THE UIC DOCTORAL PROGRAM IN CLINICAL PSYCHOLOGY: STUDENT HANDBOOK

Academic Year 2015/2016

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The Mission of the Clinical Division

The UIC Department of Psychology offers an APA-accredited doctoral program in clinical psychology. The mission of the Division of Clinical Psychology is to educate innovative research-oriented scholars. Following the Boulder Model "scientist-practitioner" approach to training, we emphasize the integration of research and clinical work to produce leading researchers who will advance theory, research, and application in the areas of assessment, intervention, etiology, and prevention of psychological and health-related problems. Within this context, practicum training provides experiences that enable students to learn evidence-based assessment and treatment approaches, as well as strategies for the prevention of behavioral problems and the promotion of health. Our educational philosophy emphasizes a scientific and socially responsible approach to clinical psychology, including sensitivity to ethical issues as well as gender, ethnic, and cultural diversity. Our goal is to train students for careers in academic and research settings; we do not aim to train students for careers in private practice or full-time service delivery.

The Clinical program has maintained its APA accreditation continuously since 1974. Should you wish to contact the Committee on Accreditation, here is their address and phone number:

Office of Program Consultation and Accreditation American Psychological Association 750 First Street, N.E. Washington, DC 20002-4242 202.336.5979

The Clinical program is also a member of the Academy of Psychological Clinical Science (http://acadpsychclinicalscience.org/) - an alliance of leading, scientifically oriented, doctoral and internship training programs in clinical and health psychology in the United States and Canada.

Program Overview

Didactic Training:

In the first year of graduate study students take didactic courses in Statistics, Interviewing (fall), Psychopathology (fall), Assessment Practicum (spring), Research Methods (fall), and either Ethics or Psychotherapy Theory and Research (spring). They also enroll in Brown Bag and Emerging Research Issues. Students enroll in a 1 credit hr. course on how to be a TA. There is also a strongly recommended 1 hr. computing workshop that is offered to first-year students in the Department. Students with substantial experience with data analysis see the 543 instructor for information regarding having this requirement waived.

In the second year, students finish the second semester Practicum in Psychological Assessment course, and complete a course in Techniques of Psychological Interventions, and Brown Bag, and a second didactic course in statistics (Multivariate Analysis). Students will also take either Ethics or Psychotherapy Theory and Research (whichever they did not take in the first year). These required courses are offered in alternate years, so that all students take one in the second year and the other in the third year. There is also time for electives to begin fulfilling the APA breadth requirements. Our program requires that students fulfill the development, cognitive, biological bases, and social breadth requirements with separate elective courses (see below)

In the third year, students take a two-semester course entitled Practicum in Clinical Interventions, Brown Bag, and electives. Finally, in the fourth year (or sometimes earlier) students take the History of Psychology Course. All courses and course numbers are listed in the Timeline for Graduate Study Table. In both the third and fourth year students take electives to complete the APA breadth requirements.

Research:

In the first year students are expected to write a draft of their master's thesis proposal. The methods course in the fall semester (Psch 595) addresses research methods and includes progressive, structured assignments that directly related to writing the master's thesis proposal. In the first year, students work closely with their advisors to develop the proposal as part of the Research Apprenticeship (Psch 591). Students should complete the thesis by the end of the second year. The major milestone in the third year is the prelim paper. Following this, in the fourth year, students are expected to propose their dissertations, which are carried out in the fourth and fifth years. There is some flexibility in the research timeline depending upon the type of projects that students conduct. In the third and fourth years, required clinical courses are minimized so as to allow time for electives and the conduct of research beyond the minimal research requirements of the Master's, Prelim, and Doctoral projects. Although the Program is designed so that one can complete all requirements in four years, many students elect to take a fifth year to continue publishing and gain specialized practicum experiences in the community.

Clinical Work:

Due to university policy, ALL students entering the UIC Clinical Program must agree and pass a background check. Practicum work in the first year begins with instruction in basic interviewing skills, intake interviews in our clinic, and administration of structured interview protocols. These topics are covered in Psych 481 and 581. Students also begin their assessment coursework in the spring (Psch 582), allowing for both intake and assessment experience during the summer between the spring and fall semesters. In the second year, students complete the Practicum in Psychological Assessment course (Psch 582), continue to conduct clinical assessments in OAPS, and begin to see therapy clients. In the third year, students continue to conduct therapy in OAPS while enrolled in a formal Psychotherapy Practicum course (Psch 583). Access to a wide variety of practicum and research sites is available to students in the fourth year and beyond. These include, Rush University Medical Center, UIC Institute for Juvenile Research, UIC Neuropsychology (in the UIC medical center), Health Psychology, and UIC Anxiety Disorders Clinics, as well as several Veterans Administration hospitals (most notably the Hines VA and Jesse Brown VA).

Brown Bag:

The Clinical Division organizes a weekly Brown Bag colloquium series (Psch 579), attendance at which is required for all students in the first three years of the Program and the members of the Clinical faculty attend meetings. Scheduled speakers, topics, and an abstract of the talks are disseminated via email to the whole department (students beyond the 3rd year are of course more than welcome to attend). There are several themes represented in the Brown Bag series: research, professional development, supervision and consultation, and diversity issues. Faculty members, outside speakers, and students present the findings of research projects that represent a broad range of topics relevant to the field. All students are required to present the results of their Master's theses (or other research project) in Brown Bag. The purpose of the Professional Development theme is to acquaint students with information and issues as they pertain to career options. For instance, outside speakers might discuss how managed care has affected the field of service delivery; career opportunities in business settings and consulting firms; balancing careers and family responsibilities, or the editorial review process for academic journal. We

also use this forum to supplement instruction in topics that cut across course boundaries or fall outside the scope of specific courses, such as consultation and supervision and diversity issues. In addition to the wealth of information communicated in this colloquium series, students and faculty derive a sense of community and shared identity, as it is the only forum within the Clinical Division for all the faculty and students to convene.

Teaching

As our program focuses on the development of individuals who will take on significant leadership roles in academic institutions, we believe that it is important that all students acquire teaching experience. During their enrollment in the graduate program, students are required to do the equivalent of two 50% TA experiences.

Goals and Objectives

The overall goals, objectives, and specific competencies of our program are listed below.

<u>Goal #1</u>: Our program seeks to train future psychologists who have a broad foundation and understanding of the scientific knowledge base in clinical psychology

<u>Objective 1a for Goal #1</u>: Acquire knowledge of the breadth of scientific psychology, including historical perspectives of its foundations and development, its research methods, and its applications.

Competencies Expected for this Objective:

Competency 1a1: Knowledge of biological aspects of behavior

Competency 1a2: Knowledge of cognitive bases of behavior

Competency 1a3: Knowledge of affective bases of behavior

Competency 1a4: Knowledge of social bases of behavior

Competency 1a6: Knowledge of history and systems of psychology

Competency 1a7: Knowledge of individual differences of behavior

Competency 1a8: Knowledge of psychological measurement

Competency 1a9: Research methodology and techniques of data analysis

Competency 1a10: Knowledge of individual differences of behavior

Competency 1a11: Knowledge of human development

Objective 1b for Goal #1: Obtain knowledge and competence in using a core set of research methods, statistics, and their ethical application.

Competencies Expected for this Objective:

Competency 1b1: Knowledge of statistics and research design and skills and the scientific and ethical application of this knowledge to research

Competency 1b2: Knowledge of psychological measurement and skills in the application of this knowledge to research

Competency 1b3: Skills in the design of research, execution of research, analysis of data, and interpretation of results

Objective 1c for Goal #1: Acquire knowledge regarding issues of cultural and individual diversity

Competency 1c1: Knowledge of research concerning the impact of diversity (broadly defined) on risk of various forms of psychopathology.

Competency 1c2: Knowledge of research on the influence of cultural factors on response to interventions.

