** It should be noted that all information and policies in this handbook is subject to change at any time. It will be annually changed. Students are responsible to be aware of these policies and all updates. Further, students will be held accountable to the handbook current in effect, not the handbook they were given when starting the program.
Welcome to the University of Houston – Clear Lake Health Service Psychology Program. This program will help students develop the necessary prerequisite skills to function effectively as a professional psychologist. This program will enable students to acquire expert knowledge, clinical skills related to interviewing and assessment, therapeutic skills in empirically supported interventions, and personal development regarding a professional’s role as a psychologist. Students will be responsible for both learning in the classroom and continually searching for knowledge outside of the coursework. As with all doctoral programs, students will find this program to be exhilarating and exhausting as well as highly rewarding, both professionally and personally.

This handbook is designed to guide students and facilitate their progress through the program. It includes official policies, recommendations for making life easier, and the accumulated wisdom of peers and faculty mentors. The manual supplements but is superseded by the UHCL Graduate Catalog and the Policies and Procedures Manual of the Psychology Clinic. In this manual, we periodically reference relevant portions of these sources. Students should be familiar with these documents in their entirety, as such knowledge will facilitate their progress through the program.

The policies and recommendations contained in this handbook and the Policies and Procedures Manual of the Psychology Clinic are modified periodically. As stated in the “Standards of Academic Performance” section of the UHCL Graduate Catalog, students must be aware of and abide by current policies and procedures and not those in effect upon admission. The University, the Department, and professional organizations reserve the right to make periodic changes to policies to clarify or improve program procedures. Students should review these documents throughout their academic careers to ensure compliance. The most recent version of the handbook is available online at: http://www.uhcl.edu/

The University and Program
The University is located in Houston, Texas, but is housed in the Clear Lake area of Houston, which is 30 miles south of downtown Houston and 25 miles north of Galveston. The University includes four schools and is home to a diverse student population of nearly 9,000 students.

The PsyD Program is part of the Clinical, Health and Applied Sciences Department, which is one of five departments in the School of Human Sciences and Humanities. Seven full-time faculty members will serve as core doctoral faculty in this doctoral program. Twelve other psychology faculty in the Psychology Department will function in supportive roles within the PsyD Program. Faculty biographies and contact information can be found at http://ptl.uhcl.edu/portal/page/portal/HSH/_Programs/Psychology/doctorate-psychology.
The program also maintains a Psychology Clinic located on campus. The clinic has eight individual therapy/assessment rooms, two family therapy rooms, a student office, and two conference rooms. Psychological services are provided to the Clear Lake community, as well as the greater Houston area. This Psychology Clinic provides an excellent training opportunity for students to be supervised by licensed psychologists as well as provide low-cost services for individuals with mental health needs.

**Mission**
The Doctor of Psychology (PsyD) in Health Service Psychology (Combined Clinical/School) will provide broad practitioner-scientist training with an emphasis on clinical practice. The mission is to prepare students for careers as health professionals in clinical and school settings. The overarching model of the program is the provision of health services, with particular emphasis on cognitive-behavioral psychology. Graduates from this program will be well prepared to function as licensed professional psychologists in a variety of roles across a variety of settings, with particular competencies in behavioral health, prevention, and health psychology.

**Training Model**
As a practitioner-scientist program, the PsyD program's primary goal is to train practitioners, scholars, and applied researchers in the area of health service psychology. The program develops graduates who use scientific methods in the professional practice of psychology with the aim of improving health and behavioral-health outcomes. The program emphasizes the importance of the scientific method as the primary basis for advancing knowledge and inform practice. Graduates will be competent in evidence-based practice (assessment, intervention, and consultation). The behavioral health model will serve as the overall context for training. This model emphasizes the reciprocal relationship between psychological, biological, and social aspects of both personal and community health. Through coursework, clinical experiences, and research, students may individualize their training, including clinical-school and clinical-health.

**Goals**
The PsyD program at the University of Houston-Clear Lake is guided by five general goals designed to ensure that candidates: attain the requisite knowledge base that serves as a foundation for all psychological practice; acquire skills in the techniques that constitute the practice of psychology; develop skills to analyze and conduct research; understand and adhere to ethical practice in psychology; and become culturally competent practitioners. Specifically, the goals are:

1. **Foundational Knowledge** - To enable students to acquire broad and general foundational knowledge in health service psychology
2. **Research** - To train students to conduct and consume research and to disseminate this psychological knowledge through publication, presentation, and practice
3. **Clinical Skills** - To develop students' knowledge of health service psychology and the clinical skills to apply that knowledge to assessment, intervention, supervision, and consultation/evaluation services
4. Cultural and Linguistic Diversity - To enable students to understand and appreciate individual differences and diversity, thereby becoming culturally competent in the delivery of psychological services

5. Ethical and Legal Issues - To enable students to understand ethical, legal, and professional issues and to adhere to ethical and legal standards in all of their professional activities

In addition to these goals, specific objectives and competencies are listed in Appendix A of this handbook. In general, students will:

(a) Learn practical clinical skills (e.g., assessment techniques using multimodal and multimethod approaches as well as empirically-based diagnostic techniques and procedures; write professional evaluations, treatment plans, progress notes, and other reports; develop and implement treatment programs; conduct program evaluations; and determine treatment efficacy)

(b) Develop research and scholarly skills (e.g., critical analysis of assessment and treatment research literature; understanding and application of the philosophical underpinnings of psychology; demonstrate the ability to write a scholarly article to the standards that would be expected under peer review; demonstrate the ability to make a research or scholarly presentation in a public forum; demonstrate knowledge of research in clinical assessment and treatment; demonstrate knowledge of treatment outcome research; design, conduct, analyze, and disseminate research that contributes to the field of psychology)

(c) Develop skills in training and supervising others (e.g., demonstrate knowledge of models and methods of clinical supervision; develop training programs in treatment and assessment skills for other clinicians; demonstrate ability to develop in-service or community education programs based on areas of expertise; supervise master’s level students in assessment and treatment)

In order to accomplish these goals, objectives and competencies (see Appendix A), students will practice assessment and treatment skills in a supervised environment through an on-site clinic and obtain experience in off-site practicum placements, work with and be supervised by faculty and site-based psychologists who have expertise in a variety of assessment and treatment modalities, use state of the art equipment and technology utilized in the field today, and participate in a collegial atmosphere that is accepting of diverse opinions and prepares students to analyze the current literature critically.

**Policies for All Students**

All students are subject to the policies stated in the “Academic Policies” section of the UHCL Graduate Catalog as well as policies articulated in the *Policies and Procedures Manual of the Psychology Clinic*. Additional policies and procedures for students in the program are presented in this handbook.

**Email**

The University uses only the UHCL e-mail accounts to communicate with enrolled students. A student should activate his or her e-mail account, use it to communicate with the program, department, and other administrative units, and check it regularly for important information.
Registration and Degree Audit
Students are responsible for correctly registering for courses and paying all tuition and fees by the official university registration and payment deadlines. All students should verify the accuracy of their enrollment status before the end of the “add period” and should check their online accounts to verify that they are registered for the classes in which they intend to enroll. Classes “fill-up” very quickly, so students are encouraged to register as soon as their registration times open.

All students are responsible for reviewing their own transcripts and degree audits regularly to ensure that they are correct and that students are on track to meet all their requirements in a timely fashion.

Withdrawal
Students are financially responsible for all courses in which they remain officially enrolled once the drop period has ended. Instructors do not have the authority to withdraw students from classes. Withdrawals are only permitted for non-academic reasons; no withdrawals will be approved for academic reasons. When submitting a withdrawal request, students must provide verifiable, third-party documentation for the reason for the withdrawal. Meeting this condition does not, however, guarantee that a withdrawal request will be granted. All requests for withdrawals should be submitted to the university registrar.

Grade Appeals
Grade appeals must follow the process specified in the UHCL Graduate Catalog. If disputes are resolved within the department or program, the matter will be considered resolved. The departmental decision may be appealed to the dean only on the basis of procedural irregularity. If the grade appeal is not resolved within the department or program, the chair makes a recommendation to the dean, who makes the final determination. The decision of the dean is not subject to review or further appeal.

Formal Complaints
Formal complaints should be made in writing to the associate dean.

Accommodations for Students with Disabilities
Students with documented disabilities should contact the Office of Disability Services to initiate accommodation requests and to learn more about accommodations that may be available to them.

Academic Load
Graduate students may enroll in up to 12 credits of course work each semester. Requests for enrollment in more than 12 credits may be submitted to the Director of Clinical Training (DCT) for approval. For students in the Psy D program, full-time load expectations vary by semester and are listed in the curricular layout found in the section below titled “Course Schedule.”
**State Licensing**

Texas issues four types of licenses, each of which includes different requirements as set by the Psychologists' Licensing Act and Board rules. These requirements relate to training, supervision, and specific practice components. In Texas, applicants for licensure must pass a national licensing exam, a state jurisprudence exam, and an oral exam. Licensure information for Texas can be found at: [http://www.tsbep.texas.gov](http://www.tsbep.texas.gov).

Note that licensure requirements are regulated by each state. Students should review the requirements of the state or states in which they expect to practice.

**APA Accreditation**

The program will seek APA accreditation (anticipated once the first cohort of students obtains pre-doctoral internships). To become APA-accredited, doctoral programs must comply with several standards (see *Guidelines and Principles for Accreditation of Programs in Professional Psychology*, 2008). The accrediting body may be contacted via:

- **American Psychological Association**
  Office of Program Consultation and Accreditation
  750 First Street NE
  Washington, DC 20002-4242
  (202) 336-5979

Along with the knowledge base outlined by the state, APA Guidelines require doctoral programs to provide students with, “adequate and appropriate practicum experiences” that provide supervision in a “wide range of training and educational experiences through applications of empirically supported intervention procedures.” In keeping with these guidelines, we provide extensive training in an on-site clinic, staffed and supervised by our faculty. We also require off-site clinical practica and pre-doctoral internships to diversify clinical training.

**Overview of the Curriculum**

The doctoral program is a full-time, full residency program that is designed to be completed in four years. No part time students will be accepted. The curriculum is designed to meet or exceed state and national guidelines for licensing and accreditation.

**PsyD Curriculum**

The doctoral program will include coursework related to specialized assessment and treatment strategies. Further, the PsyD program will build on students’ broad knowledge of the empirical, theoretical, and philosophical underpinnings of the profession. Students will need to develop and demonstrate substantial competence in several areas, including foundations of psychology, research skills, and clinical skills, including assessment, intervention, consultation, and supervision.

