Training Manual of the
Clinical Child Psychology Doctoral Program

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I. Introduction

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The Clinical Child Psychology Program at the University of Kansas
Tradition, Vision, and Mission

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The idea of the Clinical Child Psychology doctoral program (CCPP) at the University of Kansas dates to the mid-1980s, when KU faculty members Marion O'Brien, Kathleen McCluskey-Fawcett, Jim Sherman, Rick Snyder and others sought a means of bringing together the strengths of the (then) Department of Human Development and Family Life with those of the Clinical Psychology program in the Department of Psychology. As noted in the original proposal for the program:

> The proposed program in Child Clinical Psychology[1] would establish the University of Kansas as a nationally and internationally recognized center in Child Clinical Psychology. The University of Kansas already is recognized for its outstanding research and training accomplishments in psychology generally, and child psychology in particular. With the combined efforts of the Department of Psychology and the Department of Human Development and Family Life the proposed graduate program would offer an interdepartmental program that is unique in the Kansas Regents schools, and of major stature in American Psychology. (*Program Proposal 2/21/1986*)

Michael Roberts, then the Coordinator of the Clinical Child Psychology Training Concentration at the University of Alabama and already a recognized leader in Clinical Child Psychology, served as a consultant to the KU faculty during the conceptualization phase of the CCPP. Building upon his work on key Task Forces focused on the training of psychologists to work with children, youth, and families, Roberts conceptualized the CCPP as "*a model of innovation in training because of its specialty focus on child and family training, which includes an orientation to principles of development and empirically supported interventions*" (Roberts, 1998, p. 394). The primary orientation of the CCPP derives from the view that children's and adolescents' unique therapeutic needs are best met by psychologists whose training has incorporated developmental theory and sound psychological clinical science into all aspects of the curriculum.

At the end of long negotiations and planning, approvals, and compromises, the Clinical Child Psychology Program was approved by Dean James L. Muyskens, and Michael Roberts was recruited to KU in the Fall of 1991 as the first Director of the Program. He spent much of the first year securing resources and gaining approval for the new doctoral degree program, which was recognized by the University of Kansas Board of Regents in 1992.

The first class of Clinical Child Psychology doctoral students was admitted in 1992. At the time, the program existed as a separate degree program (Clinical Child Psychology) under the auspices of the APA-Accredited Clinical Psychology Program, with significant input and support from

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[1] The original proposal for the degree program used the phrase "Child Clinical Psychology." The Program and Degree title were officially changed to "Clinical Child Psychology" by the Kansas Board of Regents on June 1, 1993.

both HDFL (later the Department of Applied Behavioral Science) and Psychology. Additional Faculty and Staff were recruited to the CCPP over the ensuing years—Tammie Zordel (1992-2016), Kathy Lemanek (1992-1997), Eric Vernberg (1993-present), Yo Jackson (1995-2017), Ric Steele (2000-present), Janice Heath (2000-2009), Bridget Biggs (2005-2008), Leesa Terry (2006-present), Paula Fite (2011-present), Christopher Cushing (2014-present), Matthew Mosconi (2015-present), Julie Boydston (2016-2022), Lauren Bias (2016-present), Omar Gudiño (2018-present), Kristy Allen (2022-present), and Kelsie Forbush (2022-present). Additional core faculty members include developmental psychologists John Colombo and Andrea Greenhoot.

The program achieved independent APA Accreditation as a Clinical Program with an Emphasis in Clinical Child and Adolescent Psychology in 2001. This was a significant accomplishment in that the APA Committee on Accreditation was reluctant to accredit a "Specialty" program—voicing concern that a program that allowed specialization would neglect "broad and general" training. It is to Michael Roberts' credit that he was able to demonstrate how specialty training allowed improved "broad and general" training (See Roberts, 2006, for additional coverage of this topic). The program received reaccreditation in 2008 and 2015.[2]

In its more than 20 years, the program has produced approximately 86 graduates, and is currently ranked in the top 10 public Clinical Psychology doctoral programs by U.S. News and World Report (2020). Our graduates hold positions in universities, medical centers, federal agencies, private practice, and community mental health centers, and are recognized for their leadership and scholarship in the field. As students begin their training in the Clinical Child Psychology Program, they are reminded of the program's rich traditions, expectations, and mission. The Program's history becomes the students' resource—and the students' successes add to the Program's legacy.

Vision and Mission

Consistent with the initial philosophy of the program, and with major thought leaders (e.g., Roberts et al., 1998; Roberts, Erickson, & Tuma, 1985; Tuma, 1985). The CCPP's vision for the field is one in which research and service for children, youths, and families are performed by psychologists with appropriate specialty training, which fully incorporates a developmental perspective. We believe that adequate training in clinical child psychology at the university program level provides both didactics and clinical experiences with child and adolescent populations to the level of proficiency, which cannot be attained through one or two courses or a handful of clinical contacts (Roberts, Erickson, & Tuma, 1985). Correspondingly, the CCPP's training model is one in which developmental science is at the heart of all courses, research projects, and clinical experiences.

The mission of the program is to develop leaders in the research, dissemination, and practice of clinical science for children, youths, and their families. The field of psychological clinical science is changing rapidly, with advances in our understanding, assessment, diagnosis,

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2 For further information, the APA Commission on Accreditation can be contacted in writing at American Psychological Association, Office of Program Consultation and Accreditation, 750 First Street, NE, Washington DC 20002-4242, by telephone at (202) 336-5979, by fax at (202) 336-5978, by TDD/TTY at (202) 336-6123, email:apaaccred@apa.org , or you can visit the APA website at www.apa.org.

prevention, and treatment of a range of conditions. Our goal is to train the professionals who are at the forefront of these advances in research, dissemination, education, and service.

This Training Manual is intended to provide program and degree information to students in the KU Clinical Child Psychology Program (CCPP). Students participated in the development of numerous components of the curriculum and this manual. Some policies and information were crafted and recorded in response to student requests for clarity and guidance. Some were adopted to help students (current and future) overcome or avoid challenges observed by faculty.

This manual may seem intimidating by its bulk and detail. This is far preferable to having the policies, rules, and procedures maintained in the memory of the Program Director or the interpretations of faculty members' recollection of policies. In some ways, this document is like a contract, with the details clarifying expectations and responsibilities.

This Training Manual has been updated each year as circumstances and opportunities change. The current version, dated August 2023, applies to all students who enroll after this date, but is relevant to all students because most policies have been in place for many years.

Whenever a curriculum or policy change is made, in most cases, the student can choose to make the change as well (in its entirety, not picking and choosing which elements to adopt). In almost all situations, a student may continue to follow the manual in place at the time they started the program (exceptions may be when course offerings are limited or activities are no longer available).

The incoming student will find almost everything here in this manual to inform them about the Program. Various elements will become more relevant at each stage of progress. Although the Director, other professors, and importantly, the program Administrative Associate, can be asked questions at any time, the student can find answers in this manual.

As you face this Training Manual, additional reading may seem daunting, nonetheless, it is important for our students to understand the origins and history of the Program, and that there are reasons for each component of the carefully integrated plan to provide comprehensive training with successful outcomes as clinical child/pediatric psychologists.

On behalf of the faculty and staff of the University of Kansas Clinical Child Psychology Program, we welcome you to the Program, and wish you the very best as you begin this journey with us.

References

Roberts, M. C. (1998). Innovations in specialty training: The Clinical Child Psychology Program at the University of Kansas. *Professional Psychology: Research and Practice, 29*(4), 394-397.

Roberts, M.C. (2006). Essential tension: Specialization with broad and general training in psychology. *American Psychologist, 61*(8):862-70.

Roberts, M. C., Carlson, C. I., Erickson, M. T., Friedman, R. M., La Greca, A. M., Lemanek, K. L., Russ, S. W., Schroeder, C. S., Vargas, L. A. & Wohlford, P. F. (1998). A model for training psychologists to provide services for children and adolescents. *Professional Psychology: Research and Practice, 29*(3), 293-299.

Roberts, M. C., Erickson, M. T., & Tuma, J. M. (1985). Addressing the needs: Guidelines for training psychologists to work with children, youth, and families. *Journal of Clinical Child Psychology, 14*(1), 70-79.

Tuma, J. M. (1985, May). *Proceedings: Conference on Training Clinical Child Psychologists*. Baton Rouge, LA: Section on Clinical Child Psychology, Division of Clinical Psychology, American Psychological Association.

II.   Program Orientation, Guiding Principles, and Focus

The Clinical Child Psychology Program at the University of Kansas fulfills the basic and traditional orientations to Clinical Psychology as a research and practice area in professional psychology with an additional emphasis in working with children, adolescents, parents, and families.

In its primary fulfillment of the training model of clinical psychology known as the "scientist-practitioner model," the Program utilizes report of the National Conference on Scientist-Practitioner Education and Training for the Professional Practice of Psychology (Belar & Perry, 1990) which updated and reaffirmed the "Boulder model" (Raimy, 1950) of scientist-practitioner training. This conference defined the model as "*an integrative approach to science and practice wherein each must continually inform the other*" (p. 7) in which the scientific research base is related to clinical practice and practice elements are inherently interrelated to research. The Conference report stated: "*The scientist-practitioner model produces a psychologist who is uniquely educated and trained to generate and integrate scientific and professional knowledge, attitudes, and skills so as to further psychological science, the professional practice of psychology, and human welfare*" (p. 7). The CCPP places an extremely high priority on the development of research skills and competencies, while not neglecting clinical training. This priority is reflected in our (2014) induction into the Academy of Psychological Clinical Science.

The KU CCPP fulfills the scientist-practitioner model through its broad and general requirements and research training integrated with basic and advanced practica as well as in the didactic courses of psychopathology, assessment, and psychotherapeutic intervention. This fulfillment is evident from all aspects of the Program such as in the guiding principles, by its goals and objectives, through modeling by core faculty, via the integrated course requirements and syllabi, and in clinical research projects and clinical activities.

The CCPP education and training process produces a graduate who demonstrates critical thinking and applications in the science and practice in the substantive practice area of clinical psychology with child expertise. The basic, underlying concepts of general clinical psychology with an addition of the special emphasis are taught within the course requirements, experienced in the research activities and clinical practicum, and fostered in the culture of the Program. In fulfilling the scientist-practitioner model of training, the KU program emphasizes empirically-supported/evidence-based assessment and treatments as essential elements. This is evidenced in both the didactic training and clinical practica, as well as in the research activities of faculty and students. The integration and bridging of science and practice is made at every level and venue of training.

As noted above, the mission of the KU CCPP is to develop leaders in the research, dissemination, and practice of clinical science for children, youths, and their families. In service of this mission, the program is designed to promote professional competencies in four specific domains (Research, Clinical Practice, Professionalism, and Leadership/Professional Communications) and broad and general knowledge across the substantive areas of the science of psychology. Subdomains of the professional competency and substantive knowledge areas are detailed below (Section III).

Guiding Principles

The CCPP follows six principles common to many clinical child psychology programs across the country but with special emphases distinctive to the joint efforts of the two affiliated departments.

First, the specialty training promotes a scientist-practitioner model. This orientation prepares graduates to produce original contributions to clinical child psychology, to assist in currently needed clinical and research work, to be ready for future changes and needs, and to evaluate their own work and others'. Of particular importance is the preparation of students to contribute to and evaluate the scientific knowledge base guiding psychological practice. As a scientist-practitioner program, the training activities are also designed so that graduates may be able to meet current licensing and certification requirements in many states and jurisdictions.

A second guiding principle is that children and families are most beneficially considered in terms of human development and process of change. Normal developmental processes (i.e., cognitive, affective, behavioral, biological) across the life span provide a backdrop and context for understanding and approaching developmental interruptions.

Third, a guiding principle is that clinical child psychologists must be sensitive and responsive to the cultural and diversity contexts of children and their families. Training experiences provided by the Program enhance students' ability to understand and work with children and families from diverse backgrounds, broadly defined. (See also Appendix E)

A fourth guiding principle is that the best prepared clinical child psychologists are those having a variety of training experiences across research methodologies, clinical and developmental problems, service delivery settings, and modes of intervention. Particular activities are determined by interests of students and faculty selected from a rich array of resources available.

A fifth orientation is to public sector programming and larger community considerations. Child problems are best considered in the context of the child's social, academic, family, and physical (built) environments.

A sixth guiding principle is the use of a mentorship (junior colleague) model for training. Students work closely as junior colleagues with faculty increasing in responsibilities and abilities. Students are encouraged to engage the resources of the program, the two sponsoring departments, and the university at large. Although students may work intensely with one or a few faculty mentors, they are part of the larger interactive unit of the program with the departments.

These six principles, as well as the general training philosophy of the Clinical Child Psychology Program, derive from models for professional and scientific training in the specialty outlined in several nationally recognized documents, including

- *A Model for Training Psychologists to Provide Services for Children and Adolescents* (Roberts et al., 1998)

- *The Proceedings of the National Conference on Training Clinical Child Psychologists* (Tuma, 1985)

- *Guidelines for Training Psychologists to Work with Children, Youth, and Families* (Roberts, Erickson, & Tuma, 1985).

- *Proceedings of the National Conference on Scientist-Practitioner Education and Training for the Professional Practice of Psychology* (Belar & Perry, 1996; deriving from the Boulder Conference, Raimy, 1950).

Essential aspects of these models are demonstrated below, in sections III (Program Training Objectives) and IV (Clinical Child Psychology Curriculum) of the Clinical Child Psychology Program Training Manual.

Program Focus

The Clinical Child Psychology Program (CCPP) is a program providing training in Clinical Psychology with an emphasis on children, adolescents, and families. Consistent with its developmental focus, students also receive training on aspects of Clinical Adult Psychology, including adult psychopathology, assessment, and psychotherapy. This training occurs in the context of the developmental perspective taken in the CCPP courses, through additional courses offered by the General Clinical Program or the Department of Educational Psychology (EPSY), via a required specific training module covering clinical adult psychology (adult psychopathology, assessment, and treatment), and in the context of clinical practica (e.g., assessments and/or consultation for Learning Disorders, ADHD, or intellectual or cognitive difficulties among adult clients of the KU Child and Family Services Clinic; Practicum in Dialectical Behavior Therapy for Adolescents and Adults at the DBT Center of Lawrence; Primary Mental Health Practicum at the Heartland Community Health Center).

As noted in Section III, students in the Clinical Child Psychology Program are required to choose at least one course from those listed below to augment their training in clinical adult psychology:
　　PSYC 977, *Specialized Clinical Practicum—Mediation*
　　EPSY 956, *Theory of Couples and Family Counseling*
　　PSYC 946, *Theories and Methods of Psychotherapy*
　　PSYC 949, *Empirically Supported Treatments*
　　PSYC 936, *Group Therapeutic Techniques*

While the Program does not presume that intensive and exclusive work with adults for their own psychopathology will serve as the major role of graduates of CCPP (some do gain that expertise through additional training), the faculty and students expect that the CCPP training in clinical adult psychology (a) prepares students for additional training and education in adult treatment to be efficiently received; (b) instructs them in the developmental continuity of problems and interventions; and (c) prepares them to identify, work with, and appropriately refer the adults with whom they may be unable to assist.

Relationship to the University of Kansas Office of Graduate Studies

The components and requirements of the Clinical Child Psychology Program are consistent with the requirements of the Office of Graduate Studies (GS) of the University of Kansas. The student is advised to utilize the appropriate Academic Catalog http://catalog.ku.edu/liberal-arts-sciences/#graduatetext for other important information.

References

Belar, C. D., & Perry, N. W. (Eds.). (1990). *Proceedings of the National Conference on Scientist-Practitioner Education and Training for the Professional Practice of Psychology*. Sarasota, FL: Professional Resource Press.

Raimy, V. C. (1950). *Training in clinical psychology*. New York: Prentice-Hall.

Roberts, M. C., Carlson, C. I., Erickson, M. T., Friedman, R. M., La Greca, A. M., Lemanek, K. L., Russ, S. W., Schroeder, C. S., Vargas, L. A. & Wohlford, P. F. (1998). A model for training psychologists to provide services for children and adolescents. *Professional Psychology: Research and Practice, 29*(3), 293-299.

Roberts, M. C., Erickson, M. T., & Tuma, J. M. (1985). Addressing the needs: Guidelines for training psychologists to work with children, youth, and families. *Journal of Clinical Child Psychology, 14*(1), 70-79.

Tuma, J. M. (1985, May). *Proceedings: Conference on Training Clinical Child Psychologists*. Baton Rouge, LA: Section on Clinical Child Psychology, Division of Clinical Psychology, American Psychological Association.

III. Program Training Objectives and Professional Competencies

Consistent with the Commission on Accreditation's *Standards of Accreditation (SoA)*, the faculty of the Clinical Child Psychology Program at the University of Kansas have articulated guidelines, expectations, and minimal criteria for the demonstration of 45 specific competency elements across the 9 *Profession-Wide Competencies* (PWCs) identified in *Section II.D.1* of the *SoA* and two additional *Program Specific Competencies* (PSCs). These profession-wide and program-specific competencies were derived from current models in the field at large and regarding clinical child psychology in particular (e.g., Health Service Psychology Education Collaborative, 2013; Jackson, Wu, Aylward, & Roberts, 2012; Rodolfa, Bent, Eisman, Nelson, Rehm, & Ritchie, 2005). Students in the CCPP will receive both formative and summative assessment of their professional competencies.

Outlined here are the specific competencies that describe what is expected of the trainee in the domains of Research, Clinical Practice, Professionalism, and Leadership/Professional Communications. The clinical training program assists the trainee by providing the means by which to meet these objectives, i.e., didactic course work, research activities, clinical work, and intensive supervision. Demonstration of these competencies places students at the entry level of professional psychology for both clinical and research activities. Consistent with the Cube Model of Competency Development (Rodolfa et al., 2005), the CCPP expects continued development of competencies through internship/residency and (in some cases) post-doctoral training.

Procedures for the documentation and evaluation of these competencies are outlined in Part IV, Section E of this Training Manual.

A. Research Domain

Competency A1. Students will demonstrate accurate working knowledge of a range of research designs including correlational, experimental, and qualitative approaches involving interdisciplinary concepts and problems.

Competency A2. Students will demonstrate conceptual understanding of a range of data analytic concepts and procedures that will facilitate their evaluation of research studies.

Competency A3. Students will demonstrate the ability to formally evaluate the strengths and weaknesses of new research findings in professional/health service psychology and related multidisciplinary and inter-professional areas.

Competency A4. Students will demonstrate the ability to qualitatively summarize a body of literature and research findings.

Competency A5. Students will demonstrate competence in performing a range of statistical analyses that will allow them to contribute to the empirical literature.

Competency A6. Students will demonstrate competence in conducting at least two scientifically sound research projects.[3]

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[3] Consistent with the American Psychological Association's (APA's) Ethical Principles and Code of Conduct (2010;

B. Clinical Practice Domain

Assessment

Competency B1. Students will demonstrate observational and interview skills with children, adolescents, and adults necessary to collect relevant information for a range of presenting problems.

Competency B2. Students will demonstrate professional entry-level knowledge of the psychometric properties of assessment tools and methods. Inherent to this competency is the ability to select assessment methods, tools, and measures based on their psychometric properties.

Competency B3. Students will demonstrate the ability to administer and interpret a range of instruments assessing intelligence, achievement, behavior, psychopathology, family functioning, and personality.

Competency B4. Students will demonstrate the ability to integrate and synthesize test results, interview material, and behavioral observations into coherent case conceptualizations.

Competency B5. Students will demonstrate the ability to derive clinical decisions (including DSM and/or ICD diagnoses) based on assessment data in the context of individual differences, cultural values, and individual preferences.

Competency B6. Students will demonstrate the ability to select and administer assessment instruments and methods that are appropriate to clients' individual differences, cultural values, and individual preferences. \

Intervention

Competency C1. Students will demonstrate the ability to identify specific treatment goals that are congruent with clients' presenting problems, and that incorporate the full range of current environmental constraints, client's values, and unexpected changes over time.

Competency C2. Students will demonstrate the ability to identify and select therapeutic interventions that are conceptually congruent with clients' presenting problems, and are based on sound empirical evidence.

Competency C3: Students will demonstrate the ability to implement therapeutic interventions that are conceptually congruent with clients' presenting problems, are based on sound empirical evidence, and that are consistent with client's values and

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Standard 8.12), authorship credits on the publications identified indicate that the student performed "substantial" contributions to the works listed. For each publication, the student will identify her/his role on the project using the following key/descriptors: (**a**) obtaining funding for the project, (**b**) conceptualization of the work, (**c**) substantial original writing, (**d**) statistical and/or methodological design, (**e**) statistical analyses, (**f**) data collection, (**g**) editing of the work, **and/or** (**h**) supervision/mentoring/advising of any of the above. Also consistent with APA Ethical Standard 8.12b, the order of authorship on the publications listed reflects the relative scientific or professional contributions of the individuals involved.

expectations.

Competency C4. Students will demonstrate the ability to implement empirically derived therapeutic interventions in consideration of individual differences, cultural values, and individual preferences.

Consultation

Competency D1. Students will demonstrate an understanding of evidence-based models of consultation.

Competency D2. Students will demonstrate provision of consultation to a care provider in a professional context.

Competency D3. Students will demonstrate implementation of a systematic approach to data collection in a consultative role (clinical, program and systems based).

Supervision

Competency E1. Students will demonstrate facility with theories and conceptual models of supervision in professional psychology in different settings.

Competency E2. Students will demonstrate understanding of multicultural issues affecting supervision.

Competency E3. Students will demonstrate understanding of legal and ethical issues in supervision.

Competency E4. Students will demonstrate familiarity with research evaluation of supervision models and applications.

Competency E5. Students will demonstrate the ability to provide effective supervised supervision to less advanced students in the program in typical cases appropriate to the service setting.

C. Professionalism Domain

Ethical Research and Practice

The program holds the expectation that trainees will conduct themselves as developing professionals subject to the APA Ethical Principles and Code of Conduct. At the beginning of the training program, trainees are to be provided a copy of the APA Ethical Principles of Psychologists and Code of Conduct. Failure of a trainee to comply with the Ethical Principles may result in termination from the program. Trainees must read these materials, raise questions to program faculty, and sign a form stating:

> "I understand that one requirement of maintaining good standing
> in the Graduate Training Program in Clinical Child Psychology at
> the University of Kansas is abiding by the code of ethics of the
> American Psychological Association. I understand that failure to
> conduct myself in accord with the APA ethical code could result

in my being terminated from the University of Kansas Graduate Training Program in Clinical Child Psychology. I affirm that the Graduate Training Program in Clinical Child Psychology has supplied me with a personal copy of the APA code of ethics, that I have read and understand the code of ethics, and that I understand that this signed form will be maintained in my student file with the Program Director. Furthermore, <u>I agree to abide by the APA code of ethics</u>."

<u>Competency F1</u>. Students will demonstrate knowledge and application of ethical principles, standards, and issues pertaining to provision of psychological interventions in children, adolescents, and families.

<u>Competency F2</u>. Students will demonstrate knowledge and application of ethical principles, standards, and issues pertaining to assessment of psychological conditions and disorders in children, adolescents, and families.

<u>Competency F3</u>. Students will demonstrate knowledge and application of ethical principles, standards, and issues pertaining to research in clinical psychology.

Interpersonal/Intrapersonal Development

<u>Competency G1</u>. Students will demonstrate the ability to develop and maintain working relationships (i.e., therapeutic alliance) with clients across developmental levels and diverse groups. Evidence will be tendered in the form of empirical-validated assessments of therapeutic alliance such as the *Therapeutic Alliance Scale for Children-R* (Creed & Kendall, 2005) or the *Therapeutic Alliance Scale for Caregivers and Parents* (Accurso, Hawley, & Garland, 2012).

<u>Competency G2</u>. Students will demonstrate the ability to develop and maintain working relationships with care providers in clients' systems of care (e.g., teachers, parents, social workers, pediatricians).

<u>Competency G3.</u> Students will demonstrate the ability to develop and maintain working relationships with peers and faculty, including relationships on research teams, clinical practicum teams, and in coursework.

<u>Competency G4.</u> Students will demonstrate the ability to negotiate and address conflict satisfactorily.

<u>Competency G5.</u> Students will receive and use feedback from supervisors/consultants non-defensively.

Reflective Practice/Self-assessment

<u>Competency H1</u>. Students will display self-awareness regarding issues of professional practice, demonstrating the ability to self-monitor and self-reflect. *Included in this area*

is the ability to self-assess developing competencies, choose appropriate examples and artifacts in the Competency Assessment Tool, and use the Competency Assessment Tool as a means of reflecting on professional growth and development.

Competency H2. Students will demonstrate accurate self-assessment of their level of competence by acknowledging limits and seeking means to enhance knowledge and skill level.

Competency H3. Students will demonstrate an ability to self-monitor issues related to self-care and demonstrate an understanding of the need for self-care in order to engage in effective professional practice.

Cultural Diversity and Individual Differences

Competency I1. Students will demonstrate commitment to expanding their appreciation, knowledge, and understanding of cultural diversity and individual differences in their professional practice.

Competency I2. Students will demonstrate their ability to work professionally with individuals, groups, and/or communities that represent a diversity of cultural, personal, and socioeconomic backgrounds.

Competency I3. Students will be knowledgeable of the literature on diversity factors and health disparities (including mental health disparities).

D. Leadership and Professional Communications Domain

Teaching

Competency J1. Students will demonstrate awareness of theories of learning and how they impact teaching.

Competency J2. Students will demonstrate the ability to plan and teach a lecture/unit of an undergraduate lecture/lab course in any area of psychology or human development.

Professional Presentations and Publications

Competency K1. Students will demonstrate competence in the presentation of research findings in public settings, as evidenced by at least one poster or paper presentation at a national or regional professional conference or convention.

Competency K2. Students will publish at least one empirical or review article in a peer-refereed journal in the fields of clinical, clinical child, developmental, or pediatric psychology.

Administration/Management

Competency L1. Students will demonstrate understanding of the various administrative roles that professional psychologists perform in health and mental health settings.

Competency L2. Students will understand principles of academic/institutional leadership.

Competency L3. Students will begin developing understanding of their own strengths and weaknesses with regard to leadership of academic, health services, or institutional units.

E. Discipline Specific Knowledge

As described below (in Part IV, sections A-D of this *Training Manual*), the Clinical Child Psychology Program implements a curriculum plan that provides the means by which all students will acquire and demonstrate substantial understanding of and competence in the breadth of scientific psychology. The required courses outlined in our curriculum collectively and/or individually expose students to the history and systems of psychology, the current body of knowledge in biological aspects of behavior, cognitive and affective aspects of behavior, and social aspects of behavior, research and quantitative methods upon which the discipline is build, and advanced integrative knowledge in the field.

References

Health Service Psychology Education Collaborative (2013*). A blueprint for health service psychology education and training*. Washington, DC: Health Service Psychology Education Collaborative.

Jackson, Y., Wu, Y.P., Aylward, B. S., & Roberts, M. C. (2012). Application of the competency cube model to clinical child psychology. *Professional Psychology: Research and Practice, 43*(5), 432-441.

Rodolfa, E., Bent, R., Eisman, E., Nelson, P., Rehm, L., & Ritchie, P. (2005). A Cube Model for Competency development: Implications for Psychology educators and regulators. *Professional Psychology: Research and Practice, 36*(4), 347-354.

IV. Clinical Child Psychology Curriculum

The following curriculum outline meets the criteria for APA Accreditation and requirements of the KU Graduate Studies requirements.

A. Psychology Core

1.	Biological Bases of Behavior	ABSC 857
2.	Cognitive Development	PSYC 870
3.	Social Development	PSYC/ABSC 825

4.   <u>History and Systems of Psychology</u>

        History of Psychology   PSYC 805 <u>or</u>

        History and Systems of Psychology   EPSY 882

5.   <u>Cultural and Ethnic Diversity</u> (Individual Differences)

        Diversity Issues in Clinical Psychology   ABSC/PSYC 888 <u>or</u>

        Understanding Cultural & Individual Differences

        in Professional Psychology   EPSY 875

B. Clinical Child Psychology Specialty Skills

1.   <u>Psychopathology, Psychodiagnosis, & Psychological Assessment</u>

        Required:

        Psychopathology in Children   ABSC/PSYC 905

        Fund of Psych Assess and Int with Children   ABSC/PSYC 803

        Achieve & Intell Assess in CCP   PSYC/ABSC 811

        Behav & Personality Assess of Children   PSYC/ABSC 812

        Elective:

        Advanced Child and Family Assessment   PSYC/ABSC 814

2.   <u>Intervention & Therapy Procedures</u>

        Required:

        Therapeutic Interventions with Children   ABSC/PSYC 976

One additional course selected from the following:

Psychotherapy with Families	PSYC 967
Theory of Couples and Family Counseling	EPSY 956
Theories and Methods of Psychotherapy	PSYC 946
Empirically Supported Treatments	PSYC 949
Group Therapeutic Techniques	PSYC 936

3. Clinical Practica

Required: 17 credit hours: 7 semesters of practica (and minimum: 275 clinical contact hours)

PSYC/ABSC 846: Introductory Practicum (3)

PSYC/ABSC 847: Intermediate Practicum (7)

PSYC/ABSC 943: Advanced Practicum (8)

PSYC/ABSC 944: Advanced Practicum (6)

PSYC/ABSC 947: Specialty (Supervision) Practicum (optional)

4. Professional Standards and Ethics

Required:

Prof Issues in Clin Child Psych	ABSC/PSYC 809
Prof & Ethical Problems in Clin Psych	PSYC 975 or
Legal, Ethical and Professional Issues	
In Professional Psychology	EPSY 900

5. Clinical Child Psychology Internship

Internship in Clinical Child Psych	
(3 credit hrs)	PSYC/ABSC 963

6. Consultation and Supervision

Clinical Supervision and Consultation	EPSY 945 or
Supervision and Consultation	ABSC/PSYC 706

C. Research and Statistics Core Courses (Techniques of Data Analysis)

Required:

Design and Analysis for Dev Research	PSYC 815 or
Research Methods in Clin Psych	PSYC 968
Statistical Methods in Psych I	PSYC 790 or
Analysis of Variance	EPSY 811
Statistical Methods in Psych II	PSYC 791 or
Regression and ANOVA: General Linear Models	EPSY 810

Master's Thesis and Doctoral Dissertation

Required:

Master's Thesis in Clin Ch Psych (6 cr hrs)	ABSC/PSYC 897
Diss in Clin Ch Psych (12 cr hrs)	ABSC/PSYC 998

D. Electives

In order to complete the 95 credit hours required for the doctoral degree (Ph.D.) in Clinical Child Psychology, the student will take additional courses chosen with approval of the student's academic advisor and research advisor.

E. Clinical Experience and Research Skills Requirements

1. Clinical Practica

The minimum total number of clock hours of contact and supervision for satisfactory completion of clinical practicum in the Clinical Child Psychology Program is 275 hours. The minimum number of semester (credit) hours of Practicum (ABSC/PSYC 846, 847, 943, 944, 947) is 17 credits/hours over at least 5 semesters. Students will likely exceed this minimum and the five semesters of practica in completing their clinical training. Both requirements of five semesters of practica <u>and</u> 275 clock hours must be satisfied. A diversity of clients will be obtained over the sequence of various practica according to type of presenting problems, type of assessment and intervention, and type of diversity characteristics represented.

Any student who is seeing clients must be enrolled for practicum. The number of credit hours of enrollment in Practicum should reflect the amount of supervisor time utilized each week. During the Fall and Spring semesters, students generally receive 1 hour of individual or small group supervision and 2 hours of group supervision per month as part of a clinical case conference. Faculty supervisors expect to spend an additional 1 to 2 hours of time reviewing video and editing notes and assessment reports. **Thus, typical enrollment for most students is 3 credit hours.** During the summer, enrollment in Practicum is expected, but may be less because of the lack of group supervision. Students in their first and second semester may enroll in fewer hours of practicum, depending on the degree to which they utilize supervisor resources.

Students should always maintain a presence in the KU Child and Family Services Clinic throughout their tenure in the CCP Program. As students advance and take practicum outside of the KUCFSC, maintaining this presence will involve assessment and therapy cases that will be individually supervised. A **minimum** of 10-12 hours per month must be maintained including an appropriate level of supervision. This includes the summer semester. Exceptions will be considered under unusual circumstances upon written petition to the faculty.

Definition of "full load" in Clinical Practicum: A full load for the CCPP practicum in the KU CFSC shall be defined as 10-12 hours per week including time for supervision.

(Approved by CCPP faculty August 23, 2004/Revised May 23, 2008)

Students will take their Introductory and Intermediate Clinical Practicum in the KU

Child and Family Services Clinic under the supervision of approved clinical supervisors (either faculty or "Temporary Instructors" appointed to this position). Advanced Practicum experiences may be obtained in this clinic or at an external clinical setting. The latter placement must be approved by the faculty. To obtain this approval, students must petition the CCPP Director who will consult with the KU Child and Family Services Clinic Director in addition to the supervisor of record for the Advanced Practicum.

Considerations for approval include quality of proposed experience, relevance to clinical child psychology training, fulfillment of training objectives, background and experience of the clinical supervisor at the external site. Although the direct supervision may be made by the staff at the external site, responsibility for the academic experience of the course remains with the faculty/instructor of record for the Advanced Practicum. External supervisors and students should keep the supervisor of record informed of all activities. Students may combine both external placements and the KU Child and Family Services Clinic experience in fulfilling the Advanced Practicum requirement. Additional practica may be required by the faculty based on supervisors' feedback and evaluation of performance. Practicum students will receive continual feedback from their supervisors through weekly supervision meetings. Individual or small group supervision is provided for at least one hour per week. Additionally, group supervision (clinical case conference) takes place twice per month and allows for discussion of cases and problem-solving. Supervisors may utilize the clinic's files, audio or video tapes for review, transcripts, direct observation, or other techniques.

Students will maintain fully and up-to-date records on the clients seen. Failure to maintain proper records may result in an evaluation of unsatisfactory performance. Policies and procedures governing the KU Child and Family Services Clinic are updated regularly throughout the year.