Objective 1d for Goal #1: Acquire knowledge of the scientific, methodological, and theoretical foundations of the practice and application of clinical psychology

Competency 1d1: Knowledge of the bases, measurement, and treatment of psychopathology.

Competency 1d2: Knowledge of professional standards and ethics.

Competency 1d3: Knowledge of evidence-based approaches to psychological assessment and treatment

Goal 2: Our program seeks to educate psychologists who are competent in the practice and application of clinical psychology and can integrate the scientific literature into their clinical work.

Objective 2a for Goal #2: Training of students to competency in knowledge and skills related to interviewing, assessment, and diagnosis

Competency 2a1: Proficiency in the psychometric and ethical bases of assessment

Competency 2a2: Knowledge of DSM diagnoses and skill in the diagnosis of clients.

Competency 2a3: Proficiency in administering well-validated and widely used instruments that assess intellectual functions, achievement, and psychopathology.

Objective 2b for Goal #2: Training of students to develop knowledge and skills related to the proficient administration of psychosocial interventions

Competency 2b1: Knowledge of the skills necessary to establish and maintain a working alliance with clients.

Competency 2b2: Knowledge of the skills necessary to develop case formulations and treatment plans based on assessment data and knowledge of evidence-based treatments.

Objective 2c for Goal #2: Apply the knowledge obtained in objective 1c (acquire knowledge regarding issues of cultural and individual diversity) to service delivery

Competency 2c1: Development of an attitude of respect for others' standards, practices and beliefs related to health and psychological functioning.

Competency 2c2: Knowledge of the skills necessary in utilizing cultural context in the diagnosis and treatment of psychopathology.

TIMELINE FOR GRADUATE STUDY

TIMELINE FOR DEGREE:

YEAR 1

Research: Develop and propose master's thesis

Clinical Work: In conjunction with Psychology 481, students will conduct interviews of adults from the subject pool. In conjunction with Psychology 581, students will observe and conduct intake interviews in OAPS. Students will also begin their assessment training / practicum (PSCH582) in the spring / summer.

Required Courses:

FALL

Course #	Course Name	Credit hours
591	Research Apprenticeship	0 hrs.
595	Methods & Measures in Clinical Psychology	2 hrs.
594	Advanced Special Topics in Psychology (continuation of 595)	1 hr.
571	Psychopathology	3 hrs.
481	Interviewing	1 hr.
581	Practicum in Interviewing	1 hr.
543	Research Design & Analysis	4 hrs.
579	Current Topics in Clinical Psychology ("Brown Bag")	1 hr.
508	Colloquium on the Teaching of Psychology	1 hr.
507	Emerging Research Issues	1 hr.
584	** Practicum for Clinical Trainees	1 hr.
541	* Introduction to Computing in Psychology	1 hr.

^{*} Students with substantial experience with data analysis see 543 instructor for information regarding having this requirement waived.

SPRING

Course #	Course Name	Credit Hours
591	Research Apprenticeship	0 hrs.
582	Practicum in Psychological Assessment	4 hrs.
545	Multivariate Analysis	3 hrs.
579	Current Topics in Clinical Psychology ("Brown Bag")	1 hr.
584	**Practicum for Clinical Trainees on Assessment,	
	Intervention and Research	2 hrs.
507	Emerging Research Issues	1 hr.
If offered, take 575 or 577. If neither is offered, take a course to fulfill breadth or minor.		
575 or	Psychotherapy Theory and Research (575) or	3 hrs.
577	Ethics and Professional Development (577)	3 hrs.

^{**(}Note: Whenever a student is involved in clinical work, he/ she must enroll in PSCH 584 to receive liability coverage from the University.)

^{*** (}Note: For full-time status, a minimum of 9 credit hours must be taken each semester.)

YEAR 2

Research: Conduct master's research and defend master's thesis

Clinical Work: OAPS Year 2 Practicum*:

Required Courses:

FALL

Course #	Course Name	Credit hours
598	M.A. Thesis	3 hrs.
582	Practicum in Psychological Assessment	4 hrs.
574	Techniques of Psychological Interventions	3 hrs.
584	Practicum for Clinical Trainees on Assessment,	
	Intervention and Research	2 hrs.
579	Current Topics in Clinical Psychology ("Brown Bag")	1 hr.
Electives to complete Minor or APA Breadth Requirements 3-6		3-6 hrs.

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Course #	Course Name	Credit hours
598	M.A. Thesis	3 hrs.
584	Practicum for Clinical Trainees on Assessment,	
	Intervention and Research	2 hrs.
579	Current Topics in Clinical Psychology ("Brown Bag")	1 hr.
If offered, take 575 or 577		
575 or	Psychotherapy Theory and Research (575) or	3 hrs.
577	Ethics and Professional Development (577)	3 hrs.
Electives to complete Minor or APA Breadth Requirements 3-6 hrs.		

^{*}Students are required to conduct a minimum of six psychodiagnostic assessment cases through OAPS during their time in the program. Students start to see therapy clients during the 2nd year. See Clinical Training section for more information.

YEAR 3

Research: Propose and Defend Prelim

Clinical Work: 1) OAPS Year 3 Practicum*

2) Turn in petition for external practicum for year 4, if desired.

Required Courses:

FALL

Course #	Course Name	Credit Hours
598	M.A. Thesis	1 hr.
583	Practicum in Clinical Interventions	4 hrs.
584	Practicum for Clinical Trainees on Assessment,	
	Intervention and Research	2 hrs.
579	Current Topics in Clinical Psychology ("Brown Bag")	1 hr.
Electives to complete Minor or APA Breadth Requirements 3-6 hrs.		

SPRING

Course #	Course Name	Credit Hours
598	M.A. Thesis	1 hr.
583	Practicum in Clinical Interventions	4 hrs.
584	Practicum for Clinical Trainees on Assessment,	
	Intervention and Research	2 hrs.
579	Current Topics in Clinical Psychology ("Brown Bag")	1 hr.
	Electives to complete Minor and APA Breadth Requirements	3-6 hrs.
If not yet i	taken, 575 or 577	
575 or	Psychotherapy Theory and Research (575) or	3 hrs.
577	Ethics and Professional Development (577)	3 hrs.

^{*}Students continue seeing assessment cases and hold a full caseload of 4 therapy clients. See Clinical Training section for more information.

YEAR 4

Research Timeline: Propose dissertation*

Clinical Work: 1) Practicum at OAPS or external practicum

2) Turn in petition for external practicum for year 5, if desired

Required Courses:

FALL

Course #	Course Name	Credit Hours
599	Dissertation Hours	4-10 hrs.
505	Advanced History of Psychology	
	(may be offered in the spring rather than fall)	3 hrs.
	Electives to complete Minor and APA Breadth Requirements	3-9 hrs.
584**	12 hr. externship strongly recommended	1-4 hrs.

SPRING

Course #	Course Name	Credit Hours
599	Dissertation Hours	4-10 hrs.
	Electives to complete Minor and APA Breadth Requirements	3-9 hrs.
584	12 hr. externship strongly recommended	1-4 hrs.

^{*}See the departmental handbook regarding committee membership. Of note is that the clinical program requires that at least two members of your dissertation be affiliate or core faculty members of the clinical program.

YEAR 5

Research Timeline: Defend Dissertation

Clinical Work: 1) Apply for internship

2) Practicum at OAPS or external practicum (optional)

Courses: Complete any requirements, including teaching, not yet met.

