Chapter 7. Evaluation of Student Performance and Grievance Procedures

Evaluation of Performance

The core clinical faculty normally conducts evaluative reviews of each student at least once a year. The primary purpose of these reviews is to recognize the performance of students whose work is outstanding, to identify students who are not performing adequately in one or more aspects of the program so as to intervene as soon as possible, and to monitor the progress of students on probation.

Regular evaluations. All doctoral students in clinical psychology receive written evaluations of their overall progress in the program following each spring semester, and first-year students additionally receive written evaluations after the fall semester. These evaluations are prepared by the students' advisor in collaboration with the other core clinical faculty, and based on experience of the advisor and feedback from the students' other instructors and supervisors.

The feedback is summarized on the program's Competence Rating Form, which includes scale ratings and open-ended feedback. A copy of the 2nd Year + form is included at the end of this chapter; the 1st year form differs somewhat. Faculty discuss the feedback with students and provide the students with their Competence Rating Form.

If a student wishes to add a clarification to the Competence Rating Form or disagrees with any rating, they can submit a written response to include with their student record. Written student responses are also welcome with the other forms of evaluation in the program (supervisor evaluations, etc.)

To demonstrate student readiness for **entry into practice**, students must achieve ratings at the "Meets or Exceeds Expectations" level for **ALL** items on the most recent evaluations from faculty (i.e., Competence Rating Form) by the **conclusion** of the doctoral program.

"Needs Attention" is the minimum acceptable rating from year to year in the program, and indicates that the competency is beginning to develop but warrants particular attention and monitoring during the next semester by the student, the clinical faculty advisor, and any other supervisor or faculty member who is involved with rating the competence in question. This is identified as a "Minimum Level of Achievement."

A rating of "Below Expectations" on the Competence Rating Form indicates that a remediation plan must be devised by the faculty advisor with the student and any other relevant professionals (e.g., DCT, ADCT, clinical supervisor). All responsibilities and expectations are clearly defined in the remediation plan, along with dates for follow-up evaluation, and the minimum criteria for satisfying the particular competencies. See the "Student Remediation Plan" at the end of this chapter.

To facilitate evaluation, the research apprenticeship, clinical practica, externships, and advanced

clinical training are graded "P-F," while all other courses taught by clinical faculty are graded "A-B-C-F." In keeping with University practice, neither dissertation guidance nor internship is graded. In addition to course, research, and practicum performance, students are evaluated regarding their ethical behavior, their adherence to the laws and regulations governing their conduct (e.g., DC law governing mental health services), and their interpersonal competency insofar as it influences a student's professional or ethical conduct in the program or potential for work in the field.

Scope of Evaluation

The following statement on the breadth of competence is our program's adaptation of a model statement developed by the Councils of Chairs of Training Councils, in collaboration with APA.

Competence as a clinical psychologist extends beyond academic competence. Faculty, training staff, and supervisors, have a professional, ethical, and potentially legal obligation to: (a) establish criteria and methods through which aspects of competence other than students' academic performance 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 students who complete our program 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, our program has the obligation not to advance or recommend to other programs, to training sites, or to employers, students with demonstrable problems (e.g., cognitive, emotional, psychological, interpersonal, technical, and ethical) that may interfere with professional competence.

As such, within a developmental framework, and with due regard for the inherent power difference between students and faculty, students should know that their faculty 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 students 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'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, faculty may review such conduct within the context of the program's evaluation processes.

Probation. A student may be placed on probation for poor performance in course work, research activity, practicum work, or interpersonal competency as defined below, or for behavior that fails to meet ethical standards or violates relevant statutes or regulations (including the Health Insurance Portability and Accountability Act, HIPAA).

- (A) For the research apprenticeship and course work (aside from clinical practica, externships, and advanced clinical training), the criteria for a student being placed on probation the first time are the accumulation of two C grades (in one or more semesters) or one F grade. A student is placed on probation a second time upon receiving one F or two C grades in subsequent course work.
- (B) For clinical practica, externships, and advanced clinical training, the criterion for a student being placed on probation is a grade of F in any practicum, externship, or advanced clinical training. A student is placed on probation a second time if a subsequent F is earned.
- (C) For adherence to ethical and legal standards, the criterion for a student being placed on probation is a violation of APA's ethical principles and code of conduct (see reference in Chapter 1, http://www.apa.org/ethics/code/index.aspx) or a violation of a law or regulation governing their conduct. Relevant laws generally include HIPAA, http://www.hhs.gov/ocr/hipaa_/, and the relevant statutes in place where the student is training such as the DC Municipal Regulations for Psychology, which can be found at
- https://doh.dc.gov/publication/dc-municipal-regulations-psychology. It should be noted that some violations of ethics, laws, or statutes may be judged by the clinical faculty to be too serious for probation and may lead to immediate dismissal.
- (D) For interpersonal competency, the criterion for a student being placed on probation is generally a pattern of interpersonal difficulties in professional or ethical situations as judged by the clinical faculty, although a single instance may be grounds for probation if sufficiently serious.

