

**2019/20 PRACTICUM & PRE-
INTERNSHIP HANDBOOK
AUS Psy.D. Program**

Overview

Purpose of this Handbook

This handbook describes the practices and procedures officially adopted for the Psy.D. degree program at Antioch University Seattle. The current release of this handbook is definitive and supersedes any previous version of this document or any previous documents that it replaces. These practices and procedures apply to all faculty members, students, and staff involved in the Psy.D. program.

Model and Philosophy of Training

Clinical training is a central component of the Psy.D. program's mission to educate professional psychologists. It is in the real life encounters and exigencies of supervised clinical experience that psychological research, theory, debate, and issues are enlivened and addressed. Face to face encounters with clients, health care delivery systems, practicing psychologists, and other disciplines offer the best possible laboratory for learning the knowledge, competencies, skills, attitudes, and ethics of the professional psychologist. Supervised student work in practicum, pre-internship, and ultimately the clinical internship provide the opportunity for these clinical training experiences.

The model of training used in the Psy.D. program is the "practitioner-scholar" model, emphasizing the development of applied skills and competencies and scholarly participation, integration, use and application of relevant research. The Psy.D. program patterns the clinical training process to be consistent with American Psychological Association accreditation standards and the recommendations for professional psychology training supported by the National Council of Schools of Professional Psychology (NCSPP). At Antioch University Seattle, clinical training is a purposeful and directed developmental interpersonal process that values diversity on all levels. The training is a multi-theoretical, generalist training with a strong emphasis on ethics and socialization into professional and health service psychology. All the training experiences are carefully sequenced and graded in complexity, beginning with non-clinical and early foundational experiences in the Social Justice Service Practicum or Project and later transitioning to clinical experiences in the AUS Community Counseling and Psychology Clinic, community clinical practicum and pre-internship placements, and Clinical Internship site placements. Additionally, the program maintains an emphasis on providing doctoral training to practitioners who are interested in serving populations in rural and semi-rural or underserved areas.

Competency-Based Goals and Evaluations

Following the APA and NCSPP standards, all of the clinical experiences in Years 1-5, including the Social Justice Clinical Practicum, Pre-Internships, and the Clinical Internship, are integrated into the curriculum by specified requirements to work toward meeting designated program competencies.

Students and supervisors at clinical settings agree on which competencies will be the focus of their learning in that setting, the training activities that will meet these competencies, how these competencies will be performed, and how the student's performance will be evaluated by the supervisor using the Contract for Learning. The Contract for Learning is completed at the

beginning of the placement as a collaborative effort between the student and the supervisor and includes goals for supervision and training. It is a three way document that represents an agreement between the site/student/school and is signed by the supervisor, student, and the AUS Director of Clinical Training and student Advisor. Supervisors complete quarterly Supervisor Evaluations which assess the student's performance on the listed competencies.

Director of Clinical Training

The Director of Clinical Training (DCT) oversees and coordinates the overall clinical training experience. There is an organized method of dissemination of clinical information starting with the basic information in this handbook as a foundation to the student's knowledge. In addition, the DCT will update students on new training opportunities in periodic community meetings. The DCT will also meet personally with the student at various times in order to facilitate training placements that will assist the student to develop the needed competencies, grow toward their professional goals, and evaluate clinical training progress.

Communication of Foundational and Updated Clinical Training Information

The clinical training sequence and placement at clinical training sites is an important part of the student's experience and training. Training experiences progress from beginning placement in the AUS Clinic for all students to more advanced training experiences at additional outside community clinical training placement sites. The clinical training sequence includes a requirement for two outside community site training years after a year spent in the AUS Clinic. Student placement at sites is coordinated by the DCT and is based on the developmental level of the student's clinical skills, broad generalist training requirements, and specific student goals for training. Clinical training site placement is a dynamic process that is ever changing as new sites are added and developed and placement site changes occur.

The following is a tiered system that details how clinical training information including program requirements, policy changes, site application and assignment processes, and site additions and changes are communicated to the student. It is important the student have a basic knowledge of the clinical training process and remain updated and fully informed about emerging clinical training information.

Tier 1: Primary sources of clinical training information:

1. Student is required to read the appropriate clinical training handbook at developmental level of training and use this as a reference. Use Sakai Community Site to obtain the Practicum & Pre-internship and Clinical Internship Handbooks.
2. DCT presents information in 701-703 classes and Professional Seminars during first and second years.

Tier 2: Updating and reinforcing clinical training information:

1. DCT will send regular emails with updated site development and application information.
2. Community meetings will be scheduled quarterly to update training information ---new sites, new procedures, question/ answer, forms. Internship *Coach & Prep Sessions* will be

provided for students planning to become Internship Eligible and apply to Clinical Internship.

Tier 3: Personalized level of clinical training information:

1. An Individual meeting is scheduled with DCT in 3rd or 4th quarter of first year to discuss training goals.
2. As needed, the student may schedule meetings with the DCT to discuss personal goals and applications for pre-internship. The student will complete Brochures/Contracts for Learning/and Contracts with Supervisor paperwork before start at a site, or by the end of the first week at site as allowed. Turn these in to DCT for review.
3. Meetings are scheduled with the DCT at the end of every training year to turn in clinical hours logs and paperwork.
4. Students obtain DCT approval of site placement by email or in personal meetings.
5. Meeting with the DCT is important if training goals change, or if there is a new site and new site paperwork needs to be discussed.
6. It is important to meet with the DCT if there is a problem at a site or a problem with a supervisor. It is also very important to meet and discuss any petition to change or withdraw from a commitment to a site prior to making a decision to leave a site.
7. The student should meet with the DCT when planning to apply for internship and for the internship eligibility interview.
8. Meet with DCT prior to leaving for internship and prior to graduation.
9. Turn in all Supervisor Evaluations into the DCT mailbox, email according to directions given, or present this personally. Students are encouraged to always keep copies of clinical training paperwork. Paperwork must be turned in quarterly for tracking. The student will complete a student site evaluation at end of year, evaluating the site training experience and supervision, and turn this in as well.

Making good use of the handbook, community meetings, and email updates makes the DCT available office time more effectively used for personalized information. The student is responsible to know the clinical training policies specified in the Psy.D. Program Handbook, the Practicum & Pre-internship Handbook, and the Clinical Internship Handbook.

Student Council will invite the DCT to meetings on a regular basis and this will be organized and scheduled by the Student Council, affording an opportunity for student feedback to the DCT and student recommendations for improvement in the clinical training process. Peer mentoring systems will help support the student to make sure that they are informed, connected, and are accountable. The good management of clinical training placement site transitions and paperwork is a collaborative effort and needs the student's active participation. The DCT and the faculty liaison to Student Council are both available for students to give ongoing ideas and feedback regarding clinical training issues.

Supervision

As a central part of the doctoral program, each student is expected to successfully participate in a sequence of clinical situations and settings of increasing complexity. These are planned, integrated, and supervised packages of professional activities that ensure that over the course of their doctoral training students are exposed to diverse roles, populations, settings, supervisors, and types of interventions. The fundamental aim is to provide students with ongoing opportunities for supervised practice in a variety of areas of clinical psychology.

Supervision Activities

Supervision involves the oversight of clinical services by qualified licensed psychologists and other licensed professionals, as appropriate, and will include the following:

Discussion of services provided by the student

- Selection of a service plan for, and review of, each case or work unit of the student
- Discussion of and instruction in theoretical concepts underlying the work
- Discussion of the management of professional practice and other administrative or business issues
- Evaluation of the supervisory process by the student and the supervisor
- Discussion of coordination of services among the professionals involved in the particular cases or work units
- Discussion of relevant state laws and rules
- Discussion of ethical principles including principles applicable to the work
- Review of standards for providers of psychological services
- And discussion of reading materials relevant to cases, ethical issues, and the supervisory process

Note: These supervisory activities meet the Washington State licensure requirements for supervision (WAC 246-924-049).

801 Supplemental supervision requests. There may be times when a student desires or needs additional doctoral-level supervision to be provided for work at the AUS Clinic or to help supplement supervision at a community placement site. Supplemental Supervision is a course that the student may register for that will provide and track this additional supervision. Once a student registers for this course, the DCT will assign supervision for the quarter that meets the particular needs of the student. AUS clinical faculty and community licensed psychologists provide this supervision. The student may request preferred supervisors, however the quarterly assignments are made based on overall institutional needs, specialty training of supervisors, supervisor availability, and fit. Students must register for the Psyc 8010 Supplemental Supervision course to be considered for an assignment to a supervisor. Any questions regarding supplemental supervision should be directed to the DCT. The DCT will update students on available supervisors and supervision changes.

Telesupervision Policy. During all clinical training placements, supervision will be of the type (group/individual) and specified ratio described in the clinical training handbooks and

according to the specifications of Psy.D. program and WA State licensure requirements. The Psy.D. Program values face to face mentoring of students by faculty and clinical supervisors and clinical training, at all levels, is structured with face to face supervision as the primary vehicle of mentorship of the doctoral student's clinical skill development. Case review, direct observation of student clinical work, videotape session reviews, supervisor evaluations of performance, and student feedback to the supervisor are all components that may be included in face to face supervision meetings.

Supervision will involve face to face contact with the supervisor in the same room as the supervisee. Exigent circumstances that may be an exception to this would include emergency supervision calls, temporary significant geographic distance of supervisor and supervisee, weather related travel complications, contact during vacations, student or supervisor illness, and occasional videoconferencing with a consultant pre-planned to add richness to the supervisory experience. These exceptions should be infrequent.

Practicum students who are in their first year of clinical training will be provided face to face group supervision in the Professional Seminars in addition to face to face individual supervision. It is expected that the clinical practicum student will attend these scheduled meetings regularly. Telesupervision would only be appropriate for the above listed reasons in an exigent circumstance. The student will notify the DCT if there is more than two telesupervision sessions during a quarter and discuss the situation.

Pre-internship and Internship students who have completed their initial clinical practicum experience, are also expected to attend face to face individual supervision in addition to any additional supervision planned at the training site. Telesupervision will be allowed only for the above listed reasons. If a clinical training site has an innovative client telehealth service delivery program, the student will obtain DCT approval prior to participating in these activities and it is expected that face to face individual supervision will be utilized. The student will notify the DCT if more than 30% of supervisor sessions are telesupervision in any one quarter and discuss the circumstances and need for telesupervision.

Students will identify any single supervision session done using telesupervision in their Time2Track logs so that these can be tracked. Under no circumstances will telesupervision constitute more than 50% of the total supervision provided in a quarter.

Credit for supervision courses (Professional Seminars and 8010 Supplemental Supervision) and for the clinical practicum, preinternship, or internship may be withheld if this policy is not followed strictly.

It is the responsibility of the student and the supervisor to disidentify any identifying client information transmitted during telesupervision. In addition, the student and supervisor are responsible to assure that all telesupervision transmission complies with HIPPA requirements. Secure landlines and HIPPA compliant videoconferencing platforms are useful for these exchanges (Refer to Good Practice: Tools and Information for Professional Psychologists (Fall 2015) APA Practice Organization publication. This may be obtained at www.apa.org/practice/guidelines/telepsychology.aspx or practice@apa.org).