APA Breadth Requirements

Because the field of clinical psychology rests on a foundation of basic psychological science, it is important that you have a strong grounding in areas outside the substantive and applied aspects of clinical psychology. Accordingly, APA and State licensing boards require that you have meaningful exposure to certain specified content areas. The required courses in the clinical curriculum cover some of these areas (e.g., "individual differences," and are not listed below), but courses outside of the Division are required. More specifically, students must take courses that address the following topic areas: developmental psychology, social psychology, cognitive bases of behavior, and biological bases of behavior. Listed below are course offerings that can be taken to fulfill each of these domains of study. This list is not exhaustive and you are encouraged to consult with the Director of Clinical Training to receive permission to take a course that is not on the list, but that would appear to satisfy a requirement in one or another of the Breadth domains. Because some licensing boards will literally review transcripts to assure that Breadth courses appear on the transcript, and the titles of some courses may be ambiguous with respect to their content, it is imperative that you save all course syllabi forever! We offer the following courses as guidelines. Any of these courses will fulfill the Division's APA Breadth requirement. However, there is no guarantee that a licensing board will accept a given course as fulfilling their requirements. Please consult with the Division about a particular course. Submitting the syllabus to us, before you enroll, would be invaluable.

Menu of courses that qualify for the APA Breadth Requirement

Biological Bases of Behavior:

Psychology 462: Advanced Physiological Psychology

Psychology 483: Neuroanatomy Psychology 485: Neuroscience II

Psychology 564: Clinical Psychopharmacology Psychology 568: Seminar in Biopsychology

[note: course content varies by semester and is subject to verification by clinical faculty]

Cognitive Bases of Behavior:

Psychology 457: Cognitive Psychology of Skill and Knowledge Acquisition

Psychology 455: Cognitive Psychology of Thinking

Psychology 452: Cognitive Psychology of Memory and Attention

Social Bases of Behavior:

Psychology 415: Social Bases of Health Behavior Psychology 512: Attitudes and Social Cognition

Developmental Psychology

Psychology 526 (or 594 [check course title]): Lifespan Development

The Minor

All students must select a minor area of concentration by the end of the third semester. This involves completing a form regarding the minor that can be obtained from the graduate secretary. As stated in the *Handbook for Graduate Study*, "The purpose of requiring a Minor is to assure that students are broadly exposed to bodies of knowledge and skills outside their major area that may help to improve the quality of their scholarship and research. Although this exposure is not as extensive as the training a student receives in a major Division, the Minor educates a student about the core literatures, theories, and research methods of that area. There are four types of Minors that students have the option of completing: (a) Divisional Minors; (b) Special Topics Minors (Statistics, Methods and Measurement; Psychology and Law), (c) Student Designed Curriculum Minors, and (d) the Breadth Minor.

The clinical division faculty <u>strongly encourage</u> students to select the Breadth minor, which consists of four courses - the three APA required Breadth courses covering cognitive bases of behavior, social bases, and biological bases, and the course in lifespan development. Please refer to the *Graduate Handbook* for the course requirements for Divisional and Special Topics Minors. The Student Designed Minor consists of either four courses or three courses and two semesters of Brown Bags outside of the Clinical Division. There are several things to keep in mind if you choose to declare this sort of Minor. First, this Minor is expected to have some relation to either your program of research or your career goals. Second, courses that count toward any type of Minor may also be used to fulfill the APA Breadth Requirement. Third, students are expected to consult with their academic advisor when selecting a Minor and, especially, when designing one's own Minor.

Annual Evaluations

Every year, the clinical division evaluates all students with respect to their research productivity and contributions, coursework, clinical work and professional development. The Director of Clinical Training, in conjunction with all clinical faculty members, sends a feedback letter and evaluation form describing the results of the evaluations to each student. In accordance with the APA policy on the "Comprehensive Evaluation of Student-Trainee Competence in Professional Psychology Programs," faculty and supervisors will evaluate students' competence in areas other than, and in addition to, coursework, seminars, scholarship, prelims, and program requirements. These evaluative areas include, but are not limited to, demonstration of sufficient (a) interpersonal and professional competence (e.g., the manner in which student-trainees relate to clients, peers, faculty, allied professionals, the public, and individuals from diverse backgrounds or histories); (b) self-awareness, self-reflection, and selfevaluation (e.g., knowledge of the content and potential impact of one's own beliefs and values on clients, peers, faculty, allied professionals, the public, and individuals from diverse backgrounds or histories); (c) openness to processes of supervision (e.g., the ability and willingness to explore issues that either interfere with the appropriate provision of care or impede professional development or functioning); and (d) resolution of issues or problems that interfere with professional development or functioning in a satisfactory manner (e.g., by responding constructively to feedback from supervisors or program faculty; by the successful completion of remediation plans; by participating in personal therapy in order to resolve issues or problems). A full statement of the APA policy on the "Comprehensive Evaluation of Student-Trainee Competence in Professional Psychology Programs" can be found on page 24.

Preliminary Examination: Policy and Procedures

Policy

The Clinical Preliminary Examination consists of two parts: a written paper by the student and a faculty review of your academic and clinical progress in the program. The paper may be a data- based, journal-format article or a literature review. In either case, the paper should demonstrate clear relevance to the field of clinical psychology. In addition, one important function of the paper is to provide you with an opportunity to gain a publication. You should be the sole author of the Prelim paper. However, the published version may be co-authored. If the paper is associated with a collaborative effort with a faculty member on a book chapter, literature review, or study, it is not acceptable to submit a co-authored manuscript as the final product. In other words, the paper must be a "stand alone" document by which we can evaluate your ability to think and write independently. Your faculty advisor will give you feedback on the proposal, and your advisors and others will address specific questions you raise during the process of writing the paper; however, the final paper is written independently. The second aspect of the Preliminary examination consists of an evaluation, by the Division, of your entire academic and clinical performance to date, from entrance to the program to the completion of the Prelim paper. If notable deficits are identified, the Division will decide whether to require remediation or deny admission to doctoral candidacy.

Procedures

- 1. You should submit a 3-5 page, single spaced proposal to all members of the clinical faculty. The nature of the project will determine the content of the proposal. If the paper is a literature review, the proposal should include the following elements: a brief summary of what is known about the field, a description of what we need to know, and a description of how the review will move the field forward. If the project is an empirical study, the proposal should include a brief introduction including hypotheses (2 pages), a description of the study design, measures, and participants (two pages), and an overview of the data analyses. All proposals should address the paper's relation to the student's master's thesis and a time line for completion of the project. The Prelim paper should not be a minor variation of the thesis, but may be part of a program of research. The project should take one to two semesters to complete.
- 2. Members of the Division will discuss the proposal and decide whether to accept the proposal as submitted, reject the proposal as inconsistent with the Division's Prelim policy, or offer suggestions for changes. In the latter case, you may be asked to resubmit a revised proposal or it may be recommended that you work with the Oversight Committee to address the issues raised by the Division. If a resubmission of the proposal is requested, the feedback letter from the DCT should be attached.
- 3. Upon Division approval of the proposal, the Director of Clinical Training will appoint a three-person Oversight Committee that will be responsible for reading the paper. When submitting the paper to the Committee, all correspondences with the Division (or DCT) pertaining to the approval of the paper should be attached. The Chairperson of the committee will convey to you the committee's evaluation. In addition, the final paper must be submitted in a format ready for submission. If the paper is a literature review, please consult relevant journals (e.g., Clinical Psychology Review, Psychological Bulletin) for formatting directions. As soon as the Oversight Committee is formed, the student should speak with the graduate program coordinator (Jennifer Vaisnoras) about generating the paperwork for forming the preliminary exam committee. When

- the Oversight Committee approves the paper, the Division will convene to receive the comments of the Committee and review your academic and clinical performance.
- 4. The Director of Clinical Training will provide you with the Division's decision about passing the Preliminary examination.
- 5. The Oversight Committee and two members of the Clinical Division will sign official documents for the Graduate College.

Clinical Training

The applied aspect of clinical training is accomplished through a series of practica experiences that begin in the first year and progresses by way of case complexity and level of time commitment. Three years of clinical training at OAPS are required.

Students receive their required training at the Office of Applied Psychological Services (OAPS), our inhouse clinic, which is located on the third floor of the Behavioral Sciences Building. The first semester of Year 1, students enroll in Interviewing (481) and Practicum in Interviewing (581) to learn basic interviewing skills first with a nonclinical population, and then with a clinical population, in which Intake interviews are conducted under the mentorship of an advanced student and supervision of a faculty member. We expect that you will spend, on average, 2-4 hours a week in direct client contact. Students need to enroll in Psychology 584 which provides malpractice insurance. They should enroll in this course every semester during which they are seeing clients (whether through OAPS or on externship).