The length of each probation is one semester. The maximum cumulative allowable time on probation is two semesters. These semesters need not be consecutive. Failure to maintain satisfactory standing subsequent to two semesters of probation results in a recommendation for dismissal (see below).

The minimum criteria for returning to satisfactory standing are specified in writing (using the Remediation Plan Template) at the time the student is placed on probation. These criteria are

worked out on a case-by-case basis to address specific inadequacies reflected in past performance. The criteria may include satisfactory performance in a specified course or practicum. In essence, the clinical faculty recommends a course of action for each student placed on probation designed to improve his or her competencies in specific areas, and the faculty evaluates the extent to which future performance remediates the identified weakness.

At the regular time for evaluative reviews following the semester of probation, the clinical faculty reviews the relevant information and makes an administrative decision (a) to reinstate the student to satisfactory standing, (b) to place the student on a second semester of probation, or (c) to recommend to the department that the student be dismissed. Since the maximum cumulative allowable time on probation is two semesters, option (b) may not be chosen if the student has already accumulated two semesters on probation.

While on probation, a student may not accept a placement at an externship or internship. If a student has accepted or started a placement prior to being placed on probation, a "two-stage" process is adopted for notifying the agency involved. That is, the student is given the option of informing the agency prior to official notification. Regardless of whether the student elects to initiate notification, 2 weeks later an official letter is sent to the agency from the clinical director notifying the agency of the student's probationary status. At the option of the clinical faculty, the agency may be given the choice whether or not to begin or to continue with the placement. If the agency begins or continues with the placement, the clinical faculty may request that the agency provide particular clinical opportunities and/or early evaluation of the student.

Dismissal. The following regulation of the Graduate Studies Announcements (http://announcements.cua.edu) is important to note:

Graduate students who are not making adequate progress towards the academic standards imposed by individual schools or departments (where applicable) will be warned by the school dean or department chair (where applicable) in writing of the possibility of dismissal. Students will be given a clear statement about what must be done within a specified time period to alleviate the problem. If the student does not meet the requirements within the time frame specified, he/she is subject to dismissal from the degree program.

Graduate students who incur two (2) or more failing grades in formal coursework, engage in academic or research misconduct, or violate the Student Academic Dishonesty Policy, are also subject to dismissal. The University reserves the right to have appropriate academic officials review records at any time for the purpose of determining whether a student meets the standards necessary for graduation. If, in the opinion of The University, this review reveals serious shortcomings, the student may be dismissed.

Dismissal is made by the school dean upon recommendation of the faculty or department (where applicable.) The student will be notified in writing of the grounds for dismissal and the date when the dismissal will be effective. This will normally be the end of the

semester in which the student is enrolled, but the circumstances of the dismissal will be important in determining this date.

The student has the right to appeal the dismissal decision. The appeal must be submitted in writing to the Vice Provost and Dean of Graduate Studies within fifteen (15) business days of the dismissal notification from the school dean. The Vice Provost and Dean of Graduate Studies will make the determination on the school dean's decision within seven (7) business days of receipt of the appeal. That decision will be communicated in writing to the student and the school dean. All dismissal and appeal decisions are kept on file in the Office of the Vice Provost and Dean of Graduate Studies. (p. 50-51)

A student who accumulates two or more failing grades is subject to academic dismissal, as per graduate school regulations. In other cases, except under unusual extenuating circumstances, the clinical faculty will ask the Department of Psychology to request that the Dean of Arts and Sciences dismiss a student after two semesters of probation, if the student fails to maintain satisfactory standing at any time following the second and final probation semester.

In some situations, the clinical faculty may recommend dismissal without prior probation. For example, these situations may include the accumulation of two or more failing grades in one semester, or a violation of APA's ethical principles or the relevant statutes or regulations that is judged by the clinical faculty to be too serious for probation to be a sufficient remedy.

University Policies and Grievance Procedures

- University Grades and Academic Standing: Graduate http://policies.cua.edu/academicgrad/gradesfull.cfm
- University Academic Integrity: http://graduatestudies.cua.edu/currentstudents/academintgrt.cfm
- University Student Dishonesty: http://policies.cua.edu/academicundergrad/integrityfull.cfm
- University Appeal of Failing Grades Policy: http://policies.cua.edu/academicundergrad/gradesprocedures.cfm
- University Student Dishonesty: http://policies.cua.edu/academicundergrad/integrityfull.cfm
- University Academic Dishonesty Procedures: http://policies.cua.edu/academicundergrad/integrityprocedures.cfm
- University Disability Support Services Grievance Procedure: http://dss.cua.edu/policies/grievance-procedures.cfm
- University Complaint Process:
- https://enrollment-services.catholic.edu/students/complaint-procedure/index.html
- University Non-Discrimination and Equal Opportunity Information:

https://www.catholic.edu/resources/consumer-information/non-discrimination-and-equal-opportunity-information.html

• University Non-Discrimination, Anti-Harassment, and Title IX Compliance Policy: http://policies.cua.edu/eeo/affirmact.cfm

Questions about policies relating to graduate studies can be to Dr. Steven Brown, Vice Provost and Dean of Graduate Studies (202-319-5247; brownjs@cua.edu). Also, see http://policies.cua.edu/academicgrad/index.cfm.

