HANDBOOK
of the
Clinical Psychology Doctoral Program
Department of Psychology
Saint Louis University

2015-16
# Department of Psychology
Saint Louis University
2015-2016

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I. MISSION

The mission of the clinical psychology graduate program is to educate and train students broadly in the science and the practice of clinical psychology to prepare them for their roles and responsibilities as competent and ethical clinical psychologists. In realizing its mission, the clinical psychology graduate program is committed to educating and training students who achieve the following goals and objectives:

- Knowledge, understanding and competence in the broad theoretical, scientific and conceptual foundations of the discipline of psychology
- Knowledge, understanding, and competence in the broad theoretical, scientific and conceptual foundations of the field of clinical psychology
- Knowledge, understanding, and competence in the practice of clinical psychology
- Knowledge, understanding, and competence in the conduct of psychological research
- Knowledge, understanding, and competencies in ethical reasoning and conduct for both the science and practice of clinical psychology
- Knowledge, understanding, and competence in cultural and individual diversity for both the science and practice of psychology
- Knowledge, understanding, and competence for the role of a professional clinical psychologist
CLINICAL PSYCHOLOGY PROGRAM
SAINT LOUIS UNIVERSITY

II. Overview

As part of its commitment to educating and training professional psychologists, the
Department of Psychology in the College of Arts and Sciences at Saint Louis University offers a
Doctor of Philosophy degree in clinical psychology. In recognition of its consistent quality and
excellence in the education and training of clinical psychologists, the clinical psychology
program has been accredited by the American Psychological Association since 1965. The most
recent APA accreditation site visit occurred in 2013, and the clinical psychology program was
awarded accreditation with the next accreditation site visit to be held in 2020. Questions related
to the program’s accredited status should be directed to the Commission on Accreditation:
Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington, DC 20002
Phone: (202) 336-5979/Email: apaaccred@apa.org
Web: www.apa.org/ed/accreditation

The clinical psychology program at Saint Louis University is designed to educate and
train students to become competent and ethical scientist-practitioners who are capable of
functioning across a wide range of environments with diverse populations, problems, and
approaches. Our faculty are committed to developing diverse training opportunities by seeking
and obtaining extramural funding. Students working on successfully funded projects have had
the opportunity to be involved with nationally recognized programs of research. In addition, the
clinical psychology program offers a joint Ph.D. in clinical psychology and Masters of Public
Health.

Students are trained in a scientist-practitioner approach to clinical psychology which
values breadth, depth and integration of clinical practice and research training. Students develop
a working, integrated knowledge of the general discipline of psychology and the field of clinical
psychology through broad-based and in-depth coursework, research training and supervised
clinical experiences with faculty representing a variety of interests, theoretical orientations and
approaches. The foundation of the clinical program is a supportive learning environment in
which faculty and students work collaboratively and responsibly to promote individual and social
change through both the science and practice of clinical psychology. The education and training
of clinical psychologists at Saint Louis University is enhanced by our commitment to cultural
diversity and respect for individual differences.

The Department of Psychology’s three graduate programs—clinical, experimental and
industrial/organizational psychology—work together to educate and train psychologists for careers
in academic and research-based environments, professional practice, consultation and teaching
through an integrated curriculum of coursework, research training, and supervised practica.
Located in Shannon Hall, these graduate programs are supported by a variety of laboratories and
training facilities. The Psychological Services Center serves as a primary site for supervised
clinical experience in the delivery of psychological services. The clinical program also has
established collaborative relationships with Saint Louis University Health Sciences Center and
with various hospitals, agencies, institutions and private practitioners throughout the community
to provide advanced training and experience in the science and practice of clinical psychology.
III. PHILOSOPHY OF TRAINING, GUIDING PRINCIPLES and VALUES

In support of its mission, the clinical psychology program is guided by the following philosophy of training, guiding principles and values:

A. The Scientist-Practitioner Model of Training
   1. The Value of Science
      The clinical program is based on a recognition, understanding and commitment to
      the scientific foundations of the discipline. Students and faculty support and
      contribute to the science of clinical psychology through the discovery and
      dissemination of knowledge.
   2. The Value of Practice
      The clinical program is based on a recognition, understanding and commitment to
      the applied foundations of the discipline of psychology. Students and faculty
      support and contribute to the practice of clinical psychology through the
      application of psychological principles to address problems within individuals,
      groups, communities and society.
   3. Integration of Science and Practice
      Education and training in the clinical psychology program is based on integration
      of the science and practice of clinical psychology through the scientist-practitioner
      model of training. The clinical program promotes the integration of science and
      practice; it works to see that the science of clinical psychology is informed by the
      practice of clinical psychology and that the practice of clinical psychology is
      informed by the science of clinical psychology. The clinical program values the
      science and practice of clinical psychology as two aspects of one integrated,
      integral whole.

B. Broad and General Preparation of Entry Level Clinical Psychologists
   Doctoral education and training for the entry-level scientist-practitioner of clinical
   psychology requires an integration of the existing and evolving body of knowledge,
   skills, and competencies of clinical psychology with the broad theoretical and scientific
   foundations of the general discipline of psychology. The scientist-practitioner model of
   training values breadth and depth in the conceptual, theoretical, methodological,
   empirical, historical, sociocultural, and technical foundations of the discipline of
   psychology and the field of clinical psychology. Education and training for the science
   and practice of clinical psychology is a developmental process involving both
   experiential and academic learning.

C. Commitment to Excellence
   The clinical program is committed to excellence. In support of this commitment, the
   clinical program engages in regular, ongoing self-assessment and conducts periodic,
   systematic, evaluative reviews of the program’s mission, goals, objectives, and
   processes. The clinical program conforms to the guidelines and principles of
   accreditation by the American Psychological Association to ensure consistent quality and
   excellence in the education and training of clinical psychologists.
D. Contribution to the Catholic, Jesuit Identity of Saint Louis University
The clinical program contributes to the Catholic, Jesuit identity of the University by preparing clinical psychologists who provide service to others and who are effective leaders of social change based on ethical values and principles.

E. Respect for and Understanding of Cultural and Individual Diversity
The clinical program supports the recognition and understanding of the role of cultural and individual differences as they relate to both the science and the practice of psychology. The clinical psychology program is committed to establishing and maintaining a supportive and encouraging learning environment for students and faculty representing a diversity of ethnic, racial and personal backgrounds. The program reflects its commitment to diversity in its policies for recruitment, retention and development of students and faculty.

F. Supportive, Respectful Learning Environment
Interactions between and within faculty, students and staff are based on mutual respect, courtesy, and collegiality. Evaluation methods and procedures are clearly articulated. The clinical program utilizes a participatory, democratic model of governance which strives to balance the needs, rights, and interests of individuals with those of the program to accomplish its mission, goals and objectives.
IV. GOALS, OBJECTIVES AND CURRICULUM PLAN

The objectives of the clinical psychology program at Saint Louis University are to educate and train students to become competent and ethical scientist-practitioners of clinical psychology. In view of the changes that have occurred in health care over the past decade, it is evident that a graduate training program in clinical psychology has a responsibility to educate and train professionals who are capable of developing and changing along with the profession. In recognition of this responsibility, we are committed to the education and training of clinical psychologists who are capable of functioning within a wide range of environments and with diverse populations.

Students are educated and trained in a scientist-practitioner approach to clinical psychology which values breadth, depth and integration of clinical practice and research training. Students develop a working, integrated knowledge of the general discipline of psychology and the field of clinical psychology through broad-based and in-depth coursework. Students obtain education and training for conducting psychological research through academic coursework, participation on a research team, and mentoring from faculty researchers. Students acquire the knowledge, skills and competencies for clinical practice through academic coursework, clinical practica and supervised clinical experiences including clinical vertical team associated with the university Psychological Services Center, external clerkships, and clinical internship. Through a comprehensive and integrated curriculum, students acquire the knowledge and skills needed for the professional responsibilities of a culturally-competent and ethically sound clinical psychologist.

Various university, graduate education, department and program requirements are integrated to form a curriculum plan which reflects our broad-based, scientist-practitioner model of education and training. The objectives of the clinical program and the curriculum plan designed to achieve those objectives are stated below. Through the integrated, sequential curriculum plan which is graded in complexity, students will achieve the following objectives:


Students will acquire and demonstrate understanding of and competence in the breadth of scientific psychology, its history of thought and development, its research methods, and its applications. To achieve this end, students shall be exposed to the broad and current theoretical, empirical, conceptual, methodological, sociocultural, historical, and technical foundations of the general discipline of psychology, including: 1) the biological aspects of behavior; 2) the cognitive-affective aspects of behavior; 3) the social aspects of behavior; 4) cultural diversity and individual differences; 5) the history and systems of psychology; 6) psychological measurement; 7) research methodology; and 8) techniques of data analysis. Additionally, students will acquire and demonstrate understanding of and competence in the current body of scientific, methodological and theoretical knowledge of human development as it relates to clinical psychology. To achieve these objectives, the following educational experiences are required:
**Biological Aspects of Behavior (3 hours).** Each student must successfully complete a 3 credit hour, graduate-level, broad-based survey course in the biological aspects of behavior. Courses that meet this requirement include:

- PSY-5130: Advanced Physiological Psychology
- PSY-5930: Fundamentals of Neuropsychology

**Cognitive-Affective Aspects of Behavior (3 hours).** Each student must successfully complete a 3 credit hour, graduate-level, broad-based survey course in the cognitive-affective aspects of behavior. To satisfy this requirement, students must complete the following course:

- PSY-5120: Cognition

**Social Aspects of Behavior (3 hours).** Each student must successfully complete a 3 credit hour, graduate-level, broad-based survey course in the biological aspects of behavior. To satisfy this requirement, students must complete the following course:

- PSY-5300: Advanced Social Psychology

**Developmental Aspects of Behavior (3 hours).** Each student must complete a three-credit hour, graduate-level course in the developmental aspects of behavior. To satisfy this requirement, students must complete the following course:

- PSY-5220: Lifespan Developmental Clinical Psychology

**Cultural Diversity and Individual Differences (3 hours).** Each student must satisfactorily complete a graduate, three-credit-hour course in cultural diversity and individual differences. This requirement is met through completion of:

- PSY-6030: Human Diversity

**History and Systems of Psychology (3 hours).** Each student must complete a 3 credit hour, graduate-level course in the history and systems of psychology. This requirement is met through completion of:

- PSY-5100: History of Psychology

**Psychological Measurement.** Each student in the clinical psychology program will acquire and demonstrate understanding and competence in psychological measurement. Education and training in psychological measurement are provided in the required Clinical Assessment I and II courses (PSY-503 and 504). Additionally, students are exposed to the existing and evolving body of knowledge, skills and competencies in psychological measurement as they relate to individual differences, dysfunctional behavior and psychopathology and to the process and outcome of psychological interventions in the required core clinical graduate courses in Psychopathology and Clinical Interventions, respectively. Additionally, students are exposed to the current and evolving body of knowledge in psychological measurement through the required completion of six-hours in research methodology which may be met through completion of PSY-508 Advanced Quantitative Research Methods and PSY-509 Psychometric Theory. Additionally, students obtain training in the application of psychological measurement principles through completion of the thesis and dissertation. In addition, students have the option of earning a concentration in Quantitative Methods in the Behavioral Sciences by completion of two
additional courses in research methodology and/or statistics and by completion of a capstone project that entails application of their statistical and/or methodological knowledge in a career-consistent manner. Specific requirements for the concentration may be found in the concentration guidelines.