Clinical Case Presentations. Competence in formal case conceptualization and presentation will be gained through the practicum activities in the KU Child and Family Services Clinic and field sites. Commensurate with their developmental level of training, students enrolled in practica will present formal clinical case presentations during the clinical case conference sessions. Upon completion of each formal case presentation, the student will present the practicum supervisor with the Case Conceptualization Evaluation and Documentation Form (see Appendix A-6). The supervisor will provide feedback to the student and document the formal case presentation, noting areas of strengths and areas in need of further improvements. The student will provide the completed form to the Program Administrative Associate for inclusion in their file. The student may wish to use redacted materials from the formal case conceptualization (and a copy of the Evaluation and Documentation Form) to document specific professional competencies in the Competency Assessment Tool.

2. Responsible Scholarship Requirement in CCPP

Consistent with GS and University Policy, every doctoral student at the University of Kansas is required to have training in Responsible Scholarship pertinent to their field of study. Responsible Scholarship in the CCPP involves pertinent areas of protection of human subjects, collaborative research, conflicts of interest, authorship, publication, plagiarism, copyright, data management, professional practices, mentor/student responsibilities, maintenance of confidentiality, research conduct and research misconduct, HIPAA, ethics of publishing clinical case material, among other related topics.

There are two components required for students in the CCPP to fulfill the GS Responsible Scholarship requirement:

(a) Three specific courses in the CCPP curriculum:

Professional Issues in Clinical Child Psychology		ABSC/PSYC 809
and		
Design and Analysis in Developmental Research		ABSC/PSYC 815
and		
one of two courses:		
Ethics in Clinical Psychology	**or**	PSYC 975
Ethics in Counseling Psychology		EPSY 880

(b) Completion of the online tutorial for Responsible Scholarship, IRB (HSC-L) and HIPAA data at https://www.citiprogram.org/.

3. Discipline-Specific Research Skills Training Requirement in CCPP

Consistent with GS and University Policy, every doctoral student at the University of Kansas is required to obtain specific research skills pertinent to the doctoral level of research in their field of study. The additional Research Skill requirement is fulfilled by one additional course above the two required courses in statistical or data analysis (quantitative, applied behavior analysis, qualitative). No course is specified, but must be approved by the student's research advisor and the Program Director.

4. Student Data Collection

The cornerstone of the CCPP faculty is mentorship in both clinical and research activities. Students work with program faculty and others identified through a formal process that extends the program faculty. What makes a successful student in the CCPP is working with faculty members in an intensive relationship that benefits student development.

Any data collection that is presented to satisfy a program requirement (thesis, research task, or dissertation) must have a program faculty member provide direct oversight or approval prior to its use. Specifically, a member of the CCPP faculty must "sign off" in

advance on any data gathering projects in any form by a graduate student in order to have the project count as a program requirement.

Additionally, the CCPP faculty must review and approve any research projects involving participation by a CCPP student which are outside of individual faculty supervision (similar to clinically related activities). This policy applies even to those projects for which data are not being used for a program requirement such as thesis, research task, or dissertation. Program faculty must not only be informed about a data gathering project, the faculty must be assured that proper methodology has been followed and the Human Research Protection Program (IRB) procedures have been followed.

These policies are established for the protection of students in both the short and long term as well as for protection of the program's standing in the local and national community (and ultimately benefiting all students and graduates).

5. Master's Degree and Thesis

The Master's Degree requires a thesis and a minimum of 30 hours of course work (24 of which must be non-thesis credits). A minimum of 6 credit hours in Master's Thesis in Clinical Child Psychology (ABSC/PSYC 897) is required (typically 2-3 hours per semester until completion). Credit hours counting to the master's degree may be taken in either the Department of Psychology or the Department of Applied Behavioral Science (a maximum of 6 hours of credit may be taken outside of these two departments).

Graduate courses from another university may be used to waive requirements in the CCPP. These courses, however, are not officially transferred (i.e., the hours for waived courses do not count toward the hours necessary for graduation). Rather, the student may take elective courses (including Practicum and Research Hours) to fulfill the required number of hours for the Doctoral degree (95 credits).

The Master's Thesis must be based on empirical research (not literature reviews or purely theoretical or conceptual productions). Students are encouraged to begin the process of selecting a research advisor from the day they start the Program. A student should, within their first semester of graduate training at KU, choose a research advisor to supervise the master's thesis project. The Program Director should be informed in a written memo signed by the student and the mentor of this relationship no later than one month from the beginning of the second semester in the first year. The thesis project and write-up will follow the format and protocol prescribed in the "Thesis Formatting Guidelines" by GS.

The following additional elements are required for students in the Clinical Child Psychology Program:

a.   Master's thesis committees should be comprised of 3 or more faculty with appointments on the Graduate Faculty. Chairs of thesis committees may be

drawn from either the Department of Psychology or the Department of Applied Behavioral Science who are appointed to the Graduate Faculty. At least one of the committee members should be a member of the core faculty in clinical child psychology and one must be from CCPP, Psychology, or Applied Behavioral Science.

b. The program recognizes the value and/or necessity of co-chairs for thesis projects. However, given the likelihood of substantial formative evaluation of the student's research by both co-chairs, it is advantageous for the student to receive feedback from a full contingent of committee members that have not been highly involved with or invested in the conduct of the research. Thus, for thesis committees with co-chairs, the candidate must identify an additional committee member to serve the functional role of summative evaluator. That is, for a thesis with a co-chair, the committee will include 2 co-chairs plus two additional members. As noted above, one of the members of the thesis committee must be a core member of the CCPP.

c. Before starting data collection, the students must submit a written proposal (literature review, statement of problem, methods and procedures, and proposed data analyses) to the committee. Upon approval of the project at this meeting or subsequent discussions, the student may proceed with the study.

d. All proposal and defense documents for the thesis are due to all committee members on a business day at least one week (7 days) before the date of the meeting. If this cannot be accomplished, then the date of the committee meeting will be changed to allow one week for reading of the document. Students should distribute copies of the document at least one week prior to the meeting (no later than 4:30 p.m. CT, on the *business* day, at least seven (7) calendar days prior to the day scheduled for the proposal or defense).

e. Students may provide documents in electronic or hard copy, depending on the preference of committee members. This includes the master's proposal and the thesis for the defense.

f. HRPP approval must be obtained before start of data collection utilizing human subjects.

g. The thesis write-up should be in "publication form" following the *Publication Manual of the American Psychological Association*. Modifications of this publication style must accommodate the "Thesis Formatting Guidelines" from GS. The document should be provided to the committee at least 1 week in advance of the thesis oral examination or defense.

h. An oral examination over the document and completed project should be scheduled through the Program Administrative Associate at least 3 weeks in advance of the meeting. Students standing for the oral exam on their thesis must have completed or be enrolled in at least 6 credit hours of master's thesis

research. The Chair of the Committee will present the Defense Committee Report at the meeting for committee signatures and committee approval (See Appendix A-9)

i.   The thesis committee may request changes in the document prior to official submission to COGA (College Office of Graduate Affairs)/GS (Office of Graduate Studies). At the time of the oral examination, members should determine whether each will monitor the changes or authorize the committee chair to approve the final version based on feedback during the oral examination. Upon approval of the final thesis document, the title page must be signed by **<u>ALL</u>** committee members while the acceptance page requires only the committee chairperson's signature. The student should follow the requirements of GS (see "Thesis Formatting Guidelines") regarding the official versions submitted to GS (electronic) and appropriate fee payment.

The student should provide a copy of the signed title and acceptance pages to the Program Administrative Associate, as well as the final copy of thesis. The Program Administrative Associate will submit the "Progress to Degree" form to COGA<u>.</u>

j.   All M.A. students who have completed the required course work for their degree are required to be continuously enrolled until all requirements for the degree are completed. This requirement affects those students who have not yet completed their thesis.

Summer enrollment is required when faculty time is utilized for any supervision or while data gathering is being conducted. Continuous enrollment is required until completion of the master's degree.

k.   No food or drink should be provided by the student for whom the committee meeting is being held. Members of the committee will be informed by the student of this policy and indicate that they will be in compliance with program policy.

The Master's thesis requirement may be satisfied by presentation of a master's thesis (an empirically based study) from another accredited university after review for comparability by the Program Director with a selected faculty committee.

Please refer to the "Master's Degree Checklist" provided by COGA at https://coga.ku.edu/masters-degree-checklist for graduation requirements.

Master's thesis proposal deadline

A student must have successfully presented the master's thesis proposal to their committee by Stop Day of the 1st semester in the 2nd year of enrollment in the program

or they will be required to drop courses in the 2nd semester of the 2nd year to only those that enhance the development and implementation of the master's thesis project (e.g., research methods, quantitative courses). Students must be continually enrolled in master's thesis hours until they have proposed. The students are encouraged to plan appropriately in scheduling with the master's thesis committee.

Master's thesis defense deadline

The thesis must be prepared and defended by **September 15** of the fall semester of the student's third year or the student will be enrolled only in the thesis course and clinic practicum thereafter until the written document is completed and defended in an oral examination. An appeal for an extension to the time limit is considered by the faculty in extenuating circumstances.

Passing the Master's Defense with Honors

Master's theses may be "passed with honors." The honors designation will be considered only in the rare cases and should not occur as the norm. Passing with honors may be considered when the student's document as submitted to the committee, presentation, and oral defense are exceptional in all aspects. Any committee member, other than the chair, must nominate the student for this status and provide justification. A secret ballot (with the chair voting) will be taken during the *in camera* portion of the thesis defense. The honors designation will be made only when the vote is unanimous in favor of "passing with honors."

6. Ph.D. Preliminary Examination: The Task

Completion of the Task Project is required within one year of finishing the Master's Thesis. This will ensure timely progress through the program will be maintained. (Adopted by faculty on 5/16/11).

Students are required to pass the preliminary examination before admittance to the Ph.D. oral comprehensive examination. They will be judged to have passed this preliminary examination when they have demonstrated satisfactory performance in one competence area that is considered representative of the professional activities of clinical psychologists.

Students should enroll in Special Problems, PSYC 980, while completing the Task, rather than Dissertation in Clinical Child Psychology, PSYC/ABSC 998. However, enrollment in a specified course during completion of the Task is not required.

Each student must successfully complete one task. This Task may be selected from either Area A (Applied/Clinical), Area B (Research/Methodology), or Area C (Teaching). Tasks are undertaken as a means by which students may demonstrate specific professional competencies. The subsequently described modules are provided

as models and the student should consult with their advisor and the Program Director if there are questions as to the appropriateness of a proposed Task.

Consistent with the philosophy behind the Task system, it is recommended that Tasks be planned and conceptualized prospectively in the educational setting. Applied or research Tasks may be carried out in areas where students are employed. If the student simply hands in some work product done in another setting, however, it is unlikely to be suitable for the purposes of the Task system. Such products typically lack the comprehensive scope that must characterize a successful Task. For example, an assessment done in an agency to determine a client's IQ may be suitable for the agency, but would be rejected as not qualifying as an in-depth assessment. Furthermore, the detailed documentation that must accompany a Task is likely to be very different than the write-up prepared for the agency.

In developing a Task (especially clinical/applied tasks), most students will work with a supervisor on the specific activity. Students should inform the supervisor that they wish to use the activity as a Task, and should offer to provide a task proposal for the supervisor should they desire to see one. The supervisor should determine at the outset whether the proposed task will be an appropriate one, both in terms of its content and in terms of the student's capability to do the work in a reasonably independent fashion.

In completing this Program requirement, the student will work with one supervisor (from the CCPP core faculty or affiliated faculty with approval). The faculty supervisor will have the responsibility for the formative development of the project by supervising all aspects (including the write-up). The supervisor will also provide the summative evaluation of the project regarding its acceptability in fulfilling the preliminary examination requirement in a formal letter to the Program with the final version of the document for the student's file.

Professors in the Program may adopt procedures of their own regarding how the Task project will be completed and evaluated for students under their supervision.

The student will work with a supervisor during the planning and implementation stages of the Task, although the project should substantially represent the work and contribution of the student.

The student will remit electronic copy of the Task along with a statement from the supervisor indicating that the document meets the Program standard as "Acceptable" for completing the Preliminary Examination.

Area A: Applied/Clinical Module

<u>Demonstration of Consultation Skills</u>

The student will present an overview of the consultation goals and the related literature pertaining to the model employed. A step-by-step description of the consultation will be presented, along with a variety of measures designed to

monitor the efficacy of the consultation. Strengths and weaknesses of the consultation, and implications for the particular consultation model will be presented. The consultation should not be a one-shot affair, but rather should reflect an in-depth and repeated set of interactions with an agency.

Demonstration of Workshop Skills

The student will present an overview of the workshop goals and the literature pertinent to workshops. The workshop participants should provide extensive feedback regarding the conduct of the workshop, and a variety of measures assessing the usefulness of the workshop should be employed. Strengths and weaknesses of the workshop should be discussed, and the implications of the particular experience for the conduct of the workshops in general should be examined. After conducting the initial workshop, the student would be well-advised to conduct a second one in order to make any improvements in the workshop format and to provide a "modified replication" based on the first workshop feedback.

Psychotherapy Demonstration

At least one client intervention lasting for a 12-week period, or perhaps two shorter cases of a similar type will constitute the minimum basis for a proposed psychotherapy demonstration. This case (or cases) may occur during the assessment or practicum sequence of experiences. A written document describing the contract, goals, therapeutic relationship, intervention processes, and evaluation (preferably including self-report and behavioral indices) procedures will be prepared. This document would be modeled after case studies that appear in various journals (e.g., *Health Psychology*, *Clinical Practice in Pediatric Psychology*). As such, the theoretical model guiding the therapeutic approach will be articulated, along with a specification of how the particular client(s) were appropriate for this model. A critique of the therapeutic intervention will be made, and implications that expand the understanding of the therapeutic model will be drawn.

Supervision Demonstration

The supervisor (an advanced graduate student) will guide the therapeutic activities of at least one supervisee (a less advanced student) for a 12-week period, or perhaps several supervisees for a shorter period. The supervisees would be employing the therapeutic model/techniques in which the supervisor has had considerable advanced training and experience. The written document would carefully illustrate the supervision model employed, and provide multiple examples of supervisory feedback and the subsequent effects on the supervisee. Supervisee's evaluations of the supervisor's feedback would be analyzed, and a discussion of the strengths and weaknesses of the particular supervisor and supervision model should be included. In the aforementioned supervision by a graduate student, it should be emphasized that the graduate student must be

supervised by a faculty member.

Community Resource Development Demonstration

The student would describe the development or expansion of a community resource in collaboration with existing agencies or individuals in the community. The report would include a detailed analysis of the community need, and how the need was fulfilled in the project. An important component of this demonstration would be the evaluation of the resource development project by the appropriate community people included in the project. Where appropriate, the relevant literature pertaining to the development of related resources would be reviewed, and suggestions would be made for ways in which such improvements are implemented.

Psychological Assessment Demonstration

The Assessment Task is more than just a final examination for the assessment sequence of courses. Nevertheless, the CCPP expects assessment procedures and materials submitted to be consistent with what was taught and required in the basic assessment courses. For instance, if behavioral observations are used in an assessment, the program expects to see more than two such observations about the products. If a clinical interview is used, interview notes, or a summary should be included. Variations on standard assessment procedures are possible and, often desirable, but when variations are employed, they should be supported by a statement explaining the rationale for using them. Under these circumstances, the write-up of the task must contain some explanation of the reason for using the instrument in this different way.

The student will conduct at least one, and preferably two in-depth assessments of actual clients. "Preferably" means that a single case report is not ordinarily acceptable. A single assessment might be justified if the case were unusually complex, required exceptional effort to evaluate, was followed for a very long period of time, or actually consisted of more than one person (e.g., case = family). The choice to submit only one case must be carefully justified when that case is submitted. Furthermore, the term "in-depth" connotes giving the reader the basis upon which one could understand the relevant client's behavior and experiences, i.e., in-depth means comprehensive. Such assessment could occur as part of Advanced Practica, but the case would need to be in addition to minimum requirements. Each Assessment Task report should include a description of the psychological tests used (use of several is expected) and the reason for their utilization with the particular client(s). The results of the combined tests and the treatment implications should be described. When the assessment has occurred in an agency setting, the student should detail which tests were mandated by the agency and which ones were selected by the student. A statement from the supervisor at the particular agency should also address this latter issue, and note the degree to which the student operated independently. Also, in cases where the selection of tests may have been constrained by the

agency, the student should note any additional tests that may have been desirable (and why it would have been useful to give them).

Demonstration of Grant Application Preparation

The student will prepare a grant application using the format and forms of one of the major granting agencies (e.g., NIMH, NSF, etc.). The application may be for a research, training, or demonstration project. The appropriate relevant literature review and the rationale for the grant should be described. Likewise, materials involving budget, staff, implementation, and evaluation will be presented.

Review Article Demonstration

The student will prepare a review article about a topic directly relevant to clinical psychology. The review article should be of the form and quality of those suitable for submission to *Psychological Bulletin*, *Psychological Review*, or to one of the more specialized journals that also accept review papers (e.g., *Clinical Psychology: Science & Practice*; *Journal of Clinical Child and Adolescent Psychology*; *Journal of Pediatric Psychology*; *Journal of Consulting and Clinical Psychology*, *Professional Psychology: Research and Practice*). The focus of the paper may be empirical, theoretical, or methodological. The final review will be prepared in APA style, and it should be appropriate for submission to one of the many relevant journals.

Original, Independent Research Demonstration

This empirical research project should be separate from, and in addition to, the M.A. thesis and the Ph.D. dissertation. While data collected by the student for the express purpose of completing a research task is the most straight-forward approach to fulfilling the research demonstration, the student may use data gathered (a) by persons outside the program (e.g., government data banks, investigators at other universities, etc.), (b) by persons in either the Department of Psychology or the Department of Applied Behavioral Science other than the student, or (c) by the student in conjunction with a previous project.

The demonstration will include a review of related background literature, the rationale for the research, the empirical procedures and methodology, an analysis of the results, and a discussion section. The final report will be prepared in APA style, and it should be appropriate for submission to one of the many clinical journals. Any of a wide variety of research questions could be empirically explored.

Area C: Teaching Task

A student first proposes to teach a particular undergraduate course in psychology or applied behavioral science and gains approval for the course from the CCPP faculty and from the Director of Undergraduate Studies in Psychology or Applied Behavioral Science. Such approval should be obtained at an early date, preferably early enough so that the course may be listed in the timetable. To gain approval from the Director of Undergraduate Studies, the course would have to be a typical offering within the undergraduate curriculum in the Department, not some highly specialized course with limited scope or relevance to the preparation of undergraduate students. Unless a specific exception is granted by petition, the course will be one already listed for the Departments in the undergraduate catalog. Only undergraduate students may enroll in courses taught by graduate students.

The student arranges to have a faculty member serve as the teaching task supervisor and evaluator (typically someone who is familiar with the area being taught).

Student Teaching
1.   In the semester prior to teaching, the student will:
        a.   prepare a reading list on teaching effectiveness with the assistance of the supervising professor and complete the readings with an assessment of comprehension
        b.   complete the Psychology Department's teaching course or an acceptable alternative course from the Center for Teaching Excellence

2.   The student will arrange a schedule of supervision by the program faculty member involving no less than one completed meeting once every three weeks during the semester of teaching.

3.   The student will complete and submit the report of the teaching task within 3 months of the final examination in the course taught in order to be submitted for satisfying the task requirement.

The student's teaching task should constitute an initial demonstration of their familiarity with the enterprise of college teaching and the content of the course. The document should include a statement outlining the student's philosophy and objectives of teaching the proposed course in particular. The document also should include the course syllabus (listing the texts, reading assignments, topics covered, examination schedule) and a statement concerning how the students enrolled in the class were evaluated (type and number of exams, term papers, classroom presentations, other types of course projects). Finally, the document should specify how the course will be evaluated as a demonstration of teaching competency.

During the first half of the semester, the student teaches the course with close

supervision and guidance from the primary course sponsor. During this period, the sponsor may serve as a source of feedback regarding the student's classroom performance, rather than as an evaluator of the student's teaching competency. During the last 24 hours of class sessions, the student teaches the course without this assistance, thereby demonstrating their competency as an instructor in this course. The faculty member's evaluation of teaching competency will be based upon this latter period.

The following is provided as guidance to those students in the CCPP who have chosen to do Teaching Tasks in preparing the final report for review by the supervisor. Other aspects of the Teaching Task as fulfilling the Preliminary Examination for the Program are described in the Program Training Manual.

Students are encouraged to use the following outline for describing your perspectives, learning, and behaviors related to the teaching experience. Each item should take 1-3 paragraphs to describe. After a summary description in the text, you may indicate supporting materials are contained in the Appendices (list by letter). These are the basics, you can elaborate or add to convey the richness of your experience.

1. Teaching philosophy and approach
2. Course structure and innovations
3. Evaluation of students' learning and understanding:
    a. Evidence of quality of student understanding and learning samples of student work assignments demonstrating their achievement of course goals. These materials should include examples of graded student work and instructor feedback (e.g., papers earning As, Bs, Cs, etc.). Descriptions of rubrics for grading and feedback on iterative assignments to promote student learning from the course should be included as well.

    Applicants should inform students via class discussion and course syllabus that course materials including student performance and evidence of learning will be included in evaluations of teaching and instructor improvement. Permission to use students' names and names associated with their intellectual products should be obtained and retained until the review process is completed.

    b. Evidence of planned activities and assignments that actively engage the students with course materials inside and outside of class time and encourage reflection and generalization of understanding and skill acquisition beyond what was expressly taught in lectures.

4. Evaluation of teaching

    a. Course evaluations (midterm & end of semester evaluation; statistical means of important items; cover in narrative fashion or present in a table integrated into text with each item and their means). How did you modify your

approach as experience progressed and after midterm evaluation?

    b. Interpretive comments about what these evaluations might mean; how did you/will you respond to improve?

    c. Evaluative comments from students (put into a thematic structure to summarize what the students thought in a qualitative way about your teaching and what you could do to improve it).

       For example, "Some students reported that I talked too fast (e.g., "you lecture too fast," "I couldn't keep up in writing lecture notes"). Another set of comments indicate that they appreciate my use of handouts and outlines for the lecture (e.g., "Thanks for preparing and distributing the outlines"). Other comments praised my enthusiasm for the topic and joie de vivre (e.g., "You really made the topic interesting," "You always smile").

       In the interpretations, relate the themes of the student comments to the teaching philosophy and approach you took. Are they consistent? Do they indicate you were successful? How might you have been more successful?

5. What would you do differently if given the chance to teach the course again? Some of this might be structural changes (e.g., change the book; have fewer/more tests) and other self-analysis comments might include what you would change in your approach, preparation, and follow-through.

6. What insights have you gained from the experience about yourself, about teaching, about the topic? What problems did you encounter (e.g., complaints from students, a/v equipment, difficulties with panel discussions) and how did you handle them?

7. What have you learned about motivating students to improve performance, what did you do? Give some examples and explain.

      <u>Appendices</u> (at a minimum)
        A. Course syllabus
        B. Tests
        C. Lecture outline/handouts/study sheets
        D. Videotapes of teaching performance
        E. Samples of student performance
        F. Grade distribution
        G. Printout of course evaluations
        H. Originals of evaluation forms

7. Profession-Wide and Program-Specific Competency Assessment

Over the course of their tenure in the Clinical Child Psychology Program, students will archive evidence for entry-level competence in each of the 45 competency elements

across the nine Profession-wide Competency (PWC) and two Program-specific Competency (PSC) areas identified in Section III of this training manual. As described below, students receive formative and summative feedback for their demonstration of competencies. All students must meet minimum level of achievement before progressing to the Internship stage of training.

Documentation of Competencies

A dedicated "course," housed on the University's Canvas™ platform, serves as a confidential e-portfolio for students to archive their artifacts for each of the competency elements. Artifacts may include work products (e.g., class papers, peer-reviewed papers, PowerPoint presentations), descriptions of practicum or research experiences, and faculty/supervisor evaluations from practicum, research, or work placements. Because Canvas is not HIPAA compliant, students may not upload clinical material (e.g., assessment reports, case notes) as artifacts—even deidentified material should not be uploaded.

Evaluation of specific artifacts as meeting Program standards shall be the responsibility of the student's primary advisor, or (should the advisor be unable to complete the task) the Director of Clinical Training. The student's primary advisor will monitor the student's progress and will provide guidance with regard to the quality and sufficiency of the artifacts. Each student's progress toward documenting all competencies will be noted in the evaluation letter provided each spring.

Upon receiving the advisor's approval for each professional competency element within a given PWC or PSC area (e.g., Research), the student will independently complete an integrative narrative statement that addresses how the experiences that led to those artifacts collectively demonstrate the elements of competency contained within the implementing regulations of the Standards of Accreditation for that area. Each integrative statement must not exceed 500 words.

Evaluation of Competencies

Committee. A Competency Assessment Committee composed of three randomly selected CCPP faculty members will be convened to summatively evaluate the student's demonstration of PWCs and PSCs. The student's primary advisor may not serve on the Competency Assessment Committee. The role of the committee will be to evaluate student outcomes for each element of the competencies outlined in the implementing regulations of the Standards of Accreditation. The final evaluation of the committee will serve as summative feedback on the student's competency.

Process. After a student has independently completed all of the summary narratives intended to meet the requirements of the 9 PWC and 2 PSC competency domains, the student will set a date for the committee meeting with the program administrative assistant. The student will submit their narrative statements to the three-member committee two weeks in advance of the meeting date. Committee members will independently review the narrative statements and develop questions for the student to

answer in the meeting. The purpose of the meeting is to assess the student's competence beyond what is contained in the narrative. It is expected that the meeting can both increase and decrease faculty confidence that the student is competent in a given domain. Any committee member may examine the student on any competency domain. At the conclusion of the meeting, committee members will independently submit their ratings of the student's competence to the program administrative associate (see below). Scores will be averaged and returned to the committee and the student.

Measurement of Outcomes and Minimum Level of Achievement. Scores for each competency element shall be recorded by each Committee member on the University of Kansas Clinical Child Psychology Program Competency Evaluation Tool (Appendix A20). Scores for each element may range from 1 (competency element clearly not demonstrated) to 5 (exceeds expectations for demonstrated competency element). In order to meet minimum level of achievement for any given competency, students must score an average of 4.0 or higher across the committee members' evaluations. This level of competency indicates readiness for an APA-Accredited clinical internship.

If the student receives an average score below 4.0 for any competency element, the Committee will provide written feedback to the student regarding why the competency element was below the minimal level of achievement. Within six weeks of receiving the feedback, the student shall revise their narrative document and/or submit additional artifacts in response to this feedback. The student will submit the revised document(s) and/or artifact(s) to the same three-member committee, and each member will independently evaluate the student's competence based on the revised narrative/artifacts. If the student's average score is again below 4.0, the committee will recommend a formal remediation plan or dismissal from the program (see Part V, Section D, page 46-47 for policies and procedures on remediation and dismissal).

Timing of Summative Assessment. Students must pass the summative assessment before the Faculty may vote on the students' readiness for internship. It is expected that students will complete the Competency Assessment prior to or during the spring semester before they plan to apply for internship. Under limited circumstances, it may be necessary to complete the Competency Assessment early in the fall semester during which they are applying for internship.

Appeals Process

Students appealing the Competency Assessment Committee's decision will use the same process as outlined for course grade appeals (See Part V, Section G).

Instructions

Upon receiving the advisor's approval for each professional competency element within a given PWC or PSC area (e.g., Research), the student will independently complete an integrative narrative statement *using the response stem for each competency area* (see below). Statements should focus on the overall competency elements but may refer to

specific artifacts to exemplify competencies listed within the implementing regulations of the *Standards of Accreditation*. Each integrative statement must not exceed 500 words.

Profession Wide Competencies

1. Describe your program of research and highlight how your research contributes to the literature. **(A1-A6)**

2. How do you approach ethical dilemmas in your clinical practice and research? **(F1-F3)**

3. Describe how you ensure that you are sensitive and responsive to individual and cultural diversity in your clinical work and research. **(I1-I3)**

4. How has your professionalism grown over the past 4 years? What has contributed to this growth? **(H1-H3)**

5. How have your interpersonal relationships facilitated your professional effectiveness? **(G1-G5)**

6. What is your general approach to psychological assessment? **(B1-B6)**

7. Describe the process by which you choose and implement interventions. **(C1-C4)**

8. What models of supervision have you found to be most effective in your clinical work? How does this align with the literature on supervision? **(E1-E5)**

9. Describe your approaches to consultation in clinical and research settings. **(D1-D3)**

Program Specific Competencies

1. Describe how your service to the profession demonstrates your administrative strengths. **(L1-L3)**

2. How (by what strategies) do you communicate content to professional audiences? **(J1-J2; K1-K2)**

The integrative narrative statement should demonstrate how you think about a specific competency or how you demonstrate competency in that area. Statements should focus on the overall competency elements (i.e., the forest) but may refer to specific artifacts (i.e., the trees) to exemplify competencies. For example, when discussing cultural competence, you might describe a general model you use to ensure that your work is sensitive to individual and cultural differences, and you might provide specific examples of that approach in action. **These narratives statements should not focus on listing or describing the artifacts.** While the artifacts themselves provide specific examples of competence, the integrative narrative statement provides an opportunity to reflect on and discuss how you have internalized the competency domain and how you think about and

model that competency area as a professional. Such descriptions of who you are as a professional and how you approach specific areas of psychology will be useful at other stages of your career, including internship applications, faculty job applications, and when pursing board certification.

The competency **oral exam** provides an opportunity for you and your committee to further assess your knowledge of and approach to each competency area. Building on the artifacts and integrative narrative statement, the competency oral exam will allow you to expand on your thinking or to discuss how you approach specific aspects of competency in greater depth. This exam also allows your committee to pose questions or engage in discussion that clarifies or expands upon your written statements. While you may have little experience with oral exams, the process is similar to a thesis defense and will prepare you for similar evaluations you will encounter in the future (e.g., dissertation defense, faculty job talks, board certification exams). Possessing competence in each domain is all the preparation you need to do well on an oral exam. The oral exam allows you to demonstrate your comprehensive knowledge of and familiarity with the competency area by virtue of being able to reflect on, discuss, and expand on each competency area in the moment.

Please make sure that you are familiar with the *KU Clinical Child Psychology Program Competency Evaluation Tool*. This is the rubric that is used to provide a summative evaluation of competency based on the artifacts, narrative statements, and competency oral exam. By reviewing this guidance, attending to prompts for the narrative statements, and familiarizing yourself with the evaluation tool, you will ensure that your materials clearly demonstrate your competence and provide your committee with the best opportunity to evaluate your level of competence.

8. Ph.D. Oral Comprehensive Examination: Dissertation Proposal

Upon completion of all course requirements for the Ph.D. degree and the Task, except the dissertation and internship, the student also must pass the oral comprehensive examination. This examination addresses the formal written proposal for the dissertation as well as larger questions in the field. This examination normally should be taken prior to the completion of four calendar years in the case of students entering with the bachelor's degree and three years for students entering with a master's degree. The faculty believes that the student is best served by completing the entire dissertation prior to the internship.

Choosing an Oral Comprehensive Exam Committee -- The student should choose a committee of five faculty members whose expertise bears on the topic of the dissertation: this will encourage getting expert constructive help.

The committee **must** contain someone to represent the Office of Research and Graduate Studies (GS) who is a regular member of the Graduate Faculty but who is **NOT** a member of the Psychology Department Graduate Faculty or the Applied Behavioral

Science Graduate Faculty. "Associated" Faculty are not permitted as the representative of GS. This outside person represents GS, making sure the student is receiving a fair and "well-rounded" examination. Traditions and expectations for Oral Examinations and Dissertations in the Clinical Child Psychology Program are provided in Appendix F. Three of the five committee members must hold core faculty status within the CCPP.

When the dissertation advisor (chair) agrees that the student is ready to take the Comprehensive Oral Exam, the student should see the Program Director, who will direct the student to the Program Administrative Associate. This must be done at least **THREE WEEKS and THREE DAYS** prior to the oral exam. The student needs to know the following information:

1.   The date and time the Comprehensive Oral Exam is scheduled.
2.   Who is on the committee--and in what capacity (Chair, outside member, etc.).
3.   How the "Residency Requirements" were met.
4.   How the "Research and Responsible Scholarship" requirements were met.
5.   The title of the comprehensive document.

The Program Administrative Associate then submits the Progress to Degree form online with the appropriate information (this officially schedules the exam). If the Comprehensive Oral Exam is taken by the **LAST DAY OF CLASS**, the student can use that semester to qualify for Post-Comprehensive Hours (see also "Enrollment Requirements, Program Policies and Procedures, section J). Upon passing the Comprehensive Oral Exam, the student is considered a Doctoral Candidate. The Program Administrative Associate will approve the Progress to Degree form online and at this time a dissertation committee is formed.

All documents for the comprehensive oral examination (including the dissertation proposal) are due to all committee members on a business day at least one week (7 days) before the date of the meeting. If this cannot be accomplished, then the date of the committee meeting will be changed to allow one week for reading of the document. Students must distribute copies of the document at least one week prior to the meeting (no later than 4:30 p.m. CT, on the *business* day, seven (7) calendar days prior to the day scheduled for the proposal or defense) with the committee chair as the last person to get a copy indicating that the policy has been met.

Number of Votes required for Passing the Oral Comprehensive Examination

The Clinical Child Psychology Program defines a "pass" for the oral comprehensive examination as a vote of the committee in which over half of the total number of committee members present and voting votes in favor of approving the student's document and oral examination. A "fail" is recorded when a pass majority is not achieved.

Oral Comprehensive Deadline

Starting January 1, 2013, all students, regardless of date of entry to the program, must successfully complete the oral comprehensive examination (Dissertation Proposal) before Stop Day of the Spring semester in the year in which they intend to apply for internship. If a student does not pass by this date, the CCPP Faculty will not approve them for internship readiness in that year.

Students are encouraged to proceed with alacrity toward completing the oral comprehensive requirement at any time of the year. The above policy is salient for those who wish to apply for internship in a particular year. (Approved by the CCPP Faculty 10/31/11)

If a student does not anticipate completing the oral comprehensive examination (Dissertation Proposal) before Stop Day of the Spring semester in the year in which they intend to apply for internship, an application can be made for a one-time extension of the deadline—until no later than July 31 of that year. Failure to meet this extended deadline will prevent the student from being considered for internship readiness until the next calendar year.