APA Ethics Code

The program recognizes the rights of students as well as faculty to be treated with courtesy and respect. All interactions among students and faculty, as well as staff, are expected to be collegial and conducted in a manner consistent with the highest standards of the scholarly community and the profession (see the APA "Ethical Principles of Psychologists and Code of Conduct," http://www.apa.org/ethics/).

APA complaint procedures. If the student feels that the program is not in compliance with APA's accreditation guidelines and principles, the student may file a complaint with the Commission on Accreditation of APA (Office of Program Consultation and Accreditation, APA, 750 First St., NE, Washington, DC 20002-4242; http://www.apa.org/ed/accreditation_/; 202-336-5979).

It should be noted that "[t]he procedures for handling complaints against accredited programs are intended to deal only with complaints based on purported lack of program consistency with the *Standards of Accreditation for Health Service Psychology* (SoA). It is not a mechanism for adjudication of disputes between individuals and programs. The CoA cannot, for instance, direct a program to change a grade, readmit a student, or reinstate a faculty member. For resolution of these disputes, complainants are encouraged to follow their institution's due process and grievance procedures." (Accreditation Operating Procedures of the Commission on Accreditation, APA, 2015, p. 6).

Students who have a complaint about the program's adherence to APA's Standards of Accreditation are encouraged to discuss the complaint with departmental and university administrators prior to making a formal complaint to APA.

Accreditation Review and Student Records

The program is routinely evaluated for re-accreditation by the Commission on Accreditation of the American Psychological Association (Office of Program Consultation and Accreditation, American Psychological Association, 750 First Street NE, Washington, DC 20002; http://www.apa.org/ed/accreditation/; 202-336-5979). In keeping with the accreditation of the APA Commission on Accreditation by the federal Department of Education, site visitors in APA

accreditation reviews are legally entitled to examine student records that contain names, such as student files. The intent of this examination is not to evaluate individual students but to evaluate the program.

Records Retention Policy The clinical psychology program maintains records on each student in the program. As described in the Standards of Accreditation: "The program is responsible for keeping information and records related to student training and complaints/grievances against the Program. Records must be maintained in accord with federal, state, and institution policies regarding record keeping and privacy." In addition, "the program must document and maintain accurate records of each student's education and training experiences and evaluations for evidence of the student's progression through the Program, as well as for future reference and credentialing purposes." Student records are retained indefinitely by the program.



Clinical Psychology Program Student Remediation Plan

| Date Plan Developed: |
|--|
| Student Name: |
| Advisor Name: |
| Names of those present at meeting: |
| Additional relevant faculty/supervisors not present: |
| Date for Follow-up Meeting: |
| Circle all competency domains in which the trainee's performance does not meet the benchmark: |
| Foundational Competencies: -Professionalism, Reflective Practice/Self-Assessment/Self-care, Scientific Knowledge and Methods, Relationships, Individual and Cultural Diversity, Ethical Legal Standards and Policy, Interdisciplinary Systems, Other |
| Functional Competencies: -Assessment, Intervention, Consultation, Research/evaluation, Supervision, Teaching, Advocacy, Other |
| Description of the problem(s) in each competency domain circled above: |
| Date(s) the problem(s) was brought to the student's attention, and by whom: |
| Steps already taken by the student to rectify the identified problem(s): |

Steps already taken by the supervisor(s)/faculty to address the problem(s):

Remediation Plan

| Competency Domain and Essential Components | Problem Behaviors | Expectations for Acceptable Performance | Trainee's Responsibilities and Actions | Advisor's / Supervisor's Responsibilities and Actions | Timeframe for Acceptable Performance | Assessment Methods | Dates of Evaluation | Consequences for Unsuccessful Remediation |
|---|----------------------|---|--|--|--|-----------------------|------------------------|---|
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| | | | | | | | | |
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| I, [insert student's name] | | _, have reviewed the above remediat | ion plan |
|---------------------------------------|-------------------|---------------------------------------|------------|
| with my primary supervisor/advisor, a | any additional | supervisors/faculty, and the director | of |
| training. My signature below indicate | es that I fully u | nderstand the above. I agree/disagree | with the |
| above plan (please circle one). My co | mments, if any | y, are below (PLEASE NOTE: (a) If s | tudent |
| disagrees, comments, including a deta | | | |
| are REQUIRED). (b) All faculty and | _ | , | |
| remediation plan must sign below to i | 1 | <u>*</u> | on in inis |
| remediation plan must sign below to t | maicaic men a | greement with the plan. | |
| | | | |
| | | | |
| | | | |
| Student Signature Date | | Training Director Signature | Date |
| S | | | |
| | | | |
| | | | |
| | | | |
| Supervisor or Faculty Signature | Date | Supervisor or Faculty Signature | Date |
| | | | |
| | | | |
| Student's comments (if any. Continue | on additional | page if necessary). | |