In the spring semester Year 1, students begin a two-semester Assessment practicum, with a didactic component (Psch 582), in which the major focus is on the administration and interpretation of intellectual, personality, neuropsychological, and psychopathology tests, as well as behavioral assessments. The Assessment practicum continues into the fall semester of Year 2. Throughout their time at OAPS, clinicians are assigned assessment cases in order to fulfill the minimum number of required assessment cases.

Students enroll in Techniques of Psychological Interventions (PSCH 574) in the fall semester of their second year. Near the end of this semester and at the discretion of the instructor, they will be assigned their first clients at OAPS. Clients are assigned progressively throughout the second year as the clinician develops and clients are available. By the beginning of the Year 3, students are expected to carry a full caseload of four therapy clients at OAPS. The primary training focus in Year 3 is on interventions, with a weekly didactic component (Psch 583).

The time demand for training (once students get a full caseload) is expected to be, on average, 10-12 hours a week, including supervision, with 6 full assessments to be completed and an ongoing case load of 4 clients in Year 3. Supervision takes place year round. Students are expected to continue their clinical activities at OAPS over the summer. The primary theoretical and technical emphasis of our Program is Cognitive-Behavioral, consistent with our focus on evidence-based treatments. Ethics is covered in the context of didactic practicum courses. In addition, the Department offers a required course in Ethics.

Students who wish to do a practicum in the fourth year or beyond, should submit a request to the division, following the procedures outlined below in the section on External Practica.

Malpractice Insurance and Psychology 584

Students MUST enroll in Psychology 584 every semester during which they see clients. Typically, this means that students enroll continuously in this course from the first semester of the first year until they complete graduate studies. Students may also want to get separate malpractice insurance from APA. Student rates are available (http://www.apait.org/apait/products/studentliability/).

The Office of Applied Psychological Services (OAPS)

OAPS is the main site for clinical training in Years 1-3. The clinic serves a diverse population from the Chicago metropolitan area. Part of the mission of OAPS is to provide training consistent with the mission of the Program. First, this means that students receive clinical training in evidence-based approaches to assessment and treatment. Second, OAPS offers training in areas related to faculty research. For example, assessments and treatments designed for clients with health problems, perhaps in collaboration with staff at the Medical Center, complement the Health Psychology specialization in the Department. Students are supervised by licensed clinical psychologists.

The director of OAPS has responsibilities that are discussed with students at the fall semester orientation. In general, the director initiates and responds to referral sources to facilitate client flow, identifies rich, educational opportunities for clinical work, provides direct clinical supervision and assures that all of the supervision at OAPS is of the highest quality. Supervisory coverage is available throughout the year. The clinic operates year round and is typically only closed when the university is officially closed and on official holidays. Some advanced graduate students are selected to serve as paid Clinic Assistants and help in the running of the clinic, thus receiving valuable experience useful for entry to post-graduate administrative positions.

An updated clinic handbook devoted to policies and procedures of OAPS, including sample reports and therapy notes, is located on the department website under handbooks (https://home.psch.uic.edu/content/clinical-handbooks-and-brochure). Please refer to that handbook for more specific questions regarding the operation of OAPS outside of the division requirements.

Practica Arrangements Outside of the Department

OAPS is the practicum site for students in the first three years of the clinical program. A completed MA thesis is a prerequisite for applying for an externship. Most Chicago sites require a formal application, letters of reference, and an interview. The application process and deadlines are specific to the institution, but interviews typically take place in December through February. Students applying for externship are encouraged to submit a list of possible sites to the division and to complete a "Request to Apply for Externship Form" (see Appendix I) by September 30. Students are strongly advised to select sites that require no more than 12 hours/week. The site must provide supervision by a Ph.D. psychologist, espouse evidenced-based practices, and provide adequate supervision (approximately 2 hours/week). Students will need to procure a signed letter of agreement from the site, indicating that these conditions will be met. This is available from the DCT.

The faculty will review students' requests in light of each student's progress through the program, the relationship between the training provided at the externship, the student's research and career goals, and the student's other ongoing clinical activities, including Research Assistantships with clinical responsibilities. Students who would like to be considered for practica requiring more than 12

hours/week *must* be up to date on all program requirements. Students who participate in an outside practicum will also be asked to sign a release form allowing us to exchange information with the practicum supervisor regarding students' performance in the clinical program and the practicum. Students will also need to get a signed Affiliation Agreement between the site and the University of Illinois. This agreement can be downloaded at http://www.obfs.uillinois.edu/common/pages/DisplayFile.aspx?itemId=922123

The DCT will coordinate off-campus practica experiences, all of which will require at least one letter of recommendation from a supervisor at OAPS. The most valuable source of information about the day-to-day experiences at any given site comes from advanced students who have worked there. A list of externship sites is found in Appendix II. The sites on the list are ones which students have attended in the past or come highly recommended. If you are interested in any other sites, please let us know, and we will work with you to determine whether the site is acceptable. All students doing a practicum (whether its OAPS or non-OAPS) <u>must</u> enroll in PSYCH 584 so that liability coverage is assured. Once you accept a non-OAPS practica, please email the DCT and Suzy Martin who keeps a record of this. For non-UIC practica, Suzy will draw up a contract that will need to be signed.

Grades for Psychology 584

A "pass" in psychology 584 is contingent upon up-to-date record keeping at OAPS and turning in clinical supervisors' student evaluations each semester.

Tracking Clinical Hours

Internships require that students report the number of hours of practicum training they accrued during graduate training. There are several commercial programs available for tracking these hours on line. *Time 2 Track* has received good reviews from current students. You may enroll at the group rate (currently \$33/year), contact the DCT for more information regarding the group rate.

Social Networking Policy

Social networking opportunities have become increasingly common in our private and professional lives. Given that social networking is by its nature public and highly visible, clinicians must consider the impact of this information on their professional communication and image. The UIC Clinical Division has an interest in how clinicians present themselves professionally. Therefore, the Division has developed the following policy for all clinical students. In this policy, you will find two parts: first, what you should know about social networking; and second, the Division's rules and guidelines for social networking.

(This policy is adapted from policies at University of Kansas and University of South Dakota.)

What you should know:

Many students have personal websites; Facebook, Twitter, and Linked-In pages; blogs; email signature lines and status messages (i.e., G-chat); and voicemail messages that are entertaining and reflect their personal preferences and personalities. However, these electronic media may be accessed or used in ways that extend beyond their original intent. What may seem to be fun, informative, and candid might actually put the student and, by extension, the UIC Clinical Psychology program, UIC, and/or the profession in a bad light.

The Council of University Directors of Clinical Psychology (CUDCP) has shared information with member programs concerning the potential implications of information clinical graduate students share in various electronic modalities. This information includes the following:

- Some internship programs conduct web searches on applicants' names before inviting applicants for interviews and before deciding to rank applicants in the match.
- Clients may conduct web-based searches on trainees' names and find information about therapists (and may decline to come to clinics based on what they find).
- Employers sometimes conduct on-line searches of potential employees prior to interviews and job offers.
- Legal authorities are looking at websites for evidence of illegal activities. Some prima facie evidence may be gained from websites such as photographs, but text may also alert authorities to investigate further.
- A student's postings on a variety of listservs (psychology or otherwise) might reflect poorly on the student and the student's program.
- Although signature lines are ways of indicating your uniqueness and philosophy, one is not in control
 of where the emails will end up and might affect how others view you as a professional. Quotations
 on personal philosophy, religious beliefs, and political attitudes might cause unanticipated adverse
 reactions from other people.
- Greetings on answering machines and voicemail messages that might be entertaining to your peers,
 express your individuality, and might be indications of your sense of humor may also not portray you
 in a positive professional manner. If you ever use your cell phone or home telephone for professional
 purposes (research, teaching, or clinical activities), be sure your greeting is appropriate and
 professional in demeanor and content.

