale

Agency	Applic	eant					Peabo	2
Interviewer	Date_					(Cir	cle On	ie)
Please rate the applicant on the following	owing di	mensions b	y ci	rcling	g the num	<u>ıber</u>	that a	<u>pplies</u>
1 = Unacceptable $2 = M$	Iinimal	3 = Good		4 =]	Excellent	t		
1. Formal preparation for this pract	ticum	1	2	3	4			
2. Apparent enthusiasm for this pra	acticum	1	2	3	4			
3. Personal presentation (verbal facinterpersonal skills, composure,	• •	1	2	3	4			
Additional comments or suggestion	s for this	annlicant t	for f	inture	intervies	177C •		

Additional comments or suggestions for this applicant for future interviews:

VANDERBILT PRACTICUM TRAINING PLAN & AGREEMENT

Name of Student	Year in Program:					
Full Name of Practicum Site:						
Address of Practicum Site						
Name of Primary Supervisor						
Date started placement: Estimated completion date: Update:						
Number of hours per week expected to be	spent in practicum activity:					
(circle one) 4 8 12 15	Other					
In a typical week, the above number of ho	urs will be spent:					
hours of psychological evaluation (ac	etual test administration)					
hours of writing psychological assess	ements (report writing only)					
hours of direct client contact in therap	hours of direct client contact in therapy					
hours of intake interviewing	hours of intake interviewing					
hours of clinical meetings (e.g., staffin	ng, case conferences)					
hours of individual supervision for therapy (see Guidelines)						
hours of individual supervision for as	ssessment					
hours of group supervision						
hours of didactic seminars						
hours of documentation (e.g., maintaining charts, writing letters)						
hours of case preparation (e.g., preparing for therapy sessions, formulating treatment plans)						
hours of (specify)						

Approximate number of	therapy clients to be	e seen during placement	
Approximate number of	test batteries to be a	administered	
Indicate which methods of s Audio/video tape of sesLive observationCase reportCo-therapyModeling and DemonstTeam FeedbackReview of written report	sions [have discusse	sed: ed with Dr. Ebert ways to integr	ate]
	sessment feedback; o	• • •	ate test instruments; writing attic goals; manage session agenda;
Note: Clinical case material practicum class. Identifying		he student to fulfill the requirence omitted.	nent of a case-presentation in
as outlined in Handbook B. the student's training experie either party in the superviso	I understand that the ence. Program facul ry relationship or ch	ne clinical program faculty must	
Student Signature	Date	Supervisor Signature	Date
Faculty Advisor Signature	Date	Assoc. DCT Signature	Date

NOTE: Please print name below signature if needed for legibility.

FALL 2023-VANDERBILT UNIVERSITY CLINICAL PSYCHOLOGY TRAINING PROGRAM SUPERVISOR EVALUATION OF PRACTICUM STUDENT

ΑА

It is time to complete the Fall 2023 Practicum Student Evaluations. If you are supervising more than one student you will receive a separate link for each one.

Please let us know if you have any questions.

STUDENT NAME:	
SUPERVISOR NAME:	
DATES OF SUPERVISION:	
ROTATION:	
This evaluation was based on (check all that app	oly):
{Please note that as of January 1, 2017 each eval	luation must be based in part on direct observation!}
Indirect Observation:	erbal discussion with student eview of audio recording of session eview of process note/written work ensultation with other staff
Direct Observation:	eview of video recording of session ve video streaming of session -person observation: In-room -person observation: 1-way mirror ole play oservation in team meeting
EVALUATION INSTRUCTIONS	

Certain competencies are required for all students trained in programs accredited in health service psychology. The role of practicum is to assist the student in building competencies across areas. This form is designed to allow the supervisor to assess the student's developmental progress across competencies. The

overall goal of practicum training is to assist the student in developing competencies needed for clinical internship.

Please use the following scale to indicate how clearly the student grasps and demonstrates the competency listed.