WA State Laws Regarding Practicum, Pre-internship, and Internship

The following laws explicate the requirements for various stages of clinical training for psychologists:

- WAC 246-924-049 Practicum: <http://apps.leg.wa.gov/WAC/default.aspx?cite=246-924-049>
- WAC 246-924-053 Pre-internship:
<http://apps.leg.wa.gov/WAC/default.aspx?cite=246-924-053>
- WAC 246-924-056 Internship: <http://apps.leg.wa.gov/WAC/default.aspx?cite=246-924-056>

[Washington State licensure requirements](#) can be found at the Board of Health webpage.

The Clinical Sequence Summary

All students take a full year of broad and general training in the Assessments and Interventions course series. Students may also choose electives when offered, in clinical child psychology, forensic psychology, health psychology and integrated primary care behavioral health and/or neuropsychology. Clinical practicum and pre-internship placements will provide supervised clinical training experiences to enhance skill development in the primary generalist adult psychotherapy area and in optional clinical child, forensic, therapeutic school, neuropsychological and healthcare settings on a case-by-case basis according to student interest and clinical training progress.

Integrated Coursework

Each stage of the clinical training sequence is integrated into the curriculum, most with required coursework, to provide students with forums to discuss their clinical training experiences and receive instructor feedback. The following summarizes how this is done during each of the training years.

- The Year 1 Social Justice Service Practicum is integrated into a 3-course series (PSYC 701 Foundational Clinical Skills; PSYC 702 Social Justice and Cultural Competency I; PSYC 703 Social Justice and Cultural Competency II). Students will discuss their practicum experiences together and receive feedback from their instructor during these courses.
- In Year 2, a series of Professional Seminar courses provide a framework of applied clinical content to support student therapeutic work with clients in the AUS clinic. The first clinical training experience will be the Clinical Practicum completed in the AUS Clinic. These Professional Seminar courses are taken concurrently with the Clinical Practicum and/or an AUS Clinic Pre-Internship placement (for advanced M.A. students who waive the Clinical Practicum). In these seminars, applied clinical topics are presented and discussed by students, case studies and presentations are shared, and the students receive feedback from their instructor. An Assessment Lab course provides coaching and practice opportunities to support the student while beginning to administer Assessment testing batteries for the first time during Year 2.
- For more information on coursework, see the Psy.D. Program Handbook.

Clinical Training Sequence Flowsheets

The Clinical Training Sequence matriculation typically depends upon whether or not the student enters with a Bachelor's degree or a qualified mental health-related Master's degree. Appendix A and Appendix B illustrates the two Clinical Training Sequences using flowsheets.

The Clinical Training Sequence, Year by Year

Year 1. Social Justice Service Practicum. The Social Justice Service practicum is an opportunity for the student to engage with a diverse underserved community that is unfamiliar to the student and provide non-clinical services under supervision. The total Social Justice Practicum requirement is 300 hours, 100 of which must be supervision. It is divided into a 120-hour Service practicum (done during Year 1 consecutively with the PSYC 701-703 series) and a 180-hour Clinical practicum (done during Year 2). Advanced MA-entry students may waive the entire 300-hour Social Justice Service and Clinical Practicum requirement (see Social Justice Service Practicum below) but must complete 80 hours of the Social Justice Service Project since

this activity is central to the mission of Antioch University. Social Justice Service practicum sites will be chosen in collaboration with the course instructor and the DCT.

During the third or fourth quarter of Year 1, each student will meet with the Director of Clinical Training (DCT) to discuss their personal training and career goals.

Year 2. Social Justice Clinical Practicum & optional Pre-Internship quarter. The Clinical Practicum is a 180-hour (120 hours service and 60 hours supervision) experience that spans Fall-Spring quarters and will formally begin the student's clinical training with placement in the Antioch Community Counseling and Psychology Clinic, where the student will provide direct assessment and intervention services to diverse client populations under careful supervision. This practicum must be completed prior to registering for Pre-internship. The Clinical Practicum is usually completed at the end of Spring quarter and some students may elect to continue working in the clinic in an optional Pre-internship Summer quarter.

Pre-internship is a placement that will follow completion of Clinical Practicum. For those MA entry students who qualify for waiver of the Clinical Practicum, their 2nd year will involve an AUS Pre-internship and assignment to the AUS Clinic for their initial clinical training. Though they will earn extra pre-internship hours, they will still be required to do the two outside pre-internship placements for depth and breadth of training in addition to accumulating the necessary training hours to be competitive for internship application.

Year 3. The student will complete their first outside community site pre-internship training placement. This is called Pre-internship I and consists of 450 hour minimum/ 600 hours typical placement at a community based training site (usually a 16 hour/week commitment). The student may take electives in specific areas of interest, including child clinical psychology and others offered as interest and resources permit. Several clinical milestones are scheduled to occur toward the end of Year 3, including:

1. Clinical Competency Examination (CCE)
2. Optional awarding of the non-terminal M.A. degree in Psychology
3. Approval of the dissertation proposal by the Dissertation Chair

It is important that the student plan and be prepared to meet the requirements of these clinical milestones prior to the fall of the fourth year or before the student plans to apply for the Clinical Internship. Students obtain Internship Eligibility status, a particular designation given after completion of these clinical milestones, after meeting the Internship Eligibility Criteria, and eligibility interview with the DCT (see Internship Eligibility below).

Year 4. Pre-Internship II. All students are required to do a second outside site clinical training pre-internship which affords further depth and breadth of training and accumulation of necessary training experience and hours. Students often use the 4th year to make progress on their dissertation, complete any additional required courses and, ideally, complete the dissertation prior to the beginning of the Clinical Internship.

After becoming Internship Eligible, the student may apply to internship sites, which is usually done during the fall of the 4th year. All students are expected to apply through the Association of Predoctoral and Postdoctoral Internship Center (APPIC) internship match program which offers local and national internship sites. The student will work closely with the DCT in defining goals and preparing application to internship sites. DCT mentoring and peer

support is provided through Coach & Prep seminars that occur during the spring and summer months prior to application to internship.

Students who choose to extend their degree completion time to six years may choose to do a third pre-internship training year and apply for clinical internship in the fall of year five.

Year 5. Clinical Internship. The Clinical Internship is an organized 1500-2000-hour, full-time, twelve month (or 20 hour/week, part-time, two year) clinical internship training experience. (Refer to the *Clinical Internship Handbook* for more procedural details.). All students must successfully complete a 1500-2000 hour clinical internship in order to graduate.

***Note:** Students who are matriculating through the program part-time will have a longer matriculation time. Students are expected to complete all AUS Psy.D. program requirements, academic credits, clinical training and dissertation, within 7 years of entering the program. Approval of extensions is contingent on satisfactory progress; such approval becomes less likely with each subsequent year of delay. Students will be dismissed from the program following the annual review of their 10th year.

Policies and Procedures

The following information applies to all practicum and pre-internship sites and should be carefully reviewed by students.

Ethical Practice

It is critical that agencies involved in training students adhere to the highest standards of ethical professional practice, and impart these standards to students in training. In very practical, meaningful ways, pre-internship sites and students should be familiar with the APA (2002) Ethical Principles of Psychologists and Code of Conduct (<http://apa.org/ethics/>) and the laws of the state or province in which the site is located, and are expected to practice in accordance with these (see State and Professional Organizations section).

The student has an ethical responsibility to fulfill contractual commitments unless relieved of them explicitly by the agency or unless the agency has not lived up to its obligations under the contract. If the student has concerns about ethical practice at a placement site they are encouraged to speak with the on-site supervisor to resolve the issue. If there continues to be unresolved concerns, the student should inform their advisor and then contact the DCT immediately about the nature of their concerns. The DCT will work with the student and the advisor to make a plan for satisfactory resolution of the student's concerns. This may include working with the Clinical Director at the placement site to resolve the issue. The student is encouraged to involve their advisor and the DCT early on in this process so that effective planning and collaborative solutions can be implemented.

All clinical placements are a three-way agreement between AUS, the site, and the student, and all approvals for placement and any changes or withdrawal from placement must involve all three entities. The student is responsible to know the clinical training policies and to follow application protocols, obtain approvals from the DCT each training year, turn in the clinical training paperwork in a timely manner, and complete the *Petition for Site Placement Change or Withdrawal form* if there is any requested change to a commitment to a training site for personal, medical, supervisory, or other reasons.

If the rare situation that a student feels the need for immediate action to leave the site or make a change, the student will need to complete a *Petition for Site Placement Change or Withdrawal Form* (available on the Sakai Community Site) and turn it in to the DCT. The DCT will present this petition at a Psy.D. Faculty Program meeting for consideration. After faculty discussion, a recommended approved action will be noted on the form and approved by the Faculty Advisor and the DCT. The DCT will notify the student of the approved action. Please note that in the case of change or withdrawal from Clinical Internship, the additional signatures of the Psy.D. Department Chair will be required. In addition, the DCT will facilitate any required assistance from APPIC for any difficulties with an APPIC internship site. If an unbearable situation exists at a site, the student is encouraged to immediately inform the DCT and take a short leave of absence while discussing the situation and filing this form.

The Director of Clinical Training (DCT) makes the final decision about ending a placement. Any change after acceptance of a clinical training placement site will be reviewed by the DCT with faculty prior to an approved action. Any student who does not follow this

procedure and takes preemptive action to leave a site or a commitment is subject to potential difficulty counting training hours toward program and licensure requirements, faculty review and disciplinary action.

The AUS Psy.D. Program takes the commitment of students to clinical placement sites very seriously. Student adherence to this policy impacts the integrity of training and service provision and has ramifications for the site, the Psy.D. program, and the student's clinical training progression. Students are responsible to know and adhere to these procedures.

Choosing Training Sites

Students will have the opportunity to review updated lists of training sites available at their level of training—yearly updated lists are released in November of each year. Applications for pre-internships are usually accepted by community placement training sites from November-March for start in the following summer or fall (see the Sakai Community Site and emails from the DCT). The students will apply to the sites as instructed on the list with the approval of the DCT if this is noted as necessary. Training site choices are ultimately approved by the student's Faculty Advisor and the DCT (by obtaining signatures on Contracts for Learning and Contract with the Supervisor documents). The student must be familiar with the clinical training guidelines and obtain these approvals to ensure that training experiences progress in complexity with new client populations, and new settings, and roles. The DCT and faculty advisor will work to support each student's personal development, congruent with their career plan.

Most settings serve clients who have been historically marginalized, supporting the AUS social justice mission and goals of fostering social responsibility and advocacy for social change. For example, practicum and pre-internship settings include college counseling centers; public and private schools; university-affiliated clinics providing research, assessment, and therapeutic services for children; group practices; community medical centers; justice system and forensic assessment centers; hospitals; integrated primary care facilities, rehabilitation centers; community clinics; and the AUS Community Counseling and Psychology Clinic.

Supervised Experience Placement and Paid Employment Site

Students are expected to complete their supervised clinical training experiences at agencies other than the one in which they are employed or have been employed in the past. This avoids possible dual relationships with colleagues and potential confusion of roles, as well as increasing the student's breadth of experience.

An exception to this is a community placement site that has a clinical training position that is designated as such and has a paid stipend that is negotiated prior to start. The position must be organized with the intent to meet the clinical training needs of the student, meet all training requirements, and must be approved by the DCT.