Summative Evaluation of Remediation Plan

| Follow-up Meeting | g Date(s): | | | |
|---|--|--|--|--|
| Names of those pr | esent at meeting(s) |): | | |
| Additional relevan | nt faculty/superviso | ors not present: | | |
| Competency Domain and Essential Components | Expectations for Acceptable Performance | Outcomes Related to Expected Benchmarks ¹ | Decision: Remediation Concluded? Remediation Continued and Plan Modified? ² | Date of Next Evaluation (if necessary) |
| | | | | |
| | | | | |
| | | | | |
| -Expectations not | tially met (specify wet | • | vere met and which w | , |
| supervisors/faculty understand the abor (please circle one). the outcomes and n | and the director of we. I agree/disagree My comments, if a | training. My signature with the above outcomy, are below. (<i>PLEA</i> , <i>including a detaile</i>) | eviewed the above sum isor(s)/faculty, any ad are below indicates that ome assessments and a SE NOTE: If trainee and description of the trainee are assessments. | nt I fully next steps disagrees with |
| Student Signature | Date | Trainir | ng Director Signature | Date |



Department of Psychology

[Advisor's letter with narrative feedback on student's performance, attached to "competence rating form" (see following pages)]

The Catholic University of America Competence Rating Form for Second year + Clinical Psychology Students

Student Name: Semester/Year:

This form is to be completed by the academic advisor, and discussed with the student, at the conclusion of the Spring semester. The competencies are based on the Competency Benchmarks Document (Fouad et al., 2009). *Foundational competencies* include knowledge, skills, attitudes, and values that serve as the foundation for the functions a psychologist is expected to carry out. *Functional competencies* refer to the major functions a psychologist is expected to perform.

In making these ratings, students should be evaluated with regard to expected progress for their current developmental level of training. Rate each item as one of the following:

- M Meets or Exceeds Expectations: The student's knowledge and/or skill in the defined area meets or exceeds expectations given his or her level of education, training, and experience. (NOTE: To demonstrate student readiness for entry into practice, students must achieve ratings at the "Meets or Exceeds Expectations" level for ALL items on the most recent evaluations from faculty (i.e., Competence Rating Form) by the conclusion of the doctoral program.)
- N Needs Attention: The student's skill/knowledge in the defined area is beginning to develop, but needs further attention and improvement in the coming year.
- Below Expectation: The student's knowledge or skills performance was below expectations, based on the level of education, training, and experience. (NOTE: A remediation plan with relevant faculty and supervisor is developed for items identified as "below expectations". Items at this level fall below "Minimum Levels of Achievement."
- NA Not applicable for this student at this time
- **DK Don't know**, not enough information to evaluate

Foundational Competencies

| Professionalism: Professional values and ethics as evidenced in behavior and comportment that reflects the values and ethics of | | | | |
|--|---|-------|--|--|
| psychology, integrity, and responsibility | | | | |
| A. Integrity - Honesty, | Second year +: Work as psychologist-in-training infused with adherence to professional values. Recogn | nizes | | |
| personal | situations that challenge adherence to professional values | | | |
| responsibility and | Demonstrates knowledge of professional values | | | |
| | 2. Demonstrates adherence to professional values | | | |

| adherence to | 3. Identifies situations that challenge professional values, and seeks faculty/supervisor guidance | |
|---------------------|---|-------|
| professional values | as needed. | |
| | 4. Demonstrates ethical behavior and basic knowledge of APA Ethical Principles and Code of | |
| | Conduct | |
| B. Deportment | Second year +: Professionally appropriate communication and physical conduct, including attire, across | SS |
| | different settings | |
| | 5. Demonstrates awareness of the impact behavior has on client, public and profession | |
| | 6. Utilizes appropriate language and demeanor in professional communications | |
| | 7. Demonstrates appropriate physical conduct, including attire, consistent with context | |
| C. Accountability | Second year +: Consistently reliable; consistently accepts responsibility for own actions | |
| | 8. Completes required case documentation promptly and accurately | |
| | 9. Accepts responsibility for meeting deadlines | |
| | 10. Available when "on-call" | |
| | 11. Acknowledges errors | |
| | 12. Utilizes supervision to strengthen effectiveness of practice | |
| D. Concern for the | Second year +: Consistently acts to understand and safeguard the welfare of others | |
| welfare of others | 13. Regularly demonstrates compassion | |
| | 14. Displays respect in interpersonal interactions with others including those from divergent | |
| | perspectives or backgrounds | |
| | 15. Determines when response to client needs takes precedence over personal needs | |
| E. Professional | Second year +: Emerging professional identity as psychologist; uses resources (e.g., supervision, literal | ture) |
| Identity | for professional development | |
| | 16. Attends colloquia, workshops, conferences | |
| | 17. Consults literature relevant to client care | |