OAPS Rules and Guidelines for Social Networking:

The following rules and guidelines apply to all students in the Clinical Division. If questions emerge about specific situations and/or rules, please consult a DCT, OAPS director, or Clinic Assistant. Students are strongly advised to do the following:

- Block clients, students, research participants, and other professional contacts from seeing email status messages (i.e., G-chat) and personal photographs.
- Conduct periodic Google searches on yourself to find out what information can be accessed about you on the Internet.
- Remove nonacademic or nonprofessional electronic signatures from emails sent to clients, students, research participants, and other professional contacts. Use your UIC email address to contact clients and others for UIC and OAPS-related business.
- Set website privacy settings to highest privacy settings available (i.e., "Friends only") on Facebook, Twitter, and other social networking websites. Monitor these privacy settings periodically to ensure that privacy settings previously selected remain intact.
- Make sure that voicemail greetings to which professional contacts have access remain professional.
- Never become a "friend" of a therapy or testing client online, thereby enabling them to access personal information about you.

Internship

In order to successfully complete the requirements of the Clinical Division, an internship is required. We strongly urge students to only consider APA approved internships. This not only provides some evidence of quality control, it is consistent with the mission of the Clinical Program. In addition, many states require an APA approved internship for licensure, and most academic clinical positions require an APA approved internship. Nevertheless, whereas UIC does not require students to complete an internship to receive the Ph.D. in Psychology, only students who have successfully completed the requirements of the Clinical Division, including an internship, can claim they have graduated from an approved clinical program. Students who graduate without an internship get a Ph.D. in psychology from UIC, but are considered "drop outs" from APA's perspective, and can not claim to have a clinical degree. Students who apply for internship will need to sign an agreement allowing communication between the internship and the clinical program regarding the student's performance.

Applying for Internship

To apply for internship you must have an approved dissertation proposal by September 30 of the year in which you intend to submit the application. Absolutely no exceptions to this deadline will be made.

Most of the APA approved internships are listed in the Association of Psychology Postdoctoral and Internship Centers (APPIC) Directory. The Clinical Program is a member of APPIC and, consequently, students can purchase the Directory at a reduced cost. APPIC internship application forms are available online at http://www.appic.org/

The number of clinical hours our students accrue is quite variable, but typically falls within a range of 600–1400 total hours with 450 – 800 direct contact hours. The Council of University Directors of Clinical Psychology Programs recommends a minimum of 450 face-to-face hours of assessment/intervention and at least 150 hours of supervision. You are required to keep a running count of your clinical activities from the beginning of the second semester of Year 1 (PSYCH 581). Bear in mind that you can count clinical activities, even if they do not occur in the context of a course. For example, some students receive supervision of clinical work in the context of a Research Assistantship, or by helping a friend interview research participants. All activities must be accompanied by supervision from a doctoral level psychologist. As per Illinois law ([225 ILCS 15/3] [from Ch. 111, par. 5353]), all psychologists who do supervision must be licensed.

It is the match between your experiences and goals and those of the particular internship site that help you match with the internship of your choice. Over the years, our students have been very successful in obtaining their top choices, likely because they are mindful to apply to sites that share the values of our Program. In addition, although there are many excellent internship sites in Chicago, there is obvious merit in applying nationally, thereby not geographically restricting oneself.

Internship programs associated with APPIC use identical forms (some have additional forms as well) that ask for the nature and amount of clinical activity, which includes supervision. The APPIC web site has the form for downloading and we suggest you familiarize yourself now with the form to aid you in how to organize the counting of your clinical experiences as you progress through the program.

Finally, some sites will request a testing report or case summary. It is a good idea to seek permission from clients while you are seeing them and it is essential to remove all identifying information from reports you submit to internship sites. You do not need permission from your clients to discuss your clinical experiences during a placement interview.

Dissertation Defense and Internship

Most state licensing boards require that the internship be construed as a predoctoral experience. For this reason, it is ultimately in your best interest to time graduation to coincide with the end of your internship. You may, however, defend your dissertation at any time during your internship, in which case you will submit the necessary paperwork with the Graduate College so that your official graduation date is post-internship. Of course, the ideal situation is to have the dissertation written before leaving campus so that you can devote exclusive attention to the time demands of the internship.

Registration

- 1. University policy requires students to be registered from the time they pass their prelim until they defend their dissertation with the possible exception of summer semester. Students must be registered during the semester that they defend their dissertation. Summer registration is not required unless you are seeing clients (and thus need to register for 584) or defending your dissertation. You are not required to be registered any semester after your defense unless you are an international student, need to take out student loans, need your loans deferred, or need to earn additional credits. The Free Standing Waiver is the most popular option.
- 2. Although you have to be registered the semester of the final defense, you don't need to be registered the semester you graduate.
- 3. If you choose to register while on internship, there is a relatively inexpensive way to do so. You register for zero credit hours under Option A or Option B (see below). All coursework must be completed beforehand, any petitions that need to be filed must be completed, and the graduate coordinator has to review your file to make sure that you have met all course requirements.

Option A: Zero Hour Registration

This option is very rarely used in our department. Zero Hour Option A is for students who are on campus, completed the preliminary exam and all course requirements, and do not have a funding option. Students who request Option A are charged Zero Hour Tuition, ALL Fees, and Tuition Differential.

Option A is for students using UIC facilities. It includes Health Services and costs roughly twice as much as Option B. This is for advanced students who have completed all course requirements, and who have undergone a course credit check in the department, and who are using university facilities (library, computers, health service, UIHMO insurance). These students pay tuition for zero hours plus fees. A University Tuition and Fee Waiver is less costly to students than registration under Option A. Students who are awarded a tuition and fee waiver must maintain registration for 9 hours in Fall and Spring semesters.

Option B: Zero Hour Registration

This option is for students who have completed the preliminary exam, all course requirements, and will NOT be on campus. Students who request Option B are charged Zero Hour Tuition and the Tuition Differential. Students are not eligible for Campus Care, cannot take out student loans, and do not receive a U-pass with this zero hour option. Your student loans will be continued to be deferred if you register for zero hours. If you choose to register for zero hours please tell the graduate coordinator at least 1 week before the start of the semester so the paperwork can be submitted on time.

This option is for students who aren't using UIC facilities. It costs around \$1000. These students are typically living outside of Illinois. These students pay tuition for zero hours only, and not for fees. Students actually pay slightly less to register for zero hours under this option compared with a tuition and fee waiver.

Note that zero hour petitions are due in the Graduate College by the 5th day of the Fall or Spring semester, and prior to the start of the Summer semester. That means you must begin the process before school begins in order to obtain the necessary signatures and meet the deadline. In addition, students must complete the departmental credit check prior to petitioning for zero hours. Please consult with the Graduate Coordinator (BSB 1063) well in advance!

Free Standing Waivers

Each semester the department is given a few (traditionally 7) free standing waivers to give to our graduate students. If you are interested in receiving a waiver you must put in a request to Ed Sargis EACH SEMESTER through the TA Request Survey that he sends out to PSYCH-ALL. The free standing waivers require that students register for 12 hours – this waiver covers the Tuition, Tuition Differential, Service Fee, Health Service Fee, AFMFA Fee, and Library Fee. This registration option works just like a TA/RA waiver and you receive all of the regular registration benefits – the UIC gym, on campus library, upass, etc.

Things to do before you leave for internship

- Return your keys to Vanessa, your keys are numbered and signed out to you you must return your keys directly to Vanessa do not give them to anyone else! If you are going to be in Chicago and think you will be on campus for lab meetings, etc. you can hold onto your keys.
- Make sure all therapy/testing files are complete and closed on Titanium (see OAPS Manual)
- Clean out your desk or workspace
- Talk to Rita and let her know that you will be leaving and ask her to take your mailbox out of the room.
- Check your UIC ID to make sure it won't expire while you are out on internship.
- Log into your MyUIC account and make sure your contact information is up to date.

