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Read This First

This Handbook provides general information concerning the steps that must be taken to fulfill the program requirements for the Master of Arts and Doctor of Philosophy degrees for the Clinical Psychology Program at UBC Okanagan. It was designed as a guide for both students and their faculty supervisors. This Handbook is the most current version and replaces all prior versions. The regulations of the College of Graduate Studies are the primary ones that must be followed. They are created, interpreted, and enforced by the College. Please refer to College’s Graduate Policy and Procedure Manual here: https://gradstudies.ok.ubc.ca/about-cogs/policies-procedures/ The Psychology Department’s requirements that appear in this Handbook are not comprehensive, but merely supplement those of the College of Graduate Studies.

There are two kinds of graduate specializations in psychology at UBCO: (1) M.A. and Ph.D. in Psychological Science (formerly named “Experimental Psychology”); (2) M.A. and Ph.D. in Clinical Psychology. This Handbook is for the Clinical Psychology specialization. There is a separate handbook for the Psychological Science specialization that is available on the Department web site. Admission to either M.A. specialization is restricted to those intending to complete the associated Ph.D.

The Department of Psychology at UBCO is strongly committed to helping all students successfully complete their programs of graduate studies. We also expect that Clinical Psychology students in our M.A. program will continue on and complete their Ph.D. at UBCO. Keep this in mind when reading the policies and procedures in this document. The Clinical Psychology Program at UBCO is carefully designed and intended to prepare students, once they have graduated, to meet the rigorous registration requirements of provincial and territorial licensing bodies across Canada (e.g., College of Psychologists of British Columbia).

Our Clinical Psychology Program has been accredited by the Canadian Psychological Association (CPA) since 2017. Our next site visit will be in 2021-22.

CPA Accreditation/Head Office
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Ottawa, Ontario
K1P 5J3
Toll free (in Canada): 1-888-472-0657
Fax: 613-237-1674
Email: accreditation@cpa.ca
Web: https://cpa.ca/accreditation
I. OVERVIEW

Philosophy

The Clinical Psychology Program at the University of British Columbia’s Okanagan campus is based on the scientist-practitioner model of clinical psychology, with an emphasis on evidence-based assessment and intervention. Our developmental learning model promotes clinical and research competence through close mentoring relationships with faculty.

Our mission is to prepare students to be registered psychologists, trained in the provision of evidence-based assessment and treatment, with the ability to critically consume and produce scientific research, committed to the promotion of health and well-being through cognitive and behaviour change, in careers that can include research, teaching, and clinical practice.

The program is designed for students with a background in psychology or related behavioural/health sciences, and provides students opportunities for advanced scholarship and professional growth. Our campus offers an M.A. as a component of the Ph.D. degree in Clinical Psychology.

Program Objectives

The graduate program in Clinical Psychology is designed for students with a background in psychology or related behavioural/health sciences. It provides students with opportunities for advanced scholarship and professional growth in the context of a research-intensive program. It prepares graduates for careers in research, teaching, and clinical practice.

Upon completion of the program, students will have obtained broad training in the science of psychology, incorporating the biopsychosocial model, as well as knowledge and skills in Clinical Psychology and the ability to integrate science and practice. The specific goals, training objectives, and competencies required are detailed below:

**Goal 1** - To produce graduates with broad and general training in the science of psychology that incorporates the biopsychosocial model.

**Training Objectives for Goal 1**

Objective 1.1: Students will acquire basic knowledge of the core domains of the science of psychology, including the biological, social, cognitive-affective bases of behaviour, human development, and history and systems.

  **Competency 1.1.1:** Students will demonstrate adequate knowledge in each of these areas.

Objective 1.2: Students will demonstrate research knowledge and skills.
**Competency 1.2.1:** Students will demonstrate knowledge of psychological research methods and statistics.
**Competency 1.2.2:** Students will contribute to ongoing research of their mentors or faculty members.
**Competency 1.2.3:** Students will acquire the skills to independently conduct and disseminate original research.

**Objective 1.3:** Students will acquire knowledge and increased sensitivity regarding cultural and social diversity.
**Competency 1.3.1:** Students will demonstrate knowledge in this area, including awareness of implicit biases and obstacles to diversity in organizational contexts.

**Goal 2:** To produce graduates who demonstrate knowledge and skills in the practice of clinical psychology with the ability to integrate science and practice.

**Training Objectives for Goal 2:**

**Objective 2.1:** Students will acquire knowledge related to psychopathology.
**Competency 2.1.1:** Students will acquire knowledge of theories of the development, expression, and maintenance of psychopathology.

**Objective 2.2:** Students will acquire knowledge and skills related to clinical assessment.
**Competency 2.2.1:** Students will demonstrate knowledge and skills in clinical interviewing, administration, scoring and interpretation of psychological measures.
**Competency 2.2.2:** Students will demonstrate knowledge and skills in diagnostic formulation and case conceptualization.

**Objective 2.3:** Students will acquire knowledge and skills related to therapeutic intervention.
**Competency 2.3.1:** Students will demonstrate knowledge and skills in implementing and evaluating a variety of empirically supported psychological interventions.

**Objective 2.4:** Students will acquire knowledge and skills related to professionalism and ethical conduct and practice as psychologists.
**Competency 2.4.1:** Students will demonstrate knowledge and skills related to ethical conduct in psychology practice, research, and teaching.
**Competency 2.4.2:** Students will demonstrate progress towards establishing a professional identity as a clinical psychologist and an attitude of lifelong learning.
**Competency 2.4.3:** Students will demonstrate an awareness of their own beliefs and values as they relate to and impact professional practice and activity as well as demonstrate appropriate and effective interpersonal and attitudinal skills with clients.
**Competency 2.4.4:** Students will demonstrate a respectful, helpful professional approach to patients, colleagues, and supervisors.
**Competency 2.4.5:** Students will demonstrate competency in being able to self-
reflect and self-evaluate regarding clinical skills and use of supervision in collaboration with supervisors.

**Competency 2.4.6:** Students will demonstrate an appreciation for the importance of self-care and work/life balance in clinical practice and research and will demonstrate that they ensure work/life balance throughout their studies.

**Objective 2.5:** Students will demonstrate awareness, sensitivity, and competence in considering cultural and individual diversity in psychological assessment and practice.

**Competency 2.5.1:** Students will show respect and appreciation for staff, colleagues, and patients from diverse backgrounds, and will appropriately consider individual and cultural diversity in the selection, administering and interpretation of assessment measures, and in selection and implementation of culturally-sensitive approaches to intervention.

**Objective 2.6:** Students will demonstrate knowledge of the supervision and consultation literatures and gain exposure and beginning practice in clinical supervision and consultation.

**Competency 2.6.1:** Students will acquire knowledge of the supervision literature and basic practice in providing clinical supervision.

**Competency 2.6.2:** Students will acquire knowledge of the consultation literature.

**Professional and Research Interests**

The professional and research interests of the Clinical faculty span a broad range, and their research expertise include both quantitative and qualitative strategies of analyses. Students are encouraged to work as well with the Psychological Science faculty to broaden their scope of research training and become familiar with other areas of Psychology.

**Faculty and Staff**

**Core Clinical Psychology Faculty/ Training Committee:**

Dr. Jan Cioe, R.Psych.
Dr. Paul Davies, Psychology Head; Psychology Graduate Studies Committee Chair
Dr. Susan Holtzman, R.Psych.
Dr. Marvin Krank
Dr. Maya Libben, R.Psych.
Dr. Lesley Lutes, R.Psych., Director of Clinical Training; Program Coordinator for Clinical Psychology
Dr. Harry Miller, R.Psych.
Dr. Carolyn Szostak
Dr. Zach Walsh, R.Psych.

Dr. Derrick Wirtz, Director of Psychological Science; Program Coordinator for
Psychological Science
Dr. Michael Woodworth, R.Psych.

Clinical Psychology Adjunct Faculty:
Dr. Colin Comfort, R.Psych
Dr. Jessica Driscoll, R.Psych
Dr. Bonnie Hayes, R.Psych
Dr. Kimberly Kreklewetz, R. Psych
Mr. Steve Sigmond, R.Psych.
Dr. Alison Spadafora, R.Psych.
Dr. Christopher Wilson, R.Psych.

Psychology Department Complementary* Faculty:
Dr. Cynthia Mathieson
Dr. Brian O’Connor
Dr. Barbara Rutherford

*Our complementary faculty supervise clinical student research and/or teach required courses within the Clinical Psychology Program

Support Staff, Interprofessional Clinic & Psychology Graduate Programs
Ms. Marlis Wecels, Administrative Manager

Support Staff, Psychology Department
Ms. Marla MacDonald, Department Assistant

Our above-noted faculty’s research and clinical interests are provided in Appendix A. For a list of faculty in the Psychological Science program, please refer to the psychology department website (http://psyo.ok.ubc.ca/people/faculty.html).

II. ADMINISTRATIVE STRUCTURE

Governance of the Clinical Programs

The Clinical Psychology Program’s organizational structure consists of a Director of Clinical Training and a Clinical Psychology Training Committee that together establish and implement program-specific policies. In order to meet the educational standards for professional psychology, the Clinical Psychology faculty establish and control degree requirements for clinical program students that exceed those established by the College of Graduate Studies (CoGS) and by the Psychology Graduate Studies Committee (PGSC).
Changes in program requirements must first be approved by the Clinical Psychology Training Committee, then by the PGSC, and then by the Department of Psychology. The Clinical Psychology Training Committee is responsible for reviewing the applications of prospective students, and the decision to admit a new student must be approved by the PGSC. Annual progress reports for clinical students are first reviewed by the Clinical Training Committee and then by the PGSC, prior to submission to the College of Graduate Studies.

**Director of Clinical Training (DCT)**

The DCT is selected through a posting process within the Psychology Department, overseen by the Department Head and ratified by the (Clinical) faculty. The term of the DCT is for a period of three years and is renewable. As outlined in the document *Accreditation Standards and Procedures for Doctoral Programs and Internships in Professional Psychology 4th Revision* (Canadian Psychological Association, 2002), the duties of the DCT include, but are not limited to the following:

a. program planning and development requisite to the annual reporting and self-study process;
b. overseeing and delegating the professional and administrative tasks, which are necessary to the operation of the program; and
c. liaisons with the Registrar and Accreditation Office staff and ensuring timely submission of annual reports and annual fees, selecting site visit teams, scheduling site visits, and responding to inquiries and requests for information from the Accreditation Office.
d. the training director also keeps other administrative officials (e.g., Department Head) apprised of matters relating to the operation and administration of the program (CPA, p. 7).

Additional duties* include

e. conducting regular meetings in which Clinical core faculty and student representatives meet to discuss and decide on matters relevant to the Clinical graduate program, and signing off on relevant forms and documents (e.g., APPIC forms, clinical placement goals forms);
f. liaising with practicum and internship settings, advising students with regards to M.A. and Ph.D. practicum and Ph.D. internship placements, reviewing and approving students' requests for placements and their placement agreements, monitoring students' progress, and addressing difficulties that might arise during students' clinical placements; and

g. administration of the Department's collection of psychological assessment resources, including maintaining a listing of test materials currently in the library, conducting periodic reviews of test catalogues and relevant literature to identify
test instruments that should be acquired, consulting Clinical faculty on a regular basis in order to determine their test needs, conducting reviews of test needs and assisting in the development of funding requests to the Administration.

*some of these duties may be delegated to, and/ or overseen in consultation with, the Psychology Clinic Director.

III. CLINICAL M.A. PROGRAM

Application and Admission

The program is governed by the regulations of the UBCO College of Graduate Studies, including its standards for admission of students.

Students are encouraged to contact 1-3 potential faculty supervisors and discuss a possible program of study prior to formally applying to the program. The PGSC considers the suitability of supervisor-student matches when deciding whether to admit an applicant.

Entering M.A. students will normally have an honours degree (or an undergraduate degree and equivalent research experience) in psychology or a related area. This must include course work in statistics and research methodology.

M.A. applicants must hold the academic equivalent of a four-year baccalaureate degree with
• a minimum A- average (80% at UBC) in last 60 credits; or
• applicants who have a four-year baccalaureate degree, or its academic equivalent, which does not meet the requirements stated above, but who have had significant formal training and relevant professional experience to offset such deficiencies, may be granted admission on the recommendation of the PGSC and approval of the Dean of the College of Graduate Studies.

Admission to the M.A. Clinical Psychology program is restricted to those who intend to continue on to the Ph.D.

A complete application to the College of Graduate Studies consists of the following:
• a general application to the College of Graduate Studies;
• an application fee;
• three confidential reference reports, at least two of which must be from academic referees; the third report may be from an academic or from a professional referee;
• one official set of all post-secondary academic records in original language and certified translation (if originals cannot be attained by applicant, then attested, certified copies of originals are acceptable). To be considered official, academic records must be received in official university envelopes, sealed, and endorsed by the issuing institution;
- evidence of adequate English proficiency where applicable (TOEFL, IELTS, or MELAB are all acceptable); and
- Graduate Record Exam (GRE) scores. The general GRE scores are required and the psychology scores are recommended.
- a letter of intent describing research interests and plans.

To receive first-round consideration, all application materials must be submitted by December 1. Applications received after December 1 may be considered after the first round.

Short-listed applicants will be interviewed in person or possibly online in extenuating circumstances to assess suitability for the program.

Admission to the M.A. program will be in one of the following categories:

1. Unconditional admission. Granted when the applicant meets all admission requirements including the agreement of a Department of Psychology faculty member to supervise the student, all final official documentation has been received, an admission recommendation has been made by the PGSC to the College of Graduate Studies, and a formal letter of admission has been provided by the College of Graduate Studies.

2. Conditional admission. Contains condition(s) that must be met before an offer can be considered final. Conditions include clearance of a criminal background check (see next section), and may also include final documentation showing degree conferred, or submission of academic records from previous institutions. The letter of admission stipulates deadline dates as to when the conditions must be met. Failure to comply with the stated condition(s) will normally result in the admission offer being withdrawn.

**Criminal Record Check Requirement**

Under the Criminal Records Review Act (CRRA), all students participating in practica for which they receive academic credit and that involve working with children and/or vulnerable adults directly, or having or potentially having unsupervised access to children and/or vulnerable adults, must undergo a CRRA Check.

The Clinical Psychology Program at UBC Okanagan is subject to the requirements of the Criminal Records Review Act, such that all students who are enrolled in programs that include a practicum component involving work with children or vulnerable adults will have to successfully clear a criminal record check for relevant offences before they will be permitted to register in the Clinical Psychology Program. If a student is found to present a risk of physical or sexual abuse to children, or physical, sexual, or financial abuse to vulnerable adults, as a result of the CRRA Check, the student will not be permitted to register and your admission offer will be withdrawn. Students should consider this requirement carefully before applying to this program.
Upon the deadline for admission acceptance (April 15), as stated in the admission offer letter from the College of Graduate Studies, the student must contact the Psychology Graduate Program Liaison to arrange completion of the Criminal Record Check form for submission to the Ministry of Justice of British Columbia.

Please refer to the information regarding the Criminal Records Review Act, Criminal Record Check, and associated links in Appendix B.

**Program Registration & Duration**

Most students begin their program of study in September. All M.A. degree students admitted to the College of Graduate Studies must be registered when they begin their studies. Students must remain continuously registered (for all terms) until the degree is completed, except for periods of time during which the student is on an approved leave of absence. Students must maintain continuous registration throughout all years until graduation by keeping up with fee payments. Failure to register for two consecutive terms may result in the student being withdrawn from the program.

The M.A. program should be completed in two academic years. Delays beyond two years can sharply decrease a student’s chances of admission to the Ph.D. program. Support funds are less likely to be available from the teaching assistant budget and from the supervisor’s research assistant budget beyond the second year to M.A. students. The Department of Psychology reserves the right to specify deadlines, requirements, and limitations for particular students.

If a degree is not awarded within five years from initial registration, the student's eligibility for the degree will usually be terminated and the student will be withdrawn from the program. Under exceptional circumstances, extensions may be granted by the Dean of the College of Graduate Studies.

Students who, for health or personal reasons, including childbirth and having primary responsibility for the care of a child, must interrupt their studies should apply for a leave in writing to the Dean of the College of Graduate Studies. The period of leave is not counted toward time to completion.

**M.A. Thesis Committee**

Incoming students are encouraged to form an M.A. Thesis Committee as soon as possible after entering the program. By the end of the first term after registration in the program, students must report the membership of their M.A. Thesis Committee and their program of studies, using a Psychology Committee Program Plan (see here: [http://psvo.ok.ubc.ca/graduate/forms.html](http://psvo.ok.ubc.ca/graduate/forms.html)) and submitting it to the PGSC. The M.A. Thesis Committee consists of at least three UBCO faculty members or UBCO Psychology adjuncts. One member is the supervisor, and there must be at least one, non-adjunct, full-time UBCO faculty member on the committee. In determining the number of faculty
members on M.A. and Ph.D. Thesis Committees when a student has co-supervisors, the co-supervisors shall count as one committee member. At least two of the committee members must be in the Psychology Department. With the approval of the supervisor and PGSC, the student can make changes to the Thesis Committee after it has been formed.

Program Requirements

The minimum requirements for the M.A. are 45 credits as follows:
- a 12-credit thesis (PSYO 599);
- 6 credits of graduate-level statistics and methodology, normally taken in the first year;
- 6 credits in Professional Practice: Assessment;
- 6 credits in Individual Differences;
- 6 credits in Professional Practice: Intervention;
- 3 credits in Ethics/Professional Standards;
- 3 credits in Psychometrics; and
- 3 credits (300 hours: minimum 100 direct client contact hours and 65 hours of supervision by a registered clinical psychologist) of approved practica.

Incoming graduate students who have not previously completed the equivalent of PSYO 507 (Advanced Statistics and Research Methods) and who are deemed to have insufficient preparation to take PSYO 507 will be required to take undergraduate statistics courses instead of PSYO 507 in their first year and to complete PSYO 507 in their second year.

Some students may also be required to complete additional courses or other work because of deficiencies in their preparatory background. These requirements will be determined by the Clinical Training Committee before admission into the program or during the first term of registration in the program.

See Appendix D for the Clinical Psychology Program Course Schedule.

See Appendix E for the College of Graduate Studies’ grading scale at the Master’s level.

M.A. Practicum

M.A. students are required to successfully complete a minimum of 300-hour practicum after they have completed the first year M.A. required courses and after their M.A. thesis proposal has been approved by their M.A. Thesis Committee.

All practicums must be approved in advance by the DCT. Also, students must maintain registration in the applicable Master’s level practicum courses and sections (PSYO 530) during completion of their practica.
M.A. Thesis

M.A. students are required to complete a Master’s thesis. They are required to enrol in the thesis course (i.e., PSYO 599) during every term of their program including the summer terms. Completion of a thesis is an integral part of the Master’s program. Between September and April of the first year, the student should meet with his or her M.A. Thesis Committee to outline a plan for the Master’s thesis. The student’s annual progress report must indicate that this meeting has taken place and that a thesis plan has been developed. Before beginning formal thesis work, the student must submit a formal thesis proposal to the Thesis Committee and obtain approval of the proposed thesis. Thesis proposals must be stand-alone, written documents that include an Abstract, a literature review, one or more well justified research questions, a Method section, and a References section. Data collections must not begin before proposals have been approved by all members of the supervisory committee and by the Director of Clinical Training. It is required that the thesis proposal be submitted and approved by the M.A. Thesis Committee within one year of registration in the program.

Following the thesis proposal meeting, the student as well as the committee, must complete and sign the Psychology Thesis & Dissertation Approval Form (see Appendix Q) and forward to the DCT for approval. The student must also provide the final thesis proposal (electronic copy) to Marlis Wecels, for the student’s department file.

The ideal thesis is one that leads to (or is) a paper publishable in a reputable journal. Our goal in establishing requirements about the thesis is to facilitate, rather than hinder, students in attaining this goal. The M.A. Thesis Committee is thus given some leeway to tailor the thesis research. The general requirement is a thesis written by the student on research carried out by the student while in the M.A. program at UBCO. The literature review, design, execution, data analysis, discussion, and written presentation should be of publishable quality. The thesis may take one of two formats, with the choice left to the student, in consultation with the supervisor. The choices are as follows: (a) a traditional thesis-style document, and (b) a thesis in the format of a journal article (should the manuscript have already been accepted for publication by a reputable journal, and the student is sole or first author, the M.A. Thesis Committee may accept it and request final approval from the PGSC).

M.A. Thesis Examination

The UBCO College of Graduate Studies web site provides the procedures for preparing theses, preconditions for a thesis defense, the scheduling of thesis examinations, examination committee composition, examination procedures, the responsibilities of examiners, the procedures that examiners must follow when judging theses, and submission of the final thesis.

Notice of a defense must be posted at least 10 days in advance and, at that time, a copy should be made available to those who are interested in reading the thesis beforehand.
All graduate students and faculty members are invited to attend each M.A. thesis defense.

Some helpful links are provided below:

*Thesis Information*

*Thesis Preparation and Formatting*

*Graduate Policy and Procedure Manual*
https://gradstudies.ok.ubc.ca/about-cogs/policies-procedures/

**Timeline and Schedule for Completion of M.A. Degree**

Please refer to the Clinical Psychology Program Timeline in Appendix C.

Please refer to the Clinical Psychology Program Course Schedule in Appendix D.

**Application for Graduation**

An application for graduation should be submitted through the UBC Student Service Centre well in advance of the projected date of graduation. Please note that students must apply in order to be eligible to graduate (i.e., receive a degree) regardless of whether the students plans to attend convocation. Please refer to the College of Graduate Studies Graduate Policy and Procedure Manual
https://gradstudies.ok.ubc.ca/about-cogs/policies-procedures/ for further details.