The program requires 75-credit hours of coursework organized into four sections: General Core, Methodology and Statistics, Assessment, and Intervention. All students will complete experiences in both research and clinical work. The 75-hour component does not include psychological foundation courses, most of which should be completed prior to admission.
Core Competencies
PSYC 7136  Multicultural and Diversity Issues
PSYC 7736  Professional Issues in Medical/Health Psychology

Methodology Core
PSYC 7130  Experimental Methodology
PSYC 7131  Quantitative Analysis I
PSYC 7132  Quantitative Analysis II

Assessment Core
PSYC 7032  Intellectual Assessment
PSYC 7033  Personality Assessment

Intervention Core
PSYC 7235  Advanced Behavioral Therapy
PSYC 7332  Advanced Consultation and Program Design/Evaluation

Clinical Experience
PSYC 7038  Practicum I (repeated for 2 semesters)
PSYC 7039  Practicum II (repeated for 2 semesters)
PSYC 7936  Clinical Practice, Consultation, and Supervision (repeated for 2 semester)
PSYC 8931  Doctoral Internship (repeated for 3 semesters)

Dissertation
PSYC 8930  Doctoral Dissertation (repeated for up to 9 hours)

Electives (Chose 4)
PSYC 7139  Intervention I: Academic and Cognitive Skills
PSYC 7239  Advanced Group Psychotherapy
PSYC 7337  Development and Treatment of Mood and Anxiety Disorders
PSYC 7138  Mindfulness and Acceptance Therapies
PSYC 7333  Pediatric Psychology
PSYC 7334  Adult Behavioral Medicine
PSYC 7331  Design/Evaluation of School Health Programs
PSYC 7232  Advanced Child Behavioral Therapy
PSYC 7034  Neuropsychological Assessment

Upon admission, students' record will be assessed to determine whether or not they have completed all foundation classes. Foundation areas include learning, biological aspects of behavior, cognitive/affective aspects of behavior, social aspects of behavior, history and systems of psychology, psychological measurement, individual differences in behavior, human development, ethics, and advanced abnormal behavior or psychopathology. If students have not completed a foundation course, they may take the course(s) once they are admitted to the program. Addition of these courses may add hours to their plan of study or students could also take these courses instead of a required course that they might have waived upon admission. Students may be able to waive courses that they have previously taken in other graduate programs. Students
may only waive specific courses (PSYC 7032, PSYC 7033, PSYC 7235, and one to two electives). There is a specific process to waive these courses (see below).

**Course Schedule**

**It should be noted that “substitution” courses are those foundation courses that may be taken in place of a waived course.**

<table>
<thead>
<tr>
<th>UHCL PsyD in Health Services Psychology (Combined Clinical/ School)</th>
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<tbody>
<tr>
<td><strong>Typical Course Sequence</strong></td>
</tr>
<tr>
<td>Fall Yr 1 (9 hours)</td>
</tr>
<tr>
<td>PSYC 7130 Experimental Methodology</td>
</tr>
<tr>
<td>PSYC 7032 Intellectual Assessment</td>
</tr>
<tr>
<td>PSYC 7033 Personality Assessment</td>
</tr>
<tr>
<td>*Fall Substitutions</td>
</tr>
<tr>
<td>PSYC 5532 Advanced Social Psychology</td>
</tr>
<tr>
<td>PSYC 6832 Advanced Cognitive and Affective Psychology</td>
</tr>
<tr>
<td>PSYC 6531 Psychopathology</td>
</tr>
<tr>
<td>PSYC 5235 Learning Principles</td>
</tr>
</tbody>
</table>

| Fall Yr 2 (9 hours)                                          | Spring Yr 2 (9 hours) | Summer Yr 2 (6 hours) |
| PSYC 7132 Quantitative Analysis II                         | PSYC 7136 Multicultural and Diversity Issues in Health Psychology | 2 ELECTIVES |
| PSYC 7039 Practicum II                                     | PSYC 7332 Advanced Consultation & Program Design/Evaluation |                     |
| ELECTIVE                                                   | PSYC 7039 Practicum II                           |                     |

| Fall Yr 3 (6 hours)                                          | Spring Yr 3 (6 hours) | Summer Yr 3 (3 hours) |
| PSYC 7936 Clinical Consultation and Supervision            | PSYC 7936 Clinical Consultation and Supervision      |                     |

| Fall Yr 4 (3 hours)                                          | Spring Yr 4 (3 hours) | Summer Yr 4 (3 hours) |
| PSYC 8931 Internship                                        | PSYC 8931 Internship                               | PSYC 8931 Internship |

Outside of these curriculum requirements, the list of all requirements includes:

1. Master’s or Specialist Degree before starting the program

2. **Coursework:** Complete 75 hours of coursework
3. **Pre-practicum**: 1 - 2 hours per week for first year students. Students will answer phones, complete phone intakes, and participate in clerical work in the on-site clinic.

4. **Internal Practicum**: Direct and indirect hours. Starting spring of first year, doctoral students begin to see 1-2 clients and build to 5-6 client contact hours per week to accumulate at many hours as possible.

5. **External Practicum**: 500 hours (offsite; doctoral students typically complete 1000 hours, working 20 hours per week for a year). Students will also need to follow 2 -3 clients in the clinic.

6. **Research Project or Master’s thesis**: Students are required to have a thesis or independent research project completed before starting the doctoral program. If students do not have a project completed before the start of the program, they will need to complete one while in the program. All theses and projects need to be approved and accepted by program faculty.

7. **Qualifying exam**: Students are required to complete a qualifying exam which functions as the Comprehensive Exam for students enrolled in the Health Service PsyD Program. This qualifying exam must be passed at 70%.

8. **Doctoral dissertation**: Typically, dissertation proposal follows successfully completing the qualifying exam; however, under special circumstances (e.g., extended time needed for studying) a student may appeal to the DCT to complete the dissertation proposal prior to passing the qualifying exam. Under this situation, the qualifying exam must be successfully passed prior to the dissertation oral defense.

9. **Pre-doctoral Internship (2000 hours)**: An APA accredited internship is highly recommended, but at a minimum the internship completed should be an APPIC member program. Passing the qualifying exam, successfully proposing the dissertation, and receiving approval from the program faculty are requirements to apply for internship.

All of these requirements will be methodically assessed and monitored throughout a student’s time in the program. These requirements will be monitored to ensure adequate progress through the program by meeting sequential benchmarks.

**Academic Benchmarks:**

**Benchmark 1: Coursework**

To meet the first benchmark, students will need to complete 36 credit hours of coursework, which should be accomplished by the end of the fall of the second year.
Benchmark 2: Qualifying Exam
To meet the second benchmark, students need to complete and pass the qualifying exam.

Benchmark 3: Dissertation
To meet the third benchmark, students need to complete their dissertation.

Benchmark 4: Internship
To graduate, all students will need to complete a year-long full-time internship. Students will not be able to apply for internship until they have completed all coursework in the program, completed a qualifying exam, and completed the dissertation proposal.

Timeline summary for Academic benchmarks:

Fall 1st year – Spring 1st year:
Complete coursework

Fall 2nd year – Spring 2nd year:
Start to develop dissertation proposal

End of Spring 2nd year
Pass the Qualifying Exam

End of Summer 2nd year
Propose Dissertation

Fall 3rd year – Spring 3rd year:
Work on and Complete Dissertation
Complete activities for internship

Beyond these program benchmarks, there are also clinical and practical experiences that are essential to the development of the skills needed to graduate from this program. These clinical experiences include practica experiences and pre-doctoral internship. To ensure that students are successfully completing these experiences, students will be assessed on whether they are meeting these benchmarks successfully.

Clinical Experiences
Students in the PsyD program will complete two kinds of clinical experiences: practica experiences and pre-doctoral internship experiences. These are described below.

Practica Experiences
Practica experiences begin in the first year of the program. Students participate in a full practicum experience, conducting assessments and psychotherapy with clients at our on-site community clinic (Internal Practicum). In the second year of the program, students secure offsite practica at numerous community agencies in our area (External Practicum).
**Internal Practicum (PSYC 7038)**

Internal Practicum is taken for two semesters and is held in the Psychological Services training clinic. The practicum instructors assign clients to be seen in practicum; the instructor supervises the assessment and therapy (in consultation with the Director of Psychological Services as needed). Each student will work with clients in the practicum class and will observe sessions conducted by other clinicians. The practicum instructor will give each student feedback. Students will complete intakes and progress notes as directed by their practicum supervisors.

Students will be responsible for maintaining all paperwork on clients, scheduling appointments, and identifying treatment goals. Group supervision will be provided on a regular basis. Students will also receive significant individualized supervision. Supervising faculty members will conduct evaluations of students' clinical work.

**External Practicum (PSYC 7039)**

The external practicum is taken for two semesters and occurs in a community and/or school placement. The external practicum must include face-to-face supervision of at least four hours per month by a fully licensed psychologist, who will evaluate students' skills once a semester. Further, the students will meet once a month with their university external practicum supervisor. Also, during this year, students will be expected to continue seeing 2 – 3 clients in the clinic.

**Clinical Practice, Consultation, and Supervision (PSYC 7936)**

Also, during the third year in the program, doctoral students will complete another two semesters of clinical training. In this class, students will hone their clinical skills, particularly in their area of specialization, and they will learn to train and supervise beginning level clinicians.

As a result of the various clinical experiences, students should have a minimum of 600 hours of direct client contact prior to applying for internship. Most of these hours should be from therapy sessions, with the other hours coming from formal assessments (unless a student is specializing their training in psychological assessment where the numbers can be reversed). Students are expected to complete several integrated assessment reports prior to applying for internship; reports can be done at either internal or external practicum sites.

**Pre-doctoral Internship**

The Pre-doctoral Internship is typically completed during the last year of the program. Passing the qualifying exam, successfully proposing the dissertation, and receiving approval from the program faculty are requirements to apply for internship. During internship, students need to register for the 3-credit Doctoral Internship (PSYC 8931) class for each semester (Fall, Spring, Summer) that they are on internship.

Internship is typically the capstone experience of a doctoral student’s graduate program and serves as a gatekeeper into the profession. It typically consists of spending 2000 hours (1 year) at a local or national site. Students are encouraged to apply to sites that are APA approved and meet their area of specialty. Even though an APA accredited internship is highly recommended, at the least, the internship must be an APPIC
member. Using these criteria, students will receive high-quality training in practice and specialties. If students wish to complete a non-APPIC internship, they will need to submit information about the program (place, requirements, job responsibilities, supervisor credentials and commitment to supervision) to the DCT. The DCT will have to approve all non-APPIC internships.

**Assessment and Benchmarks**

Students will be assessed during every semester they are in a practica experience. If a student's performance is not enough to pass internal practicum (PSYC 7038) or if the instructor does not believe the student is prepared to go on external practicum, the student will be asked to repeat practicum. If upon repeating practicum, the student does not obtain satisfactory evaluations, he or she will be dismissed from the program. Beyond these global requirements, students will have to meet clinical benchmarks to show successful progress through the clinical training of the program.

**Clinical Benchmarks:**

**Benchmark 1: Internal Practicum**

To meet the first benchmark, students will successfully complete the internal practicum, with supervision ratings of a 2 or above on 80% of the items on the Annual Competency Evaluation.

**Benchmark 2: External Practicum**

To meet their second benchmark, students will successfully complete the external practicum, with supervision ratings of a 3 or above on 80% of the items. The remaining 20% will have to be at 2 or above.

**Benchmark 3: Advanced Practicum: Supervision and Consultation**

To meet their fourth benchmark, students will successfully complete the advanced practicum, with supervision ratings of 4 on 80% of the items. The remaining 20% will have to be at 3 or above.

**Benchmark 4: Internship**

To graduate, all students will need to complete a year-long internship. Students will not be able to apply for internship until they have completed benchmarks 1-2, and they will need to be in good standing to achieving benchmark 3. It should be noted that all students need to pass internship to complete the final clinical benchmark of the program. It should be noted that all internship supervisors will complete evaluations of the intern, and the results of all evaluations will be submitted to the DCT and placed in the student file.

**Other Issues Related to Curriculum:**

**Registration**

Students are required to register for courses each semester. Most courses will be open for only a specific number of students. Thus, students are encouraged to check with the Financial Aid Office and the Director of the program to determine any possible consequences of repeating courses. As previously stated, students may only repeat
graduate courses once. Failure to pass a course (B- or above) with two attempts will result in dismissal from the program. Students must be continuously enrolled in at least one PsyD program course for each semester until they graduate from the program. The DCT will need to approve any requests for low enrollment (less than 6 credits) by a student. Failure to maintain continuous enrollment may be cause for termination in the program. However, in specific and necessary circumstance, students can request a leave of absence (see below).