Graduation/Commencement

• If you would like to walk in the Spring Commencement you will need to fill out the online Intent to Graduate Form during the first two weeks of the spring semester. LAS will send out

- information regarding the ceremony to the students who completed this online form if you don't fill out this form you will not be eligible to participate in the ceremony.
- APA requires that your official graduation date (date on diploma not commencement) must be AFTER your last day of internship.

Defense

- As soon as you know the date of your defense PLEASE let the coordinator know. There is a lot
 of paperwork that needs to be submitted before, during, and after your defense and the process
 will be much easier for you if you let the coordinator know 2-3 weeks in advance. The
 coordinator will help you complete the required forms, find a room, and send out your official
 defense announcement.
- After you defend there will be a TON of paperwork that will need to be turned into the Graduate College this can all be done remotely and submitted through the Graduate College ETD.
 http://grad.uic.edu/cms/?pid=1000916 You can email the graduate coordinator the forms that need to be turned into the Graduate College in hard copy format and the coordinator will turn them in for you.

Requirements of the Clinical Division Minor

As a student in the Clinical Division you would, naturally, never minor in clinical psychology. For students outside the Division, here are the requirements of the Clinical Division Minor.

Required courses (One course from each of three core areas, plus 579)

Psychopathology:

Psychology 571: Advanced Psychopathology

Basic Concepts and Assessment:

Psychology 595: Methods and Measures in Clinical Psychology

Interventions:

Psychology 574: Techniques of Psychological Intervention

Psychology 575: Psychotherapy Theory and Research

Psychology 579 (2 semesters): Current Topics in Clinical Psychology ("Brown Bag")

Information About Graduate Studies in Psychology at UIC

In addition to this *Clinical Division Student Handbook*, which is specific to the Clinical Division, there exist several other sources of essential information. <u>Do not rely solely on this *Handbook* to learn about the Graduate program</u>. The most important source of information is the *Handbook for Graduate Study in Psychology*. It contains virtually everything you need to know about Department policies, procedures, deadlines, facilities, course requirements and funding. It also includes information regarding Due Process Policy (under Student Disciplinary Procedures) and Grievance Procedures. If you have a question about the graduate program, the odds are that the answer is in this document. Updates to the *Handbook for Graduate Study in Psychology* can be found at the Department's web site: http://home.psch.uic.edu, under Academics/Graduate Program/Handbooks and Documents. A statement of the Psychology Department's Grievance Procedures also appears as a separate document under the heading "other documents".

The Department also maintains a listserve ("Psychall"), which includes all faculty and graduate students. Important announcements are communicated through the listserve. Another important source of information is the Graduate College website, available at: http://grad.uic.edu/cms/. The website includes information about scholarships, travel awards, courses available in various Departments, and includes important information about Graduate College guidelines and policies. There is also a *Student Orientation Week Handbook* that everyone receives during the week of orientation, just before the first semester of Year 1. This document includes useful information from the specific (where to get office keys, a campus ID, etc.) to the general (fitness and sports facilities, tours of Chicago, and so on). Finally, the Clinical Division maintains a web page that lists Division faculty, their areas of research, and representative publications. These pages are accessible via the Department web site (see above link) under Divisions/Clinical.

Commonly Asked Questions About Licensure

Before entering UIC's Program I was engaged in fee-for-service clinical activity. May I continue to offer services?

No. Ethical and legal considerations preclude students from maintaining an independent practice, even if licensed to do so (e.g., Certified Alcohol Counselor, Social Worker, Marriage

and Family Counselor, etc.). If you think your situation is unique (e.g., management consultant), please discuss it with your advisor.

Does UIC's Program provide all the course and practicum experiences necessary for licensure in all States?

No! It is impossible for any one Program to meet the changing requirements of 50 licensing boards. We do, however, provide training that is acceptable to Illinois' board. If you plan to seek licensure in another State, be sure to apprise yourself of that State's requirements.

Disability Services

The Clinical Division of the Department of Psychology recognizes that graduate students with disabilities may need additional support in graduate school. Some students may need additional resources, accommodations and modifications to curricula, program expectations (i.e. timelines), classroom, office and lab space, and program related equipment. Many of these needs can be accommodated through the UIC Office of Disability Services, however, some specialized accommodations (e.g., modification of clinic resources) are handled through the department. Although the division will make every effort possible to accommodate the diverse needs of students, it remains the student's responsibility to communicate these needs to the department. We recommend that students with special needs or disabilities meet with the Director of Clinical Training, the Director of Graduate Studies, and their academic advisor early in their first semester in order to work collaboratively to develop an individualized plan in which the student can make adequate academic progress. Graduate students with disabilities may seek additional academic support and resources from the UIC Office of Disability Services: Office of Disability Services (M/C 321), 1200 West Harrison Street (1190 SSB), Chicago, IL 60607; 312 413-2183; Voice 312 413-0123; TTY 312 413-7781

The Comprehensive Evaluation of Student-Trainee Competence in Professional Psychology Programs¹

II. Model Policy

Students and trainees in professional psychology programs (at the doctoral, internship, or postdoctoral level) should know—prior to program entry, and at the outset of training—that faculty, training staff, supervisors, and administrators have a professional, ethical, and potentially legal obligation to: (a) establish criteria and methods through which aspects of competence other than, and in addition to, a student-trainee's knowledge or skills may be assessed (including, but not limited to, emotional stability and well being, interpersonal skills, professional development, and personal fitness for practice); and, (b) ensure—insofar as possible—that the student-trainees who complete their programs are competent to manage future relationships (e.g., client, collegial, professional, public, scholarly, supervisory, teaching) in an effective and appropriate manner. Because of this commitment, and within the parameters of their administrative authority, professional psychology education and training programs, faculty, training staff, supervisors, and administrators strive not to advance, recommend, or graduate students or trainees with demonstrable problems (e.g., cognitive, emotional, psychological, interpersonal, technical, and ethical) that may interfere with professional competence to other programs, the profession, employers, or the public at large.

As such, within a developmental framework, and with due regard to the inherent power difference between students and faculty, students and trainees should know that their faculty, training staff, and supervisors will evaluate their competence in areas other than, and in addition to, coursework, seminars, scholarship, comprehensive examinations, or related program requirements. These evaluative areas include, but are not limited to, demonstration of sufficient: (a) interpersonal and professional competence (e.g., the ways in which student-trainees relate to clients, peers, faculty, allied professionals, the public, and individuals from diverse backgrounds or histories); (b) self-awareness, self-reflection, and self-evaluation (e.g., knowledge of the content and potential impact of one's own beliefs and values on clients, peers, faculty, allied professionals, the public, and individuals from diverse backgrounds or histories); (c) openness to processes of supervision (e.g., the ability and willingness to explore issues that either interfere with the appropriate provision of care or impede professional development or functioning); and (d) resolution of issues or problems that interfere with professional development or

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¹ This document was developed by the Student Competence Task Force of the Council of Chairs of Training Councils (CCTC) (http://www.apa.org/ed/graduate/cctc.html) and approved by the CCTC on March 25, 2004. Impetus for this document arose from the need, identified by a number of CCTC members, that programs in professional psychology needed to clarify for themselves and their student-trainees that the comprehensive academic evaluation of student-trainee competence includes the evaluation of intrapersonal, interpersonal, and professional development and functioning. Because this crucial aspect of academic competency had not heretofore been well addressed by the profession of psychology, CCTC approved the establishment of a "Student Competence Task Force" to examine these issues and develop proposed language. This document was developed during 2003 and 2004 by a 17-member task force comprised of representatives from the various CCTC training councils. Individuals with particular knowledge of scholarship related to the evaluation of competency as well as relevant ethical and legal expertise were represented on this task force. The initial draft of this document was developed by the task force and distributed to all of the training councils represented on CCTC. Feedback was subsequently received from multiple perspectives and constituencies (e.g., student, doctoral, internship), and incorporated into this document, which was edited a final time by the task force and distributed to the CCTC for discussion. This document was approved by consensus at the 3/25/04 meeting of the CCTC with the following clarifications: (a) training councils or programs that adopt this "model policy" do so on a voluntary basis (i.e., it is not a "mandated" policy from CCTC); (b) should a training council or program choose to adopt this "model policy" in whole or in part, an opportunity should be provided to student-trainees to consent to this policy prior to entering a training program; (c) student-trainees should know that information relevant to the evaluation of competence as specified in this document may not be privileged information between the student-trainee and the program and/or appropriate representatives of the program.

functioning in a satisfactory manner (e.g., by responding constructively to feedback from supervisors or program faculty; by the successful completion of remediation plans; by participating in personal therapy in order to resolve issues or problems).