| Reflective Practice/Self-Assessment/Self-Care: Practice conducted with personal and professional self-awareness and reflection; with awareness | | | | |
|--|--|----|--|--|
| of competencies; with appropriate self-care | | | | |
| A. Reflective Practice | Second year +: Broadened self-awareness; self- monitoring; reflectivity regarding professional practic | re | | |
| | (reflection-on-action); use of resources to enhance reflectivity; elements of reflection-inaction; | | | |
| | 18. Articulates attitudes, values, and beliefs toward diverse others | | | |
| | 19. Recognizes impact of self on others | | | |
| | 20. Self-identifies multiple individual and cultural identities | | | |
| | 21. Describes how others experience him/her | | | |
| | 22. Responsively utilizes supervision to enhance reflectivity | | | |

| | 23. Systematically and effectively reviews own professional performance via videotape or other technology with supervisors | |
|--------------------|--|---------|
| | 24. Initial indicators of monitoring and adjusting professional performance as situation requires | |
| B. Self-Assessment | Second year +: Knowledge of core competencies; emerging self-assessment regarding competencies | |
| | 25. Self-assessment comes close to congruence with assessment by peers and supervisors | |
| | 26. Identifies areas requiring further professional growth | |
| | 27. Writes a personal statement of professional goals | |
| | 28. Identifies learning objectives for overall training plan | |
| C. Self-Care | Second year +: Monitoring of issues related to self-care with supervisor; understanding of the central self-care to effective practice | role of |
| | 29. Works with supervisor to monitor issues related to self-care | |
| | 30. Takes action recommended by supervisor for self-care to ensure effective training | |

| | and Methods: Understanding of research, research methodology, techniques of data collection and analysis, avior, cognitive-affective bases of behavior, and development across the lifespan. Respect for scientifically |
|-------------------|--|
| derived knowledge | avior, cognitive-affective bases of behavior, and development across the mespair. Respect for scientificanty |
| A. Scientific | Second year +: Values and applies scientific methods to professional practice |
| Mindedness | 31. Articulates, in supervision and case conference, support for issues derived from the literature |
| | 32. Formulates appropriate questions regarding case conceptualization |
| | 33. Generates hypotheses regarding own contribution to therapeutic process and outcome |
| | 34. Performs scientific critique of literature |
| B. Scientific | Second year +: Knowledge of core science |
| Foundation of | 35. Displays intermediate level knowledge of and respect for scientific bases of behavior |
| Psychology | |
| C. Scientific | Second year +: Knowledge, understanding, and application of the concept of evidence-based practice |
| Foundation of | 36. Applies EBP concepts in case conceptualization, treatment planning, and interventions |
| Professional | 37. Compares and contrasts EBP approaches with other theoretical perspectives and interventions |
| Practice | in the context of case conceptualization and treatment planning. |

| Relationships: Relate effectively | and meaningfully with individuals, groups, and/or communities | | |
|-----------------------------------|--|-------------|--|
| A. Interpersonal Relationships | Second year +: Forms and maintains productive and respectful relationships with clients, peers/colle | eagues, | |
| | supervisors and professionals from other disciplines | | |
| | 38. Forms effective working alliance with clients | | |
| | 39. Engages with supervisors to work effectively | | |
| | 40. Works cooperatively with peers | | |
| | 41. Involved in departmental, institutional, or professional activities or governance | | |
| | 42. Demonstrates respectful and collegial interactions with those who have different professional models or perspectives | | |
| B. Affective Skills | Second year +: Negotiates differences and handles conflict satisfactorily; provides effective feedback and receives feedback nondefensively | k to others | |
| | 43. Works collaboratively | | |
| | 44. Demonstrates active problem-solving | | |
| | 45. Makes appropriate disclosures regarding problematic interpersonal situations | | |
| | 46. Acknowledges own role in difficult interactions | | |
| | 47. Provides feedback to supervisor regarding supervisory process | | |
| | 48. Provides feedback to peers regarding peers' clinical work in context of group supervision or | | |
| | case conference | | |
| | 49. Accepts and implements supervisory feedback nondefensively | | |
| C. Expressive Skills | Second year +: Clear and articulate expression | | |
| | 50. Communicates clearly using verbal, nonverbal, and written skills | | |
| | 51. Demonstrates understanding of professional language | | |