**Waiver of Course within the Curriculum**

Students may apply for a waiver of up to 30 hours of doctoral coursework based on prior graduate coursework. Rather than officially transferring credits from another institution to UHCL, this process involves “waiving” program requirements by demonstrating completion of equivalent coursework prior to enrolling in the program. To do so, the student must present documentation and written justification for these waivers. Documentation typically consists of the following information:

1. A formal cover letter detailing the requested courses to be waived.
2. Course title and a transcript showing the grade for the course.
3. A syllabus for the course.
4. Course Waiver Approval Form

Waiver requests are best made early, but are due by the beginning of the first semester of study. The faculty advisor and DCT approve requests for class waivers. See the Waiver of Classes Procedure Manual for more details.

All waivers, foundations courses required and coursework will be formally noted in the Candidate Plan of Study (CPS).

**Research Project Requirements**

Admission to the program also requires completion of a thesis or research project prior to or as part of the graduate program. Each thesis or project must be approved by the person’s assigned research advisor. To have the thesis or project approved, a student must complete the Waiver of Research Project/Thesis Form.

Students lacking completion of a thesis or formal research project upon admission will be required to complete a research project as part of required coursework. See the Research Project Procedure Handbook for details regarding completing this requirement. To complete the research project, a student needs to start the process immediately upon starting the program. To start the process, students should have an idea of the research area they wish to pursue. Students should meet regularly with their mentor to discuss research ideas throughout the first year. Once students decide on the topic, the students need to thoroughly read and follow the procedures outlined in the Research Project Procedure Handbook.

Typically, students will not be able to take their qualifying exam until they have completed a research project.

**Qualifying Exam**

Students will need to complete a Qualifying Examination. This exam will cover the knowledge that most recent practice analyses have determined as foundational to the competent practice of psychology. This includes questions in approximately eight topics,
including questions on the biological bases of behavior; the cognitive-affective bases of behavior; the social and cultural bases of behavior; growth and lifespan development; assessment and diagnosis of patients; the treatment, intervention, prevention and supervision of patients; research methods and statistics; and ethical, legal, and professional issues. The

In order to take the Qualifying Examination, students must have completed the minimum departmental requirements to meet both Clinical and Program Benchmarks 2.

**Dissertation Requirements**

The dissertation represents the student’s original contribution to research and scholarship prior to completing the PsyD. In the tradition of psychology, this has usually implied an empirical approach (broadly defined) and a contribution of new knowledge or understanding.

Ideally, during the summer of the second year of the program, students will develop a proposal for their dissertation. During the third year, the student will register for three dissertation credits (see Dissertation Manual for detailed instructions). Enrollment in dissertation credits needs to continually occur until the dissertation is complete.

*Committee Composition*

There are two principles that guide the program’s requirements for the dissertation. First, the student needs a primary mentor who has the expertise to aid the student in carrying out the dissertation research and writing. Second, the dissertation should pass the scrutiny of and be comprehensible to a broader community of scholars. The following composition of a dissertation committee is true to those principles and represents a practical arrangement. The dissertation committee must have at least three voting members (and not more than six) and be composed of:

1. A chairperson, who is a member of the doctoral program faculty.

   It should be noted that a faculty member from outside the program faculty or a person in the UHCL community may co-chair the dissertation, if the individual is judged by the dissertation committee to be the most appropriate mentor for the student. This decision must be approved by the Director of Clinical Training.

2. Two other departmental faculty members;

   In most cases, the dissertation committee must have at least one other program faculty member and one non-program faculty member.

   A faculty member from outside the university may serve as a member of the student’s dissertation committee, if the individual is judged by the dissertation committee to be the most appropriate mentor for the student. This decision must be approved by the Director of Clinical Training, the Chair of CHAS, and the Dean of HSH.
The role of the chairperson of the dissertation committee is to provide the primary guidance of the student's work throughout the project. The role of the other members is to supplement this guidance with feedback and suggestions; the members also participate by scrutinizing the research design, evaluating the quality of the research, and approving the proposal and the dissertation.

Dissertation Proposal
The student will formally ask a faculty member to serve as chair of the dissertation committee. Upon consultation and approval by the dissertation chair, the doctoral student will ask other members of the committee. Once the dissertation committee is formed, the Dissertation Committee Approval form is submitted and approved by the Director of Clinical Training prior to the proposal defense. Replacing committee members requires approval of the Doctoral Training Committee and submission of a new Dissertation Committee Approval form.

The student will work on drafts of the proposal with the dissertation chair, and once approved to send to the committee by the chair, the document will be distributed to all committee members.

The dissertation chair will have three weeks to review each draft of the proposal. However, students should be aware that faculty are not on 12-month appointments, and therefore, they may require additional time when not officially working for the department. Students should negotiate their proposed timeline with their faculty mentor in order to clarify expectations regarding document reviews. It is typical for proposals to go through multiple revisions before being approvable.

Dissertation committee members have at least three weeks to review the document before stating if it is ready to be formally proposed. Given the difficulty with scheduling, a tentative meeting can be scheduled in advance (3-4 weeks after distributing the document), as long as faculty still have at least three weeks to review the document, and the dissertation chair confirms with the committee that the document is ready for the proposal meeting. Students can expect that faculty will raise significant issues, give feedback, or provide suggestions related to the document prior to the proposal meeting; however, minor issues can be raised during the meeting. It should be noted that it is the student's responsibility to coordinate the committee members' schedules for the two-hour formal the proposal defense.

After an oral presentation and defense of the proposal and when all members of the committee are satisfied with the proposal, the committee members will sign the Dissertation Proposal Approval form. The completed form is given to the Director of Clinical Training for review and approval. A copy is placed in the student's file.

All doctoral research involving human subjects must have approval from the University's Committee for the Protection of Human Subjects (CPHS).

This is a committee comprised of faculty across the university community. Students submit proposals and the CPHS Review forms to this committee. For details on the forms and policies, visit the UHCL Office of Sponsored Programs.
STUDENTS MAY NOT BEGIN TO COLLECT DATA UNTIL THEY HAVE OBTAINED INSTITUTIONAL REVIEW BOARD APPROVAL.

Academic credit for the dissertation

Students may register for dissertation credits after they have successfully completed program Benchmarks 1 – 3. Six dissertation credits are required, and these are typically taken during the third year of the program. Students will receive a grade change for these dissertation credits once they have orally defended the dissertation successfully (the grade will remain IP, incomplete in progress, until the successful defense).

Dissertation Defense

The student works closely with the dissertation chair to develop the final dissertation document. Students typically have several revisions based on ongoing input from the dissertation committee, before a draft is deemed acceptable. It is the sole judgment of the committee to determine whether a dissertation is adequate, ethical, and feasible. The dissertation must follow APA Style, while the format of the manuscript must conform to the requirements of the UHCL Library. Once the advisor (with consultation with the committee) agrees that the dissertation is in good form, the student distributes the dissertation to the other committee members. The committee must have at least three weeks to review the document. Given difficulty with scheduling, a tentative meeting may be scheduled in advance (3-4 weeks after distributing the document). The dissertation chair confirms that the committee agrees the document is ready for the defense meeting. Students can expect that faculty will raise significant issues related to the document prior to the oral defense meeting; however, minor issues can be raised during the meeting. Students should anticipate delays during summer and early fall when not all faculty members are working for the department, and preference is given to internship applicants completing their dissertation proposal.

Oral examinations of dissertations are open to the HSH community. However, only the dissertation committee determines the adequacy of the defense. Notice of the upcoming defense must be posted in the department two weeks in advance. The student has the responsibility of coordinating committee members’ schedules for the two-hour formal defense of the completed dissertation.

Additionally the student notifies the Program Administrative Assistant of the date, time, and location of the defense as well as of the dissertation title. The Program Administrative Assistant will notify the University community of the oral defense.

The final defense of the dissertation will be a meeting open to the public. After a 30-45 minute overview of the study, there will be a 30-45 minute question/answer session. This part of the defense is open to the public. The student, and any public attendees, will then be excused, and the Dissertation Committee will decide if the dissertation is approved in executive session. Only the committee members will vote on the dissertation. Unanimous approval is required by committee members.

If the dissertation is not approved, a discussion of needed changes and a timetable for completing them will be held before adjourning the meeting. If approved, the committee
will sign the *Dissertation Oral Defense Approval form*. The student must bring one copy of the signed oral defense form to the Director of Clinical Training. This form will be placed in the student’s file.

Students should modify the *Dissertation Document Approval form* with their relevant information prior to the defense. Approval of the dissertation is indicated by each committee member’s signatures on these forms. Students provide the Director of Clinical Training a copy of these forms for their student file. Further the student submits one copy of the dissertation to the Associate Dean’s office, along with **four** completed copies of the *Dissertation Approval Form*.

### Applying for Internship

After obtaining approval of the dissertation proposal, successfully completing the qualifying exam, and obtaining approval of the Doctoral Training Committee faculty, a year of internship in an APA accredited or APPIC-approved program is required of all students. The deadlines for completion of the qualifying exam and dissertation proposal are as follows for the year before students apply to internship:

- **March 1:** Request to Take Qualifying Exam approved
- **June 30:** Completion of Qualifying Examination
- **September 1:** Documentation of Passing the Qualifying Exam
- **October 31:** Dissertation proposal is submitted to the committee
- **Dissertation proposal is completed, with signed Dissertation Proposal Approval Form**

Internship normally takes place in the fourth year and is an academic requirement of the program. An internship is a 2,000 hour (one year full time) placement at a school or multidisciplinary treatment facility. Students will receive in-depth clinical experiences in assessment and treatment, working with specific treatment populations. There are several APA accredited internships available in the greater Houston area, but, given the highly competitive nature of these internships, it is highly recommended that students plan to apply to internships all over the country. A list of internship sites can be obtained from the APPIC website (www.appic.org). Also, many psychological associations (APA, ABCT, ABA, SRCD, APS, and SBM) sponsor program events at their meetings to bring together internship sites and potential applicants. Students should consider attending at least one of these meetings in the second or third year of the program.

The Association of Psychology Postdoctoral and Internship Centers (APPIC) is the organization that provides access to accredited and APPIC member internship and postdoctoral training programs in professional psychology (i.e., Clinical, Counseling, and School Psychology). APPIC also offers a professional psychology internship placement through a match process. Students apply for internship through APPIC. Then, APPIC attempts to “match” students to placement sites across the country. This matching process occurs in February of each year. A second match process is offered in March for any students registered for the first match and not placed with an internship site. Finally, a Post-Match Vacancy Service is available for students who remain unmatched. The internship application form and the Match Policy are available on the APPIC Web
site (www.appic.org). It should be noted that a student can obtain an internship from a non APA or APPIC approved site. However, the student will need permission of the Director of Clinical Training for those sites upon application.

**Students must have passed the qualifying exam and successfully completed the dissertation proposal meeting by October 1st of the year before they plan to go on internship.** Many internship programs have application deadlines as early as October and most are due in November. The Director of Clinical Training must complete APPIC’s “Verification of Internship Eligibility and Readiness”, which certifies the student’s amount of clinical experience and verifies the readiness to apply to internship as determined by the Doctoral Training Committee faculty during the annual evaluation process. The internship application is fully online.