**Evaluation for Admission into the Ph.D. Program**

A new, separate application for admission to the Ph.D. program must be made to the College of Graduate Studies. All application materials must be submitted by December 1 of the second year. Admission does not occur automatically when the M.A. has been completed. The transition between the M.A. and the Ph.D. programs should be carefully considered by the student in consultation with the supervisor. Admission requires that the student has done more than simply meet the minimal requirements for an M.A. degree. Admission requires (a) that the student has made significant progress toward becoming an independent researcher, (b) a willing supervisor, and (c) financial support.

**Direct Transfer into the Ph.D. Program without an M.A.**

Master’s students may request a direct transfer into the Ph.D. program, which must be approved by the Dean of Graduate Studies. In these cases, a second-year paper is submitted instead of an M.A. thesis, and an M.A. degree is not awarded. Direct transfers from the M.A. into the Ph.D. degree program are permitted at the discretion of the PGSC
under regulations set by the College of Graduate Studies. Direct transfers can occur after 12, but after no more than 18 months in the M.A. program.

IV. CLINICAL PH.D. PROGRAM

Application and Admission Requirements

The Ph.D. degree program is governed by the regulations of UBC Okanagan’s College of Graduate Studies, including its standards for admission of students.

Students are encouraged to contact 1-3 potential faculty supervisors and to discuss a possible program of study prior to formally applying to the program. The PGSC considers the suitability of supervisor-student matches when deciding whether to admit an applicant.

Ph.D. applicants must have completed one of the following requirements prior to admission:

- a Master's degree (or equivalent) in Clinical Psychology or a related area from an approved institution, with clear evidence of research ability;
- a bachelor's degree, with one year of study in a Master's program with 18 credits of first class average, of which, normally, 12 credits must be at the 500 level or above, and clear evidence of research ability. (See the above section on Direct Transfer into the Ph.D. Program without an M.A.)

When reviewing applications to the M.A. and Ph.D. programs, the PGSC may consider requests from applicants to receive UBCO program credits for graduate courses taken at other universities. Such requests must be accompanied by detailed outlines of the courses taken, which must be submitted with the application package along with a letter explaining the request.

A complete application to the College of Graduate Studies consists of the following:

- a general application to the College of Graduate Studies;
- an application fee;
- three confidential reference reports, at least two of which must be from academic referees; the third report may be from an academic or from a professional referee;
- one official set of all post-secondary academic records in original language and certified translation (if originals cannot be attained by applicant, then attested, certified copies of originals are acceptable). To be considered official, academic records must be received in official university envelopes, sealed, and endorsed by the issuing institution;
- evidence of adequate English proficiency where applicable (TOEFL, IELTS, or MELAB are all acceptable); and
- Graduate Record Exam (GRE) scores. The general GRE scores are required and the psychology scores are recommended.
- a letter of intent describing research interests and plans.
To receive first-round consideration, all application materials must be submitted by December 1. Applications received after December 1 may be considered after the first round.

Admission to the Ph.D. program will be in one of the following categories:

1. Unconditional admission. Granted when the applicant meets all admission requirements including the agreement of a Department of Psychology faculty member to supervise the student, all final official documentation has been received, and approval has been granted by the PGSC and the College of Graduate Studies.

2. Conditional admission. Contains condition(s) that must be met before an offer can be considered final. Such conditions may include final documentation showing degree conferred, or submission of academic records from previous institutions. The letter of admission stipulates deadline dates as to when the conditions must be met. Failure to comply with a condition will normally result in the student being withdrawn from the program.

New students who are offered admission at the Ph.D. level must meet Criminal Record Check requirements as outlined in the M.A. admissions section (also see Appendix B).

Program Registration & Duration

Ph.D. students admitted to a doctoral program will normally be expected to spend the equivalent of at least three consecutive years of full-time study at UBCO. Students must maintain continuous registration (in all terms) throughout all years until graduation by keeping up with tuition fee payments, including those periods when students are working on their thesis and not taking courses. Students entering directly from a bachelor's degree must, during the first year of study, complete 18 credits with a first-class average, of which at least 12 credits must be at the graduate level. Failure to register for two consecutive terms may result in the student being withdrawn from the program.

The Ph.D. program should be completed in four academic years. If the degree is not awarded within a period of six years from initial registration, the student's eligibility for the degree will be terminated and the student will be withdrawn from the program. Under exceptional circumstances, extensions may be granted by the Dean of the College of Graduate Studies.

Students who, for health or personal reasons, including childbirth and having primary responsibility for the care of a child, must interrupt their studies should apply for a leave in writing through the Dean of the College. The period of leave is not counted toward time to completion.

Timeline and Schedule for Completion of Ph.D. Degree

Please refer to the Clinical Psychology Program Timeline in Appendix C.
Please refer to the Clinical Psychology Program Course Schedule in Appendix D.

**Ph.D. Thesis Committee**

Incoming students are encouraged to form a Ph.D. Thesis Committee as soon as possible after registering in the program. The Ph.D. Thesis Committee guides students through their dissertations and helps devise and approve the students' program of study throughout their Ph.D. program. By the end of the first term after registration in the program, the student must report the membership of his or her Ph.D. Thesis Committee to the PGSC using the Supervisory Committee & Program Plan Form here: [http://psyo.ok.ubc.ca/graduate/forms.html](http://psyo.ok.ubc.ca/graduate/forms.html). The composition of the Ph.D. Thesis Committee is determined in consultations with the supervisor. The Ph.D. Thesis Committee consists of at least three faculty members. One member is the supervisor, who must be a regular faculty member of the Psychology Department. In determining the number of faculty members on M.A. and Ph.D. supervisory committees when a student has co-supervisors, the co-supervisors shall count as one committee member. At least two of the members must be in the Psychology Department. With the approval of the Dean of the College of Graduate Studies, the committee may also include qualified persons who are not faculty members. When helpful, the student may add additional committee members. With the approval of the supervisor and PGSC, the student can make changes to the Thesis Committee after it has been formed.

**Course Requirements**

Students in the Clinical Psychology Program will be required to complete at least 45 credits of approved graduate courses, as follows:

[Note: coursework that was completed for an M.A. degree may be counted and credited for the Ph.D. coursework requirement]

- 6 credits of graduate-level statistics and methodology;
- 3 credits from each of the following cognate areas in Psychology:
  - Biological,
  - Cognitive-Affective, and
  - Social;
- 6 credits from each of the following areas:
  - Individual Differences;
  - Professional Practice: Assessment, and
  - Professional Practice: Intervention;
- 3 credits in the historical and scientific foundations of general psychology [a previously taken History of Psychology course (e.g., in an undergraduate program) may satisfy this requirement];
- 3 credits in each of the following areas:
  - Ethics and Professional Standards,
  - Program Evaluation, and
  - Psychometrics;
- 1 credit in each of the following areas:
Clinical Supervision, and
Internship Preparation

- successful completion of the Clinical Comprehensive Exam (see page 21);
- successful completion of the General Comprehensive Exam (see page 28);
- 300 direct client contact hours and 150 hours of supervision (inclusive of M.A. practica hours, where applicable);
- successful defense of the doctoral dissertation (PSYO 699);
- development of an acceptable level of clinical skill; and
- successful completion of a one-year internship in an CPA or APA-accredited or equivalent approved site.

Additional coursework may be required by a student’s supervisory committee and/or by the DCT. All coursework must be approved by the Ph.D. Thesis Committee.

See Appendix D for a breakdown of course schedules offered by year and semester.

See Appendix E for the grading scale at the doctoral level.

See Appendix J for a sample practicum course syllabus.

**Ph.D. Practicum**

Ph.D. students are required to successfully accrue a minimum of 300 hours of direct client contact (i.e., face-to-face) through practicum and at least 150 hours of supervision by a clinical psychologist who routinely employed individual and/or group supervision models, with at least one or more of the following intensive supervision methods (e.g., direct observation, co-therapy, (digital) audio/video tape review). Additionally, it is required that, of all the supervision hours, **25% consists of group supervision and 75% consists of individual supervision.** Please refer to Appendix M: Modified CUDCP Expectations for Internship Eligibility for more details.

All practica must be approved in advance by the DCT. Also, students must maintain registration in the applicable doctoral-level practicum courses and sections (PSYO 630) during completion of their practica.

**Ph.D. Internship**

Clinical Ph.D. candidates are required to complete a twelve-month (2000-hour equivalent) internship. Internship settings are designated and approved by the program, and supervision is provided by registered doctoral-level psychologists who are approved by the program. Students are strongly encouraged to apply for CPA-accredited internships and to use the APPIC matching service. Before attending the Ph.D. internship, students must have already completed their coursework, their comprehensives, their dissertation proposal, and their dissertation data collection.
Doctoral students must register in the applicable course and section (PSYO 730) during the completion of the internship.

Second-Year Paper

The second-year paper is completed by students who transfer directly into the Ph.D. program without an M.A. degree. The second-year paper should represent an original empirical contribution to the student’s field of study, which is intended to be publishable. In addition to the paper, students will complete a public presentation of their research at a Department-approved forum (e.g., a research conference or a presentation open to the University community). In cases where students do not continue in the program, either by their own choice and/or by the direction of the Department, this paper may serve as a Master’s thesis if judged of sufficient quality. Students will typically complete this paper at the end of their second year.

Comprehensive Exams

The Comprehensive Exams are intended to provide an assessment of the mastery of a breadth of research areas related to a student's program of study. The comprehensive exams should be completed by the end of the second year of the Ph.D. program. There are two required comprehensives and each is designed in consultation with the Research Supervisor and Ph.D. Thesis Committee.

(1) Clinical Comprehensive Exam

The following procedures were initially approved by the Clinical Training Committee in Fall 2015 and revised and ratified on September 13, 2016, and will supersede procedures described in previous handbooks.

Purpose

The Clinical Comprehensive Examination is administered to doctoral students in the Clinical Psychology Program to assess foundational and functional competencies necessary for success as a registered psychologist.

Foundational competency areas to be assessed include:
- Knowledge, understanding, and application of evidence-based practice
- Individual and cultural diversity
- Ethical, legal, and professional standards
- Knowledge of related disciplines and ability to interact with professionals across disciplines
- Clear and articulate expression in both written and oral formats

Functional competencies to be assessed include:
- Assessment and case conceptualization
- Intervention
- Consultation
Clinical Comprehensive Examination Format

The Clinical Comprehensive Examination will consist of (1) a Written Case Summary, and (2) an Oral Examination conducted by a three-member Clinical Comprehensive Examination Committee.

Case Summary: General Clinical Psychology

The case should reflect a clinical case that focuses on assessment and treatment of a prevalent form of psychopathology, that is not related to a student’s primary area of research. Cases used in previous coursework should not be used for the Comprehensive Examination.

Case Selection: Selection of the clinical psychology case for the comprehensive exam is chosen by the student. The case should be based on rich case material that allows for full examination of the clinical and empirical issues of the case. Case outcome (e.g., clinical improvement) should not be used as the basis of case selection. A comprehensive clinical psychology case presentation will include the following clinical and research components:

Clinical Components

- Relevant patient social history;
- assessment battery used and justification for measures chosen;
- diagnosis(es) supported by Diagnostic and Statistical Manual of Mental Disorders (DSM-5) criteria and case conceptualization;
- treatment plan utilizing empirically supported intervention, including referrals to appropriate providers;
- brief summary of course of treatment;
- socio-cultural factors including ethnicity, gender, age, and other relevant factors that you engaged in self-reflection on, or could have, that may have impacted treatment approach/progress/outcome;
- identification and resolution of ethical dilemmas according to CPA Code of Ethics, the College of Psychologists of British Columbia’s (CPBC) Code of Ethics, and any other applicable laws and regulations; and
- review of therapist’s learning and self-reflection.

Empirical Components

- Focused literature review drawing supported conclusions with regard to best clinical practices or lack thereof, as relevant to the case;
- highlight research design and methodology issues relevant to studying the psychological disorder or its treatment;
- psychometric issues related to assessment measures used to diagnose or monitor a psychological disorder;
• identify and evaluate gaps in the literature; note emerging research that holds promise for understanding the disorder or its treatment; and
• discuss research related to diversity to include gender, age, ethnicity, and other cultural factors; note disparities in incidence/prevalence and outcomes.

Page limit: The document is expected to be no longer than 25 pages, with the literature review constituting no more than 50% of the document. (The page limit does not include any appendices: test protocols, de-identified chart notes, reports, as available.)

The Written Case Summary is meant to be students' sole intellectual property. Students are to complete the Written Case Summary individually; they are not permitted to have peers or faculty review and/or give feedback on the document.

Written Case Summary

Regular Examination Schedule
Graduate students are expected to take the Clinical Comprehensive Examination at the end of Term 2 of the Winter Session of the second year of the Ph.D. program for students who entered the Clinical Psychology Program at the M.A. level, OR at the end of the Term 2 of the third year of the Ph.D. program (for those students who entered the Clinical Psychology Program at the Ph.D. level). Students will complete the Written Case Summary by close of business 2 weeks before the first day of exams and the Oral Examination on the first day of exams (unless there is a known exam conflict and the date can be moved somewhere else within the exam period) of the same term.

If any portion of the exam is failed, the student will have to retake the failed portion(s) the following term.

Failure to take the Clinical Comprehensive Exam by the first day of exams of Term 2 of the Winter Session of the year they choose to do their Clinical Comprehensive Exam will be considered a failed attempt at the Clinical Comprehensive Exam, and students must then successfully pass the written and oral components of the exam during their second attempt in accordance with the retake procedures and schedule.

Early (Accelerated) Examination Schedule

Upon consultation with their Research Supervisor, doctoral students may choose to take the Clinical Comprehensive Examination on an accelerated or early schedule. Should students choose this option, the Examination must be taken at the end of the Term 1 of the Winter Session of the 2nd year (see Table 1 below).
Case Selection Timing and Procedures

Students planning on taking the Clinical Comprehensive Examination according to the regular schedule should identify an appropriate case one term prior to their Examination (i.e., first day of classes in September - Winter Term 1 of their 2nd year) to have a sufficient amount of time to prepare. Similarly, students who opt to take the Clinical Comprehensive Examination according to the accelerated schedule should identify an appropriate case one term prior to their Examination (i.e., the first day of classes in July – Summer Term 2 of their 1st year) to have a sufficient amount of time to prepare. Should students encounter difficulty identifying an appropriate case, they are encouraged to consult with their Research Supervisor and/or a past Clinical Supervisor. Case selection should be submitted to the Director of Clinical training using the Clinical Comprehensive Examination Case Selection Form no later than the second week of the term they will be taking the exam (see Appendix K for the Case Selection Form).

Any students who fail to select cases by the second week of the term that they will be taking the exam will not be allowed to take the Clinical Comprehensive Examination that term. Further, these students will be considered to have failed their first attempt at the Clinical Comprehensive Examination and must successfully pass the written and oral components of the exam during their second attempt in accordance with the retake procedures and schedule.

Standard Due Dates for the Written Case Summary

Regardless of whether a student opts to take the Clinical Comprehensive Examination according to the regular or accelerated schedule, the Written Case Summary is due by close of business 2 weeks before the first day of exams of either Term 2 of Winter Session (regular exam schedule) or Term 1 of the Winter Session (early exam schedule) of the 3rd or 4th year.

Note: Students must not turn in a Written Case Summary before the standard due date with the expectation of expedited review of the summary and early completion of the Oral Examination. All Clinical Comprehensive Examination activities will occur at the end of the term according to the standard dates below (see Table 1 below). No component of the Clinical Comprehensive Examination may be taken during the Summer Session, except in extenuating circumstances with the approval of the DCT.

Retake Schedule

Any student who takes the Clinical Comprehensive Examination according to the regular schedule and fails to receive an overall passing score must retake the exam at the end of Term 1 of the Winter Session of the 4th year in accordance with the standard dates (see Table 1). Any student who opts to take the Clinical Comprehensive Examination on an accelerated schedule and fails to receive an overall passing score must retake the exam at the end of Term 2 of the Winter Session of the 3rd Year in accordance with the standard dates (see Table 1). A student can request an early retake of their exam.
However, we strongly suggest that students only consider this option if they are confident that the issues identified can be easily remediated.

Table 1.

<table>
<thead>
<tr>
<th></th>
<th>Term</th>
<th>Written Exam Standard Due Date</th>
<th>Oral Exam Standard Date</th>
<th>Retake Term</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Regular Schedule</strong></td>
<td>Term 2 of Year 2 of Ph.D. (M.A. entry track) OR Term 2 of Year 3 of Ph.D. (Ph.D. entry track)</td>
<td>2 weeks before first day of exams</td>
<td>First day of exams</td>
<td>Term 1 of Year 3 of the Ph.D. (M.A. entry track) OR Term 1 of Year 4 of the Ph.D. (Ph.D. entry track)</td>
</tr>
<tr>
<td><strong>Accelerated Option</strong></td>
<td>Term 1 of Year 2 of Ph.D. (M.A. entry track) OR Term 1 of Year 3 of Ph.D. (Ph.D. entry track)</td>
<td>2 weeks before first day of exams</td>
<td>First day of exams</td>
<td>Term 2 of Year 2 of the Ph.D. (M.A. entry track) OR Term 2 of Year 3 of Ph.D. (Ph.D. entry track)</td>
</tr>
</tbody>
</table>

Scoring of the Written Case Summary

The Written Case Summary will be scored as PASS or FAIL based on demonstration of the key competencies outlined in the Written Case Summary competency checklist. A passing score from two out of three committee members constitutes successful completion of the Written Case Summary. If students earn a failing score, they must retake the Written Case Summary portion of the Examination according to the procedures outlined below (see Appendix K for the scoring rubric for the Written Case Summary).

Written Case Summary Retake Procedures

Failure of case – In the event that a student receives a failing score on the Written Case Summary, the student must (a) identify one new case, and (b) re-write and re-submit the new Written Case Summary at the end of the next term according to the standard dates (see Table 1). The Clinical Comprehensive Examination Committee membership will remain unchanged, unless a committee member needs/ wants to recuse themselves from the retake. The Clinical Comprehensive Examination Committee will evaluate the student’s performance on the new case only. Upon re-taking the exam, the student must achieve a PASS on the Written Case Summary.
Failure on second attempt – If the student does not achieve an overall passing score on the Written Case Summary on the second attempt, the outcome will be deferred to the Clinical Training Committee, who will make any final decisions and recommendations, including possible termination from the program.

Oral Examination

Arrangement

1) The duration of the oral examination will be 60 to 90 minutes (60 minutes minimum).
2) The duration of the student’s introduction will be one minute.
3) The duration of the examiners’ questions will be 60 or more minutes.
4) There will be at least three rounds of examiners’ questions.
5) The examination will be held in camera (meaning in private, not open to the public).
6) Examiners from outside the students’ graduate program cannot be included.
7) Examiners who are not members of the Clinical Training Committee (i.e., core faculty) can be included.
8) The student’s Research Supervisor may have a role in the examination, if wanted by the student and by the faculty.

The Oral Examination will be conducted by each student’s Clinical Comprehensive Examination Committee on the first day of exams. The Oral Examination will consist of an expanded exploration of the clinical case presented in the Written Case Summary. During the Oral Examination students should be prepared to:

1) Explain and expand upon any element of the written case presentation.
2) Demonstrate the ability to reflect on professional practice and professional development.
3) “Think on their feet” and be able to answer and conceptualize issues about the case in the light of potentially different variables, factors, or data.

Adjudication Process

Scoring of the Oral Examination

The Oral Examination will be scored as PASS or FAIL based on demonstration of the key competencies outlined in the Oral Examination competency checklist. A PASS score from two out of three committee members constitutes a successful PASS of the Oral Examination. If students earn a FAIL score, they must retake the Oral Examination portion of the Examination according to the procedures outlined below (see Appendix K for the scoring rubric for the Oral Examination).
Oral Examination Retake Procedures

Failure of case – In the event that a student receives a failing score on the Oral Examination, in line with the retake schedule (see Table 1) the student must provide a thorough case summary document*, including:

- Intake information;
- measures administered/scores and results;
- case conceptualization;
- diagnostic impressions;
- treatment summary; and
- reflections.

*This case summary document is essentially the same format of the original written case, without the literature review. For re-take purposes, this document is not for evaluation; it is solely for the examiners to discuss in preparation for the oral examination retake.

The Comprehensive Examination Committee Chair will relay the conditions of the retake to the student. However, the student is also required to set an appointment with each committee member to obtain feedback on areas for improvement.

The Clinical Comprehensive Examination Committee membership will remain unchanged, unless a committee member needs/wants to recuse themselves from the retake. The Clinical Comprehensive Examination Committee will evaluate the student’s performance on the new case only. Upon re-taking the exam, the student must achieve a PASS on the Oral Examination.

Failure on second attempt – If the student does not achieve a PASS on the Oral Examination on the second attempt, the outcome will be deferred to the Clinical Training Committee, who will make any final decisions and recommendations, including possible termination from the program.

Comprehensive Examination Committee Membership

The Comprehensive Examination Committee for each student will consist of 3 members. Two members will be core clinical faculty (members of the Clinical Training Committee) who are registered psychologists. The third committee member may be a non-clinician faculty member; however, this should typically be reserved for the non-clinical faculty Research Supervisor of the student if he/she wishes for them to be on his/her committee. Students should not include the Clinical Supervisor of the case they are submitting for the Clinical Comprehensive Exam in their list of desired Comprehensive Examination Committee members. However, an exception to this policy can be made if the student's Research Supervisor is also the Clinical Supervisor on the case described in the Written Case Summary. In this situation, it is recommended that students speak to their Research Supervisor before including him/her in their list of desired Comprehensive Examination Committee members.
Students can select one member of their Comprehensive Examination Committee by submitting the names of three possible members in rank order of preference. Students may include their Research Supervisor and past Clinical Supervisors in their list of three Committee member candidates. Faculty members will be approached in the order of preference listed by the student and will be confirmed to the Committee based on their availability and willingness to serve. The remaining two Committee members will be selected by the DCT in consultation with the Clinical Training Committee. The DCT will notify students of their assigned Comprehensive Examination Committee when all committee members are confirmed. The DCT, in consultation with the Clinical Training Committee, will select the chair of the Committee.