| | ral Diversity-Awareness: sensitivity and skills in working professionally with diverse individuals, groups esent various cultural and personal background and characteristics defined broadly and consistent with APA | |
|--|---|------|
| | sity is defined as cultural, individual, and role differences, including those based on age, gender, gender | 1 |
| | culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status) | |
| A. Self as shaped by | Second year +: Monitors and applies knowledge of self as a cultural being in assessment, treatment, and | |
| individual and | consultation | |
| cultural | 52. Understands and monitors own cultural identities in relation to work with others | |
| diversity and | 53. Uses knowledge of self to monitor effectiveness as a professional | |
| context | 54. Critically evaluates feedback and initiates supervision regularly about diversity issues | |
| B. Others as | Second year +: Applies knowledge of others as cultural beings in assessment, treatment, and consultation | n of |
| shaped by | others | |
| individual and | 55. Understands multiple cultural identities in work with others | |
| cultural | 56. Uses knowledge of others' cultural identity in work as a professional | |
| diversity and | 57. Critically evaluates feedback and initiates supervision regularly about diversity issues with | |
| context | others | |
| C. Interaction of | Second year +: Applies knowledge of the role of culture in interactions in assessment, treatment, and | |
| self and others | consultation of diverse others | |
| as shaped by | | |
| as snapeu by | 58. Understands the role of multiple cultural identities in interactions among individuals | |
| individual and | 58. Understands the role of multiple cultural identities in interactions among individuals 59. Uses knowledge of the role of culture in interactions in work as a professional | |
| | 59. Uses knowledge of the role of culture in interactions in work as a professional | |
| individual and | | |
| individual and cultural diversity and context | 59. Uses knowledge of the role of culture in interactions in work as a professional 60. Critically evaluates feedback and initiates supervision regularly about diversity issues with others | |
| individual and cultural diversity and context D. Applications | 59. Uses knowledge of the role of culture in interactions in work as a professional 60. Critically evaluates feedback and initiates supervision regularly about diversity issues with others Second year +: Applies knowledge, sensitivity, and understanding regarding ICD issues to work effectively. | ly |
| individual and cultural diversity and context D. Applications based on | 59. Uses knowledge of the role of culture in interactions in work as a professional 60. Critically evaluates feedback and initiates supervision regularly about diversity issues with others Second year +: Applies knowledge, sensitivity, and understanding regarding ICD issues to work effectively with diverse others in assessment, treatment, and consultation | ly |
| individual and cultural diversity and context D. Applications based on individual and | 59. Uses knowledge of the role of culture in interactions in work as a professional 60. Critically evaluates feedback and initiates supervision regularly about diversity issues with others Second year +: Applies knowledge, sensitivity, and understanding regarding ICD issues to work effectively with diverse others in assessment, treatment, and consultation 61. Demonstrates knowledge of ICD literature and APA policies including guidelines for practice | ly |
| individual and cultural diversity and context D. Applications based on | 59. Uses knowledge of the role of culture in interactions in work as a professional 60. Critically evaluates feedback and initiates supervision regularly about diversity issues with others Second year +: Applies knowledge, sensitivity, and understanding regarding ICD issues to work effectively with diverse others in assessment, treatment, and consultation 61. Demonstrates knowledge of ICD literature and APA policies including guidelines for practice with diverse individuals, groups and communities | ly |
| individual and cultural diversity and context D. Applications based on individual and | 59. Uses knowledge of the role of culture in interactions in work as a professional 60. Critically evaluates feedback and initiates supervision regularly about diversity issues with others Second year +: Applies knowledge, sensitivity, and understanding regarding ICD issues to work effectively with diverse others in assessment, treatment, and consultation 61. Demonstrates knowledge of ICD literature and APA policies including guidelines for practice with diverse individuals, groups and communities 62. Demonstrates ability to address ICD issues across professional settings and activities | ly |
| individual and cultural diversity and context D. Applications based on individual and | 59. Uses knowledge of the role of culture in interactions in work as a professional 60. Critically evaluates feedback and initiates supervision regularly about diversity issues with others Second year +: Applies knowledge, sensitivity, and understanding regarding ICD issues to work effectively with diverse others in assessment, treatment, and consultation 61. Demonstrates knowledge of ICD literature and APA policies including guidelines for practice with diverse individuals, groups and communities | ly |

| Ethical Legal Standards and Policy - Application of ethical concepts and awareness of legal issues regarding professional activities | | |
|--|---|------|
| with individuals, group | s, and organizations | |
| A. Knowledge of | Second year +: Intermediate level knowledge and understanding of the APA Ethical Principles and Code | of |
| ethical, legal and | Conduct and other relevant ethical/professional codes, standards and guidelines; laws, statutes, rules, | |
| professional | regulations | |
| standards and | 65. Identifies ethical dilemmas effectively | |
| guidelines | 66. Actively consults with supervisor to act upon ethical and legal aspects of practice | |
| | 67. Addresses ethical and legal aspects within the case conceptualization | |
| | 68. Discusses ethical implications of professional work | |
| | 69. Recognizes and discusses limits of own ethical and legal knowledge | |
| B. Awareness and | Second year +: Knows and applies an ethical decision-making model and is able to apply relevant eleme | ents |
| Application of | of ethical decision making to a dilemma | |
| Ethical Decision | 70. Uses an ethical decision-making model when discussing cases in supervision. | |
| Making | 71. Readily identifies ethical implications in cases and to understand the ethical elements in any | |
| | present ethical dilemma or question | |
| | 72. Discusses ethical dilemmas and decision making in supervision, staffings, presentations, | |
| | practicum settings | |
| C. Ethical Conduct | Second year +: Knowledge of own moral principles/ethical values integrated in professional conduct | |
| | 73. Articulates knowledge of own moral principles and ethical values in discussions with | |
| | supervisors and peers about ethical issues | |
| | 74. Spontaneously discusses intersection of personal and professional ethical and moral issues. | |

