UNIVERSITY OF MIAMI
DEPARTMENT of PSYCHOLOGY

Graduate Student Handbook

2022-2023

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PREFACE

The information provided in this handbook applies specifically to the **2022-2023** entering class. Requirements for previous classes are outlined in the handbook in force at the time of their first registration. **All students should retain a copy of the handbook that applies to their entering class.**

The material covered in this handbook describes the requirements and regulations of the program. Thus, **YOU ARE RESPONSIBLE FOR THE MATERIAL IN THIS HANDBOOK**. You will be asked to sign a form indicating that you have read all the materials and understand that you are responsible for knowing and complying with program requirements.

UNIVERSITY OF MIAMI DEPARTMENT OF PSYCHOLOGY
GRADUATE PROGRAM OVERVIEW

Welcome to the University of Miami! This Handbook is designed to provide an overview of the program requirements for the degree of Doctor of Philosophy (Ph.D.) in the Department of Psychology. It describes departmental regulations and program area requirements governing progress toward the Master of Science (M.S.) and Ph.D. degrees.

Our department has two PhD programs, the Clinical Psychology Program and the Psychological Sciences Program. These programs have specific areas of study within our four administrative Divisions: Adult, Child, Health, and Cognitive and Behavioral Neuroscience. Students are accepted into a program in an area of study within a Division. Below is a visual overview of the different areas of study classified according to the Program and Division. Requirements for each area of study are described by specialization.

	Adult	Child	Health	Cognitive & Behavioral Neuroscience (CBN)
Clinical Psychology Program	Adult Clinical	Child/Family Clinical Pediatric Health Clinical	Health Clinical	
Psychological Sciences Program	Evolution, Cognition, & Behavior	Developmental	Behavioral Medicine	CBN*

Students in good standing from the department's Clinical Psychology or Psychological Sciences Programs may also elect to pursue a **Concentration in Quantitative Psychology**. Additional information about this concentration is provided on .

*The Cognitive and Behavioral Neuroscience curriculum is designed for students in the Psychological Sciences Program. Clinical Psychology students interested in neuroscience will be admitted through the division where their mentor holds an affiliation (Adult/Child/Health), for administrative and clinical training purposes. With input from their research mentor, clinical students will choose elective coursework to enhance their training in Cognitive and Behavioral Neuroscience, as permitted by requirements of the clinical curriculum.

Part 1:
Overview

The Path to Your Ph.D. in Psychology

There are many steps on the path to your Ph.D. These include (1) successfully completing the Department's foundation courses, (2) demonstrating continued research activity, (3) completing a Master's thesis, (4) completing advanced coursework required within the student's area of study, (5) successfully completing qualifying procedures, including satisfactorily completing a qualifying paper, (6) completing and defending a Ph.D. dissertation, and (7) meeting all program area Competency requirements.

The minimum number of credits required for the Ph.D. in Psychology varies according to the student's area of study *but in no case falls below* 72 for Clinical Psychology and 60 for Psychological Sciences, which include 6 thesis credits and 12 dissertation credits. Clinical areas of study require additional area practicum credits and a yearlong internship. The specific course requirements for each program may be found in the Part 4 of this handbook. See overview of the requirements, and description of requirements below.

	General Requirements (all students)	Clinical Requirements (clinical students only)	Research
1st Year	Courses yrs 1- 4	Pre-practicum course	Research
2nd Year	Master's Project Qualifying Procedures	Practicum - PSC	Research
3rd Year	Teaching	External Practica	Research
4th Year	Dissertation Project	Apply for Internship	Research
(5th Year)			Research
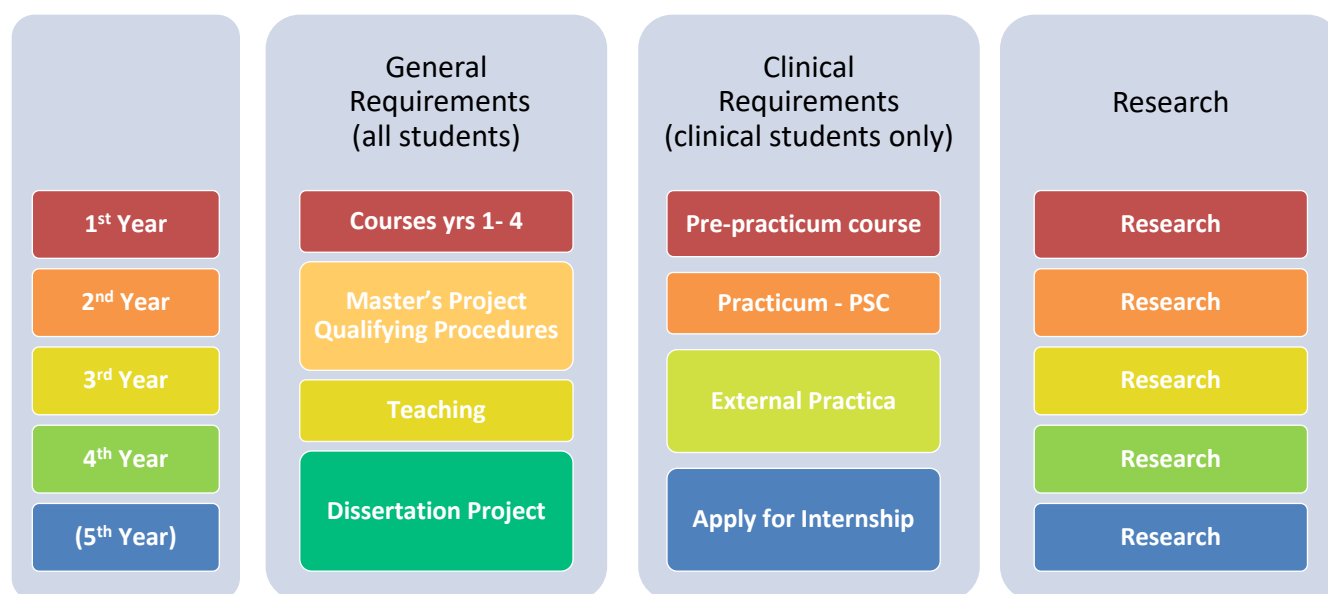
Description of Graduate Student Responsibilities

I. Coursework

- Students must receive a grade of B- or higher in all required courses to remain in good standing in the program. If a student receives a grade of "C+" or lower in any core course, that course must be repeated. Students who fail to repeat the course with a grade of B- or higher may be at risk of dismissal from the program.
- Students must also maintain an overall GPA of 3.0 or higher across all courses.
- The specific course requirements for each program may be found in Part 4: Course Requirements on page 71.

II. Research

Expectations by Funding Type

All graduate students are expected to be actively involved in research under the supervision of a mentor. Research activities include but are not limited to design of studies, participant recruitment, data collection, data entry, data cleaning, statistical analysis, manuscript writing, poster preparation, and lab meetings. Specific expectations vary by funding type, but required research activity on grants not related to the student's own research should not take up more than 15 hours per week, regardless of the source of the student's funding. *This does not mean the student should not dedicate more time than that to the project*, but rather that the student cannot be required to do so. Below is further information on expectations by funding type.

- **Teaching Assistants (TAs)**
    - The Department requires a minimum of 15 hours per week dedicated to supervised research activities.
    - Students funded as TAs perform additional duties as part of their stipends.
- **Research Assistants (RAs) (includes Training Grants)**
    - For students funded as RAs or on training grants, 20 hours/week for research activities are required. This minimum is dictated by their funding source. As stated above, research activity on grants not related to the student's own research should not take up more than 15 hours per week.
- **Fellows**
    - The Department requires a minimum of 20 hours per week dedicated to supervised research activities.
    - For students on fellowships, their stipend is not linked to any specific project, although they are still required to work under the supervision of their mentor and contribute to the activities of their lab. Fellows and mentors together, determine time allocation to lab activities.

General Research Requirements

As noted above, students must engage in at least 15 - 20 hours of research per week, each semester, to remain in good standing, and receive an overall "satisfactory" rating from their research mentor. In addition, graduate students are responsible for completing certain research requirements each semester and by year. These expectations are outlined below.

- Each semester, *students must update the Departmental Student Progress Database*. If this is not completed, students will receive an unsatisfactory rating in research until such time as they fill in their progress in research for the semester.
- Students must satisfactorily complete and defend a master's thesis by the end of their 3rd year of the program.
- Students must satisfactorily complete and defend a dissertation project, typically before or during the clinical internship year, and prior to the end of the 7th year of program enrollment.
- In the rare instance that students fail to make satisfactory progress towards the goals proposed in their research outline, they may receive an unsatisfactory evaluation and in extreme cases may be terminated from the program.
- The 5th year of graduate training at UM is designed for students to devote their full time to research. This is intended for students who are planning on a research-related career and wish to focus on research and publications to build their research portfolio. The 5th year is not intended for students who are falling behind in other requirements (e.g., dissertation proposal, achieving required clinical hours, etc.), and funding for the 5th year of training is not automatically guaranteed. By the end of the 3rd year of training (or even earlier), students who wish to stay for a 5th year should work out a research plan with their research advisor. Applying for external grant funding is strongly encouraged for all clinical students, but it is not required.
- Information on research funding sources for graduate students are outlined in the comprehensive <u>Guide to Graduate Research Funding Opportunities</u>. This guide can be found in the <u>Graduate Students</u> folder on the psychology server: \\datastore01.psy.miami.edu\Groups\Grad_Students\Research_and_Funding.

Qualifying Procedures or Papers

- Clinical students must receive at least a P- evaluation (between Borderline and Satisfactory) in all graded components of the Clinical Qualifying Procedures. Students must also submit a first-authored empirical paper for publication as part of the qualifying procedures.
  - A full description of clinical qualifying procedures and requirements can be found on <u>page 29</u>.
- Students in the Psychological Sciences Program must successfully complete a separate set of Qualifying Requirements, which involve the completion of a first-authored paper, grant application, and/or a written examination.
  - A full description of these qualifying procedures and requirements by major area of study can be found on <u>page 30</u>.

Additional Research Requirements for Students in the Clinical Program

– By the time of application for clinical internships (usually the fall of the 4th or 5th year), students also must have either:
  - Presented 3 papers/posters at a scientific meeting (e.g., APA, SBM, SRCD, ABCT) as a first author during their graduate training **OR**
  - Published a peer-reviewed journal article or book chapter as author or co-author during their graduate training.
– Failure to do so may delay students' ability to apply for a clinical internship. This requirement is based on the "internship readiness" criteria set forth by the Council of University Directors of Clinical Programs (CUDCP); see Appendix I.

Additional Research Requirement for Students in the Developmental Program

– The student is required to submit a first authored empirical article to a peer-reviewed journal by the time of the dissertation defense. This is a requirement for graduation and is in addition to any paper submitted as part of Qualifying Requirements.

III. Teaching

– Students are expected to teach an undergraduate class and receive satisfactory evaluations from students and the faculty supervisor.
– Typically, students teach one entire undergraduate course during their third year in residence, however, some students elect to teach in their fourth year.
– Students are allowed to indicate their teaching preferences (i.e., course, semester), however assignments are made based upon need and availability of courses.
– A faculty-teaching supervisor is assigned to each student for the initial semester they are teaching in. Students should meet with the mentor before the semester to go over the course syllabus, required textbooks, audiovisual aids, and helpful tips for teaching.
– Student teachers are also required to attend a Psychology Department Teaching Workshop (taught by Dr. Hillary Hoffman).
– Students are evaluated by the faculty-teaching supervisor and given constructive feedback. Typically, the supervisor visits the student's class once in the first 7 weeks and again at the end of the semester. Students are also evaluated by their undergraduate students (computerized form and open-ended comments).

IV. Clinical *(for Clinical Program students only)*

Clinical Practice Training
– Each semester, clinical supervisors rate students' clinical skills and profession-wide competencies in important areas such as assessment, intervention, ethics, and professional behaviors. These skills and competencies reflect the training goals of the clinical program and are consistent with Standards of Accreditation as determined by the American Psychological Association.

- Students must receive a satisfactory grade (S) in all required clinical practica. As with coursework, if a student receives an unsatisfactory grade (U) in practicum, they must remediate the practicum. Failure to do so may be reason for dismissal from the clinical program.
- Practicum grades are based on students' evaluations from their clinical supervisors, which are reviewed and voted on by the clinical faculty.
- More information about clinical practica requirements can be found on page 52. Practicum site descriptions are available on the program website: https://www.psy.miami.edu/_assets/pdf/clinical_program/06-practicum-sites.pdf
- A description of clinical research opportunities can be found on page 54.

Internship
- Students must satisfactorily complete a year long, full-time clinical internship.
- Because the Department requires students to have successfully defended a dissertation proposal prior to applying for internship, students need to successfully defend their proposal no later than **OCTOBER 1** of the year they apply for internship. Additionally, students must have completed a minimum of 450 face-to-face clinical hours and a minimum of 150 supervision hours before they are eligible to apply for internship. (For additional requirements prior to applying for internship see Appendix I: CUDCP Criteria for Internships.)
- It is expected that all students will complete their clinical internship at a site that is accredited by the American Psychological Association or the Canadian Psychological Association. In unusual circumstances, students may complete their internship at a non-accredited site (preferably one that is an APPIC member site), with the permission of the Director of Clinical Training and the student's Clinical Coordinator, and after the program has been vetted to ensure a quality training experience.
- A full description of Internship application procedures can be found on page 55.

STUDENTS SHOULD ALSO CHECK APPENDIX B FOR A SUMMARY OF THE MINIMAL ACCEPTABLE LEVELS OF ACHIEVEMENT.