Examples of Previous Clinical Comprehensive Exams

Finally, in order to help students to prepare for the Written Case Summary portion of the Clinical Comprehensive Exam, four previous (redacted) examples are made available for student review. Examples of both “passed” and “failed” exams are available. Students are encouraged to read these Exams to get additional information and exposure to the Clinical Comprehensive Exam process.

See Appendices K and R for all forms related to the Clinical Comprehensive Exam.

(2) General Comprehensive Exam

The possible formats for the General Comprehensive Exam include

- a significant literature review in the form of either a novel organizing framework (as in a *Psychological Bulletin* article) or a state-of-the art summary of a topic (as in *Annual Review of Psychology*); or
- a focused research project undertaken in collaboration with a Psychology faculty member, a Psychology adjunct, or other researcher who has been approved by the PGSC; or
- a grant proposal prepared in accordance with the standards of a major granting agency. Examples of grant proposals students may prepare include, but are not limited to, the following: SSHRC Insight Grant, SSHRC Postdoctoral Fellowship, NSERC Postdoctoral Fellowship, NSERC Discovery Grant, CIHR Postdoctoral Fellowship, Banting Postdoctoral Fellowship, etc. *Please note: Students are not permitted to submit doctoral-level grant proposals for this comprehensive*. The aim of this comprehensive is to provide students with an opportunity to prepare a grant proposal for funding they can use upon completion of their doctoral studies; and
- a complete senior-level course in an approved area. The aim of this comprehensive is to provide students with the opportunity to develop all the materials necessary to teach a senior-level psychology course. This includes the creation of a syllabus, reading list, PowerPoint presentations for each class, midterm and final exams, and/or rubrics for assignments. The preparation should be such that the student could teach the class without any additional preparation.
• successful completion of the Examination for Professional Practice in Psychology (EPPP). Students are responsible for independently registering to write, pay for, and prepare for the exam. Students must provide proof of passing the EPPP to the Thesis Committee to receive credit for the comprehensive.

The Ph.D. Thesis Committee evaluates the submitted General Comprehensive Exam and then advises that
• the student has passed;
• the student must rewrite the comprehensive (normally students are allowed only one repetition of the comprehensive); or
• a recommendation be made to the Dean of Graduate Studies that the student be withdrawn from the doctoral program.

For each comprehensive completed (general and clinical) the student must complete the Psychology Comprehensive Approval Form with his/her committee (see Appendix R) and forward to the DCT for signature; the student must also provide an electronic copy of each comprehensive to Marlis Wecels for the student’s department file.

Admission to Candidacy

The typical doctoral student will be admitted to candidacy (i.e., all required coursework, comprehensives, and an approved dissertation proposal) upon completion of a three-year residency period. A student who is not admitted to candidacy within four years from the date of initial registration will be required to withdraw from the program. It is possible to apply for an extension in unusual circumstances.

Please refer to candidacy information and required forms in the Graduate Policies and Procedure Manual: https://gradstudies.ok.ubc.ca/about-cogs/policies-procedures/

Ph.D. Dissertation Proposal

The Research Supervisor must convene a meeting of the Ph.D. Thesis Committee with the student at least once every year to discuss the dissertation and to ensure that satisfactory progress is being made. A satisfactory dissertation proposal is normally submitted to the Thesis Committee before the start of the third Ph.D. year and must be presented orally by the candidate to the Department of Psychology. Dissertation proposals must be stand-alone, written documents that include an abstract, a literature review, one or more well justified research questions, a method section, a results section, a discussion section, and a references section. Data collection must not begin before proposals have been approved by all members of the Thesis Committee and by the Department Head. Proposal defenses should be held between 10 am and 4 pm, all Thesis Committee members must be present, and an advertisement should be posted and be emailed to all psychology faculty and students inviting them to attend. Notice of the proposal defense must be posted at least 10 days in advance. After the oral presentation, the student’s Thesis Committee will discuss the acceptability of the proposal. The Thesis Committee will then make one of the following recommendations:
1. formally approve the proposal. Such approval implies that the Thesis Committee considers the procedures outlined in the proposal as appropriate for the adequate investigation of the stated problem;

2. approve the proposal contingent on the outcome of preliminary investigation(s);

3. withhold approval of the proposal until certain inadequacies (for example, changes in experimental design) are overcome; or

4. not give its approval because the problem is an inappropriate one.

Following the PhD Dissertation proposal, the student as well as the committee, must complete and sign the Psychology Thesis & Dissertation Approval Form (see Appendix Q) and forward to the DCT for approval. The student must also provide the final dissertation proposal (electronic copy) to Marlis Wecels, for the student’s department file.

Ph.D. Dissertation Examination

The UBCO College of Graduate Studies web site provides the procedures for preparing dissertations, preconditions for a dissertation’s defense, the scheduling of dissertation’s examinations, examination committee composition, external examiners, examination procedures, the responsibilities of examiners, the procedures that examiners must follow when judging dissertations, and submission of the final dissertations.

Notice of a defense must be posted at least 10 days in advance and, at that time, a copy should be made available to those who are interested in reading the dissertations beforehand. All graduate students and faculty members are invited to attend each dissertation defense.

Some helpful links are provided below:

*Thesis Information*

*Thesis Preparation and Formatting*

*Graduate Policy and Procedure Manual*
[https://gradstudies.ok.ubc.ca/about-cogs/policies-procedures/](https://gradstudies.ok.ubc.ca/about-cogs/policies-procedures/)

V. CLINICAL PLACEMENTS

Statutory Declaration and Criminal Records Check

As stated in the Admissions section(s) of this Handbook, all admitted clinical students are required to clear a Criminal Record Check prior to being permitted to register in the program/embarking upon practica. Further, for program continuance, all clinical students must maintain their clearance throughout the program, complete updated criminal checks
as required by law (i.e., every 5 years, at the time of printing of this Handbook) and must also make an annual Statutory Declaration to the DCT regarding their status prior to each September.

Students must also report any new criminal charges or convictions to the DCT immediately. A student cannot participate in practicums with vulnerable people until a new criminal record check consent form is submitted to the Criminal Records Review program and appropriate clearance has been provided.

Students should be advised that there are provisions within the Criminal Records Review Program for employees and/or volunteers for the sharing of Criminal Record Check results between agencies (see here: [http://www2.gov.bc.ca/gov/content/safety/crime-prevention/criminal-record-check/sharing-results](http://www2.gov.bc.ca/gov/content/safety/crime-prevention/criminal-record-check/sharing-results)). Note, however, some practicum sites may require completion of additional Criminal Record Checks during the program. Students who have any concerns regarding these processes should speak to the DCT.

Please refer to Appendix B for Criminal Records Check information and to Appendix N for the Statutory Declaration form.

**Liability Insurance Coverage**

All students on *unpaid* M.A. practica and Ph.D. practica, have liability insurance coverage from UBCO as long as the clinical activities they are undertaking are requirements of their degree program and are approved by the DCT. Students must also maintain registration in their corresponding practicum course and sections, and thesis courses while completing practica, to ensure liability coverage.
Approval of Clinical Settings

A list of possible clinical placement settings is provided in Appendix F. These settings are subject to change.

Some clinical settings that students wish to train in may be unfamiliar to UBCO faculty members. Such sites may be considered for student training but must adhere to the following criteria:

- CPA- or APA-accredited sites are preferred (particularly for internships);
- the clinical training is supervised by experienced doctoral-level registered psychologists;
- the training program offers breadth and depth of clinical experience with respect to diversity of client population and presenting problems;
- the graduate student is exposed to increasingly complex cases under appropriate and meaningful supervision; and
• the setting provides the following to their trainees: assessment, intervention and consultation strategies related to clinical practice, and where possible, opportunities for clinical research, program evaluation, supervision training, and inter-professional experience.

Paid practica are not permitted by the program.

All clinical placements must be approved in advance by the DCT.

Clinical Supervisors

Clinical Supervisors must be psychologists who are registered or licensed in the province or state in which they practice. Master’s level supervisors and registered health professionals from other clinical disciplines may be involved in the supervision on the condition that they are not the primary supervisor, and that the primary supervisor is a registered/licensed psychologist. The primary supervisor is the individual who oversees the progress of the practicum or internship student, is responsible for the majority of the supervision, and who signs off on the clinical documents prepared by the student. Clinical placements are designed to offer the student breadth and depth of experience. Hence students are encouraged to work with their Clinical Supervisors to expand their exposure to assessment and therapy/interventions, different types of presenting problems, different types of client population, and opportunities for clinical research, supervision, and inter-professional clinical collaboration. However, the degree to which this objective can be accomplished depends on the setting and the Clinical Supervisor.

M.A. Clinical Practicum

Students in the M.A. program are required to complete clinical practica in which they accrue 100 direct client contact hours and 65 hours of supervision. In their first year, students must complete six credits in Psychopathology, six credits in Assessment, and three credits in Ethics and Professional Standards before starting their first practicum. The first practicum is typically comprised of psychological assessment only (typically neurocognitive assessments). Students begin to take on intervention clients in the summer semester after their second year, after they’ve completed six credits in Intervention. Students typically complete their Master’s level practicum in the Interprofessional (Psychology) Clinic in the Psychological Assessment and Treatment practicum. Practicum placement must be approved by the DCT.

Ph.D. Clinical Practicum

Students in the Ph.D. program are required to complete clinical practica in which they accrue 200 direct client contact hours and 85 hours of supervision. This may be undertaken any time during the Ph.D. training, but it must be completed prior to applying for internship. Please refer to Appendix M: Modified CUDCP Expectations for Internship Eligibility for more information about clinical hours. All practicum placements must be
UBCO Clinical Psychology

approved by the DCT. A small portion of the clinical practicum (not more than 10%) could entail involvement in research activities that take place at the training site.

M.A. and Ph.D. Practicum Goals/ Learning Expectations, Logs, and Evaluations

After students have made arrangements for a practicum at a site with approval from the DCT, they need to note the following:

Prior to starting an M.A. or Ph.D. practicum, students should

- confirm they have registered into the correct practicum course and section (530 series for M.A. students; 630 series for Ph.D. students). Students must also maintain registration continuously in the corresponding thesis or dissertation course (599 for M.A. and 699 for Ph.D.) during all terms of their program. It is critical for students to maintain registration status, as students on practica will have their liability insurance covered through the University.
- complete with their supervisor the Clinical Practicum/Placement Goals (see Appendix G). This form is to be signed by both the student and the supervisor, and forwarded to the DCT for review and signature. The original copy will be placed in the student’s file. If the student is engaged in two or more rotations/programs in their practicum, then separate Clinical Practicum/Placement Goals should be completed for each rotation/program.

During the course of the practicum, students should

- keep a log of their supervision hours with the primary and secondary supervisors by using Time2Track* (https://time2track.com). Time2Track documents the types and duration of the clinical activities in order to collect essential data for APPIC application and/or professional registration with a regulatory body. Moreover, the DCT requires the information to complete APPIC recommendations for students. For the purpose of the program, Time2Track adds up the total number of hours undertaken in various activities during the entire practicum: assessment, intervention/therapy, clinical documentation, supervision, professional development (conferences, readings required for the practicum, etc.), and other types of activities specific to the practicum experience. It also allows students to print off their hours to send to the DCT for approval at the end of the practicum. All clinical students are expected to utilize the Time2Track software and should check with the UBCO Clinical Psychology program regarding setting up an account.
- complete an informal mid-point self-evaluation using the Student Report on Clinical Placement and Performance Appraisal (see Appendix H) as a guide depending upon the nature and length of the rotation; students should confirm this mid-point requirement with the DCT at the beginning of each rotation.
the Clinical program has an institutional account with Time2Track that is renewed annually through the program and is set-up a cost-share between the Psychology Clinic and the students.

At the end of an M.A. or Ph.D. practicum in each setting or in each program/rotation, students should:

- complete a self-evaluation using the Student Report on Clinical Placement and Performance Appraisal form (see Appendix H);
- review the self-evaluation with the Clinical Supervisor and have the primary Clinical Supervisor provide their own evaluation using the Student Report on Clinical Placement and Performance Appraisal (Appendix H); both the Supervisor and student sign the document. The form is then forwarded to the DCT who reviews and signs it, and places it in the student's file. If the student has more than one primary supervisor, it is requested that separate evaluations be undertaken with each supervisor. If secondary supervisors are involved in the student’s training and it is the opinion of the primary supervisor that an evaluation by the secondary supervisor would be useful and informative, the program will also appreciate receiving evaluations from the secondary supervisor;
- complete the Student's Evaluation of Supervisor form (see Appendix I); and
- maintain a copy of all forms before submitting them to the DCT.

**Predoctoral Internship**

Students in the Ph.D. program are required to complete a 2000-hour (or one-year, full-time equivalent) predoctoral internship. This is normally undertaken in the Ph.D. Year 5 (Ph.D. Year 4 for those who opted to condense the length of their doctoral training). All of the modified CUDCP criteria (see Appendix M) must be met before a student applies for an internship placement. It is recommended that students defend their dissertation before beginning the internship, but at the minimum, students should have their dissertation data collected.

Please refer to the Modified CUDCP Expectations for Internship Eligibility in Appendix M that outlines the eight criteria that are required by students prior to applying for internship. The guidelines are primarily those put forth by CUDCP but have been modified to reflect the direct client contact and supervision hours required by CPA. In order to determine if a student is ready to proceed with the application process for internship in the next academic year, students are asked to notify the DCT by May 1st of the year they plan to apply for internship. The following materials should be submitted to the DCT prior to the Spring retreat:

1. Time2Track/APPIC Tracking System current hours form
2. Projected hours for the coming year of their practicum training and at what sites
3. Updated Curriculum Vitae
4. Copy of transcripts (for program and graduation requirements)
5. Course requirements remaining, if any, and a DCT-approved plan for completing them
6. Cover Letter summarizing student's progress in the program (e.g., Comprehensive Exams and status of dissertation)
7. Practicum Evaluations (these will be pulled from the student's file)

A decision regarding readiness will be made by the Training Committee shortly after the Spring retreat in order to help students determine their course of action for the internship application year (e.g., whether they should begin to gather information for their applications). However, it is strongly encouraged that students have several conversations and discussions with their Research Supervisor and DCT long before this date so that there is a clear internship application plan in place. Once students have been approved to apply for internship, they are enrolled in the Internship Preparation course (PSYO 525) for the Fall semester. This course aims to familiarize students with the internship application and match process and to help them to create and refine their APPI applications. The DCT writes a letter of support for each student’s APPIC application at this time as well. If the student is not approved for internship readiness by the Training Committee, he/she will not be enrolled in PSYO 525 and the DCT will not write a letter of support for their APPIC application.

Selection of an internship site depends on the type of practicum experience that students already have and the type of clientele population they wish to declare their competency in for professional registration with a provincial professional regulatory board. Ph.D. students on internship typically stay with one clinical setting that offers them breadth and depth in training. If a student would prefer to attend a non-accredited internship site, he/she must seek approval from the DCT. In this circumstance, the DCT would closely review the training program being offered by the site to ensure that it is able to offer instruction equivalent to that of other internship sites. In particular, the DCT would use the CPA requirements for internship settings (as per the Accreditation Standards and Procedures for Doctoral Programmes and Internships in Professional Psychology, Fifth Revision, 2011) to determine whether the student would receive equivalent training. These requirements include, but are not limited to, that the site offers a full-time commitment over the course of one calendar year or a half-time commitment over two calendar years, provide a minimum of 1600 hours of supervised experience, that the student engages in a minimum of 4 hours of supervision each week (3 of which are individual), and the program has minimum standards for successful completion and provides the doctoral program with written appraisals of the student’s performance midway through and at the end of the training period. The DCT must approve a non-CPA/APA accredited internship site before the student will be able to attend; if the student chooses to attend without DCT approval, the doctoral degree will not be conferred.

APPIC Application Process

Students are expected to apply for internship via APPIC (the Clinical Psychology Program maintains a membership with APPIC and the National Matching Service).
Students are encouraged to seek CPA or APA-accredited internships, although non-accredited sites also participate in the APPIC process. For more information, please see www.appic.org and https://www.appic.org/Match/About-The-APPIC-Match

Please note the following: the application process requires significant preparation time. Complete APPIC applications include a completed APPI approved by the DCT, a letter of recommendation from the DCT, 2 to 3 letters of reference from Ph.D. trained Supervisors (Clinical or Research), a C.V., transcripts, four essays (500 words each), an individualized cover letter for each site to which you are applying, and for some sites, supplemental materials (e.g., de-identified assessment report or therapy progress note). The core APPI is due on November 1 of each year; individual internship sites have their own submission deadlines. Students are advised to start the application process early, afford referees plenty of time to complete their letters, and forward the relevant information and documents to the DCT in a timely fashion to meet the APPIC site application deadline. In Canada, all interview offers are sent on one day whereas in the United States, interview offers are sent on a rolling basis.

Predoctoral Internship Learning Expectations, Logs, and Evaluations

After students have been accepted at an internship site, they need to note the following:

Prior to starting a predoctoral internship, students should

- check whether they need to have their own practitioner’s liability insurance. Students on unpaid internships (which are rare) will have their liability insurance covered through the University. Students on paid internships will have to secure their own liability insurance coverage or have their coverage provided through their training site.

At the beginning of the internship, students should

- complete internship placement learning expectations/goals with their site supervisor(s) using the sites preferred forms. Typically, the student is engaged in two or more rotations/programs during the internship in which there are different primary clinical supervisors. Internship sites typically use their own documentation/forms for these purposes; these documents do not need to be sent back to the DCT. Students should consult the DCT if they have any questions about this practice.

During the course of the internship, students should

- keep a log of their supervision hours with the primary and secondary supervisors by using Time2Track. Time2Track permits the student to review the amount of time spent on supervision. Reports from Time2Track should be forwarded to the DCT at the end of the clinical placement to be placed in the student’s file. Students
are asked to keep a copy of the sheets for their own information prior to submitting it to the program.

- the student needs to document (using Time2Track) the total number of hours undertaken in various activities during the entire internship: assessment, intervention/therapy, clinical documentation, supervision, professional development (conferences, readings required for the practicum, etc.), and other type of activities specific to the internship experience. Keeping a log of their clinical and professional activities is also essential for qualifying for future professional registration with a regulatory body (i.e. a provincial or territorial licensing body).

At the **mid-point** of an internship rotation, students should

- undergo evaluation by their clinical site supervisor(s) using the internship setting’s documentation/forms;
- review the evaluation form and sign it with the supervisor(s) before the form is returned to the DCT for review and signing. If the student has more than one primary supervisor, it is requested that separate evaluations be undertaken with each supervisor. If secondary supervisors are involved in the student’s training and it is the opinion of the primary supervisor that an evaluation by the secondary supervisor would be useful and informative, the program will also appreciate receiving evaluations from the secondary supervisor.

At the **end** of Ph.D. internship rotation, students should

- undergo evaluation by their clinical site supervisor(s) using the internship setting’s documentation/forms;
- review the evaluation form and sign it with the supervisor(s) before the form is returned to the DCT for review and signing. The form is then forwarded to the DCT who reviews and signs it. The original is placed in the student’s file. If the student has more than one primary supervisor, it is requested that separate evaluations be undertaken with each supervisor. If secondary supervisors are involved in the student’s training and it is the opinion of the primary supervisor that an evaluation by the secondary supervisor would be useful and informative, the program will also appreciate receiving evaluations from the secondary supervisor.
- Students should maintain a copy of all forms before submitting them to the DCT.

**VI. MONITORING OF STUDENT PROGRESS AND ANNUAL REPORTING**

**Annual Records of Progress for the Clinical Psychology Program**

Graduate students are comprehensively evaluated annually using the *Clinical Psychology Program’s Annual Record of Progress* (see Appendix L). This report must be completed and submitted, with a copy of the student’s C.V. and include a summary of their clinical hours from Time2Track, to the DCT on or before the day of the Spring
retreat each year. The purpose of this evaluation is to ensure that students are progressing with the goals, objectives, and competencies required by the program, to identify areas of strength and/or difficulty, to provide students with necessary feedback on their progress, to implement scaffolding/remediation planning as indicated, or to provide exit planning from the Clinical Program where applicable.

The Annual Record of Progress requires information about all elements of the program, including coursework, clinical skill development, research, Comprehensive Exams, Thesis Committee creation, awards, grants, and scholarships, publications, presentations, teaching assistantships, research assistantships, departmental citizenship, internship readiness, and work/life balance. This information is collected using both categorical and written responses. Students must complete the form by themselves first to afford them the opportunity to reflect on their progress and to demonstrate self-awareness and insight into their strengths and weaknesses as a student. He/she must then meet with their Research Supervisors to review the Annual Record of Progress; the Research Supervisor then makes any necessary revisions to the document before sending it as a soft copy to the DCT. The DCT then brings the Annual Record of Progress for each student to the Spring Clinical Psychology Faculty Retreat where the forms are used to facilitate the comprehensive review of each student.

The Training Committee evaluates the report using criteria that are relevant to competence as a professional psychologist with a scientist-practitioner training; they are as follows:

1. Academic Work - evaluated on the basis of (a) course grades (each student is required to maintain a minimum 68% average with at least B range work in each course), (b) expected completion of program requirements, and (c) the comprehensives;

2. Funding – noting any awards, grants, scholarships that were received; evaluation on the basis of performance in teaching assistantships or research assistantships;

3. Research - evaluated on the basis of progress of the thesis/dissertation. Research activities unrelated to the thesis/dissertation are encouraged insofar as they do not impede the progress of the thesis/dissertation;

4. Professional Suitability - The Department of Psychology may require any student to withdraw from the program at any time throughout the academic year or following the results of examinations at the end of any academic term, if he/she has been found unsuitable, on consideration of competence or professional fitness, for the practice of Clinical Psychology. **This right to require withdrawal prevails, notwithstanding any other provision in the Department of Psychology’s rules or regulations.**

A student may be required to withdraw when he/she has
a. demonstrated conduct which, if participated in by a practicing clinical psychologist, would result in violation of the standard of conduct and regulations of the CPBC, or Code of Ethics published by CPA, or the Ethical Principles of Psychologists published by the American Psychological Association (APA; as applicable);

b. in any clinic or practicum practiced incompetently due to ongoing impairment of functioning;

c. jeopardized professional judgment through self-interest; or

d. demonstrated behaviour with respect to other students, colleagues, faculty, the University, or the public which is exploitive, irresponsible, or destructive.