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

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

Clinical Division Members and Research Interests

Evelyn Behar

Associate Professor

behar@uic.edu

(Pennsylvania State University, 2005)

Anxiety disorders (especially GAD, PTSD, and panic), psychophysiological correlates of emotion and psychopathology, thought suppression, comorbidity, psychotherapy outcome research.

S. Bibiana Adames

Clinical Assistant Professor

sadames@uic.edu

(University of Illinois at Chicago, 2006)

Nancy Dassoff

Director of OAPS; Clinical Assistant Professor

ndassoff@uic.edu

(University of Illinois at Chicago, 1992)

Ellen Herbener

Associate Professor of Psychology and Psychiatry

eberbener@psych.uic.edu

(Harvard University, 1993)

Abnormalities in emotional functioning in schizophrenia, fMRI studies of emotional memory in schizophrenia, depressed, and health subjects; impact of emotion on long-term potentiation in schizophrenia and health subjects.

Jon Kassel

Professor, Co-Director of Clinical Training (DCT)

jkassel@uic.edu

(University of Pittsburgh, 1995)

Drugs' effects on emotion and attention, individual differences in drug dependence, cognitive models of depression, anxiety, and drug use.

Amanda Lorenz

Associate Director of OAPS, Co-Director of Clinical Training (DCT)

arlorenz@uic.edu

(University of Wisconsin at Madison, 2002)

David J. McKirnan

Associate Professor Emeritus

davidmck@uic.edu

(McGill University, Canada, 1978)

Behavioral medicine; health psychology; AIDS-related behavior; sex roles and sexual orientation; social psychological aspects of alcohol and drug abuse/use; cognitive processes in motivation and behavior change; field research methodology.

Robin J. Mermelstein

Professor

robinm@uic.edu

(University of Oregon, 1984)

Behavioral medicine; smoking cessation; health psychology; cancer prevention; health promotion, ecological momentary assessment.

Karina Reyes

Associate Professor

kreyes@uic.edu

(DePaul University, 1989).

Community and Prevention Research Minority education; community psychology; adolescence; resilience and protective factors in high-risk urban minority children and adolescents; the role of peer and other social support in academic adjustment; prevention of high-risk behaviors.

Stewart Shankman

Associate Professor

stewarts@uic.edu

(Stony Brook University, 2005)

Neurobehavioral mechanisms and correlates of depression and anxiety; classification of psychopathology.

Faculty Affiliated with the Clinical Division

Marc Atkins

Professor of Psychology in Psychiatry

Director of Institute of Juvenile Research

atkins@uic.edu

(Florida State University, 1985)

School-based mental health services for children in urban poverty; models for effective community mental health services; dissemination of evidence-based practices

Bette Bottoms

Professor

bbottoms@uic.edu

(SUNY at Buffalo, 1992)

Psychology and law, children's eyewitness testimony, jury decision making, child abuse and neglect, allegations of repressed memory

Daniel Cervone

Professor

dcervone@uic.edu

(Stanford University, 1985)

Social Cognition and Personality; Perceived Self-Efficacy; Goal Setting and Self-Regulation; Affect and Cognition

Melissa Lamar

Associate Professor of Psychology in Psychiatry

mlamar@psych.uic.edu

(Drexel University, 1999)

Dr. Lamar's research at UIC focuses on identifying factors disrupting neurocircuitry associated with the prefrontal cortex and the impact these factors have on executive dysfunction and depression in an aging population.

Scott Langenecker

Associate Professor of Psychiatry and Psychology

slangenecker@psych.uic.edu

(Marquette University, 2001)

Mechanisms of depression and mood disorders, predictors of treatment response, changes with treatment, predictors of relapse, neuroimaging and neuropsychological markers, intermediate phenotypes, L-HPA axis function and dysfunction

K. Luan Phan, M.D.

Professor of Psychiatry

klphan@psych.uic.edu

(University of Michigan Medical School, 1998)

1) Functional neuroanatomy of emotion, cognition, and decision making; 2) Functional neuroanatomy mood and anxiety disorders; 3) Neurofunctional markers of treatment response in mood and anxiety disorders; 4) Functional neuroimaging of drug effects on affective experience and cognition

Roger Weissberg

NoVo Foundation Endowed Chair in Social and Emotional Learning

rpw@uic.edu

(University of Rochester, 1980)

NoVo Foundation Endowed Chair in Social and Emotional Learning. Professor of Psychology and Education; President, Social and Emotional Learning (SEL) Research Group. School-family-community partnerships to promote positive youth development; Prevention of high-risk behaviors; urban children's mental health; educational leadership; assessment of social and emotional learning; social policy and children.

Amy West

Professor of Psychiatry

awest@psych.uic.edu

(University of Virginia, 2004)

Childhood mood disorders, particularly pediatric bipolar disorder; family-focused psychosocial treatment, CBT; child intervention research, treatment mechanisms; suicide; developmental psychopathology of child mood and anxiety disorders, temperament; community-based participatory research, cultural adaptations of evidence-based treatments, American Indian youth.

Katherine Zinsser

Assistant Professor

kzinsser@uic.edu

(George Mason University, 2013)

Social-emotional teaching practices and the formation of educational work-place environments that promote teacher and child well-being.

For additional information about members of the Clinical Division, please refer to our web site: http://psch.uic.edu/psychology/programs/clinical/faculty-affiliates.

APPENDIX I – Request to apply for Externship

REQUEST TO APPLY FOR AN EXTERNSHIP

Na	nme:	
Αc	lvisor:	
Yε	ear in Program:	
1.	Have you successfully defended your MA thesis? Yes No	
2.	If you haven't defended your thesis, what is your expected date of	of completion?
3.	Do you have any incomplete or deferred grades in the program? If yes, please explain	Yes No
4.	Are you participating in clinical activities outside of the externsh assistantships with significant clinical components)? If "yes", pl	- · · · -
5.	Below please list the externship sites that interest you. For each sinformation:	site, include the following

- a. Name of site:
 - b. Hours/week required:
 - c. Hours of supervision/week:
 - d. Degree of supervisors (Ph.D., Psy.D. [note: all supervisors must be licensed):
 - e. Therapeutic approaches:

APPENDIX II – Externship Sites

Externship Sites for UIC Clinical Psychology Students

Hines VA

- Address: Psychology Service (116B), Hines VA Hospital, Hines, IL 60141
- http://www.hines.va.gov/about/PsychP.asp
- Questions should be directed to Dr. Jeffrey Sieracki (2016-17 year)
 - o Phone: (708)202-8387 ext. 29933
 - o Fax: (708)499-3715
 - o Email: Jeffrey.Sieracki@va.gov
- Description: There are seven practica opportunities: 1) Neuropsychological Assessment 2) Substance Abuse Residential Rehabilitation Treatment Program 3) TBI/Polytrauma Psychology Outpatient Clinic 4) Trauma Services 5) Primary Care Behavioral Health 6) Psychosocial Rehabilitation and Recovery Center (PRRC) and 7) Spinal Cord Injury Program. Patients are primarily male veterans, but there are also opportunities with female veterans, couples, family, and significant others.