The process of applying for an internship is a very demanding one and it helps to get started during the summer of the year students plan to apply. Students should review the APPIC online directory that describes programs and visit program websites for additional information the summer before applying. It helps to be very organized in the approach to the application process, which will be similar to when students applied to graduate school. The Director of Clinical Training will have several meetings with prospective internship students beginning in July before the application process begins. The meetings will help students revise their vitae, choose internship sites, write the required essays and cover letters, and understand the match process. Students and alumni who have completed internship recently are more than willing to talk with students about specific internship programs and the application process. Students will need to plan for travel expenses to interview at the sites. Most sites will not make offers to students without first going through an interview process. Interviews typically take place during the end of December and all of January.

Here is a typical internship application timeline:

*First year:*

Review requirements
Organize & record previous hours accrued in MA/SSP programs and in doctoral Practicum I

*Second year:*

Review APPIC online directory for potential internships
Review the requirements of the sites that are of interest
Organize & record previous hours accrued in doctoral Practicum II

*Application Year*

July – August: Attend internship meetings to finalize vitae, complete first draft of essays and cover letter, select sites, and obtain information about the application, letters of recommendation, and Director of Clinical Training verification.
September: Begin to complete the AAPI online and submit official transcripts.
By October: Finalize any remaining program requirements
Oct. – Nov.: Submit applications to selected sites
Mid-December: Receive notification of interviews
Dec. – Jan: Interviews
Early February: Submit ranking list
Late February: Match results
Early March: Submit materials for match 2 (if needed)
Late March: Be notified of match 2 results (if needed)
April – Sept.: Review openings in the Post-Match Vacancy (if needed)

**Detailed Process**

Students intending to apply for internships meet with their advisors in the spring before the application year to discuss their readiness for internship. They then work with their advisors and the DCT to select internship sites that will best meet their training needs. In the summer and fall of the application year, students work with their advisors and the DCT to finalize their applications and prepare for interviews.

One of the application forms requires a detailed accounting of specific clinical experiences. Completion of this form will be much easier if the student keeps a running log of clinical experiences and hours beginning in their first semester. Please note also that one of the forms is a verification of readiness for internship that must be signed by the DCT. Students will need, therefore, to submit a copy of the completed application to the DCT with sufficient time for the DCT to review and endorse it (at least one week). Students usually receive invitations for interviews by internship programs during December. Interviews start in December, but more typically occur in January. Both internship programs and student applicants then submit rankings expressing their preferences, usually in early February. These rankings are submitted to a computerized Matching Program coordinated by APPIC. The results of the computerized Matching Program are released in late February on a single designated Match Day. At that time, students are informed of the internship site with which they have been matched, and then must contact the site to accept and make arrangements for the internship year. Students also should inform the DCT and their advisors about the results of their internship application.

Applicants not matched through this process then participate in a second phase of the Matching Program (which mirrors the same process as the first phase, only with phone interviews and a shorter timeframe). Any applicants who do not match during the second phase may participate in the APPIC Clearinghouse, which provides information on programs that still have vacancies to applicants who have not matched. The Clearinghouse is less formalized, with applicants and sites able to make decisions about offers and acceptances on a case-by-case basis with no set timeline. A student may not arrange his/her own internship outside of the APPIC matching or Clearinghouse process without prior consultation with and permission of the advisor and the DCT.

Evaluations of the student’s performance are provided by internship supervisors at the end of the internship year, reviewed by the DCT and clinical faculty, and placed in the
student’s file. Internship directors use their own evaluation forms, not a program form. Upon completion of the internship, an internship official should fill in and sign the Internship Completion Form.

**Other Required Activities and Deadlines**
A full list of major activities, requirements, and associated deadlines follows below. This can be a helpful resource.

**Prior to First Year**
- Complete criminal background investigation before beginning the fall semester

**Every Year**
- Prior to fall semester
  - Register for courses
  - Sign contracts for research and teaching assistantships as needed
- Prior to spring semester
  - Register for courses
- By June 1
  - Research Activity Report (online)
  - Meet with Mentor about Annual Evaluations

**Other Doctoral Policies**

*The Advisor-Advisee Relationship*
The PsyD program operates on a mentor model, whereby each student enters the program with a faculty advisor already assigned. Upon admissions, students are matched with a faculty mentor based on research interests, and typically the student will stay with their mentor throughout their academic career. The student’s research advisor will play a significant role in training and guiding the student in developing their own research plans for research projects and dissertation work. Further, the advisor serves a number of other functions, including approving the student’s schedule of classes, answering questions about the program, serving as the student’s advocate, helping the student develop a Program of Study, helping the student in decision-making regarding externship and internship applications, helping with the formation of the Dissertation Committee, and providing feedback to the student following departmental student evaluations made at the end of each year. The advisor also is the first point of contact if problems arise and should be consulted before program changes are made. As stated above, the advisor also serves as the student’s research mentor and dissertation supervisor. This begins with the first semester of the first year, as the advisor works with the student to select and develop research interests and skills. The advisor serves as the primary mentor for the research project and dissertation, and often on additional research projects. In some cases, a student may enter the program with “co-advisors;” whereby, two clinical faculty members serve as the student’s research advisors. Such situations require close collaboration and communication among the student and faculty members to ensure that all are aware of each other’s expectations and progress. The faculty members can also agree to split specific elements of the advisor relationship (e.g., one serving as the primary research mentor, the other serving as the primary advisor with regard to program requirements and...
milestones). Regardless of the specific arrangement, one faculty member must be designated as the primary advisor of record.

Each advisor has his/her own approach to mentorship in research, program, and other professional activities. The student shares in the responsibility for developing a relationship within which he/ she may achieve his/ her academic goals.

Switching Mentors
Although most students stay with the same research mentor throughout their time at UHCL, there is no requirement to do so and there is no stigma associated with changing mentors. Students may request a change in mentor as they matriculate through the program. We encourage students to stay with a mentor for a minimum of two years to provide depth in their training experience and continuity in the training program. Every effort will be made to accommodate student requests within reason.

Students who may be interested in changing mentors may approach other faculty members to discuss the available options. However, the student should involve his or her original research/academic advisor in these discussions early in the process. There are a number of reasons a student may wish to switch advisors (new research interests, working relationships, or absence of current advisor). Whatever the reason for change, it is the student’s responsibility to arrange for a new advisor.

In initiating a change, there are some guidelines to follow. The possibility of changing advisors should be discussed at about the same time with both the prospective advisor and the current advisor. Neither the prospective nor the current advisor should be uninformed or receive information about the switch from a third party. It is important to make plans to complete any ongoing projects with the current advisor so that neither the student’s work nor the advisor’s work suffers. The elements of this policy model appropriate professional courtesy.

For changes due to an advisor’s leave/retirement, alternatives and plans should be discussed with the advisor.

Early in the process, the student should inform the DCT about the potential change and discuss with the DCT the best ways to handle the change. Or, if the DCT is the advisor involved, the Associate DCT should be consulted. In general, the DCT and Associate DCT are available for consultation about such changes at any step in the process.

Once the student has finalized the decision to change advisors, the student needs to complete the Change of Advisor form. Once the form is complete and signed by all parties, a copy of the form should be given to the DCT, who will file a copy in the student file.

Troubleshooting
In the event that problems develop in the research collaboration, both the mentor and student are encouraged to discuss the difficulties together first. If this discussion fails to resolve the problems, the student may speak with the Director of Clinical Training. That discussion will be used to figure out reasonable next steps.
Engagement in the Program and Professional Service Contributions
Aside from satisfactory grades and completion of area requirements, there are many indicators of success for doctoral students. These include, but are not limited to, development of clinical skills and engagement in clinical training within the program. Students have opportunities to complete practica with supervisors both within and outside the Department. Students are expected to be active consumers of clinical training, which includes being prepared for therapy and assessment sessions and supervision, completing relevant readings, and seeking concrete feedback in the development of clinical skills specific to a given practicum experience.

Students are expected to be present at local and national activities (e.g., invited speaker presentations, lab meetings, classes). Students will have both required presentations (first-year presentation), as well as presentations that are encouraged (conference presentations).

Presentation at regional or national meeting(s): Students are expected to present empirical research projects at regional and/or national research conferences. Submissions are typically those in which the student has played a significant role as an investigator. Meeting attendance and conference presentations introduce the students to and facilitate their involvement with the national research communities of psychologists. Completion of multiple conference presentations prior to the award of the PsyD is strongly advised so that students will be competitive applicants for internship and future employment opportunities.

Students can also make important contributions to the profession. In general, there are many ways students can be involved including:
- Being a student representative committee member
- Presenting at a formal colloquium or brown bag
- Assisting with visiting speakers
- Attending area or departmental talks and meeting with speakers
- Attendance at scientific meetings and conferences
- The PsyD faculty members regularly nominate students for membership on the Division 12 (Clinical) and 38 (Health) committees, and the Division 54 (Pediatric) and 16 (School Psychology) committees
- Helping to review manuscripts

It should be noted that all service should be recorded for future applications and for the Annual Report of Involvement.

Annual Evaluation of Students
After completing each year of the program, students meet with their mentor after the spring semester (usually by the beginning of May) to review their progress in the program. Formal evaluations are conducted at a Doctoral Training Committee meeting. These evaluations will be based on the student’s complete file including transcripts and evaluations (based on clinical work, teaching duties, and research progress). Evaluations will include ratings completed by the research advisor, in conjunction with the PsyD
program faculty. Students are evaluated on personal, professional, and academic skills. See the Annual Competency Assessment for the areas of evaluation.

To assist with the evaluation process, students submit an updated copy of their vitae and accumulated practicum hours to the Director of Clinical Training by the end of April.

Once the evaluations are completed, the student will receive feedback from their advisor that incorporates the strengths and limitations identified during the evaluation meeting of the Doctoral Training Committee. Further, if the student would like to address any concerns or issues related to the evaluation, besides their research mentor, the student can meet with the Director of Clinical Training. Students are rated on their competency level in each domain (no opportunity, not evident, developing, developed, and exceptional).

Students’ ratings on the Annual Competency Evaluation determines if further action to address weaknesses needs to occur. Further action will take place if the student does not pass at a level of competency for their year in training. Further action includes a note in the student’s annual evaluation letter and a remediation plan developed by the mentor and Director of Clinical Training. For the first year, students are deemed competent if they receive a 2 or above on 80% of the items, a 3 or above on 80% of the items in their second year, and 4 or above on 80% of the items their third year. Professional and Interpersonal Competencies must be rated at 3 or above in Year 2 and 4 or above in Year 3.

All students meet with their advisors to review their ratings on each item. With regard to a student who needs remediation, the advisor meets with the student, and the student is told what specific behaviors need to be addressed and how the student needs to address these issues. The student’s progress will be closely monitored and reevaluated based on the timelines identified in the remediation plan. If the student complies with the plan and is able to effectively address the problem area(s), he/she will be removed from the remediation plan. Immediate action may be taken for ethical violations up to and including termination.

Further, the progress of students completing their internal practicum will be reviewed during both the semesters that they are enrolled in the internal practicum. Serious concerns regarding clinical competence will result in a remediation plan. Such concerns among the clinical faculty could lead to immediate removal of clinical cases, a possible leave of absence to address the concerns, and/or immediate termination.

It should be noted that the program has adopted The Comprehensive Evaluation of Student-Trainee Competence in Professional Psychology Programs (see Appendix A) model policy in relation to evaluating performance.

The following two ethical principles from the American Psychological Association Ethical Principles of Psychologists (http://www.apa.org/ethics/code2002.html) guide deliberations. **Principle A: Beneficence and Nonmaleficence**, requires psychologists to balance the welfare and rights of patients, clients, supervisees, and students. This includes concern for harm that may derive from impaired or incompetent students.
Principle B: Fidelity and Responsibility, expresses concern for the community and society in which psychologists work. This includes the responsibility to insure adequate interpersonal and professional skills in all graduates.