- 5-Very Clearly- Competency used as needed with minimal supervisory input.
- 4-Mostly-Routine supervisory guidance needed to strengthen use of competency.
- 3-Moderately-Collaborates effectively with supervisor in developing competency.
- 2-Somewhat-Intensive supervision is needed to support basic components of competency.
- 1-Slightly/Not at all-Difficulty in grasping basic components of competency. Specify recommended plan for remediation.

N/A-Not applicable-Not applicable for this training experience/Not assessed during training experience.

Note: The minimum requirement for successful completion of a practicum is to achieve an average rating across all competencies of 3 or higher at the end of the placement, with no final ratings of 1.

PROFESSION-WIDE COMPETENCIES

RESEARCH/SCIENTIFIC ORIENTATION - TO DEMONSTRATE INTEGRATION OF SCIENCE AND PRACTICE

Participates in one or more professional organizations that	54321n/a
have a mission to support scholarly integration of research	
and practice (local, institutional, regional, or national level)	

54321n/a

influences, and leaders in scientific development of applied practice

Demonstrates knowledge of historic progression,

54321n/a

Seeks scientific literature or attends special training for evidence-based procedures

54321n/a

Demonstrates knowledge and use of current evidencebased treatments, methods or guidelines

ETHICAL AND LEGAL STANDARDS - TO EMBODY HIGHEST ETHICAL STANDARDS

Demonstrates knowledge of general ethical principles (including latest version of APA's "Ethical Principles of

54321n/a

Psychologists and Code of Conduct") and local laws (TCA; Rules and Regulations)	
Conducts self in an ethical manner across different professional activities	54321n/a
Able to discuss ethical issues in a calm, clear and thoughtful manner	54321n/a
Understands and adheres to Health Insurance Portability and Accountability Act (HIPAA) for protecting private health information and any other relevant legal regulation	54321n/a
Sensitive to the potential for harm; demonstrates prudent efforts to benefit clients and protect the public confidence in psychological services	54321n/a
INDIVIDUAL AND CULTURAL DIVERSITY - TO RECOGNIZE AND R	ESPECT CULTURAL DIVERSITY
Demonstrates sensitivity to individual and cultural factors when administering and interpreting psychological tests	54321n/a
Identifies his/her personal/cultural dimensions and attitudes as potential influence in clinical and collegial interactions	54321n/a
Identifies culture and diversity issues when developing case formulation and treatment interventions	54321n/a
Demonstrates respect for culture and diversity issues in clinical interactions with patients	54321n/a
PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS - TO CON	STRUCT A PROFESSIONAL IDENTITY
Demonstrates respect for other people and grasp of behavioral expectations of a professional role (integrity, accountability, hygiene and attire, concerned and helpful attitude)	54321n/a
Reliably completes professional duties in a timely fashion (e.g., appointments, charting); follows up on commitments	54321n/a

Demonstrates initiative in the training process; responsive to feedback; works on building competency skills and knowledge base	54321n/a
Makes time for self-care and sets adequate personal limits	54321n/a
Engages in self-reflection regarding personal and professional strengths, limitations and areas of growth as a psychologist	54321n/a
Demonstrates positive personal adjustment and good self- awareness. Level of confidence accurately matches current abilities (not overly self-critical, self-effacing or self- aggrandizing)	54321n/a
Demonstrates judgments that reflect professional level of awareness, knowledge, and behavior of clinical psychologist	54321n/a
COMMUNICATION AND INTERPERSONAL SKILLS - TO INTERACTION VARIOUS CONTEXTS	T EFFECTIVELY AS A PROFESSIONAL PSYCHOLOGIST
Affectively attuned - actively listens to others; shows interest, empathy and collaboration; demonstrates tolerance and skill in managing a range of affect in self and others	54321n/a
Demonstrates basic grasp of professional language and concepts in verbal and written form (e.g., treatment plans, case presentations, reports, progress vs. psychotherapy notes, case summary)	54321n/a
Expresses ideas and opinions with clients/patients, staff, faculty, other trainees and professionals in a courteous, respectful, understandable, emotionally mature and constructive manner (discussions, emails, informal interactions)	54321n/a
Uses technology (phones, computers, tablets) to enhance communications and refrains from focusing on gadgets in professional situations where this could detract from personal or group interaction or full participation	54321n/a