PSY-5090: Psychometric Theory

_Techniques of Data Analysis and Statistics (6 hours)._ Each student in the clinical psychology program must complete six credit hours of graduate-level coursework in statistics. To meet this requirement, the following courses in Psychology are offered, although graduate courses from other departments (e.g., Public Policy Studies, School of Public Health, Sociology) may be accepted with prior written permission from the student’s advisor and the Director of the Clinical Psychology Program:

- PSY-5790: Applied Univariate Statistics in Behavioral Science
- PSY-6500: Applied Multivariable and Multivariate Statistics in Behavioral Science

_Research Methodology (6 hours)._ Each student in the clinical psychology program must complete six credit hours of graduate-level coursework in research methodology. The Department of Psychology offers the following courses to meet this requirement, although graduate courses from other departments (e.g., Public Policy Studies, Research Methodology) may be accepted with prior written permission from the student’s advisor and the Director of the Clinical Psychology Program:

- PSY-5080: Advanced Quantitative Research Methods
- PSY-5090: Psychometric Theory

_B. Knowledge, Understanding, and Competence in the Broad Theoretical, Scientific, and Conceptual Foundations of the Field of Clinical Psychology_

Students will acquire and demonstrate knowledge understanding of and competence in the broad theoretical, empirical, conceptual, methodological, sociocultural, historical, and technical foundations of the field of clinical psychology, including: 1) clinical assessment and diagnosis; 2) psychopathology and dysfunctional behavior; 3) and interventions, consultation, and supervision. To achieve these objectives, the following education and training experiences are offered:

_Clinal Assessment (6 hours)._ Students in the clinical psychology graduate training program are required to complete six graduate credit hours of coursework in the foundations of clinical assessment. This requirement is met by completion of three credit hours of each of the following two courses:

- PSY-5030: Clinical Assessment I
- PSY-5040: Clinical Assessment II

_Psychopathology (3 hours)._ Each clinical psychology graduate student is required to complete three graduate credit hours in the foundations of psychopathology. This requirement is met by completion of the following course:

- PSY-5520: Psychopathology
Clinical Interventions (3 hours). Each student in the clinical psychology program must complete three graduate credit hours in the foundations of clinical interventions. This requirement is met by completion of following courses:
PSY-5610: Clinical Interventions

C. Knowledge, Understanding, and Competence in the Conduct of Psychological Research
Students will acquire and demonstrate knowledge and understanding of and competence in the conduct of psychological research. Students will demonstrate their ability to conduct a review of the literature, design a research study, analyze the findings, and engage in scholarly discourse about the study. To meet these objectives, the following courses and training experiences are required:

Research Vertical Team (0 hours). Each clinical psychology student must participate in a Research Vertical Team during each Fall, Spring and Summer semester. This requirement is met by registering for zero credit hours each semester in the following sequence:
PSY-5860: Clinical Research I (Fall, Spring, Summer of 1st year)
PSY-5870: Clinical Research II (Fall, Spring, Summer of 2nd year)
PSY-6860: Advanced Clinical Research I (Fall, Spring, Summer of 3rd year)
PSY-6870: Advanced Clinical Research II (Fall, Spring, Summer of 4th year and beyond)

Thesis Research (6 hours). Each student in the clinical program must complete a thesis in accordance with policies of The Graduate School in partial fulfillment of the requirements for the Masters of Science (Research) degree. In addition to the thesis, this requirement is met by completion of 6 graduate credit hours of:
PSY-5990: Thesis Research

Dissertation Research (12 hours). Each student in the clinical program must complete a dissertation in accordance with the policies of The Graduate School in partial fulfillment of the requirements of the Doctor of Philosophy degree. In addition to the dissertation, this requirement is met by completion of 12 graduate credit hours of:
PSY-6990: Dissertation Research

D. Knowledge, Understanding, and Competence in the Practice of Clinical Psychology
Students will acquire and demonstrate the skills, knowledge and competencies to function as a professional psychologist through supervised clinical experiences which provide training in various approaches to conducting psychological assessments, diagnosing mental disorders, defining dysfunctional behaviors, and formulating and implementing intervention strategies (including training in empirically supported procedures). Qualified professionals will provide supervised clinical training in the delivery of psychological services to individuals, couples and families representing a variety of problems at various developmental stages (i.e., children, adolescents, adults). The sequencing, duration, nature and content of these experiences will be appropriate for and consistent with the immediate and long-term training goals and objectives of the program and the student. Clinical competencies to be achieved and demonstrated are
identified in the document titled Core Clinical Competencies (see Appendix B). To achieve these clinical competencies goals, the following clinical training experiences are provided:

**Practicum in Clinical Assessment (0 hours)**. In conjunction with the core two-semester sequence in clinical assessment, students are required to complete two semesters of practicum in the selection, administration, scoring and interpretation of psychological tests and measures. Students should register for zero credit hours as follows:
- PSY-5800: Clinical Assessment Practicum I (Fall semester, in conjunction with PSY-5030: Clinical Assessment I)
- PSY-5830: Clinical Assessment Practicum II (Spring semester, in conjunction with PSY-5040: Clinical Assessment II)

**Practicum in Psychopathology (0 hours)**. In conjunction with the psychopathology graduate course (PSY-5520), students are required to complete one semester of practicum in the identification and conceptualization of mental disorders and dysfunctional behavior. Students should register for zero credit hours for the following course:
- PSY-5880-01: Psychopathology Practicum (Fall semester, in conjunction with PSY-5520: Psychopathology)

**Practicum in Clinical Interventions (0 hours)**. In conjunction with the clinical interventions graduate course (PSY-5610), students are required to complete one semester of practicum in the techniques and methods of psychotherapeutic interventions. Students should register for zero credit hours as follows:
- PSY-6880-01: Psychotherapy Practicum (Spring semester, in conjunction with PSY-5610: Clinical Interventions)

**Clinical Vertical Team (12 hours)**. Students are required to participate in Clinical Vertical Team (CVT) during each Fall, Spring and Summer semester in residence. Each student is required to successfully complete 12 graduate credit hours of Clinical Practicum (i.e., CVT). This requirement is met by registering for zero credit hours each Fall and Spring semester and for 3 credit hours during the Summer semester in the following sequence:
- PSY-5810: Clinical Practicum I (1st year; 0 hours Fall, 0 hours Spring, 3 hours Summer)
- PSY-5820: Clinical Practicum II (2nd year; 0 hours Fall, 0 hours Spring, 3 hours Summer)
- PSY-6810: Clinical Practicum III (3rd year; 0 hours Fall, 0 hours Spring, 3 hours Summer)
- PSY-6820: Clinical Practicum IV (4th year and beyond; 0 hours Fall, 0 hours Spring, 3 hours Summer)

**Clerkships in Clinical Psychology (0 hours)**. Students may elect to obtain additional supervised training in research, clinical practice or teaching through clerkships established through collaborative arrangements with various agencies, facilities, organizations and individuals; teaching opportunities are also available in the Department of Psychology and the School for Professional Studies at Saint Louis University. No student may be engaged in the
delivery of psychological services outside the Psychological Services Center without permission of his/her advisor and the DCT and without registering for clerkship hours.

PSY-5890-01: Clerkship in Clinical Psychology
PSY-5890-02: Clerkship in Clinical Child Psychology
PSY-5890-03: Clerkship in Health, Neuropsychology and Trauma
PSY-5890-04: Clerkship in Community Psychology
PSY-5890-05: Clerkship in Academic Psychology

**Internship in Clinical Psychology (0 hours).** Each student must complete an APA-approved internship in clinical psychology. Students are strongly encouraged, but not required, to complete written and oral preliminary examinations and to have an approved dissertation proposal prior to beginning internship. The student must receive approval of readiness for internship from the clinical faculty through the Director of the Clinical Psychology Program. Students must register for zero credit hours for each Fall, Spring and Summer semester during their internship as follows:

PSY-6890: Internship in Clinical Psychology

**E. Knowledge, Understanding, and Competence in Ethical Reasoning for both the Science and Practice of Clinical Psychology**

Students will acquire and demonstrate knowledge and understanding of and competence in the standards of ethical conduct and reasoning in both the science and practice of clinical psychology. Students must demonstrate the ability to appropriately identify ethical issues and follow a course of action consistent with the ethical standards of the American Psychological Association. Education and training of ethical standards and issues is integrated throughout the curriculum and supervised training experiences are provided through Clinical Vertical Team and Research Vertical Team. Students also are provided with the theoretical, scientific and conceptual foundations of professional ethics through completion of a three credit hour graduate course (which also meets the requirements for Objective H, Education and Training in the Role of a Professional Psychologist) as follows:

**Ethics.** Each clinical psychology student is required to complete three graduate credit hours in ethics and professional issues for clinical practice and research. This requirement is met by completion of:

PSY-6800: Ethics, Supervision and Consultation

**F. Knowledge, Understanding, and Competence in Cultural and Individual Diversity for both the Science and Practice of Clinical Psychology**

Students will acquire and demonstrate knowledge and understanding of and competence with the role of cultural and individual diversity in psychological phenomena as they relate to the science and practice of clinical psychology. As noted in Objective A, students partially achieve this objective by the required completion of a three-credit-hour graduate course in Human Diversity (PSY-603). However, education and training in cultural and individual diversity is integrated throughout the curriculum. For example, the roles of cultural and individual diversity in clinical assessment, psychopathology and clinical interventions are incorporated into each of the respective core clinical courses and many of the specialized elective courses. Supervised clinical experience with culturally diverse populations are provided through Clinical Vertical
Team and clinically related clerkships. The scientific study of the role of culture, ethnicity, gender and individual differences are also examined and addressed through Research Vertical Team.

**G. Knowledge, Understanding, and Competence in the Role of a Professional Psychologist**

Students will acquire and demonstrate knowledge and understanding of and competence in their professional conduct as scientists and practitioners of clinical psychology. Students will acquire and demonstrate an understanding of professional issues, and will acquire and demonstrate an attitude of commitment to life-long learning, scholarly inquiry, and professional problem-solving as psychologists in the context of an evolving body of scientific and professional knowledge. Students will also acquire and demonstrate personal adjustment (i.e., personal and interpersonal functioning) for the role of a professional psychologist including: 1) the ability to seek and use supervision and feedback; 2) the ability to effectively and appropriately recognize, understand and utilize personal reactions and feelings; 3) assuming responsibility for the effects of one’s actions and behaviors on others; 4) recognition, understanding and appropriately managing personal biases; and 5) freedom from personal problems that significantly interfere with and limit the student’s potential for effective and responsible functioning as a psychologist. Additionally, students must demonstrate professionally responsible behavior, including adherence to University, clinic and program policies; punctuality of work assignments; professional ethics; proper record keeping, and appropriate professional relationships with peers and supervisors.

Education and training for the role of a professional psychologist is integrated throughout the curriculum. For example, students learn the professional role of a scientist through exposure and modeling on Research Vertical Team, Research Seminar, and completion of the thesis and dissertation. Students learn the professional role of a clinical practitioner through exposure and modeling on practica, Clinical Vertical Team, clerkships and internship. Students also are provided with the theoretical, scientific and conceptual foundations of professional issues in psychology through the following course (which also meets the requirements for Objective F. Education and Training in Ethical Reasoning):

*Professional Issues.* Each clinical psychology student is required to complete three graduate credit hours in ethics, supervision, consultation and professional issues for clinical practice and research. This requirement is met by completion of:

PSY-680): Ethics, Supervision and Consultation

**H. Areas of Concentration**

Although there are no formal areas of predoctoral specialization in the clinical psychology graduate training program, students may elect to focus their education and training in one of the following areas of concentration—Clinical Child Psychology, Health Psychology, Neuropsychology, and Trauma. Students interested in pursing one of these areas of concentration should work with their advisor to establish an individualized curriculum and training plan.

Clinical Child Psychology
In addition to the core and required courses, students interested in clinical child psychology should also consider taking courses in Clinical Child Assessment, Clinical Child Interventions, Couples and Family Therapy, and Cognitive Behavior Therapy. Additionally, external placements involving pediatric, child and adolescent assessment, consultation and intervention are suggested.

**Health Psychology (Weight and Eating, Addictions, Sports Psychology)**

Students interested in concentrating their education and training in health psychology should consider taking courses in the following areas as they are available: Clinical Health Psychology, Cognitive Behavior Therapy, Addictions, and Sports Psychology, as well as courses in Public Health (from SLU School of Public Health). External placements in the application of psychological services to enhance physical well-being and health are suggested.

**Clinical Neuropsychology**

Students may wish to concentrate their graduate studies and training in the field of clinical neuropsychology by taking coursework in the Fundamentals of Neuropsychology, Neuropsychological Assessment, Memory and Cognition, Neuroscience and Psychopharmacology. Supervised clinical experience in neuropsychological assessment, consultation and treatment is offered through various external placements.

**Trauma**

Students interested in working in the field of trauma are encouraged to take graduate coursework in the Psychology of Trauma, Health Psychology, Cognitive Behavior Therapy, Addictions, and Clinical Health Psychology are offered. Additional supervised experiences with persons who have experienced trauma are suggested.

**DEGREE REQUIREMENTS**

Each student must comply with Saint Louis University Graduate Education regulations regarding the Masters of Science (Research) and Doctor of Philosophy degrees (see the Graduate Education Catalog). Students entering the program without a master’s degree in psychology must complete the requirements for the Masters of Science (Research) degree at Saint Louis University before official admission and matriculation to the Ph.D. program. We do not offer a terminal masters degree. It is anticipated that each student admitted to the clinical psychology program without an approved masters degree will successfully complete the M.S.(R) and Ph.D. degrees. Students who have obtained an approved masters degree in psychology prior to matriculation in the clinical program are admitted directly to the Ph.D. program. The general program requirements include:

A. **Masters of Science (Research)**

Each student must successfully complete the requirements of Saint Louis University Graduate Education for the Masters of Science (Research) degree if they have not yet obtained an approved masters degree prior to matriculation. These requirements include:
1. **Coursework:** Each student must complete a total of 36 credit hours which includes 30 credit hours of academic coursework and 6 credit hours of thesis research, including:
   - Nine credit hours of statistics and research methods (9)
   - PSY-5030: Clinical Assessment I (3)
   - PSY-5040: Clinical Assessment II (3)
   - PSY-5520: Psychopathology (3)
   - PSY-5610: Clinical Interventions (3)
   - PSY-6800: Ethics, Supervision and Consultation (3)
   - PSY-5810: Clinical Practicum I (3)
   - PSY-5820: Clinical Practicum II (3)
   - PSY-5860: Clinical Research I (0)
   - PSY-5870: Clinical Research II (0)
   - PSY-5800: Clinical Assessment Practicum I (0)
   - PSY-5830: Clinical Assessment Practicum II (0)
   - PSY-5880: Psychopathology Practicum (0)
   - PSY-6880: Clinical Interventions Practicum (0)
   - PSY-5990: Thesis Research (6)

2. **Thesis:** Each student in the clinical program must complete a thesis in accordance with the requirements of SLU Graduate Education. The student is required to complete 6 credit hours of thesis research (PSY-5990). The thesis committee must consist of three members, at least two of whom are psychology faculty (Clinical, Experimental or I/O) who have Graduate Faculty status. Appointment of a third committee member who does not have Graduate Faculty status requires permission of the Associate Vice President for Graduate Education. The thesis must be approved in writing by all members of the thesis committee.

   Students entering the clinical psychology program with a nonthesis masters degree are required to complete a post-masters degree research project under the supervision of an approved faculty member in the Department of Psychology. The completed research project requires approval of the faculty supervisor.

3. **Advancement to Candidacy:** Each student seeking a Masters of Science (Research) degree must: 1) submit to the College of Arts and Sciences Associate Dean for Graduate Education a thesis outline approved by their thesis committee (must have IRB approval if the research involves human participants); 2) submit to the Associate Dean for Graduate Studies a completed Application for Degree form; 3) request and receive from Associate Dean for Graduate Studies candidacy papers; and 4) have the candidacy papers signed by the Department Chair. The thesis outline should be submitted as soon as possible after the student’s thesis proposal has been approved by committee. Candidacy forms should be completed in their final academic term of study for the masters degree by the date set by the office of the College of Arts and Sciences Associate Dean for Graduate Education.

4. **Masters Comprehensive Oral Examination:** Each student must pass an oral examination in accordance with the requirements of SLU Graduate Education prior to advancement to candidacy for the Masters of Science (Research) degree. The student should register for zero credit hours of PSY-5950: Special Study for Exams during the semester in
which the masters oral examination will be held. The examination committee typically (but not necessarily) is the same as the thesis committee; however, the committee must consist of at least three members, two of whom are clinical psychology faculty who have Graduate Faculty status. Appointment of any committee member who does not have Graduate Faculty status requires permission of the Associate Vice President for Graduate Education. The exam should be scheduled for 90 minutes; however, the exam is to last no less than 60 minutes nor more than 90 minutes. The student will be examined over: 1) the contents of the thesis; 2) research methodology, statistics and psychological measurement; 3) the theoretical, scientific and conceptual foundations of the field of clinical psychology (i.e., clinical assessment, psychopathology, clinical interventions); and 4) ethics and professional issues. Students will also be evaluated in terms of their ability to integrate within each of the clinical core areas (i.e., clinical assessment, psychopathology, clinical interventions, ethics, professional issues) which serves as a diagnostic indicator of readiness for the written preliminary examination. The committee members communicate their evaluations of the student’s performance to the Associate Vice President for Graduate Education individually in writing. If the student fails the examination, the examination may be repeated, but only once, provided that a second exam is recommended by the committee and is approved by the Associate Vice President for Graduate Education.

B. Doctor of Philosophy Degree (Ph.D.)

1. Petition for Acceptance for Doctoral Studies: Upon completion of the Masters of Science degree, each student must petition SLU Graduate Education for acceptance and enrollment in the Doctor of Philosophy degree program. These forms are available through the Graduate Education Catalog.

2. Coursework: In addition to the coursework required for the Masters of Science (Research) degree, each student must complete a total of 54 graduate credit hours including 42 hours of coursework and 12 hours of dissertation research:

   Three graduate credit hours of Research Methods/Statistics (3)
   - Total of 12 hours which must include 6 hours of Research Methods and 6 hours of Statistics
   PSY-5100: History of Psychology (3)
   PSY-6030: Human Diversity (3)
   PSY-5130 or 5930: Biological Aspects of Behavior (3)
   PSY-5120: Cognitive-Affective Bases of Behavior (3)
   PSY-5300: Social Aspects of Behavior (3)
   PSY-5220: Lifespan Developmental Clinical Psychology (3)
   PSY-6810: Clinical Practicum III (3)
   PSY-6820: Clinical Practicum IV (3)
   PSY-6860: Advanced Clinical Research I (0)
   PSY-6870: Advanced Clinical Research II (0)
   PSY-6890: Internship in Clinical Psychology (0)
   Electives (15)
3. Written Preliminary Examination. Following completion of the master’s degree, each student must pass a written examination in accordance with the requirements of SLU Graduate Education. The student is to register for zero credit hours of PSY-6950: Special Study for Exams during the semester in which they will take the written preliminary examination. The written preliminary examination tests the student’s comprehension and integration of knowledge in clinical psychology. The examination is administered and scored by the clinical faculty. The student is required to successfully answer two questions in each of the following areas--clinical assessment, psychopathology, intervention. The student must successfully answer one question in each of the following areas--ethics, professional issues. A student who fails one or two areas must successfully pass a second examination over the areas previously failed. A student who fails more than two areas must successfully pass each of the five areas on a second examination. If the student fails any area on the second examination, the student is no longer considered in good academic standing in the clinical program and will be dismissed from the clinical program.

4. Oral Preliminary Examination. Each student must pass an oral examination in accordance with the requirements of SLU Graduate Education prior to advancement to candidacy for the Doctor of Philosophy degree. The examination committee must consist of four members, at least three of whom are psychology faculty who have Graduate Faculty status. Appointment of a fourth committee member who does not have Graduate Faculty status requires permission of the Associate Vice President for Graduate Education. One of the committee members must be a full time clinical faculty member. The examination is to last no less than one hour nor longer than one and a half hours. During the examination, the student will be examined over the dissertation proposal/prospectus (consisting of a statement of the problem, literature review, and the research design prepared for the investigation). The examination is designed to assess the student’s ability to integrate knowledge across the discipline of psychology.

All members of the oral preliminary examination committee communicate their evaluations of the student’s performance to the Associate Vice President for Graduate Education individually in writing. A student receiving two or more unfavorable evaluations from the examiners fails the examination. If the student fails the examination, the examination may be repeated, but only once, and ordinarily the second attempt should not be scheduled within the same academic term as the first. The committee that administered the first exam will also administer the second exam under ordinary circumstances. The chairperson of the examination committee must submit a written request for a second exam to the Associate Vice President for Graduate Education well in advance of the desired examination date. Should the outcome of the second examination be unsatisfactory, a third exam is rarely approved, and is considered by the Associate Vice President for Graduate Education only upon the unanimous recommendation of the examining committee.

5. Advancement to Candidacy. After successful completion of both the written and oral preliminary examinations and prior to initiating the substantive work of the dissertation, each student seeking the Ph.D. degree in clinical psychology must: 1) submit to the Associate Vice President for Graduate Education a formal outline of the dissertation proposal approved by their dissertation committee (must have IRB approval if research involves human participants);
2) submit to the Associate Vice President for Graduate Education a completed Application for Degree form; 3) request and receive candidacy papers from Graduate Education’s doctoral candidacy advisor; and 4) have the candidacy papers signed by the Department Chair.

6. Internship in Clinical Psychology. Each student must complete an APA-approved internship in clinical psychology. Students are required to successfully complete written and oral preliminary examinations and have an approved dissertation proposal prior to beginning internship. The student must receive approval of readiness for internship from the clinical faculty through the Director of the Clinical Psychology Program. The student must register for zero credit hours of PSY-6890: Internship in Clinical Psychology for each Fall, Spring and Summer semester during their internship.

7. Dissertation: Each student in the clinical program must complete a dissertation in accordance with the requirements of The Graduate School. The student must submit and defend an original and independent research investigation. Each student is required to complete 12 credit hours of dissertation research (PSY-6990). The dissertation committee must consist of three members, at least two of whom are psychology faculty (Clinical, Experimental, I/O) who have Graduate Faculty status. Appointment of a third committee member who does not have Graduate Faculty status requires permission of the Associate Vice President for Graduate Education. The dissertation must be approved by all members of the dissertation committee as indicated by their signature on the formal dissertation outline submitted to Graduate Education.

8. Public Presentation and Oral Defense of the Dissertation. Each student in the clinical program is required to make a public, oral presentation and defense of the dissertation. The presentation and defense are scheduled after the members of the dissertation committee have approved the general content of the dissertation.
V. RESOURCES

To achieve its education and training goals, the clinical psychology program requires resources of appropriate quality, sufficiency and stability. Resources for the clinical program are provided by the Department of Psychology, the Colleges of Arts and Sciences, and Graduate Education and include:

I. Faculty and Staff
   A. Core Clinical Faculty
      The core clinical faculty consists of full-time, tenured/tenure-track faculty in the Department of Psychology who meet the professional standards for specialization in clinical psychology including an earned doctorate from an APA-accredited clinical psychology program and a valid Missouri license to practice psychology. Core clinical faculty share responsibility for development and implementation of the clinical program’s goals, objectives and curriculum plan. Core clinical faculty represent a diversity of theoretical orientations and approaches, and serve as mentors and role models for students. For the current academic year, the core clinical faculty are:

      **Kira H. Banks, Ph.D.** (University of Michigan)
      Assistant Professor of Psychology
      Research and clinical interests: Diversity; minority mental health; discrimination and mental health; intergroup relations; depressive symptomatology
      Teaching: Human Diversity; Research Vertical Team; Clinical Vertical Team

      **Phyllis Terry Friedman, Ph.D.** (California School of Professional Psychology)
      Clinical Professor of Psychology
      Administrative responsibilities: Director of the Psychological Services Center
      Teaching: Clinical Vertical Team

      **Annie Garner, Ph.D.** (University of Alabama-Birmingham)
      Assistant Professor of Psychology
      Research and clinical interests: Clinical child psychology; Attention Deficit Hyperactivity Disorder (ADHD); ADHD and driving; ADHD and adolescence; ADHD Transition into adulthood; ADHD nosology and assessment; sluggish cognitive tempo (SCT).
      Teaching: Lifespan Developmental Clinical Psychology; Clinical Child Assessment; Clinical Child Interventions; Research Vertical Team, Clinical Vertical Team

      **Jeffrey Gfeller, Ph.D.** (Ohio University)
      Professor of Psychology
      Associate Professor of Neuorology and Psychiatry
      Administrative responsibilities: Chair, Department of Psychology
Research and clinical interests: Clinical neuropsychology (age-related changes in cognition and cognitive sequelae of mild head injury), hypnosis, neuropsychological assessment, solution-focused therapy, behavioral medicine and health psychology.
Teaching: Clinical Assessment I; Neuropsychological Assessment; Fundamentals of Neuropsychology; Research Vertical Team

Paul J. Handal, Ph.D. (Saint Louis University)
Professor of Psychology
Research and clinical interests: Community psychology and primary prevention; psychotherapy outcome; religion and mental health, death anxiety, family conflict and adjustment.
Teaching: Ethics and Professional Issues; Clinical Vertical Team; Research Vertical Team

David A. S. Kaufman, Ph.D. (University of Florida)
Assistant Professor of Psychology
Administrative responsibilities: Coordinator, Predoctoral Internships
Research and clinical interests: Clinical neuropsychology; attention and cognitive flexibility; electrophysiology; neuropsychological effects of traumatic brain injury and aging.
Teaching: Neuropsychological Assessment; Fundamentals of Neuropsychology; Research Vertical Team, Clinical Vertical Team

Michael J. Ross, Ph.D., ABPP (University of Missouri-Columbia)
Professor of Psychology
Professor of Neurology and Psychiatry
Administrative responsibilities: Director, Clinical Psychology Program; Coordinator, Clinical Psychology Admissions
Research and clinical interests: Sports psychology; rehabilitation psychology; rehabilitation of athletes following injury; social cognition in depression and anxiety; ethical beliefs and practices; professional issues.
Teaching: Clinical Interventions; Sport Psychology; Clinical Vertical Team; Research Vertical Team

Jillon S. Vander Wal, Ph.D. (University of Missouri-Columbia)
Professor of Psychology
Research and clinical interests: The development, assessment, and treatment of disorders of eating and weight regulation; the assessment and promotion of health behavior change (sleep, obesity, smoking cessation, diabetes, hypertension, etc); evidence-based treatment of various forms of psychopathology, particularly disorders of eating, depression, and anxiety as well as the promotion of health behavior change.
Teaching: Cognitive Behavior Therapy; Psychometric Theory; Univariate Statistics, Clinical Vertical Team; Research Vertical Team
Terri L. Weaver, Ph.D. (Virginia Polytechnic Institute and State University)
Professor of Psychology
Research and clinical interests: Post-traumatic stress disorder (PTSD); psychological and physical sequelae of traumatic events, especially family violence and sexual assault; psychological impact of violence-related injury; treatment outcome research; mental health treatment with war-exposed refugee populations.
Teaching: Psychopathology; Psychology of Trauma; Clinical Vertical Team; Research Vertical Team

Jeremiah Weinstock, Ph.D. (University of Memphis)
Associate Professor of Psychology
Administrative responsibilities: Coordinator, Written Preliminary Examinations
Research and clinical interests: Addictions, including gambling, college student hazardous drinking, cocaine and opiate dependence, interventions for addictions including motivational interviewing, contingency management, and cognitive behavior therapy; exercise adherence, health behavior change; sports psychology including performance enhancement and player assessment.
Teaching: Addictions Interventions; Research Vertical Team; Clinical Vertical Team; Clinical Health Psychology

2. Additional Clinical Faculty
Full and part-time, nontenure-track clinical faculty contribute to the clinical psychology program through teaching, research, supervision and/or administration. For the current academic year, these additional clinical faculty include:

Chammie Austin, Ph.D. (University of Kentucky)
Adjunct Instructor and Clinical Vertical Team Supervisor

Patrice Pye, Ph.D. (Saint Louis University)
Clinical Vertical Team Supervisor

Honore Hughes, Ph.D. (University of South Carolina)
Emeritus Professor of Psychology

3. Affiliated Faculty
Full-time, tenured/tenure track faculty in the Department of Psychology contribute significantly to the clinical program through mentoring and committee membership for theses and dissertations, teaching, and serving on masters and doctoral oral examination committees. The following members of the Department of Psychology hold Graduate Faculty appointments and provide contributions to the clinical program:

A. Michael Anch, Ph.D. (Saint Louis University)
Associate Professor, Cognition and Neuroscience
Research interests: Sleep; sleep disorders; nutrition and sleep; pharmacology of sleep;
biological rhythms; shift work; brain-behavior relationships.

**Tony Buchanan, Ph.D.** (University of Oklahoma)
Associate Professor, Cognition and Neuroscience
Research interests: Cognitive neuroscience of stress; cognitive, psychophysiological, and neuroimaging studies of stress and the effects of stress on memory processes.

**Eddie M. Clark, Ph.D.** (Ohio State University)
Professor, Social Psychology
Research Interests: Close relationships (relationship satisfaction and commitment); health psychology (social psychological aspects of weight control and smoking); attitudes and persuasion (health-related communications and the effects of advertising on attitudes).

**Richard D. Harvey, Ph.D.** (University of Kansas)
Associate Professor, Social and Industrial Organizational Psychology
Research Interests: Psychology of the stigmatized; self-enhancement/protection; attitude expression and measurement; intergroup relations; organizational attitudes; personnel selection; performance appraisal; organizational change and development.

**Dustin K. Jundt, Ph.D.** (Michigan State University)
Assistant Professor, Industrial Organizational Psychology
Research Interests: Individual and team adaptation to changing task demands; Self-regulated learning/skill acquisition; team processes and effectiveness.

**Ronald Kellogg, Ph.D.** (University of Colorado)
Professor, Cognitive Neuroscience Psychology
Research interests: Cognitive processes in writing; working memory in language production and thinking; conscious and unconscious processing in memory.

**Brenda Kirchhoff, Ph.D.** (Boston University)
Assistant Professor, Cognitive Neuroscience Psychology
Research Interests: Cognitive neuroscience of memory; functional and structural neuroimaging; aging; diabetes.

**Janet E. Kuebli, Ph.D.** (Emory University)
Associate Professor, Developmental Psychology
Research Interests: Social/emotional development; development of self understanding; role of family discourse processes in socialization; psychology of gender.

**Donna LaVoie, Ph.D.** (Claremont Graduate School)
Professor, Cognitive Neuroscience Psychology
Associate Dean, College of Arts and Sciences
Research Interests: Memory and cognition; memory function in healthy older adults; knowledge loss in Alzheimer’s disease.
Kimberly K. Powlishta  (Stanford University)  
Associate Professor, Developmental Psychology  
Research Interests: Children’s social-cognitive development; stereotyping and intergroup relations, gender role development, and gender segregation; adult development, aging, and Alzheimer’s disease.

Curt W. Rudolf, Ph.D. (Wayne State University)  
Assistant Professor, Industrial Organizational Psychology  
Research Interests: Work and aging; retirement; sustainable employability; stigma; personnel psychology; judgment and decision making.

Edward Sabin, Ph.D. (Saint Louis University)  
Associate Professor, Industrial Organizational Psychology  
Research Interests: Organizational planning, change and development; psychology of language and communication; human factors in aviation; interdisciplinary approaches to the humanities, social sciences and technologies.

Bryan Sokol, Ph.D. (University of British Columbia)  
Assistant Professor, Developmental Psychology  
Research Interests: Social understanding and developing theories of mind in middle childhood; moral psychology and empathy; social-emotional leaning programs; adolescent identity development; self and culture; history and systems of psychology.

Mindy Shoss, Ph.D. (University of Houston)  
Assistant Professor, Industrial Organizational Psychology  
Research Interests: Employee stress, coping, health, and productivity; organizational change and adaptive performance; personality; assessment.

Jill D. Waring, Ph.D. (Boston College)  
Assistant Professor of Psychology  
Research interests: Behavioral and neuroimaging studies of cognitive and affective Neuroscience, with relationship to aging and wellbeing.

Ruth H. Warner, Ph.D. (University of Kansas)  
Associate Professor, Social Psychology  
Research Interests: Social justice and psychological well-being; history of victimization; intergroup relations; social identity; prejudice and stereotyping.

Lisa Willoughby, Ph.D. (Saint Louis University)  
Associate Professor, Cognition and Neuroscience  
Research Interests: Normal and abnormal cognitive function; psychopharmacology, and health outcomes in older adults.

4. Clinical Psychology Program Support Staff  
   A. Administrative Assistant, PSC and Clinical Psychology Program—Cathy
Donaldson
B. Administrative Assistant, Department of Psychology—Beth Glauber
C. Senior Secretary, Department of Psychology—Ashlee Dorsey

B. Training Facilities

1. Psychological Services Center (PSC)

The Psychological Services Center of Saint Louis University serves as an on-campus site for supervised experience and training in the delivery of a full range of psychological services (i.e., assessment, intervention, consultation). As a comprehensive, University-based training clinic, the PSC offers both direct and indirect psychological services to the Greater St. Louis metropolitan community. All services are provided by clinical psychology graduate students under the supervision of Missouri-licensed, clinical psychology faculty. Services include psychological assessment and intervention for individuals, couples, families and groups, and are offered to children, adolescents and adults representing a wide range of problems.

The PSC is located on the first floor of Morrissey Hall and includes 12 rooms for psychological assessment and treatment, a play therapy room for children, the PSC Director/Assistant Director’s office, a computer room, a waiting room, Administrative Assistant office, and a student work room. Equipment for videotaping is installed in rooms designated for psychological assessment and treatment.

The Psychological Services Center functions in conjunction with Clinical Vertical Team (CVT). Students receive individual and group supervision for their psychological assessment, intervention and consultation training cases in the PSC through Clinical Vertical Team. Beginning in the first year of entrance in the clinical program, students are assigned to a Clinical Vertical Team under the supervision of a clinical faculty member. CVTs typically consist of five students representing various levels of training (e.g., 1st year, 2nd year, 3rd year, 4th year, 5th year). CVTs remain intact for three consecutive semesters (fall, spring, summer), after which students rotate to another CVT for their next year. Students typically are exposed to four different CVT supervisors during the course of their training.

Clinical Vertical Team serves as a primary structure for the integration of both the science and practice of clinical psychology. It serves a curricular function in providing a mechanism for the transmission of theoretical and empirical information related to clients seen through the Psychological Services Center. Additionally, CVT provides students with a unique opportunity for integration of their academic coursework and clinical experience. Under the mentoring of a clinical supervisor, students gradually assume increased clinical responsibilities and roles, from intakes to the administration and scoring of psychological tests to conducting full psychological assessments to psychotherapy and, if desired, to consultation and community-based activities. Clinical Vertical Teams also allow students to encounter ethical and professional issues on an ongoing basis, facilitating the integration of coursework with clinical experience.

2. Clerkships/External Placements

Opportunities for additional training and experience in clinical practice, research and teaching are available through graduate assistantships and clerkships either within the university or at external placements in the community. These assistantships and clerkships provide financial support for students, as well as opportunities for supervised teaching, research
and clinical experience. Graduate assistantships are funded positions which typically include a stipend, tuition remission, and health insurance benefits, and are provided to the Department of Psychology by the College of Arts and Sciences Graduate Education. External placements or clerkships are typically associated with contracts and grants obtained by the Psychological Services Center. Clinical students must obtain approval from their advisor and the Director of the Clinical Program for any placements or jobs (either paid or unpaid) related to psychology. In accordance with the guidelines established by SLU Graduate Education, no clinical student is allowed to work more than 20 hours per week.

**Teaching.** Graduate teaching assistantships provide students with an opportunity to work under the supervision of a faculty member involved in teaching at the undergraduate or graduate level. Graduate teaching assistants in the Department of Psychology often work with undergraduate General Psychology discussion groups, assist with undergraduate Statistics labs, and assist faculty in the preparation, administration and pedagogy of classes. Advanced clinical graduate students may obtain teaching experience by serving as the assistant for one of the graduate Assessment, Psychopathology or Clinical Intervention practica. Clinical students also may be eligible for paid teaching positions at the St. Louis College of Pharmacy and other institutions of higher learning in the greater St. Louis area.

**Research.** Students often obtain experience and training in research by serving as a research assistant for a faculty member within the Department of Psychology. Graduate research assistantships provide students with the opportunity to work with a faculty member on literature reviews, data collection, data analyses and manuscript preparation. Research positions have been available at such institutions as the St. Louis Behavioral Medicine Institute; the Department of Psychiatry at Saint Louis University Health Sciences Center; and the Missouri Institute of Mental Health.

**Clinical.** There are a number of opportunities for students to obtain supervised clinical experience through various contracts arranged by the Psychological Services Center. Clerkships in external agencies and facilities provide students with supervised experience and training in assessment, psychotherapy and consultation. Over the past several years, clinical students have been engaged in such psychological services as neuropsychological assessment, assessment of police officers, psychological evaluations of religious personnel, supportive psychotherapy with rehabilitation patients, disability determinations, and psychoeducational evaluations. Additional information on the external clinical training activities of the clinical students is available each year in the *Annual Report of the Psychological Services Center*.

**C. Student Financial Support**

At Saint Louis University, graduate tuition is $1,050 per credit hour for the 2015-16 academic year; consequently, the tuition costs for completion of a Ph.D. in clinical psychology at Saint Louis University are approximately $95,000. It is noted that students are typically provided financial support throughout their graduate education and training through research and teaching assistantships, external placements, and grants. For the 2015-16 academic year, each entering student will receive a minimum of 18 hours of tuition remission (valued at approximately $18,900) plus a stipend of $18,000 during their first year. It is anticipated (but not guaranteed) that each of these students subsequently will receive a minimum of 12 hours of tuition remission (valued at approximately $12,600) and a stipend of $9,000 during their second year in the
program. Beginning in the second year, students typically obtain paid training and experience through external placements and grants to supplement their income.

A number of sources exist to provide financial support to students in the clinical psychology program. The *Graduate Education Catalog* and the Office of Financial Aid can provide valuable information and assistance for financing your graduate education. Listed below are some of the various types of financial support for clinical psychology graduate students that have been available over the past several years. It is noted that the amounts, availability, terms and conditions of any types of financial support are likely to change during your time in the clinical program. Students are encouraged to frequently speak with their advisors, the Director of the Clinical Psychology Program, the Director of the Psychological Services Center and fellow students concerning the various funding opportunities, as well as obtain current information from various university resources (e.g., Graduate Education Catalog, Office of Financial Aid, etc.).

There are various types of financial support available to students in the clinical psychology program. Fellowships and assistantships are available through the Graduate School. A limited number of Presidential Fellowships ($26,000 stipend, 21 hours tuition remission, health benefits) and Diversity Fellowships ($22,750 stipend, 21 hours tuition remission, health benefits) have been available over the past several years. These fellowships are highly competitive across all programs and schools at Saint Louis University.

Several types of assistantships are available to the Department of Psychology by the College of Arts and Sciences. Graduate Research Assistantships (RA) are 11-month appointments and provide a stipend of $22,000, 21 hours of tuition remission, and health benefits. Graduate Teaching Assistantships (GTAs) are 9-month appointments and provide a stipend of $18,000 and 18 hours of tuition remission for 9 months. Both the RAs and GTAs allow students to obtain valuable research, teaching, and clinical experience working up to 20 hours per week with a faculty member. Half Graduate Assistantships are also available and the student works 10 hours per week and receives a stipend of $9,000 and 12 hours of tuition remission over 9 months. The clinical program also typically receives over forty tuition remission hours each academic year.

Normally, the maximum number of years that a graduate student may hold an assistantship is two years while pursuing a Master's degree and five years in a Doctoral program. In the case of a student pursuing the Master's and Doctoral degree in the same major field, eligibility for funding is also normally limited to five years. A third year of funding for the Master’s (thesis option only) or a sixth year for the PhD is possible provided funding through the department in question is available and the following criteria are met: 1) the student has advanced to Master’s or PhD candidacy, with an approved thesis or dissertation prospectus, and 2) the student’s advisor, the graduate program director and the chair of the department have all recommended the third or sixth year. The appeal should be made during the spring semester of the second year of funding for the Master’s or the fifth year for the PhD to the Associate Dean for Graduate Education.

Funding is also available to students through various grants and contracts obtained through the Psychological Services Center. Clinical students have obtained funded positions at the St. Louis College of Pharmacy providing clinical and counseling services. Students may also be paid for assessments conducted for various agencies through the Psychological Services Center. Additional positions are available throughout the community and typically pay
approximately $15-30 per hour. The student must obtain written approval from their advisor and the Director of the Clinical Psychology Program for any external employment or placement.

The Dorothy Orthwein Bates Research Award is available through the generosity of the family of a clinical psychology graduate, Dr. Ellen Bates Scott. This scholarship is given annually to every clinical student at Saint Louis University upon successful completion of the doctoral oral examination (i.e., dissertation proposal). The scholarship is designed to facilitate students’ dissertation research and ranges from approximately $1,000 to $1,500.

Clinical psychology graduate students may obtain a limited amount of financial support for equipment, supplies, travel, registration fees, etc. related to research or clinical training through the Clinical Student Development Fund. Similarly, students may obtain reimbursement for selected professional development through the Department of Psychology Severin Fund.
VI. QUALITY ASSURANCE and OUTCOMES ASSESSMENT

In support of its commitment to excellence, the clinical psychology program engages in regular, systematic, evaluative assessment of the program’s attainment of its education and training goals.

I. Evaluation of the Program Mission, Goals, Objectives and Processes

Program evaluation and quality assurance is facilitated by the accreditation process of the American Psychological Association (APA). An annual report, as well as a five-year, comprehensive self-study report and site visit by the American Psychological Association serve as primary mechanisms for external evaluation. The clinical psychology program at Saint Louis University was first accredited by APA in 1965 and has maintained full accreditation since that time. The clinical program received its most recent accreditation site visit in Spring of 2013 and was accredited with the next site visit in 2020.

Additionally, the Department of Psychology, including the three graduate programs (clinical, experimental, industrial-organizational) and the undergraduate program, is reviewed by the College of Arts and Sciences every five years to seven years. The evaluation process includes a departmental self-study and review by a committee of three faculty from other university departments.

The clinical faculty conduct an annual review of the program’s mission, goals, objectives, processes, and outcomes. Each summer the clinical faculty engages in a two-day retreat for program evaluation and development. Additionally, monthly clinical faculty meetings serve as an arena for identification and discussion of issues related to the clinical program, as well as serving as an essential means for communication among the clinical faculty.

Monthly student meetings provide an opportunity for students to discuss issues related to the program, and student input to clinical faculty decision-making is provided through a student representative who attends clinical faculty meetings. Monthly open forums provide an opportunity for students to meet with the Director of the Clinical Program and other interested faculty to identify, discuss and resolve any existing or potential issues which pertain to the clinical program.

The department Executive Committee consists of the Department Chairperson, Director of the Clinical Graduate Program, Director of the Experimental Graduate Program, Director of the Industrial-Organizational Graduate Program, and Director of the Undergraduate Program. This committee functions to facilitate program development in the context of the department as a whole.

Various mechanisms and measures are utilized for program evaluation and development. Student performance in academic coursework provides feedback regarding the acquisition of essential theoretical, scientific and conceptual knowledge. Evaluation of students’ performance on Clinical and Research Vertical Teams provide evaluative information regarding the adequacy of instruction and preparation for clinical practice and research. Various written and oral examinations (e.g., masters orals, written prelims, oral prelims, dissertation defense) serve as indicators of students’ abilities to integrate knowledge essential for both the science and practice of clinical psychology. Student research competencies are reflected in successful completion, presentation and publication of theses and dissertations. Student acceptance to and performance
in APA-accredited internships and postdoctoral fellowships serve as indicators of the implementation of our scientist-practitioner model of clinical training. Evaluation of students’ clinical, research and teaching activities in various external placements provide important information regarding the adequacy of training. Additionally, semi-annual clinical student evaluations provide an opportunity for clinical faculty to review the program’s effectiveness in achieving its goals and objectives on an individual student basis. Summaries of graduates’ responses to the exit questionnaire administered by Graduate Education are provided to the clinical program on an annual basis and provide an important source of feedback regarding student satisfaction with their experiences in the clinical program. Initial employment of students who have graduated from the clinical program is monitored as part of the annual report for APA accreditation. Alumni from the clinical program are periodically surveyed regarding their perceptions and satisfaction with their education and training in the clinical program.

II. Evaluation of Clinical Faculty

A critical component in ensuring the quality of education and training clinical psychologists is the systematic evaluation of clinical faculty. All academic courses taught, as well as all Clinical and Research Vertical Teams conducted by clinical faculty are evaluated by students each semester. A student from each clinical course, CVT and RVT distributes, compiles and summarizes the evaluations and provides a written summary indicating means, ranges and Ns for individual items, as well as a typed version of all written comments. Evaluations are to be completed by students no later than the last day of class for that semester. After destroying the raw data to protect student confidentiality, the final summary is presented to the faculty member and to the Director of the Clinical Psychology Program immediately after final grades have been assigned by the instructor.

Clinical faculty are also evaluated on an annual basis by the Chair of the Department of Psychology in accordance with the policies and procedures of the College of Arts and Sciences. Clinical faculty are evaluated in terms of their contributions to the university mission through teaching, clinical supervision, research and service. Additionally, clinical faculty undergo extensive internal and external evaluations as part of the tenure and promotion process.

III. Review of Students’ Professional Development

The clinical psychology program engages in regular, ongoing and systematic reviews of each student to assess the degree to which s/he has achieved the education and training goals and objectives of the clinical psychology program. Grades for academic coursework, Clinical Vertical Team, Research Vertical Team, and Thesis and Dissertation credit hours serve as one type of indicator of a student’s mastery of the education and training objectives. However, student progress is also reviewed within the clinical program through such processes and structures as the thesis, master’s oral examination, written preliminary examination, oral preliminary examination, clinical internship, dissertation, and dissertation oral defense.

Additionally, the professional development of each student in residence is reviewed by the entire clinical faculty twice a year, typically at the end of each fall and spring semester. This comprehensive review provides feedback to the student of his or her performance and progress in all aspects of the clinical program, including academic coursework, practica, Clinical Vertical Team, Research Vertical Team, clerkships, assistantships, thesis, master’s oral examination,
written preliminary examination, oral preliminary examination, readiness for clinical internship, dissertation and personal adjustment for the role of a clinical psychologist.

To facilitate the review process, students are required to submit a current copy of their vita, a summary of their current total number of APPIC hours of intervention/assessment/supervision, and a completed Student Activity Report to the Director of the Clinical Program and to his/her advisor prior to each student evaluation meeting. Performance reviews from all supervisors, including those from clerkships and external placements, are also required. During this meeting, clinical faculty will share information about each student’s progress and professional development, including strengths, areas for further professional development, and any areas of concern or problems that may be limiting the student’s professional development. A student may provide additional information either in writing or in person at the student professional development review meeting with the faculty. Similarly, the clinical faculty may request additional information from the student either in written format or by attendance at a portion of the student performance review meeting. Based on this evaluation of the student, one of the following recommendations will be made:

1) the student is making satisfactory progress in all aspects of the clinical program and is encouraged to continue their professional development in the program; or

2) the student is encouraged to continue in the clinical program, but is apprised in writing of areas of concern and/or problems identified by the faculty and which must be remediated; or

3) the student is placed on probation in the clinical program due to: a) the continuation or nonremediation of previously identified problems and/or concerns; or, b) the seriousness of the student problem (e.g., violation of ethical standards). The duration of the probationary period is to be specified in writing, as well as the required actions and behaviors needed for removal of probationary status. Any conditions of probation (e.g., restrictions or reductions in academic coursework, clinical work, research or teaching activities) will be specified in writing. Although it is the student’s responsibility to remediate any identified problems or concerns, suggestions and recommendations to assist with remediation will be provided to the student.

4) the student is dismissed from the clinical program for reasons specified in writing. This decision would ordinarily be invoked only: a) when the conditions for removal of probationary status have not been met; b) when there is a significant violation of ethical and professional conduct which poses a significant potential threat to the welfare of self or others; or c) when the problems are persistent and unresponsive to remediation efforts.

Following the clinical faculty’s review of the student’s professional development, the student’s academic advisor will meet with the student to present the feedback both verbally and in writing. Students will receive feedback about their overall professional development and progress, including areas of strength, areas for further professional development, areas of concern, problem areas, as well as suggestions and recommendations for continued professional development. This meeting also provides an opportunity for students to discuss any concerns or
disagreements regarding the feedback. If the student does not agree with the feedback or wishes to provide additional information for consideration by the clinical faculty, the student may request a meeting with the clinical faculty by contacting the Director of the Clinical Program within two weeks from the date the student was presented feedback from his or her advisor. The student will have a full and fair opportunity to present any information verbally or in writing to the clinical faculty at the meeting regarding their education, training and performance in the clinical program. The student may bring a representative (who is not an attorney) to the meeting; the representative may address the clinical faculty only at the discretion of the Director of the Clinical Program in consultation with the clinical faculty. Following such meeting, the clinical faculty will reconsider the student’s professional development review and provide additional feedback to the student. The student may appeal the actions and decisions of the clinical faculty by following the procedures specified below and in the SLU Graduate Education Catalog.

*Procedures for academic appeals*

If a graduate student wishes to appeal any academic decision in the College of Arts and Sciences (CAS), that appeal should first be made to the faculty member or faculty involved and, if necessary thereafter, to the department chairperson or program director if the program has no chair. The initial appeal must be made within 30 days after the academic decision was communicated or made available to the student. If the appeal is carried forward to the department chairperson or program director, this must be done within 30 days of the faculty’s decision. The department chair or program director reviews the materials and either supports the instructor’s recommendation or determines an appropriate outcome.

Should the student wish to continue the appeal process, the next step involves the Board of Graduate Education (BGE) of the College of Arts and Sciences. An appeal to the BGE must be made in writing and submitted to the Associate Dean for Graduate Education within 30 days of the decision by the department chairperson or program director. The Associate Dean will notify all parties involved of the appeal and will provide both parties an opportunity to submit any supporting documentation they believe the BGE should review. Written submissions will be limited to 10 pages, with additional appendices if necessary, from each side in the dispute.

The appeal may be heard as an agenda item at one of the regularly scheduled BGE meetings, or a special meeting may be called. A quorum of the BGE, excluding ex-officio members, must be in attendance. When the BGE sits as appeals board, a graduate student selected by the Graduate Student Association will be appointed to the board as a voting member. This student must be a graduate student in the College of Arts and Science but not from any departments involved in the appeal. Since this is an internal and not a legal procedure, students involved in the appeals process may be accompanied by someone who is not acting as an attorney or representing the student in his/her capacity as an attorney. If a member of the BGE is a member of the department or program involved in the appeal, that BGE member will abstain from active participation in the appeals process. The Associate Dean for Graduate Education shall be present throughout the entire process, but shall not be allowed to propose or second any motion, or to cast a vote on any motion related to the appeal.

The BGE will hear the case presented by the student and others supporting the student’s appeal and will also hear the presentations of the other parties involved. Then, the BGE will conduct a discussion. If the BGE finds that insufficient information has been presented, it may request a period of not longer than 30 days to obtain the information, meet again, and reach a
decision. The BGE will consider the merits of the student’s appeal and the adequacy of procedures followed in the department. The BGE may support the decision being appealed, overturn it, or change the penalty imposed. The Associate Dean will inform the student in writing of the BGE’s decision.

Should the student wish to appeal the decision beyond CAS, a written appeal may be submitted to the Associate Vice President for Graduate Education. This must occur within 30 days of the decision by the BGE. The AVP will review the documents as submitted to the BGE and may request additional information to determine whether or not the process as outlined in this section was appropriately followed. The AVP cannot overturn a decision but can remand the decision back to CAS for further investigation if the process was not followed.

In addition to the academic standards specified by the University, Graduate Education Catalog, College of Arts and Sciences, and Department of Psychology, the student is expected to meet the academic standards of the clinical psychology program. These academic standards are reflected in the goals and objectives of the clinical program listed in the document titled Academic Standards and Student Outcomes Assessment (see Section XI). Additionally, this document provides information regarding the measures, timeframes, responsibilities and criteria for assessing student performance and outcomes. Students are also evaluated in terms of their clinical competencies as specified in the document titled Scientist-Practitioner Competencies (see Section X).

**VII. PROGRAM GOVERNANCE**

The clinical psychology program uses a participatory, democratic model of governance for decision-making to achieve its goals and objectives. This model is based on fundamental principles which apply to all constituents of the clinical program (faculty, students and staff).

These fundamental principles of governance for the clinical program include: 1) equality of members; 2) freedom of discussion; 3) majority rule; and 4) rights of the minority. Each member of the clinical faculty (or student group) has the same rights, privileges and duties as any other member of that group. He or she has the right to present an idea for consideration, to discuss and recommend its adoption, and to have it critically examined by the group before a decision is made. Each member has the right to expect respectful and courteous treatment from others and a duty to extend this courtesy to others. Each person’s vote carries the same weight as that of any other member, and each person has the right to refrain or abstain from discussion or voting if they wish. Additionally, each clinical faculty member (or clinical student) has the right to be heard and to hear what others have to say about an idea, proposition or motion before making a decision. Each member has the right to information which may be helpful to the decision-making process. Information is to be shared equally and all members are entitled to the same information.

Although the clinical program strives for (and frequently achieves) consensus, we also rely on majority rule when consensus cannot be reached. Issues and conflicts are resolved by agreeing to accept a decision, solution or recommendation which has been approved by a majority of the clinical faculty (clinical students). It assumes that those in the minority agree to accept the decision of the majority.
During any decision-making process, everyone has the right to be heard, to oppose what appears to be a majority position, and to try to persuade others to accept a different point of view. Members who express an opinion different from the majority or who vote in opposition to the majority cannot be discriminated against because of their opinion or votes. However, opinions should be expressed in a courteous, respectful and professional manner.

The clinical program values efficient, practical and effective decision-making processes. Procedures for decision-making are determined by the group and can be modified or changed if the group desires. Overall, we strive for simple, informal procedures to enhance our decision-making abilities while protecting our fundamental principles of governance.

The governance and leadership of the clinical psychology program is shared equally among each member of the core clinical faculty. Each core clinical faculty member has the right and the responsibility to contribute to the development, implementation and evaluation of the clinical program to ensure that the program’s mission, goals and objectives are achieved. The core clinical faculty meet on a monthly basis during the fall, spring and summer semesters to administer the clinical psychology program. Additionally, the clinical faculty conduct an annual retreat to review the mission, goals, objectives, outcomes, policies and procedures of the clinical program. Clinical faculty development meetings are held periodically to enhance collaboration among the clinical faculty. Monthly student meetings provide an opportunity for students to discuss issues related to the program, and student input to clinical faculty decision-making is provided through a student representative who attends clinical faculty meetings. Monthly open forums provide an opportunity for students to meet with the Director of the Clinical Program and other interested faculty to identify, discuss and resolve any existing or potential issues that pertain to the clinical program. The department Executive Committee consists of the Department Chairperson, Director of the Clinical Graduate Program, Director of the Experimental Graduate Program, Director of the Industrial-Organizational Graduate Program, and Director of the Undergraduate Program. This committee facilitates program development in the context of the department as a whole. Finally, the faculty of the entire department of psychology regularly meets each semester.

VIII. ADMISSIONS

The clinical psychology program usually receives over 140 applications for admission each year. Typically, eight new students are admitted at the beginning of each fall semester. Selection is based on faculty review of application materials, including academic transcripts, research and clinical experience, personal essay, 3 letters of recommendation, and an invited interview. A typical entering group of students will have an average undergraduate GPA of 3.5 (on a 4.0 scale) and both Verbal and Quantitative GRE scores above the 50% percentile. Admitted students typically have relevant clinical and research experience. Admitted students typically have relevant clinical and research experience. Most students enter the program with a bachelors degree and complete both the Masters of Science (Research) degree and the Doctor of Philosophy degree in the clinical program. The clinical psychology program does not offer a terminal masters degree. Students who have obtained an approved masters degree in psychology prior to matriculation may be admitted directly to the Ph.D. program upon recommendation and approval of the clinical faculty.
Additional information is available in Section XI below titled “Student Admission, Outcomes, and Other Data” which provides disclosure of outcomes and information allowing for informed decision-making to prospective doctoral students.

As part of a Catholic, Jesuit University located in the Midtown area of the City of St. Louis, the clinical program is committed to serving the community through the education and training of minority clinical psychologists. Applications from minorities and those interested in psychological research and practice with culturally diverse populations are encouraged.

The application deadline for admission to the clinical psychology program initiating in the Fall semester of an academic year is January 1. Additional information regarding admissions requirements and application materials are available through Graduate Education, Saint Louis University, 221 N. Grand Boulevard, St. Louis, Missouri 63103 and through the University’s website at www.slu.edu.

IX. SCIENTIST-PRACTITIONER COMPETENCIES

Introduction
This document identifies and describes the set of core competencies to be acquired and demonstrated by students in the scientist-practitioner clinical psychology graduate program at Saint Louis University. This document has been adapted from APA’s (2009) Competency Benchmarks and from the Association of Directors of Psychology Training Clinics (2005) Report on Practicum Competencies.

Describing Levels of Competence
It is important to recognize that competencies are acquired at different rates. Some competencies, such as administrative or supervisory skills, may come slowly and later in professional development. Other more basic competencies, such as timeliness, ability to utilize supervision, etc., may be expected and/or required to be substantially attained very early in training. These differences in the rate of development are reflected in the level of competence expected at the conclusion of graduate education and training in clinical psychology.

One of the most widely used schemes for describing the development of competence is that of Dreyfus and Dreyfus (1986), who define five stages, from Novice to Advanced Beginner to Competent to Proficient to Expert. The Dreyfuses’ overall idea (in common with many other skill development and competency models) is that as the learner becomes more and more familiar with the analytic and action tasks of the field, performance becomes more integrated, flexible, efficient and skilled. Patterns and actions that have to be carefully thought about and/or taught by supervisors become internalized and increasingly automatic.

When discussing competence, keeping the terms straight is a challenge, since similar-sounding terms refer to different concepts. In particular, note that “competency” refers to a skill domain (e.g., assessment), “competence” or “level of competence” refers to the level of skill an individual has acquired (e.g., intermediate level of competence in assessment), and “competent” is a description of a particular level of skill (e.g., this psychologist is competent in neuropsychological assessment).

The clinical psychology program utilizes the following categories in describing the level of competence expected for the stated Scientist-Practitioner Competencies. Again please note that in some areas, substantial competence is expected, while in others, just the beginning of understanding is expected – a student, or any psychologist for that matter, may be expert in some areas and a novice in others. The definitions, (based on Dreyfus & Dreyfus, 1986) are modified versions of definitions offered by Benner (1984), with further input from Alexander (2004). Some of the category labels and descriptive contents have been changed to fit the particular circumstances of psychology training.
1. **Novice (N):** Novices have limited knowledge and understanding of (a) how to analyze problems and of (b) intervention skills and the processes and techniques of implementing them. Novices do not yet recognize patterns, and do not differentiate well between important and unimportant details; they do not have filled-in cognitive maps of how, for example, a given client may move from where he/she is to a place of better functioning or a research project moves from conceptualization to methodology to data analysis to interpretation of findings.

2. **Intermediate (I):** Psychology students at the intermediate level of competence have gained enough knowledge and experience through coursework, supervision, training and practice to be able to recognize some important recurring domain features and to select appropriate strategies to address the issue at hand. Surface level analyses of the Novice stage are less prominent, but generalization of diagnostic, intervention, and research skills to new situations, problems, research projects, and clients is limited, and support is needed to guide performance.

3. **Advanced (A).** At this level, the student has gained deeper, more integrated knowledge of the competency domain in question, including appropriate knowledge of scholarly/research literature as needed. The student is considerably more fluent in his/her ability to recognize important recurring domain features and to select appropriate strategies to address the issue at hand. In relation to clinical work, recognition of overall patterns, of a set of possible diagnoses and/or treatment processes and outcomes for a given case, are taking shape. Overall plans, based on the more integrated knowledge base and identification of domain features are clearer and more influential in guiding action. In relation to research, the student is increasingly able to synthesize and integrate empirical literature and is more knowledgeable and skilled at conducting research, albeit with supervision and direction. At this level, the student is less flexible in these areas than the proficient psychologist [the next level of competence] but does have a feeling of mastery and the ability to cope with and manage many contingencies of clinical work.

4. **Proficient.** The proficient psychologist perceives situations as wholes rather than in terms of chopped up parts or aspects. Proficient psychologists understand a situation as a whole because they perceive its meaning in terms of longer-term goals. The proficient psychologist learns from experience what typical events to expect in a given situation and how plans need to be modified in response to these events. The proficient psychologist can recognize when the expected normal picture does not materialize and takes steps to address these situations (including seeking supervision, reviewing research literature). This holistic understanding improves the proficient psychologist’s decision making; it becomes less labored because the psychologist now has a perspective on which of the many existing attributes and aspects in the present situation are the important ones — the psychologist has developed a nuanced understanding of the clinical and/or research situation.

5. **Expert.** The expert no longer relies on an analytic principle (rule, guideline, or maxim) to connect her or his understanding of the situation to an appropriate action. The expert psychologist, with an enormous background of experience, now has an intuitive grasp of each situation and zeroes in on the accurate region of the problem without wasteful consideration of a large range of unfruitful, alternative solutions. The expert operates from a deep understanding of the total situation. This is not to say that the expert never uses analytic tools. Highly skilled analytic ability is necessary for those situations with which the psychologist has had no previous experience. Analytic tools are also necessary for those times when the expert gets a wrong grasp of the situation and then finds that events and behaviors are not occurring as expected. When alternative perspectives are not available to the clinician, the only way out of a wrong grasp of the problem is by using analytic problem solving.

### Trajectory of Acquiring Competence

As noted above, it is important to recognize that competencies are acquired at different rates. Some competencies, such as administrative or supervisory skills, may come slowly and later in professional development. Other more basic competencies, such as timeliness, ability to utilize supervision, etc., may be expected and/or required to be achieved at a fully professional level very early in training. As the learner becomes more and more familiar with the analytic and action tasks of the field, performance becomes more integrated, flexible, efficient and skilled. Patterns and actions that have to be carefully thought about and/or taught by supervisors become internalized and increasingly automatic.

These differences in trajectory are reflected in the level of competence expected at the conclusion of clinical training. For example, in Section B.1.a.i below, “Ability to take a respectful, helpful professional approach to patients/clients/families” is expected to be at the Advanced, or “A” level by the end of the practicum, since these skills are basic or foundational clinical skills; in Section B.2.a below, “Development of skills and habits in seeking and applying theoretical and research knowledge relevant to practice of psychology in the clinical setting, including
accessing and applying scientific knowledge bases” is expected to be at the Intermediate or “I” level at the end of practicum, since these skills will be a focus of considerable work in the internship year.

**Individual and Cultural Differences**

A core principle behind all competencies listed in this document is awareness of, respect for, and appropriate action related to individual and cultural difference (ICD). Issues of ICD are relevant to each of the competencies described, but take a particularly large role in some. In these instances, ICDs are mentioned specifically.
SCIENTIST-PRACTITIONER COMPETENCIES

A. Basic Skills, Attitudes, and Knowledge
1. Personality Characteristics, Intellectual, and Personal Skill
   ___ Interpersonal skills: ability to listen and to be empathetic with others; respect for/interest in others’ cultures, experiences, values, points of view, goals, and desires, fears, etc. These skills include verbal as well as non-verbal domains. An interpersonal skill of special relevance is the ability to be open to feedback.
   ___ Cognitive skills: problem-solving ability, critical thinking, organized reasoning, intellectual curiosity, and flexibility
   ___ Affective skills: affect tolerance/understanding of interpersonal conflict; tolerance of ambiguity and uncertainty
   ___ Personality/Attitudes: desire to help others; openness to new ideas; honesty, integrity/value of ethical behavior; personal courage
   ___ Expressive skills: ability to communicate one’s ideas, feelings, and information in verbal, non-verbal, and written forms
   ___ Reflective skills: ability to examine and consider one’s own motives, attitudes, behaviors, and one’s effect on others
   ___ Personal skills: personal organization, personal hygiene, appropriate dress

2. Core Knowledge
   a. Assessment & Clinical Interviewing
      ___ Knowledge regarding psychopathology related to the population(s) served
      ___ Knowledge of scientific, theoretical, empirical and contextual bases of psychological assessment
      ___ Knowledge of test construction, validity, score reliability and related assessment psychometrics
      ___ Training in the principles and practice of systematic administration, data-gathering and interpretation for assessment, including identifying problems, formulating diagnoses, goals and case conceptualizations; understanding the relationship between assessment and intervention, assessment of treatment progress and outcome
      ___ Training in the models of techniques of clinical interviewing
   b. Psychopathology
      ___ Knowledge and understanding of the scientific, theoretical, empirical, and contextual bases of psychopathology
      ___ Training in diagnostic classification systems, including the DSM
   c. Intervention (**Specific features of “Intervention” are more fully described in Section B.4 below.**)
      ___ Knowledge of scientific, theoretical, empirical and contextual bases of intervention
      ___ Training in basic clinical skills, such as empathic listening, framing problems, etc.
      ___ Training in the assessment of treatment progress and outcome.
   d. Ethical and Legal
      ___ Principles of ethical practice and decision making (APA, 2002)
      ___ Legal knowledge related to the practice of psychology [Federal (e.g., HIPPA), State Law]
   e. Individual and Cultural Differences (ICD)
      ___ Knowledge and understanding of principles and findings related to ICD as they apply to the dimensions of ICD (e.g., class, race, physical disability, etc.)
Understanding of one’s own situation (situation (e.g., one’s own ethnic/racial, socioeconomic, gender, sexual orientation; one’s attitudes towards diverse others) relative to the dimensions of ICD (e.g., class, race, physical disability, etc.)

Understanding of the need to consider ICD issues in all aspects of professional psychology work (e.g., assessment, treatment, research, relationships with colleagues, etc.)

f. Lifespan Development

Knowledge and understanding of the scientific, theoretical, empirical, and contextual bases of development across the lifespan as they relate to clinical assessment, psychopathology, intervention, and ethics.

g. Biological Aspects of Behavior

Knowledge and understanding of the broad theoretical, empirical, conceptual, methodological, sociocultural, historical and technical foundations of the biological aspects of behavior.

h. Cognitive-Affective Aspects of Behavior

Knowledge and understanding of the broad theoretical, empirical, conceptual, methodological, sociocultural, historical and technical foundations of the cognitive-affective aspects of behavior.

i. Social Aspects of Behavior

Knowledge and understanding of the broad theoretical, empirical, conceptual, methodological, sociocultural, historical and technical foundations of the social aspects of behavior.

j. Statistics

Knowledge and understanding of statistics and techniques of data analyses in the behavioral sciences

k. Research Methods

Knowledge and understanding of research methods in the behavioral sciences

l. Psychometric Theory

Knowledge and understanding of psychological measurement and psychometric theory

m. History and Systems of Psychology

Knowledge and understanding of history and systems of psychology

B. Skills Necessary to Demonstrate Competencies

1. Relationship/Interpersonal Skills

a. With patients/clients/research participants

   Ability to take a respectful helpful professional approach to patients/clients/families.

   Ability to form a working alliance

   Ability to deal with conflict, negotiate differences

   Ability to understand and maintain appropriate professional boundaries

b. With colleagues

   Ability to work collegially with other students and trainees

   Ability to support others and their work and to gain support for one’s own work

   Ability to provide helpful feedback to peers and receive such feedback nondefensively from peers

c. With supervisors
Ability to work collaboratively with the supervisor; Collaboration means understanding, sharing, and working by a set of common goals for supervision; working cooperatively and collaboratively with the supervisor to enhance the student’s skills

Ability to prepare for supervision

Ability/willingness to accept supervisory input, including direction; ability to follow through on recommendations; ability to negotiate needs for autonomy from and dependency on supervisors

Ability to self-reflect and self-evaluate regarding clinical and research skills and use of supervision including using good judgment as to when supervisory input is necessary

d. With support staff
   Ability to be respectful of support staff roles and persons

e. With professional teams
   Ability to participate fully in team’s work
   Ability to understand and observe team’s operating procedures

f. With other professionals
   Ability to communicate professionally and work collaboratively with other professionals both within and external to the setting or placement

g. With the practicum site (PSC and external placements)
   Ability to understand and observe the agency’s operating procedures
   Ability to participate in furthering the work and mission of the practicum site
   Ability to contribute in ways that will enrich the site as a practicum experience for future students

2. Research Skills

   Ability to formulate a research question that contributes to the field and society
   Ability to conduct a thorough and relevant literature review; ability to critically review research literature
   Ability to develop and articulate hypotheses appropriate to the research question(s)
   Ability to incorporate operationally defined, measurable constructs into research methods
   Ability to select and use psychometrically sound measures in research design
   Ability to use appropriate, “best practices” methods of data analyses; data analyses are consistent with the hypotheses
   Understanding and compliance with Institutional Review Board policies and procedures
   Ability to present conclusions and discussion that are reflective of the research findings
   Ability to articulate limitations in the research design and methodology

3. Skills in Application of Research

   Development of skills and habits in seeking and applying theoretical and research knowledge relevant to practice of psychology in the clinical setting, including accessing and applying scientific knowledge bases
   Understanding and application of theoretical and research knowledge related to diagnosis/assessment and intervention, diversity, supervision, ethics, etc.

4. Psychological Assessment Skills
Ability to select and implement multiple methods and means of evaluation in ways that are responsive to and respectful of diverse individuals, couples, families, and groups

Ability to utilize systematic approaches to gathering data to inform clinical decision making

Knowledge of psychometric issues and bases of assessment methods

Knowledge of issues related to integration of different data sources

Ability to integrate assessment data from different sources for diagnostic purposes

Ability to formulate and apply diagnoses; to understand the strengths and limitations of current diagnostic approaches

Capacity for effective use of supervision to implement and enhance skills

5. **Intervention Skills**

   Ability to formulate and conceptuate cases

   Ability to plan treatments

   Ability to implement intervention skills, covering a wide range of developmental, preventive and “remedial” interventions, including psychotherapy, psychoeducational interventions and crisis management, depending on the focus and scope of the problem

   Knowledge regarding psychotherapy theory, research, and practice

   Knowledge regarding the concept of empirically supported treatments methods and activities

   Knowledge regarding specific empirically supported treatment methods and activities

   Ability to apply specific empirically supported treatment methods (e.g. CBT, empirically supported relationships)

   Assessment of treatment progress and outcome

   Linking concepts of therapeutic process and change to intervention strategies and tactics

   Effective use of supervision to implement and enhance skills

6. **Consultation Skills/Interprofessional Collaborations**

   Knowledge of unique client/patient care roles of other professionals

   Ability to effectively relate to other professionals in accordance with their unique client/patient roles

   Understanding of the consultant’s role as an information provider to another professional who will ultimately be the client/patient care decision maker

   Capacity for dialoging with other professionals which avoids use of psychological jargon

   Ability to choose an appropriate means of assessment to answer referral questions

   Ability to implement a systematic approach to data collection in a consultative role

   Consultative reports are well organized, succinct, and provide useful and relevant recommendations to other professionals

7. **Diversity – Individual and Cultural Differences**
Knowledge of self in the context of diversity (one’s own beliefs, values, attitudes, stimulus value, and related strengths/limitations) as one operates in the clinical setting with diverse others (i.e., knowledge of self in the diverse world.)

Knowledge about the nature and impact of diversity in different clinical situations (e.g., clinical work with specific racial/ethnic population) and in the conduct of research

Ability to work effectively with diverse others in assessment, treatment, consultation and research

8. Ethics

Knowledge of ethical/professional codes, standards, and guidelines; knowledge of statuses, rules, regulations and case law relevant to the science and practice of psychology

Recognize and analyze ethical and legal issues across the range of professional activities in clinical work and in conducting research

Recognize and understand the ethical dimensions/features of his/her own attitudes and practice in clinical work and in conducting research

Seek appropriate information and consultation when faced with ethical issues

Practice appropriate professional assertiveness related to ethical issues (e.g., by raising issues when they become apparent to the student).

Evidence commitment to ethical practice in clinical work and in research

9. Professional Development

a. Professional Skills for Effective Clinical Practice and Conducting Research

Timeliness: completing professional tasks in allotted/appropriate time (e.g., evaluations, notes, reports) in both clinical work and in conducting research; arriving promptly at meetings and appointments

Developing an organized, disciplined approach to writing and maintaining notes and records in clinical work and to writing related to the conduct of research

Negotiating/ managing fees and payments in clinical work

Organizing and presenting case material; preparing professional reports for health care providers, agencies, etc.

Organizing and presenting ideas and information related to research

How to self-identify personal distress, particularly as it relates to clinical work

How to seek and use resources that support healthy functioning when experiencing personal distress

Organizing one’s day, including time for clinical notes and records, for research activities, for rest and recovery, etc.

b. Professional Development Competencies

Critical thinking and analysis

Using resources to promote effective practice (e.g. published information, input from colleagues, technological resources)

Using resources to promote effective research (e.g. empirical literature, input from colleagues, technological resources)

Responsibility and accountability relative to one’s level of training and seeking consultation when needed

Time management

Self-awareness, understanding, and reflection

Self-care
Awareness of personal identity (e.g., relative to individual and cultural differences)

Awareness of one's own beliefs and values as they relate to and impact professional clinical and research activities

Social intelligence; ability to interact collaboratively and respectfully with other colleagues

Willingness to acknowledge and correct errors

Ability to create and conduct an effective presentation

C. Metaknowledge/ Metacompetencies – Skilled Learning

Knowing the extent and the limits of one's own skills; learning the habit of and skills for self-evaluation of clinical and research skills

The ability to use supervision, consultation and other resources to improve and extend skills (note the related relationship competence – to work collegially and responsively with supervisors)

Knowledge of the process for extending current skills into new areas

Knowledge of the epistemologies underlying various aspects of clinical practice (e.g., assessment, diagnosis, treatment)

Commitment to life-long learning and quality improvement

Awareness of one’s identity as a psychologist; an aspect and reflection of metaknowledge that is role specific, knowing what one knows and can do (and should do) as a psychologist