5. Clinical and Interpersonal Skills – evaluation on the basis of performance in practicum, and the clinical aspects of academic courses;

6. Comprehensives – evaluated on the basis of performance on the Clinical and General Comprehensive Exams; and

7. Readiness for Internship – evaluated by all faculty members and approved as ready for internship based on the CUDCP guidelines.

8. Professional Development Activities and accomplishments are also noted.

Following the evaluation by the Training Committee at the Spring retreat, the DCT indicates the student’s progress on the Annual Record of Progress by selecting one of the following options:

1. The student shall be advised that progress is satisfactory.

2. The student shall be advised that progress is unsatisfactory with specific suggestions for improvement noted.

3. The student shall be withdrawn from the program.

The DCT also adds written feedback about the student’s progress and training plan for the coming year on the Annual Record of Progress. Once this is complete, the Annual Record of Progress is finalized and printed, signed by the DCT, the Research Supervisor(s), the Head, and the student. One copy is placed in students’ department file, one copy is sent to the PGSC for use in making funding decisions, and another copy is submitted to CoGS to meet their Annual Report requirements. If an overall evaluation is anything other than satisfactory, the DCT will schedule an in-person meeting with the student and their Research Supervisor to follow-up and discuss next steps.

The Annual Record of Progress and comprehensive evaluation is another opportunity for the Training Committee to identify students who are not making adequate progress or who are struggling in a particular area of training. Students who are having difficulties will
develop, with the DCT and their Research Supervisor, a remediation plan with objectives, means (e.g., extra courses, directed readings, additional hours of clinical training), and timelines to be followed. Faculty members in the Department of Psychology whose input into the process is necessary will be consulted and be an active part of the remediation process.

The remediation plan is signed by the DCT, the Research Supervisor, and the student (and any other relevant faculty member(s)). The original is retained in the student’s department file and a copy is given to the student. The progress of the student is revisited either before or in the next annual review, depending on the nature of the difficulty and the remediation plans. In situations involving extenuating external circumstances, the program attempts to work with the student to arrive at a solution. Depending on the situation, the student might be given extensions to deadlines for course completion in consultation with the course instructor and/or Research Supervisor, or he/she may be advised to take a leave of absence with the support of the program. Students are always encouraged to work with the DCT in order to arrive at a solution that best fits their circumstance.

The Annual Record of Progress is then passed onto the Department of Psychology’s PGSC committee; they use students’ Annual Record of Progress and C.V.s to determine University Graduate Fellowship (UGF) funding allotments. Based on the information in these documents, the PGSC decides which students should receive a UGF and how much funding they should receive (awards are allotted in increments of $3,000). Although the PGSC makes decisions about UGF awards, students must ensure that they submit a UGF application to CoGS to be considered. For more information about the UGF, please see [http://gradstudies.ok.ubc.ca/scholarships-awards/ugf-scholarship.html](http://gradstudies.ok.ubc.ca/scholarships-awards/ugf-scholarship.html).

**Annual Evaluation by the College of Graduate Studies (CoGS)**

Although the Training Committee is primarily responsible for evaluating students’ progress and addressing concerns about a lack of progress, CoGS also reviews the Annual Record of Progress to ensure that students are meeting their University wide deadlines (e.g., reaching candidacy according to their timeline). They typically only provide students with feedback if there are outstanding issues with their progress; to do so, they use their Progress Report Review Checklist to indicate what requirement the student has not met. Students must then address these outstanding issues following the guidelines provided by CoGS (e.g., submitting a form to request an extension for meeting candidacy). Please see [http://gradstudies.ok.ubc.ca/forms.html](http://gradstudies.ok.ubc.ca/forms.html) for the forms required to respond to CoGS.

**VII. RESOLUTION OF STUDENT DIFFICULTIES**

Course instructors, research and clinical supervisors, or other individuals who interact with students might identify difficulties. If the difficulty is minor, it is recommended that the matter be resolved informally with the student and in consultation with the DCT, where appropriate.
When significant problems are identified, the DCT, the student, and the instructor/supervisor involved are responsible for developing a remediation plan. The plan should include the following:

1. identification of the problem,
2. goals of the remediation plan,
3. process by which the goals are to be achieved, and
4. criteria and a timeline for meeting the goals of the plan.

The plan should be provided in writing by the DCT, and signed by all parties (i.e., the DCT, the student, and the instructor/supervisor involved). The DCT monitors the progress of the student in meeting the goals of the remediation plan. The outcome of the remediation plan must be documented in writing by the DCT and placed in the student’s file. The progress of the student is revisited either before or in the next annual review, depending on the nature of the difficulty and the remediation plans.

In situations involving extenuating external circumstances, the program attempts to work with the student to arrive at a solution. Depending on the situation, the student might be given extensions to deadlines for course completion in consultation with the course instructor and/or research supervisor, or advised to take a leave of absence with the support of the program. Students are always encouraged to work with the DCT in order to arrive at a solution that best fits their circumstance.

If the student fails to meet the goals of the remediation plan, the student, instructor/supervisor involved, and the DCT can meet to either renew or revise the remediation plan. Only one renewal or revision will be approved. If the student still does not meet the goals of the renewed or revised remediation plan, the Department Head and, if appropriate, the Dean of Graduate Studies will be consulted about options such as alternate remediation plans. In extreme cases, termination of the program may be required and is recommended as a last resort.

Students who have complaints are expected to first seek informal resolution with the individual concerned, and seek consultation if they so wish. If necessary, they can make a formal written complaint that consists of the reason(s) for the complaint, details and dates, and the desired change. Students can lodge a complaint, make a grievance, or appeal at various levels that include the instructor/supervisor, the DCT, the PGSC, the Department Head, the Dean of Graduate Studies, and the Senate Committee on Appeals on Academic Discipline.

Please review the Information regarding the Appeal Procedure may in the UBC Okanagan Academic Calendar section linked here: http://www.calendar.ubc.ca/okanagan/index.cfm?tree=3,53,104,0

In addition, the College of Graduate Studies (CoGS) outlines “Suggested Procedures in the Event of Problems between Graduate Students and their Supervisors” in the CoGS
VIII. FINANCIAL ASSISTANCE AND EMPLOYMENT

Financial Assistance

Clinical Psychology students will be eligible for teaching assistantships. Under the terms of the BCGEU collective agreement, Master’s students have ongoing rights to the work for 2 years, subject to satisfactory performance. Doctoral students have similar rights that extend for 4 years.

Students may also have supplemental employment through research assistantships with various faculty, but typically with their Research Supervisor.

The Psychology Department may also provide students with up to $500 each year to travel to conferences or external practicum placement settings.

Additionally, the Office of Research Studies offers internal funding opportunities for graduate students (see http://ors.ok.ubc.ca/funding/internal.html).

Please also refer to the Awards and Scholarships information outlined below.

Employment

At the outset of their programs, graduate students are required to declare all extracurricular hours of work and/or volunteer commitments to their Research Supervisor(s); if such activities exceed 5 hours per week, students must obtain further approval from the DCT and/or the Department Head. This is to assist them in completing their program in a timely fashion. Students with Tri-Council funding may also have some restrictions with respect to employment hours, for work that is not research-based; students are strongly encouraged to inquire with the College of Graduate Studies and/or the applicable funding agencies to confirm the requirements in this regard.

IX. MISCELLANEOUS IMPORTANT ISSUES

Credit for Courses Taken at Other Universities

In the event that a student is accepted to the Clinical Psychology Program with prior graduate training, his/her transcripts and practicum experience are evaluated to determine the degree to which he/she has already fulfilled the degree requirements set forth by the Training Committee. Specifically, relevant course transcripts are reviewed by the DCT and the professor who teaches the equivalent course at the University, to
determine whether the class taken was sufficient. If the previously taken course is deemed to be sufficient, the DCT submits a form to recommend to CoGS that the student be granted transfer credit or course exemption for that particular course; the Dean of CoGS makes all final decisions about approval of transfer credits and course exemptions. If the previous training is not deemed to be sufficient, the student will be required to take the course again at the University. A similar protocol is used for practicum hours accrued at the previous institution; the DCT and one additional member of the Training Committee will review the practicum syllabus and the affiliated practicum evaluation to determine whether sufficient training has been provided. Regardless of the number of hours accrued during previous graduate training, only 50 direct client hours may be transferred to the Clinical Psychology Program; the student will need to complete the remaining 250 required direct client hours under the supervision of the Training Committee. If a student has completed an empirical M.A. thesis in Psychology, then the student will not be required to complete a second M.A. thesis. Requests for transfer of previous course credit and the identification of remaining coursework is typically evaluated by the DCT within the first month of the student enrolling in the program. The DCT meets with all incoming students individually in September of their first year to discuss their previous training and to create a training plan, including timelines for coursework and program requirements.

Eligibility for transfer credits and course exemptions may vary depending on whether the student is enrolled in the Master's or doctoral program. Please see: [http://www.calendar.ubc.ca/okanagan/index.cfm?tree=18,285,984,1167](http://www.calendar.ubc.ca/okanagan/index.cfm?tree=18,285,984,1167)

**Minimum Course Grades**

There are different minimum course grade requirements for M.A. versus Ph.D. students. Per the College of Graduate Studies (CoGS), M.A. students must obtain a minimum grade of 60% (C-) in coursework to receive course credit. Per CoGS, Ph.D. students must obtain a minimum grade of 68% in coursework to receive course credit. Marks less than 68% are unacceptable and the Department may require a student to repeat the course or may view the mark as grounds for termination from the program.

On the recommendation of the PGSC and the approval of the Dean of the College of Graduate Studies, the student may repeat a course for higher standing or take an alternate course. If the PGSC does not make such a recommendation, or if the recommendation is not approved by the Dean of the College of Graduate Studies, the student will be required to withdraw from the program. Students who obtain numerous grades below the minimum for their degree (i.e., 60% for M.A. students and 68% for Ph.D. students) will typically be required to withdraw from the program. When repeating a failed required course, a minimum mark of 74% must be obtained. Higher minimum grades may be required. The student will be informed of unsatisfactory academic progress in writing before any action regarding withdrawal is taken.

If a course is repeated, both marks will appear on the transcript. The higher mark will be used to determine promotion in a program and in any decision to admit or withdraw a
.student from a program. For all other purposes, averages will be calculated using both marks.

Please refer to Appendix E for the College of Graduate Studies’ grading scales.

**Research Supervisors**

A key person in the student’s education is the Research Supervisor. In the Psychology Department, the Research Supervisor is a mentor who provides much of the training through close collaboration. This training includes guiding the student in setting up a research program and in collecting, maintaining, analyzing, and interpreting data. The Research Supervisor provides the student with most of the specific information needed to become an independent researcher (see the CoGS Graduate Policy and Procedure Manual for more details on the role and responsibilities of Research Supervisors at https://gradstudies.ok.ubc.ca/about-cogs/policies-procedures/#item26. The primary Research Supervisor must be a full faculty member in the Psychology Department.

At the beginning of each academic semester, Research Supervisors and Supervisees are required to complete the Research Supervisor/Supervisee Contract (see Appendix S) and submit this document to the Director of Clinical Training (Dr. Lesley Lutes). The aim of the contract is to define the expectations and responsibilities of the graduate student and the supervisor.

At the end of each year, students are also required to submit an Annual Research Supervisor Feedback Form to the DCT (Dr. Lesley Lutes). The information on this feedback form is confidential and allows the DCT to mediate if there is conflict between Research Supervisors and Supervisees. See Appendix O for Annual Research Supervisor Feedback Form.

**Timeline for Faculty Feedback on Student Work**

All Research Supervisors and Thesis Committee members should provide their feedback on student theses and all other student work in a timely fashion. Specifically, faculty feedback should be provided within three weeks after student submission of their work. Holiday time should be excluded from these time counts.

**Awards and Scholarships**

All students are encouraged to apply for external funding from the relevant Tri-Council sources as well as internal funding. Students receiving external and internal awards maintain the rights to any teaching assistantships that have been awarded. Information on internal and external awards and scholarships is available from the College of Graduate Studies web pages, see here: https://gradstudies.ok.ubc.ca/tuition-awards-and-finance/award-opportunities/
Teaching Assistantships

Typically, all graduate students are employed as teaching assistants (GTAs) during the academic year (September – April) which are paid employment positions in the Department of Psychology. Students cannot be accepted into the Clinical Psychology Program if they have not been allotted a GTA unless their Research Supervisor is able to provide them with equivalent funding through a research assistantship (GRA) for the length of their degree. Students are allotted an M.A. GTA for a minimum of two years and a Ph.D. GTA for a minimum of four years, these positions can be extended depending on available funds at the discretion of the DCT and the Head of the Department. Students are notified at the beginning of each year whether they have received a teaching assistantship. If the student accepts the teaching assistantship, the necessary forms and documentation must be submitted to the Psychology Unit Assistant by the stated deadline(s). While students must be guaranteed a GTA for a period of six years, they have the option to refuse the position or request a half –time position (working only 6 hours/week rather than the typical 12 hours/week). If students refuse the GTA for a consecutive 12-month period, they no longer have rights to the position and the money can be used to fund a new graduate student. There also are a limited number of GTAs for summer courses; students must submit applications as directed in departmental postings for these positions. They are informed at the beginning of the summer whether they were hired for one of these positions; if they were then necessary forms and documentation must be submitted to the Psychology Unit Assistant by the stated deadline(s).

The British Columbia Government Employees Union’s (BCGEU) collective agreement outlines the required posting and application procedures, as well as remuneration policies, for Graduate Teaching Assistantships. Because teaching assistantships are jobs rather than awards, the employment income accumulated from graduate teaching assistantships is taxable.


Access, Privacy, and Records Management

UBC Okanagan must collect, use, and disclose personal information in a lawful and appropriate manner, following the regulations set up by the Freedom of Information and Protection of Privacy Act (“FIPPA”). The Act protects personal privacy by prohibiting unauthorized collection, use, or disclosure of personal information, and also ensures that the public have a legislated right of access to government records.

As a teaching or research assistant, you may have access to private information. Student names, ID numbers, and email addresses are personal information. You are responsible for understanding how to securely store and transmit personal information. Some basic responsibilities include ensuring that devices for UBCO business are encrypted, that personal information is not stored outside of Canada (i.e., Dropbox), and that any paper
records containing personal information, including exams, are stored securely. Exams are to be stored by the course instructor for one year; the Department arranges for confidential shredding of exams. Contact the Psychology Department’s Unit Assistant if you have any questions about private information or records management.

**Format For Theses & Dissertations**

UBC has strict policies for the formatting of theses and dissertations, mentioned earlier in this document, and which are available from the College of Graduate Studies web pages.

In addition to the UBC format policies, theses and dissertations must follow the recommendations of the most recent edition of the *APA Publication Manual*, except for allowances for the fact that journal editors and Thesis Committees are subject to different pressures, rules, and regulations. Some of the rules in the manual are for the convenience of printers and are irrelevant to theses. Authors of theses and dissertations should read the appendix of the *APA Manual*.

**Academic Integrity**

The academic enterprise is founded on honesty, civility, and integrity. As members of this enterprise, all students are expected to know, understand, and follow the codes of conduct regarding academic integrity. At the most basic level, this means submitting only original work done by you and acknowledging all sources of information or ideas and attributing them to others as required. This also means you should not cheat, copy, or mislead others about what is your work. Violations of academic integrity (i.e., misconduct) lead to the breakdown of the academic enterprise, and therefore serious consequences arise and harsh sanctions are imposed. For example, incidences of plagiarism or cheating usually result in a failing grade or mark of zero on the assignment or in the course. Careful records are kept in order to monitor and prevent recidivism.

More detailed descriptions of academic integrity and academic honesty, including University policies and procedures, may be found through the following links:

http://help.library.ubc.ca/planning-your-research/academic-integrity-plagiarism/

http://www.calendar.ubc.ca/Vancouver/index.cfm?tree=3,54,111,959

**Authorship Credit**

The CoGS policies on intellectual property are available from the CoGS web pages: https://gradstudies.ok.ubc.ca/about-cogs/policies-procedures/

Here are two good articles on the topic:


(Portions of the following section on Authorship Credit were adapted from documents provided by the University of Victoria.)

Publishing is critical to the advancement of science, and learning to publish is an important component of learning to conduct scientific research. It is important for the ethics of authorship to be explicit and relatively uniform, particularly as they apply to publications co-authored by supervisors and graduate students. Occasionally, a disagreement develops over the publication of collaborative research. The best policy is to prevent such disagreements from arising. Both Research Supervisors and students should make explicit what the expectations and contingencies are with respect to publication – order of authorship being the most frequent source of discord – prior to the collection of data. Students are also expected to write up their research for publication in a timely manner. Conflicts with former (and present) Research Supervisors can be avoided if such matters are negotiated beforehand. Faculty and students should attend to the issues described below when embarking on collaborative research.

APA: Ethical Principles of Psychologists and Code of Conduct

The following is from section 1.03 of the *Publication Manual of APA* (pp. 6-7)(5th Edition, 2001):

*Authorship is reserved for people who make a primary contribution to and hold primary responsibility for the data, concepts, and interpretation of results for a published work* (Huth, 1987). *Authorship encompasses not only those who do the actual writing but also those who have made substantial scientific contributions to a study... To prevent misunderstanding and to preserve professional reputations and relationships, it is best to establish as early as possible in a research project who will be listed as an author, what the order of authorship will be, and who will receive an alternative form of recognition.*

For a more extensive discussion of this text, see 8.05 Ethics of Scientific Publication, pp. 348-355 in the *Publication Manual of the APA* (2001), and especially the section on publication credit (pp. 350-351). Furthermore, Section 8.12 Publication Credit of the APA Ethics Code 2002 states that:

a) *Psychologists take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have contributed.*

b) *Principal authorship and other publication credits accurately reflect the relative scientific or professional contributions of the individuals involved, regardless of their relative status. Mere possession of an institutional position, such as Department Chair,
does not justify authorship credit. Minor contributions to the research or to the writing for publications are appropriately acknowledged, such as in footnotes or in an introductory statement.

c) A student is usually listed as principal author on any multiple-authored article that is substantially based on the student’s dissertation or thesis.

Research Supervisors should discuss publication credit with students as early as feasible and throughout the research and publication process as appropriate.

Guidelines, Additions and Caveats

1. Timeliness:

a) Regarding APA principle (c) above (thesis/dissertation research): If a student does not produce the first draft of the manuscript within 12 months of defending the thesis or dissertation, unless another arrangement has been negotiated in advance, the supervisor can take over the lead and be listed as principal author. The student, however, remains an author on the article.

b) Regarding course and other research activities: The same timeliness is expected for publishing research results produced in courses and other research activities.

2. Any and all papers reporting research performed under the direction of a supervising faculty member (i.e., not necessarily the Chair of the student’s supervisory committee) must be submitted to the supervisor for scrutiny before being submitted for publication, for two reasons. First, supervisors retain the right of first refusal on authorship of any work conducted under their supervision. Second, supervisors have the right to prohibit publication of questionable data or interpretations, because supervisors are responsible for the quality of research conducted in their labs.

3. A student can be a sole author or a co-author with other students when the research has not involved a faculty member’s intellectual input. However, research involving human subjects, which must be signed off by a faculty member, is subject to Guideline #2 above.

4. All sources of funding for research must be acknowledged.

5. If the supervisor and student cannot agree, even after consultations with peers, on their authorship-related decisions, an ad hoc third party arbitration process should be established in the Department.

The following best practices and recommendations are from the following source:

Process Recommendations:

1. Early in the collaborative endeavor of preparing a paper for publication, the supervisor should provide the student with information related to (a) how authorship decisions are made, (b) the nature of professional and non-professional contributions to publications, (c) the meaning of authorship credit and order, and (d) the importance of both parties agreeing on what contributions will be expected of each collaborator for a given level of authorship credit. This information will provide the student with the knowledge necessary to exercise his or her autonomy and to choose whether to participate in the authorship determination process with the supervisor.

2. The supervisor and student should assess the specific abilities of each party, the tasks required to complete the scholarly publication, the extent of supervision required, and appropriate expectations for what each collaborator can reasonably contribute to the project.

3. On the basis of this assessment, the collaborators should discuss and agree on what tasks, contributions, and efforts are required of both parties to warrant joint authorship and to determine the order of authorship.

4. Agreements regarding authorship credit and order may need to be renegotiated for two reasons. First, scholarly projects often take unexpected turns that necessitate changes in initial agreements made in good faith. Second, many manuscripts need to be revised substantially before they are accepted for publication. These revisions may require additional professional contributions beyond those necessary for the completion of the initial draft of the manuscript. Thus, when such revisions are required, the supervisor and student should re-examine their original agreement and determine whether it needs to be modified.

Outcome Recommendations:

1. To be included as an author on a scholarly publication, a student should, in a cumulative sense, make a professional contribution that is creative and intellectual in nature, that is integral to completion of the paper, and that requires an overarching perspective of the project. Examples of professional contributions include developing the research design, writing portions of the manuscript, integrating diverse theoretical perspectives, developing new conceptual models, designing assessments, contributing to data analysis, and interpreting results. Such tasks as collecting data, inputting data, carrying out data analyses specified by the supervisor, and typing are not considered professional contributions and may be acknowledged by footnotes to the manuscript.