To be eligible for this extension the student must have been making adequate (on-track) progress toward meeting the standard deadline (Stop Day) and must have experienced extraordinary circumstances that unavoidably halted or delayed progress on the dissertation proposal (e.g., death of a family member, birth/adoption of a child, serious illness, unplanned absence of supervisor). This extension policy does not apply to students who were delayed because of avoidable or preventable circumstances (e.g., missed deadlines on drafts, poor or delayed planning, slow progress on writing).

The application (submitted to the Program Director by close of business on the Thursday before Stop Day) must include the following:

- Demonstration of adequate (on track) progress toward meeting the deadline prior to the event;
- Description of the extraordinary event that was associated with halted or delayed progress, and the student's attempts to address the event and continue on track;
- Plan for managing the residual stress resulting from the event;
- Letter of support from the student's dissertation chair.

The faculty will discuss and vote on the application at the annual Faculty Retreat (held on Stop Day); the Program Director will convey the faculty's decision to the student by the following Monday. Applications that are not submitted before close of business (5:00pm) on the Thursday before Stop Day will not be considered. (Approved by the CCPP Faculty 06/21/13).

9. Doctoral Dissertation

The dissertation will be a substantial piece of original research representing an original

scholarly contribution to the knowledge of the field. A dissertation in the Clinical Child Psychology Program must be based on original, empirical investigation. The dissertation project must be directed (chaired) by a faculty member of the Graduate Faculty listed by the CLAS Committee on Graduate Affairs (COGA) as a "core faculty" of the Clinical Child Psychology Program. The dissertation oral examination committee will be composed of the chair plus four additional members. All members of the committee must be members of the Graduate Faculty. Three members of the five person committee must be listed by the CLAS Committee on Graduate Affairs (COGA) as "core faculty" of the Clinical Child Psychology Program. One member of the committee must be outside of the two departments affiliated with the Clinical Child Psychology Program (Applied Behavioral Science; Psychology) as the representative of GS. The remaining member of the five must hold a minimum of Graduate Faculty status within KU and can be affiliated with any unit.

The program recognizes the value and/or necessity of co-chairs for dissertation projects. However, given the likelihood of substantial formative evaluation of the student's research by both co-chairs, it is advantageous for the student to receive feedback from a full contingent of committee members that have not been highly involved with or invested in the conduct of the research. Thus, for dissertation committees with co-chairs, the candidate and advisor must identify an additional committee member to serve the functional role of summative evaluator. That is, for a dissertation with a co-chair, the committee will include both co-chairs and an additional 4 committee members (including one outside member and three core members of the CCPP as noted above).

The steps of the dissertation project include:

1. written proposal and oral defense (as part of the Oral Comprehensive Exam)
2. gathering of data, analysis, write-up and editing (overview by committee chair)
3. submission of document to committee
4. oral defense of dissertation document

The Chair of the Committee will have a copy of the Defense Committee Report for approval and signatures of all members of the committee at the time of the defense. See Appendix A-9.

Please note that **at least one month** must elapse between the Comprehensive Oral Exam and the final defense of the dissertation.

All proposal and defense documents for the dissertation are due to all committee members on a business day at least one week (7 days) before the date of the meeting. If this cannot be accomplished, then the date of the committee meeting will be changed to allow one week for reading of the document. Students must distribute copies of the document at least one week prior to the meeting (no later than 4:30 p.m. CT, on the *business* day, seven (7) calendar days prior to the day scheduled for the proposal or

defense) with the committee chair as the last person to get a copy indicating that the policy has been met.

Electronic copies of the dissertation proposal and the dissertation for the defense should be provided to all committee members; a hard copy may be provided by the student if requested by a committee member.

No copyrighted forms or materials may be included in the dissertation without written permission of the holder of the copyright. Figures and tables should be inserted in the text of the manuscript where they are referred to (this modifies APA publication style).

The dissertation abstracts are limited by GS and the electronic submission requirements (350 words). Because the dissertations are now abstracted in the PsycINFO database, please insure that the abstract contains at a minimum, the following four components required of APA journal publications:
>   1. the purpose/objective of the study;
>   2. the research methods, including the number and type of participants;
>   3. a summary of the key findings;
>   4. a statement that reflects the overall conclusions/implications

Upon approval of the final dissertation document, the cover page must be signed by the committee members. The student should follow the requirements of COGA/GS (see "Dissertation Formatting Guidelines") regarding the unbound official versions submitted to COGA office and appropriate fee payment. Please refer to "Doctoral Degree Checklist" provided by COGA at https://coga.ku.edu/doctoral-degree-checklist for graduation requirements.

Following the policy articulated by GS, title page sheets to master's thesis and doctoral dissertation need to be completely signed by all committee members, including the outside member for the doctoral dissertation (who represents GS). This policy, adopted by the CCPP faculty on May 17, 2004, supercedes previous policies of the Graduate Division of the College to allow 3 out of 5 signatures. The new policy requires all committee members to sign the cover page. The acceptance page requires only the committee chairperson's signature.

The student must provide an electronic copy of the final version for the Clinical Child Psychology Program Library (give to the Program Administrative Associate).

A minimum of 12 credit hours must be taken in Dissertation in Clinical Child Psychology PSYC/ABSC 998. (Note. Dissertation hours do not count toward this minimum until after the student is admitted to doctoral candidacy with successful completion of the Oral Comps.) Doctoral students must be "continuously enrolled" for at least one credit hour in Dissertation during fall and spring semesters (or petition for a leave from GS).

Dissertation Defense Date Deadline

If the doctoral dissertation has not been defended by the match date for internship placement in February, the student must decide whether to withdraw from the match process or plan to return to the University of Kansas the semester following completion of the internship and remain in residence until the dissertation is successfully defended and the final dissertation document has been approved. Funding during this period will be provided through the program only in a nonpriority status. If students do not come back to complete the dissertation, they will be automatically terminated from the program. If the dissertation is successfully defended and all documents have been completed prior to the end of the internship, then the requirement to return to KU will be waived.

Students affected by this policy may petition the faculty for a time-limited exemption to its enforcement. The student's advisor must approve the written plan prior to requesting the exemption. A written request with plan must be submitted to the Director for faculty consideration by May 1 before the end of the internship. The request for a time-limited exemption must contain the following elements in an explicit and detailed plan with clearly defined markers and timeline for completion of the dissertation project:

1. a plan for data collection and analysis if not completed and timeline for completion of each section in the write-up (for no more than a six month period starting from the date of internship completion); the timeline must be made in collaboration with the advisor so planned time for faculty editing can be scheduled;
2. documentation of protected time in any work position taken during the post-internship period for data collection, analysis, write-up, advisor meetings, and dissertation defense;
3.   a schedule of face-to-face supervision with the advisor in Lawrence until the dissertation is completed should be outlined;
4.   a schedule of telephone and email contacts with the advisor for completion of each section;
5.   a date by which the dissertation will be completed and ready to submit to committee with a projected date for oral defense.

Failure to comply with any one element of the plan will result in the removal of the exemption. In this case, the policy of requiring a return to Lawrence will be implemented and the student must return to Lawrence until the dissertation is completed.

An exemption to the policy will be possible for one 6 month period with the option of requesting an extension up to a maximum of 12 months from the end of internship. The student may apply for an extension to the exemption only under exceptional or extraordinary circumstances and with documented evidence of substantial progression

toward completion of the dissertation since the end of the internship. Failure to demonstrate substantial progress toward completion will result in denial of an extension request and reinstating of the policy to return to Lawrence. An extension to the initial 6 months is not automatic.

The obligation is on the student to demonstrate that they are doing all that can be done to get the project done. Although this policy indicates the program's concern that students complete their dissertations in a timely manner, it should be primarily the student's concern to complete the dissertation. The program requires documentation that the dissertation is a priority. Thus, the dissertation must remain the responsibility of the student. Extended demands on faculty time to contact the student and to prompt the progress, and then to make hurried responses for feedback to drafts, schedule meetings at the deadline, etc. detracts from the appropriate attention to students who are making progress and do not require such extensive effort.

Students must enter into any post-internship positions only after careful consideration of these policies. Negative ramifications for the student (and potentially other students in the program) may result from student failure to conform to the above requirements. The student must take the responsibility to follow the requirements outlined in this policy.

Adopted by CCPP Faculty April 2, 2007

Passing the oral defense "with honors"

Doctoral dissertations may be "passed with honors." The honors designation will be considered only in the rare cases and should not occur as the norm. Passing with honors may be considered when the student's document as submitted to the committee, presentation, and oral defense are exceptional in all aspects. Any committee member, other than the chair, must nominate the student for this status and provide justification. A secret ballot (with the chair voting) will be taken during the *in camera* portion of the orals. The honors designation will be made only when the vote is unanimous in favor of "passing with honors."

Food and Drink at Orals

No food or drink should be provided by the student for whom the committee meeting is being held. Members of the committee will be informed by the student of this policy and indicate that they will be in compliance with program policy.

Justification for Changes to Thesis or Dissertation Project from Proposal

For the dissertation and thesis projects, the student must propose appropriately with careful consideration for such considerations as numbers of participants and statistical analyses. The "contract" of a project approved as proposed at the committee meetings is not always tenable if changes are made in participants or analyses after the fact. A logical and substantial justification must be made for any changes to a project after it has been proposed and approved. These changes must be reviewed and approved by the

student's committee prior to the final defense.

Number of Votes required for Passing Final Dissertation Defense

The Clinical Child Psychology Program defines a "pass" for the oral comprehensive examination and final dissertation defense as a vote of the committee in which over half of the total number of committee members present and voting votes in favor of approving the student's document and oral defense. A "fail" is recorded when a pass majority is not achieved.

Graduate Learner Outcome Dissertation Rubric

As per GS and University policies, the CCPP collects outcome data on our students' doctoral work. Approximately one week before the scheduled defense date, dissertation committee members will be provided with a copy of the student's dissertation document. Committee members will be sent an email with a link to complete the dissertation rubric (see Appendix F) to evaluate the paper on several dimensions.

The completed rubrics will be sent electronically to the Office of Institutional Research and Planning (OIRP). Aggregate data from CCPP graduate student outcomes will be available to the CCPP to assist with program development.

10. Predoctoral Internship

Successful completion of an 11-month Predoctoral Internship is a requirement for the Ph.D. in Clinical Child Psychology. Students will complete the clinical internship at a setting and program approved by the Program faculty. The internship program typically will be accredited by the American Psychological Association. Internship sites will be selected to complement and extend the student's predoctoral experience as a capstone experience. The student will apply to only those internship programs with the approval of the Program faculty when the internship programs are appropriate for and consistent with the principles and objectives of the KU Clinical Child Psychology Program. **Students should expect to relocate for their internship year.** Students will enroll in PSYC/ABSC 963 for a total of 3 credit hours (1 hour per semester: fall, spring, summer). Students will normally apply in the fourth year in the program or equivalent. The University will charge for course enrollment in the courses of Clinical Child Psychology Internship (three hours are required in total) while the student is completing the year-long internship requirement.

Prior to applying for clinical internships the Clinical Child Psychology Program faculty in conjunction with the clinical supervisors will certify by a formal vote that the student is certified as ready for application to internship programs. Students may not begin the application process unless a majority vote assents to this certification. A form for recording this vote is contained in the appendix of this manual (Appendix A-14). Upon certification, the completed form will be placed in the student's official record file. The Training Director will prepare the authorization for the APPIC match, reporting the vote

of the faculty.

The applicant must provide the Program Director a copy of their forms documenting clinical contact hours in addition to a summary form. In order to facilitate applications and reduce student anxiety by giving information, the Program maintains an extensive file of articles on applying, interviewing, and deciding. The Program holds several meetings at various times during the year in preparation for internship application.

Internship applicants and the Program will abide by the rules and procedures currently in place as presented by the Association of Psychology Postdoctoral and Internship Centers. Students are advised to check http://www.appic.org well in advance and to register as required.

As a Program following the policies of the Council of University Directors of Clinical Psychology, students in the Clinical Child Psychology Program are advised to refrain from making statements to internship programs about the ranking of the internship programs to which they have applied (i.e., we do not allow a student to declare that a program is the student's "first-choice"). If a student does state a first choice to an internship program, that program will know that they are not following the Clinical Child Program's policy.

In appreciation of the possibility a student may, on occasion, wish to apply for an internship program that is not APA-accredited but which provides specialized training which is of interest to the student, the Program faculty will consider the student's petition to apply to an agency in advance.

1. Prior to submitting an application, it is the responsibility of the student to obtain detailed information about the internship training including the stability, number and qualifications of the psychology staff, the variety and type of role models presented by the staff, the individual responsible for the integrity and quality of the training program, degree of supervision, range of activities, history of other trainees in the program and interdisciplinary activities.

2. The student shall present to the Director and to their adviser a written statement of the information outlined above along with a statement of the ways in which this agency is of particular relevance to the student's training, including information provided directly by the agency. Of particular importance is whether the agency can provide training commensurate with the goals and objectives of the CCPP.

3. When sufficient information has been obtained, the Program faculty will either approve or disapprove of the internship agency for the student's application.

Currently, APPIC conducts a computer match to place intern applicants with internship programs. There is a registration fee involved set by APPIC and registration for the National Match Service is required. The Program and its students must abide by the

student's agreement made when registering for the match service. Specifically, students are bound by the assignment to an internship placed by the match service. To renege on this agreement calls into question the student's professional conduct and brings disrepute to the Program. The student who withdraws from the assigned internship may be subject to termination from the Program.

If the internship program formally starts on or before July 15, then the student should enroll for the Internship hour starting that summer, then enroll also in the Fall and Spring (but not the following summer). If the internship program starts after July 15, then the student should enroll in internship hour starting in the fall, then enroll also in the Spring and Summer (of the next year).

Completion of three credit hours in Internship, however, does not satisfy the Internship requirement: The CCPP requirement for an internship to complete the doctoral degree is satisfied only when the internship director or supervisor formally states that the student has successfully completed the internship program requirements. This requires that the student/intern finish all the internship work, even if not enrolled for internship credits.

11. Council of University Directors of Clinical Psychology Expectations for Internship Eligibility

1. Trainee meets or exceeds foundational and functional competencies as outlined by the Assessment of Competency Benchmarks Work Group.

2. Trainee successfully completed a master's thesis (or equivalent).

3. Trainee passed program's comprehensive or qualifying exams (or equivalent).

4. Trainee's dissertation proposal has been accepted at the time of application to the internship.

5. Trainee successfully completed all required course work for the doctoral degree prior to starting the internship (except hours for dissertation and internship).

6. Trainee completed an organized, sequential series of practicum experiences supervised by at least two different clinical psychologists that involve formalized practicum experience in evidence-based assessment and therapy. The Trainee completed at least 450 face-to-face hours of assessment/intervention and at least 150 hours of supervision by a clinical psychologist who routinely employed individual and/or group supervision models and at least one or more of the following intensive supervision methods (e.g., direct observation, co-therapy, audio/videotape review). During early formative years, the ratio of face-to-face hours to supervision hours approximated 1:1 and increased to around 4:1 as the Trainee developed intermediate to advanced clinical skills.

7. Trainee has contributed to the scientific knowledge within psychology, as evidenced by:

   a. Publishing an article in a refereed journal or a book chapter as an author or co-author, **or**

   b. Presenting at least three papers/posters/workshops at regional, national, or international professional conferences or meetings.

8. Trainee was enrolled in a program that conducts formal annual evaluations of each student for purposes of monitoring trainees' developing competencies and assuring that only students making satisfactory progress are retained and recommended for doctoral candidacy and entry into the profession. This annual program review of each student utilizes evaluations obtained from different faculty and supervisors and covers the full range of competencies including academic, research, clinical skills, and ethical professional behavior. Trainee has been rated as meeting expectations and possessing the required competencies at the time of applying for internship.

Adopted by CUDCP on January 22, 2011
Endorsed by the CCPP Faculty on February 28, 2011

V. Program Policies and Procedures

A. Advising

The Director of the Program serves as the official Academic Advisor for all students in the program. As such, the Director bears responsibility for assisting the student in course selection, articulating career goals, assisting with program requirements (e.g., internship applications), and designing experiences consonant with career goals.   However, as noted below, each student in the Clinical Child Psychology Program is assigned a Research Advisor who also provides guidance with regard to course selection, developing and articulating career goals, and designing experiences consonant with career goals.

During the first semester of enrollment in the CCPP, a Research Advisor will be selected by the student with the agreement of the faculty member and the Clinical Child Psychology Program Director. The Research Advisor will be responsible for involving the student in initial research activities and eventually for the master's thesis, task, and dissertation projects. The Research Advisor will be requested to provide information regarding the student's progress toward completing the Clinical Child Psychology Program requirements.

By the end (i.e., Stop Day) of the fall semester of the student's first year, the chosen Research Advisor must notify the Program Director of the mentorship relationship. The student is responsible for prompting the Research Advisor to notify the Program Director of this relationships. The Research Advisor may be changed during the student's academic career. If a student wishes to change Research Advisors, the student must notify the Program Director of this intent. A new Research Advisor may be selected by the student with the agreement of the faculty member and the Clinical Child Psychology Program Director.

B. Evaluation of Student Performance and Progress

Student progress is evaluated continuously throughout the program. Multiple criteria are used in evaluation. Depending on the level of the student, these include: (1) performance in required and elective course work; (2) clinical functioning; (3) research progress; (4) thesis proposal and thesis defense; (5) preliminary examination (the Task); (6) dissertation proposal/comprehensive oral examination; (7) dissertation and oral defense; and (8) ethical and professional functioning. Goals and objectives for training outlined in this Manual form a basis for the reviews.

Prior to the annual Faculty Retreat, students will be informed of the need to meet with their Research Advisor(s) to discuss their progress in the program. Students will also be asked to provide the Program Administrative Associate with: a) an updated GAPS forms, and b) an updated curriculum vita. These materials, along with evaluation forms from clinical practicum supervisors, funding placement supervisors, GTA faculty supervisors, and the Research Advisor or research supervisors (if not in the CCPP core faculty), will be examined by the core faculty of the CCPP in their annual Faculty Retreat. Please see Appendix A-12 for copies of evaluation forms.

The CCPP Core Faculty meet regularly during the academic year at which time students' progress and professional competencies may be discussed and evaluated. Results of such discussions may be shared with students at any time to facilitate their professional development.

Formal evaluations of students' progress toward degree and development of professional competencies occurs at the end of the fall semester (during a faculty meeting), and at the Annual Faculty Retreat at the end of each spring semester. Written feedback is provided at least once-per-year (usually after the Annual Faculty Retreat) or at any time that problems are perceived.

The student's Research Advisor typically conveys to the student the fact that her/his professional development was discussed and the content of the discussion. If problems are perceived, the student may be counseled as to possible or recommended courses of action. In some cases, remediation will be advised. In the rare case where the magnitude of the problem is such that the faculty considers remediation unfeasible, the student will be counseled out of the Clinical Child Psychology Program. The procedure for this course of action is outlined in the program policy statement concerning Non-academic Failure of Graduate Students (below).

Students need to demonstrate standards of behavior consistent with licensure laws for professional psychology. The Director and faculty are frequently asked to complete evaluation forms that require judgment on numerous personal and professional qualities, including integrity, honesty, fairness, credibility, reliability, respect for others, respect for the laws of the state and nation, self-discipline, self-evaluation, initiative, and commitment to the profession of psychology. In order to complete these forms positively, the faculty need to observe unambiguous evidence that the student's behavior meets these standards of professional stance and demeanor.

C. Impairment to Professional Functioning

The Ethical Principles of Psychologists and Code of Conduct holds that students, like psychologists, must recognize that their personal problems and conflicts can interfere with their effectiveness and can cause harm to others. The student must "refrain from initiating an activity when they know or should know that there is a substantial likelihood that their personal problems will prevent them from performing their work-related activities in a competent manner." When the student becomes "aware of personal problems that may interfere with their performing work-related duties adequately, they take appropriate measures, such as obtaining professional consultation or assistance, and determine whether they should limit, suspend, or terminate their work-related duties" (American Psychological Association Ethical Principles of Psychologists and Code of Conduct, 2010)

In addition to the regular evaluation of students through grades, research, work, and practicum performances, students are evaluated regarding their interpersonal competency as it influences their professional and ethical conduct in the program and potential work in

the field. In particular, the Personal and Professional Behavioral Objectives, as outlined in the Training Manual, are relevant considerations. As noted in that section, in the case of serious interference with performance, the Program will follow the policies detailed in the curriculum section for *A Procedure for Non-academic Failure of Graduate Students in the Clinical Child Psychology Program.*

Therapy of Students. Students may wish to seek therapy during their graduate training and are encouraged to do so. In some cases, therapy will be recommended to students to help resolve issues that seem to interfere with personal or professional development. Each student is advised to talk with the Program Director or their Research Advisor about such therapeutic involvement at some time during graduate and internship training. It is the policy of the Program that no student enter a therapeutic relationship with a faculty member in the Department; however, it is acceptable for a faculty member to assist the student in finding a suitable therapist.

D. A Procedure for Non-academic Failure of Graduate Students and Due Process in the Clinical Child Psychology Program

All students are evaluated by the faculty at the end of each year of graduate study. At the time of the evaluation, progress toward the Ph.D. is reviewed. All known data relevant to this progress are considered. Four possible recommendations may result from this evaluation:

1. The student is encouraged to continue in the program for another year;

2. The student is encouraged to continue in the program for another year, but is apprised of problems perceived by the faculty and advised concerning their remediation;

3. The student is permitted to continue in the program pursuant to their successfully completing a specific written program of remediation prescribed by the faculty;

4. The student is requested to withdraw from the program for reasons specified in writing.

Any problems identified to the student shall be presented in writing. Faculty (or staff) members providing significant information relevant to the student's evaluation will provide such information as completely as possible, specifying the sources of the information. The student shall be afforded an opportunity to consult with the faculty member(s) involved. Remediation plans prescribed by the faculty will also be presented to the student in written form at this time. Criticisms and remediation plans will be signed by the student (if they agree), the Director of the Clinical Child Psychology Program and the student's Research Advisor, then placed in the student's confidential program file.

If the student does not agree with the criticisms of the plan for remediation, they will be given a minimum of two weeks and a maximum of four to prepare a request for

reconsideration. The student may select any consenting representative (including another student) to appear with or instead of her or him at a reconsideration hearing before the faculty who will subsequently vote to affirm or modify the documents in question. The result will then be placed in the confidential file of that student.

Upon a majority vote of the Program faculty, a student may be required to be evaluated by a psychological assessor chosen by the faculty to determine the nature and extent of impairment, if any.

Remediation plans will be explicit with stated criteria for judging their success or failure. A panel of three judges shall be asked to determine whether the criteria specified have been met. One judge shall be selected by the student, one by the faculty, and the third by the other two judges. At least two of these judges must possess a doctorate in the broad area of psychology and applied behavioral science specialization. It is not required that the third judge have such credentials. Their decision will be presented to the entire Clinical Child Psychology core faculty for approval by majority vote of a quorum of the faculty present at the meeting. Unusual circumstances are required for the faculty to set aside the decision of the judges such as compelling, clear, and verified additional information which is presented at the meeting that could not have been presented previously. This final decision should take place within one month of the period specified for remediation.

Any decision of the faculty to fail to continue a student in the program for other than academic reasons is subject to a review at the request of the student. Up to four weeks will be allowed for the student to prepare her or his argument to be presented by the student and/or representative to the faculty of the Department of Psychology and the Department of Applied Behavioral Science. At the option of the student, a graduate student representative may be present at the review meeting. A majority vote of the quorum of the faculty present at the appeal (review) meeting will be final concerning the student's promotion in the program. In the event of a tie vote, the student will be admitted to the next year of training.

[The procedure and its wording are adapted from the Clinical Training Manual of the University of Alabama. An elaboration of this procedure is described by:
Miller, H. L., & Rickard, H. C. (1983). Procedures and student's rights in the evaluation
    process. *Professional Psychology, 14*, 830-836.]

E. Outside Activities

Students engage in many activities not officially part of the program or university functions (i.e., not for course credit). Many are personal and not of interest to the program. For some of these activities, students often serve as representatives of the Clinical Child Psychology Program (unofficially and informally). Some are with the sanction of the Program. Often students are asked to participate in activities due to their specialized training and interests, either as volunteers and consultants or as paid staff for an agency, institution, business, or program. Students may seek such opportunities to gain experience or to fulfill personal interests. The Clinical Child Psychology Program makes no *a priori* restrictions on the nature or number of these outside activities, except as covered by its

Ethical Principles requirements. The program faculty assumes students will use sound judgment in deciding to participate in which outside activities and not misrepresent their credentials or involvement of the program in such activities.

What students do outside of the Program reflects on the Program whether one wants it to or not. Students must inform the Program Director each semester of any outside activities in which their status as a student in the program may be related to their participation (an "Outside Activities Reporting Form" is provided for this). Students should update this form as needed over the course of a semester. If students are placed with the sanction of the program in clinical situations external to the Psychology Clinic or the Child and Family Clinic, then the guidelines for external placement should be followed. Students are responsible for informing those associated with the outside activities that their work is unrelated to their university affiliation and insure that no public claim of a relationship is permitted.

Outside employment and activities may distract the student from making acceptable progress in the Program or be obstacles to participating fully in research and clinical work. The student should seriously consider conflicts of time and energy away from the pursuit of the clinical child psychology degree. The Program recommends that any employment over 10 hours be considered by the student's Research Advisor and Program Director (work commitments facilitated by the Program receive this review automatically; this recommendation applies to external employment).

F. KU Graduate Studies Time Constraint for Doctoral Degree:

Eight (8) years are allowed to complete the entirety of graduate work for both the M.A. and the Ph.D. in Clinical Child Psychology. If a student enters KU with a master's degree in any field, 8 years are allowed to complete the Ph.D. If a student has not completed all degree requirements by the end of the 8th academic year (semester ending in May), then they will be automatically terminated from the program.

Students in the Clinical Child Psychology Program will be expected to complete the required course work, thesis and dissertation requirements, and predoctoral internship requirement within 5-6 years.

G. Rules Regarding Grades and Cumulative Grade Point Average

a. Incomplete Policy: The University Senate, in its April 23, 2009 meeting, voted to change the incomplete policies in USRR section 2.2.3 (Incompletes). Effective with fall 2009 courses, all incompletes automatically revert to a grade pre-determined by the faculty member once a year has elapsed. A student may not take oral comprehensive examinations or graduate with an Incomplete on her or his record. Look for updates on the University Governance website at http://governance.ku.edu/.

b. The CCPP has the program specific policy that any student receiving 2 grades of

C (or lower) during their enrollment in the Program will be terminated from the Program upon the receipt of the second C (or lower) grade.

3. If a CCPP student receives a C (or lower) in a required course in the CCPP doctoral curriculum, they must re-take the course the next time it is offered or in an equivalent course approved by the Director. The student must receive an A or B in that course, or the second C will incur the "two C policy" (see #2 above) and result in termination from the program.

4. As required by the Office of Graduate Studies at the University of Kansas, students in the Clinical Child Psychology Program will maintain at least a B average for their graduate level course work. Falling below this cumulative graduate grade-point average of B will result in the student being placed on probation. If the average grade point is raised to at least a B average by the end of the next term of enrollment, the students will return to regular status. If not, the student may not re-enroll in the program.

5. Thesis and dissertation hours in the CCPP (i.e., ABSC/PSYC 897 and ABSC/PSYC 998, respectively) are graded on a scale that indicates a student's work as demonstrating *satisfactory progress* (SP), *limited progress* (LP), or *no progress* (NP).   This grading scale is established in USRR 2.2.5.

Students and faculty mentors are strongly encouraged to set realistic, concrete, and measurable goals for each semester the student is enrolled in thesis or dissertation hours, and at the beginning of the semester to formally and clearly articulate expectations for progress for that semester. The responsibility for setting these goals falls to both the student and the faculty member.

By University policy, a grade of SP must be assigned for a student's final semester of enrollment in thesis or dissertation course work. The SP indicates that the final product (i.e., the thesis or dissertation) was of satisfactory quality to warrant degree completion.

Students that earn a grade of LP for two consecutive semesters, or that earn a grade of NP for a single semester will be provided a specific remediation plan to facilitate their satisfactory progress in the following semesters. Please see Part V, Section D, page 46-47 for policies and procedures on remediation.

H. Academic Residency Requirements (Not for fee purposes)

The Office of Graduate Studies has "Residency Requirements." Residency course work consists of regular course work--not Thesis Research, Dissertation Research, or Independent Study credit hours. The Residency Requirements must be fulfilled prior to the semester in which the Comprehensive Oral Exam is taken.

I. Credit Hours

A minimum of 95 hours of graduate credit is required for the Ph.D. degree in Clinical Child Psychology. The requirements include specified courses and options within required areas. Electives are courses selected by the student in consultation with the Director and Advisor.

J. Enrollment Requirements

Students are accepted into the Clinical Child Psychology Program as graduate students in both the Department of Psychology and the Department of Applied Behavioral Science as full-time students. Full-time status is defined by the University in the Policy Library (http://policy.ku.edu/graduate-studies/fulltime-enrollment). This policy defines the categories of full-time and part-time enrollment.

Students in the Clinical Child Psychology Program are encouraged to work with their Research Advisor and the Program Director to ensure that their enrollment pattern places them on a trajectory of program completion within the 5-6 years noted above. Note that by design, program completion requires a minimum of 4 years of full-time residence in the program plus a one-year internship.

The Clinical Internship (ABSC/PSYC 963) required for the Ph.D. in Clinical Child Psychology has been approved by GS to count as full-time enrollment. Students enrolled in this internship course (one hour per semester) will be considered as full-time students.

Post Comprehensive Enrollment: Once the comprehensive examination has been passed, the student must be continuously enrolled for a full load, **minimum of six (6) hours per semester for Fall and Spring; one (1) practicum hour in summer**, until all degree requirements are completed or until 18 hours have been completed (at least 9 of the 18 must be dissertation hours). If Oral Comps are passed on or before official "Stop Day" at KU (i.e., before final exams start), and if the student is enrolled in dissertation hours that semester, the student may count the hours in that semester toward the post comprehensive enrollment. A minimum of 12 hours in Dissertation must be taken but enrollment in Dissertation credits does not count toward this minimum until after the student is admitted to doctoral candidacy (at the completion of the Oral Comprehensive Exam). See http://policy.ku.edu/graduate-studies/doctoral-candidacy.

After completing 18 post-comprehensive hours, the student may drop to 1 or 2 hours per semester until degree requirements are completed (providing this enrollment is justified by the demands on faculty time and university resources). The student must continue to enroll in 1 hour per semester at a minimum until the dissertation has been written, presented and defended, copied, bound, turned in, and the student has satisfactorily completed the internship.

Summer Completion: In order to graduate in the summer (August), all requirements must be completed by a date established by the College Office of Graduate Affairs (see

http://coga.ku.edu/doctoral-degree-checklist). Notably, this requirement includes completion of the internship requirement in addition to the dissertation defense and all courses completed. If a student completes all the requirements after that established date *but before the last date indicated on the Academic Calendar*, they do not have to enroll for the Fall. COGA will, and does frequently, write a statement of degree completion in a letter when all the requirements are completed. This has, in the past, satisfied postdoctoral programs, employers, and licensing boards.

K. Transfer Students/Students with Master's Degree

Transfer of credit hours taken at another institution may be counted toward the requirements of the Clinical Child Psychology Program through consultation with the Program Director following presentation of course descriptions and syllabuses, reading and work assignments. These courses, however, are not officially transferred (i.e., the hours for waived courses do not count toward the hours necessary for graduation). Rather, the student may take elective courses (including Practicum and Research Hours) to fulfill the required number of hours for the Doctoral degree (95).

L. Liability Coverage

Students, even those who are officially enrolled in courses (including research and practicum activities), are not covered by the Kansas State Tort Claims Act. This means that, should a student be sued in a civil action (e.g., for malpractice/ negligence), that student will not be represented or defended by the state/university. This student must pay for the lawyers from their own resources and will stand financially vulnerable to any judgment found against him or her. This is not just a university interpretation and is not a new situation; it is an existing statute in Kansas.

Graduate teaching assistants may be covered when the legal action arises as a result of the assigned duties as a university employee (but not necessarily for actions as a student in a course).

As a result of this situation, the Program encourages students to obtain the liability insurance coverage about which information is provided at various points.

M. Accommodations and Assistance to Students with Disabilities

Students enrolled in any KU course may contact the Academic Achievement and Access Center, 22 Strong Hall or call (785) 864-4064 (voiceTTY) for assistance (https://access.ku.edu/).   Any student in a course and in the Program who has a disability that may prevent him or her from fully demonstrating their abilities, should contact the course instructor or the Program Director as soon as possible to discuss accommodations necessary to ensure full participation and facilitate the educational opportunities.

N. Student's Rights and Responsibilities

The student will find detailed information about their rights and responsibilities at KU in the document available online for the current semester Class Schedule. These include a Bill of Rights, Academic Misconduct, Family Educational Rights and Privacy Act (FERPA), and other important policies. In addition to these policies, the following responsibilities and rights are noted here.

Dress Code

During graduate school, individuals transition from student to professional. This transition involves learning how to dress for the professional roles graduate students fill during and after graduate school. CCPP students, in particular, take on multiple kinds of professional roles in the training clinic, community clinics, schools, KU classrooms, and professional meetings. The way CCPP students dress sends a message about their level of competence, trustworthiness, dependability, and other desirable professional attributes. It influences the degree of respect others will have for them. In addition, because community members, KU students, and other professionals may encounter only one or a few CCPP students, one individual can be a powerful representative for the program as a whole.

Proper attire and grooming is expected of CCPP students when they are in professional roles, including, but not limited to
- any time spent in the program training clinic (seeing clients or otherwise)
- meeting with students for which the student is a TA or graduate instructor (e.g., class time and office hours)
- community practicum placements
- school visits
- interactions with research participants
- professional meetings and conferences

Stricter dress policies at field or practicum sites supersede this program dress policy. Activities that require specialized dress will be exempt from this policy.