Important Contact Information

I. Important Faculty and Personnel

Many individuals contribute to the department and program running smoothly. Below is a list of important individuals within the department and their responsibilities. If you have a question or an issue, please consult this list, or ask your advisor. E-mails and office phone numbers are provided at the following web site: https://www.psy.miami.edu/people/index.html.

Name	Title	Responsibilities
Phil McCabe	Department Chair	• Contact with questions regarding funding, course requirements, etc. that are not able to be resolved by your Division Chair • Approves travel funds
Jill Ehrenreich-May	Associate Chair for Graduate Studies	• Oversees all program decisions • Assigns TA responsibilities & teaching supervisors • Updates Graduate Handbook • Works with PGSO and ombudspersons • Resolves issues related to the graduate program
Debra Lieberman	Associate Chair for Academic Affairs (Undergraduate) & Research	• Involved (along with Dr. Ehrenreich-May) in making teaching schedule and assignments • Provides departmental sign-off for IRB applications • Oversees undergraduate research
Brian Doss	Faculty Ombudsperson	• Can assist with the process of hearing complaints and concerns, and deciding on the most appropriate course of action
Amanda Jensen-Doss	Director of Clinical Training	• Manages all clinical activities, resolves issues related to clinical training (e.g., conflict with a supervisor, dissatisfaction with a clinical evaluation) • Advises and mentors students on the internship application process and Quals • If a matter cannot be resolved at this level, the next step would be to involve the Graduate Director or Department Chair
Division Directors		
Kiara Timpano	Adult Division	• Contact these professors with questions pertaining to funding, TA responsibilities, or course issues
Daniel Messenger	Child Division	
Neil Schneiderman	Health Division	
Aaron Heller	CBN Division	
Clinical Coordinators		
Amy Weisman	Adult Clinical	• Clinical coordinators oversee student practicum placements and resolve issues related to clinical training (e.g., conflict with a supervisor, dissatisfaction with a clinical evaluation)
Kristin Lindahl	Child/Family & Pediatric Health Clinical	
Patrice Saab	Health Clinical	
Psychological Sciences Program Advisors		
Debra Lieberman	Evolution, Cog, & Behavior	• Psychological Sciences Program advisors meet with students each semester to review course selections and monitor progress in the department
Daniel Messenger and Elizabeth Simpson	Developmental	

Name	Title	Responsibilities
Mike Antoni	Behavioral Medicine	
Aaron Heller	CBN	

Name	Title	Responsibilities
Staff and Support		
Andre Perwin	IT/Computer Support	• Contact them with concerns with equipment • Most classrooms have a phone that connects directly with IT. If you are having difficulties with technology, use this phone to get directly connected.
Jason Garstka		
Derek Harmison		
Thomas Dekle		
Pat Perreira	Administrative Assistant	• Approves course schedules • Maintains graduate students' folders
Adam Clarke	Assistant Chair, Finance & Administration	• Oversees departmental finances, including graduate student stipends, and oversees all other business operations
Ana Parr	Sr. Manager, Business Operations	• Manages HR matters for the department
Maria Almeida	Accounting Assistant	• Contact regarding funding reimbursement from the department
Adrianne Rondon	Sr. Program Coordinator	• Manages all clinical-related activities • Serves as support staff for the Clinical Program and Child Division
Melyza Casanova	Sr. Manager, Sponsored Programs	• Contact for reimbursement for funding on grants
Vivian Perez	Desktop Publisher	• Contact for poster printing
Kent Schomber	Senior Mail Clerk	• Handles incoming department mail and packages

II. Student Contact Information

The Clinical Program and the Department of Psychology depend on email for main communications. You must have an active email account registered with the Clinical Program Office and the Department Main Office that you check daily. It is your responsibility to ensure that you receive important communications.

If you use an account other than the UM account you are assigned, please make sure the following people know your correct contact information:
- Computer Support (c/o Andre Perwin at 284-1939)
- Clinical Program Office (c/o Adrianne Rondon at 284-5720)
- Main Department Office (c/o Pat Perreira at 284-2814)

Please make sure that your email account and other contact information is correctly listed (and updated) in the UM directory by checking your information on the CaneLink system on the UM website: canelink.miami.edu.

STUDENTS SHOULD ALSO CHECK APPENDIX A FOR INFORMATION ON ADDITIONAL RESOURCES AVAILABLE TO PSYCHOLOGY GRADUATE STUDENTS.

III. Holidays and vacation time

Students are funded for 12 months and are afforded all University holidays and two weeks of vacation. Students need to arrange their vacation time with their mentor. Lab meetings should not take place during holidays.

Departmental Supports for Graduate Students

I. Psychology Graduate Student Organization (PGSO)

- The PGSO is a student organization devoted to serving the needs of students in the Psychology Department, organizing specific departmental and student events, and acting as the voice of students to the faculty.
  - The PGSO is comprised of a board elected by psychology graduate students.
  - The PGSO board is composed of two co-presidents who attend faculty meetings and preside over PGSO meetings, representatives from several major areas of study (e.g., health, child/family, adult, developmental, and cognitive and behavioral neuroscience) who organize interview weekend, social chairs, secretary/treasurer, a Graduate Student Association (GSA) representative, Graduate Activity Fee Allocation Committee (GAFAC) representatives, a community service and professional development representative, and a first-year liaison who serves as a resource to incoming students and oversees peer mentorship. In addition, a senior PGSO board member is chosen each year to serve as the Student Ombudsperson.
- Student concerns regarding academic policies and procedures of the Psychology Department and its graduate programs may be brought to the attention of the faculty by way of the PGSO. Matters of general concern also should be brought to the attention of the faculty via the PGSO presidents who regularly attend faculty meetings.

II. Graduate Student Mentoring

Upon entry to the program, students will be assigned a student mentor. This person is available to answer any questions and can be an important resource.

III. Academic Advising

The student's academic advisor is the Director of the division to which they have been admitted. The Director, or their designee (e.g., Associate Director, etc.), outlines the overall requirements of the degree and draws up an initial course schedule. The Director or their Designee is responsible for approving the student's schedule each semester and signing all the necessary forms needed for registration. The Director or Designee meets with each student to ensure adequate progress in the program and completion of program requirements.

Most students enter the program with an assigned faculty research mentor. The faculty mentor supervises the student's research activities. The student and their faculty mentor also monitor the student's progress toward completion of degree requirements. In the rare event that the student has not decided upon a regular faculty mentor by the time of registration for the first semester, the Director or their designee will function as the research mentor. The student should consult regularly with their faculty mentor and update them of their progress in the degree program.

Although students are advised by the Division Director or Designee each semester regarding curriculum and clinical training, faculty mentors should be aware of all aspects of the students' training. Mentors should meet with students regularly to see that research efforts are coordinated with divisional and departmental deadlines and requirements, and if appropriate, clinical training. Students have responsibilities in addition to their research, and mentors should work with their students to make the process proceed smoothly.

The Graduate Student Research Evaluation Form (Pink sheet) provides important feedback to the student and is to be filled out by the student and mentor each semester.

Should the student's faculty mentor change from one semester to next, this change should be recorded in the student's department file. When the student is admitted to Master's or Ph.D. degree candidacy, the chairperson of the master's or Ph.D. research committee automatically becomes the student's faculty mentor. In the case of co-chairs, the student must designate in their file which co-chair will assume primary responsibility for academic advising.

While the Department's system of academic advising has been designed to forestall the occurrence of any bottlenecks in the student's progress through their degree program, it should be realized that it is ultimately the student who bears the final responsibility for completing the program successfully. The faculty mentor, having had experience with the procedures and policies of the Department and of the Graduate School, can advise the student as to the wisdom and propriety of their plans. However, this should not be seen as a substitute for the student being independently aware of the Department, program area, and University regulations governing graduate study.

IV. <u>Research Supervision</u>

To ensure success in the research domain, students receive direct one-on-one supervision from their faculty research mentor. Although students may work closely with, and gain valuable training from post-docs, research associates, or other faculty, this training cannot substitute for direct supervision from the faculty mentor. It is required that students meet with their faculty mentor weekly to discuss their research projects. In addition, students and mentors should work together to make sure that the student is involved in all aspects of the research, and not just fulfilling a narrow role in the project. Students are often involved in research with their faculty mentor that does not directly relate to their M.S. or Ph.D. project, particularly if they are funded from their mentor's grant (i.e., research assistantship). Students and faculty should discuss the student's research responsibilities, time management, and involvement in publications, before the student begins, and at the start of each academic year. If students have concerns with amount of time spent on projects not directly related to their M.S. or Ph.D. projects, they should attempt to resolve their issues with their faculty research mentor. If it cannot be resolved at this level, students can speak with their Division Chair, the Director of Graduate Studies, or the Department Ombudsperson.

To help facilitate a strong working relationship between students and mentors, each student

meets with their mentor to complete a Mentor-Mentee Agreement at the outset of each academic year. The Mentor-Mentee Agreement is used to specify the parameters of the student-mentor relationship (e.g., responsibilities for both parties, preferred methods and timeliness of communication, co-mentoring opportunities). The process of creating this agreement is a bi-directional one in which both individuals outline their needs and expectations for the other; the Mentorship Expectations Discussion Guide (found on second page) suggests topics and questions to facilitate this discussion. **Expectations for *any* remote vs. in-person work should be discussed and agreed upon during this mentorship discussion** and may be revisited periodically due to COVID-19 restrictions or newly implemented University-based health guidelines. After both parties reach an agreement, the document is signed and turned into the Department's administrative assistant, Pat Perreira, to be included in the student's file. Should there be any grievances in the agreement-making process or in upholding the agreements made, the student can refer to the **Grievance Procedures** (Appendix C).

> **It is important to note that the Mentor-Mentee Agreement is different from the Pink Sheet in that the Pink Sheet outlines the student's specific research goals for each semester. The Mentor-Mentee Agreement sets out expectations for the dynamics of the working relationship between the mentor and mentee.*

At the end of each academic year, students are asked to evaluate their research mentor (as well as any other faculty whom the student would like to evaluate). The PGSO Student Ombudsperson will send out a survey to be completed anonymously, and each student is expected to rate faculty members' performances on a range of outcomes (including interpersonal, professional, and diversity expectations). This is an opportunity for students to provide information about areas of strength for faculty members and also areas that may be in need of improvement. All information in this evaluation is provided in confidence to the Student Ombudsperson, who then aggregates the information and provides summaries of the findings to the Department Chair and Associate Chair. The Department Chair and Associate Chair will then provide feedback directly to the faculty members as deemed necessary.

If unforeseen situations arise such as a mentor leaving the University, the Department and the student's program will facilitate the identification of an appropriate replacement mentor for the student.

Co-Mentoring
Graduate students are able to engage in additional research activities with a secondary mentor. Working with a secondary mentor can provide students with opportunities to expand their research interests, learn specific techniques, and increase their productivity. It is the responsibility of the students to identify the specific research project or technique that draws them to seek a secondary research mentor. When this happens, the student is expected to meet with both mentors and discuss their plan and time commitments. All parties have to agree to time allocation parameters. A student funded as an RA under their mentor's grant will have to increase their research time in order to participate in activities in a second lab. A

student funded as a TA or through a fellowship may be able to divide their time equally between both labs for a given period of time. Students are always free to devote additional time to research in their primary or secondary lab and are encouraged to do so. Students who are interested in research careers are well advised to exceed the minimum and devote as much time to research as their schedules allow.

The co-mentor relationships may vary along a continuum of degree of collaboration between mentors. At one end of this continuum, both mentors may be collaborators on a project and the student flows naturally between labs. At the other end, the mentors may be engaged in different areas of research and there is no expectation of a collaboration between them. In this situation, it is particularly important to clarify the amount of time expected of the student by each mentor.

V. Scientific Communication and Grantsmanship

An important part of scientific training is proficiency in writing, public speaking, and grantsmanship. Students are expected to be involved in the planning and writing of manuscripts and research grants with support from their faculty research mentor. Frequent writing assignments, with feedback from the mentor, enhance the student's ability to communicate scientifically. In addition, students typically gain public speaking skills and confidence through oral presentations in lab meetings, classes, and scientific conferences.

VI. Intellectual Development

The Psychology Department attempts to foster an environment for intellectual growth of the graduate student. Students frequently gain this experience through regular one-on-one meetings, group lab meetings, journal clubs, 'brown bag' seminars, colloquia, and scientific conferences. Students are expected to attend all departmental colloquia unless a scheduling conflict prevents attendance. Additionally, students typically attend scientific conferences yearly, aided by funds from the university. By the end of their training, students should be able to conceptualize and develop their own research studies.

VII. Employment/Internship Opportunities

Toward the end of the students' training, mentors take an active role in helping their students to find post-docs, internships, faculty positions, or other jobs.

VIII. Student Performance and Feedback

In addition to serving as an advisor to the student, the faculty mentor serves to inform the rest of the faculty as to the student's progress. At the end of the Fall and Spring semesters the faculty associated with the Clinical Psychology Program and with each Division meet to evaluate

all students enrolled in their respective programs. Across these meetings, each student's academic record is examined, including grades received in all classes, written evaluations of research activities, and performance in clinical practicum (for Clinical Psychology students). At the time of these meetings the student's faculty mentor may be called upon to provide additional information regarding the student's progress. Each student's record is then discussed at a meeting of the entire faculty. Written notices are mailed to each student indicating the outcome of these proceedings with regard to their own status in the program. The Department reserves the right to require additional coursework, research or practica, when necessary or desirable for a particular student. Such courses of action are rare, but should be expected for students on departmental probation, students who have failed portions of their qualifying procedures, or whose work is otherwise judged unsatisfactory by a majority of their program faculty or division faculty, in consultation with the Department Chair.