Fulfillment of one or two of the professional tasks essential to the completion of a collaborative publication does not necessarily justify authorship. Rather, the
supervisor and student – in their discussions early in the collaborative process – must jointly decide what combination of professional activities warrants a given level of authorship credit for both parties. By necessity, there will be some variation in which tasks warrant authorship credit across differing research projects.

2. Authorship decisions should be based on the scholarly importance of the professional contribution and not just the time and effort made. In the opinion of Fine and Kurdek (1993), even if considerable time and effort are spent on a scholarly project, if the aggregate contribution is not judged to be professional by the criteria stated above, authorship should not be granted.

3. Authorship decisions should not be affected by whether students or supervisors were paid for their contributions or by their employment status. It is the nature of the contribution to the article that determines whether authorship credit is warranted and not whether participants received compensation for the efforts.

4. When confronted with ethical dilemmas, we advise supervisors to consult with colleagues when authorship concerns arise. Furthermore, supervisors should encourage their students to do the same, whether with faculty or with student peers. With the informal input generated from such consultations, it is possible that new light will be shed on the issues involved and that reasonable and fair authorship agreements will result.

Online Personal and Professional Image

In an increasingly technologically connected and public world, students are encouraged to remain mindful of behaviour and its consequences online, including the use of social networking, blogs, listservs, and email. It is likely that students, clients, supervisors, potential internship sites, research participants, and future employers may be interested in searching or accessing online information about you. While all of the information that may exist about you may not be within your control, students are urged to exercise caution and restraint and to utilize safeguards when possible. Activities online, including those that you may consider purely personal in nature, or online activities initiated by family and friends, may reflect upon your professional life. Keep in mind the ideals of the preamble to the CPA ethics code in which we aspire to do no harm to our clients, our research participants, or the profession with our actions – see full text Canadian Code of Ethics for Psychologists, Third Edition, here: http://www.cpa.ca/docs/File/Ethics/cpa_code_2000_eng_fp_jan2014.pdf

With this in mind, students are encouraged to consider the following cautions and suggestions:

1. With social networking sites such as Facebook, utilize privacy settings to limit access to your pages and personal information. Use thoughtful discretion when considering “friend” requests and consider the boundary implications. For example, it is not advisable to become virtual “friends” with clients or former
clients or undergraduates for whom you have supervisory or evaluative responsibilities. Also, encourage family and friends to be thoughtful about the information that they share about you online.

2. With email, keep in mind that everything you write may exist perpetually or be retrievable, so be thoughtful about what you write. Emails sent via the UBCO email system are considered public records and the property of UBCO. Participation in listservs include the peril of inadvertently writing things to a much more public audience than intended, so be cautious with posts to such forums. Email is not an appropriate venue to discuss confidential information, so if such communications are necessary make sure any information is non-identifiable.

3. Email “signatures” should be professional and appropriately represent one’s status and credentials. Students are encouraged to consider adding a confidentiality disclaimer to email signature files.

4. Be mindful of voicemail greetings if you utilize a private phone for any professional purposes (clinical work, teaching, or research). Make sure that such messages reflect a maturity and professionalism that you would want to portray to the public.

5. Online photo and video sharing, including within social networking sites, should be considered very public venues; use discretion when posting such information.

As with off-line activity, we encourage students to be mindful of the implications and make efforts to protect one’s professional image and reputation. If the program becomes aware of online activity that represents a violation of the CPA Code of Ethics, local, provincial or federal laws, or conflicts with UBCO policies and regulations including, but not limited to, acceptable use policies (see next section), such information may be included in evaluation of student progress and may be grounds for disciplinary action, including dismissal from the program.

Acceptable Use and Security of UBC Electronic Information and Systems

As stated in the UBC Policy #104, all Users of UBC Electronic Information and Systems are responsible for using them appropriately and maintaining their security. Users who breach this policy may be subject to the full range of disciplinary actions. In addition to any other sanctions that the University may impose in the event of a violation, the University may restrict or withdraw access to UBC Electronic Information and Systems, including computing privileges and network access. Please refer to the full text policy here: [http://universitycounsel.ubc.ca/files/2013/06/policy104.pdf](http://universitycounsel.ubc.ca/files/2013/06/policy104.pdf)
Student Declaration and Responsibility

As stated in the Academic Calendar and also by the College of Graduate Studies, upon registering, a student has initiated a contract with the University and is bound by the following declaration:

"I hereby accept and submit myself to the statutes, rules and regulations, and ordinances (including bylaws, codes, and policies) of The University of British Columbia, and of the faculty or faculties in which I am registered, and to any amendments thereto which may be made while I am a student of the University, and I promise to observe the same."

The student declaration is important. It imposes obligations on students and affects rights and privileges, including property rights. A student must not enroll at the University if she/he does not agree to become bound by the declaration above. By agreeing to become a student, she/he makes the declaration above and agrees to be bound by it.

Each student is required to provide the necessary information required for the University’s records. The student is also to keep Enrolment Services and the College of Graduate Studies informed of any changes in her/his name or contact information.

Students are required to inform themselves of the statutes, rules and regulations, and ordinances (including bylaws, codes, and policies) and to any amendments thereto applicable at the University. For more information, please see the Index of Board of Governors Policies (http://universitycounsel.ubc.ca/policies/index/) and Senate Policies (http://senate.ubc.ca/okanagan/policies).

Please also refer to the College of Graduate Studies’ Graduate Policy and Procedures Manual linked here: https://gradstudies.ok.ubc.ca/about-cogs/policies-procedures/

Health or Emotional Difficulties

Graduate school can be a very difficult and demanding time such that personal and emotional problems can arise. Seeking help when needed is a positive, professional response. Help-seeking is an ethical requirement if personal problems interfere with your ability to function professionally. Students experiencing health or emotional difficulties are referred to their Research Supervisor for individual consultation, and to the DCT or Research Supervisor for formal motions (i.e. taking a leave) related to the program.

Health and Wellness Clinic at UBCO for students

UBCO’s student health clinic provides treatment and consultation for any student health concerns, and offer health information and referrals to services for physical, emotional, or sexual/reproductive health. The clinic team of Registered Nurses and General Practitioners can assist students with: assessment and treatment of health problems; management of illness; prescriptions; providing first aid and managing injuries; sexual health including birth control, Plan B, pregnancy testing, STI testing, and PAP screens; vaccinations (i.e., tetanus, Gardasil, Hep A, etc.); lab test, blood work, x-rays, ultrasounds
and scans; a full menu of harm reduction supplies; allergy shots; referral to other health practitioners; health education and counselling.

http://students.ok.ubc.ca/health-wellness/health-clinic.html

To book an appointment, please call (250) 807-9270

Counselling at UBCO

Counsellors provide a space for students to examine and explore behaviours, relationships, feelings, or thoughts which cause concern or challenges in a student’s life. Whether these problems are primarily impacting personal, social, or academic life, counsellors can help students to strengthen the ability to cope and provide a valuable source of support. The counsellors can help students deal with a variety of issues.

http://students.ok.ubc.ca/health-wellness/counselling.html

To book an appointment, please call (250) 807-9270

The Health and Wellness Clinic also has links to other useful resources for students: http://students.ok.ubc.ca/health-wellness/resources.html

Other Referrals for Personal Difficulties

The DCT also maintains a referral list of community psychologists and private providers willing to help Clinical Psychology students.

Library Research Support

As an essential partner in the academic lifecycle, the UBC Okanagan Library offers a variety of resources and services to support you as a graduate student.

- A subject librarian to provide one-on-one help with creating search strategies, finding resources, and using various tools in your research and assignments.
- Access to borrow items for free from other UBC Libraries using our document delivery system and from libraries across the world using our interlibrary loan system.
- Citation management tools to help you organize your research in one place.
- Thesis and dissertation support focused on tools to guide you in discussing, interacting, presenting, and publishing your research.
- An institutional repository, cIRcle, to preserve your research and teaching materials, including theses.

Writing Support

The Centre for Scholarly Communication, located in LIB237, supports graduate students in disseminating their research by providing workshops and one-on-one consultations about all aspects of scholarly communication, from copyright to open access and author
rights. You can also get writing support for theses, dissertations, journal articles, grant proposals, and conference presentations.

UBC requires its faculty, staff, and students to comply with copyright law and UBC’s Copyright Requirements. The Copyright@UBC website provides information on copyright requirements and guidelines around course materials, assignments, and presentations.

**Disability Resources**

If you require disability-related accommodations to meet the course objectives please contact the Coordinator of Disability Resources located in the Student Development and Advising area of the Student Services building. For more information about Disability Resources or about academic accommodations, please visit the following website: http://students.ok.ubc.ca/drc/welcome.html

**Equity, Human Rights, Discrimination, and Harassment**

UBC Okanagan is a place where every student, staff, and faculty member should be able to study and work in an environment that is free from human rights-based discrimination and harassment. UBC prohibits discrimination and harassment on the basis of the following grounds: age, ancestry, colour, family status, marital status, physical or mental disability, place of origin, political belief, race, religion, sex, sexual orientation, or unrelated criminal conviction. If you require assistance related to an issue of equity, discrimination, or harassment, please contact the Equity and Inclusion Office – Okanagan.

Equity and Inclusion Office - Okanagan. Phone: (250) 807-9291; Toll-free: 1-866-596-0767 ext. 2-6353. Email: equity.ubco@ubc.ca
Web: http://equity.ok.ubc.ca/

**Office of the Ombudsperson for Students**

The mandate of the Office of the Ombudsperson for Students is to ensure that students are treated fairly in every aspect of their University life. The Office is a safe and confidential place where students can get assistance and guidance on existing resources and processes, and help in resolving conflicts related to fairness issues.

If you require assistance, please contact the Office of the Ombudsperson: ombuds.office@ubc.ca | (604) 822-6149 http://ombudsoffice.ubc.ca/

**Safewalk & Campus Security**

This is a service for you if you do not feel safe walking alone at night or are unsure how to get somewhere on campus.

For more information, see: http://security.ok.ubc.ca/safewalk.html
or call Campus Security Safewalk at (250) 807-8076, or the non-emergency Campus Security dispatch line at (250) 807-9236.

The Emergency contact number for Campus Security is (250) 807-8111.

**International Students**

International Programs and Services at UBCO provides advising, transition services, and programs for international students. They are available to assist you with issues related to safety, health insurance, employment, and your transition to UBC. For more information, please see: [http://students.ok.ubc.ca/international/welcome.html](http://students.ok.ubc.ca/international/welcome.html)

Additionally, the College of Graduate Studies also has information for International Students here: [https://www.grad.ubc.ca/prospective-students/application-admission/minimum-academic-requirements-international-credentials](https://www.grad.ubc.ca/prospective-students/application-admission/minimum-academic-requirements-international-credentials)

**Sexual Violence Prevention and Response Office**

A safe and confidential place for UBC students, staff and faculty who have experienced sexual violence regardless of when or where it took place. Just want to talk? We are here to listen and help you explore your options. We can help you find a safe place to stay, explain your reporting options (UBC or police), accompany you to the hospital, or support you with academic accommodations. You have the right to choose what happens next. We support your decision, whatever you decide.

Visit [svpro.ok.ubc.ca](http://svpro.ok.ubc.ca) or call us at 250.807.9640

**Independent Investigations Office**

If you or someone you know has experienced sexual assault or some other form of sexual misconduct by a UBC community member and you want the Independent Investigations Office (IIO) at UBC to investigate, please contact the IIO. Investigations are conducted in a trauma informed, confidential and respectful manner in accordance with the principles of procedural fairness.

You can report your experience directly to the IIO via email: [director.of.investigations@ubc.ca](mailto:director.of.investigations@ubc.ca) or by calling 604.827.2060 or online by visiting [investigationsoffice.ubc.ca](http://investigationsoffice.ubc.ca)
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## Appendix A: Faculty Research and Clinical Interests

### Core Clinical Psychology Faculty

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Education</th>
<th>Research Areas</th>
<th>Teaching Areas</th>
</tr>
</thead>
</table>
| JAN CIOE              | Associate Professor PSYCHOLOGY | M.A. & Ph.D. University of Western Ontario  
M.Phil. University of Cambridge | RESEARCH: human sexuality; forensic psychology; recovery of function from cortical lesions  
TEACHING: research methods and statistics; human sexuality |
| PAUL DAVIES           | Associate Professor PSYCHOLOGY | Ph.D. University of Waterloo  
Postdoctoral Fellowship Stanford University | RESEARCH: The focus of my research is intergroup relations; specifically, stereotypes, prejudice, and discrimination. One program of research examines diverse forms of social identity threat, and a second examines how perceived stereotypicality can influence the levels of prejudice and discrimination that target stigmatized individuals. The majority of my research is applied to business and law enforcement contexts.  
TEACHING: introductory psychology; social psychology; intergroup relations |
| SUSAN HOLTZMAN        | Assistant Professor PSYCHOLOGY | M.A. University of British Columbia  
Ph.D. University of British Columbia | RESEARCH: health psychology; adjustment to chronic illness; stress and coping; close relationships; caregiving; depression; chronic pain; organ transplantation; daily process methodologies; pathways through which the social environment can influence physical and emotional well-being in healthy and chronically ill populations  
TEACHING: introduction to psychology; health psychology; clinical assessment |
| MARVIN KRANK          | Professor PSYCHOLOGY           | B.A. Indiana  
Ph.D. McMaster University | RESEARCH: development of substance abuse in adolescence; vulnerabilities related to social learning; cognitive models that differentiate implicit (unconscious) from explicit memories; the relative role of automatic associations versus executive control; social experiences, dispositions, memories, and thoughts that predict transitions to substance use and to substance abuse.  
TEACHING: learning; psychometrics & test evaluation; addiction; questionnaire development |
<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Education</th>
<th>Research</th>
<th>Teaching</th>
</tr>
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<tbody>
<tr>
<td>MAYA LIBBEN</td>
<td>Assistant Professor PSYCHOLOGY</td>
<td>Ph.D. McGill University</td>
<td>Postdoctoral Fellowship Harvard Medical School</td>
<td>RESEARCH: cognitive neuroscience; psychopathology; schizophrenia; psycholinguistics; bilingualism; transitive inference; figurative language processing; eating disorders; uses behavioural and neurophysiological methods to examine language, attention and memory in clinical and non-clinical populations</td>
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<td>TEACHING: introductory psychology; psychopathology; practicum</td>
</tr>
<tr>
<td>LESLEY LUTES</td>
<td>Associate Professor PSYCHOLOGY</td>
<td>Ph.D. Virginia Tech</td>
<td>Pre-doctoral Internship University of Florida</td>
<td>RESEARCH: obesity intervention and prevention; developing alternatives to standard clinical treatments for obesity and associated health conditions; examining theoretically-based alternative treatment approaches in different populations; utilizing different treatment modalities and technologies; and examining alternative interventionist models for treatment delivery</td>
</tr>
<tr>
<td></td>
<td>Director of Clinical Training &amp; Graduate Program Coordinator</td>
<td></td>
<td></td>
<td>TEACHING: health psychology; health behaviour change; weight management; treatment for people with obesity and diabetes; innovative clinical treatments, including interventionist and modalities to help treat individuals with obesity and associated health conditions; professional standards/ethics; practicum</td>
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<tr>
<td></td>
<td>Clinical Psychology Doctoral Program</td>
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<tr>
<td>HARRY MILLER</td>
<td>Clinical Assistant Professor PSYCHOLOGY</td>
<td>B.Sc. University of Alberta</td>
<td>Ph.D. (Clinical Neuropsychology, Specialty Track – Clinical Neuropsychology) The Ohio State University</td>
<td>RESEARCH: assessment of memory with traumatic brain injury; peripheral vascular disease and cognition; emotional function post stroke; effects of alcohol use on recovery from brain injury</td>
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<tr>
<td></td>
<td>Clinical Psychologist Interior Health</td>
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<td>TEACHING: Neuroscience of Cognition; Course Director for DPAS (Doctor, Patient, and Society), Southern Medical Program; practicum</td>
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<tr>
<td>CAROLYN SZOSTAK</td>
<td>Associate Professor PSYCHOLOGY</td>
<td>M.A. Carleton University</td>
<td>Ph.D. University of British Columbia</td>
<td>RESEARCH: Rural mental health; barriers to accessing mental health services by adults 50 years and older in rural communities; media and mental health-related stigma; the role of media in combating stigmatizing attitudes about mental health disorders and suicide.</td>
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<td></td>
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<td></td>
<td>TEACHING: Mental health disorders; pop culture and mental health; use of psychological tests and assessments.</td>
</tr>
</tbody>
</table>
### ZACH WALSH
Associate Professor
PSYCHOLOGY
Registered Psychologist #2011

**Ph.D. Chicago Medical School/R.F.U.M.S**
**Postdoctoral Fellowship Brown University**

**RESEARCH:** cannabis use – medical and non-medical, substance use, hallucinogens, harm reduction, personality disorder, partner violence, aggression, third-stream/mindfulness behaviour therapies, drug policy

**TEACHING:** introduction to psychology; research methods and statistics; interventions; practicum

### DERRICK WIRTZ
Senior Instructor
PSYCHOLOGY
Director and Graduate Program Advisor for Psychological Science

**MA University of Illinois at Urbana-Champaign**
**PhD University of Illinois at Urbana-Champaign**

**RESEARCH:** subjective well-being; happiness; the good life; cultural psychology; flourishing & thriving; positive emotions; everyday beliefs, judgments and choices; pedagogical innovation in the teaching of psychology

**TEACHING:** introduction to psychology; research methods

### MICHAEL WOODWORTH
Professor, PSYCHOLOGY
Registered Psychologist #1765
Director of Clinical Training

**B.A. University of Victoria**
**Ph.D. Dalhousie University**

**RESEARCH:** psychopathy; violent offending; deception detection; computer-mediated communication; assessment and treatment of forensic populations; memory and psychiatric issues primarily within a legal context

**TEACHING:** psychopathy; criminal behaviour; deception detection; practicum

### Adjunct Clinical Psychology Faculty

#### COLIN COMFORT
Clinical Psychologist
Interior Health
Registered Psychologist #1875

**Ph.D. University of Calgary**

**AREAS OF INTEREST:** Adult hospital-based mental health; cognitive behavioural interventions; positive psychology; psychological assessment

**TEACHING:** community-based practicum

#### JESSICA DRISCOLL
Clinical Psychologist
Kelowna Psychologists’ Group
Registered Psychologist #2231

**Ph.D. Simon Fraser University**

**AREAS OF INTEREST:** Youth and adults who commit violent and/or sexual offences; risk assessment and risk management; psychological assessment; psychotherapy with youth and adults; trauma-informed therapy with first responders

**TEACHING:** in-house Psychology Clinic practicum
<table>
<thead>
<tr>
<th>Name</th>
<th>Clinical Specialty</th>
<th>Degree Institution</th>
<th>Areas of Interest</th>
<th>Teaching Area</th>
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</thead>
<tbody>
<tr>
<td>BONNIE HAYES</td>
<td>Clinical Psychologist, Interior Health, Penticton Health Centre</td>
<td>Ph.D. Queens University</td>
<td><strong>AREAS OF INTEREST:</strong> Health psychology; psychopathology, adjustment to chronic illness and pain; dialectical behaviour therapy skills training</td>
<td>TEACHING: community-based practicum</td>
</tr>
<tr>
<td>KIMBERLY KREKLEWETZ</td>
<td>Clinical Psychologist, Private Practice</td>
<td>Ph.D. Simon Fraser University</td>
<td><strong>AREAS OF INTEREST:</strong> Forensic assessment; cognitive behavioural therapy; women's mental health including pregnancy through postpartum; PTSD and other mental health issues among veterans, RCMP, and first responders; stress, anxiety, and mental health of university students</td>
<td>TEACHING: in-house Psychology Clinic practicum</td>
</tr>
<tr>
<td>STEVE SIGMOND</td>
<td>Clinical Psychologist, Youth Forensic Psychiatric Services</td>
<td>M.A. State University of New York</td>
<td><strong>AREAS OF INTEREST:</strong> youths who commit violent and/or sexual offences; cognitive distortions and thinking errors in youths who commit violent and/or sexual offences; tolerance for law violations and its possible connection to a sense of alienation in youths who commit criminal offenses; psychopathic characteristics in adolescent offenders</td>
<td>TEACHING: psychological assessment and treatment of youth forensic populations; managing aggression and violence in susceptible client populations</td>
</tr>
<tr>
<td>ALISON SPADAFFORA</td>
<td>Clinical Psychologist, Interior Health</td>
<td>Ph.D. University of Windsor</td>
<td><strong>AREAS OF INTEREST:</strong> child and adolescent development; developmental psychopathology; psychological assessment; resiliency, wellness, and positive psychology; psychotherapy with children and adolescents.</td>
<td>TEACHING: community-based practicum</td>
</tr>
<tr>
<td>CHRISTOPHER WILSON</td>
<td>Clinical Psychologist, Interior Health</td>
<td>B.A. Rhodes University, South Africa, Ph.D. University of Alberta</td>
<td><strong>AREAS OF INTEREST:</strong> Community mental health; individual and group cognitive behavioural therapy; dialectical behaviour therapy and borderline personality disorder; assessment of cognitive, emotional, and personality function</td>
<td>TEACHING: community-based practicum</td>
</tr>
</tbody>
</table>
Complementary Psychology Faculty who Supervise Clinical Student Research

BRIAN O'CONNOR
Professor
PSYCHOLOGY

B.Sc. St. Francis Xavier University
Ph.D. University of Victoria

RESEARCH: statistics; methods; normal and abnormal personality; interpersonal behaviour; psychopathology; writes software for statistical procedures

TEACHING: advanced statistics; research methods; psychopathology

Please refer to our website to determine which faculty members are currently accepting applications for graduate student supervision: [http://psyo.ok.ubc.ca/people/faculty.html](http://psyo.ok.ubc.ca/people/faculty.html)
Appendix B: Criminal Record Check

The Criminal Records Review Act ensures that people who work with or may potentially have unsupervised access to children or vulnerable adults undergo a criminal record check by the Criminal Records Review Program (CRRP). A person whose criminal record suggests they present a risk of physical or sexual abuse to children or a risk of physical, sexual, or financial abuse to vulnerable adults will not have access to these groups.