Jesse Brown VA

- Address: Psychology Section 116B, Jesse Brown VAMC, 820 S. Damen, Chicago, IL 60612
- Contact person: Kenneth Lehman, Ph.D. (2016-17)
 - o Phone number: (312) 569-7218
- Description: Mental health clinic provides the extern with experience in psychotherapy, psychological interviewing, and psychological testing for a veteran population with diverse ages, races, and diagnoses. Rotations vary from year to year depending upon staff supervision availability.

Rush Hospital, Child, and Pain and Oncology Centers

- Address: 1653 W. Congress Parkway; Chicago, IL 60612.
- Contact person (Psychosocial Oncology)
- Description: Assessments of adult cancer patients with co-morbid psychosocial issues. Opportunities to collaborate in research. Limited opportunities for therapy.
- There may be opportunities in other departments (i.e. pain clinic, pediatric services, etc) please contact those departments directly for more information.

Stroger/Cook County Hospital, Adult & Child Tracks (may not be available anymore)

- Address (Adolescent Psychiatry): 700 South Wood Street, Chicago, IL 60612
- Address (Adult Psychiatry): 1901 W. Harrison, Fantus Psychiatry Clinic, Chicago, IL 60612
- Contact person (Adolescent psychiatry): Rocco Domanico, Ph.D.
 - o Phone number: (312) 633-7878
- Contact person (Outpatient Treatment Facility): Jonathan Weinberg, Psy.D.
 - o Phone number: (312) 864-6490

University of Chicago Externships

- Address: Psychology Service (116B), Hines VA Hospital, Hines, IL 60141
- https://psychiatry.uchicago.edu/page/clinical-psychology-externship-programs

- Questions should be directed to Dr. Jeffrey Sieracki (2016-17 year)
 - o Phone: (708)202-8387 ext. 29933
 - o Fax: (708)499-3715
 - o Email: Jeffrey.Sieracki@va.gov
- Description: There are ten practica opportunities: 1) Adult Neuropsychology Externship 2) CBT Program 3) Eating Disorders Program Bariatric Surgery 4) Child/Adolescent Advanced Psychotherapy and Pediatric Psychology Externship 5) Addictions Externship 6) Adult Clinical Health Psychology 7) Eating Disorders Program 8) Severe Mental Illness Program 9) Pediatric Neuropsychology Externship and 10) Adult Behavioral Weight Management.. Patients are primarily male veterans, but there are also opportunities with female veterans, couples, family, and significant others.

http://www.psych.uic.edu/patientcare/clinical-programs

UIC Mood and Anxiety Disorders Clinic

- Address: UIC Department of Psychiatry, Stress and Anxiety Disorders Clinic, 912 S. Wood (MC 913), Chicago, IL 60612
- Contact person: Jennifer Frances, Ph.D.
 - o Phone number: (312) 413-8171
 - o E-mail: jfrancis@psych.uic.edu
- Description: Clinic offers structured CBT therapy for adult outpatients with anxiety disorders.

UIC Child Psychiatry/Pediatric Mood Disorders Clinic

- Address: Institute for Juvenile Research at UIC, 1747 W. Roosevelt Rd., Rm. 155 M/C 747, Chicago, IL
- Contact person: Amy West, Ph.D., L.C.P.
 - o Phone number: (312) 996-1077
 - o E-mail: awest@psych.uic.edu
- Description: The clinic's mission is to design, deliver, and develop state-of-the-art mental health interventions for children and families with disruptive behavior disorders and co-morbid problems. The clinic provides a range of evidence-based clinical psychology services for children, adolescents, families and groups.

UIC Health Psychology

- Address: UIC Psychiatry, Health Psychiatry, 912 S. Wood (MC 913), Chicago, IL 60612
- Contact person: Eric Prensky, Ph.D.
 - o Phone number: (312) 413-5795
 - o E-mail: eprensky@psych.uic.edu
- Description: Health psychology rotations with adults who are primarily outpatients.

UIC Institute for Juvenile Research/CAC (ADHD Clinic)

- Address: Institute for Juvenile Research, Department of Psychiatry (MC 747), 1747 W. Roosevelt Rd., University of Illinois at Chicago, Chicago, IL 60608
- Contact person: Marilyn Griffin, MD
- Description: Practicum is 80% diagnostic and 20% therapy for child, adolescent, and adult populations.

UIC Institute for Juvenile Research/Disruptive Behaviors Clinic (DBC)

- Address: Institute for Juvenile Research, Department of Psychiatry, University of Illinois at Chicago (MC 747), 1747 West Roosevelt Road, Rm. 155
- Contact person: Jesse Klein, Ph.D.
- Phone number: (312) 413-4597
- E-mail: jklein@psych.uic.edu
- Description: Use a developmental-ecological approach for the treatment of children with Oppositional Defiant Disorder, Conduct Disorder, and co-morbid disorders in addition to psychiatric, familial, and child welfare issues.

UIC Neuropsychology (Adult Tracks)

- Address: University of Illinois, Neuropsychology Division, 912 S. Wood St. (MC 913), Chicago, IL 60612
- Contact person: Neil Pliskin, Ph.D., ABPP-CN
- Phone number: (312) 996-6217
- E-mail: npliskin@uic.edu
- Description: Develop and refine skills in the neuropsychological assessment of adult and pediatric inpatients and outpatients drawn from the medical center's Departments of Psychiatry, Neurosurgery, Neuropsychiatry, Rehabilitation, Neurology, Geriatrics, Pediatrics, and Medicine, as well as from outside referral sources and school settings.

UIC Mood Disorder (primarily Adult, some adolescent)

- Address: University of Illinois, Neuropsychology Division, 912 S. Wood St. (MC 913), Chicago, IL 60612
- Contact person: Scott Langenecker, Ph.D.
- Phone number: (312) 996-0085
- E-mail: slangenecker@psych.uic.edu

UIC Schizophrenia

- Address: University of Illinois, Neuropsychology Division, 912 S. Wood St. (MC 913), Chicago, IL 60612
- Contact person: Ellen Herbener, Ph.D.
- Phone number: (312) 413-4612
- E-mail: eherbener@psych.uic.edu

Rehabilitation Institute of Chicago – Primary Site

- Address: 345 Superior St., Room 358 C, Chicago, Illinois 60611
- Contact person: Eric Larson, Ph. D.
- 312-238-6220
- E-mail: elarson@ric.org
- Description: Diagnostic interviewing and cognitive screening (including neuropsychological assessments), short-term individual and/or family therapy, multidisciplinary team consultation, access to various didactic experiences within the hospital campus (e.g., grand rounds, multidisciplinary clinical in-services). Students will be assigned to two or more clinical services for the entire duration of their training (e.g., Mondays on the Brain Injury Unit and Wednesdays on the Spinal Cord Injury Unit.)

• Requirements: Seeking second or third year graduate students who have already completed an initial practicum experience in either treatment or assessment and who has an interest in work with a medical population. Practicum will require a commitment of 16-20 hrs. per week for 10-12 months

Northshore Assessment (Adult and Child Tracks)

- Locations in Evanston, Glenview, Deerfield, Oakbrook
- Contact person: Leslie Guidotti Breting, PhD, ABPP
- E-mail: lguidotti-breting@northshore.org
- Students will be expected to be on site approximately 16-20 hours per week, usually over 2 to 3 days. Our didactics occur on the 1st and 3rd Tuesday mornings each month and attendance is mandatory.

Additional sites from Clinical Practica binder:

- Chicago Children's Advocacy Center (Chicago, IL)
- Children's Memorial Hospital (Chicago, IL)
- DePaul University Child/Parent Program (Chicago, IL)
- University of Chicago, Behavioral Medicine/Substance Abuse Clinic (Chicago, IL)