As noted above, for students enrolled in one of the major areas of study within the Clinical Psychology Program, evaluations of their clinical and professional skills also occur at the end of the Fall and Spring semesters, before the Division evaluation meetings. The Clinical Committee (consisting of all the primary Clinical Faculty) meets at these times to discuss students' progress in their clinical courses, research, and practica placements; to assign grades for practica; and to determine when students are ready for internship. Feedback from the Clinical Committee is brought to the Division Meetings by the appropriate Clinical Coordinator and is integrated into the "end of the semester" written evaluations that students receive.

Mentors, the Program, and the Department take factors other than satisfactory grades into consideration in determining qualifications for advanced degrees. An adequate GPA does not in itself ensure continuance in an advanced degree program. The Department keeps records of deferred and plus and minus grades, complete and incomplete course and clinical requirements, as well as written evaluations by instructors and mentors. These factors, along with other skills, aptitude, and record of professional behavior, are considered by the Department in determining satisfactory progress and in decisions to permit students to continue in master's and doctoral degree programs.

STUDENTS SHOULD ALSO CHECK APPENDIX C AND APPENDIX D FOR DETAILED INFORMATION ON GRIEVANCE PROCEDURES AND PROCEDURES FOR DOCUMENTING COMPLAINTS, AS WELL AS RETENTION, REMEDIATION, AND TERMINATION ISSUES.

Part 2:

Procedures & Requirements

Master's Thesis Requirements

I. Overview

If the student receives a positive evaluation from the Program and Department (satisfactory progress in all respects) at the end of their first year in residence, the student should immediately proceed to form a thesis committee and make formal application to the Graduate School for degree candidacy.

In order to receive the Master's degree, a student must complete 6 credits of thesis research (PSY 810). Students are expected to successfully defend and complete a master's thesis by the fall of their third year in residence; students who have not completed a master's thesis by that time will not be allowed to register for more than two courses (in addition to research credits). Students who fail to successfully complete a master's thesis by the fall of the fourth year will be placed on probationary status and may not take any courses (except research credits) until they complete the master's thesis. Failure to complete the thesis by the end of the fourth year may result in termination from the graduate program.

All students are expected to submit the complete and final thesis document to the Graduate School within THREE months of having a formal thesis defense. Students who defend a thesis in May, and subsequently complete qualifying procedures the same summer, must submit their final thesis document to the Graduate School by the beginning of the fall semester for that year; failure to do so may jeopardize the student's admission to Ph.D. candidacy.

In order to receive the Master's degree, a student must earn a minimum of 24 credits in course work (these must include the first two required statistics courses) plus six credits of thesis research (PSY 810), and pass a thesis oral defense. Students in the Clinical Program must complete the History and Systems online course, at least 2 of the 4 discipline-specific knowledge courses, and 2 of the 3 courses in the methodology/statistics sequence. Developmental students must complete three of the six Developmental Foundation courses (see Developmental Requirements in Part 4 of the handbook). Most students should have completed the necessary coursework for the master's degree by the end of their second year in residence.

No student may receive the M.S. degree in the same semester in which admission to Master's candidacy is granted. In addition, a student may not propose and defend their Master's in the same semester. It is required that all students complete this requirement by May 15 of the year in which they intend to participate in the qualifying procedures.

Finally, to be awarded the Master's degree, students are required to apply for graduation via Canelink during the appropriate semester. This must occur even if the student does not intend to walk at the commencement ceremony. (**Note**: only the PhD candidacy option is listed in Canelink; when applying for the MS degree, students should select this option. Pat Perreira will

make the necessary change when the Graduate School provides a list of those applying for graduation.) In addition to the above requirements, the student must be sure complete the thesis defense and required document submission procedures by the Graduate School's deadlines in order to be eligible for graduation. These deadlines can be found here: https://www.grad.miami.edu/electronic-thesis-and-dissertation/defense-and-submission-deadlines/index.html.

In some cases, the Department will accept a Master's Thesis completed at another university as satisfying our Master's Thesis requirement. Only empirical studies will be considered, and they should be submitted to the Division Director for evaluation (see Acceptance of Master's Thesis from Another University form).

II. Steps for the Thesis

1. Prior to application for admission to candidacy for the M.S. degree, a student decides on an area for investigation. The student writes **a brief, 1-2 page project summary** in the area delineating a particular problem to be researched **along with the specific aims** to be addressed. During this time, students should be enrolled in Master's credits [see Part 4: Course Requirements for a description of required Master's credits (PSY 810) by major areas of study]. The project summary is completed in conjunction with a faculty member from the Department of Psychology whom the student wishes to serve as chair of the thesis committee. In most cases, a faculty member holding a primary appointment in the Department of Psychology serves as chair. However, a faculty member holding a secondary appointment in the Department of Psychology may serve as a co-chairperson of a thesis committee provided that a faculty member holding a primary appointment in the Department serves as the other co-chair.

2. After a faculty member has agreed to chair a research committee on the chosen research topic, the student and the faculty member approach other faculty members with copies of the student's project summary and specific aims to request to serve on the committee. The minimum number of members for a thesis committee is three: one member must be from the regular (not adjunct or secondary) faculty of the Department of Psychology and one must be a University faculty member from outside the Department. At least one member of the thesis committee must be a member of the graduate faculty (a list of graduate faculty members may be found online).

3. When a committee chair and a sufficient number of qualified faculty members have reviewed the student's project summary and specific aims and have agreed to serve, the student may then set up a committee meeting to present their thesis proposal. The student should have each committee member complete the form titled Agreement to Serve on Master's or Dissertation Committee. This form can be found online within the Login Section of the department website (https://www.psy.miami.edu/login/) and outside FLP 516. Completed forms must be turned into to Pat Perreira. The completed form is placed in the student's folder as a permanent record in the Department. Submission of this form notifies

the Chairman of the Department of faculty members' willingness to serve on the thesis committee.

4. At this point, the Department Chair will recommend to the Dean of the Graduate School that a thesis committee be appointed, and the student be admitted to M.S. candidacy. To initiate this process, the student must complete the Application for Admission to Candidacy for the Master's Degree, which is available outside FLP 516 or via email by request. Students may not be admitted to candidacy in the same semester they intend to graduate.

    > **NOTE:** *While students may complete and submit both the Agreement to Serve on Master's or Dissertation Committee and the Application for Admission to Candidacy for the Master's Degree once a committee is formed, many students wait until their proposal meeting for sake of convenience.*

5. The student, after due consultation with their committee, will then prepare a final written proposal to include a definitive statement of the research topic and its significance along with the detailed design for conducting the research. Full proposals should be submitted to all committee members **at least 2 weeks in advance** of the formal proposal meeting.

6. Two weeks after the final proposal has been circulated to the committee and members have had an opportunity to review the document, the committee meets and the student presents their proposal. Committee members will consider any objections or suggestions for revision and will either order such revisions as it considers necessary or approve the design. The form titled Approval of Thesis or Dissertation Plan should be completed by each committee member once they have given their approval. This form can be found within the Login Section of the department website or outside FLP 516. Completed forms and a copy of the approved proposal document must be given to Pat Perreira so that they can be placed in the student's permanent Department file.

7. Following the final approval by the thesis committee, and approval by the appropriate ethics committee(s) when human subjects are to be used, the student will begin to conduct the research. The student carries out the actual execution of the research independently, in consultation with their committee. Procedural modifications within the general framework of the proposal may occur with committee approval, although the student is expected not to depart drastically from the original proposal. During this time, student should be enrolled in Master's credits [see Part 4: Course Requirements for a description of required Master's credits (PSY 810) by major area of study].

8. Following the execution of the research, the student will prepare the thesis manuscript. The Graduate School has granted permission to the Department of Psychology to have theses written in a form consistent with the Publication Manual of the American Psychological Association. Students should follow the Manual in preparation of all research

reports. Theses can also be written in a publication style to facilitate publication. At the advisor's discretion, students can be asked to complete more lengthy literature reviews and discussions. Additional preparation guidelines may be obtained from the Graduate School Electronic Theses and Dissertation (ETD) site (https://www.grad.miami.edu/electronic-thesis-and-dissertation/index.html).

9. Upon completion of the Master's thesis, a thesis defense will be scheduled, held, and evaluated by the thesis committee. **At least two weeks prior**, all committee members should be provided with a clean copy of the thesis. The date chosen should allow sufficient time for the student's committee members to read and judge the entire thesis and allow the student sufficient time to make any necessary corrections prior to the Graduate School deadlines associated with the anticipated commencement. **Once a firm date, time, and location have been identified for the defense**, the student should complete and electronically submit the Defense Notice Form. This form can be accessed via the *Forms* section of the Graduate School website: https://www.grad.miami.edu/policies-and-forms/forms/index.html.

   The oral examination is open to all members of the University community, although responsibility for the examination itself is vested in the committee, which has supervised the research. The examination is intended to center upon the context of the thesis itself, although it may extend into areas within the general scope of Psychology.

10. The Certificate of Defense Approval form should be prepared electronically and sent to committee members **at least one week prior** to the date of the thesis defense. This form can be accessed and completed via the *Forms* section of the Graduate School website: https://www.grad.miami.edu/policies-and-forms/forms/index.html. The chair and members of the thesis committee must electronically sign the appropriate form to certify that the student has satisfactorily passed the oral examination in defense of the master's thesis (*note*: this is separate from the approval of the written document; for approval of the document, see #12 below). Additional information on how to complete this form can be found on the Graduate School's Electronic Thesis & Dissertation (ETD) page: https://www.grad.miami.edu/electronic-thesis-and-dissertation/etd-process/index.html. Please email a copy of the signed Certificate of Defense Approval to Pat Perreira.

11. **At the time of the thesis defense**, students must provide each committee member with a SACS (Southern Association of Colleges and Schools) rating form; this form evaluates the quality of the student's thesis (and requires a minimum overall grade of 3 on a 5-point scale). It is suggested that students also submit an outline of a manuscript based on their thesis project, along with the intended journal for submission. It is understood that this outline is preliminary and might be altered based on input from the thesis committee. Although an outline of a manuscript is the minimal requirement, students are encouraged to develop a draft of the manuscript for publication, to obtain input from their thesis committee. Faculty mentors may assist in the collection of SACS rating forms and sending

these to Pat Perriera via email or in person.

12. Following the thesis defense, any further corrections or revisions to the thesis are executed. *Once all committee members have submitted their SACS rating and approved the final document*, the Electronic Thesis and Dissertation (ETD) Final Content Approval Form should be prepared online and sent to all committee members. This form can be accessed and completed via the *Forms* section of the Graduate School website: https://www.grad.miami.edu/policies-and-forms/forms/index.html.

    At the same time, the student should prepare their final document for submission to the Graduate School using their required formatting guidelines. Theses should be submitted and approved by the Graduate School **no later than the end of the semester following the defense**. See the Graduate School's PDF titled The Electronic Thesis and Dissertation (ETD) Process for detailed directions on submitting your thesis and additional forms (i.e., the ETD Availability Agreement Form) that must be completed following thesis approval. Please note that the process of formatting the thesis in the ETD format can be time-consuming and specific. Please read all online directions related to this process carefully.

    > **NOTE**: *Prior to the submission of the final thesis to the Graduate School, the Dept of Psychology will assess the document for potential plagiarism (see **Plagiarism** Definitions, p. 66) using commercially available software, such as the SafeAssign program provided by the Office of Instructional Advancement. All students are required to submit an electronic version of their thesis to Pat Perreira **at least two weeks prior** to submission of the document to the Graduate School for this purpose. As noted in the section on **Retention, Remediation, and Termination**, evidence of plagiarism is grounds for dismissal from the program.*

13. Any thesis is considered an "Educational Record" to the public, or may be subject to publication, <u>prior</u> to the document being made available by consent from the student.

14. Expectations will be set that students will review their completed thesis for potential publication possibilities, and they will submit relevant papers ideally **within 6 months** after a defense. This expectation will be monitored on the pink sheet research evaluation forms. As noted above, a preliminary outline of such a publication must be submitted to the thesis committee at the time of the oral defense.

    > ### *Reminders*
    >
    > 1. Review Graduate School deadlines (https://www.grad.miami.edu/electronic-thesis-and-dissertation/defense-and-submission-deadlines/index.html) well ahead of time and plan accordingly to defend your thesis and complete all required steps in time to graduate during the intended semester.
    > 2. All students must apply for graduation to receive their master's degree even if they do not plan to attend commencement. Summer graduates must apply for graduation during the spring semester.

III. __Thesis Checklist__

Proposal

□ Prepare 1-2 page project summary and specific aims

□ Invite committee members, providing a copy of the project summary and aims

□ Ask each committee member to sign paper copy of the **Agreement to Serve on Master's or Dissertation Committee**; submit to Pat Perreira*

□ Complete paper copy of **Application for Admission to Candidacy for the Master's Degree** (found outside 516); submit to Pat Perreira*

□ Schedule formal proposal meeting and prepare final written proposal

□ *At least TWO weeks prior meeting*: submit full written proposal to all committee members

□ Present thesis proposal at formal proposal meeting. Committee orders revisions if necessary or approves the design.

□ Once committee approves the proposal, each member signs a paper copy of the **Approval of Thesis or Dissertation Plan**; submit to Pat Perreira **with a copy of your final proposal document.**

*While students may complete and submit these forms as soon as a committee is formed, many wait until the proposal meeting for sake of convenience.

Defense

□ Execute research and prepare thesis manuscript

□ Schedule thesis defense with committee and complete **Defense Notice Form** (online)

□ *At least TWO weeks prior to defense*: submit copy of completed thesis to all committee members

□ *ONE week prior to defense*: prepare and send out **Certificate of Defense Approval** (online)

□ Prepare outline of a manuscript based on thesis project, along with the intended journal for submission (**must be turned in at defense**)

□ Complete oral examination in defense of the Master's Thesis. Provide each committee member with copy of **SACS rating form** (to be turned in to Pat Perreira). If oral thesis defense is passed, committee members electronically sign the **Certificate of Defense Approval** (provide copy to Pat).