Makes him/herself available for interactions with colleagues and clients/patients as appropriate	54321n/a
ASSESSMENT - TO CONDUCT EVIDENCE BASED ASSESSMENTS A	ND PROVIDE CLINICAL FEEDBACK
Demonstrates ability to interpret referral questions or presenting problems and select relevant assessment instruments	54321n/a
Fluent with psychiatric concepts and most diagnoses, including major categories of the DSM and ICD	54321n/a
Demonstrates ability to adequately conduct a clinical interview, establish the necessary rapport, address confidentiality, gather relevant data promptly, and appropriately evaluate immediate concerns	54321n/a
Demonstrates ability to score, interpret and integrate standardized assessment results with corresponding recommendations	54321n/a
Demonstrates ability to provide assessment feedback, with supervisory support	54321n/a
supervisory support	
INTERVENTION - TO DEMONSTRATE BASIC SKILLS FOR HELPING Demonstrates ability to structure initial therapeutic	G AND APPLYING EVIDENCE BASED TREATMENTS
INTERVENTION - TO DEMONSTRATE BASIC SKILLS FOR HELPING Demonstrates ability to structure initial therapeutic contact and follow-up with informed consent Establishes rapport with verbal and non-verbal expressions	G AND APPLYING EVIDENCE BASED TREATMENTS 54321n/a
INTERVENTION - TO DEMONSTRATE BASIC SKILLS FOR HELPING Demonstrates ability to structure initial therapeutic contact and follow-up with informed consent Establishes rapport with verbal and non-verbal expressions of collaboration and concern Listens empathically and frames problems in understandable, operational terms; able to demonstrate empathy for clients/patients who may be challenging or	G AND APPLYING EVIDENCE BASED TREATMENTS 54321n/a 54321n/a

Attempts to collaborate with clients/patients to implement interventions, considering individual preferences and cultural variables	54321n/a
Manages time effectively within consultations, considering the needs and challenges presented by the client/patient	54321n/a
Relates to clients/patients in a professional and respectful manner and considers their life context in making recommendations or assigning activities	54321n/a
Responds to crises or therapy interfering behaviors, with supervisory input	54321n/a
Applies a beginner's' knowledge of a range of evidence- based interventions	54321n/a
Modifies and adapts evidence-based interventions as needed to facilitate client/patient progress	54321n/a
Demonstrates ability to make effective referrals to facilitate client/patient progress	54321n/a
SUPERVISION - TO COLLABORATE IN SUPERVISION AND FOCUS	ON LEARNING GOALS
Arrives on time and prepared (e.g., audio/video samples from session recordings, specific case questions/problems, documents needing review/signature, etc.)	54321n/a
Works collaboratively with supervisor to productively focus discussion and minimize intrusions	54321n/a
Demonstrates flexibility in thinking about clinical formulation, intervention, or treatment plan	54321n/a
Integrates supervisory input into clinical work	54321n/a
Provides feedback to supervisor in a constructive and non- complaining way	54321n/a

Seeks additional supervisory input or specialty consultation when appropriate	54321n/a
Demonstrates understanding of and respect for supervisor's authority and responsibility	54321n/a
Initiates discussion of sensitive topics (disagreement, ethics, personal reactions to client/patient, etc.)	54321n/a
CONSULTATION AND INTERPROFESSIONAL/INTERDISCIPLINAL VARIOUS SYSTEMS AND DEMONSTRATE RESPECT FOR THE INP	
Seeks and respects peer or other consultation, with appropriate supervisory input	54321n/a
Attends staff, team, or departmental meetings or training sessions as appropriate; respectful toward other professionals and support staff	54321n/a
Demonstrates flexibility in thinking about clinical formulation, intervention or treatment plan	54321n/a
Considers referrals for other professional services beyond psychology and seeks appropriate resources to support client/patient centered care; participates in team meetings (where appropriate)	54321n/a
OVERALL DEVELOPMENT IN PRACTICUM ACTIVITIES:	Internship Ready Extensive clinical knowledge, skills and reliable judgment are readily detected. Strong example of desired personal and professional competencies. Handles more challenging clinical tasks or situations with supervisory support. Highly Competent Strong fund of knowledge, skills and good judgment. Many of the optimal personal and professional competencies are easily detected and consistently used. Seeks supervisory direction for challenging clinical situations or tasks. Competent Demonstrates acceptable personal and professional competencies for level of training, and motivation to build upon current skill level. Meets expectations for basic

conceptual and technical skills, although range of knowledge and experience is limited.