| Interdisciplinary systems – Knowledge of key issues and concepts in related disciplines. Identify and interact with professionals in multiple disciplines. | | | | |
|---|--|--|--|--|
| A. Knowledge of | Second year +: Awareness of multiple and differing worldviews, roles, professional standards, and | | | |
| the shared and | contributions across contexts and systems, intermediate level knowledge of common and distinctive roles of | | | |
| distinctive | other professionals | | | |
| contributions of | 75. Demonstrates knowledge of the nature of interdisciplinary vs. multidisciplinary function and | | | |
| other professions | The second secon | | | |
| B. Functioning in | Second year +: Beginning, knowledge of strategies that promote interdisciplinary collaboration vs. | | | |
| multidisciplinar | multidisciplinary functioning | | | |
| y and | 76. Demonstrates ability to cooperate with others in task completion | | | |
| interdisciplinary | | | | |
| contexts | | | | |
| C. Understands | Second year +: Participates in and initiates interdisciplinary collaboration/consultation directed toward | | | |
| how | shared goals | | | |
| participation in | 77. Consults with and cooperates with other disciplines in service of clients | | | |
| interdisciplinary | 1 | | | |
| collaboration/ | | | | |
| consultation | | | | |
| enhances | | | | |
| outcomes | | | | |
| D. Respectful and | Second year +: Develops and maintains collaborative relationships and respect for other professionals | | | |
| productive | 78. Communicates effectively with individuals from other profession | | | |
| relationships | | | | |
| with individuals | | | | |
| from other | from other | | | |
| professions | professions | | | |

Functional Competencies

| Assessment - Assessment and | d diagnosis of problems, capabilities and issues associated with individuals, groups, and/or organization | ations | | |
|------------------------------------|--|--------|--|--|
| A. Measurement and | Second year +: Selects assessment measures with attention to issues of reliability and validity | | | |
| Psychometrics | 79. Identifies appropriate assessment measures for cases seen at practice site | | | |
| | 80. Routinely consults with supervisor regarding selection of assessment measures | | | |
| B. Evaluation Methods | Second year +: Awareness of the strengths and limitations of administration, scoring and | | | |
| - | interpretation of traditional assessment measures as well as related technological advances | | | |
| | 81. Demonstrates intermediate level ability to accurately and consistently select, administer, | | | |
| - | score and interpret assessment tools with client populations | | | |
| | 82. Collects accurate and relevant data from structured and semi-structured interviews and | | | |
| | mini-mental status exams | | | |
| C. Application of | Second year +: Selects appropriate assessment measures to answer diagnostic question | | | |
| Methods | 83. Selects assessment tools that reflect awareness of patient population served at a given | | | |
| | practice site | | | |
| | 84. Regularly selects and uses appropriate methods of evaluation | | | |
| | 85. Demonstrates ability to adapt environment and materials according to client needs (e.g., lighting, privacy, ambient noise) | | | |
| D. Diagnosis | Second year +: Applies concepts of normal/abnormal behavior to case formulation and diagnosis in | | | |
| | the context of stages of human development and diversity | • | | |
| | 86. Articulates relevant developmental features and clinical symptoms as applied to | | | |
| | presenting question | | | |
| | 87. Demonstrates ability to identify problem areas and to use concepts of differential | | | |
| | diagnosis | | | |
| E. Conceptualization | Second year +: Utilizes systematic approaches of gathering data to inform clinical decision-making | | | |
| and | 88. Presents cases and reports demonstrating how diagnosis is based on case material | | | |
| Recommendations | | | | |
| F. Communication of | Second year +: Writes assessment reports and progress notes | | | |
| Findings | 89. Writes a basic psychological report | | | |
| | 90. Demonstrates ability to communicate basic findings verbally | | | |
| | 91. Reports reflect data that have been collected via interview | | | |

| T-4 | | | | |
|-----------------|--|--------|--|--|
| | ntions designed to alleviate suffering and to promote health and well-being of individuals, groups, and/or | | | |
| organizations | 7 | | | |
| A. Knowledge of | Second year +: Knowledge of scientific, theoretical, empirical and contextual bases of intervention, | | | |
| Interventions | including theory, research, and practice | | | |
| | 92. Demonstrates knowledge of interventions and explanations for their use based on EBP | | | |
| | 93. Demonstrates the ability to select interventions for different problems and populations related | | | |
| | to the practice setting | | | |
| | 94. Investigates existing literature related to problems and client issues | | | |
| | 95. Writes a statement of one's own theoretical perspective regarding intervention strategies | | | |
| B. Intervention | Second year +: Formulates and conceptualizes cases and plan interventions utilizing at least one | | | |
| planning | consistent theoretical orientation | | | |
| | 96. Articulates a theory of change and identifies interventions to implement change; as consistent | | | |
| | with the AAPI | | | |
| | 97. Writes understandable case conceptualization reports and collaborative treatment plans | | | |
| | incorporating evidence-based practices | | | |
| C. Skills | Second year +: Clinical skills | | | |
| | 98. Develops rapport with most clients | | | |
| | 99. Develops therapeutic relationships | | | |
| | 100. Demonstrates appropriate judgment about when to consult supervisor | | | |
| D. Intervention | Second year +: Implements evidence-based interventions that take into account empirical support, cli | inical | | |
| Implementation | judgment, and client diversity (e.g., client characteristics, values, and context) | | | |
| | 101. Applies specific evidence-based interventions | | | |
| | 102. Presents case that documents application of evidence-based practice | | | |
| E. Progress | Second year +: Evaluate treatment progress and modify treatment planning as indicated, utilizing | | | |
| evaluation | established outcome measures | | | |
| | 103. Assesses and documents treatment progress and outcomes | | | |
| | 104. Alters treatment plan accordingly | | | |
| | 105. Describes instances of lack progress and actions taken in response. | | | |