Post-Defense *(all steps to be completed no later than the end of the semester following the defense)*

□ Execute any requested corrections or revisions to thesis document

□ Once all committee members have approved the final document, prepare and send **Electronic Thesis and Dissertation (ETD) Final Content Approval Form** (online) to all committee members

□ Discuss availability options with thesis chair and submit **ETD Availability Agreement Form** (online)

□ Submit final document to Pat Perreira to be run through SafeAssign *two weeks prior* to submission to Graduate School for formatting review

□ Format thesis according to Graduate School's guidelines, submit for formatting review, make any required revisions, and once approved, upload final PDF in scholarly repository.

Qualifying Requirements

After successfully completing the defense of the master's thesis, students wishing to pursue the Ph.D. degree must first satisfactorily complete qualifying procedures. The method of assessing the candidate's performance within their major area of study may vary depending upon that area. Options available to Clinical Psychology and Psychological Sciences students are outlined below.

I. <u>Clinical Program Areas of Study</u>

At the end of the second or third year of residence (specific dates announced in advance) students in any major areas of study within the Clinical Psychology program who have completed their master's thesis as well as the required coursework (the History and Systems online course, at least 2 of the 4 discipline-specific knowledge courses, and 2 of the 3 courses in the methodology/statistics sequence) are eligible to participate in the qualifying procedures, which are necessary in order to be admitted to candidacy for the Ph.D. The purpose of these procedures is to allow the student to demonstrate competency in the conduct of empirical research and in clinical assessment and identification of appropriate evidence-based interventions. The Director of Clinical Training coordinates these procedures.

The qualifying procedures occur only once a year, following the end of the Spring Semester, with clinical materials generally due by June 1st. In order to participate in the procedures, the student must have **successfully defended a master's thesis and submitted documentation no later than May 15.** The usual sequence of the procedures is that all clinical materials are due two weeks after they become available to students (typically on May 15th), with the exception of the research component (proof of submission of a first-authored empirical manuscript), which is due September 15th.

The qualifying procedures are designed to assess competence in clinical and research skills. There are several documents that the student must prepare, including a CV (standard format), research essay (500 words), theoretical orientation essay (500 words), diversity essay (500 words), and a clinical case analysis. An additional component of the qualifying procedures is the submission of an original first authored paper to a peer-reviewed journal. See Qualifying Procedures Packet for full description of qualifying procedures.

Two faculty members grade each element of the clinical qualifying procedures, including the de-identified clinical case analysis, using the following marking system: 3 for outstanding, 2 for average/pass, 1 for borderline, and 0 for failure. Intermediate decimal numbers may be used. In order to pass on a given component (CV, research essay, theoretical orientation essay, diversity essay, clinical case analysis), the student must achieve an average mark of at least 1.5. An average mark of 2.5 or above on any of the components will earn a commendation. The [Qualifying Research Paper Evaluation Form](#) is used to evaluate the first-authored research paper and must be completed by two faculty members in the Psychology Department. The

student must receive an overall grade of 3 or higher (out of 5) in order to pass this research component. Although the qualifying procedures occur in early summer for the convenience of students, it must be recognized that many faculty are not on the academic payroll during the summer and cannot be expected to grade components of the qualifying procedures during that time. Thus, the results are generally not available until about September 1.

In the Department's recent experience, almost all students are able to pass their qualifying procedures. Occasionally a student falls short of an average mark of 1.5 in one area. In such a case, the student must arrange to remediate whatever portion of the qualifying procedures they were unable to pass before the end of the fall semester. The same grading system is used. In this case, however, the student must pass the remediating procedure in order to remain in good standing in the Clinical Program. Failure to pass the remediating procedure would be considered sufficient grounds for termination.

II. <u>Psychological Sciences Areas of Study</u>

The qualifying requirement for Psychological Sciences students consists of completing one or two of the three following options, described in greater detail below: 1) submission of a first-authored research manuscript conducted at the University of Miami to a peer-reviewed journal, 2) submission of a fellowship grant proposal (e.g. National Science Foundation, NIH F31), 3) successful completion of a comprehensive written qualifying examination. The decision between these options is made by the student in consultation with their faculty mentor. The qualifying requirement must be completed (materials must be submitted to the qualifying committee for evaluation) **by August 10th of the end of the third year of residence** (summer between third and fourth years). Students must have completed the oral defense of their master's thesis and have had the thesis accepted by the Graduate School before beginning the qualifying requirement.

If a student does not complete the qualifying requirements on time, potential consequences include: a) loss of funding, and/or b) loss of good standing in the program. A student may be granted additional time (up to six) to complete the qualifying requirements. Failure to pass the qualifying requirement after being granted additional time is considered sufficient grounds for termination.

Cognitive and Behavioral Neuroscience students are required to select two out of the three options. **Developmental students** are required to complete two papers or a paper and a grant application. **Behavioral Medicine and Evolution and Behavior** students are required to select one option.

Options

1. **First-authored paper**. Students can fulfill their qualification requirements by submitting a manuscript on which the student is first author for publication to a peer-reviewed journal. The paper will be evaluated by the Qualifying committee prior to submission. The content of the paper will be determined by the student in consultation with their faculty mentor and approved by the Qualifying Committee within two months after defense of the master's thesis. Students will have a choice of content categories: (A) comprehensive literature review or (B) an empirical paper, addressing an important research question. In instances deemed appropriate by the mentor and student, 2 first-authored papers can fulfill the quals requirement.

2. **Grant application**. Students can fulfill this qualification requirement by preparing and submitting a grant application such as a n NSF pre-doctoral fellowship application or NRSA/NIH F31 or similar which typically would provide multiple years of stipend support. The grant application should be complete with all components required by the funding agency, which may include a face page, individual statement, training plan, abstract/statement of purpose, budget, and/or statement of resources. These components will typically be of the maximum length required by the funding agency. The student's qualifying committee will have the option of requiring that a given grant application include additional text for any or all of the individual components, or that it include additional components.

3. **Written examination**. Students can elect to take a written exam to fulfill their qualification requirements. In consultation with their mentor, the student should develop a reading list that covers four core areas and two elective areas. Faculty will develop an exam. Students will arrange with their mentor the date of the exam. The exam will last for 3 hours. Questions will be graded by the student's mentor and 1 other faculty member. Questions will be graded on a 1-5 scale. Students must achieve an average of a 3 on each question to pass the exam. An average of 4.5 or greater on the exam constitutes passing with distinction.

Procedures for All Options

A Qualifying Committee, consisting of the Faculty Mentor and one other faculty member in the Department is to be formed. This committee meets with the student to finalize the topic area to be covered and the procedure to be followed. When this has been accomplished, each member of the committee must sign the Agreement to Serve on Qualifying Committee form that lists the topic area to be covered, designates what combination of a first-authored paper, grant, or examination is to be written, and specifies a completion date. This form should then be forwarded to the Departmental office for inclusion in the student's permanent file.

Procedures Specific to Options 1 and 2

Students pursuing Options 1 and 2 are expected to submit drafts to their Qualifying Committee on a regular basis and need to keep committee members informed about when they will be submitting drafts to ensure timely feedback. With appropriate planning and notification, Committee members should be able to provide feedback within 2 weeks after receiving a draft. Given the variability of summer schedules, **students must turn in a near-final draft (approved by the Qualifying Committee chair) to the Qualifying Committee no later than June 10th** to allow sufficient time for comments and revisions to meet the August 10th deadline.

The members of the Qualifying Committee evaluate the research paper or grant application using the Qualifying Research Paper Evaluation Form or the Qualifying Grant Application Evaluation Form, respectively (both available online). An overall grade of 3 (Good) or better constitutes a passing grade. Submissions receiving a grade of 2 (Fair) or lower need to be revised and resubmitted for evaluation.

Dissertation Requirements

I. Overview

The Ph.D. degree is a research degree. The Department requires each degree applicant to design and execute a study that makes a unique contribution to knowledge in the field of Psychology. The procedures for completing the dissertation are similar to those described for the Master's thesis and are outlined below.

After successfully passing the qualifying requirements and completing the majority of advanced program coursework, students seeking the terminal degree must select a dissertation research topic and form a dissertation committee as soon as possible. This step is necessary in order to register for dissertation research (PSY 830). *STUDENTS WILL NOT BE ALLOWED TO FORM A DISSERTATION COMMITTEE UNTIL THEY HAVE RECEIVED APPROVAL OF THEIR FINAL MASTER'S THESIS FROM THE GRADUATE SCHOOL.*

In order to receive the Ph.D. degree, a student must complete at least 12 credits of dissertation research (PSY 830) as well as all the advanced program area coursework specified within their area of specialization. No student may receive the Ph.D. in the semester in which they are admitted to candidacy. Clinical students must defend their dissertation proposal **by October 1** of the fall semester in which they intend to apply for internship. In addition, before applying for internship students must present a letter from The Graduate School acknowledging final acceptance of the Master's Thesis.

All students **should complete and defend their dissertation research within six years after first entering the graduate program.** Students who have not completed their dissertation by the end of the 7th year will be required to re-certify credits, at the discretion of the Department. Re-certification may require retaking the courses and/or re-satisfying the qualifying procedures requirement. Otherwise, credits that are older than 7 years will be decertified.

At the end of each semester the faculty will review the candidate's progress toward the degree and will send notification of required action by the student. If no action is taken by the specified time the student will be dropped from the Ph.D. Program. **It is the responsibility of the student to apply for graduation before the date indicated on the graduate school calendar.**

Similar to the thesis, the acceptability of the breadth, depth and length of the written dissertation is decided by the faculty member and dissertation committee, in collaboration with the student. However, students may elect to use an alternative, "European Model" format for their dissertation. Under this format, students will include three publications with an overall Introduction and Discussion that integrates across the studies. A Master's thesis cannot count as one of the three studies. All work must be conducted while the student is enrolled in the graduate program at UM.

II. Steps for the Dissertation

1. At the time of successful completion of the Ph.D. Qualifying requirements, a student decides on an area for investigation. The student writes **a brief, 1-2 page project summary** in the area delineating a particular problem to be researched **along with the specific aims** to be addressed. During this time, students should be enrolled in Dissertation credits [see Part 4: Course Requirements for a description of required Dissertation credits (PSY 830) by major areas of study]. The project summary is completed in conjunction with a faculty member from the Department of Psychology whom the student wishes to serve as chair of the dissertation committee. In most cases, a faculty member holding a primary appointment in the Department of Psychology serves as chair. However, a faculty member holding a secondary appointment in the Department of Psychology may serve as a co-chairperson of a dissertation committee provided that a faculty member holding a primary appointment in the Department serves as the other co-chair. The chairperson (or co-chairperson with a primary appointment in the Department) must also be a member of the graduate faculty (a list of graduate faculty members may be found online).

2. After a faculty member has agreed to chair a research committee on the chosen topic, the student and the faculty member approach other faculty members with copies of the student's project summary and specific aims and determine whether each would be willing to serve on the committee.

    The minimum number of members for a dissertation committee is five. All Committee members must hold a primary appointment in some Department of the University of Miami or hold an adjunct appointment in the Department of Psychology. Three members, including the chair or co-chair of the committee, must be members of the graduate faculty of the University of Miami. At least two members of the committee, including the chair or co-chair, must be from the primary Psychology faculty, and a majority of the committee must hold appointments in the Department of Psychology (primary, secondary, or adjunct). One member must be from outside the primary faculty of the department. In some instances, a faculty member at another university or appropriate professional has special expertise in a dissertation topic. Such a person may serve as the outside committee member provided this member is nominated by the candidate, submits a CV, and is approved by the chairperson of the dissertation committee and by either the department's Chairperson or the Associate Chair for Graduate Studies.

3. When a committee chair and a sufficient number of qualified faculty members have reviewed the student's project summary and specific aims and have agreed to serve, the student may then set up a committee meeting to present their dissertation proposal. The student should have each committee member complete the form titled Agreement to Serve on Master's or Dissertation Committee. This form is placed in the student's permanent folder in the Department and notifies the Chairman of the Department of faculty members' willingness to serve on the dissertation committee. It can be found online within the Login Section of the department website

(https://www.psy.miami.edu/login/) and outside FLP 516. Completed forms must be turned into to Pat Perreira.

4. At this point, the Department Chairman will recommend to the Dean of the Graduate School that a dissertation committee be appointed and the student be admitted to Ph.D. candidacy. To initiate this process, the student must submit the online Application for Admission to Candidacy form. This form can be accessed and completed via the *Forms* section of the Graduate School website: https://www.grad.miami.edu/policies-and-forms/forms/index.html. Students may not be admitted to candidacy in the same semester they intend to graduate.

> **NOTE:** *While students may complete and submit both the Agreement to Serve on Master's or Dissertation Committee and the Application for Admission to Candidacy once a committee is formed, many students wait until their proposal meeting for sake of convenience.*

5. The student, after due consultation with their committee, will then prepare a final written proposal to include a definitive statement of the problem and its significance along with the detailed design for conducting the research. Full proposals should be submitted to all committee members **at least 2 weeks in advance** of the formal proposal meeting.

6. Two weeks after the final proposal has been circulated to the committee and members have had an opportunity to review the document, the committee meets and the student presents their proposal. Committee members will consider any objections or suggestions for revision and will either order such revisions as it considers necessary or approve the design. The form titled Approval of Thesis or Dissertation Plan should be completed by each committee member once they have given their approval. This form can be found within the Login Section of the department website or outside FLP 516. Completed forms and a copy of the approved proposal document must be given to Pat Perreira so that they can be placed in the student's permanent Department file. As noted above, clinical students must propose their dissertation **by October 1** before applying for internship programs.