On the rare occasion where there is a severe financial hardship, a student may submit a written request to the DCT to petition to complete a portion of the clinical training sequence at their place of employment. The following criteria will be considered by the DCT in determining whether to approve the request:

- The site is a bona fide supervision and training experience that is markedly different in nature, scope, and breadth from the student's routine paid job demands.

- The clinical supervisor(s) will be someone other than a colleague or present work-center supervisor.
- Any portion of the proposed clinical experience be physically located in a different space from the student's job, and
- The experience or training opportunity is unique and cannot be easily obtained elsewhere.

Supervised Experience at the Same Site for More than One Year

It is essential that students be exposed to a variety of training experiences, including varying theoretical perspectives, intervention techniques, populations, supervisors, and different service delivery systems. Thus, it is expected that students will do each of the supervised experience placements at a different agency. However, occasionally certain agencies may be able to provide enough breadth of experience that would allow a student to remain at that agency for a second year.

A student wishing to remain at the same placement site for a second year must request approval to do so from the DCT in writing. In the written request the student must demonstrate that he or she will be engaging in clearly different training activities and be under the supervision of different supervisors during the second year. Examples of what would constitute different training experiences include: working in a different program or component of a large agency, working with a different population, a more complex role with additional or new supervision, and working from a different theoretical approach. In addition to a letter requesting approval, the student must also furnish statements of support for this proposal from his or her adviser and the agency's Director of Training.

At times it may be advisable for a student to receive supervision from the same supervisor for more than one year. In such cases the student must also seek approval in writing from the Director of Clinical Training (DCT). The DCT will discuss the pros and cons of this request and statements of support from the Supervisor and the agency's Director of Training (DCT) will need to be obtained.

Students must obtain DCT approval for the petition PRIOR to starting a second year at any site. New clinical site placement paperwork must be submitted for each training year and must document the increase in complexity of training and approved changes that make the site a viable placement for the second year.

Additional Site Placement Issues

- Compensation: Often students are compensated for the work that they perform while on the supervised experience. Antioch strongly supports the policy of compensating students for supervised experience. This may be in the form of a stipend that is agreed upon prior to the start of the placement, and should be equally distributed over the length of the placement. A percentage of fees arrangement may not be used as the basis for compensation.
- Dual relationship with supervisors: It is unethical for students to receive supervision from persons with whom they relate in some other professional or personal capacity. This includes receiving supervision from a therapist, spouse, close relative, friend, employer (unless it meets the criteria discussed previously) or employee.

Student Responsibility for Documentation

Students in clinical placements work collaboratively with the DCT to collect and maintain the required documentation for each of their training sites (further information in the sections below for each type of placement). These documents include:

- Site Brochures
- Contract with Supervisor
- Contract for Student Learning
- Hours logs
- Formative (quarterly) and Summative (final) Supervisor Evaluations of the Student Trainee
- Student Evaluation of Clinical Training Site (see below).

Each of these documents needs the appropriate signatures. Students should keep a personal copy as well as submit email copies directly to the DCT and cc the Psy.D. Clinical Training Office (graduate assistants to the DCT). Originals may be given to the DCT by submitting in the DCT mail box—however, the student is encouraged to keep an electronic personal copy.

It is the student's responsibility to work collaboratively with the DCT to be sure that all quarterly supervisor evaluations are turned in by the end of the quarter and that all clinical site paperwork (including Brochure/Information sheet and Contracts for Learning and with Supervisor) is completed on time and submitted to the DCT. Students must also have turned in all clinical paperwork for the year in order to successfully pass the Annual Review.

The student will be notified of missing paperwork on a quarterly basis. It is expected that the student will respond to any prompt to collect clinical training paperwork in a timely manner. All required paperwork must be turned in at the times prescribed in this handbook and compliance will be evaluated by the faculty during the yearly Annual Review.

IMPORTANT: All paperwork must be present and in the student's file for the satisfactory passing of the Annual Review.

Supervisor Evaluation of Clinical Performance

Supervisor evaluations will be completed at the end of each quarter by the on-site clinical supervisor and any supplemental supervisor. The clinical supervisor(s) evaluates the student according to the Competency and Learning Elements at the Clinical Practicum, Pre- internship, or Internship training levels as well as any other negotiated Competencies or goals designated by the student and supervisor on the Contract for Learning. Attached to the Formative and Summative Evaluation forms is a *Guide for Supervisors describing the Developmentally Based Expectations for Trainees at Different Training Levels*. The student can use this as a reference and is encouraged to discuss this with the supervisor when completing the Contract for Learning during the first week of the training experience.

Two types of Supervisor Evaluation forms. One forms are used for the different levels of training and it is imperative that the student designate which level of training (Clinical Practicum, Pre-internship) they are in. Non-APPIC and some unaccredited Internship level sites

will utilize the Summative Supervisor Evaluation form designated as Internship level. The two forms include:

1. **Formative:** The *Formative Evaluation* form is used to evaluate whether or not the student is “on track” to meet the competencies that have been contracted to be met during the training experience. There are provisions on the form for suggestions if improvement or remediation is needed, and ample room for additional comments. The student is expected to work collaboratively with the DCT and the clinical supervisor in an effort to make sure that these quarterly evaluations are completed and submitted on time. This evaluation form is to be completed and submitted manually or electronically to the DCT’s office at the end of each quarter of training.
2. **Summative:** The Summative Evaluation is a longer evaluation form that requires rating student performance on a 5 point Likert scale and is to be completed at the end of the training year or the last quarter of the placement. By including a simpler Formative Evaluation for each quarter, and a more detailed Summative Evaluation at the end of the clinical experience, we hope that supervisors will find the forms to be more consistent with the evaluations they are making and the progress of the student. The DCT solicits these evaluations from the clinical supervisors; however, the student is expected to work collaboratively with the DCT and the clinical supervisor in an effort to discuss these evaluations, obtain the appropriate signatures, and ultimately turn them in the DCT for review, tracking, and filing. The Summative Evaluation form is to be completed and submitted manually or electronically to the DCT’s office at the end of the placement year. These forms are available on the Sakai Community Site. The student should always retain a personal copy.

Unsatisfactory progress at a Clinical Training site: If a student is designated as having a level (1) or (2) *Need for Improvement* on the Formative evaluation or achieves less than a level (3) *Meets Expectations* on the Likert rating scale on the Summative evaluation (as rated by a clinical supervisor), the clinical supervisor and the DCT, in collaboration with the student, should detail a mentoring or remedial plan that is specific with clear goals and actions that the student can take to improve performance on the particular competency. The DCT will meet with the student and help to plan supports that can assist the student to be successful in remediating the particular competency or skill. If a student believes that he/she has been unfairly evaluated, the student should meet with the DCT to discuss the situation. The DCT will work with the student to problem-solve and make a plan appropriate to the situation. *Students need to take their clinical training evaluations seriously and are encouraged to notify the DCT immediately if there are concerns about unsatisfactory progress at a clinical training site.*

Student Evaluation of Clinical Training Sites

Students are responsible for completing a *Student Placement Site Evaluation Form* on each site where they complete clinical hours, and sending those to the DCT so that the departmental database is kept up to date. The DCT will review the information and these forms are stored in the DCT office. Information is compiled and used to evaluate the adequacy, strengths, and weaknesses of clinical training sites and supervision to better meet the training needs of students. The sources of information are kept anonymous and information will not be directly released to training sites in a manner that would jeopardize a student’s relationship with site personnel. Instead, trends and overall evaluative ratings will be tracked and the DCT will

make use of this data by giving periodic collective and generalized feedback to sites for site improvement. The information will also be used to make ongoing decisions about continued involvement with clinical training sites. Student feedback is critical to maintain and improve clinical training placement sites.

Locating forms. All forms are located on Sakai/Community Site and the students may access them there. They may be completed electronically or by hand in pen. Please submit hard copies or electronic copies to the DCT (cc Psy.D. Clinical Training Office) for routing, approval, and filing.

Professional Liability and Medical Health Insurance for Students

All students who are training in an approved clinical placement site while enrolled in the Psy.D. Program will be included on Antioch University Seattle's liability insurance policy. This insurance provides professional liability coverage when students are doing supervised experience placement. This policy does not cover the student while engaging in non-school related professional activities. It is recommended that students also purchase the low-cost (\$17 - \$45 per year) student policy available via APA (see <http://www.apa.org/apags/edtrain/stuliains.html>).

The student may obtain information about student liability policies directly from the DCT who keeps brochures on hand for this purpose.

IMPORTANT: As non-paid clinical trainees, students are not covered for injuries at clinical training sites as employees are. It is important that each student has medical health insurance to cover potential mishaps or injuries occurring while training at any training site. Many sites require this. *The Psy.D. program strongly encourages all students to carry their own medical health insurance at all times while matriculating as a student at Antioch University and while doing any practicum, pre-internship, or clinical internship training.* Students are responsible for their own medical and healthcare costs.

Potential Additional Training Site Requirements

Many clinical training placement sites require national criminal background checks prior to accepting a student for placement at the training site. Some sites, particularly those in medical settings, will also require proof of immunization, immunity to certain diseases, or drug screens. Some sites will also require HIV training or additional orientation training requirements. The student will need to be aware of the requirements at each clinical training site and may need to coordinate efforts with the DCT to complete these requirements.

Community Meeting Requirement Policy.

Purpose. Community Meetings take place on Saturdays during the ten week quarter and serve several important purposes including: providing an opportunity for students from different cohorts to gather as a community, and provide lectures from psychologist practitioners, researchers, and entrepreneurs in the community on pragmatic and relevant topics that are often not covered in courses in much detail. Creative and inspiring topics will acquaint the student with research, trends, and community resources. The student will be provided with contacts which may assist with future employment and practice opportunities. In addition, the depth and breadth of exposure to these topics will help the student be more competitive for future internship and employment opportunities.

Schedule. A quarterly schedule of Community Meetings, which include the lectures in addition to

other student or faculty meetings, will be posted by the DCT and Program Associate around the 9th -10th week of each quarter for the following quarter. The schedule will be sent to the students by email.

Requirement. Students in the 1st through 3rd years are required to attend 20 Community Meeting lectures over the academic (Fall, Winter, Spring, Summer) year. During each quarter 5-8 lectures will be provided (those with an asterisk count as a qualified lecture). The student may choose which 20 lectures to attend out of the qualified lectures scheduled. If desired, the student may attend up to 5 Dissertation Defense presentations, in lieu of Community Meetings, and count these toward the 20 required Community Meetings. For the Dissertation Defense to be counted toward this requirement, the student will need to complete a Community Meeting Evaluation Form and list the Dissertation Defense presenter, date, and title in addition to rating the presentation. This form should be turned into the DCT by email or in the DCT mailbox. The entire Dissertation Defense event must be attended (even if over an hour) for the student to count this in lieu of a Community Meeting.

Evaluation. The student is required to list the attended meetings on their CV Addendum, and turn this in with their Annual Review materials. The DCT will provide attendance information and the Advisor will note that a student has Satisfactorily met the Community Meeting 20 lecture requirement in the Annual Review materials. Should the student not meet this requirement successfully, the student will be required to make up the missing Community Meeting lectures during the following year. Starting in the Fall of 2019 for 1st and 2nd year students (and onward), if the student does not meet the requirement over two years, they will receive a “No Pass” for Annual Review. Third year students (Fall 2019) are expected to meet the 2019-20 requirement by the end of the third academic year (as the requirement ends with completion of 3rd year) and will work with the DCT if there are any make up meetings.

Topic requests. Students may make requests and suggestions for future lecture topics by emailing the DCT at any time.

The Social Justice Practicum— Service and Clinical

Overview

The sequence of clinical training starts with the series of first-year foundational 701-703 courses, during which all students will begin a *Social Justice Service Practicum*: an approved placement in an agency, institution, or other setting that challenges the student through exposure to populations from backgrounds significantly different from their own. This practicum, along with the 701-703 courses, provides contact with diverse communities and combines theory and practice as the student develops or refines their communication and counseling skills. It is this integration of social justice, theory, and practice that is the foundation of an Antioch degree.

Reflection on multicultural practice and other clinical competencies will be central to the work of the 701-703 courses.

The *Washington State practicum* requirement is 300 hours, 100 of which must be under supervision, and meets the Washington State requirements for practicum experience toward licensure (WAC 246-924-046). Washington State describes a **practicum** as *applied experience obtained while training for the doctoral degree and must occur over at least two semesters or three quarters*. In this program, The practicum requirement is met by completing a **120-hour Social Justice Service practicum** (done during Year 1 concurrent with the PSYC 701-703 series) **and a 180-hour Social Justice Clinical practicum (done during Year 2)**.

Social Justice Service Practicum

Definition. The Social Justice Practicum (SJSP) is a non-clinical experience that begins in the first year with a 120-hour (80 hours service and 40 hours supervision) Service Practicum where the student engages in service with a diverse community that is unfamiliar to the student. The SJSP is overseen by the instructor of the 701-703 courses and the experience is integrated into the curriculum of these courses, providing a social justice experience that supports the content discussed in the 701-703 courses.

Advanced MA entry students. Students with qualified clinical MA degrees may waive the 300-hour Social Justice Service and Clinical Practicum requirement by taking the *PSYC 798 Practicum: Prior Learning course* and demonstrating equivalent past qualifying experience. However, all master's degree entry students will be required to complete 80 hours of the Social Justice Community Project (done during the 702-703 course series) since this activity is central to the mission of Antioch University.

Description of this project will be included in the syllabus for the 702-703 courses and will be defined by the instructor. *The PSYC 798 Practicum: Prior Learning Course should be taken and successfully completed during the fall of the first year* so that the appropriate evaluation and waiver of credits can be given and to prepare the advanced student for placement during the second year.

Goals. The purposes of this non-clinical Service Practicum are:

1. To expose the student to a population that is socially and ethnically diverse, different from populations that the student is familiar with, and/or groups that are underserved, thereby addressing a core component of the Antioch University social justice mission

2. To facilitate the development of basic counseling skills such as reciprocal relating, learning how to be in a helping relationship, and providing opportunity to practice listening and reflecting skills, self-reflection and observation of self and others.
3. To allow the faculty to observe first year students in a social context and mentor their basic counseling and helping skill development
4. To provide a service to non-profit or qualified organizations that are valuable resources to marginalized and underserved populations.

Choosing a Social Justice Service Practicum/Project Site. The student may choose a site from a list of sites that other Psy.D. students have used in the past or may find a site of particular interest to them in the community and obtain the consent of the course instructor. Note that a list of recently used sites for the service practicum will be provided by the 701-703 instructor and the list is maintained by the DCT. *The student will provide the service between the first and third quarters of the first year of the Psy.D. program and is required to be completed to receive credit for the 703 course.* The student may choose a site that meets the following criteria:

- The site engages the student in service to an underserved, minority, or ethnically and socially different population than that with which the student has worked prior.
- The site is non-profit, or a service organization in need of assistance, which has a structured operation that has an executive or organizational director and a supervisor who is on-site to direct and supervise the student's activities.
- The type of service performed can be varied and can include (but is not limited to) work at domestic violence centers, crisis call centers, homeless shelters and services, administrative assistance to social service agencies, advocacy group work, assistance to schools, health care organization assistance, and donation of time to clothing and food distribution centers, etc.
- No psychotherapy services or psychological assessment and intervention services may be provided, as this is a non-clinical service practicum.

The student may choose a site location convenient to them as long as the site meets the above criteria. If the site is new for a SJSP at AUS, the student will discuss the site with the instructor and, if deemed appropriate, obtain approval by the DCT. The status of the student at a SJSP site is as a volunteer to the organization for the committed time and each site will have its own criteria and paperwork for becoming a volunteer at that site.

The Social Justice Service Practicum Paperwork. All students doing a SJSP will complete the following paperwork for the social justice practicum:

1. Brochure/Information sheet will be written up according to a template that details the address of the site, executive director(s), the services provided at the site, the on-site supervisor, dates of service with a start and stop date, and details the supervised services that the student will be performing. The student may use a site brochure that details this information and simply add a cover sheet with supervisor details and dates, as appropriate. This should be completed and attached to the SJ Service Practicum Placement Agreement and Goals form and turned in to the instructor for approval and to the DCT for approval and filing at the beginning of the practicum. This must be done after the student has chosen the site and before starting at the site.

2. Social Justice Service Practicum Placement Agreement which details general provisions, student's responsibilities, Practicum site responsibilities, the term of the agreement, the on-site supervisor's name and title, the 701-703 faculty supervisor, and the AUS DCT. The student will take this form to the placement site and obtain the on-site supervisor's signature and the 701-703 faculty supervisor's signature. The student will maintain a personal copy and turn the original in to the DCT for approval and filing before start of the SJSP.
3. The student will complete the Goals for Social Justice Service Practicum Placement form collaboratively with the on-site supervisor and then obtain the signatures of the 701-703 faculty supervisor, maintain a personal copy, and turn the original into the DCT for approval and filing.
4. Hours will be logged on the Social Justice Service Practicum Log Sheet that is unique to this particular practicum experience, available on Sakai Community Site. See below for more detailed information.

Supervision for the Social Justice Service Practicum. Supervision for the service practicum will involve two different components:

1. A designated on-site supervisor will oversee the student's work while at the site. The student will contract with the on-site supervisor by using the Social Justice Service Practicum Placement Agreement as listed above. Any hours performed with the supervisor on-site and observing, guiding, or directing can be counted as supervision for the purposes of this non-clinical practicum. The supervisor needs to have the qualifications to administrate the tasks at the non-clinical site and is not a clinical supervisor.
2. Group supervision and supervision discussion will occur in the 701-703 course series by the licensed psychologist faculty supervisor. This course will be discussing working with individual differences, ethics of engagement, and basic communication and professionalization skills, and will provide a forum for student discussion of their practicum experiences and provide feedback to the students. The student is allowed to count hours of classroom discussions/ group supervision, and any individual supervision that occur throughout the 701-703 course series as supervision hours for the SJSP.

Counting and logging of the Social Justice Service Practicum hours. The Service Practicum hours meet the WA State licensure law requirement for practicum and are countable toward the 300 hour practicum requirement for WA State Licensure.

The student will keep a careful log of the Social Justice Service Practicum hours using the Social Justice Practicum Log Sheet specifically designed for this purpose. On this form the student will list the week ending date, the on-site hours of service and supervision, and any didactic or training seminars. Additionally, the student will log any relevant supervisory hours done through the AUS 701-703 courses by the faculty supervisor, which will include supervision discussions, group supervision, and any individual supervision time. The hours are totaled each week at the bottom of the log sheet. The student must obtain the signature of the on-site supervisor to validate any claimed hours of service.

At the end of the 703 course, the student will take the Service Practicum Log Sheet(s) signed by the on-site supervisor, for review by the 701-703 course faculty supervisor, who will

sign the form. This is then taken to the DCT for validation and DCT signature. The DCT then sends the completed logs for recording and filing in the student's advisory file. It is recommended that the student make personal copies of all paperwork.

IMPORTANT: Social Justice Service Practicum hours do not count toward clinical hours for purposes of the APPIC (AAPI) Internship application or any other tally of clinical hours.

Therefore **DO NOT** log these hours onto your clinical logs (i.e. Time2Track). Use only the Social Justice Service Practicum logs provided.

Community Meetings and Introductory Meeting with the DCT. The DCT will visit the 701-703 series courses to instruct students on clinical training policies and answer questions. In addition, the DCT will provide community meeting forums for students to attend at customary Saturday times and will provide ongoing updates to clinical training information. This information can be used by students to gain an understanding of the overall clinical training sequence and updated developments regarding new sites or policies.

Sometime during the third or fourth quarter of the first year, each student should schedule a personal meeting with the Director of Clinical Training (DCT) to discuss training and career goals. This information will then be used to help to draft a personalized plan for future training experiences that are appropriate to meet the particular needs of the student, and that facilitates a good fit with individual training sites.

Supervisor Evaluation of Student Performance for the Social Justice Service Practicum. The AUS faculty supervisor will evaluate the student's performance overall, including placement performance, supervision discussions and required coursework and will include this evaluation in the Narrative Evaluation at the end of the course.

Social Justice Service Practicum Site Evaluation Forms. The student will complete a Site Evaluation Form toward the end of the social justice service practicum (even though the site is not clinical; write N/A to any clinical questions on the form). These will be turned in to the DCT at the completion of the practicum and information will be compiled and utilized to inform the DCT of adequacy of the site for SJSP training and to inform future students of the strengths and weaknesses of the site.

Social Justice Clinical Practicum

Definition

During the second year, the student will formally begin clinical training with placement in the Antioch Community Counseling and Psychology Clinic and will provide direct service to diverse client populations. The student will have the opportunity to provide psychological services under the supervision of a licensed psychologist using observation and videotaping as supervision tools. The Clinical Practicum totals 180 hours (120 hours service and 60 hours of supervision) and occurs concurrently with enrollment in the Professional Seminar. During the Professional Seminar (also called “ProSem”), the student will receive group supervision from a licensed psychologist faculty member who will also be instructing the student on relevant clinical practice information including clinical note documentation, doing intakes, risk assessment, suicidality, and best practices in the provision of psychological services. This coincides with the student’s enrollment in the Interventions course series.

Occasionally, a student may be placed in an appropriate community placement site simultaneously to the AUS clinic or upon completion of at least one quarter of work in the AUS clinic.

Goals

The goals of the Clinical Practicum include:

1. Opportunity to provide supervised clinical work providing direct assessment and intervention services to adult and child clients through the AUS clinic. Supervision will be provided by a faculty member who is a licensed psychologist, and who make use of observation, discussion, and review of videotaped sessions to help the student develop their clinical skills.
2. “Generalist” training including exposure to clients of varied ages and backgrounds.
3. Opportunity for case discussion and processing of learning and practicum experiences with peers and faculty in the simultaneous Professional Seminar
4. Opportunity for the student to obtain videotaping of sessions for use in preparing for the Clinical Oral Examination case presentation.

Waiver of Clinical Practicum for Qualified M.A. entry Students

Those M.A. entry students who enter with a qualified mental health Master’s degree and have satisfactorily completed the PSYC 798 Practicum: Prior Learning course may waive the Clinical Practicum. (Students who receive this waiver may begin the AUS Clinic Pre-internship placement during the 2nd year. The M.A. entry student will be assigned to the AUS clinic for at least one quarter of this placement. Additionally, on a case-by-case basis the student may be placed in an appropriate community placement site simultaneously to the AUS clinic or upon completion of at least one quarter of work in the AUS clinic.

Professional Seminars

The Professional Seminars will provide clinical training support while the student begins an initial Clinical Practicum or Pre-internship (for advanced entry) placement. All students will do their initial training in the AUS Clinic. By initially requiring students to demonstrate their clinical skills in the Antioch Clinic, faculty have the opportunity to observe the student's developing clinical skills and confidently recommend students to outside placement sites. Successful completion of ProSem is required to move on to further clinical placement.

Clinical Practicum Site Assignment and Activities

Initial client load. All students will initially be placed in the AUS clinic and will be expected to see 1-3 clients per week under supervision initially, often growing into a client load of 2-5 toward the Winter and Spring quarters (For qualified M.A. entry students, this placement will be the AUS Clinic Pre-internship).

Upon completion of the 180 hours (120 hours service and 60 hours supervision) and the Pro-semester series (Fall-Spring), the student will be ready to begin their Pre-internship placement. Optional pre-internship hours can be earned by continued work at the AUS clinic through the summer quarter. Refer to the Pre-internship portion of this handbook for more information.

Initial Assessment Assignments. Students must plan on beginning to do assessment batteries in the AUS Clinic during the 2nd year clinical practicum and the initial pre-internship experience. It is expected that the student will complete a **minimum of two assessment batteries with supervision by the end of the clinical practicum training year.** The initial assessment batteries often take a good deal of effort and time to complete and it is best to do these first assessments shortly after completing the assessment course series. Ultimately, **completion of a minimum of five assessment batteries (about 50 hours) is expected by the end of the 3rd training year, prior to internship application.** Many students do more than this at their pre-internship sites. The student will need to make sure that the AUS clinic is notified of their availability for assessments and the student will be assigned an assessment supervisor for each assessment through the clinic.

Assessment Lab course. This 1 credit course is required and will provide ongoing training support, coaching, and practice in administration of assessments and takes place during the entire 2nd year (Fall-Spring quarters).

The Clinical Practicum Paperwork

In addition to an institutional Affiliation Agreement that the DCT will negotiate with the site, or has on file for current sites, the student will complete the following paperwork for the clinical practicum:

1. **Brochure/information sheet:** This form details the address of the site, executive director(s), the services provided at the site, the on-site supervisor, dates of service with a start and stop date, and details the supervised services that the student will be performing. The student may use a site brochure that details this information and simply add a cover sheet with supervisor details and dates, as appropriate (Refer to Brochure template on the Sakai/Clinical Community Site for reference). The Brochure must be completed prior to starting a site placement (if the site is a new site) and within the first

week of starting the Clinical Practicum (if site is an ongoing previously approved site) and must be turned in to the DCT for approval and filing.

2. **Contract for Student Learning:** This contract will list the Competencies and Learning Elements to be mastered, the ways in which the student will perform these competencies at the assigned site, and the methods of evaluation of the student by the clinical supervisor. This must be turned in by the end of the first week of the clinical practicum.
3. **Clinic Privilege Form.** When a student is assigned to a clinical supervisor for AUS Clinic work, the student will complete a *Clinic Privilege Form* and obtain the supervisor's signature before the student begins to meet with clients in the clinic. This form must be *turned into AUS Clinic* personnel with obtained signatures prior to start of the clinical practicum. Check with the AUS Clinic on policies and forms used to *opt in to be assigned an Assessment and to be assigned to an Assessment supervisor*. These are managed by the AUS Clinic and are not turned into the DCT.
4. **The Contract with Supervisor:** This form will be completed by the student and the supervisor, which includes the dates of start/completion, supervisor qualifications, and general range of activities to be supervised. The student and supervisor will negotiate this together and then the student will have their advisor sign. When completed, the document is sent to the DCT for approval and filing. This must be completed within the first week of the placement.

IMPORTANT: CCE videotape session sample. It is recommended that sometime late in the second year or early third year the student request that a videotaped session at the AUS Clinic be saved for use in preparing for the Clinical Competency Examination (CCE) case presentation, as the recordings are routinely discarded after a period of time. Refer to the Antioch Clinic Handbook and policies for instructions on how to reserve this. The student may also choose to obtain video at a later community placement site, with proper permission and consenting during a pre-internship, but this is often very difficult to obtain and it is recommended that students utilize the AUS Clinic to obtain these videotaped samples. Students who have difficulty obtaining agency permission to video/audio tape at their external pre-internship site, should contact the DCT and the CCE Coordinator and request to use audiotaped recordings or find another solution. The program will make every effort to facilitate resolution of this issue to assist the student in obtaining an appropriate recording for use in the CCE.

Supervision for the Social Justice Clinical Practicum

During the second year, the student will enroll in the required Professional Seminar and simultaneously enroll in 801 Supplemental Supervision each quarter.

Professional Seminar. Relevant Clinical topical discussions and group supervision will be provided during the Professional Seminar course. The student will have the opportunity to discuss their clinical experience, present cases, and obtain feedback from the instructor. The student may not meet with clients in the AUS Clinic to do psychotherapy unless they are also enrolled in a Professional Seminar series. ***The student must progress satisfactorily through the Professional Seminar series to continue ongoing clinical training in the AUS Clinic or outside Clinical Practicum Placement.***

801 Supplemental Supervision. The 801 supervision system provides tracking and assignment of supervision to all clinical practicum and pre-internship students in the AUS clinic. One credit of supplemental supervision is registered for during each quarter that the supplemental supervision is needed and it covers 10 hours of supervision with a faculty supplemental supervisor. After registering, assignments to a supplemental supervisor are made by the DCT who will notify the student and supervisor by email two to three weeks prior to the beginning of the quarter in which the supervision will be rendered. The student may request a particular faculty member for clinical supervision. The DCT will work to assign students and supervisors in a manner that best matches the needs and strengths of the student and supervisor. Due to faculty professional leave time and other factors, some students may not be able to be matched with the supervisor of their choice.

If the student continues to work with AUS clients after the Professional Seminar series has ended, the student will need to continue to sign up for PSYC 8010 Supplemental Supervision to receive the necessary supervision for their work.

If a student has a community Clinical Practicum placement, the student may need to sign up for PSYC 8010 Supplemental Supervision to have an AUS faculty licensed psychologist available to provide supplemental supervision. The need for this occurs when an on-site supervisor has a Master's level Mental Health License and/or the psychologist on site does not meet all of the qualifications for a licensed psychologist supervisor or if specialty adjunctive supervision is also needed.

Assessment Supervision. Students are expected to begin administering assessment batteries in the AUS Clinic once they have successfully completed all the Assessment series coursework. The student will need to follow the AUS clinic procedures (see the Clinic Handbook) for being assigned to clients for assessments.

Assessment supervision is assigned in the clinic on a case-by-case basis and supervisors are chosen from a list of available faculty assessment supervisors. Assessment supervisors are different than the 801 supervisor assigned for therapy supervision. Occasionally, in some circumstances, the 801 Supplemental Supervisor may provide supervision for the assessment. This would need to be negotiated directly with the DCT and the Supplemental Supervisor and the AUS Clinic personnel would need to be informed that this is the case.

Supervisor Evaluation of Clinical Performance. The Professional Seminar instructor will complete the AUS Narrative Evaluation at the end of each quarter and will evaluate student performance in the course and in group supervision meetings. In addition, the 801 supervisor will complete quarterly Formative Evaluation Forms to evaluate the students' clinic work covered in individual supervision. At the end of the Professional Seminar series of courses, the supervisor will complete a Summative Evaluation form. These forms can be located on Sakai/Community Site.

Student Evaluation of the Professional Seminar Course and Supervision. At completion of each quarter the student will complete a Student Course Evaluation of the Professional Seminar. In addition, the student will complete a Student Placement Site Evaluation form at the end of the Professional Seminar series (Spring) and evaluate their experiences at the Clinical Practicum training site and with the 801 Clinical Supervisor.

The student is encouraged to speak with their Professional Seminar faculty and DCT if there are any concerns that arise related to the group supervision in the course or the assigned 801 supplemental supervision. The student and the advisor can speak with the DCT of any evolving concerns as necessary. The student may request a change in 801 supplemental supervisor assignment by discussing concerns and making a request to the DCT. The DCT is available to assist the student in resolving any supervision related difficulties and oversees the 801 supplemental supervision assignment process. The student is encouraged to voice concerns to access support and problem-solving assistance to make their clinical training experience effective.

Counting and Logging of the Social Justice Clinical Practicum Hours

As the student is assigned to the AUS Clinic to begin seeing clients and participates in the Professional Seminar, the student will begin to accrue hours which may be counted as clinical hours when totaling hours to meet program requirements and for eventual tally on Clinical Internship applications. The hours accrued in the Clinical Practicum will count as practicum hours toward the 300 hours of the AUS program requirement and the WA State Licensing Law requirement for 300 hours. The supervision ratio for these hours is 1:2 (one hour of supervision per every 2 hours of clinical work). The student must complete a minimum of 180 hours of the Clinical Practicum Hours (120 hours of clinical work and 60 hours of supervision activities). These supervision hours are provided by some Professional Seminar activities and 801 Supplemental Supervision. (Refer to the addendum at the end of this handbook to review WA State licensing requirements for the practicum).

Counting and logging of clinical practicum hours. It is important that the student utilize an organized and effective system to log clinical hours. Students are required to use the tool *Time2Track* (<http://time2track.com>) as an electronic method of logging accrued clinical hours. A clinical training fee is charged each year and covers this service for students at all levels of Psy.D. training. The student will need to renew their account each year and the DCT will send out an email with codes to do this each year. This tool is widely used by doctoral graduate students nationally and will be particularly helpful later in preparing the AAPI application to clinical internship sites. The student is referred to the Time2Track website for additional information. Use of Time2Track by all Psy.D. students facilitates the DCT to access the hours being logged by all students and provides tracking capabilities and aggregate data for the program.

APPIC categories for summarizing and logging practicum experience. APPIC summarizes the following categories of hours which are listed in the book *Internships in Psychology: The APAGS Workbook for Writing Successful Applications and Finding the Right Fit, Third Edition*, by C. Williams-Nickelson, M.J. Prinstein, and W.G. Keilin (2012, APA).

1. **Intervention experience:** Including individual, group, family, and couples therapy; career counseling; school counseling; and other interventions such as intake interviews, substance abuse interventions, consultation and sports psychology.
2. **Psychological assessment experience:** Psychological assessment experience (including test administration and neuropsychological assessment).

3. **Supervision received:** Individual and group supervision done by licensed psychologists and licensed allied mental health professionals, and by advanced graduate students supervised by a licensed psychologist.
4. **Support activities:** Experiences outside of your direct intervention, assessment, and supervision hours that are still focused on the client (also called indirect contact hours and collateral hours) such as chart review, writing notes, consulting with others about cases, video and audio review, assessment interpretation and report writing, didactic training (seminars, grand rounds), etc.

The student will need to keep demographic information describing the diversity of the client populations they have served. These are easily tracked on applications such as Time2Track and are more difficult to track by hand. The student is encouraged to track this information by entering data regularly and staying current with recording their clinical hours so that this task will be much easier.

Calculating and counting hours can be tricky and sometimes you will need to use your judgment about which category to log a clinical hour to. It is strongly recommended that the student refer to the text listed above to provide detailed guidance as to how to count and maintain their hours. *Written and verbal demonstration and instructions on logging hours and the use of Time2Track will be presented in emails and Community Meetings in the fall of every year.*

Pre-Internship

Overview

The Pre-Internship occurs following completion of Clinical Practicum and prior to the Clinical Internship. There are three experiences in the clinical training sequence:

- Pre-Internship (started optionally in summer upon completion of the Clinical Practicum in Year 2); Started in the beginning of second year for M.A. entry (with Practicum: Prior Learning waiver)
- Pre-Internship I and II

Pre-Internship and Washington State Supervision Requirements

The Washington State licensure laws define the Pre-Internship as a clinical training experience that occurs after the 300-hour practicum and prior to the Clinical Internship (WAC 246- 924-053). Washington State is one of a group of states that allow students to accrue and count hours during doctoral clinical training to use toward the required hours for State licensure as a Psychologist. Washington State allows accrual of up to 1500 hours toward the 3300 hour Washington State licensure requirement for psychologists. To do so, there are certain requirements stipulated that need to be met by the placement site which include the type and amount of supervision.

These requirements stipulate that at least 60% of pre-internship experience be direct service delivery, including assessment and intervention; two hours of individual supervision are required for every twenty hours of pre-internship work (a 1:10 ratio of supervision to pre-internship hours); supervision is provided by appropriately credentialed supervisors; at least 75% of supervision must be provided by licensed psychologists; and all students in pre-internship placements receive at least two hours per twenty work hours of “other learning experiences.” Other learning experiences can include didactic and seminar trainings, group supervision, case consultation with professionals about cases, staff meetings, chart review, assessment interpretation and report writing, case management activities, video and audio review of recorded sessions, etc. (Refer to WA State Licensing Law information).

Competencies and Learning Elements for Pre-internship

During the pre-internship, the student will be working to master the Competencies and Learning Elements listed on the Contract for Learning at the expected level for pre-internship trainees—moving from a beginning level to an intermediate level of performance.

Pre-Internship I & II Placements and Elective Courses

The Pre-internship I placement follows the completion of the Clinical Practicum (or AUS Pre-internship year for MA entry students). It is a clinical placement involving direct assessment and intervention services and is completed in an approved community placement. Pre-internship I consists of a 16 hour/wk commitment (minimum of 450 hours, though most require 600-700 hours) and requires 1 hour in 10 to be in face-to-face-supervision with a licensed psychologist (licensed two years or more). The following applies to Pre-internship I placements:

- Students will be considered for community Pre-internship I placements after satisfactory completion of the Clinical Practicum or AUS Clinic Pre-internship for MA entry students. Application for these will be November – February of the 2nd year for start in third year.

- Lists of available sites for Pre-internship placement will be posted on the on Sakai/Community Site with instructions for application. Community Meetings will be held to discuss current sites and provide information about the process. Students should plan to train at two different outside placement sites during their pre-internship years (in addition to AUS Clinic) to be competitive for APPIC internship application.
- After completion of the Clinical Practicum hours, the student will need to take the Clinical Practicum logs, cover sheet, and totals summary sheet to the DCT to verify the completion of the Clinical Practicum. With satisfactory completion of the Clinical Practicum hours, the student may transition to Pre-internship status. The DCT will assist the student in assuring that supervision hours and pre-internship requirements will be met at the selected pre-internship site.

IMPORTANT: Pre-internship requirements are significantly different from Clinical Practicum requirements and it is important that the student consult the DCT and make a plan for transition to a pre-internship training site/status.

Electives and Pre-internship II. Students may take electives such as Child Clinical Psychotherapy, Forensic Psychology, Health Psychology/ Primary Care Behavioral Health and Neuropsychology (as available) and these can help a student to prepare for pre-internship site application. Students should begin a second pre-internship placement based on their interests, and career goals). The Pre-internship II placement is a 16 hour/wk commitment (usually 600-700 hours) of assessment and intervention services, which includes at least a 1:10 ratio of supervision /hours of service).

To develop depth and breadth of training, this second pre-internship site should give the student the opportunity to work with a different client population and perform increased complexity of assessment and intervention activities. The student will consult with the DCT to select an appropriate site for this training year.

Application to pre-internship sites. The student will discuss and clarify their training goals with their Faculty Advisor and in meetings with the DCT. The DCT will work with the student to choose and obtain a pre-internship site and must approve the pre-internship site as appropriate for the student's learning needs and meeting the pre-internship site requirements. Once site approval is in place, Psy.D. students begin accruing these hours through a designated pre-internship.

Pre-internship settings include college counseling centers; public and private schools; university-affiliated clinics providing research, assessment, and therapeutic services for children; group practices; community medical centers; justice system and forensic assessment centers; hospitals; rehabilitation centers; community clinics; integrated primary care behavioral health settings, and the AUS Community Counseling and Psychology Clinic.

Most pre-internship sites start in summer or fall quarter. Some pre-internship sites require application as early as the fall quarter of the year prior to the pre-internship, though many sites will require application in February, March, or April. A list of AUS-affiliated and available pre-internship sites will be maintained on Sakai/Community Site for students to consider, and the Director of Clinical Training will provide ongoing email lists and updates of available sites during fall community meetings. Once approved by the DCT to apply to a site, the DCT will introduce the student to the Training Director at the site via email. Some sites will require direct application by the student on-line. You must have DCT approval to apply for a pre-internship site. You can obtain this by meeting with or emailing the DCT with your request.

Once introduced, the student can follow the instructions for application noted on the site list. Some sites will request recommendation letters or de-identified assessment reports for review. A procedural summary of this process is noted below.

DCT Procedure for Placement in Psy.D. Clinical Practicum and Pre-internship sites:

1. The DCT meets with each student at the end of the first year to determine interests and overall student training goals. Each additional year, the students meet with the DCT at least once per year to discuss their training goals, progress and plan.
2. A list of all practicum and pre-internship sites is posted on the Community Site on Sakai each November and is also discussed in a Community Meeting. All 2nd year students are placed initially in the AUS Clinic. Students who are at the pre-internship level will use the list to select community training sites that they are interested in and qualified for.
3. Students must prepare a personal CV according to the AUS Template and the DCT reviews this. This CV is then used for application to sites. The student informs the DCT as to which sites they would like to apply to.
4. The DCT considers 1) the student's past experience, training, and goals, 2) the student's progress in the program, 3) the student's interests, 4) the site requirements and needs. In considering this information, the DCT makes a determination if application to a particular site is a good fit.
5. If determined a good fit, the DCT introduces the student to the site via email and sends the student's CV. Basically, the DCT screens the students for site application. After the student is introduced, the student and site director may correspond directly.
6. The site will interview and make decisions regarding placement. Some sites are entirely dedicated to AUS Psy.D. students. Other sites consider additional applicants from other local doctoral programs in addition to AUS students.
7. The student and the DCT are informed of the site's decision usually by email.
8. The DCT gives final approval. The student completes a Brochure/Information Sheet, Contract for Learning, and Contract with Supervisor which details the required information and turns this into the DCT. Signatures on these forms by the student, Advisor, DCT, and the site supervisor constitutes approval for the site and establishes a contract with the site for the particular student.
9. Ongoing communication and site monitoring by DCT: There is ongoing communication by email, phone, or in person at a site visit throughout the year so that the DCT can continually monitor the site. The DCT also checks in with students personally or by email to inquire about their experience at the site on a quarterly basis. The DCT makes visits at the Professional Seminar class meetings and checks in with students there as a cohort group, once or twice per year. The Social Justice Service Practicum is monitored by the DCT attending the 701 and 703 courses for a check in and information meeting with students and during the required DCT meeting with each first year student late in the 1st year.
10. Site visits are made when a site is newly negotiated as an Institutional Affiliation Agreement is signed and then every two to three years, or sooner if needed. Institutional Affiliation Agreements are renewed every three years and the DCT contacts the site to renew the agreement and facilitates this process.
11. Problems or changes related to the site: The Practicum/Pre-internship Handbook clearly states the policy that students are to report an emerging ethical issue or difficulty with quality of supervision or training at the site to the DCT. There are procedures for students to request site change or withdrawal or to seek change to the clinical training contracts if necessary.

Procedure for new clinical placement site development. Some students may desire or need to apply to sites that have not been used previously by Antioch students, and/or they may desire to develop a new site for Antioch. To do this effectively, it is best for the student to meet with the DCT to discuss their ideas several months prior to when the student would be interested in starting at the site, giving time for assessing appropriateness and negotiating an affiliation and details with the site. The site would need to meet the requirements of the Psy.D. program clinical training goals and WA State licensure requirements for pre-internship and have the appropriate on-site and/or supplemental supervision arrangements made. Key issues that need to be addressed by the student:

- If a student desires to suggest a new training site possibility, they should review Antioch's requirements for supervised experience at placement sites. They would need to write up a proposal and work collaboratively with the DCT to help develop a viable site.
- Students may look into what possibilities might exist in their locations, such as community mental health centers, general or psychiatric hospitals, college counseling centers, medical schools, and private clinics, and make initial contact to inquire about appropriateness and site interest.
- Once the student has identified an interested site and has contact information, the next step would be that the student discusses their site idea with the Director of Clinical Training (DCT). The DCT will then work with potential site contacts to provide information about their role and what to expect. For example, this includes but is not limited to: regular phone contact with the placement site's Director of Training, the provision of supervised experience placement information to the Director, work to ascertain the goodness of fit between the site and Antioch's needs, offer assistance regarding site development as an Antioch site, develop an Affiliation Agreement with the site, and arrange for a new site visit to take place prior to the student's training period.
- In addition, some placement site Training Directors may want to talk with an Antioch University representative prior to meeting the student, but many wish to meet with the student first to assess the possible match between the site and the student.
- As information develops, the student will develop a Brochure/Information Sheet that will consist of a proposal detailing the manner in which the site will meet the clinical training requirements. The student will submit this to the DCT and the DCT, student, and site Training Director will collaboratively edit it and develop it until it is satisfactory to all involved.

There may be a series of phone calls involving the student, site, and Antioch University before it is decided that a viable placement is possible. The DCT *must* approve any new clinical placement site *prior to* the student accepting a position at this site.

Supervision for Pre-Internship

Because Pre-internship hours are countable toward licensure in WA State, the supervision is carefully stipulated in the WA State Licensure Laws.

- For some community placements, the student may need to sign up for PSYC 8010 Supplemental Supervision to have an AUS faculty licensed psychologist available to provide

supplemental supervision. The need for this occurs when an on-site supervisor has a Master's level Mental Health License and/or the psychologist on site does not meet all of the qualifications for a licensed psychologist supervisor (Refer to WA State licensing requirements for more information).

- A Master's level licensed supervisor (licensed for 5 years or more) may provide up to 25% of the doctoral student's supervision. A licensed psychologist must have been licensed for 2 or more years to provide clinical supervision and must provide at least 75% of the supervision for pre-internship. (Refer to WA State licensing requirements).
- For those students who are placed at a site that meets the pre-internship requirements but does not meet some of the stipulations (as noted above) for supervision, the student may sign up for PSYC 8010 Supplemental Supervision. One credit of supplemental supervision is registered for during each quarter that the supplemental supervision is needed and it covers 10 hours of supervision with the supplemental supervisor. The DCT will work with the student to determine that appropriate supervision is in place.
- Assessment Supervision: Students may administer assessment batteries in the AUS Clinic once they have completed all the Assessment Training Coursework. The student will need to follow the AUS clinic procedures for assignment to clients for assessments. Assessment supervision is assigned in the clinic on a case-by-case basis and supervisors are chosen from a list of available faculty assessment supervisors. These supervisors may be different and additional to the 801 supervisor that a student may be assigned to for psychotherapy supervision. For some students, the 801 Supplemental Supervisor may provide supervision for the assessment. This would need to be negotiated directly with the Supplemental Supervisor and the AUS clinic personnel would need to be informed that this is the case.

Pre-internship I & II Paperwork

IMPORTANT: If the site is a new site, the DCT will negotiate an institutional Affiliation Agreement with the site. The Affiliation Agreement must be initiated by the DCT and will first be approved through the Dean and Provost's office prior to being sent to the placement site for signature. If the site is a previously affiliated site, the DCT will maintain records regarding expiration and updating of the Affiliation Agreements. Students are asked *not to initiate* Affiliation Agreements directly with sites and, instead, to inform the DCT if they need to have an Affiliation Agreement initiated.

The student will complete the following paperwork for all Pre-internship placements:

- Brochure/information sheet: that details the address of the site, executive director(s), the services provided at the site, the on-site supervisor with degree(s) and license information, dates of service with a start and stop date, and details the supervised services that the student will be performing. The student may use a site brochure that details this information and simply add a cover sheet with supervisor details and dates, as appropriate, if there is a well-developed site brochure. Refer to the instruction sheet for the brochure/information sheet. Note that the following must be included: start/stop dates; description of services; stipend information, institutional support information, names of supervisor(s) and frequency of meetings; range of actual activities; any rotations or additional sites that are a part of the Pre-internship placement, and additional learning activities such as regular staff meetings, didactic training, etc. This must be completed

prior to start if it is a new pre-internship site and by the end of the first week if it is an ongoing site.

- **Contract for student learning:** which will document the Clinical Competency goals and Learning Elements to be mastered, the ways in which the student will perform these competencies at the assigned site, and the methods of evaluation of the student by the clinical supervisor. These are completed in collaboration with the clinical supervisor. After obtaining all signatures, the student will send it to the DCT for approval and filing. This must be completed by the end of the first week of start of the pre-internship.
- When a student is assigned to a clinical supervisor for AUS Clinic work, the student will complete a *Clinic Privilege Form* and obtain the supervisor's signature before the student begins to meet with clients in the clinic. This must be completed prior to start of the quarterly work in the AUS clinic.
- **Supervisor contract:** will be made and the student will complete this form, which includes the dates of start/completion, supervisor qualifications, a Supervisor CV (if not an AUS faculty) and general range of activities to be supervised. The student and supervisor will negotiate this together and then the student will have their advisor sign. When completed, the document is sent to the DCT for approval and filing. This must be completed during the first week of starting the pre-internship.
- **Potential training site requirements:** Some community sites will require the student to take required trainings (for example, HIV/AIDS training—7 hours/ required by the State of WA) and may require that the student obtain a WA State Registered Counselor agency-affiliated designation. In addition, background checks and drug screens may be required along with proof of immunization (particularly for healthcare sites). Please be proactive and check with your site placement regarding their requirements.
- **COE videotape request:** The student may need to make arrangements to videotape a session for the Clinical Competency Examination case presentation, if they have not done so already. Permission and consenting will need to be obtained. It is recommended that the student request that a videotaped session at the AUS Clinic be saved for use in preparing for the Clinical Competency Examination case presentation, as the recordings are discarded after a period of time. Refer to the Antioch Clinic Handbook and policies for instructions on how to reserve this. The student may also choose to obtain this at a community placement site, with proper permission and consenting. Students who have difficulty obtaining agency permission to video/audio tape at their external pre-internship site, should contact the DCT and the CCE Coordinator and request to use audiotaped recordings or find another solution. The program will make every effort to facilitate resolution of this issue to assist the student in obtaining an appropriate recording for use in the CCE.

Counting and logging of Pre-internship hours. It is important that the student develop an organized and effective system to log clinical hours. Students are required to use the tool Time2Track (<http://time2track.com>) as an electronic method of logging accrued clinical hours. This tool is widely used by doctoral graduate students nationally and will be particularly helpful later in preparing the AAPI application to clinical internship sites. A clinical training fee is charged each year and covers this service for students at all levels of Psy.D. training. The student will need to renew their account each year and the DCT will send out an email with codes to do

this each year. The student is referred to the Time2Track website for additional information. Use of Time2Track by all Psy.D. students facilitates the DCT to access the hours being logged by all students and provides tracking capabilities and aggregate data for the program.

APPIC categories for Summarizing and logging Practicum experience. APPIC summarizes the following categories of hours which are listed in the book *Internships in Psychology: The APAGS Workbook for Writing Successful Applications and Finding the Right Fit, Third Edition*, by C. Williams-Nickelson, M.J. Prinstein, and W.G. Keilin (2012, APA).

1. **Intervention experience:** Including individual, group, family, and couples therapy; career counseling; school counseling; and other interventions such as intake interviews, substance abuse interventions, consultation and sports psychology.
2. **Psychological assessment experience:** Psychological assessment experience (including test administration and neuropsychological assessment).
3. **Supervision received:** Individual and group supervision done by licensed psychologists and licensed allied mental health professionals and by advanced graduate students supervised by a licensed psychologist. (Note that the AUS Psy.D. Program requirement and the WA State licensure requirements for pre-internship require that supervision must be 1:1 face to face supervision with a psychologist that has been licensed for two years or more. Any group supervision is counted as indirect/support activities for pre-internship).
4. **Support activities:** Experiences outside of your direct intervention, assessment, and supervision hours that are still focused on the client (also called indirect contact hours and collateral hours) such as chart review, writing notes, consulting with others about cases, video and audio review, assessment interpretation and report writing, didactic training (seminars, grand rounds), etc.

The student will need to keep demographic information describing the diversity of the client populations they have served. These are easily tracked on applications such as Time2Track and are more difficult to track by hand. The student is encouraged to track this information by entering data regularly and staying current with recording their clinical hours so that this task will be much easier.

Calculating and counting hours can be tricky and sometimes you will need to use your judgment about which category to log a clinical hour to. It is strongly recommended that the student refer to the text listed above to provide detailed guidance as to how to count and maintain their hours. *Important additional instruction and updates on logging hours and Time2Track usage will be given in a Community Meeting each fall and by emails from the DCT.*

Turning in hours logs at end of each quarter and at the end of each training year. The student is expected to total the hours accumulated using the Time2Track logs (Activity Summary), obtain the supervisor and DCT signature (s) on the Totals Summary Sheet, and turn the log in to the DCT for approval each quarter. After approval, the DCT will send it for recording and filing into the student's advisory file. The student must turn in all clinical training logs and supervisor evaluations quarterly and at the end of every clinical training year. It is the responsibility of the student to turn these in at the designated times and in a timely fashion. Students are strongly encouraged to keep personal copies of all clinical training paperwork.

Note that by the end of the 3rd training year, the full-time student should have completed 300 Social Justice Practicum hours (Service and Clinical) and a minimum of 450 pre-internship

hours (Pre-Internship I). By the end of completion of Pre-internship II, done during the 3rd year, or 4th year for some, (Pre-internship II minimum of 450 hours) the student will have a total of 900 hours of pre-internship, and when added to the 300 hours for Clinical Practicum, will have a total of a minimum of 1200 clinical hours.

Additional Clinical Training Milestones Scheduled for End of 3rd Year

These are program requirements that are *required to be completed by the end of the 3rd year (full-time students) and prior to application to the Clinical Internship*. It is important for the student to keep these in mind as Pre-internship I and II are being completed, as it will be important to pace work so that these clinical milestones are achieved in a timely fashion. Most critical is that these milestones must be completed prior to obtaining Internship Eligibility status, which is necessary to apply to the Clinical Internship—the next major step in Clinical Training.

- **Clinical Competency Examination (CCE):** The student will complete and pass all parts of their comprehensive oral exam prior to their application for Clinical Internship, which usually takes place during the fall of the 4th training year.
- **Dissertation proposal approval:** The student will complete and pass the dissertation proposal approval as designated by their dissertation committee Chair prior to their application for Clinical Internship. This should be completed by the end of the summer quarter, and prior to the fall of the 4th training year. *The 2nd Meeting must be scheduled and completed within the following quarter and prior to the start of clinical internship.*
- **Awarding of the AUS non-terminal M.A. degree in Clinical Psychology (Optional, but recommended):** Having the M.A. degree will help the student to be competitive on their Clinical Internship applications, as many internship sites find it very helpful for the student to have this degree designation at the time of beginning the Clinical Internship.
- **Internship eligibility designation:** The student must be determined to be *Internship Eligible* prior to any application to a Clinical Internship. To do this, the student will need to obtain signatures on a *Verification of Internship Eligibility Form* by their advisor and the DCT. The student will need to schedule an *Internship Eligibility Interview with the DCT* where all criteria for Internship Eligibility will be verified as having been met. Once the DCT's signature is obtained on the completed Internship Eligibility form during the interview, the student will be officially designated as Internship Eligible.

The next section examines the Internship Eligibility Procedure that must be completed before the student can apply for a Clinical Internship. Congratulations for making it this far!

Internship Eligibility Procedure

Clinical Internship Eligibility Process

The final Pre-internship task is to file for Clinical Internship Eligibility, but this can only happen after achieving the required clinical milestones. Internship Eligibility must be achieved prior to submitting a clinical internship application.

The criterion for readiness for application to the Clinical Internship has been recommended by NCSPP, and we adhere strictly to these guidelines. When a student meets these criteria, the student is designated as “*Internship Eligible.*”

The Internship Eligibility verification process involves meeting with the student’s faculty advisor and completing the *Verification of Internship Eligibility Form*, then meeting with the DCT where the student’s clinical training accomplishments are carefully reviewed. The process details are described below. Once the DCT signature is obtained on the completed form, the student will have obtained Internship Eligibility and may apply for Clinical Internship.

Verification of Internship Eligibility Form

Prior to applying for clinical internship, the student must complete and submit a *Verification of Internship Eligibility Form* to their faculty advisor for signature. The following items must be completed and reviewed with the faculty advisor:

- Passed most recent Annual Review with all “in progress” courses remediated.
- Passed the Clinical Competency Examination (all portions of this exam must be satisfactorily completed prior to submitting for verification).
- The Dissertation Committee Chair has formally accepted the dissertation proposal.
- Institutional Review Board approval obtained or IRB board meeting scheduled with actual or estimated date noted.

The form must be completed by the student, but is not finalized until the student’s faculty advisor reviews it and it is verified by the faculty advisor’s signature.

The form cannot be processed until the student meets all of the criteria noted above.

Internship Eligibility Interview with the DCT

After the student obtains a signed *Verification of Internship Eligibility Form*, the next step is to schedule an Internship Eligibility Interview with the DCT and take the *Verification of Internship Eligibility Form* to the DCT, who will review and verify the following:

- Completion of practicum hours (300).
- Minimum of 300 pre-internship hours (of the 900 hour requirement) are logged, supervisors’ signatures obtained, hours are approved to date, and filed.

The student also needs to bring the following items to the Internship Eligibility Interview:

- A list of internship sites that the student would like to apply to with application due dates listed.

- A focused list of professional, clinical, and career goals, personal strengths and growth areas. Goals for the internship year will be discussed.
- An updated curriculum vitae in the format of the CV COE Template available on the *Sakai Community Site*.

The student and DCT may have collected these items in the course of Coach & Prep meetings and will process these together. Once the DCT signature is obtained on the completed Internship Eligibility form, the student will have obtained Internship Eligibility and the documentation of the clinical hours will be sent for recording and added to the student's advisory file.

This is a key milestone. The student will need to complete this process prior to completing the Association of Psychology Postdoctoral and Internship Center's (APPIC) Application for Psychology Internship's (AAPI) Summary of Practicum Experience, as detailed in the *Clinical Internship Handbook*.

Clinical Internship handbook. Once the student has obtained Internship Eligibility, there are a host of procedures and supports for actual application to Clinical Internship. The Clinical Internship Handbook is a companion to this handbook and contains information and details about the internship application process.

Practicum and Pre-internship Handbook Signature Form

By signing below, I attest that I have read the Practicum and Pre-internship Handbook (2019/20).

Signature

Date

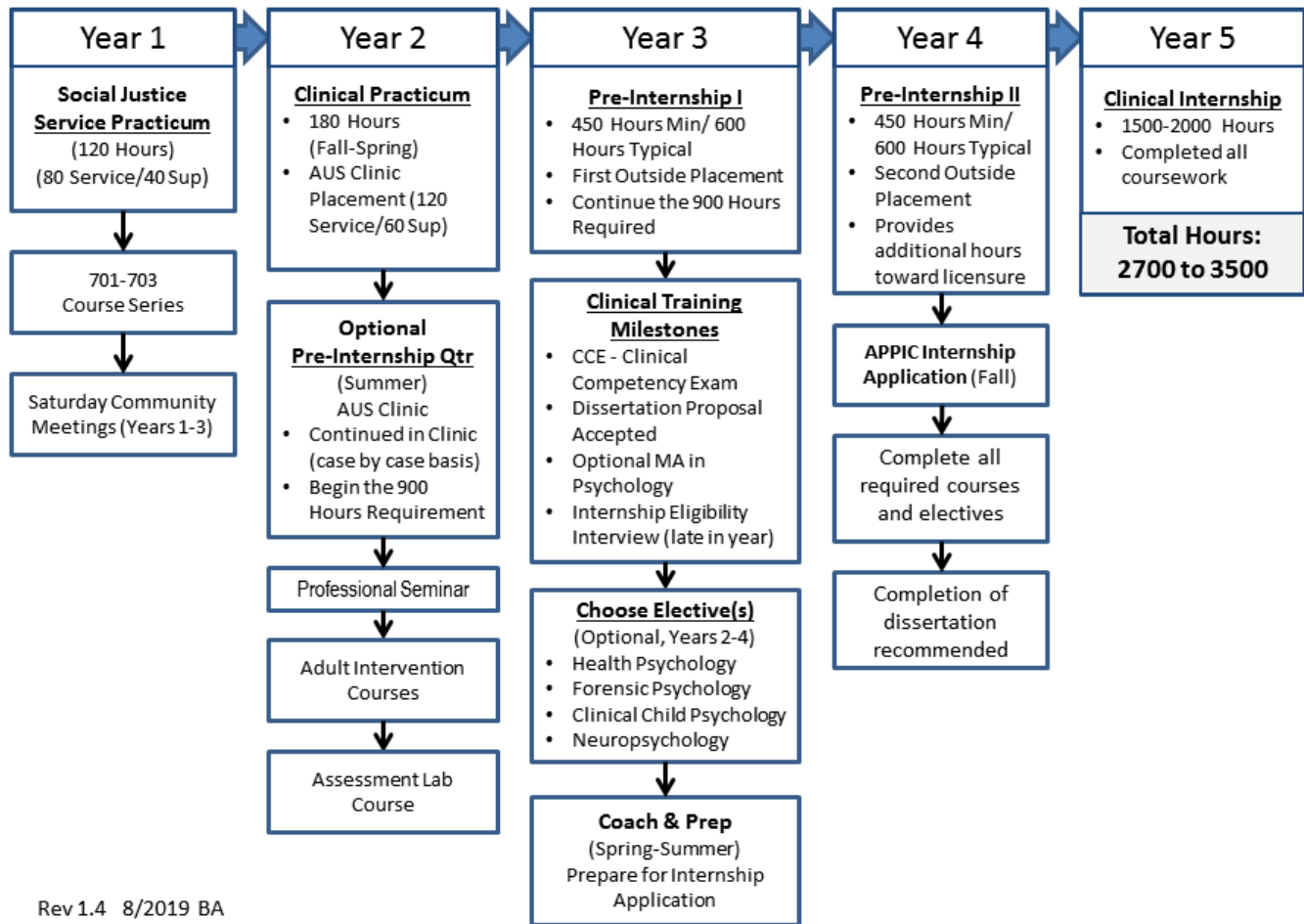
Name (print)

Appendix A

Revised: 8/2019

Psy.D. CLINICAL TRAINING SEQUENCE

BA/BS ENTRY



Rev 1.4 8/2019 BA

AUS Required Hours:

300 + 450 (min) + 450 (min) + 1500-2000 = **Total 2700-3500**
 (600 typical) (600 typical) (2000 typical)

801 Supervision

PSYC 8010: Supplemental Supervised Experience is used in congruence with clinical practicum and some pre-internship hours in order to track and receive the required amount and type of supervision for Washington State Licensure. These credits count as electives. However PSYC 8010 is only required for AUS Clinic work and/or if your community placement site does not have a licensed Psychologist that meets the time requirements for the state.

AUS Psy.D. Program Requirements:

Social Justice Service Practicum may not be counted toward clinical hours for APPIC Internship application. However, they will be counted towards WA state licensure as practicum hours when added to the Clinical Practicum hours done in year 2. 1200 hours (min) are accumulated between the combination of the Social Justice Service and Clinical practicums, AUS Clinic Pre-internship work, and Pre-internships I & II. 2700 hours total are required at the end of the Psy.D. program. Many students accumulate more hours.

Washington State Licensing Requirements (As dictated by current WAC regulations)

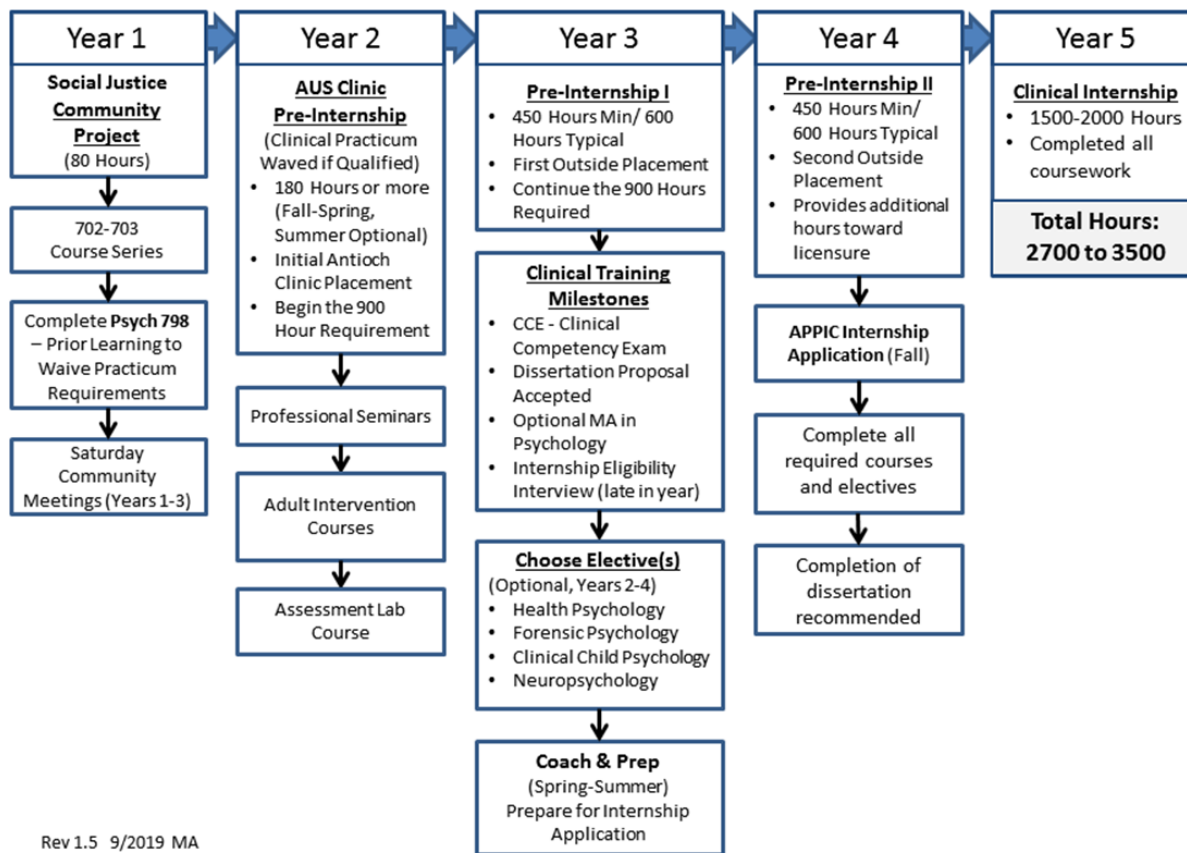
Total of 3300 hours are required for licensure (a combination of the 300 practicum hours; up to 1500 pre-internship hours; 1500+ Psy.D. Clinical Internship hours; and up to 1500 Post-Doc hours).

Appendix B

Revised: 8/2019

Psy.D. CLINICAL TRAINING SEQUENCE (entry with a qualified Master's degree in a mental health field)

MA/MS ENTRY



Rev 1.5 9/2019 MA

AUS Required Hours:

300 (waived) + 180 hours (min)+ 450(min) + 450 (min) + 1500- 2000 = **Total: 2700-3500**
 (600 typical) (600 typical) (2000 typical)

Prior Learning and Waiving Practicum/ 801 Supervision

To waive your practicum you must take PSYC 798: Prior Learning. This should be done during the first year. These 300 Practicum hours (100 of which are supervision) are the only clinical training hours allowed for transfer in the Psy.D. program
 PSYC 8010: Supplemental Supervised Experience is used in congruence with pre-internship hours in order to track and receive the required amount and type of supervision required for Washington State Licensure. These credits count as electives. However, PSYC 8010 is only required for AUS Clinic work and/or if your community placement site does not have a licensed psychologist that meets the state requirements.

AUS Psy.D. Program Requirements

1200 hours (min) are accumulated between the combination of the waived clinical practicum, AUS Clinic Pre-internship and Pre-internships I & II
 2700 hours total are required at the end of the Psy.D. program. Many students accumulate more hours.
 All MA/MS students must participate in 80 hours of Social Justice Community Project during the 1st year. These hours may not be counted toward clinical hours for APPIC Internship application.

Washington State Licensing Requirements (As dictated by current WAC regulations)

Total of 3300 hours required for licensure (a combination of the 300 waived practicum hours; up to 1500 pre-internship hours; 1500+ Psy.D. Clinical Internship hours; and up to 1500 Post-Doc hours.