| Consultation - The ability to provide expert guidance or professional assistance in response to a client's needs or goals. | | | |
|---|--|--|--|
| A. Role of | Second year +: Knowledge of the consultant's role and its unique features as distinguished from other | | |
| Consultant | professional roles (such as therapist, supervisor, teacher). | | |
| | 106. Articulates common and distinctive roles of consultant | | |
| | 107. Compares and contrast consultation, clinical and supervision roles | | |
| B. Addressing | Second year +: Knowledge of and ability to select appropriate means of assessment to answer referral | | |
| Referral | questions | | |
| Question | 108. Implements systematic approach to data collection in a consultative role | | |
| | 109. Identifies sources and types of assessment tools | | |
| C. Communication | Second year +: Identifies literature and knowledge about process of informing consultee of assessment | | |
| of Findings | findings | | |
| | 110. Identifies appropriate approaches and processes for providing written and verbal feedback and | | |
| | recommendation to consultee | | |
| D. Application of | Second year +: Identifies and acquires literature relevant to unique consultation methods assessment & | | |
| Methods | Intervention) within systems, clients or settings | | |
| | 111. Identifies appropriate interventions based on consultation assessment findings | | |

| Research/evaluation - Generating research that contributes to the professional knowledge base and/or evaluates the effectiveness of | | | |
|--|--|--|--|
| various professional activities | | | |
| A. Scientific | Second year +: Development of skills and habits in seeking, applying, and evaluating theoretical and | | |
| Approach to | research knowledge relevant to the practice of psychology | | |
| Knowledge | 112. Demonstrates understanding of research methods and techniques of data analysis | | |
| Generation | tion 113. Demonstrates research and scholarly activity, which may include presentations at conferences; participation in research teams; submission of manuscripts for publication | | |
| | 114. Demonstrates being a critical consumer of research | | |
| B. Application of Scientific | Second year +: Apply scientific methods to evaluating own practice | | |
| Method to 115. Discusses evidence based practices | | | |
| Practice | Practice 116. Compiles and analyzes data on own clients (outcome measurement) | | |
| | 117. Participates in program evaluation | | |

| | ion - Supervis | ion and training in the professional knowledge base and of evaluation of the effectiveness of various | | | |
|--|--|--|--|--|--|
| A. Exped | ctations | Second year +: Knowledge of purpose for and roles in supervision | | | |
| and R | d Roles 118. Identifies roles and responsibilities of the supervisor and supervisee in the supervision pr | | | | |
| B. Proce | sses and | Second year +: Knowledge of procedures and processes of supervision | | | |
| Proce | dures | 119. Identifies goals and tasks of supervision related to developmental progression | | | |
| | | 120. Tracks progress achieving goals and setting new goals | | | |
| C. Skills Devel | opment | Second year +: Knowledge of the supervision literature and how clinicians develop to be skilled professionals | | | |
| | | 121. Successfully completes coursework on supervision | | | |
| | | 122. Demonstrates formation of supervisory relationship integrating theory and skills | | | |
| D. Award factor qualit | Second year +: Knowledge about the impact of diversity on all professional settings and supervision participants including self as defined by APA policy; beginning knowledge of personal contribution to therapy and to supervision | | | | |
| | | 123. Demonstrates knowledge of ICD literature and APA guidelines in supervision practice | | | |
| | | 124. Demonstrates awareness of role of oppression and privilege on supervision process | | | |
| E. Participation in Supervision Process Second year +: Observation of and participation in supervisory process (e.g., peer supervision process, areas of strength and those needing improvement | | Second year +: Observation of and participation in supervisory process (e.g., peer supervision) | | | |
| | | 125. Reflects on supervision process, areas of strength and those needing improvement | | | |
| | | 126. Seeks supervision to improve performance, presenting work for feedback, and integrating feedback into performance | | | |
| | Ethical and Legal Issues Second year +: Knowledge of and compliance with ethical/professional codes, standards and guidant institutional policies; laws, statutes, rules, regulations, and case law relevant to the practice of pseudoins and its supervision | | | | |
| | | 127. Behaves ethically 128. Recognizes ethical and legal issues in clinical practice and supervision | | | |
| | | 120. Recognizes cancar and regar issues in crimical practice and supervision | | | |

| Trainee | Academic Advisor | Date |
|---------|------------------|------|