7. Following the final approval by the dissertation committee, and approval by the appropriate ethics committee(s) when human subjects are to be used, the student will begin to conduct the research. The student carries out the actual execution of the research independently, in consultation with their committee. Procedural modifications within the general framework of the proposal may occur with committee approval, although the student is expected not to depart drastically from the original proposal. During this time, students should be enrolled in Dissertation credits [see Part 4: Course Requirements for a description of required Dissertation credits (PSY 830) by major area of study].

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Psychology to have dissertations written in a form consistent with the Publication Manual of the American Psychological Association. Students should follow the Manual in preparation of all research reports. Dissertations can be written in a publication style to facilitate publication. At the advisor's discretion, students can be asked to complete more lengthy literature reviews and discussions. Additional preparation guidelines may be obtained from the Graduate School Electronic Theses and Dissertation (ETD) site (https://www.grad.miami.edu/electronic-thesis-and-dissertation/index.html).

9. Upon completion of the doctoral dissertation, a dissertation defense will be scheduled, held, and evaluated by the dissertation committee. **At least two weeks prior**, all committee members should be provided with a clean copy of the dissertation. The date chosen should allow sufficient time for the student's committee members to read and judge the manuscript and allow the student sufficient time to make any necessary corrections prior to the Graduate School deadline associated with the anticipated commencement. (These deadlines can be found here: https://www.grad.miami.edu/electronic-thesis-and-dissertation/defense-and-submission-deadlines/index.html.)

    Once a firm date, time, and location have been identified for the defense, students should complete and electronically submit the Defense Notice Form. This form can be accessed via the *Forms* section of the Graduate School website: https://www.grad.miami.edu/policies-and-forms/forms/index.html.

    The oral examination is open to all members of the University community, although responsibility for the examination itself is vested in the committee, which has supervised the research. The examination is intended to center upon the context of the dissertation itself, although it may extend into areas within the general scope of Psychology.

10. The Certificate of Defense Approval form should be prepared electronically and sent to committee members **at least one week prior** to the date of the dissertation defense. This form can be accessed and completed via the *Forms* section of the Graduate School website: https://www.grad.miami.edu/policies-and-forms/forms/index.html. The chair and members of the dissertation committee must electronically sign the appropriate form to certify that the student has satisfactorily passed the oral examination in defense of the dissertation (*note*: this is separate from the approval of the written document; for approval of the document, see #12 below). Additional information on how to complete this form can be found on the Graduate School's Electronic Thesis & Dissertation (ETD) page: https://www.grad.miami.edu/electronic-thesis-and-dissertation/etd-process/index.html. A copy of the signed Certificate of Defense Approval should be given to Pat Perreira.

11. **At the time of the dissertation defense**, students must provide each committee member with a SACS (Southern Association of Colleges and Schools) rating form; this form evaluates the quality of the student's dissertation (and requires a minimum overall grade of 3 on a 5-point scale). Faculty may assist in the collection of the SACS rating form or facilitate the receipt of these forms by Pat Perreira. Students should also submit the outline of a

manuscript based on their dissertation project, along with the intended journal for submission. It is understood that this outline is preliminary and might be altered based on input from the dissertation committee. Although an outline of a manuscript is the minimal requirement, students are encouraged to develop a draft of the manuscript for publication, to obtain input from their dissertation committee.

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At the same time, the student should prepare their final document for submission to the Graduate School using their required formatting guidelines. Dissertations should be submitted and approved by the Graduate School **no later than the end of the semester following the defense**. See the Graduate School's PDF titled The Electronic Thesis and Dissertation (ETD) Process for detailed directions on submitting your dissertation and additional items that must be completed (i.e., the ETD Availability Agreement Form, SED Survey, UM Exit Survey, and ProQuest/UMI Publication Agreement) following dissertation approval.

> **NOTE**: *Prior to the submission of the final dissertation to the Graduate School, the Dept of Psychology will assess the document for potential plagiarism (see Plagiarism Definitions, p. 66) using commercially available software, such as the SafeAssign program provided by the Office of Instructional Advancement. All students are required to submit an electronic version of their dissertation to Pat Perreira **at least two weeks prior** to submission of the document to the Graduate School for this purpose. As noted in the section on **Retention, Remediation, and Termination**, evidence of plagiarism is grounds for dismissal from the program.*

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> *Reminder*
> Review Graduate School deadlines (https://www.grad.miami.edu/electronic-thesis-and-dissertation/defense-and-submission-deadlines/index.html) well ahead of time and plan accordingly to defend your dissertation and complete all required steps in time to graduate during the intended semester.

III. Dissertation Checklist

Proposal

☐ Prepare 1-2 page project summary and specific aims

☐ Invite committee members, providing a copy of the project summary and aims

☐ Ask each committee member to sign paper copy of the **Agreement to Serve on Master's or Dissertation Committee**; submit to Pat Perreira*

☐ Complete online **Application for Admission to Candidacy** form

☐ Schedule formal proposal meeting and prepare final written proposal

☐ *At least TWO weeks prior meeting*: submit full written proposal to all committee members

☐ Present dissertation proposal at formal proposal meeting. Committee orders revisions it considers necessary or approves the design.

☐ Once committee approves the proposal, each member signs a paper copy of the **Approval of Thesis or Dissertation Plan**; submit to Pat Perreira **with a copy of your final proposal document.**

*While students may complete and submit these forms as soon as a committee is formed, many wait until the proposal meeting for sake of convenience.

Defense

☐ Execute research and prepare dissertation manuscript

☐ Schedule dissertation defense with committee and complete **Defense Notice Form** (online)

☐ *At least 2 weeks prior to defense*: submit copy of completed dissertation to committee members

☐ *1 week prior to defense*: prepare and send out **Certificate of Defense Approval** (online)

☐ Prepare outline of a manuscript based on dissertation project, along with the intended journal for submission (**must be turned in at defense**)

☐ Complete oral examination in defense of the dissertation. Provide each committee member with copy of **SACS rating form** (to be turned in to Pat Perreira). If oral dissertation defense is passed, committee members electronically sign the **Certificate of Defense Approval** (provide copy to Pat).

Post-Defense *(all steps to be completed no later than the end of the semester following the defense)*

☐ Execute any requested corrections or revisions to dissertation document

☐ Once all committee members have approved the final document, prepare and send **Electronic Thesis and Dissertation (ETD) Final Content Approval Form** (online) to all committee members

☐ Discuss availability options with dissertation chair; submit **ETD Availability Agreement Form** (online)

☐ Complete other steps required as part of the ETD process: **SED Survey**, **UM Exit Survey**, and **ProQuest/UMI Publication Agreement**

☐ Submit final document to Pat Perreira to be run through SafeAssign *two weeks prior* to submission to Graduate School for formatting review

☐ Format dissertation according to Graduate School's guidelines, submit for formatting review, make any required revisions, and once approved, upload final PDF in scholarly repository.

Requirements for Concentration in Quantitative Psychology

Students wanting to add a Concentration in Quantitative Psychology have to be enrolled and in good standing in one of the Department's Clinical Psychology or Psychological Sciences programs.

Statistics Courses in Psychology

In addition to the 3 required statistics courses, the student will take a second advanced course.

PSY 631: Psychological Statistics, Research Methods and Design
PSY 632: Multiple Regression and Multivariate Statistics
PSY 633: Structural Equation Modeling
PSY 634: Multilevel Modeling

Two additional elective courses, in or outside of the Department, must be taken and can be chosen from the following:

PSY 698: Seminar in Quantitative Psychology
EPS 710: Meta-Analytic Methods for Research Synthesis
EPS 705: Measurement & Psychometric Theory
EPS 707: Item Response Theory
EPS 706: Categorical Data Analysis
BST 670: Bayesian Data Analysis: Theory & Computing
BST 630: Longitudinal Data and Multilevel Data
EPH 751: Survival Analysis in Clinical Trials
CSC 646: Introduction to Machine Learning with Applications

All courses must be completed with a grade of B or better. Certain additional electives may be applied toward the concentration, however any potential substitution must be pre-approved by Maria Llabre. If pre-approval is not obtained, there is no guarantee that a substitute will be applied toward meeting the concentration requirements.

Students who wish to pursue the Concentration in Quantitative Psychology are asked to notify Maria Llabre via email. There is no formal application for the concentration; notification is for planning purposes only.

Upon completion of the concentration requirements, send an unofficial transcript highlighting the courses taken and grades received to Pat Perreira. The student will receive a letter indicating that they have met the requirements for the Concentration in Quantitative Psychology. This concentration is not a formal designation defined by the Graduate School, however the Concentration in Quantitative Psychology has the formal endorsement of the faculty of the Department of Psychology and can be reported on a CV.

Required courses are in BOLD

General Requirements/Information

I. Course Pre-Registration

- Prior to pre-registration each semester (dates announced in advance) the student should develop a proposed course schedule for the coming semester with their Faculty Supervisor.
- During pre-registration the student submits their approved course schedule and all accompanying forms to the Division Director or their designee for final written authorization. The Director (or their designee) checks the student's records to ensure that a given course is not taken out of sequence, that the minimum number of credits required for full-time status has been achieved, and that appropriate faculty approval has been secured for special faculty supervised courses. No student will be allowed to register for courses without obtaining this final written authorization. During registration the student submits their approved Departmental course schedule to Pat Perreira, who sends them to student Enrollment Services or the office of the Associate Dean of Arts and Sciences.

II. Requests for Waiver of Core Courses

- If a newly admitted student has taken one or more graduate courses at another institution whose content appears to be equivalent to one or more of their required courses, they may request a waiver for the course(s) in question. In most cases, students may not obtain more than 3 course waivers. The procedure to be followed when seeking a waiver for any course is as follows:
  1. The student meets with their respective Division Director to determine the advantages and disadvantages of waiving a required course. If it is determined that a waiver is desirable, the student obtains a Request for Waiver of Core Course form, lists the course(s) in question, and states the reasons for the requested waiver.
  2. The student meets with the faculty member who is scheduled to teach the required course. This faculty member determines whether the course was reasonably rigorous and had similar content, and they have the primary authority to waive the course requirement and to recommend a substitute where appropriate. The appropriateness of a waiver is determined by one of 3 options:
     a. Assessing the student's knowledge by interviewing the student and examining the course syllabus, text, written reports and other materials associated with the previously taken course.
     b. Constructing, administering, and scoring a specially designed examination to assess the student's knowledge of the course's content area.
     c. Allowing the student to take the regularly scheduled exam(s) for the course without registering for it and grading the exam(s) using the same criteria as

employed with other class members.

3. The particular option chosen for any student is at the full discretion of the instructor making the decision. The instructor informs the student of their decision and forwards the completed waiver form (indicating approval or denial) to the student's Division Director. This waiver form is then forwarded to the Department's Associate Chair (Dr. Ehrenreich-May).

4. The Department Associate Chair approves or denies the waiver, informs the student, and records the final decision in the student's Department file.

III. Master's Theses from Other Universities

- In some cases, the Department will accept Master's Theses from other universities as having satisfied our Master's Thesis requirement. Only empirical studies will be considered and should be submitted to the student's Division Director for evaluation. The Acceptance of Master's Thesis from Another University form must be completed to have the Master's Thesis accepted.

IV. Transfer Credits

- There are some instances when a student may transfer credits from another graduate institution.
    - The student must have received a grade of B or above.
    - If the student wishes to have course credits applied to their degree requirements within the Department of Psychology, they must first seek Department approval and then petition the Graduate School.
    - Waiver of any given core course does not ensure transfer of course credit; nor does the approval of transfer credits mean automatic approval of a course waiver.
    - Graduate school rules provide that *no more than six transfer credits may be applied against requirements for the Master's degree.*
- Transfer of credit from another institution will generally not be made until the student has completed a like amount of credit at the University of Miami. Work taken more than six years prior to the transfer request will not be accepted.
- The Graduate school does not allow a student to use the same course credits for two different degrees.
    - Therefore, course credit obtained at another university that was used to fulfill the requirements of a master's degree cannot be used toward an M.S. or Ph.D. within the Department of Psychology.
    - In these cases, the student's total Ph.D. course credit requirement may be reduced by the Chairman following the recommendation of the Division Director.
    - To illustrate this point, if a student takes 6 credits of statistics at another university in the process of obtaining an M.S., that student may ask the Division

Director (i.e., Adult, Child, Health, CBN) to reduce the Ph.D. requirement from 72 credits to 66 credits. In such cases, a waiver must be obtained for the credits to be reduced (see Request for Waiver of Core Course form online).

- Procedure for applying for course credit transfer is as follows:

    1. Discuss the possibility of obtaining transfer credits with your Faculty Supervisor or Program Director.
    2. If the transfer of credits appears appropriate, complete and submit the electronic Petition for Transfer of Credit (found here on the Graduate School's website) and supply the requested information regarding course descriptions, dates, and institutions.
    3. If not already on file, obtain an official transcript listing the courses and credits to be transferred.
    4. The Program Director may request course syllabi and other course materials to assess the suitability of transfer credits. In the case of students who have already formed a Dissertation research committee, the Graduate School requires committee approval of all transfer credits.
    5. The Program Director forwards the Petition form together with recommendations (and Dissertation committee approval when necessary) to the Department Chairman.
    6. The Department Chairman records the Department's final recommendation on the Petition form and forwards it to the Graduate School for final action.

V. Residency Requirement

- Graduate students in psychology will be in-residence for the duration of the Ph.D. program with the exception of supplementary training at other institutions including the internship of clinical students. Students requesting an exception to this policy must receive permission from their mentor, their Division Director, and, in the case of clinical students, the Director of Clinical Training.