Retrieved October 11, 2016 from:
http://www2.gov.bc.ca/gov/content/safety/crime-prevention/criminal-record-check

Who Must Have Their Criminal Record Checked

Under the Criminal Records Review Act, you must have a criminal record review conducted by the Criminal Records Review Program (CRRP) if you:

- Work with children or vulnerable adults, or
- Have unsupervised access to children or vulnerable adults during your employment, occupation, or education, or
- Are licensed by or receiving funding from the provincial government

Post-Secondary Students

Post-secondary students working with vulnerable people as part of a practicum must undergo a criminal record check by the CRRP.

Retrieved October 11, 2016 from:
http://www2.gov.bc.ca/gov/content/safety/crime-prevention/criminal-record-check/who-must-be-checked

Selected excerpts of the CRIMINAL RECORDS REVIEW ACT
[RSBC 1996] CHAPTER 86

Part 4.1 — Registered Students

General duty of education institutions

17.1 (1) Subject to subsection (1.1), an education institution must ensure that every registered student who will work with children or work with vulnerable adults undergoes

(a) a criminal record check, or
(b) a criminal record check verification.

(1.1) An education institution may require a registered student to undergo a criminal record check even if the registered student could undergo a criminal record check verification.

(2) An education institution must inform registered students of the requirements of this Act.
Registered students

17.2 (1) Before working with children or working with vulnerable adults, a registered student must provide to his or her education institution a criminal record check authorization or a criminal record check verification authorization, as applicable.

(2) A registered student must not work with children or work with vulnerable adults unless the registered student has complied with subsection (1).

New convictions or outstanding charges

17.4 (1) If a registered student who works with children or works with vulnerable adults is charged with or convicted of a relevant offence or specified offence subsequent to a criminal record check or criminal record check verification, the registered student must promptly report the charge or conviction to the education institution and provide to the education institution a criminal record check authorization for a further criminal record check.

(2) When an education institution becomes aware that a registered student who works with children or works with vulnerable adults has an outstanding charge for, or has been convicted of, a relevant offence or specified offence, the education institution must require the registered student to provide a criminal record check authorization for a further criminal record check.

Retrieved October 11, 2016 from:
http://www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/00_96086_01#part4.1
Appendix C: Clinical Psychology Program Timeline

M.A. program

Year 1:

A: Thesis committee must be formed by December (of Winter Term 1)

B: After completing required Year 1 coursework (Winter Term 1 and Winter Term 2), all students proceed to beginning in-house clinic practicum in Spring term (Summer Term 1 at UBCO) unless any academic, clinical, or other concerns are raised

C: Formal defense of the thesis proposal must take place before the following September (Winter Term 1 of Year 2)

Year 2:

If students do not propose their thesis by September (start of Year 2), they cannot proceed to a full clinical load in the clinic until they have proposed their thesis – and are on warning for remediation.

If thesis is not proposed by December of second year (end of first term), proceed to remediation plan.

A: Must defend thesis and have all requirements into College of Graduate Studies by end of following September – Winter Term 1 of Year 3 (or first year of Ph.D.)

If thesis requirements are submitted to CoGS by end of September, student can proceed to an advanced clinical practicum.

If these requirements are not met, student is to halt practicum until thesis is done, and is on warning for remediation.

Ph.D. program

Year 3 (Year 1 in doctoral program):

If thesis not defended by December (end of Winter Term 1) of 3rd year, proceed to remediation plan.

A: Must form dissertation committee by December (in Winter Term 1) and formally defend their dissertation proposal by the following September (Winter Term 1, beginning of Year 4)

If these requirements not met, proceed to remediation plan in December.

Year 4 (Year 2 in doctoral program):

A: Must complete Clinical Comprehensive by end of April* (Winter Term 2)

(*Exception: new (not continuing) students who have entered the UBCO Clinical program at the Ph.D. level, may complete the Clinical Comprehensive in Year 3 of the Ph.D. program with the approval of the DCT.)
If these requirements not met, proceed to remediation plan in following September (Winter Term I of Year 5).

**Year 5** (Year 3 in doctoral program):

A: Must complete the non-Clinical Comprehensive by end of April (Winter Term 2)
(If these requirements not met, proceed to remediation plan in September- Winter Term I of Year 6).

PROCEED TO CANDIDACY – those who do not meet this timeline will be exited according to the College of Graduate Studies policy (not in-house policy). We can petition for an extension under unusual circumstances.

**Year 6** (Year 4 in doctoral program):

A: Must meet all criteria for internship readiness and have been voted on by core clinical faculty/clinical training committee by September 15 (Winter Term 1).

B: Applications for APPIC (the pre-doctoral internship) due November 1 (Winter Term 1).
- Interview notification date December 4
- Interviews between Dec-Feb
- Rank List due in February 1 (specified by APPIC/DCT)
- Match Day February 17 (specified by APPIC/DCT)

C: All data for dissertation must be collected prior to leaving for internship (and ideally, but not required, defended prior to leaving for internship).

If these requirements not met, proceed to remediation plan.

**Year 7** (Year 5 in doctoral program):

A: Student will complete a one-year CPA- or APA-accredited full-time pre-doctoral internship at an approved site.

B: Student will defend their dissertation no later than the end date of their internship.

C: Student will graduate.

Notes:

**Students who are on an accelerated schedule may pursue completion of the Clinical Comprehensive in Term 1 of Year 2 of the Ph.D. program; please refer to the Clinical Comprehensive documentation for full details.**

Further edits to this timeline are subject to approval by DCT with the support of clinical training committee.
## Appendix D: Clinical Psychology Graduate Program Schedule

### YEAR 1 (MA I) Fall Term

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Teacher</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSYO 507</td>
<td>Advanced Statistics and Research Methods</td>
<td>Dr. O'Connor</td>
<td>Research/Stats</td>
</tr>
<tr>
<td>PSYO 510</td>
<td>Psychopathology I – Descriptive Pathology</td>
<td>Dr. Szostak</td>
<td>Core Clinical</td>
</tr>
<tr>
<td>PSYO 514</td>
<td>Psychological Assessment I</td>
<td>Dr. Wilson</td>
<td>Core Clinical</td>
</tr>
<tr>
<td>PSYO 599 MA</td>
<td>Thesis course</td>
<td>Research</td>
<td>CoGS</td>
</tr>
<tr>
<td>MA Thesis course</td>
<td>Research Supervisor</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**THESIS COMMITTEE MUST BE FORMED BY END OF SEMESTER**

### YEAR 1 (MA I) Winter Term & Spring/Summer

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Teacher</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSYO 507</td>
<td>Advanced Statistics and Research Methods</td>
<td>Dr. O'Connor</td>
<td>Research/Stats</td>
</tr>
<tr>
<td>PSYO 511</td>
<td>Psychopathology II – Theoretical Foundations</td>
<td>Dr. Szostak</td>
<td>Core Clinical</td>
</tr>
<tr>
<td>PSYO 515</td>
<td>Psychological Assessment II</td>
<td>Dr. Wilson</td>
<td>Core Clinical</td>
</tr>
<tr>
<td>PSYO 512</td>
<td>Ethics &amp; Professional Standards in Clinical Psychology (Summer Term I)</td>
<td>Dr. Lutes</td>
<td>Core Clinical</td>
</tr>
<tr>
<td>PSYO 599 MA</td>
<td>Thesis course</td>
<td>Research</td>
<td>CoGS</td>
</tr>
<tr>
<td>MA Thesis course</td>
<td>Research Supervisor</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**BEGIN ASSESSMENT CLINICAL PRACTICUM IN IN-HOUSE CLINIC (PSYO 530)**

**MUST PROPOSE MASTER’S THESIS BEFORE BEGINNING OF SECOND YEAR**
<table>
<thead>
<tr>
<th>Year 2 (MA II) Fall Term</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PSY 516</strong> Psychological Intervention I – Externalizing Disorders</td>
</tr>
<tr>
<td><strong>PSY 530</strong> Practicum (In-house – PAT practicum)</td>
</tr>
<tr>
<td><strong>PSY 599 MA Thesis course</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year 2 (MA II) Winter Term &amp; Spring/Summer</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PSY 517</strong> Psychological Intervention II – Affective Disorders</td>
</tr>
<tr>
<td><strong>PSY *** Elective of Broad and General Courses</strong></td>
</tr>
<tr>
<td>Social (520: Health Psychology, 521: Psychology of Intergroup Relations); History (506: Contemporary Theories of Psychology); 522: Biological Bases of Behaviour; 523: Cognitive Basis of Behaviour; 524: Clinical Supervision; 526: Program Evaluation</td>
</tr>
<tr>
<td><strong>PSY 599 MA Thesis course</strong></td>
</tr>
</tbody>
</table>

BEGIN TREATMENT CLINICAL PRACTICUM IN IN-HOUSE CLINIC (PSY 530)

MUST DEFEND THESIS BEFORE BEGINNING OF 3RD YEAR (WITH REVISIONS INTO GRADUATE SCHOOL)
<table>
<thead>
<tr>
<th>Course</th>
<th>Teacher</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>YEAR 3 (PhD I) Fall Term</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PSYO *** Elective of Broad and General Courses &lt;br&gt;*Social (521: Psychology of Intergroup Relations); History (506: Contemporary Theories of Psychology); Bio (522: Biological Bases of Behaviour); Cognitive (523: Cognitive Basis of Behaviour); Supervision (524: Clinical Supervision); Program Eval (526: Program Evaluation)</td>
<td>Faculty</td>
<td>Core Clinical</td>
</tr>
<tr>
<td>PSYO 630 - Practicum</td>
<td>TBA</td>
<td>Core Clinical</td>
</tr>
<tr>
<td>PSYO 699 Ph.D. Thesis course</td>
<td>Research Supervisor</td>
<td>CoGS</td>
</tr>
</tbody>
</table>

| **YEAR 3 (PhD I) Winter Term & Spring/Summer** |
| PSYO *** Elective of Broad and General Courses <br>\*Social (521: Psychology of Intergroup Relations); History (506: Contemporary Theories of Psychology); Bio (522: Biological Bases of Behaviour); Cognitive (523: Cognitive Basis of Behaviour); Supervision (524: Clinical Supervision); Program Eval (526: Program Evaluation) | Faculty | Core Clinical |
| PSYO 630 - Practicum | TBA | Core Clinical |
| PSYO 699 Ph.D. Thesis course | Research Supervisor | CoGS |

**DISSEPTION MUST BE PROPOSED BEFORE BEGINNING OF YEAR 4**
<table>
<thead>
<tr>
<th>Teacher</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>YEAR 4 (PhD II) Fall Term</strong></td>
<td></td>
</tr>
<tr>
<td><strong>PSYO *** Elective of Broad and General Courses</strong>&lt;br&gt;Social (521: Psychology of Intergroup Relations); History (506: Contemporary Theories of Psychology); Bio (522: Biological Bases of Behaviour); Cognitive (523: Cognitive Basis of Behaviour); Supervision (524: Clinical Supervision); Program Eval (526: Program Evaluation)**</td>
<td>Faculty</td>
</tr>
<tr>
<td><strong>PSYO 630 - Practicum</strong></td>
<td>TBA</td>
</tr>
<tr>
<td><strong>PSYO 699 Ph.D. Thesis course</strong></td>
<td>Research Supervisor</td>
</tr>
</tbody>
</table>

| **YEAR 4 (PhD II) Winter Term & Spring/Summer** |
| **PSYO *** Elective of Broad and General Courses**<br>Social (521: Psychology of Intergroup Relations); History (506: Contemporary Theories of Psychology); Bio (522: Biological Bases of Behaviour); Cognitive (523: Cognitive Basis of Behaviour); Supervision (524: Clinical Supervision); Program Eval (526: Program Evaluation)** | Faculty | Core Clinical |
| **PSYO 630 - Practicum** | TBA | Core Clinical |
| **PSYO 699 Ph.D. Thesis course** | Research Supervisor | **CoGS** |

**CLINICAL COMP COMPLETED IN WINTER TERM II***

*new students who have entered the program at the PhD level, may complete the Clinical Comp in the 3rd year of the PhD program with approval of the DCT.*
### YEAR 5 (PhD III) Fall Term

<table>
<thead>
<tr>
<th>Course Description</th>
<th>Teacher</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSYO *** Elective of Broad and General Courses</td>
<td>Faculty</td>
<td>Core Clinical</td>
</tr>
<tr>
<td><em>Social (521: Psychology of Intergroup Relations); History (506: Contemporary Theories of Psychology); Bio (522: Biological Bases of Behaviour); Cognitive (523: Cognitive Basis of Behaviour); Supervision (524: Clinical Supervision); Program Eval (526: Program Evaluation)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PSYO 630 - Practicum</td>
<td>TBA</td>
<td>Core Clinical</td>
</tr>
<tr>
<td>PSYO 699 Ph.D. Thesis course</td>
<td>Research Supervisor</td>
<td>CoGS</td>
</tr>
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</table>

### YEAR 5 (PhD III) Winter Term & Spring/Summer

<table>
<thead>
<tr>
<th>Course Description</th>
<th>Teacher</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSYO *** Elective of Broad and General Courses</td>
<td>Faculty</td>
<td>Core Clinical</td>
</tr>
<tr>
<td><em>Social (521: Psychology of Intergroup Relations); History (506: Contemporary Theories of Psychology); Bio (522: Biological Bases of Behaviour); Cognitive (523: Cognitive Basis of Behaviour); Supervision (524: Clinical Supervision); Program Eval (526: Program Evaluation)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PSYO 630 - Practicum</td>
<td>TBA</td>
<td>Core Clinical</td>
</tr>
<tr>
<td>PSYO 699 Ph.D. Thesis course</td>
<td>Research Supervisor</td>
<td>CoGS</td>
</tr>
</tbody>
</table>

**GENERAL COMP COMPLETED IN WINTER TERM II**
<table>
<thead>
<tr>
<th>Teacher</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>YEAR 6 (PhD IV) Fall Term</strong></td>
<td></td>
</tr>
<tr>
<td>PSYO 525 Internship Preparation</td>
<td>Dr. Lutes</td>
</tr>
<tr>
<td>PSYO *** Elective of Broad and General Courses</td>
<td>Faculty</td>
</tr>
<tr>
<td>Social (521: Psychology of Intergroup Relations); History (506: Contemporary Theories of Psychology); Bio (522: Biological Bases of Behaviour); Cognitive (523: Cognitive Basis of Behaviour); Supervision (524: Clinical Supervision); Program Eval (526: Program Evaluation)</td>
<td></td>
</tr>
<tr>
<td>PSYO 630 – Practicum (Possibility of Being Senior Student)</td>
<td>TBA</td>
</tr>
<tr>
<td>PSYO 699 Ph.D. Thesis course</td>
<td>Research Supervisor</td>
</tr>
</tbody>
</table>

**YEAR 6 (PhD IV) Winter Term & Spring/Summer**

<table>
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<tr>
<th>Teacher</th>
<th>Requirement</th>
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<tbody>
<tr>
<td>PSYO 699 Ph.D. Thesis course – with intention to defend</td>
<td>Research Supervisor</td>
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**GENERAL COMP COMPLETED IN WINTER TERM II**

<table>
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<tr>
<th>Teacher</th>
<th>Requirement</th>
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</thead>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Teacher</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>YEAR 7 (PhD V) Fall, Winter, Spring, &amp; Summer</strong></td>
<td></td>
</tr>
<tr>
<td>PSYO 730 Accredited Internship</td>
<td>Internship Site</td>
</tr>
</tbody>
</table>

**GRADUATE AND GET AN EXCELLENT JOB**
Appendix E: Grading Scales

Master’s Grading Scale

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A+</td>
<td>90-100</td>
</tr>
<tr>
<td>A</td>
<td>85-89</td>
</tr>
<tr>
<td>A-</td>
<td>80-84</td>
</tr>
<tr>
<td>B+</td>
<td>76-79</td>
</tr>
<tr>
<td>B</td>
<td>72-75</td>
</tr>
<tr>
<td>B-</td>
<td>68-71</td>
</tr>
<tr>
<td>C+</td>
<td>64-67</td>
</tr>
<tr>
<td>C</td>
<td>60-63</td>
</tr>
<tr>
<td>F</td>
<td>0-59</td>
</tr>
</tbody>
</table>

Doctoral Grading Scale

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A+</td>
<td>90-100</td>
</tr>
<tr>
<td>A</td>
<td>85-89</td>
</tr>
<tr>
<td>A-</td>
<td>80-84</td>
</tr>
<tr>
<td>B+</td>
<td>76-79</td>
</tr>
<tr>
<td>B</td>
<td>72-75</td>
</tr>
<tr>
<td>B-</td>
<td>68-71</td>
</tr>
<tr>
<td>F</td>
<td>0-67</td>
</tr>
</tbody>
</table>

Sources: https://gradstudies.ok.ubc.ca/about-cogs/policies-procedures/
Appendix F: Clinical Psychology Practicum Placement Settings

Psychological Assessment - Basic (Initial In-House Clinic)
Supervisor: Dr. Harry Miller, R. Psych.

Psychological Assessment & Treatment Clinic (Initial In-House Clinic)
Supervisor: Dr. Jessica Driscoll, Dr. Kimberly Kreklewetz, R. Psych.

Anxiety Clinic (Advanced General - In-House Clinic)
Supervisor: Dr. Maya Libben, R. Psych.

Healthy Weight Specialty Service (Advanced Specialty - In-House Clinic)
Supervisor: Dr. Lesley Lutes, R. Psych.

Youth Forensic Assessment & Treatment Practicum (Advanced Specialty - Community)
Supervisor: Steve Sigmond, R. Psych.

Substance Use Treatment Service (Advanced General - In-House Clinic)
Supervisor: Dr. Zachary Walsh, R. Psych.

Neuropsychology Practicum (Advanced Specialty – Kelowna General Hospital)
Supervisor: Dr. Harry Miller, R. Psych.

Adolescent Psychiatric Clinic (Advanced Specialty - In Patient, Kelowna General Hospital)
Supervisor: Dr. Alison Spadafora, R. Psych.

Interior Health (Advanced General - Outpatient/Community)
Supervisor: Dr. Christopher Wilson, R. Psych.

Mental Health and Substance Use Unit (Advanced General – Inpatient, Kelowna General Hospital)
Supervisor: Dr. Colin Comfort, R. Psych.

Mental Health and Substance Use (Advanced General – Community, Penticton)
Supervisor: Dr. Bonnie Hayes, R. Psych.

Note: placement settings, specialties, and/or associated supervisors are subject to change.
Appendix G: Clinical Psychology Practicum/Placement Goals

This form is to be filled out at the beginning of the practicum and forwarded to the DCT for approval.

Student name: __________________________________________

Practicum site: __________________________________________

Practicum supervisor: _____________________________________

Practicum semester(s) i.e., 2015W Term 1, 2015W Term 2: _________________

Interpersonal Goals

1. ________________________________________________________
2. ________________________________________________________
3. ________________________________________________________

Intrapersonal Goals

1. ________________________________________________________
2. ________________________________________________________
3. ________________________________________________________

Individual supervision hours _______ Group supervision hours _______

Student’s clinical contact hours in: Assessment _____ Treatment _____

Faculty Supervisor’s name: ________________________________

Faculty Supervisor’s signature: _____________________________ Date: ______

Student’s signature: ________________________________ Date: ______

DCT signature: ________________________________ Date: ______
Appendix H: Student Report on Clinical Placement and Performance Appraisal Form

Student's name: _______________________________          Date: __________________________
Practicum name/site: _______________________________          Supervisor: _______________________________

Part I. Student Report on Clinical Placement

Practicum start date (year/month/day): ________________           Practicum end date (year/month/day): ________________

How many hours in TOTAL did you spend in your practicum? _____________ hours

What is the breakdown of your clinical placement hours? Please estimate if you are unable to specify precisely:
Direct client contact: ____________ hours           Supervision – Group: ____________ hours
Consultation: ____________ hours           Supervision – Individual ____________ hours

Supervision at this practicum site included (check all that apply): ___ review of audio/video ___ live observation ___ self-report

Clinical documentation (notes, reports, writing related to clinical activity): ____________ hours

Professional development (e.g., attending workshops, conferences, etc.): ____________ hours           Other: ____________ hours

What type of experiences did you gain from your placement? Specify in the space below the type of activity (e.g., assessment, individual therapy, group therapy, family therapy, consultation, psychoeducation, etc.), type of client population (e.g., adults, adolescents, children, geriatrics, family), type of patient population (e.g., inpatient, outpatient, young offenders, inmates, etc.), and types of problems seen (e.g., depression, bipolar, anxiety disorders, substance use problems, learning problems, etc.):

__________________________
Part II. Performance Appraisal Form

The following evaluation is based on the hours and experiences described above.

Rating Scale

1 = Needs Improvement: Competency is deficient for expected developmental level, needing remediation.

2 = Novice: Novices have limited knowledge and understanding of topic or skill. Increase/modify supervision.

3 = Intermediate or Developing at Expected Level: Psychology students at the intermediate level of competence demonstrate some skills in the area but not to a level of independent application. Maintain standard supervision.

4 = Competent: At this level, students demonstrate a level of skill to proceed to internship. Has the ability to teach/supervise others.

NO = No adequate opportunity to observe: Direct clinical observations required as part of supervision.

NR = Not relevant to the setting in this time period.

Please note that these ratings should be scaled to the student’s level of training; expectations for junior students should be different than those for senior students.

This is the student’s _____________ practicum.
(first, second, third, etc.)