Additionally consistent with the ethical guidelines [2.03, 2.06(b), and 10.10(a)], and in the interest of client safety, students are required to take steps to maintain their own physical and mental health. Impairment refers to diminished functioning whereas incompetence refers to insufficient skills to provide adequate professional care. Impairment and incompetence can stem from interpersonal and intrapersonal problems as well as inadequate theoretical understanding and insufficient clinical proficiency regarding testing and treatment. If, at any time, a student comes to believe that he or she is not able to serve effectively in a clinical setting, he or she must immediately suspend his or her clinical, research, or teaching activities (with the help of their clinical supervisor, research mentor, or the Department Head) and provide immediate disclosure of such belief to the Director of Clinical Training. If the Doctoral Training Committee discovers or suspects a student has personal problems of any kind (including but not limited to social, situational, physical or psychological) that may be impairing clinical competence or professionalism, the Doctoral Training Committee reserves all rights to initiate a dialogue with such student and make reasonable inquiries to ascertain the student’s competence or ability to practice. During such a dialogue, students are expected to be forthcoming about any condition interfering with the successful execution of their clinical work. The Doctoral Training Committee does not discriminate against any disability and will provide reasonable accommodations where appropriate, as outlined and approved by the disabilities office.

Interpersonal skills and intrapersonal characteristics are considered essential to functioning as a clinical or school psychologist; therefore, deficiencies in these areas will result in disciplinary action. When a student’s behavior or performance raises concerns about the student’s ability to perform satisfactorily as a psychologist, that behavior or performance will be considered as grounds for academic discipline and/or removal from clinical, research, or teaching responsibilities. Students must adhere to the laws and regulations relating to the practice of psychology in whichever jurisdiction they are working. Given that students work in clinical settings, they will be held to the same ethical and professional standards of conduct within professional psychology environments.

Faculty members and students collectively share a responsibility to take action if we believe that a person’s personal problems may be harmful to patients, clients, or colleagues. The appropriate action would be to bring the concern to the attention of the person whom is believed to be impaired. If that does not result in a corrective response and there is still a perceived risk, it would be appropriate to consult with faculty member or the Director of Clinical Training.

If there is sufficient evidence supporting a student’s impairment due to an emotional, neuropsychological, or substance abuse condition, the faculty may (a) recommend that the student take a leave of absence until the student is no longer impaired, (b) recommend that the student discontinue the program, or (c) formally dismiss the student from the program.
Remediation of deficiencies includes, but is not limited to repeating coursework, repeating the qualifying exam, repeating practica experiences, increasing supervision, or taking a leave of absence. Failure to benefit from remediation may be followed by counseling toward voluntary withdrawal from the program or formal termination. Any student who, in the judgment of the clinical faculty lacks the competencies necessary for effective service delivery and/or progress through the program will be advised orally and in writing as to the necessary remediation required.

**Fellowships**
To help ensure the success of students in the program, every student receives a doctoral fellowship for full time study. The fellowship stipend is approximately $17,000 per year and typically this is for three years. The fellowship is an annual salary that will be paid equally for 12 months of the year.

Students will be matched with a faculty member. Fellowships require 20 hours per week of professional obligations to the program, during the fellowship award period. Continued support and renewal requires maintenance of a 3.60 or higher GPA, satisfactory progress toward degree completion, and adequate performance evaluations. The fellowship is a 12-month position. Students are permitted up to four weeks of vacation each year. Students should talk with their advisors about the requested time. If the advisors agree to the request, the student should submit requests for vacations to the business office at least one month in advance of the vacation. Students should not make travel plans without first consulting with their advisor. If assistantships include teaching responsibilities, students will not be able to take vacation during their scheduled teaching activities. No assignments regardless of fellowship status (e.g., clinic assistant, adjunct instructor, research assistant) can total more than 29 hours per week.

Some fellowships will consist of research activities with an assigned research advisor. For these research fellows, the research advisor will designate activities required by the fellow. Some fellowships will consist primarily of teaching activities. If a student fellowship includes teaching a class, the student will be required to attend a training seminar. Additionally, students will be assigned one to two teaching mentors. The content mentor is someone who has experience teaching the class that the student is assigned to teach. The content mentor will be important in the initial formation of the class, and he/she will help the student develop the course syllabus and lecture material. Further, a teaching mentor will also be assigned, and typically the teaching mentor is an assigned professor that will mentor all of the fellows. Students will meet with the teaching mentor on a regular basis to address teaching strategies, problems, and teaching outcomes. The teaching mentor will observe and evaluate the teaching performance of the student mid-year. Students in the class will also complete formal evaluations of the fellow's performance. All evaluations of teaching performance will be placed in their student file. A full teaching load for doctoral students includes two courses for the year. Exceeding this limit requires approval by the Doctoral Training Committee for each semester.

If the student receives unsatisfactory teaching ratings, a remediation plan will be developed. The teaching mentor will work with the student to develop this plan and
ensure that the student adheres to the plan. If the student receives a second unsatisfactory rating, the teaching mentor and PsyD faculty members will discuss the follow-up plan, which may include reassignment of fellowship responsibilities.

The doctoral fellowship does not cover health insurance. Additionally, the doctoral fellowship does not cover tuition, student fees, or any late registration or late payment fees. Students are responsible for any other non-registration related fees as well as any fees assessed for dropping or switching classes (e.g., program adjustment fee).

The main intent of the fellowship is to provide the time and support essential for the professional development of the fellow into a well-trained doctoral level psychologist. Since such training involves classroom instruction, research endeavors, and clinical experiences, duties of the fellowship are designed to provide relevant training and experiences in all these areas. Fellows may be asked to help with class preparations, as well as assist in data collection, preparation, and analysis.

**NOTE:** Students MUST be registered EVERY SEMESTER for which they have fellowship. Additionally, students must register for six credits each semester (Fall/Winter/Summer). Failure to register for a semester will result in the termination of fellowship pay.

**Outside Employment/Assessment for Pay**

Full-time coursework and fellowship duties are significant. In order to avoid compromising performance, employment outside of the fellowship is generally discouraged and thus prohibited without expressed approval of the DCT. A student who seeks employment outside of the university must submit a written request to the advisor and the Director of Clinical Training prior to accepting such a position. This request must include a description of the job tasks and the number of hours per week the student plans to work. Students cannot begin such employment without the approval of the advisor and the DCT. Students are encouraged to consult with the DCT prior to entering into discussions with outside employers.

Further, students can get involved in other activities within the university (Assisting Professors in classes, consulting with professors). If a student would like to do these activities, please talk with your major advisor. If you both agree it would be helpful, then please send a request to the DCT, who will bring it to the entire faculty.

**Dropping Classes and Terminating Fellowship**

If a student drops a class or takes a leave of absence, the stipend/income will stop as of the date of termination noted on the Personnel Action form or date of the letter of resignation.

**Clinical Experiences and Recording Hours**

Students will be given ample opportunities to practice clinical assessment and treatment skills in the onsite Psychology Clinic. Fully licensed psychologists, who are either part of the faculty or who are adjunct supervisors, will supervise all practica experiences. Occasionally, first and second year students may be supervised by students in the third and fourth years of the program. However, fully licensed psychologists will supervise
these students on their supervision. This practice is in keeping with state licensing laws and APA accreditation policies.

Students are responsible to record their practicum hours accurately and in accordance with the Association of Psychology Postdoctoral and Internship Centers (APPIC) application standards. In order to assist with this process, the Psychology Clinic has a tracking form available on the server. Additionally, if funds are available, the Department will cover the annual cost of a web-based hour recording system ([https://time2track.com](https://time2track.com)). Students are encouraged to become familiar with the recording requirements prior to starting the internal practicum. Students will submit their accumulated clinical hours each May for the annual evaluation.

In addition to Specific Classes, doctoral students will be required to assist at the UHCL Psychology Clinic. In the first year of the program, students will assist with client phone intakes and assessments and answer phones at the clinic. At the end of the first year, students will be assigned 5-6 clients for internal practicum.

Students will be responsible for maintaining all paperwork on clients, scheduling appointments, identifying treatment goals, and obtaining supervision (See Clinic Manual for details of student responsibilities at the clinic). In the third and fourth years of the program, students will be assigned to supervise first year masters or doctoral level students. Third and fourth year students will be supervised on their supervision by licensed clinical faculty. Both individual and group supervision will be provided on a regular basis. Student supervisors, supervising faculty, and the Clinic Director will conduct evaluations of students' clinical work. Students should complete a minimum of 200 direct contact practica hours at the Clinic over the three years they are in residence.

Students may only continue to see clients past April of their last year of fellowship funding under special circumstances and with approval by the Clinic Director and their clinical supervisor. If allowed to continue seeing clients, students must provide documentation of their own liability insurance prior to working with clients when no longer on fellowship.

There are guidelines about how many hours of practica experiences doctoral students need to appear competitive either for internship sites or for clinical jobs. Generally, doctoral students have between 600-750 direct contact hours. Given this range, we recommend that students obtain a minimum of 800-1000 hours (direct and indirect hours) of practica experiences. Students document their hours and the amount of time devoted to assessment, treatment, supervision, and other clinical tasks. Many states require this information for licensing.

**Academic Advising**

Students are matched with a faculty mentor who assists with advising on course selection and progress through the program. Mentors are responsible for keeping track of the student's research progress. A student may choose to do research with someone other than their advisor and paperwork needs to be completed if students want to switch to a new research mentor.
Expectations of Behavior
Outside of expectations of behaviors in clinical experiences (see above), there are overall expectations of students while in their program. In general, students are expected to behave in a professional and responsible manner, which is much of the basis for the annual evaluation of each student. Students are expected to be responsible in every manner, including attending all classes, completing all assignments and turning them in “on-time,” responding to feedback, treating other students and faculty in the program with respect, engaging in ethical behavior, and being prepared (i.e. reading outside of class). If students do not engage in these behaviors, there is chance that they will:

1. Fail classes (all classes have preparation and attendance policies)
2. Receive an unsatisfactory on their annual evaluations
3. Be asked to voluntarily withdraw or be dismissed

To reiterate, both faculty members and students share a responsibility to take action if they believe that a person’s personal problems may be harmful to patients, clients, colleagues, or other citizens. The appropriate action would be to bring the concern to the attention of the person believed to be impaired. If that does not result in a corrective response and a perceived risk remains, it would be appropriate to consult with a faculty member or the Director of Clinical Training.

If there is sufficient evidence supporting a student’s impairment in program responsibilities due to an emotional, neuropsychological, or substance abuse condition, the faculty may (a) recommend that the student take a leave of absence until the student is no longer impaired, (b) recommend that the student discontinue the program, or (c) formally dismiss the student from the program.

Remediation of deficiencies includes, but is not limited to repeating coursework, repeating practicum or internship experiences, increasing supervision, or taking a leave of absence. Failure to benefit from remediation may be followed by counseling toward voluntary withdrawal from the program or formal termination. Any student who, in the judgment of the clinical faculty lacks the competencies necessary for effective service delivery and/or progress through the program will be advised orally and in writing as to the necessary remediation required.

Recognizing and Remediing Personal Difficulties
We understand that students may experience difficulties during their time in the program. Unfortunately, the potential range of problems is vast, and may include illness, problems with romantic relationships and family members, financial pressures, confusion about career choices, personality conflicts, and others. Such difficulties may lead to the erosion of the student’s professional performance. When students experience stressors that adversely affect them, we hope that they feel comfortable approaching any faculty member to discuss their concerns. Students will be encouraged to set some limits on the extent of detail they want this faculty member to share with colleagues, but do not be so restrictive that the faculty member cannot serve effectively as the student’s advocate.
There are certain types of activities that create special difficulties for students. The most blatant difficulties stem from activities that are clearly unethical. Students will be expected to abide by the ethical standards of the profession.