VI. Part-Time Status

- Graduate study within the Department of Psychology has been designed for full-time students.
    o Only under unusual circumstances are students allowed to proceed on a part-time basis, and these instances are generally limited to students who have already completed the Department's core statistics and discipline-specific knowledge courses.
    o On occasion students have been allowed to take a one-semester leave of absence so that upon their return they may complete their course of study on a full-time basis.

- The procedure followed for requesting part-time status or a leave of absence is as follows:
    1. The student should discuss the need for a change from full-time status with their Faculty Supervisor or Program Director.
    2. If it is determined that a reduction in course load or a leave of absence would be beneficial, the student should write a letter stating their request, including the reasons for making the request, to the appropriate Program Director. The Program Director should receive the request **no later than two weeks prior to the desired change in status between semesters**. This means at least two weeks prior to registration for the next semester.
    3. The program Director will solicit recommendations from the Faculty most familiar with the student's program of study. The Director will then forward the student's request, together with their own recommendation, to the Department Chairman.
    4. The Department Chairman will make the final decision, inform the student, and record the decision in the student's permanent file.

- Failure to register for the minimum number of credits required in the student's Program Area, without first obtaining Department approval, is sufficient reason to drop a student from the Program. Failing to register for courses after the end of an approved leave of absence will be considered an official withdrawal from the program. Should the student wish to be readmitted to graduate study, an application must be filed with the Department of Psychology. The student's application will be considered along with others seeking admission to the Program during the next regular admission cycle.

VII. <u>Student Financial Obligations</u>

- The department provides funding, either in the form of a Teaching Assistantship (TA), a Research Assistantship (RA), a fellowship, or training grant position, for MOST students.
    o Additional employment outside of the University is discouraged. Exceptions must be reviewed and approved by the Department Chair and by the Graduate School.
    o Clinical graduate students interested in additional external sources of employment must **first** obtain special permission from their research supervisor, the Director of their Division, the Director of Clinical Training, and from the Clinical Committee.
- Students are responsible for paying mandatory university fees (approximately $450/semester) and purchasing required textbooks.
- Clinical graduate students are required to purchase their own liability insurance (See https://www.trustinsurance.com/products-services/student-liability).
- The University and Department provide funding up to $1200 to attend professional meetings and conferences where students are the presenting author. More information can be found within the Login Section of the department website: https://www.psy.miami.edu/login/.

Clinical Program-Specific Requirements & Information

I. Training Model and Overarching Aims of the Clinical Psychology Program

The philosophy and model of training for the UM program in clinical psychology is that of a clinical science model; additionally, the program provides strong training in evidence-based practice. The UM program uses a "mentor model" for research training, in that applicants are admitted to the program based in part on their "match" with the research interests of a specific faculty mentor. Mentors closely supervise the research activities of the students working in their laboratories.

The UM clinical program prepares students to contribute to the advancement of knowledge in the field and to practice clinical psychology. In addition to providing broad and general training in clinical psychology, the program provides training in one of the following substantive areas of focus within clinical psychology: adult clinical, child/family clinical, pediatric clinical, and health clinical psychology. The UM clinical program's philosophy and model of training is compatible with the mission of the Psychology Department, which is "to acquire, advance, and disseminate knowledge within the Psychological and Biobehavioral Sciences." It is also consistent with APA's definition of Health Service Psychology as "the integration of psychological science and practice in order to facilitate human development and functioning."

Following from the program's philosophy, the educational model and the curriculum plan focus on **two major and interrelated aims that integrate science and practice**:

1) to produce graduates who have the requisite knowledge and skills to produce and disseminate knowledge in clinical science and who understand the interface between science and practice (**clinical science aim**), and

2) to produce graduates who have the requisite knowledge and skills for entry into the practice of professional clinical psychology with a concentration in one of four major areas of focus (adult, child/family, pediatric, or health psychology), and who understand and value the importance of a scientific basis to clinical practice (**clinical practice aim**).

Our program is designed to develop knowledge, skills, and competencies that allow our graduates to contribute to and advance the evidence base of the field and to engage in a wide range of professional activities relevant to prevention, consultation, assessment, and treatment for psychological and other health-related disorders. By emphasizing reciprocal relationships between science and practice, we develop clinical scientists who can function in a wide range of research and practice settings, including academic, research, medical, and community settings. Our program orientation is consistent with the clinical psychology Ph.D. degree as one that reflects both scientific and applied training, as well as their integration. After program completion, our graduates are not only competent scientists but also have

been trained to be eligible for licensure as doctoral-level psychologists. Consistent with our training model and aims, the majority of our graduates establish their careers in academic settings, medical school/hospital settings, or in community practice settings.

II. <u>Curriculum for the Clinical Program</u>

Please see the description of <u>course requirements</u> for your specific major area of study for a comprehensive list of required courses. In general, clinical students are required to take a minimum of 16 3-credit courses, unless their area has a higher requirement. The curriculum plan described below outlines the requirements governing progress toward the M.S. and Ph.D. degrees.

Discipline-Specific Knowledge
To acquire discipline-specific knowledge (DSK), students participate in a wide range of structured and informal learning experiences that are established in a sequential nature. DSK is largely acquired through Department "core courses" and through research experiences. In addition, all students are required to teach an undergraduate course during their third or fourth year in the program, and these courses often are focused on a DSK area (e.g., developmental psychology, statistics, social psychology).

During their first year, students take a self-paced, online course that covers **History and Systems**. The online course may be accessed at any time but must be completed before the beginning of the second year of graduate studies. The course consists of six modules covering key topics in history and systems of psychology; students must pass an exam at the end of the online course to receive credit for completing this experience. <u>Appendix E</u> contains a description of the syllabus and procedures for enrolling in the online self-paced course. In addition, History and Systems is integrated into multiple other required courses.

Students also begin taking other required DSK courses in their first year, with additional DSK courses completed during the second year and beyond. Required DSK courses cover the **biological, cognitive, affective, developmental, and social aspects of behavior**, as well as **advanced integrative knowledge**.

Discipline-Specific Knowledge Courses (required of all students)
Biological Aspects of Behavior   PSY 605: *Cognitive Neuroscience*
Cognitive & Affective Aspects of Behavior   PSY 604: *Cognition and Emotion**
Developmental Aspects of Behavior   PSY 620: *Developmental Psychology*
Social Aspects of Behavior   PSY 625: *Social Psychology*

*Course covers material that integrates two or more areas of discipline-specific knowledge.

Advanced integrative knowledge is achieved through the content of PSY 604: *Cognition and Emotion*. This graduate level course covers key material on the cognitive basis of behavior (e.g., learning), the affective basis of behavior (e.g., emotion), and the integration of the two areas; each component is evaluated separately.

Training in the DSK areas of **research methods, statistical analysis, and psychometrics** is based on a combination of courses and research experiences. Specifically, in the first semester of the first year, students begin a 3-semester **research design and statistics course sequence**; the first two courses are completed during the 1st year; the third is typically taken in the 2nd year. The first two courses cover fundamental statistical concepts, research methods and designs, analysis of variance, and multiple regression; the third course covers structural equation modeling. In addition, **research methods** are infused into several required graduate courses.

Research Methodology, Statistics, and Data Analyses (3 required of all students)
PSY 631: *Psychological Statistics, Research Methods & Design*
PSY 632: *Multiple Regression & Multivariate Statistics*
PSY 633: *Structural Equation Modeling*

Psychometrics is integrated into several required courses, including three listed above (PSY 631, 632, 633) as well as PSY 645 (*Introduction to Psychological Evaluation*).

In addition to coursework for **research design, statistical analysis, and psychometrics**, students also acquire graduate-level skills in these areas through their mentored research activities. From the time of their entry into the graduate program, students are required to engage in a minimum of 10 hours per week of research in their mentor's lab. Students work on ongoing research projects, but also are responsible for completing two empirical studies – a master's thesis and a dissertation. In addition, students are required to submit a first-authored empirical paper for publication as part of the Clinical Qualifying Procedures (Quals). Students' theses, dissertations, and submitted manuscripts for Quals are evaluated with respect to the methodology, statistics, and measures used.

Profession-Wide Competencies
The UM clinical program addresses Profession-Wide Competencies (PWCs) in a manner consistent with our training model (clinical science, with strong practice training). As such, the PWCs prepare students for entry level of practice in clinical psychology and also to be clinical researchers. Moreover, the program prepares students to have a research and practice focus in a substantive area of clinical psychology (e.g., adult, child/family, pediatric health, or health).

The section below summarizes how the PWCs are addressed in coursework, including area-specific coursework in assessment and intervention. In general, training activities are designed to be appropriate to the students' level of training and build on each other in a sequential manner.

Profession-Wide Competencies Courses (required of all clinical students)
PSY 601: *Issue in Professional Development and Research*
PSY 614: *Diversity Issues in Psychology*
PSY 645: *Introduction to Psychological Evaluation (with PSY 671 as an associated assessment lab)*
PSY 656: *Introduction to Evidence-Based Psychological Treatments*
PSY 657: *Introduction to Psychotherapy, Ethics, & Professional Issues*

Additional Area-Specific Requirements (3-6 additional courses, depending on area of focus)

    Adult Clinical (3 required)
    PSY 640: *Adult Psychopathology*
    PSY 646/647: *Psychological Evaluation of Adults, Children, and Families*
    Advanced intervention course: PSY 660, 662, 685, or other approved course.

    Child/Family Clinical (4 required)
    PSY 641: *Child & Adolescent Psychopathology*
    PSY 646/647: *Psychological Evaluation of Adults, Children, and Families*
    PSY 660: *Evidence-Based Psychological Intervention with Children & Families*
    PSY 636: *Research Methods with Children & Adolescents* (or PSY 602: Scientific Writing & Grantsmanship)

    Pediatric Health Clinical (5 required – 4 as for Child/Family Clinical plus the additional course, below)
    PSY 661: *Interventions in Pediatric Psychology* or PSY 662: *Health Psychology Interventions*

    Health Clinical (6 required)
    PSY 606: *Biobehavioral Processes & Disease in Health Psychology*
    PSY 610: *Behavioral Medicine: Overview of Basic Science, Public Health, & Clinical Trial Approaches*
    PSY 616: *Biobehavioral Processes and Clinical Research Applications in Health Psychology*
    PSY 640: *Adult Psychopathology*
    PSY 648: *Psychological Evaluation in Physical Disorders*
    PSY 662: *Health Psychology Interventions*

Research Competency is developed through structured and sequential coursework, a structured sequence of research requirements and activities, and Quals. Statistics and research methods **courses** taken in the first-year help prepare students for research activities, as does a seminar for incoming students (PSY 601: *Issues in Professional Development and Research*), and several orientation activities (ethics workshop; research ethics and compliance training through the Collaborative Institutional Training Initiative, i.e., CITI training). Advanced courses in statistics and elective seminars that pertain to students' research interests are taken later in the program. **Structured research activities** include ongoing research in a mentor's lab; proposing, writing, and defending a thesis and a doctoral dissertation; and submitting abstracts for conference presentations and papers for publication. After defending their master's thesis, students complete **Quals**, which include preparing and submitting a first-authored empirical manuscript to a peer-reviewed journal. These activities are evaluated via (a) grades in courses; (b) ratings of research progress provided by their faculty mentors each Fall and Spring semester; (c) successful defense of theses and dissertations, including ratings by committee members; (d) independent ratings by two faculty members of the Quals empirical paper; and (e) by the student's number of peer-reviewed presentations and number of authored or co-authored papers published. Students are encouraged to submit grants for funding and to take the graduate course PSY 602: Scientific Writing and Grantsmanship

Competency in **Ethical and Legal Standards** is covered via coursework, program orientation activities, and clinical practica. Issues pertaining to legal and quality assurance principles, such as ethical standards for research and practice and state laws on child abuse reporting and custody evaluations, are directly addressed in PSY 657. These issues also are addressed during

practicum orientation at the Psychological Services Center (PSC), the department's training clinic, where students' review and discuss the APA Ethical Principles of Psychologists and Code of Conduct. During the UM orientation activities for new first year students, students complete a one-day workshop taught by an ethicist on research ethics. Students also complete "research ethics and compliance training" through the university's online CITI training platform. The CITI training must be renewed every two-years and is monitored by students' research mentors. Ethics and legal standards are also integrated into students' Case Conference experiences at the PSC, and through all of their practicum activities. These training experiences are evaluated by grades in courses (PSY 657); passing grades for the biennial CITI certification; and clinical practicum supervisors' ratings for "Professional and legal standards" section of the Clinical Practicum Training Evaluation Form. Finally, during the PSC Orientation Workshop (which typically occurs during the summer following the first year in the program), students' review and discuss the APA Ethical Principles of Psychologists and Code of Conduct. As part of this workshop, students are required to prepare a reflection paper that addresses their reactions to the APA ethical principles (as well as other APA guidelines) to further evaluate students' competency in this area.

Exposure to and knowledge of **Diversity and Individual Differences** is gained in multiple aspects of the UM Program in Clinical Psychology, including coursework, research training, and clinical training. This multi-faceted approach enables students to gain a high level of training in cultural diversity and individual differences, while also allowing them to integrate their diversity knowledge with other content areas in clinical psychology. Direct course coverage is provided in PSY 614 (*Diversity Issues in Psychology*) and in required courses on psychopathology (either PSY 640: *Adult Psychopathology* or PSY 641: *Child and Adolescent Psychopathology*). PSY 614 familiarizes students with some of the major, overarching conceptual issues in the phenomenon of difference, stimulates a dialogue on these issues so that students understand how their own person/cultural history attitudes and biases may affect how they interact with people different from themselves, and explores how diversity issues fit into research and practice. PSY 640 and 641 both focus on individual differences, taking culture and diversity into account. Diversity issues are also integrated into other **required DSK coursework**.