Responsibilities Regarding Electronic Communications and Social Media

Via information provided by the Council of University Directors of Clinical Psychology, the implications of trainee information on websites, email signatures, and answering machine messages include:
- Internship programs report conducting web searches on applicants' names before inviting applicants for interviews and before deciding to rank applicants in the match.
- Clients are conducting web-based searches on trainees' names and finding information about therapists (and declining to come to clinics based on what they find).
- Potential employers are conducting 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.
- postings to a variety of listservs might reflect poorly on oneself and the program
- Although signature lines are ways of indicating your uniqueness and philosophy, one is not in control of where the emails will ever end up and might affect how others view you as a professional. Quotations on personal philosophy quotations, religious beliefs, and political attitudes might have adverse reactions from other people.
- Answering machine messages might also be entertaining to your peers, express your individuality, and be indications of your sense of humor. Greetings on voicemail services and answering machines should be thoughtfully constructed. 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.

There are now a number of negative episodes in training programs and at universities where graduate students have been negatively affected by material on websites, emails, and answering machine messages. There are examples of emails from faculty and students getting published in newspapers that caused people harm.

Information that seems to be fun, informative, and candid might put the program and the student in a bad light. What might be seen as "private" self-disclosure indicating your perceptions of yourself among friends is actually very public. This includes blogs and personal social media pages, including ones started *before* graduate school. *Anything on the Web is potentially available to all who seek.*

Trainees are reminded that, if you identify yourself as graduate student in the program, then we have some interest in how you portray yourself (see other policies in the program). If you report doing or are depicted on a website or in an email as doing something unethical or illegal, then this information may be used by the program to determine probation or even retention. As a preventive measure, the Program advises that students (and faculty) approach online blogs and websites, including personal information, carefully. Students are advised to engage in "safe" web practices and be concerned about professional demeanor and presentations.

Research Team Mentorship

Students are required to be affiliated with one or more research teams from the end of their first semester in the Clinical Child Psychology Program until they begin their Clinical internships. Membership on a research team will include such activities and advantages of:
- Sharing of references and articles of interest to other members of the team (as in

a journal club);

- Acting as a research assistant in a project being conducted by the research advisor or by another member of the team (and gain experience and possibly authorships);
- Receiving assistance from other team members in carrying out your own research projects (e.g., in design, conducting, and data analysis);
- Offering constructive criticism of documents written by other members of the team and advisor (e.g., articles to be submitted for publication, proposals and final documents for thesis and dissertation, grant proposals, convention presentations, posters);
- Conducting joint research projects in which all team members contribute;
- Brainstorming and refining ideas for future research;
- Discussing and demonstrating specific research techniques (e.g., statistical methods; psychometric methods);
- Providing and receiving social support and structure to assist completion of research activities.

The information regarding research teams was adapted from the University of Saskatchewan Doctoral Program in Clinical Psychology webpage.

O. Records Access and Retention Policy

The Family Educational Rights and Privacy Act of 1974 (known as "The Buckley Amendment" or FERPA) deals with the access to educational records. A student has the right to review with their advisor and the Director, the contents of their personal academic record maintained in the Clinical Child Psychology Program. Copies of information contained in the file are regularly provided to the student. Other students will not be informed of actions or interventions taken with regard to any students in the Program.

For students enrolling in the program since the Fall of 2019, all student records are maintained electronically on a secure server only accessible to the CCPP Administration. Records for students entering the program prior to Fall 2019 are maintained in a paper-based file system. Files are locked and only program administration has access to paper files.

P. Professional Standards of Research and Practice

Students and faculty in the Program are expected to be knowledgeable about and to maintain behavior consistent with current and evolving professional standards for both research and clinical activities. Among those professional standards is the importance of maintaining the confidentiality of our clients--no matter where they are served. The right is held by the client, but we as professionals must maintain and defend it in all that we do. Although the following list may not be comprehensive, it offers the following ways that we jeopardize our clients' privacy (even somewhat "innocently"):

- through repeating identifiable information in conversation with colleagues, with others at parties, in classes taken and taught, and in casual talk around the clinic;
- through acknowledgment that somebody is a client or is not a client in the clinic. This acknowledgment can take several forms (e.g., through statements made on the telephone when somebody calls to inquire, when we leave messages with others for our clients, and with other professionals who may interact with our clients, but for whom we have no permission to discuss);
- through throwing in the trash without shredding, draft reports, case notes, supervision notes, etc. The custodial staff is not sworn to secrecy and certainly nobody else has a need to know anything in this way. Pages of discarded materials have been known to blow about in the landfill;
- through keeping computerized records of names, identifying information, reports, letters of transmittal, etc., on disks or on hard drives of computers at home or at the clinic and at the computer center; computers keep backup versions of all documents (deleting the main document does not destroy all versions) so it is relatively easy to restore deleted files; client ID information should never be on a portable device, hard drive, or network file.
- through taking clinic files home (intentionally to work on progress notes or inadvertently stuck inside book bags), leaving files in open areas of clinic (e.g., on the desk in waiting room or in a therapy room), or taking a file to a restaurant to work on while eating lunch;
- through sending undisguised and non "released" case reports as work samples to internship programs in applications and for postdocs and jobs.
- through leaving the videos of a client open after the session or after supervision; using client video as demonstrations for class without written consent and full disguising of personal/identifying information;
- through leaving phone message slips from clients in home trash, in books (as book marks) later returned to the library;

We, as professionals, incur the obligation to be ever vigilant. Each student signed the statement about following the ethical standards of the APA, we should not take that lightly. The ethics and standards of practice apply before you receive the Ph.D. (and even before you have taken the Ethics in Clinical Psychology course).

Q. Americans with Disabilities Act

Issues related to ADA are also frequently discussed in courses and Program meetings and additional information is available from the KU Office of Disability Resources (http://www.disability.ku.edu).

R. Clinical Practice

In the United States, clinical practice as a psychologist is regulated by state laws and by state administrative regulations maintained by state licensing boards/agencies. Graduation from a doctoral program in clinical psychology does not, by itself, qualify a person to practice as a psychologist. Appendix C contains the website for Kansas state laws and

regulations governing licensure as a psychologist. Students are advised to become familiar with licensing laws and regulations if they wish to pursue clinical practice in their careers.

S. Licensure

Information about licensure in all states, territories, and Canadian provinces is available from the website of the Association of State and Provincial Psychology Boards (ASPPB) http://www.asppb.org. The ASPPB website also provides links to websites of state psychology boards, as well as information about the Examination for Professional Practice in Psychology (EPPP).

The Clinical Child Psychology Program at the University of Kansas meets the educational requirements for doctoral training in the state of Kansas as outlined in K.A.R. 102-1-12. However, the state of Kansas also requires one year of supervised post-doctoral experience for licensure as a psychologist (K.A.R. 102-1-5a). This post-doctoral supervised experience must be obtained following completion of the Ph.D.

If you plan to obtain a license or certification in a state other than Kansas or a U.S. territory after completion of your program, it is highly recommended that you seek guidance from the appropriate licensing board/agency to ensure that you can obtain a license in your home state or home territory. In addition to the information provided by the ASPPB, the website https://nc-sara.org/professional-licensure-directory provides resources for licensure and certification boards outside of Kansas.

Following the uniform notification day established by the Association of Psychology Postdoctoral and Internship Centers (APPIC), the Director of the Clinical Child Psychology Program will meet with each CCPP student who matched to an internship to discuss licensure requirements in the state in which the internship is located. Students will be advised of any state licensure requirements that they have not met for the state in which they will be completing the internship. This meeting will be documented in the student's permanent academic record and on the Termination of Access form (see Appendix D-4) that all students must complete before they leave campus.

Beyond licensure post-graduation, there are a number of reasons a student may wish to become licensed as a Masters Level Psychologist (LMLP) in Kansas while completing their training, including establishing residency, taking the EPPP early, and enhancing employment with some agencies affiliated with the Program. Information about licensure as a LMLP is available on the Kansas Behavioral Sciences Regulatory Board website, https://ksbsrb.ks.gov.

T. Funding

The Program attempts to secure funding for all students who wish to have it. This policy of funding for all has been successful. The Program endeavors to make the funding allocation process to be one of fairness. The Program "controls" some positions directly and has input to assignment for other positions. For the latter, the Program assists the students in

securing the outside positions. Each spring, a memo is distributed to all students listing the positions and asking students to rank them for preferences. In the past these have included positions at Bert Nash Mental Health Center, KU Medical Center and Children's Mercy Hospital, Therapeutic Classrooms of Lawrence Public Schools, Graduate Teaching Assistantships, research and training grants, and clinic coordinators. The Program faculty uses the preferences of students in light of their qualifications in fitting the positions' requirements. Because not all positions are known at the same time, the process of allocation is a continuing process of matching student needs/interests to excellent opportunities for receiving financial support and experiences. Students are encouraged to assist in development of funding support.

U. Graduate Teaching Assistantships

The Program appoints students to GTA positions and evaluates them in accordance with the policies established by the University of Kansas (https://policy.ku.edu/human-resources/performance-evaluation-GTA).   Performance evaluations for GTAs must include a minimum of two components: classroom observations (or its equivalent for field placements) documented in writing and a written performance evaluation from the evaluator. Please see Appendix A-5 for a copy of the evaluation forms used for GTAs.

V. Program Meetings

Faculty and students in the Program meet as a group several times each year for discussions of Program procedures, special topics not covered in core courses, and presentations from speakers outside the Program. Topics have included school consultation, internship application, licensing and credentialing procedures, ethics, child abuse reporting requirements, other agency clinical and research activities. Students are encouraged to suggest presenters and topics.

W. Student Organization and Representative

The students elect a representative (approved by the faculty) to attend the regular CCPP faculty meetings. This representative is to bring student issues to the attention of the faculty and assist the faculty in its deliberations. In addition, the student representative prepares reports/minutes of discussions and actions back to the students. The student representative is excused from meetings in which individual student progress and performance are discussed.

Students will have volunteer representatives on the Admissions Committee and, when constituted, on Faculty Recruitment Committees. All students are invited to participate in activities related to these committees.

CCPP students have organized a formal organization, Graduate Student Organization, subject to the policies and procedures of the KU student organizations. Officers are elected according to the by-laws of the organization. The Program facilitates the functions of the GSO, but does not exert control over it.

X. Professional Development, Continuing Education Workshops, and Kansas Conference in Clinical Child Psychology

The CCPP faculty strongly encourage students to begin early in developing their involvement in professional activities to enhance their preparation for lifetime learning and career roles. The faculty views the following activities as important to professional development. Although not listed as requirements per se, involvement in these activities is viewed as positive evidence of developing professional identity:

- membership as student or affiliate in psychological organizations (e.g., American Psychological Association and Divisions, Society of Clinical Child and Adolescent Psychology, Society of Pediatric Psychology, Division of Clinical Psychology, Division of Child, Youth, and Family Services, Association for Behavioral and Cognitive Therapy, International Society for Research in Child Development, International Society for Research in Child and Adolescent Psychopathology)
- editorial critiques of manuscripts for journals and books with faculty
- teaching experiences
- presentations at conventions and conferences
- publication in journals and books
- attendance at continuing education workshops
- attendance at conventions and conferences
- assisting with grant development
- consultation with and service to public sector agencies and organizations
- attendance at KU colloquia and proseminar presentations.

The Clinical Child Psychology Program is an APA-approved provider of continuing education. As such, it frequently sponsors (or co-sponsors) workshops by clinical researchers and professionals.

In exchange for assisting at these workshops, Program students receive free or reduced registration. The Program uses these workshops to enhance student experiences and model a professional commitment to life-long learning.

Beginning in 1992, the Program has co-sponsored a biennial conference with the Society of Clinical Child and Adolescent Psychology (Division 53) of the American Psychological Association. This national conference attracts researchers and practitioners for its presentations by invited speakers and in submitted poster papers. Program students are intrinsically involved in the planning and running of the Conference. They receive benefits of professional interactions and reduced registration rates.

Y. Proseminar and Guest Speakers

Attendance at the variety of relevant presentations on the KU campus is important to the professional development of students. First year students are invited to attend the Proseminar on Friday afternoons conducted by the Department of Applied Behavioral Science, as well as various proseminars offered by the Psychology department (e.g., Proseminar on Developmental Science, the Faculty Colloquium in Quantitative Methods).

Students are also invited to attend special colloquia in the School Psychology Program and the Clinical Psychology Program.

Z. Letters of Recommendation

Faculty are frequently called upon by students to prepare letters of reference and recommendation for a variety of purposes usually requesting an evaluation of training and performance, abilities and skills, suitability for professional positions and functions, work habits, and personal characteristics as well as other information as may be needed for various review and evaluations by external persons and agencies. These letters are necessary for selection for funded positions, internships, as nominations for awards, for grant applications, for professional licensure, and for professional positions after graduation. Students are responsible for informing the faculty and program about the needs for these letters.

Beyond specific requests by students for letters of recommendation, students should understand that faculty will respond to official requests for information about them in good faith, sound judgment, honesty and fairness in the absence of a formal request by the student. The appendix to this manual (Appendix A-13) provides a release form for students to sign, granting permission for letters of reference for internships, award and grant applications, licensure, and professional positions as may be required of faculty. As part of reference letters, faculty may include information about student performance in courses, practicum, research activities, interpersonal relations, and other facets.

Opportunities for professional involvement may occasionally present in which only one or a few students can participate, such as service on an organization board or students group, travel award funds from KU or APA, outstanding thesis, etc. In these cases of limited number of nominations that can be made from the Program, the faculty will rely on the following procedure to determine which student(s) to nominate:

> Two weeks in advance of the deadline for which nominating materials must be submitted, the student(s) will submit the required materials to the faculty for its review (e.g., if the position/award requires a vita, a statement of interest and activities, list of presentations, etc., then those must be presented to the faculty via the training director). Any public criteria for selection used by the organization or KU entity will be given to the faculty when reviewing the students' materials. The majority vote of the faculty will determine whose materials will be submitted (and letters of support will be written subsequent to the vote).

AA. In-State/Out-of-State Tuition

Determination of residence for tuition purposes is made by the KU Registrar following policies and procedures established by the Kansas Legislature and interpreted by the Board of Regents. The Program has no control and little input to this determination. Basically, the rules call for: a) establishing a residence for 365 days prior to the date the student

wants to start paying in-state tuition (with no interruptions to go "home" over the summer); b) having in-state sources of money only; and c) having an intent to live in Kansas. Because students typically come to Kansas only to pursue an education at KU, the "intent" is difficult to establish (although buying a house or working full-time while not in school may qualify). The Program will assist students in filing applications and appeals to maximize the chance of obtaining residency status. It has joined with other campus programs to change these rules. When the Program negotiates stipends and salaries, supplements are sometimes added so that students can pay out-of-state tuition.

BB. Funds for Student Research and Travel

Students may apply to the Program for reimbursement of costs of their research for thesis, task, or dissertation projects (contingent upon availability of funds). (Projects other than these three may be funded if a student is on time in progressing through Program requirements and funds are available.) Reimbursable items may include copying costs, purchasing measures, and telephone/fax. Payment for participants may be requested, but is a lower priority and often difficult to arrange. Priority will be given to those who have not received funds already. Amounts should be estimated in advance and receive prior approval. Students can be paid up to $200 per project for approved research expenses.

Completed applications are due March 1 and October 1. Due to budget constraints, consideration of applications cannot be made at other times. Application with estimated costs must be made in advance and all applications will be considered at the same time. Later additions cannot be accommodated, only the approved costs up to $200 can be covered. Only approved items can be purchased or reimbursed by the Program. Due to the need to plan how the Program will pay for the expenses, no equipment, forms, copying, etc., can be purchased in advance and be reimbursed. With the approval will come instructions on how and where to buy: Some items can be purchased by the Program directly and some may be purchased by the Program. Please check with the Program Administrative Associate for assistance with purchasing items for your project. Costs of copying and/or binding thesis and dissertation remain the responsibility of the student (as well as the costs of electronic submission).

Given the deadlines, the requests may be submitted before the project has been approved by the student's committee. However, purchases will not be made until after the proposal meeting has been held (thesis and dissertation). A student may apply for Program funds for research projects other than thesis, task and dissertation if they are on time in progressing through the Program requirements.

Higher priority is given to those applicants for funds who have not yet received funding for research from this source. The Training Manual describes other sources of money for student research. An application form for the Student Research Fund is available in Appendix G of this document.

The KU Office of Graduate Studies awards travel grants to students who are presenting a paper at a national/regional meeting of a professional society.

GS also provides more substantial funding for research leading to the Doctoral Degree. More information about eligibility and application is available at http://www.graduate.ku.edu/funding.

In addition to Program and Graduate School funds, several national organizations provide competitions for research support of student projects such as the Society of Pediatric Psychology, the Society of Clinical Child and Adolescent Psychology, and Division of Health Psychology. There are also dissertation research grants programs for students to apply from various agencies and foundations. The Program will facilitate the student's identification and application for such grants. Faculty can provide copies of recent newsletters with announcements.

CC. CCPP Endowment Accounts

The Program maintains a Development Fund which was established with a generous donation from Dr. E. Jackson Bauer in memory of his wife Lillian Jacobey Bauer. Additional donations and contributions, large and small, have been made to the fund by faculty, graduates, and philanthropic individuals. The fund has been used for equipment, speakers, renovations to the Clinic and other student training. Contributions, now and later, are always welcomed. For more information on the Lillian Jacobey Bauer Development Fund, please see Appendix D-1.

In addition to the Development Fund, the program maintains the Michael C. Roberts Colloquium Series in Clinical Child Psychology Fund, which is an endowed fund that honors its name bearer's contributions to the field as Founder and Director of the KU Clinical Child Psychology Program. This fund was established in May of 2012 with initial gifts from Dr. Sarah T. Trane, the family of Dr. Michael C. Roberts, and the faculty of the KU Clinical Child Psychology Program. Interest from the endowed account will bring eminent scholars in clinical child psychology to KU to deliver colloquia, meet with students, and consult with faculty on ongoing clinical research projects.

More complete information about KU Endowment Funds is available at http://ccpp.ku.edu/donate/.

DD. Human Research Protection Program - Lawrence Campus (HRPP)

All research conducted by faculty and students in the Program must be in accordance with APA guidelines. Before initiating any research involving any humans, the procedures and protections must be reviewed and approved by the HRPP. HRPP is the federally mandated Institutional Review Board (IRB) for the University of Kansas. Information is available from the HSCL website: https://research.ku.edu/human-subjects-research

Applications for HSC-L approval of new projects may be submitted by electronically at the eCompliance page of the HSC-L website (see http://research.ku.edu/ecompliance). Requests for amendments to existing approved projects can also be submitted at that site.

If research is being conducted at KU Medical Center, public school systems, Children's Mercy Hospital, Bert Nash Mental Health Center, or other sites, the student may be required to file with additional research review committees.

EE. Faculty Evaluations

In the spirit of continual improvement and positive reinforcement for good work, the Program faculty members are regularly evaluated for their performance in all areas of their academic appointments: teaching, research, and service. Student input is an important component of this evaluation.

All didactic courses are evaluated by students using the forms appropriate to the department in which the course is offered (Psychology or Applied Behavioral Science). Clinical practicum supervision is also evaluated using the form contained in Appendix A-1. Faculty performance is reviewed annually by both Departments of Psychology and Applied Behavioral Science in which the faculty members hold their academic appointments.

The Director of the CCPP is appointed by the Dean of the College of Liberal Arts and Sciences for a 5-year renewable term. As outlined in the KU Policy Library (https://policy.ku.edu/CLAS/procedures-for-selection-of-chairs), the Program Director is annually evaluated by the Dean and Associate Dean of the College of Liberal Arts and Sciences. A comprehensive evaluation of performance is conducted every 5 years by the CLAS Committee for the Evaluation of Chairs and Directors (CECD). Students' evaluations are solicited and significantly used in this review.

As part of the annual review of the Director, the Program Administrative Associate will distribute an abbreviated form of the CLAS *Evaluation of Chairs & Directors Review Questionnaire* to all CCPP faculty, staff, students, and to the Chairs of the Departments of Psychology and Applied Behavioral Science. The Program Administrative Associate will collect completed Questionnaires from interested respondents, and will compile anonymous summary statistics and comments. Summaries will be provided to the Director, to be included (with responses) in her/his annual report to the Dean of the College of Liberal Arts and Sciences.

The Clinic Director is appointed by the Program Director and is given an annual review and feedback. Following the Dean's comprehensive review of the Program Director at 5-year intervals, the Program conducts a comprehensive review of the Clinic Director.

Faculty members of the Program hold joint appointments in the departments of Psychology and Applied Behavioral Science. As such, Program faculty members are subject to the annual evaluation procedures for the departments of Psychology and Applied Behavioral Science.

For more information about Faculty Evaluations and Responsibilities, please see the Clinical Child Psychology Program's By-laws

(http://ccpp.ku.edu/sites/ccpp.ku.edu/files/files/CCPP%20By-Laws.pdf).

FF. Computers

KU Information Technology will provide access to CCPP computer networks and e-mail accounts. Computers are available in various sites on campus and the Program provides free access to computers for email, internet searching, test scoring, and clinic report writing. Use of the Program's computers for non-professional purposes (e.g., shopping, viewing pornography) is viewed by the Program faculty as inappropriate.

Policy on downloading material to Program and Clinic Computers

The use of the program and clinic computers is a privilege afforded graduate students in the program. Due to the professional and legal implications, use of the computers must be carefully controlled by the program and by the individuals who have access. The use of the computers must be approached with sensitivity to others who use the computers, to the privacy rights of the clients of the Clinic, and to the public that help support the purchase of the computers. Particularly important concerns should be to limit the risk of sanction by the University to the program and students, as well as the risk to the University of sanctions from other parties. No copyrighted material should be downloaded to program and clinic computers without permission of the copyright holder). Software packages for data analyses and assessment protocols and other professionally-related activities may be placed on the computer if the appropriate license is obtained and with approval of our technical liaisons. Additionally, one should be also cautious in using the computers for political or religious activities.

Students are required to sign a form indicating they have read this policy and will abide by it upon entering the program. In each subsequent year, they will be required to initial and date their continuing understanding of the policy.

GG. Good Sources of Information

Students are advised to consult the following sources as good sources of information about GS and completing the requirements in the KU CCPP: The Graduate Catalog (latest edition; also available on the web: http://www.catalogs.ku.edu/graduate/), the Psychology Department's home page (http://www.psych.ku.edu/), as well as other official KU policies available from the Program Administrative Associate for check-out. Currently, these include:
- Academic Misconduct (http://www.policy.ku.edu/governance/USRR-art2sect6)

- Policy on Consenting Relationships (http://www.policy.ku.edu/provost/consenting-relationships-brochure)
- Students with Disabilities (http://www.policy.ku.edu/IOA/disability-ADA-issues)

- Family Educational Rights and Privacy Act also known as the Buckley Amendment

(http://www.policy.ku.edu/provost/privacy-policy)

- Policy on Prevention of Illegal Drugs and Alcohol Use on Campus and in the Work Place (http://www.policy.ku.edu/human-resources/alcohol-and-drug)
- Sexual Harassment (http://www.policy.ku.edu/IOA/sexual-harassment)
- Grievance Procedures (http://policy.ku.edu/CLAS/grievance-procedure-clinical-child-psychology-program)
- Equal Opportunity and Affirmative Action Policies (http://www.policy.ku.edu/IOA/nondiscrimination)

All students are requested to read these because they relate to their roles as representatives of the University, its employees, and as students for their protection.

HH. Awards to Students

1. Jerry and Willie McNeal Student Award for Outstanding Teaching

This award recognizes a graduate student in the Clinical Child Psychology Program at the University of Kansas for excellence in teaching performance as the primary instructor of at least one course at the undergraduate level. This award will be granted annually.

Criteria for the Award are:
1. Applicant must be in good standing in the Program who has accumulated at least one year of academic work in the Program
2. Applicant must hold a 3.5 Graduate GPA minimum;
3. Applicant must have had primary responsibility for a completed undergraduate course at the University of Kansas (i.e., be "named" as the instructor of record).
4. Applicant's work completed for this award may be a part of their "Teaching Task" or as a funded instructor position or as a volunteer instructor;
5. Applicant must present a portfolio consisting of:
   A. a statement of teaching philosophy and approach with a list of other relevant teaching experience;
   B. course syllabus, samples of handouts and lecture outlines;
   C. formal course evaluations, narrative comments, and videotaped teaching performance or faculty observation report;
   D. evidence of quality of student understanding and learning samples of student work assignments demonstrating their achievement of course goals. These materials should include examples of graded student work and instructor feedback (e.g., papers earning As, Bs, Cs, etc.). Descriptions of rubrics for grading and feedback on iterative assignments to promote student learning from the course should be included as well.
   E. evidence of planned activities and assignments that actively engage the students with course materials inside and outside of class time and encourage

reflection and generalization of understanding and skill acquisition beyond what was expressly taught in lectures.

F. letter of endorsement by a supervising faculty member.

Applicants should inform students via class discussion and course syllabus that course materials including student performance and evidence of learning will be included in evaluations of teaching and instructor improvement. Permission to use students' names and names associated with their intellectual products should be obtained and retained until the review process is completed.

Applicants for this award may nominate themselves or be recommended by a faculty member. The teaching may have taken place at any time in the student's graduate work in the Program. Submission of the portfolio must be completed by September 15 of each year.

A review committee will be constituted by the Program Director and Program faculty to examine each student's teaching portfolio and rank order the applicants in terms of demonstrated quality of excellence. The award will be conferred on October 3 (or the closest Program meeting to that date).

This award was established in 1999 through the generosity of Rodney McNeal, Ph.D., in honor of his parents, Jerry and Willie McNeal of Kansas City, KS. The conferral date for the award, October 3, celebrates the wedding anniversary of Mr. and Mrs. McNeal. Dr. McNeal was in the charter class entering the Clinical Child Psychology Program in 1992. He received his doctorate in Clinical Child Psychology in 1998.

The McNeal Student Award for Outstanding Teaching will consist of a certificate of recognition to the awardee, engraving of the recipient's name on a plaque displayed in the Program offices, and a check for $500.

2.   Brown Kirschman Award for Research Excellence

The Brown Kirschman Award for Research Excellence is intended to facilitate and encourage innovative research in clinical child and adolescent psychology and/or developmental psychopathology. CCPP students who have successfully defended the master's thesis are eligible to apply for the award. The award will be used to fund new research leading to completion of the research task (i.e., comprehensive exam) or dissertation, or another research project of publishable quality. The award will be in the amount of $1,000. Applications will be considered annually, with a submission deadline of April 1. Students may resubmit unfunded applications in subsequent years, but may only receive the award once during their career in the CCPP.

Complete applications will include (a) a 150-word abstract of the proposal; (b) a 15-page proposal (double spaced) with masking of the student's identity; (c) a detailed budget of proposed expenses; (d) a letter of support from the student's faculty sponsor; (e) description of Institutional Review Board (IRB) approval status; and (f) a list of 5 potential

outside expert reviewers who are qualified to evaluate the study design and impact. The 15-page proposal should include the following headings: *Background/Literature Review*, *Method*, *Plan for Data Analysis*, and *Importance/Innovation.* These materials will be provided to the CCPP training director in electronic format.

Applications will be evaluated by a committee made up of one former student of the CCPP (who is unacquainted with the applicant) and two external reviewers chosen by the CCPP faculty (possibly including those proposed by the applicant). Committee members will evaluate the masked proposals based on the following characteristics: innovation, potential to impact clinical/developmental literature or practice (i.e., potential for publication), methodological rigor, feasibility, and appropriateness of budget to scope of project (see score sheet, Appendix H). Based on their evaluation of these characteristics, each committee member will score the proposals in terms of the characteristics noted above. Applications with a mean total score of less than 35 will be considered "below threshold." The CCPP faculty will review the evaluations and scores provided by the committee members, and will grant the award to the student with the highest mean score. If only one proposal is submitted in a given year, funding will be granted if the committee determines that the proposal meets minimum criteria for acceptability (mean total score > 35). Reviewers will be offered a $100 honorarium for their review of the applications within one month. Announcement of the award will be made by the program director by May 15. Funds will become available July 1, and must be expended by June 15 of the following year.
The grantee/student will submit annual reports of research progress to the CCPP faculty, detailing expenditure of funds, and any significant deviations from the proposed budget. A final report and copy of the resulting manuscript will be submitted to the CCPP faculty at the conclusion of the project.

This award was established through the generosity of Keri Brown Kirschman, Ph.D. (KU CCPP graduate, 2003) and her husband, David Kirschman.

3.   CCPP Pioneer Classes Dissertation Research Award

The Clinical Child Psychology Program Pioneer Classes Dissertation Research Award is designed to facilitate the completion of exceptional dissertation research in clinical child and adolescent psychology. CCPP students who have successfully defended the master's thesis are eligible to apply for the award. The award will be used to fund new research leading to completion of the dissertation. The dissertation project must be chaired by a CCPP faculty member. The award will be in the amount of $1,000. Applications will be considered annually, with a submission deadline of September 15.

Complete applications will include (a) a 150-word abstract of the proposal; (b) a 15-page proposal (double spaced) with masking of the student's identity; (c) a detailed budget of proposed expenses; (d) a letter of support from the student's faculty sponsor; (e) description of Institutional Review Board (IRB) approval status; and (f) a list of 5 potential outside expert reviewers who are qualified to evaluate the study design and impact. The 15-page proposal should include the following headings: *Background/Literature Review*, *Method*,

Plan for Data Analysis, and *Importance/Innovation.* These materials will be provided to the CCPP training director in electronic format.

Applications will be evaluated by a committee made up of one former student of the CCPP (who is unacquainted with the applicant) and two external reviewers chosen by the CCPP faculty (possibly including those proposed by the applicant). Committee members will evaluate the masked proposals based on the following characteristics: innovation, potential to impact clinical/developmental literature or practice (i.e., potential for publication), methodological rigor, feasibility, and appropriateness of budget to scope of project (see attached score sheet). Based on their evaluation of these characteristics, each committee member will score the proposals in terms of the characteristics noted above. Applications with a mean total score of less than 35 will be considered "below threshold." The CCPP faculty will review the evaluations and scores provided by the committee members, and will grant the award to the student with the highest mean score. If only one proposal is submitted in a given year, funding will be granted if the committee determines that the proposal meets minimum criteria for acceptability (mean total score > 35). Reviewers will be offered a $100 honorarium for their review of the applications within one month. Announcement of the award will be made by the program director by November 1. Funds will become available November 15, and must be expended by June 15 of the following year.

The grantee/student will submit regular reports of research progress to the CCPP faculty, detailing expenditure of funds, and any significant deviations from the proposed budget. A final report and copy of the resulting manuscript will be submitted to the CCPP faculty at the conclusion of the project.

The earlier classes of students in the CCPP (the Pioneers) were instrumental in establishing the traditions of the program (specifically those who endured program activities in J. R. Pearson Hall). Thus, the award is named after them. The award will be granted subject to annual budget availability.

4. Carolyn & Stephen Schroeder Practice-Informed Research Award

The Carolyn and Stephen Schroeder Practice-Informed Research Award was established in 2016 by Drs. Carolyn and Stephen Schroeder. Carolyn is an Adjunct Faculty member of the Clinical Child Psychology Program; Steve is a former Director of the Schiefelbusch Institute for Life Span Studies (LSI). Carolyn has provided supervision, support, and mentorship to a great number of CCPP students and faculty for many years.

Interest from this endowed fund will facilitate and encourage innovative research that is informed by clinical work. The award will be used to fund new research leading to the completion of the master's thesis, research task, or dissertation, or another research project of publishable quality. The award will be in the amount of approximately $5000*. Applications will be considered annually, with a submission deadline of April 1.

Complete applications will include (a) a 150-word abstract and proposal; (b) a 15-page

proposal (double spaced; with the student's identity masked) organized under the following headings: Background/Literature Review, Method, Plan for Data Analysis, and Importance/Innovation; (c) a detailed budget of proposed expenses; (d) a letter of support from the student's faculty sponsor; (e) a description of Institutional Review Board (IRB) approval status; and (e) a list of 5 potential outside experts who are qualified to evaluate the study design and impact.

Applications will be evaluated by an external committee chosen by the Director of the Clinical Child Psychology Program, and made up of one former student of the CCPP and two external reviewers (possibly including those proposed by the applicant). Committee members will evaluate the masked proposals based on the following characteristics: innovation, potential to impact clinical/developmental literature or practice (i.e., potential for publication), methodological rigor, feasibility, and appropriateness of budget to scope of project (see Scoring sheet). Each committee member will score the proposals in terms of the characteristics noted above. Applications with a mean total score of less than 35 will be considered "below threshold." The CCPP faculty will review the evaluations and scores provided by the committee members, and will grant the award to the student with the highest mean score. If only one proposal is submitted in a given year, funding will be granted if the committee determines that the proposal meets minimum criteria for acceptability (mean total score > 35).

The grantee/student will submit annual reports of research progress to the CCPP faculty, detailing expenditure of funds, and any significant deviations from the proposed budget. A final report and copy of the resulting manuscript(s) will be submitted to the CCPP faculty at the conclusion of the project.

based on performance of the KUEA fund in which the principal is held. Specific award amount will be determined on February 1 of each year.

5.   The Nyre Clinical Child Psychology Student Support Fund

The Nyre Clinical Child Psychology Student Support Fund was established in 2018 by Dr. Joseph E. Nyre and Kelli L. Nyre in honor of founding director, Dr. Michael C. Roberts to provide financial support for graduate students in the Clinical Child Psychology Program (CCPP) at the University of Kansas.

Interest from this endowed fund will provide direct support for student scholarships, travel funding, and research. Currently, proceeds are focused on providing research-related travel funding for students pursuing their Ph.D. in Clinical Child Psychology. This may include funding for travel to collect data or to present findings, or scholarships to receive advanced training related to the student's research-related professional development. Eligible recipients are limited to graduate students enrolled in the Clinical Child Psychology Program at the University of Kansas.

Two awards of $600 each are expected to be bestowed each year.* Applications will be considered twice per year, with submission deadlines of January 15 and July 15.