A second blatant stance involves dishonesty. Professionals operate by making and honoring commitments; they understand their reputations are priceless in keeping their standing in the community. A good reputation is painstakingly built but can be quickly ruined; dishonesty will ruin one’s reputation quickly and thoroughly.

Avoidance is a third pattern that creates special problems. People tend to avoid onerous or difficult life tasks. Such avoidance is very expensive psychologically. Avoidance also feeds on itself, breeding further avoidance. This difficulty often manifests itself in failure to complete research objectives in a timely way. Its negative effects are magnified if students remain away from campus or avoid contact. Faculty will encourage the students’ learning and involvement, but it is students’ responsibility to get their work done in a timely way.

A final area of special concern is when students manifest patterns of poor judgment or interpersonal problems. In this scenario, no single problem in and of itself constitutes a blatant violation of ethics or blatant disregard of others, but a student accumulates a history of engaging in troublesome peculiar responses in a wide variety of situations. Individuals who manifest such behavioral patterns usually are unable to recognize their existence, and often do not view them as problems. Lack of recognition about how one generally affects others can create problematic interpersonal relationships with faculty and peers—problems that are not easy to address directly.

During all evaluations, whenever an area of concern is serious in nature, the student will be required to develop an action plan of remediation, in conjunction with the student’s faculty advisor. This plan should clearly outline behavioral goals and specific steps necessary to meet these goals as well as a timeline for implementation. The action plan should be completed within two weeks after the feedback meeting. Advisors will place a copy of the plan in the student’s file. It is the student’s responsibility to keep the advisor informed of how he/she is progressing with any remedial interventions and to negotiate alterations in the plan. Any such changes should be mutually agreed upon in writing, as an amendment to the original plan.

**Reasons for Termination from the Program**

Faculty members and administration at UHCL and the PsyD program expect conduct of all students that is consistent with the law, all relevant University policies and rules, including the University Student Conduct Code (http://prtl.uhcl.edu/portal/page/portal/DOS/Student_Life_Policies), and the American Psychological Association Ethical Principles of Psychologists and Code of Conduct (http://www.apa.org/ethics/code/). Single episode violations or patterns of recurring behavior could result in termination as determined by the Doctoral Training Committee and/or by the Administration of Human Sciences and Humanities.

The conditions under which a student may be terminated from the program include, but are not limited to:
1) Having a cumulative GPA of less than 3.00 (Assistantships require a cumulative GPA of 3.60. Students have one semester to raise their GPA, if the GPA remains below 3.60, the assistantship, stipend and tuition and fees remission, will be terminated. The assistantship may be reinstated if the GPA is raised above 3.60 within the fellowship period – the first 3-4 years in the program).

2) Obtaining less than a B- grade in any courses (including associated pre-practicum) listed in Program Requirements, after taking the course for the second time.

3) Failing the Qualifying Exam twice.

4) Engaging in unethical, unprofessional, threatening, criminal behavior (plagiarism, cheating, violation of APA ethical guidelines, or University policies or governmental law, including harassment) or consistent inability or unwillingness to carry out academic or practicum responsibilities. These activities include, but are not limited to, refusing to work with a particular group of clients; missing classes, departmental activities or client appointments; failing to complete clinical paperwork or class assignments; failing to attend mandatory meetings; or failing to complete mandatory requirements.

5) Experiencing problems that affect the student's functioning in the program, including performance or behaviors that demonstrate poor interpersonal skills and an inability to effectively communicate with others or form an appropriate therapeutic relationship with clients; lack of insight into negative consequences of own behavior; frequent blame of others or external factors for failures or difficulties; and inability to tolerate different points of view, constructive feedback or supervision.

6) Failing to make timely and satisfactory progress on program requirements (including clinical work, clinical competencies, thesis and dissertation research, qualifying exam, professional development, internship, etc.), responsibilities, and activities.

7) Demonstrating conduct that is a violation of the University Student Conduct Code (such a violation will also result in a referral to the office for Student Conduct and Community Standards for campus disciplinary action, including possible dismissal from the University as well as possible action by the Doctoral Training Committee). Conduct violations by a student off-campus in university related activities (e.g., external practicum, internship, etc.) will be handled the same as if the violation occurred on-campus.

8) Failing to respond to a remediation plan or failure to make adequate progress while under remediation.

Although it is expected that initial attempts to resolve issues will occur between the faculty advisor and student, a formal remediation plan will specifically outline requirements for successful completion. Inability to resolve and complete the remediation plan satisfactorily will be followed by counseling toward voluntary withdrawal from the program or formal termination. Students who are dismissed from or leave the program are not eligible to reapply or return.
It should also be noted that there may be some instances (i.e. unethical or illegal behavior) that will not warrant a remediation plan, and instead, the behavior warrants an immediate dismissal. In those instances where a student has engaged in such conduct, the program faculty members will meet and discuss the behavior and a majority of members will need to vote for the dismissal of the student.

Remediation plans are separate from academic or university probation. Students receiving academic or university probation will have this indicated on their applications for internship. Successfully completed remediation plans are not listed as probation for these purposes. Students suspended from the program for any reason will have this noted on their internship applications.

**Grievance Policies and Procedures**

When the grievance pertains to grades, the grade grievance procedure can be found in the current Graduate Catalog available online. The student employment grievance policy needs to be followed and can be found at [http://prtl.uhcl.edu/portal/page/portal/DOS/Documents_and_Forms/Academic_Appeals_Policy.pdf](http://prtl.uhcl.edu/portal/page/portal/DOS/Documents_and_Forms/Academic_Appeals_Policy.pdf). When the grievance pertains to student employment, these policies must be followed ([http://prtl.uhcl.edu/human-resources/part-time-employees](http://prtl.uhcl.edu/human-resources/part-time-employees)).

Outside of grades and employment, students can file a grievance through the proper channels. These procedures allow for investigating and resolving cases of alleged violation or grievances by doctoral students that do not involve grades or employment issues. While the Program fosters open communication and resolution between parties, we recognize that in some instances this is not possible and formal procedures need to be followed.

In most instances, a grievance may be resolved to everyone's satisfaction informally between the individuals involved. The informal process involves only those people directly impacted; there is no written grievance filed, and the resolution of the problem is acceptable to all parties. Students and faculty are encouraged to keep the lines of communication open and to protect the rights and needs of each individual. More specifically, if a student has a grievance with a particular person, then they need to address the issue with that person. If the issue is not resolved, the Director of Clinical Training can be contacted to help mediate the communication between the two parties.

If the student wants to file a formal grievance, the will need to follow formal procedures.

**Time Limit for Program Completion**

The time limit for completion of the doctoral program in health service psychology is seven years. Students who have not completed their courses, dissertation, internship, and all other requirements for the degree within seven years will be terminated from the program unless they file for an appeal. If a student is actively involved in completing his or her dissertation or internship in the seventh year, his or her faculty advisor may appeal to the Dean of HSH for an extension of one calendar year. UHCL requires courses to be repeated after ten years and an extension will not be granted beyond ten years.
from the start of the program. Students unable to fulfill all requirements within this timeframe or if denied an extension will be dismissed from the program.

**Leave of Absence**
A student-initiated leave of absence can range from one semester to one year. Students must gain approval from the Director of Clinical Training to take a leave of absence, and must show satisfactory progress in the program to that point (as demonstrated on competency evaluations). Only one personal leave is allowed while in the program and an extension beyond one year will not be permitted. Students with a documented disability/illness or a University imposed leave may receive additional time. Students forfeit their fellowship and tuition remission during a voluntary leave of absence. If students are on a disability or University imposed leave of absence, fellowship and tuition remission replacement is at the discretion of the Dean of HSH. Students should submit a written request for a leave of absence to the Director of Clinical Training at least one month before it will take effect. Return to the program is based on approval by the Doctoral Training Committee.

**Graduation and Degree Conferral**
An application for graduation is required at the beginning of the semester he/she intends to finish. PsyD degrees are conferred approximately three weeks after the graduation date, and the degree is posted on the transcripts at this point. Participating in the graduation ceremony is not the same as finishing the program and having the degree officially conferred.

**Malpractice Insurance during Internship and Practicum**
During the first three years of the program, students are covered under the liability insurance of UHCL (see Psychology Clinic Handbook). Coverage is also provided for the time students are in a practicum placement offsite. However, this coverage is rather limited and does not cover all allegations that could be made against a student. In addition, when students leave for the internship or matriculate beyond the three years, both university and clinic malpractice coverage cease. Consequently, all students should need to have insurance through APA or a provider of their choice on internship; however, most internship sites cover an intern’s insurance.

**Licensing**
The Board of Examiners of Psychologists of each state, through licensing laws and regulations, establishes requirements for licensure. Some state boards require that specific courses appear on the transcript. If such courses do not appear on a transcript by title, the applicant for licensure is required to document that a course or courses with suitable content were completed as part of training. If that is not possible, the Board may deny an applicant the privilege of taking the licensing examination. The documentation is typically in the form of the syllabus from the course(s). Sometimes a letter from the faculty member who taught the course can be substituted, but Boards may require documentary evidence. **SO, STUDENTS NEED TO KEEP THE SYLLABI FROM THEIR GRADUATE COURSES (NOT JUST CLINICAL PROGRAM COURSES) FOREVER.** Some states do not have reciprocity for licensure. Thus, students may need this information many years from now.
Alternatively, students may choose to “bank” their credentials with ASPPB (see http://www.asppb.net/i4a/pages/index.cfm?pageid=1) so that proper documentation is available in case students want to switch licensure jurisdictions during their career.

**Professional Development**

Students are encouraged to join the American Psychological Association (APA), the National Association of School Psychologists (NASP), the American Psychological Society (APS), and other national/international organizations relevant to research and clinical interests upon entry to graduate training. Students are also encouraged to join their state associations (e.g., Texas Psychological Association, Texas Association of School Psychologists). Membership in these organizations provides access to graduate student advocacy and opportunities for research and clinical training. Students must be members of APA to receive student liability insurance. The American Psychological Association Graduate Student organization (APAGS) provides useful and important information for students. Students may also consider receiving memberships in specialty organizations (e.g., Association for Behavioral and Cognitive Therapies, Society for Research in Child Development, Society of Behavioral Medicine, and Gerontological Society of America) and specialty areas of APA (e.g., Society for Pediatric Psychology, Society for Clinical Neuropsychology, Educational Psychology, School Psychology, Society for Clinical Psychology).

Students are also encouraged to attend professional conferences. Students are expected to submit poster and/or paper presentations at relevant conferences and participate in the Graduate Student Research Symposium here at UHCL. Travel money for graduate student presenters may be available through the Student Government Association, HSH Dean’s Office, and the Psychology Department. The department also provides professional development opportunities in the form of guest lecturers, webinars, brown bag lunch topics, and support for local clinical training workshops as funds are available.

**Yearly Information Needed From Students**

It is imperative that students inform the Director of Clinical Training of their address and telephone number. We must be able to find the student in case of a problem or emergency. Students will also need to inform the Clinic Director how he/she can be contacted at any time.