The highly diverse, multicultural nature of the Miami area provides students with ample opportunities to work with diverse populations in practice and research settings. In terms of **practice**, our training clinic (the PSC) draws a diverse clientele, as do all of the external practicum placements used by our program. During training at the PSC, students must explicitly address diversity issues in Case Conference when presenting their assessment and therapy cases. Further, during the PSC Orientation, several APA guidelines that pertain to diversity (e.g., APA Multicultural Guidelines; Guidelines for Assessment and Intervention with Persons with Disabilities; Guidelines for Psychological Practice with Transgender and Gender Non-conforming Individuals) are reviewed and discussed. In **research activities**, all students are exposed to diverse populations in conducting their thesis and dissertation research, and in working in their research mentor's lab. In fact, many faculty focus explicitly on gender, race, ethnicity, sexual orientation, and/or other aspects of diversity in their research programs that students are exposed to or participate in. Thus, students have access to research programs that are informed

by cultural context, which are at the cutting edge of applying a sociocultural lens to issues of psychopathology and problems of living. Overall, students' competency in this profession-wide area is assessed by course grades; practicum evaluations for items pertaining to cultural and individual diversity; case conference evaluations; and ratings for attention to diversity issues on students' research paper for the Quals. During the PSC Orientation Workshop, students also are required to prepare a reflection paper that addresses their personal thoughts and reactions to the APA Guidelines that cover diversity (e.g., multicultural, LGBT, older adults, girls and women, disabilities, etc.).

The competency of **Professional Values, Attitudes, and Behaviors i**s addressed via PSY 657, which covers a variety of professional issues prior to students' beginning practicum. During students' **practica** at the PSC, they are directly encouraged to behave in ways that reflect the values and attitudes of psychology (e.g., integrity, deportment, professional identity, etc.), and concern for the welfare of others. These attitudes and behaviors are further reinforced in advanced practicum placements. In fact, each semester, students' professional conduct and values are evaluated by their practicum supervisors, who provide students with direct feedback. In a **research** context, attitudes toward life-long learning are reinforced by students' (required) attendance at multiple Department Colloquia and by students' presentations and attendance at professional/scientific conferences.

The competency of **Communication and Interpersonal Skills** is addressed in multiple ways. For example, students take PSY 601, which covers a wide range of professional topics including how to communicate in research settings (e.g., guidelines for poster presentations at conferences; thesis and publication preparation) and CV preparation. Students are graded in part on their oral communication in class. In the PSC Case Conference, students orally present their conceptualization and outcome of an assessment and a therapy case. Throughout **practicum** experiences, communication is evaluated through assessment and intake report writing; ability to verbally and succinctly summarize case history, test results, treatment plan, and recommendations; and ability to discuss and resolve disagreements with supervisor in a professional manner. Each semester, practicum students' communication and interpersonal skills are evaluated by their practicum supervisors, who provide direct feedback to students. In addition, all students teach an undergraduate course in their third or fourth year, which requires them to communicate with a wide range of individuals, and often to manage difficult communication. **Teaching** experiences are directly supervised by a faculty mentor who provides feedback to the student. Throughout **research** training, opportunities are available to assess communication skills. For example, written and verbal communication are evaluated during the master's thesis and dissertation process. Committee members rate students using the SACS Form and assess their written and oral communication. In addition, the empirical paper submitted as part of the Quals procedures is also independently rated by two faculty members. Students also are required to present at least 3 first-authored conference presentations or publish at least 1 manuscript (as author or co-author) during their training in the program.

For the competencies of **Assessment** and **Intervention**, all students complete general coursework, as well as coursework pertinent to their major area of study within clinical

psychology (i.e., adult, child/family, pediatric health, and health). Material covered in coursework is reinforced in required practica and in Quals where the students complete a case conceptualization that includes an evidence-based assessment and intervention plan. With respect to **courses**, all students complete a 2-course assessment sequence, beginning with PSY 645 during their first semester in the program. This course is comprised of didactic and laboratory components and covers measurement theory, the administration and interpretation of evidence-based measures such as intelligence and personality tests, diagnosis of psychological problems, history and systems, and ethical/legal/cultural considerations. Depending upon students' area of focus, the second required assessment course is either PSY 646/647 (adult, child and pediatric), or 648 (health). Similarly, students complete a 2-course intervention sequence that includes PSY 657 (*Introduction to Evidence-Based Psychological Treatments*), which covers profession-wide competencies pertaining to effective interventions and evaluating the efficacy of interventions, and an advanced intervention course that is aligned with their major area of study within clinical psychology. For example, students with health as a major area of study take PSY 662: *Health Psychology Interventions* while students with child/family as a major area of study take PSY 660: *Evidenced-based Psychological Intervention with Children and Families*.

Current knowledge in assessment and intervention is further reinforced through **practicum experiences**, which span the second through fourth year of graduate training. Practica are structured and sequential, and follow the rule that more general, closely supervised training precedes more advanced and specialized practica. Students spend at least one year of training at the PSC, under the supervision of program faculty. At the PSC, second year students attend weekly case conferences focusing on: integrating the current knowledge base in clinical psychology with assessment and treatment of clinical cases, evaluating ethical and cultural issues pertinent to assessment and treatment and developing an understanding of issues of supervision, consultation, and interprofessional/interdisciplinary skills. At the PSC, students use evidence-based assessments and interventions to integrate knowledge from courses with clinical practice. Various specialty clinics also operate through the PSC (e.g., Child and Adolescent Mood and Anxiety Treatment Program or CAMAT, Trauma Treatment Program, etc.) that use evidence-based or manualized treatments with quality assurance procedures or have assessment components that involve structured clinical interviews. Advanced practicum settings (e.g., Mailman Center for Child Development, Miami VA Health Center, UM Counseling Center) also incorporate didactic components that address issues of assessment, intervention, consultation/supervision, ethics, and diversity, and so on. Students' advanced practica align with their major area of study within clinical psychology (e.g., those with child/family interests train at the Mailman Center; those with health interests train in settings such as the Miami VA and Memorial Cancer Center; those with adult interests train in settings like the Miami VA and the Oliver Pyatt Treatment Center).

Finally, students are involved in **research activities** that focus on assessment or intervention; this can occur either as part of their ongoing research activities in their faculty mentor's research lab, or as a "clinical research activity" wherein students devote 5 or more hours a week to assessment or intervention activities in a lab conducting active clinical research

projects. For example, in the Adult Division, via the Couples Lab, students conduct videoconferencing calls with low-income couples participating in an online program to ameliorate relationship distress. Students also are involved in clinical research on schizophrenia (Culturally Informed Therapy) and anxiety disorders (Program for Anxiety, Stress, and OCD). In the Child Division, clinical research projects with assessment and/or intervention components include COMET (an effectiveness study comparing three different psychosocial treatments for adolescents with emotional disorders), UTalk (a preventive intervention for peer-victimized adolescents), and CAMAT (a treatment study for children with anxiety and mood disorders). In the Health Division, students have been involved several ongoing clinical trials and longitudinal studies that provide clinical assessments and face-to-face and remotely-delivered culturally-adapted cognitive-behavioral oriented interventions. The interventions relate to topics ranging from HIV prevention (primarily with sexual and gender minority individuals) and HIV care (primarily with individuals who need additional self-care and mental health support) to adaptation to breast and prostate cancer treatment. Finally, students are engaged in clinically-relevant research activities (for master's thesis, dissertation) that involve clinical populations, investigate clinical treatments, or have direct implications for clinical practice. All students discuss the clinical implications of their research findings in their theses and dissertations.

Overall, the program assesses students' competencies in assessment and intervention via grades in courses and on Quals, and via ratings of skills and competencies provided by practicum supervisors and clinical research supervisors/mentors.

For the competency of **Supervision,** we require students to complete a program-approved online CE course on supervision, "Supervision: A Guide for Mental Health Professionals", prior to applying for a clinical internship. (The cost of this online course is covered by the Psychology Department; see Appendix F for additional information.) Through multiple **practicum** experiences, students also learn how to maximize the use of supervision and are exposed to multiple supervision styles of supervisors; practicum supervisors also rate students on their use of clinical supervision. Further, prior to each practicum placement, students complete a student-practicum site agreement with their main clinical supervisor, which details how practicum activities and clinical supervision will be provided. PSY 657, the required course students take prior to practicum training, also includes a 1.5-hour lecture on supervision models and utilization of supervision, as do each of the advanced intervention courses (i.e., PSY 660, 662, 685). Lastly, additional opportunities to gain specialized experience in supervision models and practices are available to advanced students through enrollment in Advanced Assessment Practicum or Advanced Therapy Practicum (where these advanced graduate students help supervise students beginning their practicum training). Overall, we assess competency in supervision by a passing grade on the CE course; practicum supervisors' ratings of supervision-related items; and grades on the supervision component of PSY 657 and advanced intervention courses.

Finally, **Consultation and Interprofessional Skills** are woven into several program activities. For example, in **practicum** settings, students learn about how to consult and interact with different professionals. This is especially true for all external practicum placements, where students are

training with diverse professionals in medical, school, and other community settings. Each semester of practicum, students also are evaluated on their interprofessional skills by their practicum supervisors. In terms of coursework, PSY 657, the required course students take prior to practicum training, includes a 1.5-hour lecture on consultation and interprofessional skills, as do each of the advanced intervention courses (i.e., PSY 660, 662, 685). Overall, we assess competency in this area by practicum supervisors' ratings of consultation/interprofessional skills; and grades on the consultation/interprofessional skills components of PSY 657 and of the advanced intervention courses.

Cultural Diversity of the Miami Area and Program

The UM student body is one of the most diverse among private universities in the US, and the greater Miami area is one of the most ethnically- and culturally- diverse areas in the country. The ethnic composition of Miami-Dade County ([2020 census](#)) is 69% Hispanic or Latine, 18% Black or African American, and 13% Non-Hispanic white. Our Latine population is extremely diverse, and includes Cubans, Nicaraguans, Columbians, Hondurans, Puerto Ricans, Venezuelans, Mexicans, and others from Central and South America and Europe. The Black population includes Haitians, Jamaicans, Bahamians, other Caribbean Blacks, and African Americans. The Miami area also has tremendous diversity with respect to religion, gender and sexual identities, and income. Thus, issues of cultural and individual diversity and the need for respect of such diversity are pervasive in the lives of UM students and faculty.

Within the UM program, issues of diversity permeate research, coursework, and practica experiences. (See the description of Diversity and Individual Differences, above.) Our program has been highly responsive to the need to adapt research and clinical service delivery to the diverse Miami community by developing culturally responsive procedures. A sizable proportion of the Department of Psychology's **research and training grants** focus on the special opportunities that exist here to study diverse populations, with respect to age, color, disability, ethnicity, gender identity, language, national origin, race, religion, culture, sexual orientation, and income. The Department has a federally-funded research training grant, supporting many clinical students that primarily focus on ethnic minority populations. Funded research also focuses on topics related to ethnic/cultural diversity, such as the Hispanic Community Health Study (chronic disease factors; health protective behaviors); HIV prevention and trauma treatment; interventions for peer victimized youth; and health disparities affecting youth.

Finally, throughout the Psychology Department, the valuable work of the **Diversity and Equity Committee** further contributes to a climate that fosters a supportive and encouraging environment that promotes diversity and discussions of related issues. The DEC initiatives provide opportunities for students and faculty (and staff) in our program to undergo further training in multiple issues around diversity and intersectionality.

III. <u>Practicum Placements</u>

In terms of **practicum** training, all students spend at least one year at the Department's Psychological Services Center (PSC), where they are required to use evidence-based assessment

measures in evaluating clinical cases, and to incorporate evidence-based treatment strategies. In addition, students can participate in one of several specialty clinics at the PSC that are based on clinical research projects and which are supervised by clinical faculty. These specialty clinics provide manualized treatments and gather systematic data for research purposes. Several other key area-specific practicum sites that are primary external practicum placements, such as the Mailman Center for Child Development, the University of Miami Counseling Center, and the Miami VA, are also APA-Accredited clinical internships that provide high quality training, emphasizing the scientific basis of practice.

If students are seeing *any* clients through any type of placement, they **must** be enrolled in practicum credits or other program-sanctioned credits (even over the summer, or just seeing one client). This is required in order to be covered by the University's liability insurance, as well as individual liability insurance.

Psychological Services Center Guidelines
Please see the PSC Policy and Procedure Manual for a full description of guidelines and procedures in the PSC. During all clinical students' second year in the program, they are required to participate in therapy and assessment practicum in the PSC. Child and pediatric students are expected to accumulate at least 80 face-to-face therapy hours (starting in the fall) and adult and health students are expected to accumulate at least 100 hours of therapy (starting in the summer). Adult and health students will conduct 3 comprehensive assessment cases (typically starting in the fall) while child and pediatric students will complete 5 comprehensive assessment cases (starting in the summer). With the exception of involvement with the CAMAT program, no group participation is permitted during the first full practicum year at PSC.

Students continuing beyond their first full year of training at the PSC may see one client at the PSC, depending on PSC resources, but must obtain permission from their Clinical Coordinator to see additional clients.

Additional Guidelines for Practica
The Clinical Coordinators for each Division (Adult, Child, Health) oversee the practicum placements of its students each semester and make appropriate assignments of students to placements. Placements must be arranged with and approved by each Clinical Coordinator. **Students are not permitted to negotiate their own practicum placements.**

Clinical program requirements indicate that students are required to complete 6 semesters of practicum training; however, in most cases, students will engage in practicum training throughout the 2nd–4th years of graduate training. Practicum activities should not exceed 10-12 hours per week of clinical activities (including supervision). The 5th year of graduate training is intended for students to focus primarily on research activities; students should not be engaged in full-time practicum during the 5th year, and such activities may only be available on a limited basis. Students must acquire a minimum of 450 face-to-face hours (intervention plus assessment) and 150 hours of supervision before they can apply for a clinical internship.