Complete applications will include a 250-word summary of the proposed travel and its impact on the student's research-related professional development; Applicants should highlight the quality of the research being presented or conducted, or (for research-related training opportunities) the value of the training for current or planned research
    a current CV
    a detailed budget of proposed expenses (including sources of additional funding already available)

These materials will be provided to the Director of the CCPP in electronic format by 5:00pm on January 15 or July 15 (or the following Monday, if the 15th falls on a weekend). Applications that do not conform to the above instructions will be returned to the applicant without review.

Applications will be evaluated by a faculty committee chosen by the Director of the Clinical Child Psychology Program. Committee members will evaluate the proposals based on the following characteristics: the overall quality of the research being conducted or presented or the correspondence between the proposed training and an ongoing or planned research project; the potential for the award to impact the student's professional development; the student's overall achievement in the program; and the appropriateness of budget to scope of project. Each committee member will score the proposals in terms of the characteristics noted above. The CCPP Director will review the evaluations and scores provided by the committee members and will grant the award to the student with the highest score.

Within 6 months of the award, each awardee shall submit a report to the CCPP faculty detailing expenditure of funds and any significant deviations from the proposed budget. The student should acknowledge the source of funding in all publications resulting from the travel and/or in their public presentation(s) funded by the award.

*based on performance of the KUEA fund in which the principal is held. Specific award amount will be determined on February 1 of each year.

6.   CCPP Director's Award for Professional Development

The Clinical Child Psychology Program values students' efforts toward professional development, including efforts to obtain external funding for research and training. The CCPP Director's Award for Professional Development recognizes students who have developed and submitted proposals for significant external training grants and fellowships, such as those available through the Graduate Research Fellowship Program (NSF), the National Research Service Award Fellowship (NIH), the Dennis Weatherstone Predoctoral Fellowship (Autism Speaks), and the Ford Foundation Fellowship Program (NASEM).

Upon the recommendation of their primary mentor, and contingent on availability of funds, each student in good standing that completes and submits a proposal to an eligible foundation/agency will be considered for a $100 professional development fund that can be used to offset professional travel, research expenses, professional expenses (copies, conference registration), or other expenses. Please note that non-consumable items (e.g.,

books, equipment) purchased with state funds become the property of the University of Kansas.

Students may receive the award only once per fiscal year. Students may receive the award for a resubmitted application. If the resubmission occurs within the same fiscal year as the original submission, the student may apply for the award in the following fiscal year. Funds must be expended within the same fiscal year as when the award is given.

The application form must be completed and returned to the CCPP Administrative Associate for consideration by the faculty. There is no application deadline: Applications are considered on a rolling basis. However, applications will only be considered for proposals that have been submitted. Proof of submission may be requested.

7.   The Karen and Michael Roberts Travel Award

The Karen and Michael Roberts Travel Award was established in 2020 by the founding Director of the Clinical Child Psychology Program, Dr. Michael C. Roberts and his wife, Karen B. Roberts, to provide funds to support CCPP students' travel to present research findings at a national or international conference or convention.

Interest from this endowed account will provide funds to support CCPP students' travel to present research findings, either orally or via a poster presentation, as a first author at a national or international conference or convention in a recognized substantive area of clinical child or pediatric psychology. Examples of acceptable conferences include the Society of Pediatric Psychology Annual Conference, the National Conference in Clinical Child and Adolescent Psychology, and the Annual Convention of the American Psychological Association; however, other conferences with national or international impact, that use peer-review to select empirical papers, and that are associated with recognized professional associations that support evidence-based assessment and interventions within clinical child and pediatric psychology will be considered acceptable as well.

Eligible recipients of the award are limited to graduate students enrolled and in good standing in the Clinical Child Psychology Program at the University of Kansas.

Two awards of approximately $600 each are expected to be bestowed each year.* Applications will be considered twice per year, with submission deadlines of January 15 and July 15.

Complete applications will include

   a 250-word summary of the proposed travel and its impact on the student's professional development
   The accepted abstract for the paper or poster to be presented, along with the acceptance notification from the Conference/Convention. If the convention/conference is not one of the three named above (SPPAC, NCCCAP, APA), the application materials should clarify how

the planned conference meets the noted inclusion criteria.

a current CV

a detailed budget of proposed expenses (including sources of additional funding already available)

These materials will be provided to the Director of the CCPP in electronic format by 5:00pm on January 15 or July 15 (or the following Monday, if the 15th falls on a weekend). Applications that do not conform to the above instructions will be returned to the applicant without review.

Applications will be evaluated by a faculty committee chosen by the Director of the Clinical Child Psychology Program. Committee members will evaluate the proposals based on the following characteristics: the overall quality of the research being presented; the potential for the award to impact the student's professional development; the student's overall achievement in the program; and the appropriateness of budget. Each committee member will score the proposals in terms of the characteristics noted. The CCPP Director will review the evaluations and scores provided by the committee members and will grant the award to the student with the highest score.

Within 6 months of the award, each awardee shall submit a report to the CCPP faculty detailing expenditure of funds and any significant deviations from the proposed budget. Award recipients will send Dr. and Mrs. Roberts a copy of the poster abstract (or full paper) and a summary of the benefits derived from their travel experience.

*based on performance of the KUEA fund in which the principal is held. Specific award amount will be determined on February 1 of each year.

II. Grievance Procedure

Pursuant to Article XIV of the University Senate Code and Articles V and VI of the University Senate Rules and Regulations of the University of Kansas, Lawrence, the Clinical Child Psychology Program (CCPP) establishes the following procedure to hear grievances arising within its unit. This procedure applies to those grievances arising from the graduate program, faculty and students in Clinical Child Psychology. When a grievance arises with regard to undergraduate issues, then the procedures apply as established by the Department of Psychology or the Department of Applied Behavioral Science according to the course line number under which the undergraduate student is enrolled. When faculty are functioning in the roles as professors for the undergraduate curriculum, the procedures for the respective Department will apply. This procedure shall not be used to hear disputes assigned to other hearing bodies under USRR Article VI, Section 4.

For disputes involving alleged academic misconduct, see the College of Liberal Arts and Sciences policy on academic misconduct. For alleged violations of student rights, the

initial hearing normally will be at the CCPP level. There is an option to hold an initial hearing at the Judicial Board level if both parties agree, or either party petitions the Judicial Board chair to have the hearing at the Judicial Board level and the petition is granted. The petition must state why a fair hearing cannot be obtained at the unit level; the opposing party has an opportunity to respond to the petition (USRR 6. 4.3.1).

Except as provided in USRR 6.5.4, no person shall be disciplined for using the grievance procedure or assisting another in using the grievance procedure.

The CCP Program shall provide a copy of this procedure to anyone who requests it and this procedure will be published in the Training Manual.

1. To start the grievance process, the complainant must submit a written grievance to the Director of the CCPP. The complaint shall contain a statement of the facts underlying the complaint and specify the provision(s) of the Faculty Code of Conduct, University Senate Rules and Regulations, the Code of Student Rights and Responsibilities, or other applicable rule, policy, regulation, or law allegedly violated. The complaint shall also indicate the witnesses or other evidence relied on by the complaining party, and copies of any documents relevant to the complaint shall be attached to the complaint.

2. At the time the complaint is submitted to the Program Director, the complaining party shall provide a copy of the complaint, with accompanying documents, to the respondent(s).

3. Upon receipt of the complaint, the Program Director shall contact the respondent to verify that the respondent has received a copy of the complaint and to provide the respondent with a copy of these procedures.

4. Pursuant to University Senate Code 14.2.c, a respondent has the privilege of remaining silent and refusing to give evidence in response to a complaint. The respondent also has the right to respond and give evidence in response to the complaint.

5. The respondent shall submit a written response to the Program Director within 14 calendar days of receiving the complaint. The response shall contain the respondent's statement of the facts underlying the dispute as well as any other defenses to the allegations in the complaint. The response shall also identify the witnesses or other evidence relied on by the respondent and shall include copies of any documents relevant to the response. The respondent shall provide a complete copy of the response to the complainant.

6. Upon receipt of the response, the Program Director shall contact the complaining party to verify that a copy of the response has been provided.

7. Upon receiving the complaint and response, or if the respondent fails to respond within the 14-day time period, the Program Director shall appoint a faculty

committee selected from the current members of standing committees of the Program and affiliated Departments to consider the complaint. The committee members shall be disinterested parties who have not had previous involvement in the specific situation forming the basis of the complaint.

8. Pursuant to USRR 6.8.4.2, the chair of the committee may contact other hearing bodies within the University to determine whether a grievance or complaint involving the underlying occurrence or events is currently pending before or has been decided by any other hearing body.

9. Time limits. To use this procedure, the complainant must file the written complaint with the Program Director within six months from the action or event that forms the basis of the complaint. The six-month time period shall be calculated using calendar days (including weekends and days during which classes are not in session).

10. Upon receiving the complaint, if the chair of the committee determines that any of the following grounds exist, they may recommend to the Program Director that the complaint be dismissed without further proceedings. The grounds for such dismissal are: (a) the grievance or another grievance involving substantially the same underlying occurrence or events has already been, or is being, adjudicated by proper University procedures; (b) the grievance has not been filed in a timely fashion; (c) the Program Director lacks jurisdiction over the subject matter or any of the parties; (d) the grievance fails to allege a violation of a University rule; (e) the party filing the grievance lacks standing because they have not suffered a distinct injury as a result of the challenged conduct and has not been empowered to bring the complaint on behalf of the University; or (f) the party filing the grievance has been denied the right to file grievances pursuant to USRR 6.5.4.

11. If the chair of the committee determines that a grievance on its face properly should be heard by another body, the chair will recommend that the Program Director send the grievance to the appropriate hearing body without further proceedings in the Program. The Program Director will send a copy of the referral to the complainant(s) and any responding parties.

12. Prior to scheduling a hearing, the parties shall participate in mediation of the dispute unless either party waives mediation. Mediation shall be governed by USRR 6.2.3.

13. If mediation is successful, the mediator will forward to the Program Director, the committee chair, and all parties a letter describing the outcome of the mediation and the terms upon which the parties have agreed to resolve the dispute. This letter shall be a recommendation to the Program Director. The Program Director will notify the mediator, the committee chair, and the parties that the recommendation has been accepted, modified, or rejected.

14. If mediation is not successful, the mediator will notify the Program Director, the

committee chair, and the parties that mediation has terminated. If mediation is not successful, or if it is waived by either party, the grievance committee will schedule a hearing no later than 30 calendar days from the written submission of the complaint. The 30-day period may be extended for good cause as determined by the chair of the committee. The 30-day period shall be suspended during the mediation process. The hearing will be closed unless all parties agree that it shall be public.

15. Each party may represent himself or herself or be represented by an advisor or counsel of their choice.

16. Each party has the right to introduce all relevant testimony and documents if the documents have been provided with the complaint or response.

17. Each party shall be entitled to question the other party's witnesses. The committee may question all witnesses.

18. Witnesses other than parties shall leave the hearing room when they are not testifying.

19. The chair of the committee shall have the right to place reasonable time limits on each party's presentation.

20. The chair of the committee shall have the authority and responsibility to keep order, rule of questions of evidence and relevance, and shall possess other reasonable powers necessary for a fair and orderly hearing.

21. The hearing shall not be governed by the rules of evidence, but the chair of the committee may exclude information they deem irrelevant, unnecessary, or duplicative. Statements or admissions made as part of the mediation process are not admissible.

22. The committee will make an audiotape of the hearing but not of the deliberations of the committee. The audiotape will be available to the parties, their authorized representatives, the committee, and the Program Director. If a party desires a copy of the audiotape or a transcript of the tape, that party will pay for the cost of such copy or transcript. In the event of an appeal, the audiotape will be provided to the appellate body as part of the record of the case.

23. After the presentation of evidence and arguments, the committee will excuse the parties and deliberate. The committee's decision will be a written recommendation to the Program Director. The committee shall base its recommendations solely upon the information presented at the hearing.

24. The committee will send its written recommendation to the Program Director and the parties as soon as possible and no later than 14 calendar days after the end of the hearing.

25. Within 14 calendar days of receiving the committee recommendation, the Program Director will notify the parties of the acceptance, modification, or rejection of the recommendation. The Program Director will advise the parties of the procedure available to appeal the decision.

26. In the event that the Program Director is either the complainant or named as the respondent, the Grievance Procedures of the College of Liberal Arts and Sciences, effective October 2, 1999, will apply.

The grievance procedures have been reviewed by the Office of the University General Counsel and are effective December 17, 1999.

JJ. Copy Bills

Students will be allowed to generate up to $50 per month charges for copying as long as their bills are paid when invoiced monthly. If a student fails to pay their bill within 2 weeks of invoicing, they will have their copy code removed from the machine. Only after paying the out-standing charges, the student must pay forward $50 to create a "debit" account; when the debit account is depleted, it must be replenished to maintain the copy code. Larger credits may be negotiated upon request to the faculty depending on special needs, but will depend on a good credit history of paying on time.

KK. Keys

All students leaving for internship must return keys to the Program Administrative Associate. Failure to do so violates the Program's policies in professionalism and maintenance of security and confidentiality of KU CFSC and research files. Appropriate sanctions for breaching standards of professionalism will be imposed if students fail to return program area keys by the time they depart Lawrence for the internship.

LL. Felony Convictions

Students should be aware that felony convictions will make it difficult to complete the training experiences (i.e., external practicum, internship) required for the Ph.D. If you are unable to obtain and complete these required experiences, you will not be able to complete your program of study and graduate. In addition, be aware that you may not be eligible for licensure by many states. For example, the Kansas licensure board requires that applicants have "good moral character and merit public trust" and asks "Have you ever been convicted of a felony or misdemeanor other than a traffic violation? If "yes", attach an explanation and give specific details, including disposition of the charge." Thus, it is also possible that future employment would also be limited.

Applicants to the KU graduate program may be asked to provide details on any criminal convictions.

The Program complies with the Kansas Board of Regents policy in which the University of Kansas conducts background checks for felony convictions to facilitate employment decisions that are in the best interest of university students, employees, resources and overall mission statement. These include Graduate Teaching Assistants, Graduate Research Assistants, and other employment situations in which graduate students are placed. See details on this policy at the website:
http://www.policy.ku.edu/human-resources/criminal-background-check

 Approved by CCPP Faculty: 2-9-09

MM. Academic Warning, Probation, and Dismissal

Students in the CCPP are expected to maintain their status as a student in good standing in the program at all times. Students will be notified officially each year of their status via feedback letters after the faculty's annual student review retreat each May. The faculty may also meet at the end of the fall semester to review student progress.

It is in the students' best interest to complete the Program requirements in a timely fashion. Students who languish in graduate school are not likely to represent the best the field has to offer and may instead be unable to provide even the minimal standard of care expected by the public and required by the field. The faculty is sensitive not only to their obligation to provide professionals who are competent to be clinical child psychologists, but also to the student's best interest in meeting professional expectations. Therefore, the faculty has established specific and swift remedies in cases where students may be in jeopardy of failing to develop as the program guidelines dictate.

Generally, students are considered to be "in good standing" if they are making adequate progress on the research, academic, and clinical requirements for their year in the program. Adequate progress in each of these domains is explained in detail within this training manual. If, for reasons other than taking a leave of absence, a student deviates from the Program's expectations such that they are failing to meet expected obligations, the Program faculty may take several courses of action.

Although the regular process of identification and remediation of problems involves a "warning" prior to "probation," some issues may be serious enough to warrant placement of a student on probation without an initial warning status. This status is to be explained in written communication with the student.

Process

Although research and academic expectations are outlined separately, failure to meet expectations in either area is considered grounds for an *academic* warning, probation, or dismissal from the program. Failure to make expected progress in clinical work or a display professional misconduct is considered grounds for a *professional* warning,

probation, or dismissal from the program. The following steps are designed to inform the student of the problem, offer a clear solution, and outline the consequences of failure to comply.

Academic Warning

An academic warning is merited when a student fails to meet proposal or defense deadlines for their thesis. Students will be informed in writing within one month after the proposal deadline that they have received an academic warning. Students will also be informed that to regain their status as a student in good standing, they must propose their thesis by Stop Day of the following semester. Failure to do so will result in the student being placed on academic probation for the following semester and risk possible dismissal from the program.

Academic Probation

Academic Probation is merited when a student fails to meet the expectations outlined after receiving an academic warning and/or when a student receives a grade of C or lower in a required course. The student will be informed in writing within one month after receiving their grades that they are on academic probation and that any additional C grades in other required courses or continued failure to meet expectations provided in their academic probation will result in potential dismissal from the program.

Professional Warning

Students will receive a professional warning from the faculty in situations that indicate that a student is not performing as expected in their role as a clinician or in other professional roles. In all of their professional activities (e.g., in-house and external practica, research, teaching) CCPP students are expected to abide by the rules of the sites and represent professional conduct at all times as proscribed by the *APA Ethical Principals of Psychologists and Code of Conduct*. As soon as concerns arise, supervisors will inform the faculty as to the nature of the concerns. The faculty will discuss the concerns to decide how to address them and whether a professional warning is warranted. If a professional warning is warranted, the faculty will then inform the student in writing what the concerns are and what the student must demonstrate to improve and meet minimal competency expectations for their year in the program. As a result of the professional warning, students will not be allowed to take an outside practicum placement until the professional conduct concerns are resolved. The student will be encouraged to discuss regularly all clinical competencies specific to the concerns with their clinical supervisor. Clinical supervisors will document their and the student's efforts to correct the student's behavior. The faculty believes that the onus to show improvement and competency is on the student. If the student does not resolve the clinical concerns after the next semester of practicum, or if new clinical concerns arise, the student may be placed on professional probation and risk dismissal from the program.

Professional Probation

Professional probation is merited when a student engages in behavior that violates the *APA Ethical Principles of Psychologists and Code of Conduct*. Most egregious are any acts that violate client confidentiality or otherwise show poor professional behavior from a student in a professional role (e.g., clinician, clinical consultant, researcher, teaching assistant, instructor). The student will be informed in writing when professional probation is merited and the nature of the violation. Because the standards in the APA ethics code represent the minimal standard of professional conduct, a student may merit professional probation after only one incident. That is, a student need not have been given a professional warning before professional probation can be employed. If a student on professional probation engages in another similar or equivalent act of unethical behavior, the student may be dismissed from the program.

Students are advised that there are ramifications of being placed on probation beyond the internal functions of the program. For example, the student or the program may be required to report to outside parties whether the student has ever been on probation and the reasons for the probation, even if the issues have been resolved (e.g., internship applications, licensure, job applications).

Dismissal

The faculty has a responsibility to support the success of its students toward meeting their goals to become clinical child psychologists. The faculty, however, cannot control the behavior of students and have a greater responsibility to the public to ensure that the professionals it produces are competent to perform as psychologists. The faculty does not plan to dismiss any of the students accepted into and mentored through the program, but the faculty will not hesitate to use the tools outlined above to ensure that only those students who meet our standards are allowed to graduate. Students placed on either academic or professional probation may lose opportunities within the program and will be at-risk for failing to earn an internship placement. Students on probation who fail to improve or who demonstrate additional misconduct that would merit probation will be dismissed from the program.

Students are notified that not in all situations will "warning" always precede "probation" and "probation" will not always precede "dismissal." That is, some conduct may be deemed by the faculty as so egregious as to provoke immediate probation or automatic dismissal from the program.

Approved by CCPP faculty (11/10/08)

VI. Curriculum Summary and Advising Forms

A. Curriculum Summary

Clinical Child Psychology Course Requirements

3	Biological Bases of Behavior	ABSC 857
3	Cognitive Development	PSYC 870
3	Social Development Seminar	PSYC /ABSC 825
3	History and Systems course	
9	Research and Statistics Core Courses	
3	Diversity Issues in Clin Psychology	ABSC/PSYC 888
1	Professional Issues in Clinical Child Psych	ABSC/PSYC 809
3	Psychopathology in Children	ABSC/PSYC 905
3	Fundamentals of Assessment and Intervention with Children	ABSC/PSYC 803
3	Achievement and Intellectual Assess in CCP	PSYC/ABSC 811
3	Behavioral and Personality Assessment of Children	PSYC/ABSC 812
3	Advanced Child & Family Assessment	PSYC/ABSC 814
3	Therapeutic Interventions with Children	ABSC/PSYC 976
3	Psychotherapy additional course	
3	Clinical Supervision and Consultation	EPSY 945 PSYC/ABSC 706
3	Professional & Ethical Issues	PSYC 975/EPSY 900
17	Practica: at least 7 semesters & 275 contact hours	
	4 semesters Introductory Practicum in	ABSC/PSYC 846/847
	Child & Family Service Clinic	
	3-4 semesters Advanced Practicum	ABSC/PSYC 943,944
	1 semester Specialty Practicum in approved field settings	PSYC/ABSC 947
6	Master's Thesis in clinical child psychology	PSYC/ABSC 897
12	Dissertation in clinical child psychology	PSYC/ABSC 998
3	Internship in clinical child psychology	PSYC/ABSC 963
3	Special Research Skills and Responsible Scholarship Additional electives	

95 TOTAL CREDIT HOURS

B. Graduate Advising and Program Summarization (GAPS) Form

Date: [ ]

GRADUATE ADVISING & PROGRAM SUMMARIZATION

(GAPS) FORM FOR CCPP

STUDENT'S NAME [ ]   ENTERING SEMESTER/YEAR [ ]

ACADEMIC ADVISOR [ ]   RESEARCH ADVISOR [ ]

A. History and Systems of Psychology (DSK I)

      PSYC 805: *History of Psychology* (3)   [ ] [ ] [ ]
          (or EPSY 882: *History and Systems of Psychology*)

B. Basic and Advanced/Integrative Knowledge in Scientific Psychology (DSK II & DSK III)
The Clinical Child Psychology Program implements a curriculum plan that provides the means by which all students will acquire and demonstrate substantial understanding of and competence in the breadth of scientific psychology. The following required courses, collectively and/or individually expose students to the current body of knowledge in biological aspects of behavior, cognitive and affective aspects of behavior, and social aspects of behavior (i.e., DSK II; Basic Content Areas in Scientific Psychology). Requirements for DSK III (Advanced Integrative Knowledge in Scientific Psychology) are met in PSYC 870 and ABSC/PSYC 825.

	Semester	Instructor	Grade
1. ABSC 857: *Biological Bases of Behavior* (3)			
2. PSYC 870: *Cognitive Development* (3)			
3. ABSC/PSYC 825: *Social Development* (3)			
4. ABSC/PSYC 888: *Diver Issues in Clin Psych* (3) (or EPSY 875 *Cross Cultural Counseling*)			
5. ABSC/PSYC 905: *Psychopath in Children* (3)			

C. Research & Quantitative Methods (DSK IV)

      ABSC/PSYC 815: *Design and Analysis for Developmental Research* (3)
          (or PSYC 968: *Research Methods in Clinical Psychology*)

	Semester	Instructor	Grade

      EPSY 810: *General Linear Modeling* (3)
          (or PSYC 790: *Statistical Methods in Psychology I*)

      PRE 811: *Analysis of Variance* (3)
          or PSYC 791: *Statistical Methods Psychology II*;
          or *PSYC 893 Multivariate Analysis*;
          or *EPSY 905 Multivariate Analysis*

Research Skills and Responsible Scholarship Requirement

Mark if completed:

☐ (a) Courses in the curriculum:

☐ *Professional Issues in Clinical Child Psychology (PSYC/ABSC 809)*

and one of two courses:

☐ *Ethics in Clinical Psychology (PSYC 975)* or

☐ *Ethics in Counseling Psychology (EPSY 880)*

and

☐ *Design and Analysis in Developmental Research (PSYC 815)*

☐ (b) Completion of the online tutorial in Responsible Scholarship, IRB (HSC-L) and HIPAA data

Research Skills Training Requirement in CCPP

The additional KU Office of Graduate Studies Research Skill requirement is fulfilled by one additional course above the two required courses in statistical or data analysis (quantitative, applied behavior analysis, qualitative). No course is specified, but must be approved by the student's research advisor and the Program Director.

Additional statistical OR data analysis course(s)

Dept	#	Course Title

D. **Clinical Child Psychology Specialty Skills**

1. **Psychodiagnosis, Psychometrics** (DSK IV), **& Psychological Assessment**

	Semester	Instructor	Grade
ABSC/PSYC 803: *Fundamentals of Assess and Intervention with Children* (3)			
ABSC/PSYC 811: *Achievement and Intellectual Assessment in CCP* (3)			
ABSC/PSYC 812: *Beh & Personality Assessment of Children* (3)			
ABSC/PSYC 814: *Adv Child & Family Assessment* (3)*			

elective starting with students entering after 8/2013

2. **Intervention & Therapy Procedures**

Required:

	Semester	Instructor	Grade
ABSC/PSYC 976: *Therapeutic Interventions w/ Children* (3)			

One additional course selected from the following:

PSYC 967: *Psychotherapy with Families*
EPSY 956: *Theory of Marriage and Family Counseling*
PSYC 946: *Theories and Methods of Psychotherapy*
PSYC 949: *Empirically Supported Treatments*

PSYC 936: *Group Therapeutic Techniques*			

3. **Clinical Practica**

(17 credits required, 275 contact hrs)

	Semester	Instructor	Grade
ABSC/PSYC 846: *Pract Clin Child Psyc I* (1)			
ABSC/PSYC 846: *Pract Clin Child Psyc I* (2)			
ABSC/PSYC 847: *Pract Clin Child Psyc II* (3)			
ABSC/PSYC 847: *Pract Clin Child Psyc II* (3)			
ABSC/PSYC 943: *Adv Pract Clin Child Psyc III* (3)			
ABSC/PSYC 943: *Adv Pract Clin Child Psyc III* (3)			
ABSC/PSYC 944: *Adv Pract Clin Child Psyc IV* (3)			
ABSC/PSYC 947: *Adv Pract Clin Child Psyc V* (3)			

Clinical Case Presentation Requirement in CCPP

Date of Presentation: _____

Supervisor: _____

Case Conceptualization Evaluation and Documentation Form on file: ⊙ YES ⊙ NO

4. **Professional Standards and Ethics**

PSYC 975: *Professional & Ethical Probs in Clinical Psych* (3)
(or EPSY 880: *Ethical and Legal Issues in Professional Psychology*)

ABSC/PSYC 809: *Prof Issues in Clinical Child Psychology* (1)

5. **Consultation and Supervision**

EPSY 945: *Clinical Supervision and Consultation*
(or PSYC/ABSC 706: *Clinical Supervision and Consultation*)

6. **Adult Psychopathology Workshop**

(Date completed)   (Workshop Leader)

7. **Clinical Internship** (3 credits required)

ABSC/PSYC 963: *Internship in Clin Child Psychology*

	Semester	Instructor	Grade

Internship Site: _____

APA Accredited: ⊙ YES ⊙ NO

Date Completed: _____

Master's Thesis (must be completed by September 15 of third year -- 6 credits minimum)
ABSC/PSYC 897: *Master's Thesis in Clin Child Psychology*

Semester	Instructor	Grade

HSC-L Approval Date:

Title:

Chair:

Committee Members:

Date of Proposal Meeting:

Date of Orals:

Doctoral Dissertation (minimum of 12 credits)
ABSC/PSYC 998: *Dissertation in Clin Child Psychology*

Semester	Instructor	Grade

HSC-L Approval Date:

Title:

Chair:

Committee Members:

Oral Comprehensive and Proposal Defense:

(Date Completed)

Oral Defense of Dissertation:

(Date Completed)

D. **Additional Electives**

Course Title	Semester	Instructor	Grade

E. **Preliminary Examination: Task**

Title:

Type:

Date Passed:

F. **Professional Development**

a) Membership as student or affiliate in psychological organizations:

b) Editorial critiques of manuscripts for journals with faculty:

Journal	Faculty	Date

c) Teaching experiences and guest lectures:

Course	Faculty	Dates

d)   Presentations at conventions and conferences (name and date):

e)   Publications in journals and books:

f)   Attendance at continuing education workshop (name and date):

g)   Attendance at conventions and conferences (name and date):

h)   Assisting in grant development

i)   Consultation with and services to public sector agencies and organization:

j)   Attendance at KU colloquia and proseminars:

k)   other activities:

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Assistantships and Assignments:

<u>Semester, Year</u>	<u>Position, FTE</u>	<u>Supervisor</u>

Any Additional or Special Notes

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Course Waivers/Transfers:

Course To Be Waived: _____   Alternative Course Taken _____   Institution _____

Date Approved _____   Faculty Approver _____

Syllabus submitted to KU CCPP?   ☐ YES   ☐ NO

Course To Be Waived: _____   Alternative Course Taken _____   Institution _____

Date Approved _____   Faculty Approver _____

Syllabus submitted to KU CCPP?   ☐ YES   ☐ NO

Course To Be Waived: _____   Alternative Course Taken _____   Institution _____

Date Approved _____   Faculty Approver _____

Syllabus submitted to KU CCPP?   ☐ YES   ☐ NO

C. Sample Schedule

The students in the CCPP provided this sample schedule for the benefit of planning. Each semester lists the recommended number of courses (standard plus additional courses) to complete the degree in 5 years (including 1 year internship), assuming no prior graduate coursework. Courses that are listed as "standard" are those that each student should take in the prescribed order, unless circumstances dictate otherwise, e.g., a professor is on sabbatical or the course is not offered. Courses that are "additional courses" provide a suggested order for taking other classes to fill out each semester. **In order to complete courses in 4 years, if one of those courses is not offered during the suggested semester then take another course.** This schedule is based on course offerings during the 2017-2018 academic year, and will almost certainly change.

<u>Fall, Year 1</u>

Standard: Professional Issues in CCP Part 1 (PSYC/ABSC 809)
Fundamentals of Assessment and Intervention (ABSC/PSYC 803)
Design and Analysis for Developmental Research (PSYC 815)
Regression Analysis (EPSY 810) **<u>or</u>**
Statistical Methods in Psych I (Regression; PSYC 790)
Introductory Practicum (PSYC/ABSC 846; 1 credit hour)

<u>Spring Year 1</u>

Standard: Achievement and Intellectual Assmt in CCP (PSYC/ABSC 811)
Masters Thesis in Clinical Child Psych (3 credit hours)
Introductory Practicum (PSYC/ABSC 846; 2 credit hours)
Psychopathology in Children (PSYC/ABSC 905) **<u>or</u>**
Therapeutic Interventions with Children (PSYC 976/ABSC 976)
ANOVA (EPSY 811) or Statistical Methods in Psych II (ANOVA; PSYC 791)

Additional Courses: Cognitive Development (PSYC 870)

<u>Summer Year 1</u>

Standard: Basic Practicum (PSYC/ABSC 847; 1 credit hour)

<u>Fall Year 2</u>

Standard: Masters Thesis in Clinical Child Psych (3 credit hour; need to enroll if thesis not yet proposed)
Introductory Practicum (PSYC/ABSC 847; 3 credit hours)
Behavior and Personality Assmt of Children (PSYC/ABSC 812)

Additional Courses: Professional & Ethical Problems in Clin. Psych (PSYC 975)
Diversity Issues in Clinical Psych (PSYC/ABSC 888)

Spring Year 2
Standard: Introductory Practicum (PSYC/ABSC 847; 3 credit hours)
                                       Psychopathology in Children (PSYC/ABSC 905)
                                       or Therapeutic Interventions with Children (PSYC/ABSC 976)
Additional Courses: Advanced Child and Family Assessment (PSYC/ABSC 814)
                                       Biological Bases of Behavior (ABSC 857)
                                       Clinical Supervision and Consultation (PSYC/ABSC 706 or EPSY 945)

Summer Year 2:
Standard: Advanced Practicum (PSYC/ABSC 943; 1 credit hour)

Fall Year 3
Standard: Advanced Practicum (PSYC/ABSC 943; 3 credit hours)
Additional Courses: Statistics Elective (to fulfill Special Research Skill requirement)
                                       Social Development (PSYC/ABSC 825)

Spring Year 3
Standard: Advanced Practicum (PSYC/ABSC 943; 3 credit hours)
Additional Courses: History and Systems of Psychology (ABSC 921 or PSYC 805 or
                                           EPSY 882)
                                       Intervention and Therapy Procedures Elective

Summer Year 3
Standard: Advanced Practicum (PSYC/ABSC 944; 1 credit hour)

Fall Year 4
Standard: Dissertation in CCP (PSYC/ABSC 998; 3 credit hours)
                                        Advanced Practicum (PSYC/ABSC 944; 3 credit hours)

Spring Year 4
Standard: Professional Issues in CCP Part 2 (PSYC/ABSC 809)
                                        Dissertation in CCP (PSYC/ABSC 998; 3 credit hours)
                                        Advanced Practicum (PSYC/ABSC 944; 3 credit hours)

Summer Year 4
Standard: Internship in CCP (PSYC/ABSC 963; 1 credit hour)
                                        Dissertation in CCP (PSYC/ABSC 998; 3 credit hour)

Fall Year 5
Standard: Internship in CCP (PSYC/ABSC 963; 1 credit hour)
                                        Dissertation in CCP (PSYC/ABSC 998; 3 credit hours)

Spring Year 5
Standard: Internship in CCP (PSYC/ABSC 963; 1 credit hour)
                                        Dissertation in CCP (PSYC/ABSC 998; 2 credit hours)

D. Frequency of Course Offerings

Course Title	Course Number	Required Credit Hours	Frequency it is offered
Courses Taught Within CCPP			
Fundamentals of Assessment and Intervention with Children	PSYC/ABSC 803	3 credits	Fall
Achievement and Intellectual Assessment in CCP	PSYC/ABSC 811	3 credits	Spring
Advanced Child and Family Assessment	PSYC/ABSC 814	Not required	Periodically
Behavior and Personality Assessment of Children	PSYC/ABSC 812	3 credits	Fall
Psychopathology in Children	PSYC/ABSC 905	3 credits	Every other Spring alternating with Therapeutic Interventions
Therapeutic Interventions with Children	PYSC 976/ABSC 976	3 credits	Every other Spring alternating with Psychopathology
Diversity Issues in Clinical Psych	PSYC/ABSC 888	3 credits	Every other year
Pediatric Psychology	ABSC 705	Not Required	Periodically
Professional Issues in CCP	PSYC/ABSC 809	1 credit	Fall
Clinical Supervision and Consultation	PSYC/ABSC 706	3 credits	Every other year; also taught in Counseling
Design and Analysis for Developmental Research	PSYC 815	3 credits	Fall; also taught in Psyc
Masters Thesis	PSYC/ABSC 897	6 credits	
Independent Study (can be used for task)	PSYC 980	Not Required	
Dissertation	PSYC/ABSC 998	12 credits	
Introductory Practicum	PSYC/ABSC 846 PSYC/ABSC 847	3 credits 8 credits	
Advanced Practicum	PSYC/ABSC 943 PSYC/ABSC 944 PSYC/ABSC 947	8 credits 6 credits 1-5 credits	

Internship	PSYC/ABSC 963	3 credits	

Courses Taught Outside of CCPP			
Regression Analysis or Statistical Methods in Psych I	EPSY 810 or PSYC 790	3 credits	EPSY in Spring or Psych in Fall
ANOVA or Statistical Methods in Psych II	EPSY 811 or PSYC 791	3 credits	EPSY in Fall or Psych in Spring
Cognitive Development	PSYC 870	3 credits	Every other Spring
Social Development	PSYC/ABSC 825	3 credits	Every other Fall
History and Systems of Psychology	ABSC 921 or PSYC 805 or EPSY 882	3 credits	Spring
Biological Bases of Behavior	ABSC 857	3 credits	Every year
Professional & Ethical Problems in Clin. Psych	PSYC 975 or EPSY 880	3 credits	Fall
Intervention and Therapy Procedures Elective	NA	3 credits	NA
Statistics Elective	NA	3 credits	NA

VII. Appendices

Appendix A. Clinical Child Psychology Program

A1. Supervisor Feedback Form

GENERAL INSTRUCTIONS

Instructions for **feedback form**: The feedback form consists of 6 questions. These questions should be answered by the student prior to any consultation with the supervisor. Once the feedback form has been filled out, the student should arrange an appointment with the supervisor in order to review and discuss its contents. Following this discussion, both the student and supervisor should sign and date the bottom of the form. The signatures simply affirm that the contents of the feedback form have been reviewed and discussed. The supervisor's signature is not conditional upon thier "approving" the contents.