Each year in May the Department is required to report student accomplishments to the American Psychological Association. The questions routinely asked annually are:

1. Number of workshops, oral presentations, and/or poster presentations at professional meetings.
2. Number of books, book chapters, or articles in peer-reviewed professional/scientific journals.
3. Membership in a professional or research society (including student affiliate)
4. Involvement in grant-supported research (including working as a Research Assistant)
5. Involvement in teaching (on an ongoing basis such as a Teaching Assistant)
6. Involvement in the delivery of professional services on or off campus (including externship and practicum placements; excluding internship)
7. Leadership in activities in professional organizations

Students will be sent this questionnaire (along with other questions relevant for the APA report and annual student evaluation information) in April-May. Students should begin thinking about involvement in the various scholarly activities and organizations early in the program.

Guidelines for Students' Online Presence

It has become increasingly more popular for people to have personal web pages and/or to communicate over the web via blogs. It is likely that individuals (clients, parents of clients, supervisors, potential internship and externship sites, and future employers) will search out information about each student. The purpose of this policy is to provide some guidelines about any public representation of the student or the program over the web. While all of the information that may exist about the student may not be within the student’s control, students are urged to exercise caution and restraint and to utilize safeguards when possible. Although this policy applies to individuals’ web pages and/or blogs, nothing here is intended to limit it to only these public presentations.

Obviously if a student’s webpage/blog/Facebook does not include any mention or indication of the fact that they are a PsyD student, then the student’s social media pages and posts are not the program’s responsibility. However, students need to be aware that increasingly, universities, internship sites, and even clients are seeking out information about people on the web before they make faculty offers, final match decisions, or even decide to see someone clinically. There are now numerous anecdotes of well-qualified doctoral graduates that did not get post-doc or faculty offers because someone viewed something that was considered to be inappropriate or objectionable on the candidate’s webpage; similar stories about internship sites deciding not to match someone also exist. It is in the best interest of students to seriously consider how material that is public may be viewed by future employers, internship sites, or clients.

If students’ web page/blog/Facebook identify them as a PsyD student, then the program does indeed have some responsibility for how the students are portrayed. Thus, social media pages and posts must meet all legal and ethical guidelines from the Board of Psychology and the American Psychological Association (e.g., individuals cannot represent themselves as a “psychologist” in the State of Texas). Further, social media pages and posts must be professional in content and must not contain objectionable material particularly information that is publically available.

Outside of these directives, keep in mind the ideals of the preamble to the APA ethics code in which we aspire to do no harm to our clients, our research participants, or the profession with our actions. With this in mind, students are encouraged to consider the following cautions and suggestions:

1) When posting something that may be publicly accessible, students need to consider the possibility that each of those groups listed may view it, judge it, and evaluate it from their own perspective.
2) With social networking sites such as Facebook, students need to utilize privacy settings to limit access to pages and personal information. Students need to use thoughtful discretion when considering “friend” requests and consider the boundary implications. For example, it is not advisable to students to become virtual “friends” with clients or former clients or undergraduates, especially for those relationships where there are supervisory or evaluative responsibilities.

3) Students should not post or comment online about clients, research participants, or students. The desire to consult about stressful interactions is understandable, but such conversations should be off-line, in a thoughtful and sensitive manner, taking ethical guidelines about respect and confidentiality into account.

4) With email, students need to keep in mind that everything they write may exist perpetually or be retrievable. Emails sent via the UHCL email system are considered public records and the property of UHCL. Participation in listservs include the peril of inadvertently writing things to a much more public audience than intended, so be cautious with posts to such forums. Email is not an appropriate venue to discuss confidential information, so if such communications are necessary, make sure any information is non-identifiable.

5) Email “signatures” should be professional and appropriately represent one’s status and credentials. Students are encouraged to consider adding a confidentiality disclaimer to email signature files - and are required to do so for any email communication with clients. Any communication with clients’ needs to be done from students’ UHCL email account and should remain limited to scheduling only.

6) Students need to be mindful of voicemail greetings, if they utilize a private phone for any professional purposes (clinical work, teaching, or research). Students should make sure that such messages reflect a maturity and professionalism that should be portrayed to the public.

7) Online photo and video sharing, including within social networking sites, should be considered very public venues. Students need to use discretion when posting such information.

8) As an employee of UHCL, students must be careful to make sure their personal communications and postings are not perceived to be associated with the university, and that they do not violate UHCL policy.

It is not the intention of the program faculty to interfere in students’ personal life or to limit their ability to enjoy the benefits of online activities, express their personality or opinions, or have fun. Further, the program faculty members will not actively search out students’ web pages. However, if the program faculty members become aware of a page or blog that identifies a student as a PsyD student and that page or blog is considered by the Doctoral Training Committee to be unethical, illegal, or in violation of any relevant UHCL, APA, or Texas licensing policy, the student will be asked to modify or
remove the problem material. Should the student choose not to modify or remove the
material, the Doctoral Training Committee will follow the existing procedures for dealing
with student misconduct and/or unethical behavior including possible termination from
the program.

**General Policies and Procedures Not Covered Elsewhere**

**Student Input**

Students should have ready access to program decisions and a way to have input into
the policy developments of the program. Toward that end, an elected student
representative will attend all meetings of the Doctoral Training Committee. The student
representative will not be present for the discussion of issues pertaining to specific
students or other sensitive matters. A student representative will be elected by the
students.

**Inappropriate Professional Relationships**

The American Psychological Association's Ethical Principles of Psychologists and Code of
Conduct (provided during orientation) guide our policies and practices in the UHCL
doctoral program. Students should familiarize themselves with this code of ethics and
use it as a guide in their professional and educational practices. The following are areas
that often raise ethical dilemmas for students.

**Relationships with Undergraduate Students**

When students serve as a teaching assistant, they are in a position of authority with the
undergraduate students. Doctoral Fellows are governed by the same standards of
conduct in the performance of their academic responsibilities as are members of the
faculty. For purposes of emphasis, the university considers it inappropriate conduct for a
teaching assistant or assistant lecturer to have a dating, intimate, sexual, or financial
relationship with one of his/her students. All Doctoral Fellows shall respect the rights
and opinions of students and uphold all academic standards of the university in the
classroom, clinic, or laboratory setting. University policies on sexual harassment are
available on the UHCL Human Resources website, and all Doctoral Fellows must
successfully complete training on sexual harassment and provide documentation of
successful completion for their student file.

**Relationships between Graduate Students and Faculty**

We aim for collegial, mutually respectful relationships between faculty and students in
the PsyD program. Maintaining this ambiance requires a high level of professionalism
and integrity on the part of everyone. In collaborative research: (a) faculty and student
should discuss ownership of data and authorship on presentations/publications early
enough in the process so that each is aware of his/her role; and (b) faculty and student
should publicly acknowledge one another’s contributions at conferences, in written work,
etc. Guidelines about authorship and authorship order are addressed further in the APA
Ethical Standards.

A dual relationship between a faculty member and student exists when the individuals
fill roles beyond what is typical in faculty-student relationships and/or the relationship is
exclusionary from other faculty-student relationships (see Ethical Standard 3.05 Multiple
Relationships). Examples of dual relationships include, but are not limited to,
romantic/sexual involvement, financial partnerships, long-time personal friendships, and family relations. The effects of the dual relationship are not limited to the two individuals involved but potentially affect many persons in the program. Ideally, dual relationships should be avoided. In the event that a dual relationship arises, however, it is important that these relationships become known to others in the program rather than be kept a secret. Psychotherapeutic relations between faculty and student must be avoided altogether.

The Ethical Principles of Psychologists explicitly state that, “Psychologists do not engage in sexual relationships with students or supervisees in training over whom the psychologist has evaluative or direct authority, because such relationships are so likely to impair judgment or be exploitative” (Ethical Standard 3.08 Exploitative Relationships). Should an intimate or multiple role relationship with a faculty member exist, the guidelines are as follows: a faculty member involved in a dual relationship should not be: (a) instructing or supervising that student, (b) participating in the research or clinical guidance of the student, or (c) participating in the evaluation process of the student.

Depending upon the nature of the dual relationship, these guidelines may also be applied even if the dual relationship is terminated. The current ethical guidelines indicate that even if a faculty member does not have evaluative authority over a student, personal or intimate relationships are inappropriate and unethical.

**Definition of Inappropriate Relationships**

For relationships between Doctoral Fellows or Adjunct Faculty and undergraduate students or Faculty and graduate students, unethical relationships include those that are non-professional, particularly those of an intimate, financial, or sexual nature. Such relationships create an unequal playing field or unavailable opportunities for other students or may create an environment where it is difficult for the individual to say no to the person in a position of power. Engaging in such a relationship could result in disciplinary action up to and including dismissal from the program for current doctoral students and employee disciplinary actions for faculty.

**Selective Service Registration**

All male doctoral students should confirm that they have registered with the selective service (https://www.sss.gov/RegVer/wfVerification.aspx) prior to the age of 26. Failure to do so will prevent males from obtaining positions in the government or VA systems including internship, postdoctoral fellowships, and employment.
Appendix A: Goals, Objectives and Competencies

The PsyD curriculum is designed to address the goals, objectives and competencies listed. Several courses address multiple goals, objectives and competencies as the curriculum is integrated. The courses listed are those which have the most direct relationship to the specific goal, objective or competency.

**Goal 1: Foundational Knowledge** - To enable students to acquire broad and general foundational knowledge in health service psychology.

**Objectives:**

Students will acquire knowledge of the biological, social and cognitive/affective bases of behavior that provide a foundation for clinical practice.

Students will acquire knowledge of human diversity and individual differences that provide a foundation for clinical practice.

Students will be able to integrate knowledge gained from the field of psychology across domains and apply it to case conceptualization.

Students will become familiar with models of health psychology in clinical and school settings.

**Competencies: The student will be able to:**

Describe (orally and/or in writing) the impact of individual and cultural differences in addressing the health needs of the client and apply this knowledge to case formulation.

Describe (orally and/or in writing) the impact of individual and cultural differences in addressing the mental health needs of the client and apply this knowledge to case formulation.

Demonstrate understanding and application of the philosophical underpinnings and major theoretical systems of psychology.

Describe (orally and/or in writing) current theory, research and practice related to biological, cognitive/affective and social aspects of behavior and apply this knowledge in case formulation.

Describe (orally and/or in writing) models of health psychology that involve prevention and levels of intervention/treatment to address a variety of health issues.
### Goal 2: Research - To train students to conduct and consume research and to disseminate this psychological knowledge through publication, presentation, and practice

<table>
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<tr>
<th>Objectives:</th>
<th>Coursework</th>
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<tr>
<td>Students will acquire knowledge in the basic measurement theories and constructs applicable to psychological practice and research.</td>
<td>PSYC 7130</td>
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<tr>
<td>Students will acquire knowledge and skills in research design and data analysis techniques applicable to psychological research and practice.</td>
<td>PSYC 7131</td>
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<tr>
<td>Students will acquire knowledge of current research in clinical assessment and treatment and how research findings inform practice.</td>
<td>PSYC 7132</td>
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<tr>
<td>Students will acquire and demonstrate knowledge of treatment outcome research and the use of such research in planning and evaluating treatment outcomes for clients.</td>
<td>PSYC 7332</td>
</tr>
<tr>
<td>Students will understand research and program evaluation methodologies ranging from single case design, to experimental methodologies, to qualitative methods.</td>
<td>PSYC 8930</td>
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<tr>
<th>Competencies: The student will be able to:</th>
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<tr>
<td>Analyze research in terms of methodological rigor, internal and external validity, and applicability to diverse populations.</td>
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<td>Critically analyze assessment and treatment research literature and how this applies to certain cases.</td>
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<td>Write a scholarly article to the standards that would be expected under peer review.</td>
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<td>Make a research or scholarly presentation in a public forum.</td>
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<tr>
<td>Design, conduct, analyze, and disseminate research that contributes to the field of psychology.</td>
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<tr>
<td>Conduct a program evaluation.</td>
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<tr>
<td>Choose and apply appropriate statistical analyses for a given research or program evaluation design.</td>
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### Goal 3: Clinical Skills - To develop students' knowledge of health service psychology and the clinical skills to apply that knowledge to assessment, intervention, supervision, and consultation/evaluation services.
**Objectives:**
Students will acquire knowledge about the principles and methods of valid assessment, including the use of specific types of assessment procedures for diagnostic, progress monitoring and efficacy determination.