<table>
<thead>
<tr>
<th>Competencies (Objective 1)</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Students will acquire knowledge of theories of the development, expression, and maintenance of psychopathology.</td>
<td></td>
</tr>
<tr>
<td>*Knowledge regarding psychopathology related to the population(s) served by the practicum sites.</td>
<td></td>
</tr>
<tr>
<td>Knowledge of scientific, theoretical, empirical, and contextual bases of psychological assessment.</td>
<td></td>
</tr>
<tr>
<td>Demonstrates familiarity with the biological, cognitive, and affective bases of behaviour and lifespan human development.</td>
<td></td>
</tr>
</tbody>
</table>
### Competencies (Objective 2)

<table>
<thead>
<tr>
<th>Competencies</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>a) Students will demonstrate knowledge and skills in clinical interviewing, administration, scoring, and interpretation of psychological measures.</strong></td>
<td></td>
</tr>
<tr>
<td>Knowledge of test construction, validity, score reliability, and related assessment psychometrics.</td>
<td></td>
</tr>
<tr>
<td><em>Skills in 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.</em></td>
<td></td>
</tr>
<tr>
<td>Integrates assessment data from different sources for diagnostic purposes.</td>
<td></td>
</tr>
<tr>
<td><strong>b) Students will demonstrate knowledge and skills in diagnostic formulation and case conceptualization.</strong></td>
<td></td>
</tr>
<tr>
<td><em>Appropriately formulates and conceptualizes cases.</em></td>
<td></td>
</tr>
<tr>
<td>Formulates and applies diagnoses; understands the strengths and limitations of current diagnostic approaches.</td>
<td></td>
</tr>
<tr>
<td>Demonstrates an understanding of DSM-IV and DSM-5 classification and contemporary approaches to differential diagnosis.</td>
<td></td>
</tr>
<tr>
<td>Demonstrates an ability to develop clear, concise, and sophisticated treatment formulations based on the diagnostic evaluation and the existing clinical and research literature.</td>
<td></td>
</tr>
<tr>
<td>Demonstrates an ability to conduct a diagnostic evaluation based on psychological information.</td>
<td></td>
</tr>
</tbody>
</table>

### Competencies (Objective 3)

<table>
<thead>
<tr>
<th>Competencies</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>a) Students will demonstrate knowledge and skills in implementing and evaluating a variety of empirically-supported psychological interventions.</strong></td>
<td></td>
</tr>
<tr>
<td>Knowledge of scientific, theoretical, empirical, and contextual bases of intervention.</td>
<td></td>
</tr>
<tr>
<td>Skills in basic clinical skills, such as empathic listening, framing problems, etc.</td>
<td></td>
</tr>
<tr>
<td>Skills in assessment of treatment progress and outcome.</td>
<td></td>
</tr>
<tr>
<td>Demonstrates general psychotherapy or process skills.</td>
<td></td>
</tr>
<tr>
<td>Develops, implements, and revises treatment plans.</td>
<td></td>
</tr>
<tr>
<td><em>Ability to implement evidence-based interventions, covering a wide range of developmental, preventive, and “remedial” interventions, depending on the focus and scope of the practicum site.</em></td>
<td></td>
</tr>
<tr>
<td>Crisis management skills and responding to psychological/ psychiatric emergencies.</td>
<td></td>
</tr>
<tr>
<td>Demonstrates an ability to use a variety of intervention methods (e.g., individual, group, family).</td>
<td></td>
</tr>
<tr>
<td>Competencies (Objective 4)</td>
<td>Rating</td>
</tr>
<tr>
<td>---------------------------</td>
<td>--------</td>
</tr>
<tr>
<td><strong>a) Students will demonstrate knowledge and skills related to ethical conduct in psychology practice, research, and teaching.</strong></td>
<td></td>
</tr>
<tr>
<td><em>Knowledge of principles of ethical practice and decision making (CPA, 2000; CPBC, 2014).</em></td>
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<tr>
<td>Legal knowledge related to the practice of psychology [Federal (e.g., FIPPA), Provincial Law]].</td>
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<tr>
<td>Recognizes and analyzes ethical and legal issues across the range of professional activities in the practicum setting.</td>
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<tr>
<td>Recognizes and understands the ethical dimensions/features of own attitudes and practice in the clinical setting.</td>
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<tr>
<td>Seeks appropriate information and consultation when faced with ethical issues.</td>
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<tr>
<td>Practices appropriate professional assertiveness related to ethical issues (e.g., by raising issues when they become apparent to the student).</td>
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<tr>
<td><strong>b) Students will demonstrate progress towards establishing a professional identity as a clinical psychologist and an attitude of lifelong learning.</strong></td>
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<tr>
<td>Evidences sufficient commitment to practicum training (i.e., time, effort, reading).</td>
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<tr>
<td>Timeliness: completing professional tasks in allotted/appropriate time (e.g., evaluations, notes, reports); arriving promptly at meetings and appointments.</td>
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<tr>
<td>Developing an organized, disciplined approach to writing and maintaining notes and records.</td>
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<tr>
<td>Negotiating / managing fees and payments.</td>
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<tr>
<td>Organizing and presenting case material; preparing professional reports for health care providers, agencies, etc.</td>
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</tr>
<tr>
<td>*Demonstrates scholarly, critical thinking and a commitment to the development of the profession.</td>
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</tr>
<tr>
<td><strong>c) Students will demonstrate an awareness of their own beliefs and values as they relate to and impact professional practice and activity as well as demonstrate appropriate and effective interpersonal and attitudinal skills with clients.</strong></td>
<td></td>
</tr>
<tr>
<td>Interpersonal skills: listens and is empathic 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.</td>
<td></td>
</tr>
<tr>
<td>Cognitive skills: critical thinking, organized reasoning, intellectual curiosity, and flexibility.</td>
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<tr>
<td>Affective skills: affect tolerance; tolerance/understanding of interpersonal conflict; tolerance of ambiguity and uncertainty.</td>
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<tr>
<td>Personality/Attitudes: desire to help others; openness to new ideas; honesty/integrity/valuing of ethical behavior.</td>
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<tr>
<td>Expressive skills: communicates one’s ideas appropriately, feelings and information in verbal and non-verbal channels.</td>
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<tr>
<td>Reflective skills: examines and considers one’s own motives, attitudes, behaviors and one’s effect on others.</td>
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</tbody>
</table>
### Competencies (Objective 4 c continued)

**Personal skills:** personal organization, personal hygiene, and appropriate dress.

*A Awareness of one’s own beliefs and values as they relate to and impact professional practice and activity.

**d) Students will demonstrate a respectful helpful professional approach to patients, colleagues, and supervisors.**

- **With patients/clients/families:**
  - *Takes a respectful, helpful professional approach to patients/clients/families.
  - Forms a working alliance.
  - Deals with conflict, negotiates differences.
  - Understands and maintains appropriate professional boundaries.

- **With colleagues:**
  - Works collegially with fellow professionals.
  - Supports others and their work and gains support for one’s own work.
  - Provides helpful feedback to peers and receive such feedback non-defensively from peers.

- **With support staff:**
  - Is respectful of support staff roles and persons.

- **For the practicum site itself:**
  - Understands and observes agency’s operating procedures.
  - Participates in furthering the work and mission of the practicum site.
  - Contributes in ways that will enrich the site as a practicum experience for future students.

**e) Students will demonstrate competency in being able to self-reflect and self-evaluate regarding clinical skills and use of supervision in collaboration with supervisors.**

- Works collaboratively with the supervisor.
- Willingness to prepare for supervision.

*Willingness to accept supervisory input, including direction; willingness to follow through on recommendations; willingness to negotiate needs for autonomy from and dependency on supervisors.

Self-reflects and self-evaluates regarding clinical skills and use of supervision, including using good judgment as to when supervisory input is necessary.
### Competencies (Objective 5)

<table>
<thead>
<tr>
<th>Competency</th>
<th>Rating</th>
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<tbody>
<tr>
<td>a) Students will show respect and appreciation for staff, colleagues, and patients from diverse backgrounds, and will appropriately consider individual and cultural diversity (ICD) in the selection, administering, and interpretation of assessment measures and in selection and implementation of culturally-sensitive approaches to intervention.</td>
<td></td>
</tr>
<tr>
<td>Demonstrates awareness/understanding of their identity (e.g., one’s ethnic/racial, socioeconomic, gender, sexual orientation; one’s attitudes towards diverse others) relative to the dimensions of individual and cultural differences (e.g., class, race, physical disability, etc.).</td>
<td></td>
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<tr>
<td>Considers ICD issues in all aspects of professional psychology work (e.g., assessment, treatment, research, relationships, etc.).</td>
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<tr>
<td>Understands one’s own situation (e.g., one’s 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.).</td>
<td></td>
</tr>
<tr>
<td>*Understands the need to consider ICD issues in all aspects of professional psychology work (e.g., assessment, treatment, research, relationships with colleagues, etc.).</td>
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<tr>
<td>Demonstrates an understanding of Aboriginal history and traditions, and the mental health service needs of Aboriginal and Métis communities.</td>
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</table>

### Competencies (Objective 6)

<table>
<thead>
<tr>
<th>Competency</th>
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<tbody>
<tr>
<td>a) Students will acquire knowledge of the supervision literature and basic practice in providing clinical supervision.</td>
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<tr>
<td>*Demonstrates an understanding of the essential components of supervision and educational leadership.</td>
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<tr>
<td>Demonstrates an ability to engage in the above activity with team practicum students.</td>
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<tr>
<td>b) Students will acquire knowledge of the consultation literature.</td>
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<tr>
<td>*Knowledge of the unique roles of other professionals.</td>
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<tr>
<td>Effectively relates and works collaboratively with other professionals.</td>
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<tr>
<td>Understands the consultant’s role as an information provider to the decision makers.</td>
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<tr>
<td>Communicates clearly with minimal psychological jargon.</td>
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<tr>
<td>Uses appropriate assessment tools to answer referral questions.</td>
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<tr>
<td>Implements a systematic approach to data collection in a consultative role.</td>
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<tr>
<td>Organizes reports that are succinct and provide useful and relevant recommendations to other professionals</td>
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</tr>
<tr>
<td>Competencies</td>
<td>Rating</td>
</tr>
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<tr>
<td>Specific Course Outcomes (to be filled in from syllabus):</td>
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<tr>
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<td>2.</td>
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<td>3.</td>
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<td>4.</td>
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<td>5.</td>
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Written Comments:

Student __________________________  Supervisor __________________________

Date this evaluation was discussed between student and supervisor: __________________________
Appendix I: Student’s Evaluation of Supervisor Form

Student: ____________________________________________

Supervisor(s): ____________________________________________

__________________________

__________________________

Practicum Site: ____________________________________________

Term(s): ____________________________________________

Supervision is an interactive process in which the supervisor also learns and improves. Learning and improving result from validation as well as from highlighting areas needing attention. This evaluation tool is designed to allow constructive feedback along that spectrum.

In completing this evaluation, you may find it useful to review the Clinical Practicum/Placement Goals form you signed with the practicum supervisor at the beginning of the practicum.

Your feedback will be kept confidential in the following ways. First, if there was more than one supervisor, you can rate either the overall quality of supervision at that site, or you can complete ratings for each supervisor individually. Second, your evaluation will initially be available only to the Director of Clinical Training (or to the Clinic Director or Head of the Department in the case of the evaluations made for the DCT). However, in order to provide constructive feedback to supervisors and external practicum sites, the DCT (or Clinic Director, as appropriate) will aggregate the feedback offered by multiple students over multiple years (at least 4 students over at least 2 years) and provide this to the supervisors/sites. Again, you are of course free to share your comments directly with supervisors at any time. You also are encouraged to speak with the Director of Clinical Training if you have concerns about being identified by this evaluation, as alternate ways to keep the information confidential may be possible.

Please rate your agreement with each of the following statements. If you had multiple supervisors, you may choose to evaluate them collectively or complete separate evaluations for each of your primary supervisors. Your narrative commentary is also welcomed and can be included on the final page. Such comments are very useful, as item-based lists do not adequately cover all facets of supervision.

1. The supervisor assisted me in meeting the goals we agreed upon in the practicum contract (e.g., regarding assessment, therapy, administration, supervision):

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<tr>
<th>1</th>
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<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
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</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>Neutral</td>
<td></td>
<td></td>
<td></td>
<td>Strongly Agree</td>
<td></td>
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</tbody>
</table>
2. The supervisor was dependable and accessible (e.g., kept appointments and adhered to schedule, could be reached if needed):

1 2 3 4 5 6 7
Strongly Disagree Neutral Strongly Agree

3. The supervisor read and commented on my reports and progress notes in a timely and useful fashion:

1 2 3 4 5 6 7
Strongly Disagree Neutral Strongly Agree

4. The supervisor gave useful pointers about techniques – helped me with what to say/do in assessments/therapy:

1 2 3 4 5 6 7
Strongly Disagree Neutral Strongly Agree

5. The supervisor suggested resources or readings appropriate for my cases, or provided additional learning experiences when possible (e.g., opportunities to observe therapy):

1 2 3 4 5 6 7
Strongly Disagree Neutral Strongly Agree

6. The supervisor related clinical work to research and/or theory and was knowledgeable about treatments and/or assessment, and for which presenting problems the treatments are most effective:

1 2 3 4 5 6 7
Strongly Disagree Neutral Strongly Agree

7. The supervisor assisted with my understanding of ethical and legal issues:

1 2 3 4 5 6 7
Strongly Disagree Neutral Strongly Agree
8. The supervisor assisted with my understanding of issues related to diversity:

1 2 3 4 5 6 7
Strongly Neutral Strongly Agree
Disagree

9. The supervisor supported my voicing of differences of opinion regarding his/her suggestions:

1 2 3 4 5 6 7
Strongly Neutral Strongly Agree
Disagree

10. The supervisor was open and non-judgmental. We could discuss both the strengths and weaknesses of my skills:

1 2 3 4 5 6 7
Strongly Neutral Strongly Agree
Disagree

11. The supervisor increased my awareness of my therapeutic style and the impact on the client/therapy while at the same time allowing for difference in style of therapist:

1 2 3 4 5 6 7
Strongly Neutral Strongly Agree
Disagree

12. The supervisor offered criticism and suggestions in a constructive, supportive way, and feedback was appropriate to my level of training:

1 2 3 4 5 6 7
Strongly Neutral Strongly Agree
Disagree

13. In group supervision settings, the supervisor encouraged participation from all students and treated students equally:

1 2 3 4 5 6 7
Strongly Neutral Strongly Agree
Disagree
My overall evaluation of the supervisor:

1-------------2-------------3-------------4-------------5-------------6-------------7 -------------N/A
Negative       Neutral       Positive

The best thing about my supervisor/supervision was:

The thing most needing improvement in my supervisor/supervision was:

Any recommendations regarding what level or type of student this practicum experience would be most useful for?

Other comments?

Please submit completed form to Dr. Lesley Lutes, Director of Clinical Training, at lesley.lutes@ubc.ca
Appendix J: Sample Practicum Syllabus

PSYO 530A - 001 (3 Credits)
Healthy Weight and Behaviour Change Practicum (HWSS)
2017 Winter Term 2

Location: ACS 160B

Instructor:
Name: Lesley Lutes, Ph.D., R. Psych.
Office: ASC 203
✉️ (lesley.lutes@ubc.ca)
📞 (250.807.8128)
⏰ Office Hours: by appointment

GENERAL OVERVIEW:

The healthy weight and behaviour change practicum is a health specialty practicum providing students with experience in adult individual and group therapy, as well as structured clinical interviewing and assessment procedures. Treatment is cognitive-behavioural and uses evidence-based/empirically-validated treatment protocols for health behaviour changes in nutrition, physical activity, and cognitive and behavioural factors impacting weight and well-being. The service is located at the UBCO Interprofessional (Psychology) Clinic. Under supervision, students will conduct intake assessments and, if appropriate, will provide time-limited psychotherapy to clients trying to engage in health behaviour change (related to food, activity, adherence to medical regimes, smoking, sleep). Student will also co-lead a CBT-oriented group for weight management. Students will engage in both group and individual supervision which will include in vivo, video-taped and self-report supervision modalities.

COURSE OUTCOMES:

Students will:

1. Conduct individual intake and/or outtake interviews for individuals seeking/completing a behavioral change program and become competent in completing intake interviews and assessments.

2. Gain experience in the administration and interpretation of self-report assessments including, but not limited to: Positive and Negative Affect Scale, various weight-related assessment measures, and the Beck Depression Inventory-II, BAI, and the EDE screener, and gain competency in writing assessment and treatment summary reports.

3. Become familiar with obtaining physical measures: height, weight, waist circumference, and blood pressure, and become competent in completing physical health assessments with patients.

4. Co-lead at least 1 Healthy Weight group and for students taking 3 credit hours, carry a caseload of at least 2 individual cases that relate to healthy lifestyle change issues (including binge eating, obesity, physical inactivity, poor nutrition, and gastric bypass surgery) and become competent in delivering of a co-therapy group as well as become competent in delivering individual treatment for a health-related behavior change issue with clients.
5. Gain knowledge and competence (if an opportunity) experience and competence in effectively delivering therapy for weight management/health behavior change with clients from diverse backgrounds.

6. Do tape review of all assessment and treatment sessions, engage in initial and ongoing case conceptualization, and be able to identify strengths and areas for growth of their own and their colleagues, and show competency of self-assessment/awareness needed for best provision of services to clients.

REQUIRED READINGS:

ADDITIONAL READINGS:


Additional readings may be assigned as needed for individual or group cases.

**EXPECTATIONS:**
This is a three-credit hour practicum for the fall. Students will receive 2 hours/week of group supervision/ & Didactic meeting time (**THURSDAYS from 2:00 pm-3:00 pm**), and at least 1 hour of individual supervision with Dr. Lutes (1x per week for 3 credit hours and 1x every 2-4 weeks as needed for 1 credit hour). The remainder of practicum hours will be spent preparing for sessions, preparing for presentations, completing assigned readings, conducting chart review, note writing, reviewing tape, and observing classmates. Between direct assessment and treatment hours (2-7 per week), and preparation and group/individual supervision and meetings, it is expected that this course will take approximately 7-16 hours of your time each week.

**GRADES:**
Grading will be based primarily on students’ clinical skill development as evaluated by several methods: supervised intake interviews, supervised psychological assessment sessions, clinical self-reflection on students own strengths and areas for development, ability to receive and apply
feedback from supervisor(s) Grading will also be based on students’ written products: progress notes, intake reports, final clinical reports, which all include timeliness as a variable (i.e., notes on file within 7 days, reports on file within 14 days).

Criteria for an A- (80-84), A (85-89), or A+ (90-100). Consistent demonstration of all of the following.
- Is knowledgeable in empirically-supported psychological assessments within an adult mental health population and in the application of various psychological assessment procedures to DSM-5 diagnosis where indicated.
- Is consistently prepared for discussions and regularly provides insightful contributions to discussions.
- Demonstrates a clear grasp and ability to apply and develop psychological assessment skills.
- Is receptive to constructive clinical feedback and integrates feedback into clinical work.
- Demonstrates case conceptualization/formulation skills and ability in the area of differential diagnosis.
- Demonstrates excellent written expression skills with regard to all documentation including progress notes and final reports.
- Displays professional behavior at all times- dresses appropriately and professionally during practicum days, is on time and prepared for all practicum meetings, is cordial and respectful to clients, patients, staff, peers and completes all notes and reports in a timely fashion, etc.

Criteria for a B- (68-71), B (72-75), or B+ (76-79). Clear demonstration of any of the following will result in a grade of B for the course.
- Occasionally appears inadequately prepared for supervision sessions and does not consistently contribute to discussions.
- Shows patterns of inconsistency in application of basic clinical skills.
- Skill development (psychological test administration/scoring, case conceptualization, clinical or written expression skills) throughout semester is less than expected/achieved by peers.
- Shows some defensiveness in response to constructive feedback.
- Has some difficulty integrating feedback into clinical performance.
- Does not regularly provide feedback to peers.
- Some instances of non-constructive feedback to peers.
- Lapses in professional behavior- arriving late to practicum, some slight tardiness in completion of notes and reports, inappropriate interactions with clients in or outside of the group setting, an instance or two of non-professional dress to practicum, etc.

Criteria for C (60-63), or C+ (64-67) – please note this is only for master’s students. For doctoral students C’s are not a grading option. Demonstration of any of the following will result in a grade of C for the course.
- Instances of unexcused/explained lack of preparation for the practicum, or unexcused/explained tardiness or an unexcused/explained absence.
- Clear deficiencies in basic skills (psychological test administration/scoring, clinical, case conceptualization, or written expression skills) and limited skill development over the course of the semester.
- Presence of personal characteristics that are of severity to be judged as potentially interfering with ability to act as a competent clinician including untreated personal
distress, difficulties displaying empathy, significant and persistent anxiety when interacting with clients, and personal biases that can potentially interfere with clinical performance.

- A pattern of resistance and defensiveness to constructive feedback, combined with little evidence of effort to integrate feedback into clinical work.
- Engages in destructive comments to peers regarding clinical performance or does not provide feedback to peers.
- A pattern of non-professional behavior- a pattern of non-professional or inappropriate dress to practicum, clear pattern of tardiness to practicum, potentially disrespectful behavior to staff or clients/patients, significant tardiness in completion of written reports or notes etc.

Criteria for F (0-59 for master’s students, 0-67 for doctoral students). Demonstration of any of the following will result in a grade of F for the course.

- Clear pattern of lack of preparation for the practicum, clear pattern of unexcused/explained tardiness, or a pattern of unexcused absences.
- Clear, significant deficiencies in basic skills (psychological test administration, clinical, case conceptualization, written expression skills). Very little evidence of any clinical skill development over the course of the semester.
- Presence of personal characteristics that show very high potential to interfere with ability to act as a competent clinician including significant, untreated personal distress and resistance to seek treatment, a clear pattern of avoidance of clinical work and denial, significant lack of empathy for others, clear biases and inability to prevent biases from interfering with clinical performance.
- Clear and frequent resistance or defensiveness to constructive feedback, no evidence of effort to integrate feedback into clinical work.