Rights & Responsibilities List: On the back of this general instructions page, you will find a list of potential rights and responsibilities of supervisors and supervisees. You may find this list helpful as you consider how you want to respond on the feedback form. Feel free to retain this general instructions/rights & responsibilities page for your future reference.

Submitting the completed form: Once the feedback form has been filled out, it should be submitted to the Clinic Director.

PLEASE COMPLETE THE FEEDBACK FORM IN TIME TO REVIEW IT WITH YOUR SUPERVISOR(S) BEFORE THE END OF THE CURRENT SEMESTER. IF YOU NEED ADDITIONAL COPIES OF THE FORM (i.e., if you have more than one supervisor), YOU MAY OBTAIN THEM FROM THE CLINIC Administrative Associate.

RIGHTS AND RESPONSIBILITIES

        The following is a combined list of some possible rights/responsibilities of supervisors and supervisees. Frequently these rights and responsibilities are reciprocal or interrelated. Please feel free to make use of this list as you complete the feedback form.

1.   Protect client's privacy and the confidentiality of therapy data, e.g., don't talk in the hallway, don't leave client files out in the open, etc.
2.   Keep your supervisor fully and currently informed of what's happening.
3.   Monitor and explore your emotional reactions to the client.
4.   Assume personal responsibility for your own behavior - neither the client nor the devil made you do it.
5.   Accept client resistance as a natural event which is grist for the mill and useful for the therapist.
6.   Maintain client files in current and orderly fashion.
7.   Be "professional" in case management: a) on time for sessions; b) current and accurate with billing; c) follow through on referral sources; d) prompt follow-up on assigned cases; e) accurately represent self to clients and others.
8.   Be aware of and in compliance with Clinic policies and procedures.
9.   Be open to and appropriately responsive to supervision and feedback; ask for feedback.
10.   Look at client/therapist relationship.
11.   Point out therapists' assets - why and how assets promote therapy and possible limits or disadvantages of the assets.
12.   Engage in ethical and professional behavior - be aware of APA requirements and state mandates.
13.   Normalize predictable therapist fears, concerns, anxieties.
14.   Select appropriate therapist stance and treatment strategy.
15.   Promote therapist understanding of self, how therapist will impact on clients, and how to use oneself diagnostically and therapeutically.
16.   Promote an interactional understanding of therapy.
17.   Read behavior and behavioral sequences (verbal and nonverbal), especially repetitive ones.
18.   Know when to attend less to content and how to respond to process.
19.   Assessment data and how to use in therapy - reliance on the utility criterion rather than the ABSColute truth criterion.
20.   Promote flexibility in thought and action.
21.   Respond nondefensively, especially through modeling.
22.   Promote the expression of negative feelings in client, e.g., through modeling in supervision.
23.   Promote increasing therapist choice and responsibility.
24.   Discourage asking questions that titillate or gratify morbid curiosity and encourage questions that serve some therapy-relevant purpose.
25.   Take charge without assuming unrealistic responsibilities.
26.   Know how to tell something negative to someone without destroying them.
27.   Modulate therapist fantasies of omnipotence, rescuing, etc.
28.   Know appropriate criteria to judge one's therapy work other than cures.
29.   Choose appropriate therapy goals.
30.   Know when to terminate - how to terminate.
31.   Attend to the supervisee/supervisor relationship.

Date: _____

CONFIDENTIAL PAGE

NOTE TO STUDENT/SUPERVISEE: The following optional section is to be completed **after** you and your supervisor have reviewed and discussed your responses to questions 1 through 6 on the feedback form. Please refer to the GENERAL INSTRUCTIONS page for additional information.

a)   What are your reactions to this approach to providing feedback to your supervisor? (That is, going over the feedback form with your supervisor and signing it together as well as having an opportunity to privately convey information to the Clinical Administrative Staff.)

b)   If there are confidential things you would like the Clinical Administrative staff to know about your supervisor's reaction to or handling of your feedback, or if there are confidential things you would like the Clinic staff to know about your supervision experience, please use the following space to describe and/or discuss them. In your response (if any) please note why you have elected to keep it confidential.

PLEASE FEEL FREE TO DISCUSS ANY CONCERNS NOTED ABOVE WITH RIC STEELE OR ERIC VERNBERG.

_____
Once you have completed this form, please give it, along with the feedback form to RIC STEELE. After removing any confidential pages pertaining to Eric Vernberg, Dr. Steele will forward all other materials to Eric Vernberg. Dr. Steele will retain any confidential comments concerning Eric Vernberg in his own personal files and will be responsible for deciding how, if at all, any such comments should be acted on. For other supervisors, Eric Vernberg (in consultation with the Clinic staff) will be responsible for deciding how any confidential comments should be acted on.

CCPP 1-99

UNIVERSITY OF KANSAS
SUPERVISOR FEEDBACK FORM

SUPERVISOR'S NAME: _____   _____

(semester, year)

SITE: _____

STUDENT'S NAME: _____

1) Describe the progress you have made this semester in terms of advancing your therapeutic skills.

2) Considering your answer in #1 above, what do you regard as important areas for your growth and development in the near future?

3) How can supervision (individual and/or team) best help you work toward the goals you have identified above in #2?

4) What aspects of the supervisor-supervisee relationship worked well this semester?

5) What aspects of the supervisor-supervisee relationship could be improved?

6)   How would your performance in practicum best be categorized?

1	2	3	4	5
not acceptable	minimally acceptable	good - in line with expectations for level of training	very good - somewhat exceeded typical performance for level of training	outstanding - far exceeded typical perform- ance for level of training

Additional Comments:

We have reviewed and discussed this feedback form and its contents together:

Student's signature: _____ Date: _____

Supervisor's signature: _____ Date: _____

A2. Supervision Outcomes Survey

Appendix A-2

Supervision Outcomes Survey

Supervisor's Name _____Semester _____

The Clinical Child Psychology Program (CCPP) is dedicated to continuously improving the training that it provides. Students in the CCPP developed the following survey from existing measures in the literature to help faculty and adjunct faculty supervisors improve the supervision that they provide. Please respond to the following questions in terms of your current supervisor. If you have more than one supervisor, please complete this survey for each one independently. Like teaching evaluation forms, the results of any one student's survey will not be shared with the supervisor. Rather, aggregate data will be provided to the supervisor at the end of the semester. You are encouraged to provide feedback about your experience (both positive and negative) to your supervisor, the Clinic Director, or the Director of Clinical Training as appropriate. Please return this completed form to Leesa Terry.

Please use the following scale for all items:

1	2	3	4	5	6
Strongly Disagree			*Neutral*		*Strongly Agree*

1. My supervisor helps my professional development by providing a balance of both challenge and support.	1	2	3	4	5	6	NA
2. The supervision I am receiving has helped me grow as a professional.	1	2	3	4	5	6	NA
3. My supervisor helps me feel strengthened and affirmed in my efforts to become a professional.	1	2	3	4	5	6	NA
4. My supervisor helps me identify areas where I need to continue to develop by identifying my strengths and weaknesses.	1	2	3	4	5	6	NA
5. Supervision helps me better see the complexity in my cases.	1	2	3	4	5	6	NA
6. Supervision helps me improve my ability to conceptualize my cases.	1	2	3	4	5	6	NA
7. Supervision helps me examine, modify, and refine my approaches to therapy.	1	2	3	4	5	6	NA
8. The relationship that I have with my supervisor is characterized by acceptance, trust, and respect.	1	2	3	4	5	6	NA
9. My supervisor's feedback encourages me to keep trying to improve.	1	2	3	4	5	6	NA
10. My supervisor provided evaluative feedback early enough in the semester for me to make improvements.	1	2	3	4	5	6	NA

11. Supervision helps me see my mistakes as learning experiences.	1	2	3	4	5	6	NA
12. I feel comfortable sharing my perceived weaknesses and failures with my supervisor.	1	2	3	4	5	6	NA
13. Supervision helps me develop specific skills that have made me a more effective therapist.	1	2	3	4	5	6	NA
14. Supervision is helping me better understand and facilitate effective therapy outcomes with my clients.	1	2	3	4	5	6	NA
15. My supervisor openly discusses and is respectful of differences in culture, ethnicity, and other elements of individual diversity	1	2	3	4	5	6	NA
16. As a result of supervision, I feel more confident and comfortable in working with my therapy cases.	1	2	3	4	5	6	NA
17. Overall, I feel satisfied with my supervision.	1	2	3	4	5	6	NA
18. I feel that supervision is contributing to my overall effectiveness in my therapy cases.	1	2	3	4	5	6	NA
Group Supervision							
19. My supervisor is attentive to group dynamics.	1	2	3	4	5	6	NA
20. My supervisor effectively sets limits and establishes norms and boundaries for the group.	1	2	3	4	5	6	NA
21. My supervisor provides helpful leadership for group supervision.	1	2	3	4	5	6	NA
22. My supervisor encourages supervisees to provide each other feedback.	1	2	3	4	5	6	NA
23. My supervisor manages time well among all the group members.	1	2	3	4	5	6	NA
24. My supervisor provides enough structure in group supervision.	1	2	3	4	5	6	NA

You are invited to provide comments that will help contextualize your ratings. Feel free to include specific item numbers as appropriate. (*Please note that all comments will be transcribed verbatim.*)

_____

_____

_____

_____

_____

A3. Evaluation of Vertical Team Performance

EVALUATION OF VERTICAL TEAM PERFORMANCE

Student: _____ Supervisor: _____ Semester: _____

For each item, please check the descriptor that most closely describes the student's performance.

Personal Characteristics

1. Professional Appearance and Conduct
____   Appearance and conduct is professional. Consistently uses professional language in both written and verbal communication, responds to phone calls and written communication in a timely manner, and handles clinic materials appropriately and with regard to confidentiality.
____   Appearance and conduct typically professional. Language (verbal and written) is generally appropriate with minimal feedback required. Handling of clinic materials, consideration of confidentiality, and timeliness of communications typically appropriate and professional.
____   Occasional feedback and guidance regarding professional appearance and conduct is needed. Communication with clients and other professionals is at times awkward, delayed, or inappropriate.
____   Appearance and behavior in and around clinic frequently appears unprofessional. Communication with clients and other professionals is often awkward, delayed, or inappropriate.

2. Confidence
____   Highly confident in handling wide range of challenges, including crises.
____   Generally confident of emerging abilities. Experiences minor stress handling crises or major new responsibilities.
____   Generally confident of current skills, but is reluctant to venture into new areas; occasionally relies on supervisor for encouragement.
____   Confidence fluctuates in response to immediate successes and failures, lack of confidence is significant concern, seeks considerable reassurance from supervisor.
____   Lack of confidence is communicated to others in a manner that undermines the quality of work.

3. Acceptance of Responsibility
____   Seeks responsibility, initiates creative ideas, systematically attends to details with few prompts.
____   Sets appropriate priorities, takes initiative in ensuring that key tasks are completed.
____   Completes assignments, but needs occasional prompts or reminders; forgetful of minor details.
____   Completes work, but is dependent on prompts or deadlines.
____   Work is incomplete, frequently misses deadlines.

4. Team Participation
____   Skillfully negotiates challenging interpersonal dynamics, enhances the quality of learning on team, effectively uses team format for self-improvement and in the service of treatment needs.
____   Develops smooth working relationships, communicates ideas clearly, and effectively relates to

peers at differing levels of competence and with differing conceptualizations.

___ Accepted by other team members; participates regularly but does not take a leadership role.

___ Awareness of team issues is limited, occasional problems or discomfort with team role. (e.g., withdrawn, confrontational, insensitive, defensive).

5. Knowledge of Ethics

___ Spontaneously and consistently identifies ethical issues; effectively resolves issues using consultation as needed.

___ Consistently recognizes ethical issues, has a good sense of how to pursue them.

___ Usually recognizes situations where ethical issues might be pertinent, is responsive to supervisory input.

___ Understanding of ethical issues in some areas is vague or ambiguous, occasionally needs prompting to recognize an ethical issue.

___ Disregards or is unaware of important ethical issues.

6. Responsibility Concerning Personal Problems

___ Student deals with personal problems in a thoroughly effective manner such that personal issues do not interfere with professional activities.

___ Personal issues exert little if any influence on professional practice. Consistently recognizes where personal problems may impinge on professional practice and seeks appropriate assistance and supervision.

___ Exhibits good awareness of personal problems. Impact of personal issues on professional practice is minor; for example, may affect efficiency or may create limited "blindspots" regarding certain client characteristics or problems.

___ Personal problems limit effectiveness with certain types of clients or prevent students from gaining skills in certain areas. Student acknowledges problems but continues to exhibit limitations.

___ Personal problems significantly disrupt professional practice; student denies problems when brought up by supervisor.

Comments on Items 1-6:

EFFECTIVE USE OF SUPERVISION

7. Preparation for Supervision
___   Consistently arrives promptly for supervision with paperwork complete (e.g., case notes, letters, test protocols scored, report drafts) and with other appropriate materials (e.g., video tapes).
___   Usually arrives for supervision on time and with paperwork complete. Usually brings needed materials to supervision (e.g., video tapes, protocols).
___   Often arrives for supervision with incomplete case notes and/or not all materials needed. Protocols, notes, and drafts of reports often late or not brought to supervision.
___   Frequently late for supervision or arrives unprepared (e.g., case notes incomplete, drafts of reports not available, needed materials such as video tapes not available).

8. Efficient Use of Supervision
___   Uses supervision time wisely (e.g., identifies elements of case where supervision is needed, stays on-topic), and seeks additional supervision when needed.
___   Usually uses supervision time in a productive manner, but sometimes has difficulty specifying priorities concisely or seeking additional supervision when needed.
___   Supervision is productive at times, but often needs help to set priorities for supervision and to relay information concisely, or often seems unsure when additional supervision is needed.
___   Student has difficulty identifying elements of case where supervision is needed; thus, supervision tends to focus more on organizational rather than therapeutic issues.

9. Attention to Supervisor's Recommendations and Directives
___   Consistently takes thorough notes during supervision and follows through promptly on supervisor's recommendations and directives.
___   Usually takes good notes during supervision and follows through on most of supervisor's recommendations and directives.
___   Follows through sometimes on recommendations and directives, but often relies on prompts from supervisor to recall details of previous supervision sessions. Note taking may be sporadic or somewhat disorganized.
___   Often does not follow through on supervisor's recommendations. Seldom recalls specifics of previous supervision sessions or deviates significantly from recommendations and directives.

10. Self-Evaluation
___   Demonstrates thorough and accurate awareness of skills and limitations; thoughtfully addresses methods of maximizing potential and minimizing weaknesses.
___   Makes accurate self-appraisals, recognizes tendencies to misjudge abilities and shows particular care in these areas.
___   Shows adequate awareness of strengths and weaknesses and uses supervision for clarification in areas of uncertainty.
___   Mostly functions within abilities; may distort abilities somewhat or misjudge preparation needed when trying new skills.
___   Reports that "everything is fine," but subsequent information/observation reveals limitations/weaknesses; misjudges strengths.

11. Self-Direction

___ Fully dedicated to expanding knowledge and skills, seeks out and follows through on learning opportunities.

___ Eager to learn, shows initiative and takes specific steps, though follow-through may be sporadic.

___ Open to learning, waits for supervisor to present ideas.

___ Wants to learn but fails to take proactive initiative; is slow or reluctant to follow through on tasks related to training.

___ Restricts involvement to a minimum.

12. Use of Feedback

___ Actively solicits feedback as agent of professional growth, openly evaluates the usefulness of ideas, readily incorporates new ideas as appropriate.

___ Seeks and is fully open to feedback, tries new ideas and behaviors with varying degrees of comfort and success.

___ Generally hears feedback, can incorporate ideas and behaviors if they are congruent with usual functioning but may have difficulty when they are not; may not seek feedback.

___ Accepts feedback in some areas but occasionally shows defensiveness, dependence on habitual ideas and behaviors limits capacity to develop in new areas; or may consistently report that "everything is fine" without soliciting feedback.

___ Frequently defensive or confused by feedback, appears unable to use important and necessary feedback.

Comments on items 7-12:

ASSESSMENT SKILLS

13. Interviewing Skills
___ Relaxed and genuine with a variety of clients. Exhibits immediacy and empathy in the interviewing situation while also maintaining the structure necessary for collecting pertinent information.
___ Generally appears comfortable and relaxed, handles anxiety-provoking or awkward situations adequately so that clients remain engaged; collects pertinent information.
___ Usually comfortable but occasionally gets ruffled or feels unclear about how to handle an unusual situation or an interview that deviates from structured outline. Sometimes over-emphasizes either relationship-building or information-gathering aspects of the interview to the detriment of other aspects.
___ Depends on supervision or outlines in determining flow of interview, resulting in loss of immediacy or empathy. Experiments with different interview styles with varying degrees of comfort or success, leading to loss of genuineness. May sometimes make queries about inappropriate information or fail to query pertinent information.
___ Has difficulty establishing rapport or gathering pertinent information; alienates client.

14. Utilization of Test Data
___ Able to identify the most appropriate testing instruments for a given presenting problem and efficiently interprets data from tests with minimal consultation or supervision; skillfully handles unique applications of tests.
___ Chooses appropriate tests for most routine presenting problems and skillfully interpret these tests with some supervision.
___ Administers appropriate tests in routine cases and researches appropriate conclusions based on the data. Relies on supervisor's judgment for support in selecting and interpreting tests.
___ Understands basic functions and administration of tests selected, but makes occasional mistakes or errors when using the tests and needs supervision for certain aspects of testing.
___ Limited familiarity with testing instruments, unable to administer or interpret them independently.

15. Diagnosis
___ Thorough mastery of categories, terms, and organization of DSM-IV. Consistently collects appropriate diagnostic data, arrives at accurate diagnoses, and understands the implications of diagnoses in terms of outcome and treatment.
___ Uses major categories and specific terms from DSM-IV accurately and is able to gather and use assessment data for the purpose of diagnosis. May not fully understand course and treatment implications.
___ Familiar with DSM-IV categories and makes accurate diagnosis of more typical cases; relies on supervisory confirmation and recommendations for treatment.
___ Uncertain about various terms and meaning of categories in DSM-IV. Reaches inaccurate conclusions in the absence of supervisory input.
___ Limited prior experience with diagnostic categories; unfamiliar with important basic features and/or unable to collect appropriate data with which to make accurate diagnoses.

16. <u>Written Reports</u>

___ Clients are described in a comprehensive and accurate manner with relevant test results integrated into the report as supportive evidence. Organization, grammar, and style all optimally facilitate communication.

___ Report is clear and thorough, follows a coherent outline, effectively summarizes major relevant issues. Report and recommendations are related to referral questions.

___ Report covers essential points without serious error, may be somewhat lacking in cohesiveness and organization.

___ Individual points are mostly accurate, report may be overly vague or important issues may not be highlighted.

___ Inaccurate conclusions, poor organization or grammar, interferes with communication.

Comments on items 13-16:

PSYCHOTHERAPY SKILLS

17. <u>Uses Appropriate Language</u>

___ Student rapidly picks up on verbal style of client; consistently uses clients' verbal styles and idioms to optimize communication.

___ Sensitive to clients' use of language and able to communicate effectively.

___ Occasionally uses words or phrases which may be misunderstood by client, student spontaneously recognizes and corrects such slips.

___ Use of professional concepts or jargon occasionally interferes with rapport; student finds it is difficult to make needed shifts or is dependent on supervision to point out occurrences.

___ Student fails to recognize or correct instances of poor communication, even when pointed out by supervisor.

18. <u>Therapy Style</u>

___ Relaxed with a wide variety of clients; personality traits are fully and comfortably integrated with professional style.

___ Emerging professional style is consistent with personality characteristics; student handles anxiety-provoking or awkward situations adequately so that they do not undermine therapeutic success.

___ Usually comfortable with role as therapist but occasionally get ruffled or feels unclear about how to handle an unusual situation.

___ Experiments with different styles with varying degrees of comfort and success.

___ Student is uncomfortable in role of therapist, has difficulty establishing rapport and alienates

clients.

19. Sensitivity to Emotional Issues
___ Quickly and thoroughly grasps complex emotional issues; all facets of a client's emotional experience are comfortably and smoothly addressed.
___ Overt emotional issues are accurately and consistently identified though students may take longer to recognize hidden emotional issues; proper approach to emotional issues in therapy may require reflection or planning between sessions.
___ Readily recognizes emotional issues, but may depend on supervision for clarification/suggestions.
___ Aware of emotional issues only when they are clearly stated by the client and/or pointed out by supervisor.
___ Misses or misperceives important emotional elements, even when pointed out by supervisor.

20. Quality of Therapeutic Relationships
___ Establishes excellent relationships with virtually all clients; reliably identifies special needs of potentially challenging clients and spontaneously makes adjustments.
___ Establishes effective relationships with most clients, is sensitive to differing needs among clients in caseload and uses supervision effectively to respond to specific needs.
___ Student relates well to clients similar to those with whom they have prior experience; actively developing skills with new populations.
___ Able to establish effective relationships with a limited range of clients; recognizes problematic relationships but is dependent on supervision for clarification or suggestions.
___ Experiences difficulty developing effective relationships and/or shows limited capacity to recognize problems.

21. Complex Thinking
___ Spontaneously uses pertinent information from multiple sources (theory, history, goals, past sessions, cultural factors, voice inflection, the therapy relationship, emotional processes) in a way that clearly facilitates client progress.
___ Able to use pertinent information from multiple sources (history, goals, past sessions, cultural factors, body language) in a way that would seem to facilitate client progress.
___ Able to integrate multiple sources of information with some fluidity; able to formulate and test hypotheses within their own mind while interacting with clients; may focus attention on what client says at the expense of understanding the context from which the client speaks.
___ Has difficulty combining information from more than two sources; often unable to see the context from which the client speaks; often focus on details while missing the larger picture; often unable to formulate hypotheses regarding client behavior while interacting with a client.

22. <u>Therapy Interventions</u>
___ Consistently times interventions/interpretations to accurately match clients receptivity; interventions are natural/fluid.
___ Most often able to match interventions or interpretations to client's receptivity; interventions fit the context of the session; interventions appear genuine not stilted.
___ Able to recognize appropriate matching of interventions with client's receptivity; although they may have some difficulty achieving fluidity or timing.
___ Able to use appropriate interventions or interpretations in facilitating client progress, although these may not be fluid or timed to match a client's level of receptivity.
___ Provides interpretations or interventions inappropriate for a client's level of receptivity; or utilizes a few interpretations or interventions repeatedly without consideration for the context; or uses over-personalized interpretations or commonsensical advice-giving.
___ Provides few and limited interpretations or interventions appropriate to the client's level of receptivity.

23. <u>Case Conceptualization</u>
___ Student exhibits comprehensive understanding of case dynamics, able to integrate multiple theoretical orientations.
___ Student independently produces good case conceptualizations within their preferred theoretical orientation, ability to use multiple frameworks more limited.
___ Reaches adequate case conceptualization with supervisory assistance; recognizes improvements when pointed out by supervisor or peers.
___ Case formulations are accurate in some respects but not in others; student has difficulty distinguishing between accurate and inaccurate formulations.
___ Misuses basic theoretical concepts. Responses to clients indicate inadequate theoretical understanding/formulation.

24. <u>Therapy Goals</u>
___ Spontaneously negotiates appropriate therapy goals with all clients; incorporates full range of current environmental constraints, client's hidden agendas, and unexpected changes over time in setting and revising goals.
___ Consistently sets realistic goals in accordance with client's needs and desires.
___ Sets appropriate goals with occasional prompting from supervisor, distinguishes realistic and unrealistic goals.
___ Requires ongoing guidance from supervisor to explore appropriate goals beyond a simplistic acceptance of client's statement about the presenting problem.
___ Fails to set goals and/or to appreciate the role of goal-setting in the therapeutic process.

25. <u>Ending Therapy Process</u>
___ Spontaneously negotiates termination issues in advance with clients; facilitates goals for client progress following termination; follows through on referrals.
___ Facilitates termination through discussion of potential issues for the client; discusses future plans for continued improvement; makes appropriate referrals when necessary.
___ Experiences some difficulty ending with clients; provides support for client future progress; some difficulty delivering effective referrals; may prematurely distance self from client.
___ Has difficulty terminating effectively with clients; may blame client for problems or not recognize client emotional issues surrounding termination; terminates prematurely.
___ Does not discuss termination issues in advance with clients; does not make referrals when warranted.

Comments on items 17-25:

SENSITIVITY TO CULTURAL, SEXUAL, AND LIFESTYLE DIFFERENECES

26. <u>Awareness of Own Biases and Cultural Values</u>
___ Incorporates complex understanding of own cultural values/biases in qualifying case conceptualization and treatment. Spontaneously self-monitors with fluidity and accuracy; recognizes own impact on others.
___ Exhibits extensive awareness of own cultural values/biases and actively attempts to monitor these.
___ Has occasional "blind spots," but attempts to correct these through supervision.
___ Has difficulty monitoring personal biases or is unaware of how cultural values impact therapy.

27. <u>Knowledge of Client Cultural Values/Behaviors</u>
___ Demonstrates a thorough knowledge of the cultural values of clients and integrates this effectively in therapy.
___ Exhibits extensive awareness of client's cultural values, actively seeks new learning in the area, attempts to tailor therapy to match client's values.
___ Has moderate awareness of client's cultural values, seeks new learning in the area, or has some difficulty modifying therapy to match client's values.
___ Has limited awareness of client's cultural values, does not seek new learning in the area, or does not modify therapy.

28. Cultural Competence
___ Conveys to client their comfort in working with diverse individuals, uses inclusive/appropriate language, facilitates institutional change or indigenous helping practices as appropriate, qualifies assessments appropriately.
___ Exhibits sensitivity to diversity issues, communicates effectively with supervision assistance, facilitates institutional change or indigenous helping practices with supervision assistance, qualifies assessments appropriately.
___ Has some awkward or inappropriate moments in therapy despite attempts to communicate effectively, or relies on supervision for treatment planning and qualification of assessments.
___ Has difficulty communicating with people from different backgrounds or uses inappropriate interventions.

Comments on items 26-28:

SUMMARY RATING

Based on the above skills ratings, this student's performance is:

+2   Comparable with students who are on internship
+1   Above what would be expected of a student at their level of training
0   Where expected for a student at their level of training
-1   Below what would be expected for a student at their level of training
-2   In need of significant remediation*
      *Please provide a specific description of areas for remediation and recommendations for training below.

SUMMARY OF STRENGTHS:

SUMMARY OF AREAS IN NEED OF ADDITIONAL DEVELOPMENT OR REMEDIATION:

RECOMMENDATIONS:

The student   has   has not   (circle one)   successfully completed all requirements for the semester covered by this evaluation. I have reviewed this evaluation with the student.

_____   _____

Supervisor   Date

Student's Comments:

I have received a full explanation of this evaluation. I understand that my signature does not necessarily indicate agreement with it.

_____   _____

Student   Date

UNIVERSITY OF KANSAS
Clinical Child Psychology Program
Evaluation of Student
for Work Positions and Outside Placements

Evaluation of _____ for _____
                  (student name)   (semester, year)

Site: _____

1.   What types of activities did the trainee engage in under your supervision?

2.   What are the trainee's main strengths or skills?

3.   What areas do you suggest for improvement or further training?

Additional Comments:

	Poor	Marginal	Satisfactory	Very Good	Outstanding	
- Responsibility/dependability	1	2	3	4	5	NA
- Response to supervision	1	2	3	4	5	NA
- Professional relationships and standards	1	2	3	4	5	NA
- Work output and interest	1	2	3	4	5	NA
- Maturity, confidence and assertiveness	1	2	3	4	5	NA
- General overall performance	1	2	3	4	5	NA

If student's duties involve clinical work, please rate the following

	Poor	Marginal	Satisfactory	Very Good	Outstanding	
- Report writing, charting	1	2	3	4	5	NA
- Assessment skills	1	2	3	4	5	NA
- Case management skills	1	2	3	4	5	NA
- Therapy skills	1	2	3	4	5	NA

_____

How would trainee's performance best be categorized?

1	2	3	4	5
not acceptable	minimally acceptable	good - in line with expectations for level of training	very good -- somewhat exceeded typical performance for level of training	outstanding far exceeded typical perform- ance for level of training

_____

We have reviewed and discussed the contents of this evaluation form.

Supervisor's signature _____ Date: _____

Student's signature _____ Date: _____

Return to: Omar G. Gudiño, PhD, ABPP
Clinical Child Psychology Program
2014 Dole Center
Lawrence, KS 66045

Graduate Teaching Assistant (GTA) Evaluation Form
University of Kansas, Department of Psychology

PART I: General Information

Name of GTA: _____ Name of Supervisor/Reviewer: _____

Review Period (e.g., Spring 2011): _____

Course(s) Taught in this Review Period: _____

Did the supervisor or faculty advisor complete at least one course observation evaluation that was also provided to the GTA?

     ○ Yes   ○ No

Primary duties of GTA (check all that apply)

○ Text selection	○ Developing/posting Blackboard content
○ Syllabus development	○ Grading exams/papers/assignments
○ Lecturing/leading class sessions	○ Maintaining records (e.g., gradebooks)
○ Running labs/discussions	○ Contact with students via office hours/email
○ Developing tests/assignments	○ Running review sessions
○ Developing content for class sessions	

PART II: Evaluation

Please rate the performance of the GTA in this review period only in each of the following five areas.

1. Teaching and Presentation Ability: Regular attendance at other related lectures and course meetings as specified by supervisors; able to monitor and evaluate student progress and assignments; able to develop and organize relevant teaching materials; able to utilize approved texts or other instructional materials; capable of preparing and administering examinations; provides opportunities for student engagement; team-oriented attitude; effective working relationships with diverse constituencies; knowledge of student perspectives.

○ Unsatisfactory ○ Needs Improvement ○ Satisfactory ○ Exceeds Expectations ○ Outstanding ○ N/A

2. Quality of Work: Completes work thoroughly and accurately; pays attention to details; well-organized; completes work on time; provides prompt responses to supervisors, colleagues and students; consistent and high level of performance; accepting of constructive criticism by demonstration of the ability to listen and incorporate the critique of others; understands the importance of confidentiality and the academic and privacy rights of students (e.g., FERPA, University Rules and Regulations); able to provide clear assignment instructions; well-prepared to teach each class.

○ Unsatisfactory ○ Needs Improvement ○ Satisfactory ○ Exceeds Expectations ○ Outstanding ○ N/A

3. Oral and Written Communication: Able to communicate with a diverse range of people; provides accurate information and teaches course content with enthusiasm; deals effectively with stress; active listening skills; courteous and patient; able to understand and constructively respond to student needs; clarity in both oral and written skills with the ability to talk/write at the appropriate level; capable of providing clear and constructive feedback regarding colleagues upon supervisors' request.

○ Unsatisfactory ○ Needs Improvement ○ Satisfactory ○ Exceeds Expectations ○ Outstanding ○ N/A

4. Accountability and Self-Management: Possesses organizational and time management skills; holds office hours at the specified time and location; maintains on-going communication regarding workload to supervisor; able to multitask, prioritize and respond promptly to requests of supervisors (e.g. the submission of grades, meetings to review work, updating of BlackBoard, etc.); takes responsibility for all aspects of their work; willing to ask for help and to help others; able to adhere to the course outline and schedule on the syllabus; able to meet the department and university criteria for holding a GTA position; punctual and reliable.

O Unsatisfactory O Needs Improvement O Satisfactory O Exceeds Expectations O Outstanding O N/A

5. Subject Knowledge and Learning Ability: Demonstrates the ability to learn new content quickly especially new scholarship in the field as it relates to the course; interested in learning more than the basics of teaching pedagogy; capable of responding to student questions in a timely manner; open to new technology related to the implementation of the course (e.g., BlackBoard, PowerPoint, Excel, laboratory hardware and software, etc.); able to write clear examinations that are consistent with learning outcomes and course goals.

O Unsatisfactory O Needs Improvement O Satisfactory O Exceeds Expectations O Outstanding O N/A

Please provide some specific information related to **the GTA's strengths:**

Please provide some specific feedback on **areas in which the GTA can improve:**

PART IV: Overall Rating

Please rate the overall performance of this GTA for the current review period.

O Unsatisfactory O Needs Improvement O Satisfactory O Exceeds Expectations O Outstanding

_____

Signature of Graduate Teaching Assistant   **Date**

_____

Signature of Reviewer   **Date**

University of Kansas – GTA Course Observation Form
Department of Psychology

GTA/AI:_____ ___　　　　Class:_____

Observer:_____ ___　　　　　Date:_____

Rating Scale:

1= Strongly Disagree　　　2= Disagree　3= Neutral　　4 = Agree　　5 = Strongly Agree

The GTA actively engages students with the course material(s) and subject matter.

　　　　　1　　　　　2　　　　　3　　　　　4　　　　　5

The GTA uses whole class, group, and/or individual activities effectively.

　　　　　1　　　　　2　　　　　3　　　　　4　　　　　5

The GTA asks questions or makes comments that generate a high level of critical thinking.

　　　　　1　　　　　2　　　　　3　　　　　4　　　　　5

The GTA interacts well with students and addresses students' needs and questions.

　　　　　1　　　　　2　　　　　3　　　　　4　　　　　5

The GTA is knowledgeable in key terms, concepts, ideas, and theories and conveys them in a manner that is understandable to the average student.

　　　　　1　　　　　2　　　　　3　　　　　4　　　　　5

The GTA is professional, appropriately dressed, punctual, and prepared for class.

　　　　　1　　　　　2　　　　　3　　　　　4　　　　　5

The GTA adheres to the course schedule and syllabus.

　　　　　1　　　　　2　　　　　3　　　　　4　　　　　5

The GTA makes appropriate use of (technology/instruments/texts/readings).

　　　　　1　　　　　2　　　　　3　　　　　4　　　　　5

Overall Assessment of in-class instruction:

Unsatisfactory　Needs Improvement　　　　　Satisfactory　Exceeds Expectations　Outstanding

Comments:

_____　　_____
GTA/AI Signature/Date　　　　　　　　Observer's Signature/Date

Provide one copy to the GTA. Retain original in departmental files. New GTAs should be observed a minimum of once a semester, and continuing GTAs once a year.

Case Conceptualization Evaluation and Documentation Form

Student's Name: _____

Date of Formal Case Presentation: _____

Brief Description of Case (*no identifying information*)**:** _____

---

1. Student provided a thorough conceptualization of the case, using multiple sources of pertinent information (e.g., self-report, behavioral observations, parent- or teacher-report, objective testing, and subjective observations).

Excellent   Very Good   Average   Fair   Poor

Comment:

2. Student demonstrated the ability to consider multiple theoretical orientations into the case presentation.

Excellent   Very Good   Average   Fair   Poor

Comment:

3. Student demonstrated sensitivity to any cultural/diversity issues in case conceptualization.

Excellent   Very Good   Average   Fair   Poor

Comment: (please note if not applicable)

4. Treatment goals were congruent with and based up on case conceptualization, available research findings, and client characteristics, culture, and preferences.

Excellent   Very Good   Average   Fair   Poor

Comment:

5. Student's presentation style and language facilitated understanding of the case material, procedures used, and conclusions drawn.

Excellent   Very Good   Average   Fair   Poor

Comment:

_____

Supervisor's Signature   Date

A7. Outside Activities Reporting Form

Outside Activities Reporting Form

For Semester: _____

Name of Student: _____

Date: _____

Agency or program: _____

Onsite Director or Supervisor: _____

Nature of involvement (briefly describe activities and duties):

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____   _____
Student Signature   Program Director Signature

How to Finish in 12 Steps or Less

1. Finish all research.

2. Write up the thesis or dissertation using instructions from GS
   http://www.graduate.ku.edu/electronic-thesis-and-dissertation.

3. Get permission from the committee members to set up a defense time and to agree on a defense time / day / date.

4. See the Program Administrative Associate to schedule the defense. (Allow the Program Administrative Associate at least three weeks notice for a thesis defense, comprehensive defense and dissertation defense.)

5. The Program Administrative Associate will submit the Progress to Degree form online (official notification of the scheduled exam) to COGA for approval.

6. After the exam has been taken, the Progress to Degree form will be updated online by the Program Administrative Associate, indicating whether or not the student passed the exam, and then submitted to COGA for an official approval.

7. Make all necessary corrections, changes, additions, and deletions to the final copy of the thesis or dissertation.

8. Before making a final original, it is in your best interest to take a sample page to COGA (102 Strong Hall) and have it checked for type print and margins. Any charts and/or oversized anything needs to be cleared with COGA also.

9. Use a respectable photocopying company and have one bound copy made for the Clinical Child Psychology Program library and any other copies as the student wishes. When received, take one bound and signed copy to the Administrative Associate who will file it in the Clinical Child Psychology Program library

10. It is required to have all copies of the thesis or dissertation signed by all members of the committee. If you have both a Chair and Co-Chair, both must sign.

11. Refer to Checklist provided by COGA at http://clas.ku.edu/coga/graduation and complete all the steps.

12. Once all requirements have been met, a STATEMENT OF DEGREE can be issued by COGA, official with the University of Kansas Seal, the date you completed all requirements, and when the graduation actually is. They are accepted at most state universities and private businesses as proof of being finished.

A9. Defense Committee Report

Defense Committee Report
Clinical Child Psychology Program
University of Kansas

This form should be completed by the student's defense examination committee chair and submitted to the Clinical Child Psychology Program Graduate Officer immediately following the exam. Completion of this form is required as a condition of endorsement.

Name of student   _____

Date of exam   _____

Type of exam/defense (check one):

☐   **Master's Thesis Defense**

☐   **PhD Comprehensive Oral Exam**

☐   **PhD Final Exam**

Exam Result (check one):

☐   **Satisfactory Pass**

☐   **Honors Pass***

☐   **Fail***

*In the event of a fail or honors pass, please give a brief description for this decision:

Committee member approval with the decision above:
(3 required for MA committee and 5 required for PhD committee)
Dissenting committee members may include a separate brief note outlining their disagreement with the committee decision.

_____   _____
Chair   **Outside Member (if PhD Exam)**

_____   _____
Member   **Member**

_____
Member

A10. Electronic Submission of Theses and Dissertations & Master's and Doctoral Checklist (COGA)

RE: **Electronic submission of theses and dissertations** (http://guides.lib.ku.edu/etd)

Also refer to this website for information on Electronic Thesis and Dissertation information:

http://www.graduate.ku.edu/electronic-thesis-and-dissertation

All students will submit their theses or dissertations electronically. Students will still submit a paper signature form to COGA, but paper copies of the actual thesis or dissertation will no longer be required or accepted

RE: **Checklists for Master's and Doctoral Degree**

Refer to the following website:

http://clas.ku.edu/coga/graduation

A11. Photo Release Form

<table>
<tr><td colspan="2" align="center"><h1>Release for Photographic Image and Use of Name</h1>Agreement by the subject to confer rights to use photograph(s) and/or video(s) by the University of Kansas</td></tr>
<tr>
<td>

I hereby give my consent for my photograph or videograph to be used by the University of Kansas, or any of its agencies, and the Clinical Child Psychology Program (CCPP), in any way related to the publicity programs of this organization, including posting to the university/program website and including in publicity posters and brochures. I give permission for the CCPP to include my name as a graduate student in the program website, brochures, posters, and other publicity about activities.

Date _____

_____
Name (please print)

_____
Signature

_____
 Contact information
_____

_____
telephone #: _____
email: _____

</td>
<td></td>
</tr>
<tr><td colspan="2">Clinical Child Psychology Program, University of Kansas /2015 Dole Human Development Center/1000 Sunnyside Avenue/ Lawrence, KS 66045 / (785) 864-4226   rev. 12/12/06</td></tr>
</table>

<u>Annual Review of Progress</u>   Student Name: _____

We are asking students to provide the faculty with detailed information about their activities in preparation for the review of student performance conducted in the late spring (typically May) as outlined in the Training Manual. The faculty suggest that each student also contact their academic or research advisor in advance of the faculty meeting to discuss these activities and their performance over the last year.

What have you done this last year you want the faculty to know?

Research Activities

Clinical Activities

Outside Professional-Related Activities

Performance in Funded Positions

What are your goals for the next year?

Research Activities

Clinical Activities

Outside Professional-Related Activities

Performance in Funded Positions

Clinical Child Psychology Program
University of Kansas

Annual Review of Student (noting particular strengths/accomplishments and weaknesses)

Major areas of performance review:
Academics

Research

Clinical

Work/positions

Dimensions of feedback regarding:
a. Professional skills and abilities
(psychological assessment, psychotherapy, research abilities)

b. Communication skills
(speaking, writing)

c. Interpersonal relationships
with faculty:

with peers:

with staff:

with clients:

d. Time/Work management
(clarity of goals, decision-making, keeping commitments, timely progress through
program)

e. Motivation
(independence, energy, risk-taking, self-confidence)

f. Development of professional identity
(knowledge of program environment, commitment to program and involvement in
professional activities)

Numerical ratings and verbal anchors for above factors:

Poor	Marginal	Satisfactory	Very Good	Outstanding
Not at all skilled	Beginning skill	Skill level adequate for level	Skilled	Outstanding skill
1	2	3	4	5

A13. Training Agreement, Ethical Obligations, and Information on Performance

Clinical Child Psychology Program
University of Kansas

Form for
Training Agreement, Ethical Obligations, and Information on Performance

I, _____ (student name), hereby agree to the Clinical Child Psychology Program curriculum and requirements as outlined in the Training Manual of July 2013. I have reviewed the curriculum with the Program Director, and I have been informed of the processes related to evaluation. In this latter regard, I am aware that there are formal evaluations of student progress by the Clinical Child faculty. If there are substantial issues of problems pertaining to the student's progress, the adviser will prepare a detailed letter and arrange an individual feedback session. Additionally, at this time the student may be invited to attend another evaluation/feedback session if the faculty believes this is necessary. A copy of the note or expanded letter will be placed in the student's file. In addition to the formal evaluation/feedback, students will receive feedback from course instructors in terms of grades, and there will be evaluations of particular projects such as qualifying exams, theses, and dissertations by subsets of faculty. In addition to the arenas of evaluation and feedback described above, the faculty reserves the right to call a formal evaluation of the student at any point if the circumstances are warranted. For the formal evaluations, the student will have the right, if they so desire, to pursue the various channels of appeal. These are clearly outlined in the CCPP Training Manual

I understand that one requirement of maintaining good standing in the Graduate Training Program in Clinical Child Psychology at the University of Kansas is abiding by the code of ethics of the American Psychological Association. I understand that failure to conduct myself in accord with the APA ethical code could result in my being terminated from the University of Kansas Graduate Training Program in Clinical Child Psychology. I affirm that the Graduate Training Program in Clinical Child Psychology has supplied me with a personal copy of the APA code of ethics, that I have read and understand the code of ethics, and that I understand that this signed form will be maintained in my student file with the Program Director. Furthermore, I agree to abide by the APA code of ethics.

I grant the faculty of the Clinical Child Psychology Program permission to exchange personal and educational information as necessary and relevant, including but not restricted to letters of reference, regarding my training and performance, abilities and skills, suitability for professional positions and functions, and other information as may be needed for various review and evaluations by external persons and agencies. These may be necessary for such reasons as placement into an external practicum, funding position, or an internship, as a nomination for an

Page one of two

award, for grant applications, for professional licensure, and for professional positions after graduation.

I understand that I am responsible for informing the faculty and program about the needs for the letters of reference, although I further understand that faculty will respond to official requests for information in good faith that I approve of providing this evaluative information, including letters of reference, in the absence of my formal request to do so.

I understand that because of the Federal Family Education Rights and Privacy Act of 1974, students are entitled to review their records, including letters of recommendation. However, those writing recommendations and those assessing recommendations may attach more significance to them if it is known that recommendations remain confidential. It is my responsibility for informing the faculty who may write such letters of reference if and when I do not want to waive my right to review these letters.

_____
Name of Student (print)

_____
Signature of Student

_____
Date

_____
Signature of Program Director

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A14. Form for Certification of Preparation for Internship Annual Review

Certification of Preparation for Internship

By vote of the Clinical Child Psychology Program faculty, _____
(student name) is certified as ready for application to clinical internship programs.

Vote: _____ assenting

              _____ dissenting

Date: _____   _____
                                           Signature of Program Director

Date: _____   _____
                                           Signature of Student

A15. APPIC Application Information

Go to http://www.appic.org for information.

Clinical Child Psychology Program Policy
On Downloading Material to Program and Clinic Computers

The use of the program and clinic computers is a privilege afforded graduate students in the program. Due to the professional and legal implications, use of the computers must be carefully controlled by the program and by the individuals who have access. The use of the computers must be approached with sensitivity to others who use the computers, to the privacy rights of the clients of the Clinic, and to the public that help support the purchase of the computers. Particularly important concerns should be to limit the risk of sanction by the University to the program and students, as well as the risk to the University of sanctions from other parties. No materials should be downloaded to program and clinic computers that are copyrighted (such as music or video without permission of the copyright holder), pornography, and casino games. Software packages for data analyses and assessment protocols and other professionally-related activities may be placed on the computer if the appropriate license is obtained and with approval of the technical liaisons. Additionally, one should be also cautious in using the computers for political or religious activities.

The above policy is stated in the Program Training Manual. By signing my name and initialing and dating, I, as a student in the Clinical Child Psychology Program, affirm that I have read this policy, understand it, and will abide by it.

_____   _____

(signature)   (date)

Program By-Laws
Clinical Child Psychology Program
University of Kansas,
Lawrence, KS

Approved by the Clinical Child Psychology Faculty on March 27, 2007.

Submitted to the Dean of the College of Liberal Arts and Sciences on March 28, 2007.

Amended by unanimous vote of the faculty on April 28, 2008.

Table of Contents

Note: These By-laws were informed in word and spirit by the By-laws of similar programs at the University of Kansas, specifically, the Women's Studies Program.

Overview and Purpose of the By-Laws

The Clinical Child Psychology Program (CCPP) is an initiative jointly affiliated with the Departments of Psychology and Applied Behavioral Science and is accredited by the American Psychological Association (APA) as a doctoral (Ph.D.) training program in the area of Clinical Psychology with a Child Emphasis. This interdepartmental program involves some of the faculty from both departments, as well as other departments on campus and at the KU Medical Center.

Founded in 1991, the Program's goals are to (a) contribute to the advancement of psychological science and its application to improve the lives of children, adolescents, and their families; (b) advance the knowledge base of clinical and developmental psychology through programs of research encompassing basic and applied science; and (c) propagate this knowledge through teaching, graduate training, consultation in the community, publication of scholarly works, and participation in professional organizations.

The purpose of these by-laws is to establish consistent methods and procedures for the conduct and operation of the CCPP (referred to hereafter as "the Program.") The Program recognizes that it is bound in its actions by University regulations and that these by-laws are supplementary to these regulations, in particular the *Handbook for Faculty and other Unclassified Staff*. Further, as an interdepartmental program between the departments of Psychology and Applied Behavioral Science, the Program recognizes that in matters pertaining to faculty appointments, and promotion/tenure and merit reviews, the Program is bound by the by-laws and procedures of these two departments.

Article I. Program Structure

A. Voting members of the Program shall be faculty holding tenure-track, visiting, and continuing appointments in the Program (hereafter referred to as core faculty).

   1. In all matters pertaining to faculty appointment, tenure, and promotion, voting is limited to tenured or tenure-track faculty members. Following policies in the two departments, students' input into these matters is solicited, but students are not permitted to vote.

   2. Except for when a faculty vote is specifically required by these by-laws, University or departmental procedures, or the Program Training Manual, policy and procedures shall be derived by consensus of the core faculty who are present.

   3. If a decision concerning program business cannot be made by consensus, the decision shall be made by a simple majority vote of the voting members of the Program who are present and voting.

   4. Unless otherwise indicated by these by-laws or University or departmental procedures, a quorum of 60% of the core faculty shall be sufficient for the execution of Program business at faculty meetings.

   5. Voting members who are absent from a faculty meeting shall forfeit their vote for the meeting.

B. Advisory Members.

   1. Student Representation

      a. A student representative, nominated and elected by the student body of the Program and approved by the Program core faculty shall attend the regular Program faculty meetings. This representative has both a voice and a vote at these meetings (unless otherwise indicated in these by-laws; see I.A.1 above).

      b. The student representative is charged with the preparation of reports/minutes of the faculty meetings and distribution of these minutes to the student body and the Program Director.

      c. The student representative is excused from meetings in which individual student progress and performance are discussed.

      d. Students will have volunteer representatives (elected from among the student body and approved by the core faculty) on the Admissions Committee and, when constituted, on any Faculty Recruitment Committees, as well as any ad hoc committees. The student

representatives are charged with the responsibility of seeking student feedback on candidates from the student body at large and reporting such feedback to core faculty and committee members.

e. The student representative may be recalled and replaced by a 2/3 majority vote of the student body. In such a case, the student body will again nominate and elect a student representative to be approved by the faculty.

f. The faculty may require that the student body replace a student representative with an alternative if the student representative fails to perform adequately, or if the student representative's progress in the Program is hindered by her or his duties as student representative.

g. If the student representative is unable to attend a faculty meeting, they are responsible for identifying a suitable substitute for the meeting. This should be done in consultation with the program director.

2. Program Staff Representation

a. All full-time staff members of the Program shall attend the regular faculty meetings and will advise the faculty regarding policy and day-to-day operations of the Program.

Article II.   Meetings, Special Committees, and Directorship

A. Meetings. The Program shall be operated via weekly faculty meetings as scheduled by the Program Director. All Program business, unless noted elsewhere in these by-laws, is conducted by a committee of the entire core faculty with input from the student representative and full-time staff members (i.e., "committee of the whole").

1. The core faculty is responsible for general educational policy, including the formulation and change of graduate requirements in the Program, and the introduction of new courses or programs or the change or removal of existing courses or programs. It also approves special seminars before they are offered.

2. Undergraduate course offerings by the core faculty are also the responsibility of the Program faculty through negotiations with the two departments.

B. Ad hoc Committees. The ad hoc committees of the Program include Graduate Admissions Committees, Faculty Recruitment and Search Committees, Student Award Committees, and other ad hoc committees that the core faculty or Director determine are necessary.

1. Chairperson. The chairperson of Graduate Admissions Committees and Faculty Recruitment and Search Committees shall be the Program Director. The chairperson of the Student Awards committees may be selected from the core faculty or other appropriate outside members.

2. Membership. Unless otherwise noted in these by-laws, it shall be the responsibility of the core faculty to select committee members from the core faculty, other appropriate outside members, and the student body (as indicated. See above).

3. Committees shall report and consult with the core faculty members at the weekly meetings and attend program meetings.

C. Committee Functions and Duties.

   1. Graduate Admissions Committee

      a. This committee shall be made up of three core faculty members and a student representative, to be selected by the core faculty from potential student representatives nominated by the student body.

      b. The Committee is responsible for initial evaluation of application materials, coordination of student interviews, and initial rank ordering of viable candidates.

      c. The final determination of admission shall be made by the core faculty (i.e., committee of the whole) with student input.

   2. Faculty Recruitment and Search Committees.

      a. This committee shall be chaired by the Program director, with committee membership made up of core faculty representatives, representatives from the two departments, a tenure-track faculty member from outside of the two departments, and a (non-voting) student representative.

      b. Committee responsibilities include preparation of faculty search criteria, preparation and dissemination of position descriptions, initial evaluation of application materials, coordination of faculty interviews, and initial rank ordering of viable candidates.

      c. The committee chair (i.e., Program Director) is responsible for coordination with department chairs and CLAS and University administration through faculty negotiations and recruitment.

      d. To the extent that faculty appointments in the Program are joint appointments, this committee will coordinate with the appropriate

parallel committees in the joint departments/programs of the candidate for review.

3.   Student Awards Committees.

     a.   These committees shall be convened to evaluate student applications for the available student awards, including the *Jerry and Willie McNeal Student Award for Outstanding Teaching*, the *Award for Outstanding Achievement in Graduate Studies in Clinical Child Psychology*, the *CCPP Pioneer Classes Dissertation Research Award*, and the *Brown Kirschman Award for Research Excellence*.

     b.   Committee members will evaluate application or nomination materials and will report recommendations back to the core faculty for approval.

D.   Duties and Functions of the Director.

1.   Term of office. The term of office is determined by the Dean of the College of Liberal Arts and Sciences. Typically, the Director shall serve a five-year term. This appointment shall be made following the regular procedures for appointing heads of departments and programs in the College of Liberal Arts and Sciences. Incumbents are eligible for reappointment. If the director desires to be considered for reappointment, procedures for review are set out by the College of Liberal Arts and Sciences.

2.   The Director shall represent the Program in relation to other departments/programs and the administrative offices of the University. The Director shall attend monthly College Chair meetings and monthly Social Science Brown Bags and any other meetings designated for chairs and directors.

3.   With regard to the Program's standing as an APA Accredited Clinical program, the Director shall serve as the Director of Clinical Training (DCT), and as such, shall represent the Program to other universities, to APA, and to the Council of University Directors of Clinical Psychology.

     a.   The Program Director is responsible for overseeing the accreditation and reaccredidation of the Program, and shall delegate duties to the faculty, staff, and students as necessary to achieve this goal.

     b.   With input from the core faculty, the Program Director is responsible for the appointment and evaluation of the Director of the KU Child and Family Services Clinic.

4.   With input from faculty colleagues, the Director shall set the agenda for, and preside over weekly faculty meetings and monthly program meetings.

5.   The Director shall have primary responsibility for the day-to-day running of the Program and shall perform the functions necessary to implement all phases of program operation, including space allocation, equipment procurement, secretarial staff, personnel decisions, and the overall functioning of the office.

6.   The Director shall assume responsibility for administering the Program budget.

7.   The Director shall be responsible for the coordination of courses and contacts with community agencies regarding practicum and employment positions.

8.   The Director shall chair the Faculty Recruitment and Search Committee and the Graduate Admissions Committee.

9.   In case of resignation, the Director shall inform the core faculty, the chairs of the two departments, the Associate Dean of Social Sciences, and the Dean of the College of Liberal Arts and Sciences.

E.   Duties and Functions of the Associate Director.

1.   The Associate Director shall be appointed by the Director, and shall serve a five-year term. Incumbents are eligible for reappointment.

2.   If the Director is unable to conduct the affairs of the Program (i.e., due to travel, sabbatical leave, or other absences), the Associate Director shall temporarily perform the duties of Program Director until such time as the Director can resume active duty.

3.   If the Director permanently leaves the position, the Associate Director shall serve in this capacity until such time as a new Director is appointed by the Dean of the College of Liberal Arts and Sciences.

Article III. Procedures

A.   Appointment of New Staff. New staff positions shall be filled at the instructor level and higher by the approval of the voting members of the Program who are present and voting.

B.   Procedures for Faculty Evaluation. Faculty members of the Program hold joint appointments in the departments of Psychology and Applied Behavioral Science. As such, Program faculty members are subject to the annual evaluation

procedures for the departments of Psychology and Applied Behavioral Science.

C.   Merit Salary. Faculty members of the Program are subject to the review procedures for the departments of Psychology and Applied Behavioral Science in the determination of merit salary increases.

D.   Procedures for Tenure and Promotion. The procedures for tenure and promotion reflect our cooperative coordination with the departments of Psychology and Applied Behavioral Science to insure that the preparation of individual cases is completed in an effective manner. It is important that the Blue Form that is produced for tenure and promotion decisions be an integrated form that presents the full contributions of the faculty member in her/his joint appointment status.

1.   In the Spring semester, the Director solicits nominations for tenure and promotion cases for the following academic year. Candidates may be self-designated nominees, be nominated by another member of the faculty, or be identified by the College for mandatory tenure review. In preparation for an individual candidate's promotion to Associate or to Full Professor, the Director meets with the Chairs of the candidate's joint appointment Departments to discuss mutual participation and responsibilities. The Director works with the joint appointment departments to develop the list of outside reviewers and submits the list to the College.

2.   The preparation of the Blue Forms is the responsibility of the Program core faculty under the Program Director. One set of forms will go forward to the college consolidating the evaluations of the two departments with equivalence (i.e., there is no "lead" department since all faculty have 50/50 appointments in the two departments).

3.   The Director will act as a liaison between the Program and the joint appointment departments to ensure good communication and coordination between the two units regarding Promotion and Tenure procedures.

4.   Program faculty are subject to the Promotion and Tenure Procedures for the departments of Psychology and Applied Behavioral Science with exceptions as noted above.

E.   KU Child and Family Services Clinic. The Program maintains a mental health services clinic staffed by Program graduate student trainees and supervised by the Director of the KU Child and Family Services Clinic (hereafter referred to as the Clinic Director).

1.   The Clinic Director is appointed by the Program Director to maintain and oversee the day-to-day functioning of the KU Child and Family Services Clinic (hereafter referred to as the Clinic).

a.   Term of office. The Clinic Director shall serve a five year term, which may be renewed at the discretion of the Program Director, in

consultation with core faculty.

    b.   Duties of Clinic Director. The Clinic Director has the responsibility of overseeing day-to-day functions of the Clinic, maintaining the Clinic budget, hiring and evaluating Clinic staff, and providing an annual report to the Program Director. The Clinic Director will collaborate with the Program Director to coordinate clinical supervisors for clinical trainees in the clinic.

F.   Grievances Procedures. Pursuant to Article XIV of the University Senate Code and Articles V and VI of the University Senate Rules and Regulations of the University of Kansas, Lawrence, the Program establishes the following procedures to hear grievances arising within its unit. These procedures apply to those grievances arising from the graduate program, faculty and students in Clinical Child Psychology.

    1.   When a grievance arises with regard to undergraduate issues, then the procedures apply as established by the Department of Psychology or the Department of Applied Behavioral Science according to the course line number under which the undergraduate student is enrolled. When faculty members are functioning in the roles as professors for the undergraduate curriculum, the procedures for the respective Department will apply. This procedure shall not be used to hear disputes assigned to other hearing bodies under USRR Article VI, Section 4.

    2.   For disputes involving alleged academic misconduct, see the College of Liberal Arts and Sciences policy on academic misconduct. For alleged violations of student rights, the initial hearing normally will be at the Program level. There is an option to hold an initial hearing at the Judicial Board level if both parties agree, or either party petitions the Judicial Board chair to have the hearing at the Judicial Board level and the petition is granted. The petition must state why a fair hearing cannot be obtained at the unit level; the opposing party has an opportunity to respond to the petition (USRR 6. 4.3.1).

    3.   Except as provided in USRR 6.5.4, no person shall be disciplined for using the grievance procedure or assisting another in using the grievance procedure.

    4.   The Program shall provide a copy of these procedures to anyone who requests them and these procedures will be published in the Training Manual.

G.   Grade Appeal Procedures. A graduate student in the Program or taking a Program course who believes that there has been an improper application of announced grading procedures should make an appeal in writing to the instructor. Should the matter not be resolved, the written appeal and a written response by the instructor will be forwarded to the Director. Matters not resolved in this manner will be

forwarded to the College appeals procedure.

H.   Amendments to the By-Laws. Amendments to the by-laws are by a 2/3 majority vote, and can take place at a faculty meeting with at least 75% of the core faculty present. Amendments should be prepared in writing and circulated to all voting members of the Program at least two weeks prior to the meeting in which the amendments will be discussed.

I.   Adoption of the By-Laws. The original adoption of these By-laws shall be the amending process described in III.H. All rules and regulations stated in these By-Laws are valid only to the extent that they are in agreement with the University Senate Code, the Faculty Senate Code, rules and regulations adopted by the University Senate and the Faculty Senate, the regulations of the Kansas Board of Regents, and the policies and regulations of the College of Arts and Sciences and GS.

A18. Disaster Response Plan

The disaster response plan for the Program is as follows:

If the fire alarm sounds in the building, all students and faculty members will immediately evacuate without question. They will close and lock offices, labs, clinic rooms, and the door leading into the area and clinic. Students and faculty should evacuate out the back door and will congregate across the parking lot at the generator next to Malott Hall. Meeting at an identified place will allow those present to determine who might have been in the clinic and labs and are missing.

If the tornado warning alarm is sounded, then all students and faculty will immediately evacuate to the basement of the Dole Human Development Center without question. They will close and lock offices, labs, clinic rooms, and the doors leading into the area and clinic. Clinic coordinators will knock on doors for clinic sessions and inform therapists and clients of the tornado warning and about the policy to go immediately to the basement. This immediate evacuation to the basement is to occur regardless of any announcement via the campus security network.

10 8 08

A19. Considerations for Clinical Case Presentations

Case presentations are a supportive learning experience for practicum students and provide an opportunity for a demonstration of their developing skills in case conceptualization, assessment, and treatment, as well as oral presentation. The presentation of clinical case material will be to fellow practicum students, clinical faculty, and consultants. Although faculty evaluation of student skills are an inherent aspect of the case conferences, a facilitative, constructive, problem-solving attitude should be maintained by conference participants. The student presenter should receive insight and supportive suggestions helpful in pursuing assessment and treatment objectives for the particular case presented and useful in future clinical work.

All students in the Basic Practicum in Clinical Child Psychology will present at a case conference at least once in the semesters in which they are enrolled (typically in the second year). Students enrolled in Advanced Practicum may be required by the faculty to present at a case conference or may elect to do so voluntarily. Case conferences will be scheduled for one hour sessions. The presentation of the basic information on a case should not take more than 20 minutes to leave time for discussion. Students will prepare for their conferences with guidance from their team leader.

It is imperative that both presenter and participants, when describing assessment and treatment approaches or suggesting such, indicate the empirical bases for their statements.

Identifying information about clients should be carefully disguised. In each conference, the supervisor should caution participants about confidentiality and that the discussed material is to be treated as privileged information. That is, discussion of the case outside the conference is restricted.

Several alternatives may be followed for the case conference in consultation with the practicum team leader:

a. The case is an active one with several contacts, but the termination of therapy is not anticipated. The plan for further work may be outlined and therapy techniques described. Questions may then be posed by the presenter to the participants regarding certain features of the case and the direction therapy or further assessment should take. Particular problems encountered might be outlined and possible solutions proposed in order to solicit feedback and problem-solving from the participants.

b. The case may be a completed one with decision points noted in the course of contacts and how therapy progressed. This alternative may be similar to #1, except that future contacts are not anticipated.

c. An "iterative" approach may be used in which a fairly limited set of background information is presented about the client. Student and supervisor then guide a Socratic dialogue in which participants ask questions they consider important in forming a diagnosis or conceptualization and in designing a treatment plan. Participants must provide a rationale or assumption about their questions and need

for certain information (e.g., why would the information be useful? how would the answer to the question provide facts fitting with or in opposition to a theoretical therapeutic approach?). This approach is based on the notion that there are reasons psychologists have for requesting the information. For example, if psychometric tests were completed by the client or family, the results would not be provided the participants until requested by the participants and a rationale is provided (why the information is necessary and how the information would be used to advance diagnosis, conceptualization, or therapy) and a set of hypotheses is proposed for the test data.

d.   A theory or technique-based case presentation might be organized in which readings are assigned to the participants in advance of the conference. The case would then illustrate the conceptualization. A variant may be a demonstration of a particular treatment approach and its appropriateness to the specific client presented.

e.   Additional formats may be utilized such as a team presentation of two or more student therapists describing their conjoint work with a family, sibling, child psychotherapy group, school or agency consulting.

Roles and Functions for Case Conference

1.   Supervisor's Role:

Responsibility for proper functioning of case conferences will be assumed by practicum team leaders. The clinical supervisor will lead the case conference by starting on time and by acting as moderator to facilitate the interaction between student presenter and participants. The supervisor may intervene strategically, but should allow the presenter the primary responsibility for organizing, presenting, and answering questions. At the end of the conference, the supervisor will summarize briefly the major points of the presentation and discussion.

2.   Presenter's Role:
Each practicum student is required to present one active treatment case. The basic information about the case should be prepared carefully through a brief written or oral description. This may include pertinent demographic information, referral and intake facts, social history, psychometric results, and a summary of therapeutic contacts. Audio/video tape excerpts and copies of test material may be important to convey some information. The use of material and how it is presented will depend on the alternative selected above.

3.   Participants' Role:

Participants will include faculty and students in the Clinical Child Psychology Program with interests in the student presenter's development of clinical skills. In addition, the presenter and supervisor may agree to invite an outside consultant from a related department or discipline. The consultant is subject to the restrictions on privileged information noted above. This consultant may have particular expertise in the area of the

client's problems and may be primed in advance for issues to be considered. All participants should follow the direction of the student in case presentation and assume an attitude of providing positive, constructive dialogue and feedback.

4.   Evaluative Component:

Faculty participants who participate in the case conference will provide oral comments to the supervisor or student regarding student performance.   In the feedback and evaluation, attention may be given to the following factors: oral presentation ability, synthesis and communication of significant facts, ability to conceptualize problems and solutions, proper consideration of assessment and therapy techniques, competence in utilizing these techniques, ethical competence, and other factors arising from the conference discussions.

Development of Clinical Practica Outside of the KU Child and Family Services Clinic.

The Program has been instrumental in developing relationships of mutual benefit of training and service delivery for our students. As the Program has developed over the years since 1991, it has developed several practica outside of the KU Child and Family Services Clinic setting for advanced students (e.g., Children's Mercy Hospital, Bert Nash Mental Health Center, KUMC Pediatric Psychology, Therapeutic Classrooms).

As these settings have been identified, the Program has followed a careful procedure before setting up a formal practicum, necessitating several meetings over a period of time. Aspects reviewed include the nature and quality of the experience, the quality and credentials of the supervisors, and the manner in which clinic hours might be credited within the program mechanism. Supervisors must be approved as "Adjunct Professors" in one of the two departments with which the Program is affiliated; such reviews take place once a year (in the Fall).

Students are encouraged to identify their interests and have initial discussions about possible development of clinical practica in field settings. Of course, ultimately, it is the responsibility of the Program faculty to evaluate and maintain the appropriateness of such sites and supervision. This may be frustratingly slow at times, but is necessary for the protection of the student(s) and the quality of our program.

Specifically, external practicum placements are contingent upon the following conditions.

1.   The Clinical Child Psychology Program Director, with advice of the clinical child psychology core faculty, shall review all arrangements and must approve before any student may participate in an external practicum placement.

6.   The student shall be registered for an appropriate supervised Practicum.

7.   The agency and/or sub-unit shall have identified a primary agency contact person (psychologist) to whom the student is responsible and for whom recognition as a courtesy faculty has been made.

8.   The student shall enter treatment notes or make other such oral and/or written

information available as required by the agency's policies.

5.   The student's role in providing assessment or psychotherapy shall be considered as secondary. That is, primary responsibility for clients remains with the sponsoring agency. Accordingly, the student role may be terminated at any time at the discretion of the agency.

6.   The student may obtain additional case supervision from clinical child psychology core faculty for purposes of training and feedback.

7.   The faculty supervisor and the agency psychologist will maintain contact as needed.

8.   At no time will agency records that the student is permitted to review be taken from the agency premises. Notes relevant to case supervision may be developed using code names or numbers.

9.   All contact with clients shall be at approved/designated locations within the agency.

10.   Other safeguards that the agency deems to be in the best interests of client protection and welfare shall be followed.

11.   Except for funded positions that provide practicum experiences, the student receives no remuneration for clinical services delivered as part of a practicum experience.

Note: Similar guidelines shall be effective for stipend placements (employment) except that all supervision is provided by agency staff and #11 does not apply. The Program maintains close interactive contact with external practicum sites including communication of student performance ratings and personal and educational information as necessary and relevant to evaluating the education and training of the student.

Use of Case Reports. Internship programs sometimes request a sample copy of a student write-up of a testing or therapy case. This request poses problems for confidentiality and privacy for clients seen in the KU Child and Family Services Clinic and outside agencies. The Program's policy is to get clients' permission before using their information and remove all names and alter identifying information. This report must be approved by the Clinic Director regardless of where the case was seen before sending it to the internship site.

Program expectations regarding summer practicum for students with a primary practicum assignment in the KU Child & Family Service Clinic during the preceding academic year. In response to inquiries and comments, we seek to clarify expectations regarding practicum training at the KU Child & Family Services Clinic during the summer months. The Clinic is our primary clinical training site, and provides a valuable opportunity to gain basic skills in clinical child psychology services. As a program, we have set 100 direct client contact hours in the clinic as a

minimal expectation for students before becoming eligible for external practica. However, this does not mean students may reduce their efforts in the clinic once this target is met, nor does the accrual of this number of hours necessarily confer eligibility for external placements.

One of the major goals of our initial practicum sequence is to foster a sense of professional responsibility in carrying out clinical interventions. One part of this professional role is to develop a high level of competence with a broad range of individuals and presenting problems. Another is to learn how to manage clinical demands in a timely and efficient manner. A third is to develop a sense of commitment to children and families who come to you for help.

Consonant with these goals, the CCPP provides an opportunity for students to begin active clinical work in the summer following their first academic year and to continue to develop basic professional skills in the Clinic through the end of the summer following their second academic year. Students entering with a master's degree may begin practicum during their first year in residence, but are expected to continue training in the Clinic through the end of the summer following this first year. More advanced students who anticipate continuing in the Clinic as a primary placement during the upcoming academic year are also expected to participate actively in the Clinic practicum during the summer months.

Specifying caseloads for student with a primary practicum in the Clinic is difficult because some cases require much more time and effort than others. Hours of effort are perhaps easier to specify. For students participating in this primary practicum training sequence, the CCPP faculty expects 10-12 hours of effort per week, including summer months as specified above. These hours include supervision time. Some weeks may require more effort, some weeks will require less. Some students currently in the initial practicum sequence have chosen to enroll in only one practicum credit hour during the summer. This may be appropriate for cost reasons, but does not excuse students from the standard expectations.

Given the three training goals outlined above, we expect CCPP students involved in our primary training site to seek and accept a variety of treatment and assessment cases. We expect students to learn to maintain several active cases simultaneously and remain productive in other areas. Finally, we expect students to demonstrate commitment and connection to children and families by maintaining longer term treatment relationships. This means students, during this initial practicum sequence, should be available continuously to clients during breaks and in the summer, with absences of more than two weeks reserved for emergencies only.

A20. IR C-8 D Competency Evaluation Tool

University of Kansas Clinical Child Psychology Program
IR C-8 D Competency Evaluation Tool

In order to complete the doctoral program in Clinical Child Psychology at the University of Kansas, students must demonstrate entry-level competence in 45 specific competency elements across 9 profession-wide competencies (PWCs) identified by the APA's *Commission on Accreditation* and 2 program-specific competencies (PSCs) identified by the CCPP. Students demonstrate these competency elements by archiving artifacts and self-reflective statements on the Program's Blackboard site. Artifacts may include work products (e.g., class papers, peer-reviewed papers), descriptions of practicum or research experiences, and evaluations of practicum and/or research experiences or work placements. The self-reflective statement is a 1 to 2-page summary describing how the identified artifacts collectively demonstrate evidence of mastery of the specific competency element.

Using the following matrix, please evaluate the degree to which the student's artifacts and self-reflective statements successfully demonstrate each required element of the 9 PWCs and 2 PSCs. **The minimum threshold for fully demonstrating each PWC and PSC is a score of 4.0 across three CCPP core faculty members.** This level of competency indicates readiness for an APA-Accredited clinical internship.

Key
Key
1—Competency element clearly <u>not</u> demonstrated by artifacts and self-reflective statements
2—Some elements of the competency have been demonstrated
3—Artifacts and self-reflective statement approaching threshold for demonstration of competency
4—Artifacts and self-reflective statement meet threshold for demonstration of competency
5—Artifacts and self-reflective statement exceed threshold for demonstration of competency*
* Scores of 5 require notation for how the artifacts and self-reflection exceed normative expectations. (See below for notes)

PROFESSION-WIDE COMPETENCIES					
Research (See Program Competencies A1-A6)	**1**	**2**	**3**	**4**	**5***
Student demonstrates the ability to <u>independently</u> formulate research that is of sufficient quality and rigor to contribute to the scientific, psychological, or professional knowledge base.					
Student demonstrates competence to conduct research or other scholarly activities as demonstrated by their written narrative.					
Student Demonstrates competence to critically evaluate and disseminate research or other scholarly activity via professional publication and presentation at the local, regional, or national level as demonstrated by their written narrative.					

Ethical and Legal Standards (See Program Competencies F1-F3)	**1**	**2**	**3**	**4**	**5***
Student is knowledgeable of and act in accordance with the current					

version of the APA Ethical Principles of Psychologists and Code of Conduct; relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels; and relevant professional standards and guidelines.					
Student recognizes ethical dilemmas as they arise, and applies ethical decision-making processes in order to resolve the dilemmas.					
Student conducts self in an ethical manner in all professional activities.					
Individual and Cultural Diversity (See Program Competencies I1-I3)					
Student demonstrates an understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves.					
Student demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision/consultation, and service.					
Student demonstrates the ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles (e.g., research, services, and other professional activities).					
Student 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.					
Professional Values, Attitudes and Behaviors (See Program Competencies H1-H3)					
Student 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.					
Student engages in self-reflection regarding one's personal and professional functioning; engages in activities to maintain and improve performance, well-being, and professional effectiveness.					
Student actively seeks and demonstrates openness and responsiveness to feedback and supervision.					
Student responds professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.					
Communication and Interpersonal Skills (See Program Competencies G1-G5)	**1**	**2**	**3**	**4**	**5***
Student develops and maintains effective relationships with a wide range of individuals, including colleagues, communities, organizations,					

	1	2	3	4	5*
supervisors, supervisees, and those receiving professional services.					
Student produces and comprehends oral, nonverbal, and written communications that are informative and well-integrated; and demonstrates a thorough grasp of professional language and concepts.					
Student demonstrates effective interpersonal skills and the ability to manage difficult communication well.					
Assessment (See Program Competencies B1-B6)					
Student 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.					
Student 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.					
Student communicates orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.					
Intervention (See Program Competencies C1-C4)					
Student establishes and maintains effective relationships with the recipients of psychological services.					
Student develops evidence-based intervention plans specific to the service delivery goals.					
Student implements interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.					
Student demonstrates the ability to apply the relevant research literature to clinical decision making.					
Student modifies and adapts evidence-based approaches effectively when a clear evidence-base is lacking.					
Student evaluates intervention effectiveness, and adapts intervention goals and methods consistent with ongoing evaluation.					

Supervision (See Competencies E1-E5)	1	2	3	4	5*
Student demonstrates knowledge of supervision models and practices.					
Consultation and Interprofessional/Interdisciplinary Skills (See CompetenciesD1-D3)					
Student demonstrates knowledge and respect for the roles and					

perspectives of other professions.					
Student demonstrates knowledge of consultation models and practices.					

PROGRAM-SPECIFIC COMPETENCIES					
Administration/Management (See Program Competencies L1-L3)	**1**	**2**	**3**	**4**	**5***
Student demonstrates understanding of the various administrative roles that professional psychologists perform in health and mental health settings.					
Students understands principles of academic/institutional leadership.					
Student has developed an understanding of their own strengths and weaknesses with regard to leadership of academic, health services, or institutional units.					
Professional Leadership and Communication **(See Program Competencies J1-J2 and K1-K2)**					
Student demonstrates awareness of theories of learning and how they impact teaching.					
Student demonstrates the ability to plan and teach a lecture/unit of an undergraduate lecture/lab course in any area of psychology or human development.					
Student demonstrates competence in the presentation of research findings in public settings, as evidenced by at least one poster or paper presentation at a national or regional professional conference or convention.					
Student has published at least one empirical or review article in a peer-refereed journal in the fields of clinical, clinical child, developmental, or pediatric psychology.					

Notes for elements receiving scores of 5:

Appendix B. American Psychological Association and Professional Organizational Policies

1. Ethical Principles of Psychologists and Code of Conduct (APA, 2010)
   http://www.apa.org/ethics/code/index.aspx
2. Record Keeping Guidelines (APA, 2007)
3. Guidelines for Psychological Evaluations in Child Protection Matters (APA, 1999)
4. Guidelines for Psychological Practice with Sexual Minority Persons (APA, 2021)
5. Multicultural Guidelines: An Ecological Approach to Context, Identity, and Intersectionality (APA, 2017)
6. Competency Assessment Toolkit for Professional Psychology (APA, 2009)
7. Competency Benchmarks: A Model for Understanding and Measuring Competence in Professional Psychology Across Training Levels (APA, 2009)
8. Guidelines for Child Custody Evaluations in Family Law Proceedings (APA, 2010)
9. Guidelines for Psychological Practice with Girls and Women (APA, 2007)

Printed copies are available in the Program Administrative Associate's office.

Appendix C. State of Kansas

C1. A Guide to Reporting Child Abuse & Neglect in Kansas

http://www.dcf.ks.gov/services/PPS/Documents/GuidetoReportingAbuseandNeglect.pdf

A printed copy of the Guide is available in the Program Administrative Associate's office.

C2. Behavioral Sciences Regulatory Board (Psychology Statutes, Rules, and Regulations)

http://www.ksbsrb.org/statutes_regs/lps-rbook.html

A printed copy of this document is available in the Program Administrative Associate's office.

Appendix D. KU Child and Family Services Clinic

D1. The Lillian Jacobey Baur Development Fund

From an email sent to Michael C. Roberts, From E. Jackson Baur on December 18, 1996: "You may remember asking me to give you an account of my late wife's career. I have finally taken time to write a brief statement. It should help people understand what motivated her family to support the child psychology clinic.

Lillian Jacobey Baur (1912 – 1991)

Lillian Baur's professional career was devoted to the education and well-being of children. On graduating from high school at the age of sixteen she took her first job of teaching in a one-room school in northwestern Nebraska. She boarded in the home of the local farm family and rode a horse to school. She began each winter morning by lighting a fire in the school-house stove. Later she taught in the primary grades, kindergarten, and nursery school.

She was born Lillian Earline Jacobey in Battle Creek in northeastern Nebraska where her father was the superintendent of schools. Her mother had been a school teacher. Their children were three daughters, of whom Lillian was the youngest, and all of whom began their careers as elementary school teachers. The family moved to other small, Nebraska towns where her father headed the schools the last of which was Harrison, in the northwestern corner of the state, where Lillian graduated from high school.

In 1929 she enrolled at Nebraska Wesleyan University in Lincoln and after two years as an education major qualified for a teaching certificate. She taught first and second grade classes in the towns of Western (1932-35) and Beatrice (1936-37). During summers she continued her education. In 1933 at the University of Nebraska, Lincoln, and from 1934 to 1938 at Nebraska Wesleyan University. She received a B.S. in Education in 1937 and a high school certificate to teach social science and English. She was initiated into the national social science honorary society.

Beginning in the fall of 1937 Lillian taught at the Sheridan public school in Lincoln. At a district teacher's meeting she looked at the many grey-haired spinsters, and knowing that she would lose her job if she married, determined to change careers. She chose social work and applied to admission to the School of Social Service Administrative of the University of Chicago. She was accepted and went to Chicago in June, 1939.

On July 9, 1939, Lillian met E. Jackson Baur at an open house for summer students. He had completed all requirements but the dissertation for a Ph.D. in sociology and had applied for a teaching position. In early August he accepted an offer from Dillard University in New Orleans and proposed marriage. They set their wedding date for December 26, when she would have fulfilled the terms of her teaching contract. With the prospect of marrying an academician, she decided to change her career aspirations back to teaching so that the time of their work and vacations would coincide.

They returned to Chicago in the summer of 1940. Jackson worked on his dissertation and Lillian enrolled in the Human Development program and obtained an appointment as apprentice

teacher in the University's nursery school. On returning to New Orleans in the fall she was employed in the preschool of Metarie Park Country Day School.

In the summer of 1941, they returned to Chicago where Jackson completed Ph.D. requirements and Lillian taught in the Nursery School. He worked for the National War Labor Board until October, 1943, when he began two and a half years of military service and she was employed in one of the federally-funded, war-time, nursery schools. In 1946, she lectured on human development at the University of Illinois School of Nursing in Chicago.

In September, 1947, the Baurs moved to Lawrence, Kansas, where he had accepted a faculty appointment. From February, 1958, to June, 1959, Lillian was employed as the head teacher for the Lawrence Community Nursery School. For several years beginning in 1959, she was variously employed by the local school district as a substitute teacher, teaching home-bound children, and teaching English to the foreign born.

In later years Lillian applied her talents to volunteering rather than paid employment. Among the agencies where she worked were Small World (a nursery school for children of foreign-born parents), Head Start, Women's Transitional Care Service where she served the needs of children of women seeking aid, and as a docent for the Spencer Museum of Art where she Specialized in leading tours of school children.

December 17, 1996
E.Jackson Baur
Lawrence, Kansas

D2. Practicum Responsibilities

The CCPP faculty has established the following policies with regard to Practicum responsibilities specifically for Spring and Summer:

Students must maintain a full client load throughout the Spring semester in order to justify the credit hours of enrollment.

As the Spring semester proceeds, student therapists should be mindful of their obligations to their clients. Depending on plans for future enrollment in practicum in the Child and Family Services Clinic, students may need to start planning for the eventual transfer or treatment termination of their clients in an appropriate professional manner. Both actions, transfer and termination, require the approval of the Spring practicum supervisor and the Clinic Director.

If clients need to continue in therapy past the end of the Spring semester, student therapists have two options:

a. Transfer the clients to another therapist (either an advanced therapist or to a first year student who can, with planning, begin the gradual assumption of the case through conjoint therapy).

b. Continue in practicum through the summer or until the case can be legitimately terminated (with approval of the practicum team leader).

These options must be negotiated in a planful manner with the practicum supervisor. Students may not make unilaterial decisions about transfer or termination. Students are reminded that their conduct in clinic practicum is considered fundamental to professionalism and responsibility.

November 3, 1998

D3. Clinical Psychology Records: reconciling HIPPA, the 2003 APA Ethics Code, State Statutes and Administrative Rules, and Practice Standards (*The Clinical Psychologist*, Summer 2003)

D4. Termination of Access to KU Child and Family Services Clinic Health Information

KU Clinical Child Psychology Program

The following procedures are to be followed when graduate student therapists leave the Clinical Child Psychology Program through graduation, for predoctoral internship, or termination. These procedures also apply when paid staff members end their employment with this unit through termination, retirement, or transfer.

Staff/Student Name: _____

Last Date of Service:_____

Task	Date completed	Name and signature of person attesting that task was completed
Return key(s) unlocking clinic and CCPP areas		
Erase or otherwise destroy electronic media containing ePHI (electronic files/check hard drive) generated by therapist/staff member		
Complete any pending notes, assessment reports, or other documentation for services rendered as a therapist or staff		
Remove password access to all computers utilized as part of clinic and CCPP operations		
Return all testing materials, treatment manuals, and other resources belonging to Clinic		
Close all client files--Check with Clinic Adm Associate		
Return all equipment, books, supplies, etc., to Clinic if purchased using clinic funds		
Return all equipment, books, supplies, etc., to CCPP if purchased using CCPP funds		
Pay all outstanding invoices due to CCPP or Clinic		
Interns only: Give forwarding address and contact info to CCPP and Clinic		
Interns only: Complete NC-SARA exit interview with CCPP Director		

D5. NC-SARA Direct Disclosure Interview Form

In order to maintain KU's eligibility for Title IV student aid and to maintain our membership in the *National Council for State Authorization Reciprocity Agreements* (NC-SARA), as of July 1, 2020, the University of Kansas is required to disclose whether academic programs that lead to licensure will lead to licensure in Kansas, and in any other state or territory in the U.S.

As you know, the Clinical Child Psychology Program at the University of Kansas meets the course requirements for doctoral training in the state of Kansas as outlined in K.A.R. 102-1-12. However, as noted in the *CCPP Training Manual*, other states and territories in the U.S. may have different educational requirements. **This exit interview will document that you understand the licensing requirements of the state in which your required clinical internship operates.**

To prepare for this interview, please locate *and print* the specific educational requirements for licensed psychologists in the state in which you will complete your required clinical internship. You will recall having done something similar for ABSC/PSYC 809. The following websites may provide some additional assistance:

- http://www.asppb.org
- https://nc-sara.org/professional-licensure-directory

Once you have located the educational requirements for licensure in the identified state, please schedule a 30-minute exit interview with the CCPP Director. *Bring this Direct Disclosure Interview form* and the printed copy of the educational requirements that you identified.

Student Name: _____

Clinical Internship Name: _____

State/Territory of Internship: _____

Website for State Licensing Board: _____

On the back of this form, please identify any outstanding/unfulfilled course requirements listed by the licensing board of the state in which you will complete your internship. <u>Do not</u> include post-doctoral supervised hours. Please <u>do</u> include any jurisprudence examinations that you must complete. *Please attach the hard copy* of the state licensure requirements to this form.

By signing this Interview Form, I acknowledge that I understand the licensure requirements of the state or territory to which I am moving to complete my clinical internship. I have discussed these educational requirements with the CCPP Program Director.

_____   _____
Students' Signature   Date

_____
CCPP Director's Signature

Statement of the Clinical Child Psychology Program
January, 2004

As an interdepartmental graduate program in the College of Liberal Arts and Sciences and the Graduate School of the University of Kansas, the Clinical Child Psychology Program endorses and abides by the mission statement of the College, quoted in part below.

College of Liberal Arts and Sciences Mission Statement

The College of Liberal Arts and Sciences fosters and advances excellent teaching, important and significant research, and public service within the state of Kansas and beyond. The liberal arts and sciences include a wide range of disciplines in the humanities, the social sciences, and the natural and mathematical sciences. The College strives to provide an educational experience that addresses the many ways in which these disciplines help us understand the world. At the core of a liberal arts education are research and informed engagement with global issues, multiculturalism, and diverse experiences; these goals represent our greatest hope for a better understanding of differences in the human condition and the potential for enhanced tolerance. Given that multiple perspectives lie at the core of a liberal arts education, the College strives to attract a community of students, faculty, and staff from diverse cultures and backgrounds, and we are committed to the full participation of previously excluded or neglected groups of people. We believe diversity in our student body, faculty, and staff is essential to our educational mission. . . .

The aim of education at the graduate level is to bring students to the frontiers of current knowledge in a discipline and to enable them to become independent contributors to that knowledge. We engage graduate students as collaborators in producing and disseminating knowledge while promoting their independence as scholars, teachers, and productive citizens. We educate *all* students to think critically, to communicate with precision, and to develop sensitivity to different cultures. We further educate students to acquire the skills needed in a complex technological world, while also developing interests that stimulate life-long learning.

Accreditation by the American Psychological Association

As a training program in professional psychology accredited by the American Psychological Association, the Clinical Child Psychology Program fulfills the 8 Domains of training outlined in the *APA Guidelines and Principles for Accreditation of Programs in Professional Psychology* (Book 1, 2002). All domains provide significant guidance to our educational and training activities; Domain D, in particular, attends to the program's respect for and understanding of cultural and individual diversity that guides its actions with regard to personal and demographic characteristics (quoted in entirety):

Cultural and Individual Differences and Diversity

The program recognizes the importance of cultural and individual differences and diversity in the training of psychologists.

1. The program has made systematic, coherent, and long-term efforts to attract and retain students and faculty from differing ethnic, racial, and personal backgrounds into the program. Consistent with such efforts, it acts to ensure a supportive and encouraging learning environment appropriate for the training of diverse individuals and the provision of training opportunities for a broad spectrum of individuals. Further, the program avoids any actions that would restrict program access on grounds that are irrelevant to success in graduate training.
2. The program has and implements a thoughtful and coherent plan to provide students with relevant knowledge and experiences about the role of cultural and individual diversity in psychological phenomena as it relates to the science and practice of professional psychology. The avenues by which these goals are achieved are to be developed by the program." (APA, 2002, p. 9)

Ethical Principles of Psychologists and Code of Conduct of the
American Psychological Association

The faculty and students in the Clinical Child Psychology Program abide by the Ethical Principles of Psychologists and Code of Conduct established by the American Psychological Association (December, 2002). Of specific relevance is Principle E: Respect for People's Rights and Dignity, quoted in part:

"Psychologists are aware of and respect cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status, and consider these factors when working with members of such groups." (APA December, 2002, p. 1063)

Guiding Principles of the KU Clinical Child Psychology Program

The Program is founded on six guiding principles. Not listed in priority order in the Program's Training Manual and on the website (www.ccpp.ku.edu), the third guiding principle states:

"Third, clinical child psychologists need to be sensitive and responsive to the cultural and ethnic diversity of children and their families."

Statement adopted by vote of the faculty
Clinical Child Psychology Program
January, 2004

Appendix F. Traditions and Expectations for Dissertations in the Clinical Child Psychology Program

Dissertations in the Clinical Child Psychology Program (CCPP) are to be more in the style of ready to submit for publication following the *American Psychological Association Publication Manual* (6th edition). This format results in a typically shorter, more focused document than many GS Representatives might be accustomed to. Thus, elaborated literature reviews, redundancies across sections, extensive tables, etc are not included. An acceptable dissertation in the CCPP may be as brief as 35 manuscript pages or as long as over 100 pages, depending on the topic, the research approach, and the advisor's proclivities. CCPP does not use the format of "chapters" in the dissertation, but relies on the section headings of Introduction/Literature Review/Hypotheses, Methods, Results, Discussion, References, and Appendices (following the *APA Publication Manual*, 6th edition). Following COGA/GS format (diverging from the *APA Publication Manual*), most tables and figures are inserted into the text where discussed (or close by). Copies of the oral comprehensive manuscript and dissertation must be provided to each committee member in hard copy no less than 7 days from the scheduled oral examination. Electronic copy may be provided upon request of the individual committee member.

History and Guiding Principles of the Clinical Child Psychology Program

The CCPP at the University of Kansas started in 1991 with several essential features. The CCPP ascribes to (a) a scientist-practitioner model; (b) fulfills the integration of applied and basic research with clinical activities as described by national recommendations on training in the specialty; (c) attends to the research base and to developmental perspectives; (d) provides extensive training in developmental psychopathology, sound assessment practices, behavioral, cognitive-behavioral, and family therapy and interventions; and (e) emphasizes ethnic and cultural diversity issues, prevention, public sector and social interventions, and professional issues (ethical/legal). The CCPP is fully accredited by the American Psychological Association. The program utilizes the general clinical and developmental psychology talents in the Department of Psychology and applied behavior analysis expertise in Department of Applied Behavioral Science. Because of the diversity of content areas and the methodologies employed by the core faculty, students in the CCPP receive well-integrated research and clinical training experiences.

The CCPP Training Manual (available at www.ccpp.ku.edu) states in part:

Ph.D. Oral Comprehensive Examination: Dissertation Proposal

Upon completion of all course requirements for the Ph.D. degree and the Task, except the dissertation and internship, the student also must pass the oral comprehensive examination. This examination addresses the formal written proposal for the dissertation as well as larger questions in the field.

Choosing an Oral Comprehensive Exam Committee -- The student should choose a committee of five wisely and choose those whose expertise bears on the topic: this will encourage getting expert constructive help.

The committee **must** contain someone who is a regular member of the Graduate Faculty but who is **NOT** a member of the Psychology Department Graduate Faculty or the Applied Behavioral Science Graduate Faculty as the "outside member"; "associated" faculty are not permitted. This outside person represents GS, making sure the student is receiving a "well-rounded" examination. Five committee members in the Graduate Faculty are required for the oral comprehensive exam committee and the final oral examination over the dissertation. If two or more faculty members "co-chair" a student's dissertation, the minimum number of committee members increases to six.

Oral comprehensive examinations and dissertation defense committees must have a minimum of two CCPP faculty members plus one member that is from CCPP, Psychology or Applied Behavioral Science. If specific content expertise is needed, extra faculty members from any department may be added to the committee.

Doctoral Dissertation

The dissertation will be a substantial piece of original research representing an original scholarly contribution to the knowledge of the field. A dissertation in the Clinical Child Psychology Program must be based on original, empirical investigation. The dissertation project may be directed (chaired) by any authorized member of the Graduate Faculty from Psychology or Applied Behavioral Science. The dissertation oral examination committee will be composed of the chair plus four additional members. All members of the committee must be members of the Graduate Faculty. One member of the five must be outside of the two departments affiliated with the Clinical Child Psychology Program (Applied Behavioral Science; Psychology).

Faculty members with primary obligations to the Program are eligible to chair dissertations in the Clinical Child Psychology Program subject to the minimal criteria listed below. Professors at any rank in the Department of Applied Behavioral Science and the Department of Psychology are eligible to chair dissertations in the Clinical Child Psychology Program subject to the minimal criteria listed below with approval of the Program faculty (i.e., those faculty in the two departments with primary obligations to the Program).

The minimal criteria for chair status:
1. individual faculty member has a strong record of current scholarship (current is defined as the most recent three years of service)
2. individual faculty member has earned the Ph.D.
3. two years of service at the University of Kansas or at a comparable comprehensive university (exceptions may be made by the program faculty after careful review and justification to COGA and GS).

Following the policy articulated by the Graduate School Council, cover sheets to master's thesis and doctoral dissertation need to be completely signed by all committee members, including the outside member for the doctoral dissertation (who represents GS). This policy, adopted by the CCPP faculty on May 17, 2004, supercedes previous policies of the Graduate Division of the College to allow 3 out of 5 signatures. The new policy requires all committee members to sign the cover page.

Dissertation Defense Date

All proposal and defense documents for thesis and dissertation are due to all committee members at least one week (7 days) before the date of the meeting. If this cannot be accomplished, then the date of the committee meeting will be changed to allow one week for reading of the document. Students must distribute paper copies of the document at least one week prior to the meeting (no later than 4:30 p.m. CT, on the day, seven (7) calendar days prior to the day scheduled for orals) with the committee chair as the last person to get a copy indicating that the policy has been met. Failure to distribute by this date shall cause the orals to be postponed.

Procedures for Orals:

> 1.   Every oral comprehensive and final oral examination (master's thesis and dissertation defenses) will always start with a committee meeting *in camera* ("in chamber" without the student present). Any audience members will wait outside until the in camera process is completed and will enter the room with the student.
> 2.   Students will stand during their presentation, unless an accommodation is necessary.
> 3.   Upon completion of the orals, the student will remove him or herself from the meeting room and wait in the Student Work Area (Room 2004) (not in the hallway) while the committee discusses. Any audience members will depart the room during the committee deliberations. The student will be contacted by the committee chair and asked to re-enter the room where the committee decision will be discussed. The decision will not be communicated during the return to the room, but will be made inside. This will standardize all communications and protect the student from hearing potentially negative news in the presence of peers.
> 4.   Finally, the students have been instructed that they are not to provide any food or drinks to oral examinations. Committee members are welcome to bring their own.

Graduate Learner Outcome Dissertation Rubric

As per GS and University policies, the CCPP collects outcome data on our students' doctoral work. Approximately one week before the scheduled defense date, dissertation committee members will be provided with a copy of the student's dissertation document. Committee members will be asked to complete the dissertation rubric online from a link provided in an email sent to each committee member one week prior to the defense to evaluate the paper on several dimensions. See the rubric document below.

The completed rubrics will be submitted electronically to the Office of Institutional Research and Planning (OIRP). Aggregate data from CCPP graduate student outcomes will be available to the CCPP to assist with program development.

Clinical Child Psychology Doctoral Program Dissertation Rubric

Components of a Dissertation and their Characteristics at Different Quality Levels
Approved by the Clinical Child Psychology Program faculty and student representative 9-26-11

Components	Outcome Quality Levels			
	Outstanding - 4	**Very Good - 3**	**Acceptable - 2**	**Unacceptable - 1**
Mastery of Field	Demonstrates mastery of the relevant literature and critical insight	Shows mastery of relevant literature Integrative synthesis of relevant literature	Adequate literature review but review is uncritical Displays limited understanding of the field	Plagiarizes or misreads or misuses sources Missing relevant sources
Statement of the Problem	Compelling, clear research question Socially important, significant, or innovative question Places question in context	Interesting, sufficient breadth, depth, and insight Poses good question Convincing rationale of significance	Provides minimally acceptable rationale for the study Explains importance and/or significance of the question, but not fully articulated	Provides poor or no rationale for the question Question is poorly stated or omitted Question is of little significance
Mastery of Research Methods	Develops new techniques, tools, methods or analyses Methodology fits the question or problem Sophisticated critical evaluation of alternative approaches	Well-executed research including data collection Demonstrates why selected particular approach & shows importance over past approaches	Demonstrates basic competence and ability to research Uses standard methods and analyses	Inappropriate or incorrect design or methods Wrong, inappropriate, incoherent, confused, uninformative analyses Data are flawed, falsified, misinterpreted, irrelevant, or confusing
Presentation/Communication Skills	Well written and organized Effortless reading of document Communicates well & succinctly	Well written and organized No excess verbiage No tangential material	Writing is pedestrian and plodding; lacks originality or creativity; shows basic understanding Basic level of organization Provides a general discussion	Poorly written; Poorly organized Message of project is lost Spelling, grammatical, and clerical errors impact overall presentation and understanding

			of the question or issues, but lacks specificity	
Results/ Analysis	Compelling and coherent argument Logical & focused argument Demonstrates mature, independent thinking Imaginative or insightful conceptualization	Exceeds the standard of thoroughness Comprehensive integrated reporting of results Evidence supports the conceptualization with data analysis Analyses are well defined and innovative	Meets the standard of thoroughness Simple reporting of results Evidence supports the conceptualization Analyses are linked to research question Sustained conceptualization, but lacks synthesis, innovation, imagination, or insight; conceptualization is narrow in scope	Weak, inconsistent, or invalid theoretical conceptualization Conclusions are unsupported, exaggerated, or invalid
Interpretation/ Discussion/ Conclusions	Identifies the significance and applications of findings Puts the study into larger context Indicates implications for the field	Findings are well synthesized Conclusions are supported by the evidence Addresses limitations Conceptually systematic Discusses issues of generalizability and external validity	Sufficient discussion of the results Addresses some limitations Interpretation is relatively simplistic	Insufficient discussion of the results Misinterprets the findings Shows lack of understanding and careful thought
Overall: *Circle one:*	**Outstanding = 4**	**Very Good = 3**	**Acceptable = 2**	**Unacceptable = 1**

Appendix G. Student Research Fund Application Form

Student Research Fund
Application Form
Clinical Child Psychology Program
University of Kansas

Student's Name: _____

Title of Project: _____

_____

Purpose of research: ___ Master's thesis ___ Task   ___ Dissertation ___Other

Summary of Project: (2-5) sentences

Estimated costs:
 (detail each item and attach vendor information; if approved special forms for ordering will need to be completed)

_____   _____

Signature of Student   Date   Signature of Faculty Advisor   Date

Approved by CCPP Faculty: _____
                          Date

Appendix H. Brown Kirschman Award for Research Excellence Evaluation Form

Reviewer   A   B   C

Title of Project:

Evaluative Comments (please include strengths and weaknesses)

Importance/ Innovation (1=Poor 5=Average 10=Excellent)   Score:_____

Potential to impact literature (1=Poor 5=Average 10=Excellent)   Score:_____

Methods (1=Poor 5=Average 10=Excellent)   Score:_____

Feasibility of Project (1=Poor 5=Average 10=Excellent)   Score:_____

Budget (1=Poor 5=Average 10=Excellent)   Score:_____

Overall Evaluation of Project

Recommend for funding (meets minimum criteria):   YES/NO

Total score : _____

Appendix I. CCPP Pioneer Classes Dissertation Research Award Evaluation Form

Reviewer   A   B   C

Title of Project:

_____

Evaluative Comments (please include strengths and weaknesses)

Importance/ Innovation (1=Poor 5=Average 10=Excellent)   Score:_____

Potential to impact literature (1=Poor 5=Average 10=Excellent)   Score:_____

Methods (1=Poor 5=Average 10=Excellent)   Score:_____

Feasibility of Project (1=Poor 5=Average 10=Excellent)   Score:_____

Budget (1=Poor 5=Average 10=Excellent)   Score:_____

Overall Evaluation of Project

_____

Recommend for funding (meets minimum criteria):   YES   NO

Total score : _____