Students will learn assessment techniques using multimodal and multimethod approaches.

Students will acquire knowledge about evidence-based intervention strategies and case conceptualization.

Students will acquire knowledge of the principles, models and methods of ethical clinical supervision and consultation.

Students will demonstrate a data-based problem solving approach in assessment and intervention.

Students will learn empirically-based diagnostic techniques and procedures.

Students will acquire knowledge of and correct use of the APA Ethical Guidelines for clinical practice.

**Competencies:** The student will be able to:

- Conduct assessments of child, adolescent, and adult cognitive functioning using appropriate instruments and techniques.

- Conduct assessments of child, adolescent, and adult academic achievement and/or occupational functioning using appropriate instruments and techniques.

- Conduct assessments of child, adolescent, and adult personality functioning, including behavioral, social, and affective factors using appropriate instruments and techniques.

- Demonstrate understanding and incorporation of individual, linguistic, and cultural differences into assessment planning, interpretation, and treatment planning recommendations.

- Integrate multi-method, multi-informant assessment data to conceptualize a case and make diagnostic and or eligibility decisions appropriate to the classification systems (e.g., DSM-5, IDEA Eligibility for Services, ICD-10, etc.).

- Identify, develop and implement evidence-based interventions for children, adolescents, and/or adult clients related to emotional/affective difficulties.

| PSYC 7032 |
| PSYC 7033 |
| PSYC 7230 |
| PSYC 7038 |
| PSYC 7039 |
| PSYC 7936 |
| PSYC 8931 |
| Various therapy and assessment electives |
Identify, develop and implement evidence-based interventions for children, adolescents, and/or adult clients related to behavioral/social/personality difficulties.

Identify, develop and implement evidence-based interventions for children, adolescents and/or adult clients related to cognitive, adaptive, and learning/academic achievement difficulties.

Consult and collaborate with a variety of health service professionals to create comprehensive, effective treatment plans for clients.

Identify and implement appropriate consultation models for clients (e.g., clients, parents, teachers, etc.).

Write professional evaluations, treatment plans, progress notes, and other reports.

Consult with various colleagues for service delivery.

Provide clinical supervision for assessment and intervention to master's level individuals and other students in training.

Develop and deliver case presentations.

Demonstrate the ability to develop and deliver in-service or community education programs based on areas of expertise.

Select treatments on the basis of empirically determined treatments of choice and implement treatments.

Develop training programs in treatment and assessment skills for other clinicians.

<table>
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<th><strong>Goal 4: Cultural and Linguistic Diversity</strong> - To enable students to understand and appreciate individual differences and diversity, thereby becoming culturally competent in the delivery of psychological services.</th>
<th><strong>Coursework</strong></th>
</tr>
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<tr>
<td><strong>Objectives:</strong></td>
<td>PSYC 7136 All therapy and assessment courses, practicum courses and internship</td>
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<tr>
<td>Students will demonstrate sensitivity to the issues of cultural and individual diversity.</td>
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<tr>
<td>Students will gain knowledge regarding the impact that diversity has on diagnostic decision-making, selection of and</td>
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</table>
implementation of interventions, and determination of treatment outcomes.

Students will collaborate appropriately and professionally with colleagues, members of other professions, students, and supervisors.

**Competencies:** The student will be able to:

- Demonstrate through specific cases how cultural diversity was considered and integrated into the decision-making process regarding assessment, intervention, consultation and supervision.
- Deliver services effectively with a variety of culturally and linguistically diverse clients.
- Incorporate cultural, linguistic, and individual difference considerations effectively in case conceptualizations.
- Refine case conceptualizations from an inter-professional perspective.

**Goal 5: Ethical and Legal Issues** - To enable students to understand ethical, legal, and professional issues and to adhere to ethical and legal standards in all of their professional activities

**Objectives:**
Students will become knowledgeable of the APA Ethical Guidelines for clinical practice.

- In all professional and training activities, students will act in a way that maintains the highest level of ethical behavior.
- Students will acquire knowledge of professional ethics and related legal issues in the practice of professional psychology across a variety of settings (e.g., community mental health, hospitals, schools, etc.) and integrate this knowledge into their professional activities.
- Students will acquire recognition that knowledge of individual and cultural diversity is critical to ethical professional practice.

**Competencies:** Students will be able to:

- Apply and adhere to the ethical, legal, and professional practice of psychology across various health and educational settings.
- Identify the various laws that govern the practice of psychology across settings.

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<tr>
<th>Coursework</th>
<th>PSYC 7736</th>
<th>All practicum courses</th>
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<tr>
<td></td>
<td>PSYC 8931</td>
<td>All therapy and assessment courses</td>
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<tr>
<td>Demonstrate the ability to listen and be empathetic with others; show respect for/interest in others’ cultures, experiences, values, perspectives, etc.</td>
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<td>Demonstrate openness to feedback and supervision.</td>
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<td>Demonstrate problem-solving ability; critical thinking, organized reasoning, intellectual curiosity, and flexibility.</td>
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<td>Demonstrate tolerance/understanding of interpersonal conflict, and tolerance for ambiguity and uncertainty.</td>
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<tr>
<td>Engage in self-reflection.</td>
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Appendix B: The Comprehensive Evaluation of Student-Trainee Competence in Professional Psychology Programs

I. Overview and Rationale
Professional psychologists are expected to demonstrate competence within and across a number of different but interrelated dimensions. Programs that educate and train professional psychologists also strive to protect the public and profession. Therefore, faculty, training staff, supervisors, and administrators in such programs have a duty and responsibility to evaluate the competence of students and trainees across multiple aspects of performance, development, and functioning.

It is important for students and trainees to understand and appreciate that academic competence in professional psychology programs (e.g., doctoral, internship, postdoctoral) is defined and evaluated comprehensively. Specifically, in addition to performance in coursework, seminars, scholarship, comprehensive examinations, and related program requirements, other aspects of professional development and functioning (e.g., cognitive, emotional, psychological, interpersonal, technical, and ethical) will also be evaluated. Such comprehensive evaluation is necessary in order for faculty, training staff, and supervisors to appraise the entire range of academic performance, development, and functioning of their student-trainees. This model policy attempts to disclose and make these expectations explicit for student-trainees prior to program entry and at the outset of education and training.

In response to these issues, the Council of Chairs of Training Councils (CCTC) has developed the following model policy that doctoral, internship, and postdoctoral training programs in psychology may use in their respective program handbooks and other written materials (see http://www.apa.org/ed/graduate/cctc.html). This policy was developed in consultation with CCTC member organizations, and is consistent with a range of oversight, professional, ethical, and licensure guidelines and procedures that are relevant to processes of training, practice, and the assessment of competence within professional psychology (e.g., the Association of State and Provincial Psychology Boards, 2004; Competencies 2002: Future Directions in Education and Credentialing in Professional Psychology; Ethical Principles of Psychologists and Code of Conduct, 2003; Guidelines and Principles for Accreditation of Programs in Professional Psychology, 2003; Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists, 2002).

II. Model Policy
Students and trainees in professional psychology programs (at the doctoral, internship, or postdoctoral level) should know—prior to program entry, and at the outset of training—that faculty, training staff, supervisors, and administrators have a professional, ethical, and potentially legal obligation to: (a) establish criteria and methods through which aspects of competence other than, and in addition to, a student-trainee’s knowledge or skills may be assessed (including, but not limited to, emotional stability and well being, interpersonal skills, professional development, and personal fitness for practice); and, (b) ensure—insofar as possible—that the student-trainees who complete their programs are competent to manage future relationships (e.g., client, collegial, professional, public, scholarly, supervisory, teaching) in an effective and appropriate
manner. Because of this commitment, and within the parameters of their administrative
authority, professional psychology education and training programs, faculty, training
staff, supervisors, and administrators strive not to advance, recommend, or graduate
students or trainees with demonstrable problems (e.g., cognitive, emotional,
psychological, interpersonal, technical, and ethical) that may interfere with professional
competence to other programs, the profession, employers, or the public at large.
As such, within a developmental framework, and with due regard for the inherent power
difference between students and faculty, students and trainees should know that their
faculty, training staff, and supervisors will evaluate their competence in areas other
than, and in addition to, coursework, seminars, scholarship, comprehensive
examinations, or related program requirements. These evaluative areas include, but are
not limited to, demonstration of sufficient: (a) interpersonal and professional
competence (e.g., the ways in which student-trainees relate to clients, peers, faculty,
allied professionals, the public, and individuals from diverse backgrounds or histories);
(b) self-awareness, self-reflection, and self-evaluation (e.g., knowledge of the content
and potential impact of one's own beliefs and values on clients, peers, faculty, allied
professionals, the public, and individuals from diverse backgrounds or histories); (c)
openness to processes of supervision (e.g., the ability and willingness to explore issues
that either interfere with the appropriate provision of care or impede professional
development or functioning); and (d) resolution of issues or problems that interfere with
professional development or functioning in a satisfactory manner (e.g., by responding
constructively to feedback from supervisors or program faculty; by the successful
completion of remediation plans; by participating in personal therapy in order to resolve
issues or problems).

This policy is applicable to settings and contexts in which evaluation would appropriately
occur (e.g., coursework, practica, supervision), rather than settings and contexts that
are unrelated to the formal process of education and training (e.g., non-academic, social
contexts). However, irrespective of setting or context, when a student-trainee's conduct
clearly and demonstrably (a) impacts the performance, development, or functioning of
the student-trainee, (b) raises questions of an ethical nature, (c) represents a risk to
public safety, or (d) damages the representation of psychology to the profession or
public, appropriate representatives of the program may review such conduct within the
context of the program's evaluation processes.

Although the purpose of this policy is to inform students and trainees that evaluation will
occur in these areas, it should also be emphasized that a program's evaluation
processes and content should typically include: (a) information regarding evaluation
processes and standards (e.g., procedures should be consistent and content verifiable);
(b) information regarding the primary purpose of evaluation (e.g., to facilitate student or
trainee development; to enhance self-awareness, self-reflection, and self-assessment; to
emphasize strengths as well as areas for improvement; to assist in the development of
remediation plans when necessary); (c) more than one source of information regarding
the evaluative area(s) in question (e.g., across supervisors and settings); and (d)
opportunities for remediation, provided that faculty, training staff, or supervisors
conclude that satisfactory remediation is possible for a given student-trainee. Finally, the
criteria, methods, and processes through which student-trainees will be evaluated
should be clearly specified in a program's handbook, which should also include
information regarding due process policies and procedures (e.g., including, but not limited to, review of a program's evaluation processes and decisions).

** It should be noted that this document was developed by the Student Competence Task Force of the Council of Chairs of Training Councils (CCTC) (http://www.apa.org/ed/graduate/cctc.html) and approved by the CCTC on March 25, 2004. Impetus for this document arose from the need, identified by a number of CCTC members that programs in professional psychology needed to clarify for themselves and their student-trainees that the comprehensive academic evaluation of student-trainee competence includes the evaluation of intrapersonal, interpersonal, and professional development and functioning.