Academic Integrity

The academic enterprise is founded on honesty, civility, and integrity. As members of this enterprise, all students are expected to know, understand, and follow the codes of conduct regarding academic integrity. At the most basic level, this means submitting only original work done by you and acknowledging all sources of information or ideas and attributing them to others as required. This also means you should not cheat, copy, or mislead others about what is your work. Violations of academic integrity (i.e., misconduct) lead to the breakdown of the academic enterprise, and therefore serious consequences arise and harsh sanctions are imposed. For example, incidences of plagiarism or cheating may result in a mark of zero on the assignment or exam and more serious consequences may apply if the matter is referred to the President’s Advisory Committee on Student Discipline. Careful records are kept in order to monitor and prevent recurrences.

A more detailed description of academic integrity, including the University’s policies and procedures, may be found in the Academic Calendar at http://okanagan.students.ubc.ca/calendar/index.cfm?tree=3,54,111,0.
**UBC Okanagan Disability Resource Centre**
The Disability Resource Centre ensures educational equity for students with disabilities and chronic medical conditions. If you are disabled, have an injury or illness and require academic accommodations to meet the course objectives, please contact Earllene Roberts, the Diversity Advisor for the Disability Resource Centre located in the University Centre building (UNC 214).

**UNC 214** 250.807.9263
email [earllene.roberts@ubc.ca](mailto:earllene.roberts@ubc.ca)
Web: [www.students.ok.ubc.ca/drc](http://www.students.ok.ubc.ca/drc)

**Ombuds Office**
The Ombuds Office offers independent, impartial, and confidential support to students in navigating UBC policies, processes, and resources, as well as guidance in resolving concerns related to fairness.

UBC Vancouver Ombuds Office:
email: [ombuds.office@ubc.ca](mailto:ombuds.office@ubc.ca)
Web: [www.ombudsoffice.ubc.ca](http://www.ombudsoffice.ubc.ca)

**UBC Okanagan Equity and Inclusion Office**
UBC Okanagan is a place where every student, staff and faculty member should be able to study and work in an environment that is free from discrimination and harassment. UBC prohibits discrimination and harassment on the basis of the following grounds: age, ancestry, colour, family status, marital status, physical or mental disability, place of origin, political belief, race, religion, sex, sexual orientation or unrelated criminal conviction. If you require assistance related to an issue of equity, discrimination or harassment, or to get involved in human rights work on campus, please contact the Equity and Inclusion Office.

**UNC 216** 250.807.9291
email: [equity.ubco@ubc.ca](mailto:equity.ubco@ubc.ca)
Web: [www.equity.ok.ubc.ca](http://www.equity.ok.ubc.ca)

**Health & Wellness**
At UBC Okanagan health services to students are provided by Health and Wellness. Nurses, physicians and counsellors provide health care and counselling related to physical health, emotional/mental health and sexual/reproductive health concerns. As well, health promotion, education and research activities are provided to the campus community. If you require assistance with your health, please contact Health and Wellness for more information or to book an appointment.

**UNC 337**
Web: [www.students.ok.ubc.ca/health-wellness](http://www.students.ok.ubc.ca/health-wellness)

**Sexual Violence Prevention and Response Office**
A safe and confidential place for UBC students, staff and faculty who have experienced sexual violence regardless of when or where it took place. Just want to talk? We are here to listen and
help you explore your options. We can help you find a safe place to stay, explain your reporting options (UBC or police), accompany you to the hospital, or support you with academic accommodations. You have the right to choose what happens next. We support your decision, whatever you decide.

Visit svpro.ok.ubc.ca or call us at 250.807.9640

**Independent Investigations Office**

If you or someone you know has experienced sexual assault or some other form of sexual misconduct by a UBC community member and you want the Independent Investigations Office (IIO) at UBC to investigate, please contact the IIO. Investigations are conducted in a trauma informed, confidential and respectful manner in accordance with the principles of procedural fairness.

You can report your experience directly to the IIO via email: director.of.investigations@ubc.ca or by calling 604.827.2060 or online by visiting investigationsoffice.ubc.ca

**SAFEWALK**

*Don't want to walk alone at night? Not too sure how to get somewhere on campus? Call Safewalk at 250-807-8076.*

*For more information, see: [www.security.ok.ubc.ca](http://www.security.ok.ubc.ca)*
Appendix K: Clinical Practice Comprehensive Forms

COMPREHENSIVE EXAMINATION CASE SELECTION FORM

*** This form is due within the first two weeks of the term that you plan to take your clinical comprehensive to the Director of Clinical Training. ***

**CLINICAL PSYCHOLOGY CASE**

Client Characteristics

Age

Gender

Ethnicity

Reason For Referral

Diagnostic Impressions (can be Provisional)

Assessments Used (if any, other than clinical interview)

Supervisor of Case:
From the student handbook:
The Comprehensive Examination committee will consist of 3 members. Two members will be core clinical faculty (members of the Clinical Training Committee) who are registered psychologists. The third committee member may be a non-clinician faculty member. Faculty research supervisors and past supervisors may also serve on the committee. Supervisors will be ineligible for committee membership for students currently under their supervision.

Students can select 1 member of the committee by submitting 3 names with rank order of preference. Students may include their research supervisors and past supervisors in their list of 3 committee member candidates. Faculty members will be approached in the order of preference listed by the student and will be confirmed to the committee based on their availability and willingness to serve. The remaining 2 committee members will be selected by the Director of Clinical Training in consultation with the clinical faculty. The Director of Clinical Training will notify students of their assigned Comprehensive Examination committee when all committee members are confirmed.

This form is due within the first two weeks of term that you will be taking the comprehensive exam to the Director of Clinical Training along with the Comprehensive Examination Case Selection Form.

1\textsuperscript{st} choice: __________________________________________

2\textsuperscript{nd} choice: _________________________________________

3\textsuperscript{rd} choice: _________________________________________

Student Name: ____________________________________ Date: _____________
Clinical Assessment & Psychotherapy Case Competency Checklist

Student name: _______________________________ Date: _______________

Committee member name: __________________________

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<tr>
<th></th>
<th>Adequate</th>
<th>Inadequate</th>
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<tbody>
<tr>
<td>1. Cognitive skills (e.g., critical thinking, flexibility)</td>
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<tr>
<td>2. Written expression skills</td>
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<tr>
<td>3. Ethical decision-making skills</td>
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<td>4. Assessment &amp; Diagnostic formulation skills</td>
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<tr>
<td>5. Skills in developing and adhering to treatment protocols/plans</td>
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<tr>
<td>6. Understanding of empirical and theoretical basis of treatment plan</td>
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<tr>
<td>7. Case conceptualization skills</td>
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<td>8. Awareness of how client beliefs and values affect treatment</td>
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<td>9. Ability to integrate psychological literature into case conceptualization and treatment plan</td>
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<tr>
<td>10. Attention to outcome assessment (formal or informal) and ability to make appropriate treatment-plan revision</td>
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<tr>
<td>11. Awareness of how client and therapist individual difference variables affect diagnostic decision making, treatment plan, and therapist-client interactions</td>
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</table>

Based on your evaluation of the student’s overall performance on this case, what is your recommendation?  PASS  FAIL

Written comments:
### Oral Comprehensive Exam Competency Checklist

Student name: ___________________________ Date: ________________

Committee member name: ___________________________

<table>
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<tr>
<th>Competency</th>
<th>Adequate</th>
<th>Inadequate</th>
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<td>1. Cognitive skills (e.g., critical thinking, flexibility)</td>
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<td>2. Verbal expression skills</td>
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<td>3. Ethical decision-making skills</td>
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<td>4. Assessment &amp; Diagnostic formulation skills</td>
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<td>5. Skills in developing and adhering to treatment protocols/plans</td>
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<td>6. Understanding of empirical and theoretical basis of treatment plan</td>
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<td>7. Case conceptualization skills</td>
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<td>8. Awareness of how client beliefs and values affect treatment</td>
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<td>9. Ability to integrate psychological and/or medical literature into case concept and treatment plan</td>
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<td>10. Attention to outcome assessment (formal or informal) and ability to make appropriate treatment-plan revision</td>
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<td>11. Awareness of how client and therapist individual difference variables affect diagnostic decision making, treatment plan, and therapist-client interactions</td>
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<td>12. Attitude (desire to help, openness to new ideas, authenticity, integrity)</td>
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<td>13. Reflective skills (ability to reflect on personal motives, behaviour, etc., and the therapist’s effect on others)</td>
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<td>14. Awareness of own beliefs and values and how they affect practice</td>
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<td>15. Ability to self-evaluate areas of competency and weaknesses</td>
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<td>16. Crisis management skills</td>
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Based on your evaluation of the student’s overall performance on the oral examination, what is your recommendation?  **PASS**  **FAIL**

Written comments:

Issues to consider regarding Clinical curriculum and/or program improvement:
Clinical Comprehensive Exam Score Sheet

Student Name:

Term:

Time Taken Exam (circle): 1st  2nd

1. Written Exam
   a. Clinical Assessment and Psychotherapy Competency
      i. Overall, the evaluation of the student’s performance on this case recommendation
         /3 Pass       /3 Fail

2. Oral Exam
   a. Oral Competency and handling of structured and unstructured questions/inquiries
      i. Overall, the evaluation of the student's overall performance on the oral examination recommendation?
         /3 Pass       /3 Fail

Overall Recommendation:

Chair of Committee: ____________________________

Name          Signature          Date
Appendix L: Annual Record of Progress Form
Clinical Psychology Doctoral Program, University of British Columbia – Okanagan

Instructions to students and supervisors: 1) Students complete unsigned draft of this form as a self-assessment and include: i) Clinical hours summary (using Time2Track – see below); ii) list of courses completed to date with grades; and iii) CV; then send the draft with CV to research supervisor(s);
2) Supervisors review and add their own comments and bring draft with supporting documents to the Clinical Faculty Review (Retreat) for roundtable discussion with applicable Clinical faculty members and DCT;
3) Supervisor(s) completes final version following roundtable discussion, discusses with student, both parties sign it, then supervisor forwards it along with the supporting documents to DCT by set deadline.
4) DCT sends completed report to the College of Graduate Studies on or before CoGS annual report deadline.

Student Name: ___________________________   Student Number: ___________________________

Date of Clinical Faculty Review: ___________________________

Date entered UBCO for graduate school: ___________________________
Date entered UBCO Clinical Psychology: ___________________________
Year in Program as of September (year): ___________________________
Anticipated Program End Date (Month / Year): ___________________________

Name of Research Supervisor(s): ____________________________________

Names of Committee Members:
1. ___________________________________________________________________
2. ___________________________________________________________________
3. ___________________________________________________________________

Coursework (student attaches list of courses completed with grades)

☐ [1] Coursework has been exemplary
☐ [2] Coursework has been satisfactory
Incomplete coursework must be completed:
☐ [3] You earned a grade below B in a core, practicum, or internship course
   ☐ retake the core course the next time it is offered
   ☐ develop a 1-semester IEP with the practicum/internship instructor
☐ [4] Your coursework requirements are complete

Student comments:

Supervisor comments:

Clinical and Interpersonal Skills (student fills in Clinical hours below)

☐ [1] Your skill development has been exemplary
☐ [2] Your skill development is satisfactory
☐ [3] Your ☐ clinical skill development ☐ interpersonal skill development has been unsatisfactory
☐ [4] This past year you successfully completed practica:

Please list the *practicum placements* you have been involved in this year:

Please list the *research projects* you are in that accumulate clinical hours:

Clinical hours in the *past year (since the last annual review)*:
Number of assessment hours _____
Number of treatment hours _____
Number of individual supervision hours _____
Number of group supervision hours _____
Number of integrated reports _____

Please list all practicum placements and research projects you have been involved in to date that accumulate clinical hours:

*TOTAL* clinical hours to date:
Number of assessment hours:
Number of treatment hours:
Number of individual supervision hours:
Number of group supervision hours:
Number of integrated reports:

*Student comments:*

*Supervisor comments:*

**Research**

☐ [1] Research progress has been exemplary.
☐ [4] Participation in a research group has been satisfactory
☐ [5] Thesis proposal was defended *****.
☐ [6] Thesis should be/was defended by *****
☐ [7] Dissertation proposal should be defended/was by
☐ [8] Dissertation should be completed/was by
☐ [9] Dissertation defense complete

*Student comments:*

*Supervisor comments:*
**Qualifying Exam 1 – General Comprehensive Exam**

☐ [1] You have successfully completed the General Comprehensive Exam in a previous year.

☐ [2] You have attempted the General Comprehensive Exam and will complete this requirement by __________.

☐ [3] You have not yet completed the Qualifying Exam but plan to by********.

**Student comments:**

**Supervisor comments:**

**Qualifying Exam 2 – Clinical Comprehensive Exam**

☐ [1] You have successfully completed the General Comprehensive Exam in a previous year.

☐ [2] You have attempted the General Comprehensive Exam and will complete this requirement by __________.

☐ [3] You have not yet completed the Qualifying Exam but plan to by********.

**Student comments:**

**Supervisor comments:**

**Assistantship**

(*please note this does not affect your eligibility for an assistantship*)

☐ [1] Held a full-time (12 hour/week) assistantship

☐ [2] Held a half-time (12 hour/week) assistantship

☐ [3] Did not hold an assistantship

**Student comments** (please include the comments from your teaching evaluation forms):

**Supervisor comments:**

**Departmental Citizenship/Engagement**

☐ Your involvement in the departmental level meetings and engagement has been exemplary.

☐ Your involvement in the departmental level meetings and engagement has been satisfactory.

☐ Your involvement in the departmental level meetings and engagement has been unsatisfactory.

**Student comments:**
Supervisor comments:

Work / Life Balance
Maintaining an effective work / life balance is critical to a student’s professional development. Please comment on the student’s ability to maintain work / life balance throughout the year:

Student comments:

Supervisor comments:

Readiness for Internship
☐ You have been approved by the faculty as ready for internship based on the modified CUDCP guidelines.
☐ N/A

Student comments:

Supervisor comments:

For students on Probation/Remediation:
☐ [1] You have met the requirements specified in your Remediation Plan and are no longer on Probation/Remediation.
☐ [2] You have failed to meet requirements while on probation and have the option to petition the faculty to remain in the program

Feedback:

Supervisor's overall comments:
Signatures
This report reflects the opinion of the Research Supervisor and the Clinical Faculty / Clinical Training Committee with regard to student’s progress.

_________________________  Date
Research Supervisor

_________________________  Date
Lesley D. Lutes, Ph.D.
Director of Clinical Training

_________________________  Date
Paul Davies, Ph.D.
Head, Department of Psychology

I have read this report. (Signing does not indicate agreement with evaluation.)

_________________________  Date
Student
Appendix M: Council of University Directors of Clinical Psychology (CUDCP) - Modified Expectations for Internship Eligibility

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

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

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

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

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

6. Trainee completed an organized, sequential series of practicum experiences supervised by at least two different clinical psychologists that involve formalized practicum experience in evidence-based assessment and therapy. The Trainee completed at least 300* face-to-face hours of assessment/intervention and at least 150 hours of supervision by a clinical psychologist who routinely employed individual and/or group supervision models and at least one or more of the following intensive supervision methods (e.g., direct observation, co-therapy, audio/videotape review). During early formative years, the ratio of face-to-face hours to supervision hours approximated 1:1 and increased to around 4:1 as the Trainee developed intermediate to advanced clinical skills.

7. Trainee has contributed to the scientific knowledge within psychology, as evidenced by:
   a. Publishing an article in a refereed journal or a book chapter as an author or co-author, or
   b. Presenting at least three papers/posters/workshops at regional, national, or international professional conferences or meetings

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

* CUDCP requires 450 face-to-face hours; this has been modified to reflect the CPA requirement of 300 face-to-face hours.

Adopted January 22, 2011

Retrieved on January 22, 2017 from
Appendix N: Clinical Psychology Program
Annual Statutory Declaration for continuing students re: Criminal Record Check

Under the Criminal Records Review Act (CRRA), all students participating in practica for which they receive academic credit and that involve working with children and/or vulnerable adults directly, or having or potentially having unsupervised access to children and/or vulnerable adults, must undergo a CRRA Check prior to entering the program.

As the Clinical Psychology Program at UBC Okanagan requires completion of practica at both the M.A. and the Ph.D. levels, it is subject to the requirements of the Criminal Records Review Act. Newly admitted students are required to complete this check before they will be permitted to register in the Clinical Psychology Program. Following completion of the initial criminal record check, continuing students are required to complete this Statutory Declaration each year of their program, prior to each Fall (September). A Criminal Record Check is required every 5 years.

DECLARATION

I, ___________________________ , of ___________________________ , entered the ___________________________, (print name) (City, Country)

UBCO Clinical Psychology program in ___________________________ do solemnly declare that: (month year)

- I am a person of good character ___(initial)
- I have not been convicted of any offence that would constitute unprofessional conduct _________(initial)
- I have not been charged of any criminal offence since completion of my original criminal record check _________(initial)

I make this solemn declaration, conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

I am entering the _____ year of the Clinical Psychology graduate program at UBC Okanagan.

Student ID number: ________________

Student signature: ___________________________ Date: ________________

If you are unable to make this mandatory Statutory Declaration, an appointment with the Director of Clinical Training is required.

Completed declaration forms should be submitted confidentially to the Administrative Manager, Marlis Wecels, in ASC 167A.

The deadline for annual submission is September 1st.
Appendix O: Research Supervisor Feedback Form

Graduate Research Supervisor Feedback Form

Student Information

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<th>Name</th>
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<tr>
<td>Program</td>
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<tr>
<td>Research Supervisor</td>
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Review Period: 2016-2017 Academic Year

Supervisor Feedback

In the last academic year, has your supervisor…

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<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Not Applicable</th>
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<tr>
<td>discussed your degree progress with you?</td>
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<td>met with you regularly?</td>
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<td>provided guidance and feedback on the development of your thesis or dissertation?</td>
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<td>fostered a positive, productive and respectful mentor-student relationship?</td>
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<td>established clear responsibilities related to your graduate research assistantship?</td>
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<td>exhibited respect for work/life boundaries?</td>
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<td>modeled professional and respectful communication?</td>
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Comments

Additional Comments

What would you say are the greatest strengths in your mentor-student relationship?

What would you say are the greatest challenges or areas for improvement in your mentor-student relationship?

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<th>Signature</th>
<th>Date</th>
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Appendix P
GRADUATE STUDIES IN PSYCHOLOGY
Supervisory Committee and Program Plan Form

This form must be completed and submitted to the Graduate Program Coordinator (Clinical or Psychological Science) before the end of the first term after initial registration in a program.

Student Number: ____________ Last Name: ____________ First Name: ____________

Email Address: ____________________________________________ Phone Number: ____________

Program (M.A. or Ph.D.): ________________ Specialization: ________________
Program Start Date: ________________ Program End Date: ________________

Supervisory Committee

An M.A. Committee consists of at least three UBCO faculty members or UBCO Psychology adjuncts. One member is the supervisor, and there must be at least one, non adjunct, full-time UBCO faculty member on the committee. At least two of the committee members must be in the Psychology Department. With the approval of the supervisor and Graduate Program Coordinator, the student can make changes to the committee after it has been formed.

A Ph.D. Committee consists of at least three faculty members. One member is the supervisor, who must be a regular faculty member of the Psychology Department. At least two of the members must be in the Psychology Department. With the approval of the Dean of the College of Graduate Studies, the committee may also include qualified persons who are not faculty members. When helpful, the student may add additional committee members. With the approval of the supervisor and Graduate Program Coordinator, the student can make changes to the committee after it has been formed.

Committee Members:

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Role (e.g., supervisor, member)</th>
<th>Academic Unit/Department</th>
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# Program Plan

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<tr>
<th>Course Name</th>
<th>Number of Credits</th>
<th>Instructor Name (for Directed Studies courses)</th>
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**Comprehensives (for Ph.D. students only)**

Indicate the Format (literature review, research project, grant proposal, or course development; for Clinical: Clinical Case, EPPP Exam)

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<th>Instructor/Supervisor</th>
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**Student's Signature**

________________________

Print Student's Name

________________________

Date

________________________

Supervisor's Signature

________________________

Print Supervisor's Name

________________________

Date
Appendix Q
Psychology Thesis and Dissertation Proposal Approval Form

Student: ____________________________ Date registered in Program: ____________________________

Program: [ ] M.A.  [ ] Ph.D.  [ ] Psychological Science  [ ] Clinical Psychology  [ ] IGS

Supervisor(s): ____________________________________________________________

Thesis/Dissertation Title: ____________________________________________________

For Dissertation only, Oral Proposal Defence Date: ____________________________

Committee Approval:

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<th>Last name</th>
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The signatures on this form indicate that the thesis/dissertation proposal submitted by the student has been carefully read and is approved by the signed faculty members.

Graduate Coordinator Name: ____________________________ Signature: ____________________________
Date: ____________________________
Appendix R

Psychology Comprehensives Approval Form

Instructions for students and their supervisors: Obtain the committee and graduate coordinator signatures on this form immediately after each comprehensive is approved.

Student: ___________________________  Program: ___________________________

Supervisor(s): ______________________  Date registered in Program: _____________

For which Comprehensive is this form being submitted? (check one box below)

☐ First Comprehensive  ☐ Second Comprehensive  ☐ Third Comprehensive  ☐ Fourth Comprehensive

Indicate the type of Comprehensive by checking the appropriate box below:

☐ Literature Review  ☐ Research Project  ☐ Grant Proposal  ☐ Course Development

☐ Clinical Case (Clinical program only)  ☐ EPPP Exam (Clinical program only)

Title: ____________________________________________

Committee Approval:

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<tr>
<th>Last name</th>
<th>First name</th>
<th>Dept./Unit</th>
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The signatures on this form indicate that the final version of the above-noted Comprehensive submitted by the student, has been carefully read and is approved by the signed faculty members.

Graduate Coordinator Name: ______________________  Signature: ______________________