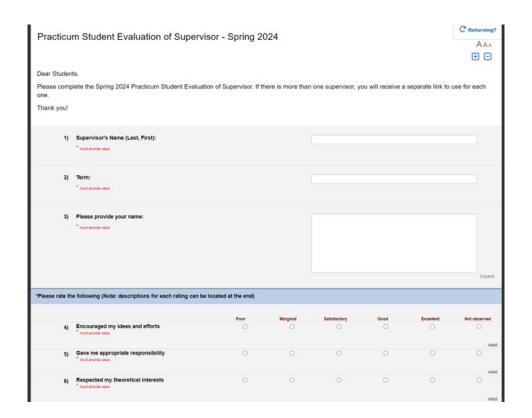
Marginally Competent Meets minimum requirements, but some important components of knowledge, skills, and/or judgment are below expectations for current level of training (NOT relative to exemplary benchmark). Expresses motivation to develop relevant competencies with support; targeted remedial skill development in specific area is recommended (please specify below).

Not Yet Competent Significant deficits in knowledge, skills, judgment, motivation to improve or basic personal and professional qualities. Needs extended remediation to move to the next level.

<u>reset</u>

Please summarize the practicum student's particular skills acquired and areas for further experience. If you rated any item as requiring remediation (1), specify your recommendations for remediation. Feel free to use more space/pages.

Skills Acquired		Expand
Areas for Further Experience		Expand
Recommendation for Remediation		Expand
We have reviewed the practicum agreement for any changes needed	!S)	<u>reset</u>
I have reviewed and discussed this evaluation with the trainee	:S)	<u>reset</u>
Subm	nit	



		Poor	Marginal	Satisfactory	Good	Excellent	Not observed
							re
9)	Gave constructive feedback * must provide value	0	0	0	0	0	re
10)	Fair in my evaluation * must provide value	0	0	0	0	0	O
11)	Provided time when I requested * must provide value	0	0	0	0	0	O
12)	Punctual/responsible about time issues * must provide value	0	0	0	0	0	O re
13)	Communicated clearly * must provide value	0	0	0	0	0	O
14)	Allowed required supervisory time * must provide value	0	0	0	0	0	0
15)	Focused on case material in supervision * must provide value	0	0	0	0	0	0
16)	Knowledgeable about stated areas * must provide value	0	0	0	0	0	0
17)	Used literature or educational resources * must provide value	0	0	0	0	0	0
18)	Monitored standards of care * must provide value	0	0	0	0	0	0
19)	Behaved ethically * must provide value	0	0	0	0	0	0
	Maintained professional demeanor * must provide value	0	0	0	0	0	0

	Poor: Deficient attitude, effort, or neglect of responsibilities. Poor role model.				
	Marginal: Some notable deficiency in attitude, effort or responsibilities; inadequate use of supervision.				
	Satisfactory: Adequate attitude, effort and involvement in practicum experience; addresses s	upervision issues when requested.			
	Very Good: Generally positive attitude, consistent support, sensitive to student needs. Offers supervisory input to support growth and responds effectively to requests Good professional role model.				
	Excellent: Enthusiastic attitude and concern for student growth. Effectively collaborates with supervisee. Explains professional role expectations, and demonstrates good clinical judgment.				
Please comme	ent on the following:				
21)	Relative strengths:				
		E	Expand		
22)	Areas for improvement:				
		E	Expand		
221	Other comments:				
23)	Other comments:				
		E	Expand		
24)	Practicum Student Name/Signature:				

*Rating descriptions: