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1. The program is course heavy in year 1. Students will be starting practicum in the summer following their first year. Students will have completed:
   a. Clinical Interviewing, Abnormal Psychology 1 & 2, Adult & Child Assessment, and Adult & Child Empirically Based Treatments

2. Levels and Intensity of Training: The exact number of face to face direct service hours may vary between placement types but estimates will be specified in the supervision contracts by the supervisor. The remaining hours can include indirect service activities (e.g., case preparation, chart review, report and note writing) and supervision. Supplemental (research or add on) part time opportunities may be available with the approval of the student’s mentor and the training director or their designee.
   a. Pre-practica, Year 1 in CPP (Minimum 40 hours by the end of May in year 1): Complete observation opportunities in a variety of clinics to gain exposure, hours to be monitored by the advisor and maintained in a tracking log by the student.
   b. 1st year of practica, Year 2 in CPP (up to 8 direct hours, ~12 hours/wk; 1 clinical day): Some classes still (mainly Th), enrolled in practicum seminar (group supervision).
   c. 2nd year of practica, Year 3 CPP (up to 16 direct hours, ~20 hours plus/wk; 2 clinical days), more limited courses, enrolled in practicum seminar (group supervision).
   d. 3rd year of practica, Year 4 CPP (up to 16 direct hours, ~20 hours plus/wk; 2 clinical days), very limited courses

3. Factors to consider in practicum training opportunities over time
   a. Practicum slots may be less flexible/more assigned early on in training (1st and 2nd year of practica), with more options for flexibility as students advance.
   b. Blending assessment and treatment activities will be important to ensure students are competitive for internship.
   c. Consider adult versus pediatric focus for each student, depth versus breadth considerations will be important as well as range and variety of experiences.
   d. Neuropsychology interested students should communicate this to the practicum committee and should do an assessment rotation in year 1 and have a plan for gaining neuropsychology specialty skills prior to the start of the neuropsychology practicum. The practicum committee is considering options to help students gain these skills.
   e. Only supervised practicum experiences can be counted in the AAPI practicum hours. This is defined as any supervised clinical experience (post matriculation) that has a practicum contract, receives the required hours per week of supervision, and direct observation at each evaluation point (e.g. not volunteering).
Process for Requesting Additional/Supplemental Practicum Opportunities:

Supplemental research practicum placement

If the student believes that lab or research based activities would count for clinical hours on the AAPI (assessment, diagnostic interview or intervention) then the research mentor, supervisor (if different than research mentor) and student would need to:

1. Create a brief document that describes the benefit to the student, the experience (population, intensity, types of experiences), attestation from the mentor that the student is on track with broader academic progress and the supervision plan for the experience.
2. An additional separate supplemental OHSU Clinical Psychology Program Supervision and Practicum Agreement would be required for this activity and should also contain some of the above information.

These items must be submitted to the Associate Director (or designee) for review and approval. The Associate Director may elect to have the request sent to the practicum committee for feedback and review prior to making a decision. The student and their mentor are encouraged to begin this process as early in the cycle as possible (ideally in fall quarter for the current year). Hours may not be counted until a practicum agreement is in place. People may request a practicum placement to begin in subsequent quarters or years. For example, a student may submit a request in fall 2020 to begin a supplemental lab practicum for 1/1/2021 – 6/30/2021 and a student may wish to submit a simultaneous request in fall 2020 for the following year (e.g., 7/1/2021-6/30/2022).

Supplemental clinical practicum placement

If the student desires to add an additional clinical practicum (supplemental, above minimum expectations) they must reach out to the Associate Director (or designee) who may confer with the practicum committee to identify options. Options form other OHSU sites gathered by the practicum committee may be considered as well as new opportunities that come up outside of the traditional placement window in fall. Depending on timing, they may be asked to wait until the first round of practicum placements are finalized (end of fall quarter). After discussing with their mentor, identifying a placement from the practicum committee and after preliminary explorations with the OHSU supervisor, the student and their supervisor must submit:

1. A brief document that describes why this additional practicum is valuable for the student’s training plans, that the mentor supports their request (on track with other requirements, enough bandwidth etc…), provides more information about the experience (population, intensity, types of experiences) and the general supervision plan.
2. An additional separate supplemental OHSU Clinical Psychology Program Supervision and Practicum Agreement would be required for this activity and must also contain more details about the experience and a detailed supervision plan.

These items must be submitted to the Associate Director (or designee) for review and approval. The Associate Director may elect to have the request sent to the practicum committee for feedback and review prior to making a decision. The student is encouraged to begin this process as early as possible, hours may not be counted until a practicum agreement is in place. People may request a practicum placement to begin in subsequent quarters or years. For example, a student may submit a request in fall 2020 to begin a supplemental clinical practicum for 1/1/2021.
– 6/30/2021 or a student may wish to submit a request in fall 2020 for the following year (e.g., 7/1/2021-6/30/2022).

If supplemental placements are approved by the practicum committee, the appropriateness of this will need to continue to be monitored over time. This approval will be contingent on their performance and sufficient academic progress (which includes their primary clinical placement, research milestones and didactics courses). We encourage students to consult with their mentor around the time commitment and actual activities to ensure it is manageable and continues to be beneficial.
Logistics and Supervision

CPP Practicum placements are to be 1 year long and begin on July 1st (e.g., 7/1/2021-6/30/2022). Evaluations of students by their primary clinical supervisor occurs each quarter (and require direct observation), evaluations of supervisors and the setting by students occur every 6 months.

**Supervision:** The equivalent of 1 hour per week of individual or group supervision is required for each 12-20 hour plus placement. A Licensed Psychologist is required on each supervision contract and is ultimately responsible for the clinical care and the quality of supervision; thus direct observation (*at least once* per quarter: live, audio or video) is required in order to complete quarterly evaluation of student progress. Tiered supervision on site can be provided by Licensed Clinical Social Workers, Licensed Professional Counselor or Licensed Marriage and Family Counselors, psychology doctoral interns or psychology post-doctoral fellows, under the supervision of a psychologist appropriately credentialed for the jurisdiction. However, this must be negotiated with the practicum committee and detailed in the supervision contract. When students are not being supervised weekly on site by a Licensed Psychologist, the program must provide on-going weekly opportunities for students to discuss their clinical experiences with a doctoral level psychologist appropriately credentialed for the jurisdiction in which the program is located (students in this situation would be required to continue to participate in the practicum seminar, even if they were beyond their 3rd year).

**Direct observation:** Per APA IR C-14, direct observation (*at least once* per quarter: live, audio or video) is required in order to complete quarterly evaluation of student progress. Direct observation includes in-person observation (e.g., in-room or one-way mirror observation of direct service contact) or live simultaneous audio-video streaming. Audio or video recordings may also be used, if live observation is not possible. While a minimum of one observation per quarter is required, the CPP strongly encourages supervisors to engage in additional observation to inform supervision and evaluation. The supervisor is responsible for demonstrating that the length and amount of live observation is sufficient to inform practicum student evaluation.

**Supervision modality:** Our program also utilizes a high amount of live supervision. In live supervision for in person services, clinical training experiences occur with the supervisor and the practicum student in the room together providing co-services or with the supervisor observing through a one-way mirror, facilitating intensive direct observation. Supervision and feedback about activities that were just directly observed can occur immediately after the clinical encounter or supervision, preparation and role-play can occur immediately before the service occurs. If the visit occurs virtually, then the supervisor joins the visit through HIPPA-compliant simultaneous audio-visual streaming to either observe or complete co-service (depending on the level of competence of the student). This allows supervisors to observe students’ skills in working directly with clients during telehealth visits and informs supervision discussions. Practicum students must not complete virtual services without their supervisor directly participating in the session at this time. Supervision in the OHSU program is expected to occur live (immediately before or after co-facilitated services with the supervisor) and or/in person; in person supervision may occur on a different day than service provision. It is the supervisor’s responsibility to ensure a minimum of 1 hour of supervision is provided weekly. Students
concerned that they are not receiving this amount of supervision are to immediately bring that concern forward to their supervisor and the CPP Associate Director/Director of Clinical Training.

**Telesupervision:** Per the APA Implementing regulations (C-13): “Definitions: Telesupervision is clinical supervision of psychological services through a synchronous audio and video format where the supervisor is not in the same physical facility as the trainee. In-person supervision is clinical supervision of psychological services where the supervisor is physically in the same room as the trainee.” If live or in person supervision is unable to occur due to special circumstances, a formal process must be followed and permission must be requested for telesupervision. If approved, then supervision can occur occasionally (e.g., less than 50% of the time) through virtual video enhanced technology (telesupervision), with program approval and appropriate documentation in the Supervision Agreement. With approval, supervisors can occasionally utilize OHSU-approved, HIPAA compliant video conferencing technologies to meet with students to discuss their objectives, assignments, and caseload, and to provide feedback. Please see the formal OHSU telesupervision policy for more detail (p. 7).

Adjunctive consultative supervision will also be provided through group supervision through the CPSY 607 Practicum Seminar course (required weekly in CPP year 2 and 3 and available to all practicum students at any time). If the weekly supervision is not provided by a licensed psychologist, the students continue to participate in CPSY 607 which is led by one or more licensed psychologists, in accordance with IR C-12 D, to discuss the training experience and to ensure that the students are receiving a strong, appropriate clinical experience.
OHSU Telesupervision Policy

In normal conditions, as per the APA Commission on Accreditation, telesupervision may not account for more than 50% of the total supervision at a given practicum site and may not be utilized until a student has completed their first intervention practicum experience.

However, in the event of unprecedented global health crises such as the 2020-21 COVID-19 pandemic, expansion of the use of telesupervision has been allowed and may in some cases be the primary form of supervision. **NOTE:** For the 2020 training year in-person supervision has been disrupted due to COVID-19. A “system wide” implementation of telesupervision will occur in accordance with OHSU expectations under modified operations. For this time the program has allowed more flexibility in the use of telesupervision to minimize COVID-19 exposure (e.g., over 50% of supervision may be telesupervision, initial training experiences [practicum] may be supervised via telemethods). [https://www.accreditation.apa.org/covid-19](https://www.accreditation.apa.org/covid-19)

**Rationale for Telesupervision:** The OHSU Clinical Psychology PhD Program places a premium on clinical and professional supervision. Within the practicum experiences, it is the expectation that students will receive supervision by way of in-person supervision. However, the program recognizes that certain special circumstances may arise that create the need to consider alternative routes to delivery of high quality supervision. Because consistent access to and continuity of supervision is foundational to health service psychology training and practice, the program has adopted a Telesupervision Policy to guide provision of supervision under special circumstances. Adherence to APA Standards and Regulations: The doctoral program adheres to the telesupervision requirements issued by the APA Commission on Accreditation (APA CoA) through its Standards of Accreditation for Health Service Psychology [Standard II.B.3.] and corresponding Implementing Regulation [C-28] Notably, this policy does not supersede, reduce or alter supervision requirements in the internship Supervision Policy.

**APA CoA Definitions and Distinctions** 1. Telesupervision: supervision (as defined in the supervision policy) of psychological services through a synchronous audio and video format where the supervisor is not in the same physical location as the trainee. 2. In-Person supervision: supervision of psychological services where the supervisor is physically in the same room as the trainee.

**APA CoA Guidelines and limits:** The doctoral program observes the guidelines and limits set forth by the APA CoA regarding Telesupervision which are as follows: 1. Telesupervision may not account for more than (50%) of the minimum required (as defined in the SoA) supervision. 2. Supervision beyond the minimum number of required hours may utilize methods or modalities that are deemed appropriate by the program.

**Criteria for Telesupervision Usage:** Telesupervision is to be used only in those special circumstances in which a student’s in-person access to a supervisor:

1. Is expected to be prolonged (e.g., 4 weeks or more)
2. and/or is expected to significantly interrupt/eliminate continuity of clinical supervision


3. and/or where specialized clinical supervisory expertise is contingent upon using telesupervision and would otherwise be unavailable to the trainee.

**Privacy/Confidentiality of Clients and Trainees:** Supervisors and supervisees will only conduct supervision that pertains to discussion of confidential client information from settings in which privacy and confidentiality can be assured, whether this be in the office or in a home-based setting. Approved telesupervision of clinical services must be conducted using HIPAA compliant software. OHSU’s videoconferencing platforms, WebEx and Zoom Healthcare, provides end-to-end encryption and meets HIPAA standards. If a different platform is used, the primary supervisor must provide the name of the HIPAA compliant software to be used between the student and supervisor to the Associate Director or Program Director (or designee) at the OHSU Clinical Psychology PhD Program.

**Primary Supervisor Responsibility and Oversight:** In keeping with the standards set forth in the Practicum Guidelines and supervision policies, in cases of approved telesupervision, the primary supervisor for the student, who is a doctoral-level psychologist licensed in the State of service provision maintains overall responsibility for all supervision, including oversight of the telesupervision and integration of in person supervision provided by other mental health professionals.

**Supervisory Relationship Development:** Ideally, in-person meetings between supervisor and supervisee are encouraged (if safety can be reasonably assured in the case of public health emergencies). This can be especially important early on in supervisory relationship development. We also encourage our supervisors to check in regularly on how supervisees are experiencing the telesupervision format. Our supervisors and other clinical staff are readily available via phone or email between supervision sessions for consultation and for informal discussions. Such availability for consultation and socialization as well as our demonstrated interest in the learning and development of our trainees serves to foster development of strong supervisory relationships.

**Technology Requirements and Education:** During their orientation to practicum, trainees will receive telehealth training as part of EPIC onboarding and will have access to IT support through OHSU. Training on being prepared for supervision, be this in-person or via teleconference, occurs by their primary supervisor. Our OHSU staff receive continuing education and training on providing services in a teleconferencing environment. Individual supervisors will review the Telesupervision Policy at the time the standard Supervision Agreement is completed and will note in their supervision plan if they wish for telesupervision to be utilized and will delineate the specifics in that agreement.

**Approval:** Requests for approval for telesupervision must be submitted to the Associate Director or Program Director (or designee) at the OHSU Clinical Psychology PhD Program in writing by the primary supervisor. This request must be accompanied by a rationale for using this methodology and must be supplemented by a clear description of the planned use of in person and telesupervision in the Practicum Agreement that is signed by the student and supervisor and
is submitted for review and approval to the Associate Director or Program Director (or designee) at the OHSU Clinical Psychology PhD Program.

If you are engaging in telesupervision review relevant APA policies:


“Supervisors ensure that policies and procedures are in place for ethical practice of telepsychology between any combination of client/patient, supervisee, and supervisor (APA, 2013b; Fitzgerald, Hunter, Hadjistavropoulos, & Koocher, 2010). Considerations should include services appropriate for distance supervision, confidentiality, and security. Supervisors are knowledgeable about relevant laws specific to technology and supervision, and technology and practice and model ethical practice.”
**Definition of Clinical Practicum**

A clinical practicum (and the hours counted towards internship application) must be:

1. **Program sanctioned**
   a. All practicum placements must be approved by the Associate Program Director (or designee) and have a formal practicum placement agreement completed. Evaluation must be completed at regular intervals.
   b. Practicum placements must be approved before the practicum experience begins; clinical experiences cannot be retrospectively approved as a practicum
   c. Any clinical experience that has not been approved by the doctoral program for practicum is considered to be “other non-practicum clinical experience”. You may list this on your CV and discuss it in your applications, if appropriate, but you may not count it towards your face to face or other clinical hours for internship application on the AAPI.

2. **Clinical**
   a. A practicum experience must involve clinical contact and clinical activities (e.g., psychological assessment/evaluation or treatment). This can occur in a research context, if all other requirements have been met.
   b. Consultation experience (e.g., consultation and liaison service) that involves direct patient contact, either with a patient or someone involved in their treatment (e.g., parent, adult child, teacher) is an acceptable practicum experience
   c. On the AAPI you are asked to provide the number of integrated psychological testing reports you have written for adults and the number written for children and adolescents to gauge the report writing that has been completed primarily by an applicant. The definition of an integrated psychological testing report is a report that includes a review of history, results of an interview and at least two psychological tests from one or more of the following categories: personality measures, intellectual tests, cognitive tests, and neuropsychological tests. In order to count assessment activities under the number of written reports section in AAPI, clinical and research assessments must include conceptualization and report writing.

3. **Supervised**
   a. All practicum experience must involve case level supervision
      a. Group therapy experience must involve a discussion/case conceptualization of specific group members, in addition to group process
      b. Assessments must be reviewed individually, not as a mean of scores
   b. At least one-hour per week of direct, individual or group clinical supervision from a clinical psychologist licensed in the state in which the services are conducted is required.
## Proposed Timeline for Practicum Committee Activities

### Summer

**Current:** Practicum placements begin July 1st

- **Mid-June:** Share the 609 Practicum syllabus and 607 Practicum Seminar syllabus with all students and active supervisors at the beginning of practicum.
- **Mid August:** Email students and supervisors that will need evaluations by early September.
- Collect end of quarter evaluations for the current practicum students, enter grades by end of summer term: *CPP Supervisor Evaluation of Trainee & CPP Clinical Training Hours Log (Time2Track)*

**Future year**

- **June:**
  - Collect all possible practicum opportunities for next year (day of week and times offered, type of activities, population, supervisor, mode of supervision, student level possible (for first year practicum placements or advanced practicum slots). Confirm supervisor comfort with SON DNP students.
  - Confirm number of students who will need spots next year (including SON students who plan to take clinical series courses this year)
- **July:** Practicum committee will finalize practicum slots to be offered for the next year.
- **August:** Collect clinical observation opportunities for the first year students (OHSU Peds, OHSU Psychiatry and VA).

### Fall:

**Current**

- **Mid-November:** Email students and supervisors that will need evaluations by mid-December.
- Gather mid-year evaluations for the current practicum students, enter grades by end of fall term: *CPP Supervisor Evaluation of Trainee, CPP Trainee Evaluation of Supervisor, CPP Trainee Evaluation of Practicum Site Placement, CPP Clinical Training Hours Log (Time2Track)*

**Future**

- As part of orientation, start conversations about internship in first quarter at OHSU, meet with Associate Director/ Program Director about goals/plans/possibilities and tracking of hours.

**October 1:**

- Practicum committee will share general information about observational opportunities for year 1 students and encourage students to begin connecting with faculty to shadow.
- Practicum committee will share general information about practicum training opportunities with the students, and anticipated practicum placement slots for the next year.

October 15th: Students meet with mentor and then send information about their interests to the practicum committee. Students must complete the Competence Self-Assessment form and submit to practicum committee. This includes their interests in scope of activities (assessment versus treatment), populations (children versus adults), specific practicum settings and training goals for upcoming year and well as long term training goals.

November 15th: The Associate Director/ Program Director or designee sets a proposed plan for specific practicum slots and students, this is approved by the practicum committee. This will be shared with students and supervisors so they can conduct interviews and consent to the proposed plan.

December 15th: Practicum Contracts must be completed by the supervisor and the student, with signatures obtained by 12/15 to finalize CPP practicum slots that will start July 1st of the next year.

Winter:

Current

☐ Early January: create mini summary of clinical progress for each student to present at mid-year annual review in January at faculty meeting
☐Mid-February: Email students and supervisors that will need evaluations by mid-March.
☐Gather end of quarter evaluations for the current practicum students, enter grades by end of winter quarter: CPP Supervisor Evaluation of Trainee & CPP Clinical Training Hours Log (Time2Track)

Future

January: Onboarding for practica begins at OHSU and continues for the VA (if not already completed)

Spring

Current: Practicum placements end June 30th

☐April: notify 1st year students to submit documentation of 40 hours observation, due end May
☐ Mid-May Email students and supervisors that will need evaluations by mid-June.
☐Gather final evaluations for the current practicum students: CPP Supervisor Evaluation of Trainee, CPP Trainee Evaluation of Supervisor, CPP Trainee Evaluation of Practicum Site Placement, CPP Clinical Training Hours Log (Time2Track)
☐Create clinical summary for each student to report at Annual review meeting end of June

Future
MAY: Email overview of practicum requests to ALL possible practicum supervisors (OHSU Peds, OHSU Psychiatry, VA). Enquire regarding interest in hosting practicum placements for CPP students for next year (e.g. 7/1/2021 - 6/30/2022).

Get all new students in process to onboard at the VA to cover their whole projected time in the program.

Practicum committee requests that supervisors submit practicum training opportunities (from OHSU and VA) for the coming year: observation opportunities, first year practicum placements and advanced practicum slots.

Practicum onboarding continues and orientations with supervisors occur for July 1st start date.
Practicum rotations will be selected to provide appropriate experience to deepen each student’s strengths as well as to provide scaffolding from a supervisor to allow for continued growth. Practicum placements will be made with consideration to a student’s current level of skill, previous courses, the demands of the practicum site and student goals and clinical trajectories.

Many of our practicum experiences will allow for high levels of live supervision which will facilitate the learning of our students and allow us to customize the experience to their training level and skillsets. This may include progression from watching a supervisor administer a test or conduct a therapy session to co-leading activities to the independent leading of an activity by the practicum student.

In a similar way, practicum settings will be selected that provide sequentially increased demands and complexity such that our more advanced students will be participating in our more independent training opportunities, in multifaceted settings or with more complex patient populations.

Clinical Psychology PhD students will be prioritized for our internal OHSU/VA practicum slots above trainees from other programs. We will facilitate training opportunities with our affiliated faculty at OHSU and VA settings.

We will track when individuals were unable to obtain their preference and will give more weight to their requests for the same site or similar training opportunities in ensuring years.

At this time, we would ideally like to keep practicum placements in house through OHSU faculty given the health and pediatric psychology foci of the CPP program. If students are interested in the development of additional practicum placements that do not exist and have not already been gathered and approved by the practicum committee, they will need to bring a proposal and rational and additional information to the Associate Director, Program Director (or designee) and the practicum committee for further exploration. Coordinating to set up new placements at OHSU and VA systems must involve the CPP Associate Director, Program Director (or designee) and may be more feasible. Please note that this process may take several years if the student wishes to explore options outside of the OHSU system due to OHSU interfacing.
Clinical Psychology PhD Student COMPETENCE SELF-ASSESSMENT

Name__________________________________
Date___________________________________

Please rate your competency (experience with) the following:

**Self-ASSESSMENT**

<table>
<thead>
<tr>
<th>Clinical interviewing and diagnostic interview (ex: SCID, diagnostic intakes)</th>
<th>Lots</th>
<th>Some</th>
<th>Little</th>
<th>Never Used</th>
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<tbody>
<tr>
<td>Standardized IQ/ Developmental Tests (Ex: WAIS-IV, WISC-V)</td>
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<tr>
<td>Checklists/Questionnaires (Ex: CBCL, BASC, Vineland)</td>
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<tr>
<td>Neuropsychological (Ex: WRAML2, DKEFS, academic)</td>
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<tr>
<td>Other</td>
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</table>

If yes, provide BRIEF bullet points summarizing previous experience:

**TREATMENT AND INTERVENTION**

<table>
<thead>
<tr>
<th>Behavior modification</th>
<th>Lots</th>
<th>Some</th>
<th>Little</th>
<th>Never Used</th>
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<tbody>
<tr>
<td>Cognitive restructuring</td>
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<td>Family therapy</td>
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<td>Systematic desensitization</td>
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<td>Behavioral parent training</td>
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<td>Relaxation training</td>
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<tr>
<td>Modeling/role playing</td>
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<tr>
<td>Other</td>
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</table>

If yes, provide BRIEF bullet points summarizing previous experience:

**LIST Presenting problems or patient groups you have previously had experience with** (ex: PTSD, autism, OCD), provide BRIEF bullet points summarizing previous experience:
### POPULATIONS

<table>
<thead>
<tr>
<th>POPULATION</th>
<th>Lots</th>
<th>Some</th>
<th>Little</th>
<th>Never Seen</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infants &amp; toddlers (0-2)</td>
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<td></td>
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<tr>
<td>Young children (2-5)</td>
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<tr>
<td>School aged children (6-12)</td>
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<tr>
<td>Adolescents</td>
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<tr>
<td>Adults</td>
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<tr>
<td>Families</td>
<td></td>
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<td>Medically complex patients</td>
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<tr>
<td>Diverse patients: Culturally, linguistically, LGBTQI</td>
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<tr>
<td>Other</td>
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</table>

### Please list the dates and the CPP practicum placement(s) are you in now or have previously completed: (N/A for first years)

- 

### List your top 10 practicum placements for next year, rank by preference: (see shared list)

1. 

2. 

3. 

4. 

5. 

6. 

7. 

8. 

9. 

10. 

### General Training goals and placement considerations
1. In general, which populations do you want more exposure to (e.g., age, diagnoses, etc…)?

2. What types of experiences are you most interested in gaining or refining this next year (e.g., cognitive assessment, treatment, interviewing)?

3. Your future plans (lifespan vs. child vs. adult focus, assessment vs. treatment focus, note if you have neuropsychology assessment interest, clinical setting you wish to work in, and research clinical interests/populations)?

4. Can you travel to a non-Portland location, if needed (e.g., Vancouver, Beaverton)?

5. Any days or half days that you are absolutely unavailable to attend practicum next year?

*Discuss with your mentor and email this back to Dr. Duvall: duvall@ohsu.edu and ATTACH YOUR CV
OHSU Clinical Psychology Program Supervision and Practicum Agreement

Student Name: XXX
Institution: OHSU Clinical Psychology PhD Program

Practicum Site: XXX

Practicum Site Supervisor: XXX, Ph.D., XXX Professor (License #XXX)

Practicum Supervisor Email and Phone: XXX@XXX.XX (503) XXX-XXX

Dates of Practicum: Summer July 1st 20XX-Summer June 30th 20XX, Clinic dates and times: XXX edit this, for example: Tuesdays 8am-5pm; first day in clinic will be: Tuesday July 2nd 2019

The start and end dates provided above have been agreed upon by the supervisor and student and approved by the Associate Director, Program Director, or their designee. Extended end dates may be considered. Exceptions for earlier end dates are made only in the following cases: 1) the student must leave early for internship and the revised endings dates must be no more than two weeks prior to the internship start date, 2) the site is time limited, or 3) there is an unforeseen emergency. Any change in the start or end date made after this agreement has been signed must be approved by the supervisor and the Associate Director, Program Director, or their designee, and a new agreement will be signed, this may have implications for student evaluation and hour accrual.

Student agrees to do the following during each academic term for which this agreement applies:

- Training Plan: Roles and expectations of the supervisee and supervisee goals and tasks
  - CUSTOMIZE TO SPECIFIC PRACTICUM PLACEMENT XXX. Example: This is a 16 hour per week placement. The student is expected to be in clinic on XXX(days) between the hours of XXX and XXX (Specify hours in clinic). It is anticipated that the student will complete between XXX and XXX direct clinical hours each week. Clinical experiences in this practicum include XXX diagnostic interviewing, cognitive testing, training, and mental health assessment as part of an interdisciplinary team (XX, XX, XX). Student training goals for this placement include competence in administration of common cognitive assessments in children (WISC-V, SB-5), exposure to autism specific assessment instruments (ADOS-2) as well as integrated report writing. Expectations will also be listed for supervisee preparation for supervision sessions (e.g., video review, case notes, and agenda preparation).

- Participate in a minimum of 1 hour of supervision per week with the site supervisor (for part time placements this will be prorated).

- Trainee is expected to attend all scheduled clinical activities and to complete required tasks on an agreed-upon schedule.
  - CUSTOMIZE TO SPECIFIC PRACTICUM PLACEMENT XXX (add details of expected products and timing here). Example: An assessment report will be written for each assessment and a complete draft will be due one week after the assessment to the supervisor.
• Trainee is to abide by the current APA Ethical Principles and Code of Conduct, pertinent laws and pertinent policies and regulations of the practicum site, and to behave in a professional and ethical manner in all practicum activities, including compliance with all record-keeping expectations. The student will inform the supervisor of clinical risk situations immediately. In keeping with these ethical guidelines, the supervisee will disclose any relevant personal factors, worldviews or situations that would be expected to impact their clinical training.

• Tracking forms
  o Review the completed CPP Supervisor Evaluation of Trainee form quarterly with your supervisor.
  o Complete the CPP Trainee Evaluation of Supervisor form mid-year and at the end of the year.
  o Complete hours tracking and hours approval each quarter (through Time2Track or other metric)
  o At the end of the training year complete a CPP Trainee Evaluation of Practicum Site form.

• Complete all required hours tracking and evaluations and submit copies of the above to the instructor of record for CPSY 609 (Associate Director, or designee). Failure to provide the required materials and evaluations by the end of the quarter will result in an ‘Incomplete’ for the class. If you turn in materials late, attach a note indicating the term for which you received the “I”. If materials are not submitted within 2 months of the deadline this will convert to a not passing grade.

• Register for CPSY 609 each term during the time frame of the practicum training on a pass/fail basis.
• Register for CPSY 607 each term during the time frame of the practicum training in year 2 and 3 of the program.
• If you are in year 4 or greater and you are not being supervised on site by doctoral level psychologists, you must register for CPSY 607 each term during the time frame of the practicum training.
• Registering for CPSY 607 this year? YES___ NO ___
• Review and agree to abide by the practicum training requirements in the CPP Practicum Guidelines and CPP Student Guidelines.
• Read all readings and materials as assigned by site supervisor.
• Students will be expected to train at their sites during academic breaks, such as winter or spring break, unless agreed upon otherwise with their supervisor (and noted below). Absences will be arranged in advance and unscheduled absences will be communicated to the site and supervisors as early as possible and in accord with the site’s policies. Failure to comply may impact the grade.
• Anticipated Time off plans: The supervisor and student will detail out anticipated leaves, vacation and absences here. Supervisors will communicate clearly the plans for when they will be out on leave (e.g., coverage with another supervisor, cancellation of clinic etc…). Per the OHSU graduate student policy, students have up to 20 days (4 “weeks”) of combined sick and vacation leave per year. This will be prorated for practicum activities (e.g., if practicum student is in clinic one clinical day per week, they may request up to 4 clinic days off throughout the year for vacation and/or illness)
Supervisor agrees to complete the following during each academic term for which this agreement applies:

- Review and agree to abide by the practicum training requirements in the CPP Practicum Guidelines and CPP Student Guidelines.
- Provide a minimum of 1 hour per week (prorated for part time placements) of face-to-face individual or group supervision for each placement. This may include live supervision time or occur during the clinic day and/or on a separate day. Per OAR 858-010-0012 (Practicum), Supervision must include the following:
  1. Discussion of services provided by the student;
  2. Selection of service plan for and review of each case or unit of the student;
  3. Discussion of and instruction in theoretical concepts underlying the case;
  4. Discussion of the management of professional practice and other administrative or business issues;
  5. Evaluation of the supervisory process by the student and the supervisor;
  6. Discussion of coordination of services among the professionals involved in the particular cases or units;
  7. Discussion of relevant state laws and rules;
  8. Discussion of ethical principles including how they apply to the case;
  9. Review of standards for providers of psychological services; and
  10. Discussion of reading materials relevant to cases, ethical issues and the supervisory process.

- Provide adequate orientation and supervision to acquaint the trainee with standards of conduct and applicable policies and regulations as well as instruction and supervision regarding current APA Ethical Principles and Code of Conduct and pertinent laws as they apply at the site. Specifically, the supervisor will review with the student applicable legal and ethical parameters and compliance, such as informed consent, multiple relationships, limits of confidentiality, duty to protect and warn, and emergent situation procedures. Processes for ethical problem-solving in the case of ethical dilemmas (e.g., boundaries, multiple relationships) will also be clearly conveyed.
- A Licensed Psychologist is ultimately responsible for the clinical care and the quality of supervision as well as gatekeeping for the profession.
- Direct observation (at least once per quarter: live, audio or video) is required in order to complete quarterly evaluation of student progress (see APA Implementing Regulation IR C-14D).
According to CPP requirements and guidelines, complete a formal quarterly evaluation of the student and review this with the student prior to submission to the program before the end of the grading period for each quarter.

- Review and approve clinical hours tracking each quarter (through Time2Track or other metric)
- Provide information to the Associate Director/Program Director, or designee, as soon as possible if the trainee is not meeting expectations.
- Contact the Associate Director/Program Director of the Clinical Psychology Program, or designee, as soon as possible if any ethical or professional concerns arise involving the practicum student. This will trigger a consideration as to whether a remediation plan is appropriate, as outlined in the CPP Student Guidelines.

Supervision Plan: Content, method, and context of supervision—logistics, roles, and processes, frequency, and with whom. Who is on site? How will direct observation occur? If applicable, please note any accommodations needed for disabilities. Tiered supervision on site can be provided by doctoral interns or post-doctoral fellows in psychology, under the supervision of a psychologist appropriately licensed for the jurisdiction, but this situation must be explicitly communicated to the program beforehand and approved by the training director or designee. Please include aspects specific to the telesupervision policy if this modality will be used. Special permission will need to be granted for this and only in extenuating circumstances.

XXX CUSTOMIZE TO SPECIFIC PRACTICUM PLACEMENT.

OHSU Clinical Psychology Program, Doctoral Student

______________________________ sign __________ Date

________________________________________________ print name

Practicum Site Supervisor name, title, degree

______________________________ sign __________ Date

________________________________________________ print name

OHSU Clinical Psychology Program, Associate Director or Program Director

______________________________ sign __________ Date

________________________________________________ print name

FINAL VERSION_ 4.2021 APPROVED BY FACULTY
Course Title
CPSY 609 – Psychology Clinical Practicum – (variable credits) Summer 20XX – Spring 20XX

Course Description
Description
Practicum training is designed to develop a foundation of clinical skills and professional competence with diverse client problems and populations, and to prepare for more substantial responsibilities required in the internship. Practicum is a prerequisite to internship. Practicum sites should be service settings with training as one of their major functions. Psychological services in the settings should conform to all relevant APA standards and guidelines and state and federal guidelines and laws. The student's development of clinical skills and professional competence is evaluated and documented by the training site. Students are to continually enroll in this course while they are engaging in practicum activities.

Requisites
- Admitted to the Clinical Psychology PhD Program or have special permission from the instructor.
- Completion of Clinical Psychology PhD Program Practicum Agreement for each training site.
- Co-requisite:
  - CPSY 607 – Psychology Practicum Seminar – (1 credit), if in first or second year of practicum or if direct supervision is not with a licensed psychologist

Format
Individual and/or group supervision, didactic trainings, direct client contact (i.e., therapy, assessment, consultation, and/or outreach), recordkeeping, and case management.

Contact Information
CPP Instructor of Record
Susanne Duvall, PhD
Associate Director of Clinical Training
duvall@ohsu.edu
CDRC 2115M
503-494-2269

Start & End Dates
Students must register for CPSY 609 continually, for four (4) consecutive quarters (Summer – Spring) in years 2 – 4 of the PhD program, even if the training begins or ends at times that do not entirely coincide with the OHSU academic calendar. Students who stay at OHSU for a 5th year
before internship are also expected to complete practicum to make their applications for internship more competitive.

Students must abide by the start and end dates agreed upon in the Clinical Psychology PhD Program Practicum Agreement in order to receive credit for the placement, and to count the hours toward clinical training. Students are expected to start placements on July 1st and continue until June 30th each year, unless outlined otherwise.

General guidelines for hourly participation are listed below. It is understood that students should attempt to maximize their clinical hours (especially face to face) to be most competitive for internship, but that hours may vary due to situations outside of their control, thus the following are recommendations.

**Weekly Hours: guidelines for practicum**
Year 2: up to 8 direct hours, ~12 hours/wk; 1 clinical day
Years 3 – 4: up to 16 direct hours, ~20 hours/wk; 1.5-2 clinical days

**Total Hours (calculated based on 48-week years)**
Year 2: approximately 576 hr/year
Years 3 – 4: approximately 768 hr/year

A student may not withdraw from an approved and accepted practicum site early unless there are exceptional circumstances and the student has approval from the OHSU Program Director or the Associate Director and the practicum site supervisor. Unapproved withdrawal prior to the start of a training experience or early withdrawal without approval prior to the established end date is an issue of professional concern and will be considered in a student’s evaluation. It may result in not passing the placement. If a student withdraws early from a site with approval and all required evaluations and documentation is completed, then they may count these hours. If a student withdraws early from a site with approval but the supervisor feels unable to complete an exit evaluation as the student will have not completed a full quarter of training, the hours cannot be counted towards doctoral practicum training hours on the internship application, but may be counted as volunteer hours.

**Exceptions for students applying for doctoral internship:** Internship start dates will not be known until winter or early spring. If the previously agreed-upon end date is after the date a doctoral internship starts, the student may make a formal request to leave a site early. Revised endings dates should generally be no more than two weeks prior to the internship start date. The student must first contact the OHSU Associate Director or Program Director (or designee); if they approve, the student must then discuss the requested change with the site supervisor.

**Course Goals**
Practicum training should facilitate development of a broad general base of clinical psychology capacities, including the following:
1) understanding of and commitment to professional and social responsibility as defined by the ethical codes of the American Psychological Association and the Association of State and Provincial Psychology Boards
2) capability to conceptualize human problems and potentials
3) knowledge of the full range of human variability and incorporation of that knowledge in one's clinical service
4) awareness of one's own personality, beliefs and biases and of one's impact upon others in professional interaction
5) skill in relevant interpersonal interactions and clinical service (e.g., such as systematic observation of behavior, interviewing, psychological testing, psychotherapy, counseling, and consultation)
6) critical judgment with respect to professional relationships and ethical and clinical functioning

Course Outcomes

Upon completion, training should fulfill the following requirements:
1. For every 8 - 20 hours of training, at least 1 hour per week of individual* supervision (or a comparable amount of supervisory attention in group* supervision) under the direction of a licensed psychologist holding a doctoral degree. Supervision on site can be provided by doctoral interns or post-doctoral fellows in psychology, under the supervision of a psychologist appropriately credentialed for the jurisdiction; however, this must be negotiated with the practicum committee and detailed in the supervision contract. Additional direct supervision by other appropriate professionals is provided as needed.

Adjunctive consultative supervision will also be provided through group supervision through CPSY 607 (Practicum Seminar); required weekly in years 2 – 3 of the PhD program (1st and 2nd year of practica and available to all practicum students). This course is supervised by a licensed psychologist, please see the syllabus for CPSY 607 for additional information regarding format and scope of this supervision.

If you are in year 4 or greater and you are not being supervised on site by doctoral level psychologists (e.g., supervised on site by LCSW), you must register for CPSY 607 each term during the time frame of the practicum training. Students in this situation would be required to continue to participate in the practicum seminar.

*As defined by APPIC:

“**Individual supervision** is defined as regularly scheduled, one-on-one, **face-to-face** supervision with the specific intent of overseeing the psychological services rendered by the supervisee.”

“**Group supervision** is defined as regularly scheduled, **face-to-face** supervision with multiple supervisees, with the specific intent of overseeing the psychological services rendered by the supervisees.”

2. Recommended experiences and activities should include one or more of the following:
   - assessment (clinical interviewing, cognitive, IQ, attention and neuropsychological test administration)
   - intervention (individual, couple/family, group, psychoeducation, and/or program or community intervention);
-training in other competencies (e.g., psychoeducation, outreach, consultation, program development and evaluation, administration, and diversity); or
-integrated report writing: as defined by APPIC:
“An integrated report includes a history, an interview, and at least two tests from one or more of the following categories: personality assessments (objective, self-report, and/or projective), intellectual assessment, cognitive assessment, and/or neuropsychological assessment. These are synthesized into a comprehensive report providing an overall picture of the patient/client”

3. Experiences should also include variety in groups served:
-exposure to a variety of client problems;
-exposure to a variety of client ages and diverse characteristics (such as racial or ethnic minority, gender, sexual orientation, disability, SES, and religious groups); or
-exposure to a range of problem severity.

Students are encouraged to plan for variety in their practicum experiences to make them competitive for internship. For example, students are encouraged to pursue breadth in their training to include both assessment and treatment experiences. Diversity in age of clients served, setting, presenting concerns, specialty populations, and group versus individual format are additional factors to consider.

<table>
<thead>
<tr>
<th>Course Objectives, Competencies, or Outcomes</th>
<th>APA &amp; CPP SLOs</th>
<th>Assessment</th>
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<tbody>
<tr>
<td>1. By the end of this course, students will understand and demonstrate conduct in accordance with ethical and legal guidelines in clinical activities.</td>
<td>CPP SLOs: Ethics</td>
<td>Supervisor Evaluation of Trainee</td>
</tr>
<tr>
<td>2. By the end of this course, students will consider diversity and individual difference variables in their interactions with clients.</td>
<td>CPP SLOs: Individual and Cultural Diversity</td>
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<tr>
<td>3. By the end of this course, students will frequently act in accordance with professional expectations for the setting and demonstrate responsiveness to feedback.</td>
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<tr>
<td>4. By the end of this course, students will demonstrate effective verbal, nonverbal and written communication,</td>
<td>CPP SLOs: Communication and Interpersonal Skills</td>
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including clinical documentation.

5. If applicable to the training site, by the end of this course students will be able to demonstrate technical proficiency in assessment and/or test administration and ability to interpret the data within the appropriate context. **CPP SLOs**: Assessment

6. If applicable to the training site, by the end of this course students will be able to maintain effective relationships with clients and implement appropriate intervention plans. **CPP SLOs**: Intervention

7. If applicable to the training site, by the end of this course students will be able to provide effective positive and constructive feedback. **CPP SLOs**: Supervision

8. If applicable to the training site, by the end of this course students will be able to demonstrate knowledge of roles and perspectives of other professions. **CPP SLOs**: Consultation and Interprofessional/Interdisciplinary Skills

**Assessment**

Each quarter of CPSY 609 is graded as Pass/No Pass. The grade is based on evaluations submitted by the primary supervisor, which may include input from secondary supervisors and/or other site staff. Students are rated on a 1-5 scale on 38 items across the 9 competency domains, though supervisors have the option to select certain items as “not applicable” to their setting if they feel they have no basis on which to rate the trainee:

- Research
- Ethics and Legal Standards
- Individual and Cultural Diversity
- Professional Values and Attitudes
• Communication and Interpersonal Skills
• Assessment
• Intervention
• Supervision
• Consultation and Interprofessional/Interdisciplinary Skills

Supervisors rate the trainee’s performance in the clinical competencies listed above, taking into account their developmental level/year in the program and the amount of time and scope of experiences they have completed thus far in the current practicum placement.

1 = Inadequate Performance (Consistently below expectations), remediation plan required
2 = Marginal Performance (Meets minimum expectations at times, but not consistently), informal support
3 = Good Performance (Consistently meets minimum expectations for a student of their level)
4 = Very Good Performance (Exceeds expectations at times)
5 = Outstanding Performance (Exceeds expectations consistently)
NA= Not applicable, no basis for rating (use sparingly)

**Scoring Policy**

A mean score of 3 or higher is required in every profession wide competency by the end of each practicum training year to meet the minimum levels of achievement (MLA) as part of the clinical psychology doctoral program’s system for evaluating student competencies. Feedback about performance should be shared regularly, if a student obtains a rating of 2 on any items then an informal improvement plan should be created.

If a student receives a rating of 1 on any of the items, or a mean profession wide competency score below 2, then a formal written remediation plan will be created with the program and placed in the student’s file to describe the activities that the student will engage in to achieve a rating of 3 or higher on future assessments. If a student either fails to remediate inadequate performance while on a remediation plan, or they do not achieve a mean score of 3 on any profession wide competency by the end of the practicum, they will fail the CPSY 609 course for spring quarter.

In some instances, students may be on remediation plans but will still be able to pass the course for the quarter as long as they are making progress. In the first 3 quarters (summer, fall, winter), students are able to pass the 609 course while on a remediation plan as long as the supervisor determines they are making progress towards the MLA. For the last quarter (spring) students must meet the Minimum Level of Achievement (MLA) requirements for their level to pass the practicum in that quarter. Please see the practicum guidelines and student guidelines.

**Materials**

<table>
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<tr>
<th>Required Materials</th>
<th>List of required readings and/or materials to be provided by Site Supervisor.</th>
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<tbody>
<tr>
<td>Optional Materials</td>
<td>Provided by Site Supervisor.</td>
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Evaluations

To receive a passing grade, students must submit the following evaluation forms by the due dates listed below and/or those listed in their Clinical Psychology PhD Program Practicum Agreement:

All evaluations forms must be submitted to the Director of Clinical Training, or designee (See contact information above). Notes: Failure to submit required forms by the specified due dates will result in a no pass grade, unless the student has received prior approval for late submission by the Director of Clinical Training, or designee. Complete all required tracking forms and evaluations and submit copies of the above to the instructor of record (training director, or designee). Failure to provide the required materials and evaluations by the end of the quarter will result in an ‘Incomplete’ for the class. If you turn in materials late, attach a note indicating the term for which you received the “I”. If materials are not submitted within 2 months of the deadline this will convert to a no pass grade.

Students with more than one practicum site, must complete and submit separate Clinical Psychology PhD Practicum Agreements, evaluations, and hour approvals for each site.

1. Every Quarter – Supervisor Evaluation of Trainee
A Supervisor Evaluation of Trainee form must be completed by the primary supervisor prior to the end of each quarter to document the student’s current level of progress and competence at the practicum site. If a student has more than one supervisor at the same site, the secondary supervisor may provide input to the primary supervisor to include on the evaluation. Other faculty and staff may provide input as needed or requested. The supervisor will document that they have completed direct observation of clinical activities in the quarter. The primary supervisor and student signature on the evaluation form verifies that the supervisor has discussed the content of the evaluation with the student, and the student is in agreement. The Director of Clinical Training, or designee, will review this form.

Due Dates
Summer: last day of summer quarter.
Fall: last day of fall quarter.
Winter: last day of winter quarter.
Spring: last day of spring quarter.

2. Fall and Spring Quarters – a.) Trainee Evaluation of Supervisor and b.)Trainee Evaluation of Practicum Site forms
Trainee Evaluation of Supervisor and Trainee Evaluation of Practicum Site forms must be completed by the student prior to the end of fall and spring quarters. Because of the lack of anonymity of the responses no feedback will be given to supervisors until the end of the final quarter that the student trains with the supervisor (i.e., after the final Supervisor Evaluation of Trainee of the student has been completed by the supervisor in spring quarter) and all responses will be aggregated across students (if more than one student is engaged with the supervisor). However, the Associate Director, Program Director, or their designee, will monitor low ratings during the year and will review the supervisor’s performance and/or practicum site if significant concerns arise. In addition, students are encouraged to talk with the supervisor and/or the Director of Clinical Training, or designee, if a problem occurs, or anonymously complete and
submit a Trainee Evaluation of Supervisor and/or Trainee Evaluation of Practicum Site form. In addition to providing these ways to share feedback, the program strongly encourages trainees to have open discussions with their supervisors throughout the training year to facilitate professional development and improve their supervision experience, as possible.

**Due Dates**
**Fall:** last day of fall quarter.
**Spring:** last day of spring quarter.

3. Every Quarter – Hours Approval

**Time2Track**
Each student must set-up an account in Time2Track for practicum hours to be logged and placed in correct categories as outlined on the APPIC internship application (the AAPI). At the end of each quarter, the student will send the hours to the supervisor for approval.

**Due Dates**
- **Summer:** the week before the last day of summer quarter (hours accrued after this will be included in fall quarter hours).
- **Fall:** the week before the last day of fall quarter (hours accrued after this date will be included in winter quarter hours).
- **Winter:** the week before the last day of winter quarter (hours accrued after this date will be included in spring quarter hours).
- **Spring:** the last day of spring quarter (students should submit hours through the last date of training at the site or last day of spring quarter, whichever is later).

**Course Policies**
Students may repeat CPSY 609 as necessary to meet program requirements.
- Students must repeat any quarter of CPSY 609 for which they receive a grade of “no pass”, and it will not count toward their degree requirements.
- Students must receive a “pass” in order to count their practicum hours on their internship application.

**Academic Integrity**
Students are responsible for their own product, assessment reports, case notes, and other documentation. This does not prohibit students from collaborating with colleagues, but the final product must be original. Academic dishonesty will not be tolerated and has the potential to severely affect ones professional career if committed. Excessive absences or tardiness, unprofessional conduct, or academic dishonesty (e.g., plagiarism, fabrication, cheating, etc.) can also result in a no pass grade in the course.

**Professionalism**
Students are expected to be professional and maintain ethical standards (as identified in the American Psychological Association Ethical Principles of Psychologists and Code of Conduct) in all interactions and activities during the practicum year. These expectations include, but are not limited to, the following:
- Be knowledgeable about and follow all site policies.
-Dress professionally.
-Interact with clients, peers, community members, staff, and supervisors in a respectful and collaborative manner.
-Be on time and complete all required activities.
-Start and end clinical sessions on time.
-Attend supervision and trainings.
-Keep your supervisors apprised of your clinic activities and details of your cases, including showing audiotapes/videotapes of your sessions, if live supervision is not possible.
-When dealing with crisis and urgent situations, consult with supervisors, directors, or other identified personnel at the site. Update your supervisor the next business day about the crisis, unless instructed to contact your supervisor immediately during or right after crisis or urgent situations.

Incidents of failing to meet all professional and ethical expectations is concerning and may have consequences. Students may not pass practicum due to an egregious incident or multiple incidents of failing to meet these expectations. If your supervisor has concerns about your clinical abilities and is no longer comfortable supervising you, or there are serious concerns about ethical misconduct, you may be removed from the placement immediately. The Associate Director of Clinical Training, Program Director or Practicum Committee may restrict all or part of a student’s clinical activities if there is evidence of behavior that may hinder professional competence or interpersonal or professional relations, or if other concerns about clinical competence are raised (e.g., failure of a clinical training placement, problematic ratings or concerning comments from a clinical class or lab). Please see the CPP Student Guidelines and Practicum Guidelines for details around remediation plans, probation and for grievance procedures.

**Students and supervisors are required to contact the Associate Director of Clinical Training, Program Director, site supervisor if any problem arises at the site, at the first possible opportunity.**

*All students are bound by the policies and procedures outlined by the OHSU School of Medicine, Graduate Studies, and Clinical Psychology PhD program guidelines & polices.

**Diversity**

During clinical activities and supervision, it is intended that students build foundational cultural competency to serve a variety of clients. Diversity refers to the range of cultural, racial, socioeconomic, sexual orientation, disability, religious and other client-specific factors that as clinicians, we must respect in order to conduct effective, ethical clinical practice. Inclusion of issues regarding diverse populations will therefore be accomplished on an ongoing basis as part of regular discussion. Most importantly, issues will be discussed within a framework of diversity that is in accordance with the American Psychological Association’s ethical guidelines. With respect to these guidelines, the focus will be on the role of the psychologist as a professional whose expertise in the change process allows the psychologist or trainee to ask questions and seek out information/consultation regarding diversity issues as appropriate, and that conveys
respect for the values, roles, perspectives, and customs of the clients and participants with whom the psychologist or trainee serves.

**OHSU Clinical Psychology Program Supervision and Practicum Agreement**

A practicum agreement must be completed and signed by all necessary parties prior to the start of the practicum. Please see the practicum guidelines for an example practicum agreement.
The student is responsible for ensuring that signed versions of the documents below are submitted to the training director, or their designee, by the deadlines described below. The following pages contain additional information and examples from each evaluation component.

1. **CPP Supervisor Evaluation of Trainee Form**
   
   a. To be completed each quarter by the supervisor, reviewed with the student and signed by both parties.
   
   b. Summary global comments are required from the supervisor every quarter (strengths and growth areas). Domain specific comments are required at the final evaluation at the end of the yearlong rotation. Domain specific comments are also required if any concerns are indicated on the ratings or if the supervisor feels the student is struggling in some way.
   
   c. The student is responsible for ensuring that the signed version is submitted to the training director, or their designee, by the end of each quarter.

2. **CPP Trainee Evaluation of Supervisor Form**
   
   a. To be completed mid-year (end of fall term) and at the end of each yearlong rotation (end of spring term) by the student.
   
   b. Because of the lack of anonymity of the responses no feedback will be given to supervisors until the end of the final quarter that the student trains with the supervisor (i.e., after the final Supervisor Evaluation of Trainee of the student has been completed by the supervisor in spring quarter) and all responses will be aggregated across students (if more than one student is engaged with the supervisor). However, the Associate Director, Program Director, or their designee, will monitor low ratings during the year and will review the supervisor’s performance if significant concerns arise. In addition, students are encouraged to talk with the supervisor and/or the Director of Clinical Training, or designee, if a problem occurs, or anonymously complete and submit a Trainee Evaluation of Supervisor form. In addition to providing these ways to share feedback, the program strongly encourages trainees to have open discussions with their supervisors throughout the training year to facilitate professional development and improve their supervision experience, as possible.

3. **CPP Trainee Evaluation of Practicum Site Placement Form**
   
   a. To be completed at the end of the yearlong rotation (end of spring) by the student.
   
   b. The program ensures the quality of the practicum sites, including regularly scheduled site reviews. The program will gather data through the **CPP Trainee Evaluation of Practicum Site Placement form** at the end of each rotation. This data will be shared with the training site after the placement is over so that they may incorporate trainee feedback. Trends will be examined over time to ensure that the site remains appropriate. If concerns emerge regarding any practicum site the training director, or designee, will meet with supervisors at the site and
determine a plan for addressing any concerns. If concerns remain then the
training director will make a decision about continuing to offer this placement.

4. **CPP Clinical Training Hours Log (Time2Track)**
   a. Students will be responsible for tracking their hours (direct and indirect) in
      Time2Track
   b. Students will need to submit their tracking logs to their supervisor each quarter
      for review and signature, these will be shared with the program.
   c. Additionally, a summary of the student’s total tracking hours will need to be
      submitted for their annual review.
This form should be completed by the student's primary supervisor. Secondary supervisors will not complete separate evaluations, however, information from a secondary supervisor may be incorporated in this evaluation.

INSTRUCTIONS: The primary supervisor should review the information on this evaluation with the trainee prior to submission. Please rate the trainee’s performance in the clinical competencies listed below, taking into account their developmental level/year in the program and the amount of time and scope of experiences they have completed thus far in the current practicum placement. NOTE: Global comments are required each term, global and domain specific comments are also required at the end of the yearlong rotation. Otherwise, domain specific comments are only required if there are any ratings below a 3 on individual items.

1 = Inadequate Performance (Consistently below expectations), remediation plan required
2 = Marginal Performance (Meets minimum expectations at times, but not consistently), informal support
3 = Good Performance (Consistently meets minimum expectations for a student of their level)
4 = Very Good Performance (Exceeds expectations at times)
5 = Outstanding Performance (Exceeds expectations consistently)
NA = Not applicable, no basis for rating (use sparingly)

PLEASE NOTE: A mean score of 3 or higher is required in every profession wide competency by the end of each practicum training year to meet the minimum levels of achievement (MLA) as part of the clinical psychology doctoral program’s system for evaluating student competencies. Feedback about performance should be shared regularly, if a student obtains a rating of 2 on any items then an informal improvement plan should be created. If a student receives a rating of 1 on any of the items, or a mean profession wide competency score below 2, then a formal written remediation plan will be created with the program and placed in the student’s file to describe the activities that the student will engage in to achieve a rating of 3 or higher on future assessments. If a student either fails to remediate inadequate performance while on a remediation plan, or they do not achieve a mean score of 3 on any profession wide competency by the end of the practicum, they will fail the CPSY 609 course for spring quarter. Please see the practicum guidelines, student guidelines and 609 syllabus for additional information.
### Ethics and Legal Standards

<table>
<thead>
<tr>
<th>Rating: 1-5 (3 or higher is MLA)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
</tr>
<tr>
<td><strong>2</strong></td>
</tr>
<tr>
<td><strong>3</strong></td>
</tr>
</tbody>
</table>
| **4** | Conducts self in accordance with ethical and legal guidelines in all professional activities; for example:  
  - Maintains confidentiality, secures appropriate releases  
  - Understands and appropriately obtains informed consent  
  - Avoids dual relationships  
  - Understands personal limits and competencies  

**REQUIRED at final eval or if low scores:** Comments

### Individual and Cultural Diversity

<table>
<thead>
<tr>
<th>Rating: 1-5</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
</tr>
<tr>
<td><strong>2</strong></td>
</tr>
</tbody>
</table>
| **3** | Integrates awareness and knowledge of individual and cultural differences in the conduct of professional activities, and demonstrates the ability to work effectively with a range of diverse individuals, including:  
  - the ability apply a framework for working effectively with areas of individual and cultural diversity not previously encountered  
  - the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own. |
<table>
<thead>
<tr>
<th></th>
<th>Demonstrates the requisite knowledge base, ability to articulate an approach to working effectively with diverse individuals and groups, and apply this approach effectively in their professional work.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>REQUIRED at final eval or if low scores</strong>: Comments</td>
</tr>
</tbody>
</table>

### Professional Values and Attitudes

**Rating 1-5**

<table>
<thead>
<tr>
<th></th>
<th>Behaves in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others; for example: remains pleasant and accessible, attends all required trainings and scheduled clinic hours, interacts with others in a professional and courteous manner, maintains professional boundaries, presents a professional image, tolerates ambiguity/uncertainty.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>REQUIRED at final eval or if low scores</strong>: Comments</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Demonstrates ability to engage in self-reflection regarding one's personal and professional functioning and skills.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Engages in activities or actions to maintain and improve performance, well-being and professional effectiveness</td>
</tr>
<tr>
<td></td>
<td>Actively seeks supervision; for example: reviews/prepares for supervision or team meetings, asks questions in supervision sessions, seeks help/consultation when appropriate</td>
</tr>
<tr>
<td></td>
<td>Demonstrates openness and responsiveness to feedback and supervision</td>
</tr>
<tr>
<td></td>
<td>Responds professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.</td>
</tr>
</tbody>
</table>

### Communication and Interpersonal Skills

**Rating 1-5**

<table>
<thead>
<tr>
<th></th>
<th>Demonstrates effective interpersonal communication skills and successfully maintains relationships with a wide range of individuals (e.g., colleagues, supervisors, supervisees, recipients of professional service)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Produces written communications that are informative, well integrated, and appropriate for intended audience</td>
</tr>
<tr>
<td></td>
<td>Engages in verbal and nonverbal communication that is informative, well integrated, and appropriate for intended audience</td>
</tr>
</tbody>
</table>
4 Demonstrates the ability to effectively produce and comprehend oral, nonverbal, and written communications, including a thorough grasp of professional languages and concepts relevant to the practice of health service psychology

5 Demonstrates the ability to effectively navigate challenging interactions, by demonstrating professional verbal, nonverbal, and written communications with others, including the ability to manage difficult communication well.

6 Maintains all required chart documentation in an accurate and timely manner; for example: intake reports, progress notes, case notes, service plans, termination summaries

**REQUIRED at final eval or if low scores: Comments**

**Assessment**

<table>
<thead>
<tr>
<th>Rating 1-5</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Demonstrates current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology</td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td>Demonstrates understanding of human behavior within its context (e.g., family, social, societal and cultural).</td>
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<td></td>
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<tr>
<td>3</td>
<td>Demonstrates the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process.</td>
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<tr>
<td>4</td>
<td>Selects and applies assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collect relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient.</td>
<td></td>
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</tr>
<tr>
<td>5</td>
<td>Interprets assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective.</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>6</td>
<td>Develops treatment recommendations that are grounded in assessment results</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Verbally communicates the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Demonstrates ability to communicate in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.</td>
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</tbody>
</table>

**REQUIRED at final eval or if low scores: Comments**

**Mean=**
<table>
<thead>
<tr>
<th>Intervention</th>
<th>Rating 1-5</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Establishes and maintains effective relationships with the recipients of psychological services</td>
<td></td>
</tr>
<tr>
<td>2. Develops evidence-based intervention plans specific to the service delivery goals.</td>
<td></td>
</tr>
<tr>
<td>3. Implements interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.</td>
<td></td>
</tr>
<tr>
<td>4. Demonstrates the ability to apply the relevant research literature to clinical decision making.</td>
<td></td>
</tr>
<tr>
<td>5. Modifies and adapts evidence-based approaches effectively when a clear evidence-base is lacking (e.g., when intervention has yet to be tested with specific patient populations or in certain clinical contexts).</td>
<td></td>
</tr>
</tbody>
</table>

**REQUIRED at final eval or if low scores: Comments**

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<table>
<thead>
<tr>
<th>Supervision</th>
<th>Rating 1-5</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Demonstrates knowledge of supervision models.</td>
<td></td>
</tr>
<tr>
<td>2. Demonstrates knowledge of supervision practices (e.g., mentoring and monitoring the development of competence)</td>
<td></td>
</tr>
</tbody>
</table>

**REQUIRED at final eval or if low scores: Comments**

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<table>
<thead>
<tr>
<th>Consultation and Interprofessional/Interdisciplinary Skills</th>
<th>Rating 1-5</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Demonstrates knowledge of and respect for the roles and perspectives of other professions</td>
<td></td>
</tr>
<tr>
<td>2. Demonstrates knowledge of consultation models and practices.</td>
<td></td>
</tr>
</tbody>
</table>

**REQUIRED at final eval or if low scores: Comments**

---

*Mean*=
GLOBAL SUMMARY COMMENTS

REQUIRED every quarter: Comments on strengths

**Strengths**

REQUIRED every quarter: Comments on growth areas

**Growth Areas**

Supervisor signature: ________________________
Date: __________

Trainee signature: ________________________
Date: __________
SUCCESSFUL COMPLETION/MINIMAL LEVELS OF ACHIEVEMENT (MLAs):

Exit Benchmarks

Practicum students must obtain a “3” on all competency items by the end of the year rotation (spring); if these benchmarks are not met, then a remediation plan will need to be developed (see below).

Note that supervisors are expected to regularly provide verbal feedback to practicum student on all competencies, not just at the time of formal evaluation.

Addressing concerns within supervision: It is developmentally appropriate for practicum students to have a range of clinical strengths and weaknesses. If students are not on track for meeting the MLA benchmarks (e.g., not receiving a score of 3) then this should be proactively addressed within supervision to help the student meet their MLAs. If developmental lags are present (scoring a “2” at any point), supervisors should consider informal support options within supervision that will help a practicum student achieve the MLA by the next evaluation period. If despite addressing concerns informally within supervision, the practicum supervisor remains concerned about student progress and worries that a student will not meet their MLA exit benchmarks (see above), the Supervisor must contact the Training Director, or designee to set up a formal remediation plan (see below).
NOT MEETING MINIMAL LEVELS OF ACHIEVEMENT (MLAs) and REMEDIATION PLANS:

Remediation Planning:
If a student receives a rating of 1 on any of the items, or a mean profession wide competency score below 2, then a formal written remediation plan will be created with the program and placed in the student’s file to describe the activities that the student will engage in to achieve a rating of 3 or higher on future assessments. A supervisor may request a formal remediation plan at any point, one does not need to wait until a formal evaluation period. Supervisors will provide information to the Associate Director and/or Program Director (or designee), as soon as possible if the trainee is not meeting expectations or if any ethical or professional concerns arise involving the practicum student.

Remediation plans are not equal to obtaining a not passing grade. In some instances, students may be on remediation plans but will still be able to pass the course for the quarter as long as they are making progress. In the first 3 quarters (summer, fall, winter), students are able to pass the 609 course while on a remediation plan as long as the supervisor determines they are making progress towards the MLA. For the last quarter (spring) students must meet the Minimum Level of Achievement (MLA) requirements for their level to pass the practicum in that quarter. Remediation plans should be developed proactively and are a way to ensure the students are on track for meeting MLA’s at the end of the year.

A remediation plan is a goal-directed plan to provide the student with the support and clarity necessary to complete the program. Although remediation plans indicate the need for improvement, they may be viewed as an opportunity for growth rather than as punitive in nature.

If a remediation plan is needed, the supervisor must contact the Associate Director/Program Director, or designee, to discuss their concerns and the student’s weaknesses and to collaboratively develop the written remediation plan. The Associate Director or Program Director may also choose to consult with other supervisors, the Practicum Training Committee, or others, as appropriate, to develop the remediation plan. A remediation plan must explicitly include the following: competencies not met, expectation for acceptable performance, outcomes and benchmarks, next steps and evaluation plans. The purpose of a remediation plan is to clearly delineate the student’s deficits in behaviorally specific terms, define what acceptable performance must look like by the next evaluation period and establish a training plan that will optimally assist the student in terms of improving performance and the likelihood of meeting MLAs and ultimately to ensure they will be on track to apply for internship and progress through the program.

Some possible remediation steps related to practicum activities could include: increased documentation of preparatory planning for the student (reviewing relevant DSM sections and creating a summary paragraph, filling out a more detailed outline about medical record review or more detailed therapy session prep), mock test administration with a fellow student or volunteer, structured student review of previous progress notes or alterations to the practicum day (e.g., extended period of time with the supervisor in the room, requirements to take notes and create a summary of the feedback they were given and the goals for the next session, track and review supervisor feedback from previous session, students may be required to create an interview
outline for each patient). In extreme cases, examples of more significant changes might include modification of the training (e.g., increased supervision, supplemental or altered training experiences, adjustments to type or size of caseload).

The final remediation plan will be shared with the student, the practicum supervisor, Associate Director/Program Director (or designee) and the student’s research mentor. Additional details and templates for remediation plans can be found in the student guidelines.

A formal written remediation plan will be put in place if:

1. A supervisor feels it would be helpful and they are concerned the student is not on track to meet their “exit” MLAs
2. A student receives a “1” score in any area or a mean profession wide competency score below “2”
3. A student is not meeting a mean score of 3 or higher in every profession wide competency by the end of each practicum training year (end of spring) to meet the minimum levels of achievement (MLA) as part of the clinical psychology doctoral program’s system for evaluating student competencies.

As soon as a practicum supervisor becomes concerned that they may need to give a student a “1” in any domain of their evaluation, the supervisor must discuss this with the student and the Associate Director/Program Director, or designee. If a student receives any scores of “1” on their end of quarter evaluations, a written remediation plan will be completed (or reviewed and revised if a plan in already in place). Egregious concerns must always be promptly addressed with the Associate Director/Program Director (or designee) and supervisors should not wait until formal evaluation periods to share these concerns.

Egregious concerns, repeated use of remediation plans or dismissal from practicum sites may lead to more significant consequences, including probation and may be grounds for removal from the program. Please see the CPP Student Guidelines for details.
**Trainee Evaluation of Supervisor**

<table>
<thead>
<tr>
<th>RATING SCALE</th>
<th>NA/Not Covered</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inadequate</td>
<td></td>
</tr>
<tr>
<td>Marginal</td>
<td></td>
</tr>
<tr>
<td>Good</td>
<td></td>
</tr>
<tr>
<td>Very Good</td>
<td></td>
</tr>
<tr>
<td>Outstanding</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>N/A</td>
</tr>
</tbody>
</table>

1 = Inadequate Performance (Consistently below expectations)
2 = Marginal Performance (Meets minimum expectations at times, but not consistently)
3 = Good Performance (Consistently meets minimum expectations)
4 = Very Good Performance (Exceeds expectations at times)
5 = Outstanding Performance (Exceeds expectations consistently)
N= No basis for Rating

**Instructions:** The trainee should carefully consider the performance of their supervisor(s) in each of the following categories, and rate their performance over the preceding quarter(s)/year. This form is to be completed mid-year and at the end of the training rotation. If you have one supervisor only complete the primary supervisor rating column. If you have multiple supervisors you may create a separate rating form for each supervisor or you can also complete the additional supervisor rating column in this form. **If desired,** students have the option to complete a separate confidential Trainee Evaluation of Supervisor form that can be submitted to the training director. If the second form is marked confidential, the specific ratings will remain confidential and trainees should feel free to provide detailed, complete, and honest feedback to the program. Although specifics will remain confidential, general themes may be shared with the supervisor(s). Also, because of the lack of anonymity of the responses no feedback will be given to supervisors until the end of the final quarter that the student trains with the supervisor (i.e., after the final Supervisor Evaluation of Trainee of the student has been completed by the supervisor in spring quarter) and all responses will be aggregated across students (if more than one student is engaged with the supervisor). In addition to providing these ways to share feedback, the program strongly encourages trainees to have open discussions with their supervisors throughout the training year to facilitate professional development and improve their supervision experience, as possible.

Rating period (from to): [ ]
Current Date: [ ]
Research

<table>
<thead>
<tr>
<th>PSYCHOLOGY TRAINEE:</th>
<th>PRIMARY SUPERVISOR:</th>
<th>ADDITIONAL SUPERVISOR:</th>
</tr>
</thead>
</table>

Demonstrated competence in promoting understanding of research, emphasized as a consumer to inform clinical work (empirically supported evidence) and/or as a researcher.

Comments - 250 character limit:

Ethical and Legal Standards

<table>
<thead>
<tr>
<th>Primary Supervisor</th>
<th>Additional Supervisor</th>
</tr>
</thead>
</table>

Facilitated ongoing awareness of ethical and legal issues relevant to the professional practice of psychology, and modeled ethical thought processes and legal practice.

Comments - 250 character limit:

Diversity

<table>
<thead>
<tr>
<th>Primary Supervisor</th>
<th>Additional Supervisor</th>
</tr>
</thead>
</table>

Demonstrated awareness and knowledge, and demonstrated respect and understanding, regarding issues of individual and cultural diversity.

Comments - 250 character limit:
<table>
<thead>
<tr>
<th>Professional Development</th>
<th>Primary Supervisor</th>
<th>Additional Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervisor modeled and promoted the development of professional skills relevant to psychological practice (e.g., Integration, communication skills, case presentation, goal setting)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments - 250 character limit:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Administrative Skills</th>
<th>Primary Supervisor</th>
<th>Additional Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>The supervisor discussed and actively promoted the development of administrative skills, (e.g., timeliness, attendance, communication, follow through)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments - 250 character limit:</td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Clinical Skills</th>
<th>Primary Supervisor</th>
<th>Additional Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>The supervisor promoted growth and development of clinical skills (knowledge, interviewing, diagnoses, data collection and interpretation, assessment, empirical evidence, case conceptualization, documentation, rapport, crisis management, etc.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments - 250 character limit:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Supervision</th>
<th>Primary Supervisor</th>
<th>Additional Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>The supervisor modeled supervision skills (preparedness, involvement, responsiveness, providing feedback, monitoring progress, etc.).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments - 250 character limit:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Consultation and Interprofessional Skills**

<table>
<thead>
<tr>
<th></th>
<th>Primary Supervisor</th>
<th>Additional Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>The supervisor facilitated the development of interpersonal skills, including knowledge of roles, abilities, use of language, and promoted contributing to team interactions in a professional and effective manner.</td>
<td></td>
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</tbody>
</table>

*Comments - 250 character limit:*

---

**Reliability**

<table>
<thead>
<tr>
<th></th>
<th>Primary Supervisor</th>
<th>Additional Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervisor was reliable and available for supervision as needed.</td>
<td></td>
<td></td>
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</tbody>
</table>

*Comments - 250 character limit:*

---

**Support**

<table>
<thead>
<tr>
<th></th>
<th>Primary Supervisor</th>
<th>Additional Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervisor was supportive of individual interests and regarding issues and disagreements with other professionals. Was helping in orientation to the setting and other factors.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Comments - 250 character limit:*

---

**Training Goals**

<table>
<thead>
<tr>
<th></th>
<th>Primary Supervisor</th>
<th>Additional Supervisor</th>
</tr>
</thead>
</table>

---
Helpful in collaborating and providing guidance and assistance to establish realistic training goals

Comments - 250 character limit:

---

**How did the supervisor complete direct observation of the student's clinical work each quarter? Please comment on the degree of direct observation received by this supervisor:**

Comments - **REQUIRED:**

---

**DETAILED FEEDBACK**

Please describe particular areas of strength, and thoughtfully consider and outline areas of growth and further development. Please be professional, specific and constructive.

*Areas of Strength (Primary Supervisor) - 350 character limit:*

---

*Areas of Strength (Additional Supervisor, if applicable) - 350 character limit:*

---

*Areas of Growth (Primary Supervisor) - 350 character limit:*

---
Areas of Growth (Additional Supervisor, if applicable) - 350 character limit:
CPP Trainee Evaluation of Practicum Site Placement

Student ___________________________ Date ___________________________
Rotation ___________________________ Supervisor(s) ___________________________

PURPOSE: To inform supervisors, settings, the CPP program, and future practicum students about your training experience on this rotation. Please be candid and specific. Note, feedback specific to a certain supervisor should be compiled on the Trainee Evaluation of Supervisor form and not reported here. This evaluation will be given to the CPP program and information may be shared with the site.*

1 = Inadequate (Consistently below expectations)
2 = Marginal (Meets minimum expectations at times, but not consistently)
3 = Good (Consistently meets minimum expectations)
4 = Very Good (Exceeds expectations at times)
5 = Outstanding (Exceeds expectations consistently)

<table>
<thead>
<tr>
<th>Rating Questions</th>
<th>Rating, 1-5</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. What was your overall satisfaction with this practicum training site?</td>
<td></td>
</tr>
<tr>
<td>2. How well were issues of diversity and inclusion addressed at this site?</td>
<td></td>
</tr>
<tr>
<td>3. How well would you rate the working style of the staff and the atmosphere of the setting on this rotation?</td>
<td></td>
</tr>
<tr>
<td>4. Reflect on the training received at this site: What training needs were met on this rotation? What needs could not be met in this setting? What training was available but not taken advantage of and why?</td>
<td></td>
</tr>
<tr>
<td>5. What skills and personality characteristics would help a student to be successful on this rotation?</td>
<td></td>
</tr>
<tr>
<td>6. What characteristics of the setting and site did you find to be particularly helpful?</td>
<td></td>
</tr>
<tr>
<td>7. What would improve the training experience?</td>
<td></td>
</tr>
<tr>
<td>8. Other Comments:</td>
<td></td>
</tr>
</tbody>
</table>

* If desired, students have the option to complete a separate confidential Trainee Evaluation of Practicum Site Placement form that can be submitted to the training director, or their designee. If second form is marked confidential, although general themes may be shared with the supervisor, the specific ratings will remain confidential and trainees should feel free to provide detailed, complete, and honest feedback to the program.
Internship Clinical Readiness Determination:

Overall considerations: We will have a process in place to ascertain that applicants have reached a minimum level of proficiency in clinical hours and experiences to be competitive for internship application.

Specifically, we ensure that our students uniformly meet the following criteria before applying to internship:

1. Successful completion of a 1st year project, doctoral qualifying examination, the vast majority of their required courses, and dissertation proposal;
   i. Assessment:
      1. Annual Student Review form

2. Successful completion of a set of organized, sequential practicum experiences spanning across several different training clinics and resulting in the acquisition of a wide range of assessment and intervention skills. Students will need to have demonstrated competencies in intervention and assessment before they apply to internship, as demonstrated through their annual review and supervisor evaluations.
   i. Assessment:
      1. Supervisor evaluations at the end of their practicum rotations will meet or exceed MLA’s.
      2. Annual Review:
         a. Complete a summary of practicum experiences Table, reviewed at the Annual review meeting by the faculty.
         a. Faculty will vote at early summer annual meeting if students are eligible to apply to internship the next year