Students interested in completing a practicum at the Miami VA should be advised that the VA has certain requirements that must be adhered to before you can be accepted as a trainee. Please see Appendix G for a list of these requirements.

IV. <u>Clinical Forms</u>

The department must track many aspects of a student's clinical progress. To do so, students are expected to complete several forms which track their clinical progress each semester. The forms are e-mailed out by the Clinical Program Administrative Assistant. Failure to complete forms in a timely manner may result in the student receiving an incomplete on their transcript.

V. <u>Clinical Research Opportunities</u>

In terms of **research**, the emphasis of the department is on applied research that focuses on important clinical issues in psychopathology, assessment, and/or intervention with clinical or clinical health populations. For example, in the Health Division, students have been involved in the *Coping and Recovery Project* and the *VideoHealth Study*, which are funded clinical trials with health populations (i.e., breast cancer, chronic fatigue patients) that contain evidence-based assessment and intervention components. In the Child Division, clinical research projects with assessment and/or intervention components include *PEERS* (an indicated preventive treatment for peer-victimized adolescents) and *Kid Detectives* (a group treatment study for children with anxiety and depression). In the Adult Division, students have been involved in clinical research on schizophrenia (*A Culturally Based Family Therapy for Schizophrenia*) and anxiety disorders (*Program for Anxiety, Stress, and OCD*). Most graduate students are engaged in clinically relevant research activities (for master's thesis, dissertation, and grant-funded research activities) that involve clinical populations, investigate clinical treatments, and/or have direct implications for clinical practice. The dissertation topics of our graduates have primarily focused on applied clinical issues, such as: interventions for health populations; the psychological impact of peer victimization; risk factors for affective dysregulation, to name a few. All students discuss the clinical implications of their research findings in their theses and dissertations.

VI. <u>Helpful Advice to Clinical Students</u>

Keep All Your Course Syllabi from Graduate Courses
Our clinical program uses an "infusion" model to cover certain content areas that are required for program accreditation (e.g., psychometrics, etc.). If you have not taken a graduate course on a specific topic that is required by certain state licensing laws, you will need to use your syllabi as evidence that you covered that topic as part of one or more graduate courses. Thus, it is critical to keep a copy of your course syllabi for ALL graduate level classes. You can also download copies of brief course descriptions from the University of Miami Academic Bulletin, but these may not be as useful as a detailed syllabus.

Keep Track of Your Practicum Hours "As You Go."

When you apply for a clinical internship during your 4th or 5th year, you will need to provide a very detailed accounting of all your assessment and treatment experiences. In order to do this, we strongly advise you to keep track of your practicum and related training activities at least once each semester. It is best to do this in the format that is consistent with internship applications. We strongly recommend that you use the Time2Track tool to keep track of your hours as its system matches the one used for internship applications. This program is free to UM psychology graduate students with the use of a program code and can be accessed at https://time2track.com/.

VII. Practicum-Related Policies and Procedures

All graduate students who are enrolled in one of the clinical program major areas of study (i.e., adult, child/family, pediatric health, or health clinical) must comply with the policies of the Clinical Program. These policies have been developed in accordance with the regulations of the American Psychological Association (APA), and particularly with APA's Commission on Accreditation. The policies are designed either to maintain the clinical program's current APA accreditation, to protect students, or to facilitate students' progress through the clinical program.

Professional Liability Insurance

Since August 15th, 2001 and every August thereafter, all students enrolled in one of the clinical program major areas of study (i.e., adult, child/family, pediatric health, or health clinical) are required to secure their own liability insurance, either through the American Psychological Association (see https://www.apa.org/) or through an alternative suitable source (e.g., the American Professional Agency, Inc.: https://www.americanprofessional.com/). The maximum insurance amount of $1,000,000 per incident/$3,000,000 aggregate is required.

All clinical students who will be enrolling in practica or participating in any other department-related clinical activities (i.e., assessment, therapy, consultation) are required to obtain such insurance before involvement in practicum activities at the University of Miami or in any community placement. Students must submit a copy of insurance verification to the main office of the Department of Psychology prior to beginning practicum for the academic year.

Students should be aware that insurance policies do not cover clinical activities or jobs other than those associated with practicum training or the fulfillment of other program requirements. Failure to provide insurance verification before beginning a practicum placement or any program-related clinical activity will result in the student's forced withdrawal from practicum until such insurance verification is provided.

VIII. Internship Application

Students typically apply for internship in their 4th or 5th year of graduate studies. The Director of Clinical Training holds a meeting for all students wishing to apply to internship for the next year,

where all necessary information is distributed. The DCT also holds several meetings throughout the year to prepare students for the internship application process.

The website for the Association of Psychology Postdoctoral and Internship Centers (APPIC) (www.appic.org) contains the most current information on internships and psychology postdoctoral positions. Further, it is important to talk to your faculty mentor, psychology alumni, and other clinical faculty about the internship sites they recommend. The general application for internship is posted online every July at www.appic.org.

Because many internship sites request applications by the end of October, students are required to defend their dissertation proposal no later than **October 1** of the year they apply for internship. Having defended a dissertation proposal is a requirement for submitting internship applications (see Appendix I). Students also must complete **an online course on supervision** (PSY 002: *Supervision*) by **October 1** of the year they apply (see Appendix F).

For students enrolled in the clinical program, failure to successfully complete a clinical internship by the end of the seventh year in the program may result in program dismissal.

IX. **Internship and Beyond**

Graduation
In order to graduate in May, you must have completed all course requirements, dissertation, and internship by the date of "application for graduation." This is usually in April (or earlier) for a May graduation. Because clinical internships typically begin in the summer, very few, if any, students graduate in May. Most students graduate in the summer or December. Students on internship, who have defended their dissertation and completed their coursework, can "walk" in the May commencement ceremony, and will officially receive their degree in August, if all degree requirements are met by the end of July. Please check the UM website for information on graduation registration dates and deadlines (https://commencement.miami.edu/).

Students with August or September 1st start dates for internship typically graduate in December. However, it may be possible to graduate in August, **after all degree requirements including the internship are met**. Specifically, when you submit a letter from your Internship Training Director, indicating that the internship has been completed successfully and the date of completion, the Graduate School may be able to issue an August degree. Please contact the Graduate School and the Department of Psychology main office if you are trying to graduate August or September and allow at least 2 weeks for processing your degree. Otherwise, you should plan to graduate and attend the December ceremony. Also, all students who have successfully defended their dissertation by May of the year they expect to graduate are eligible to "walk" in the May graduation ceremony.

If you are not graduating until December but need to document that you have completed all your degree requirements, **please contact the main office of the Department of Psychology**. A letter will be written on your behalf, stating that you have met all the requirements for your

degree. This is usually sufficient for you to begin a job or postdoctoral traineeship.

Licensure

The department encourages all clinical graduates to become licensed as it is a required "program outcome." Licensing requirements are available online through the Association of State and Provincial Psychology Boards (www.asppb.org). You can check each state individually.

Some states require coursework in specific areas such as domestic violence. Most of the requirements should be met through your regular coursework. However, if you have not taken a course on a specific topic, **you may be able to use your syllabi as evidence that you covered that topic as part of one or more courses**. You may need to take an extra course or locally sponsored workshop to meet requirements in some states (e.g., California).

X. Policy on "Outside" Clinical Activities

Any clinical student who anticipates engaging in clinically-related activities that are not part of the approved clinical program activities must secure permission for such activities from the Clinical Committee. This is the case regardless of whether the activities are volunteer or paid. The following procedures apply to all clinical students who wish to do paid or non-paid clinical activities, outside of a program-approved practicum or research setting.

The Director of Clinical Training will review students' requests with input from the Clinical Committee. Please allow at least 2 weeks for the approval process, and possibly longer during the summer or during semester breaks (e.g., intersession; spring break).

Procedures for Applying for Outside Clinical Activities

1. Prepare a letter for the Director of Clinical Training (Dr. Jensen-Doss) describing:
    -the job (i.e., type of activity)
    -the # hours per week
    -the name, phone number, and professional background of the supervisor (should be a licensed professional)
    -the amount and type of supervision provided
    -whether or not the supervisor or "site" has professional liability insurance to cover your activities, and the amount of the insurance
    -whether or not it is a "paid" or "volunteer" position
2. The letter should acknowledge that you understand that:
    -under APA ethical guidelines and the FL state licensing guidelines, you may not represent yourself as a psychologist or as a graduate student in our program/department
    -the hours accumulated in an outside clinical setting cannot be counted toward your clinical hours for internship
    -neither the UM liability insurance policy, nor your individual liability insurance policy, covers your activities in case of malpractice, as the activities are not a part of your training program

3. Have the letter co-signed by:
   -your major research advisor
   -the Division Director or the Clinical Coordinator for your major area of study (e.g., Drs. Timpano or Weisman for Adult; Drs. Messenger or Lindahl for Child; Drs. Schneiderman or Saab for Health)
4. In the case of paid employment, approval may also be required from the Graduate School Dean.

XI. <u>Clinical Program Minimum Standards</u>

For clinical graduate students, failure to demonstrate satisfactory performance (e.g., grade of B- or higher) in any clinical course – even after retaking the course, receiving an unsatisfactory practicum evaluation, or failure to abide by APA ethical standards (e.g., confidentiality, record keeping), may result in dismissal from the program. Ethical guidelines and standards are discussed in the Ethics section and in the APA ethics code (https://www.apa.org/ethics/code or Appendix H).

XII. <u>Professional Conduct</u>

Clinical students are in a professional training program, and those who do not behave in a professional manner throughout their training may be dismissed from the program. Examples of unprofessional behavior include: frequently arriving late for classes, supervision, clinical appointments with clients, or other professional meetings; verbal aggression (in person or online) toward supervisors or instructors; excessively rude, disrespectful behavior with faculty, classmates, or clients; unprofessional behavior toward clients or research subjects; and intoxication on campus. Evidence of unethical behavior in research, clinical work, or classes (e.g., cheating on exams, PLAGIARISM) is grounds for program dismissal.

XIII. <u>Policy on Ethics and Confidentiality</u>

It is critical that students who participate in clinical training activities fully abide by all aspects of the ethical guidelines for psychologists, published by the American Psychological Association (APA; www.apa.org/ethics).

As one aspect of the ethics code, which pertains to issues of confidentiality, this means that students should treat client notes, assessment materials, testing reports, or other sensitive clinical materials, with utmost care, and do everything possible to protect the confidentiality of client information.

Students should not leave confidential materials in places where others may view the materials inadvertently (e.g., on a printer that is in a shared public space; on a desk in an office that is shared with other students, etc.). Confidential management of case materials applies to both electronic security of online chart documents and in-person management of such materials. Whenever sharing case materials (e.g., for case conference or class; as a sample report for

internships) extreme care should be used to remove all identifying information.

Professional and research training at UM includes becoming socialized to the role of a psychologist, and conducting research, clinical, and personal activities in a manner that is consistent with the APA ethics guidelines and standards. Graduate students are required to know and abide by the APA ethics guidelines and standards. The guidelines are included in Appendix H and may be downloaded at any time from the APA website: https://www.apa.org/ethics.

Failure to fully abide by this or other aspects of the APA ethics code may be cause for dismissal from the clinical program.

Part 3:

Policies and Guidelines

Departmental Policies, Practices, and Guidelines

I. Mission Statement

The mission of the University of Miami is to transform lives through education, research, innovation, and service. In accordance with the goals of the University of Miami, the mission of the Department of Psychology is to acquire, advance, and disseminate knowledge within the Psychological and Biobehavioral Sciences. In order to achieve these goals, the Department seeks a balance among several academic endeavors including: teaching, research, and service to the community.

The Department seeks to provide students with exposure to and a fundamental understanding of the psychological and biobehavioral sciences. It seeks to deliver an integrative educational experience by promoting interactions among faculty, graduate students, and undergraduate students in basic and applied psychological inquiry, advising, mentoring, and community outreach, while being mindful of diversity, equity and inclusion issues in all these activities.

In training graduate students for a career in the psychological sciences, it is the intent of the Department to:
1. Promote advanced understanding of behavioral, psychological, and biological processes, with an understanding of the limitations of existent research in this domain relative to historical underrepresentation of diverse persons in such research.
2. Provide rigorous training in research design and analysis and stimulate advanced research skills.
3. Provide detailed scientific knowledge about psychology as well as clinical psychology training, cultural competencies and practical experience for those students seeking applied training in a career as a clinician scientist, in accordance with the American Psychological Association guidelines for accreditation in Clinical Psychology.
4. Foster independent learning, enabling the graduate to contribute to the scientific field of Psychology, including Clinical Psychology.

As a center for research in the psychological and behavioral sciences, the Department will strive to:
1. Conduct rigorous scientific research, which will elucidate both basic and applied principles of human behavior and psychological processes.
2. Foster international communication of scientific information and values.
3. Acquire extramural resources necessary to conduct internationally respected psychological research.

Service on the local, state, and national levels will be accomplished by Departmental faculty and/or graduate students who:

1. Provide psychological services to culturally diverse populations in clinical training settings and research settings.
2. Serve within state and national professional organizations, and scientific review/policy committees.

In pursuing these activities the Department seeks to attract and retain the highest quality faculty and students, foster respect for differences among people, nurture curiosity, and insist upon high standards of thought, study, and communication that should characterize the ethical, educated person.

II. Student Rights and Responsibilities

All University of Miami students are subject to the policies and procedures defined in the "Student Rights and Responsibilities" document available at the Dean of Students' webpage.

III. Graduate Student Honor Code

For issues pertaining to academic misconduct or dishonesty, students should refer to the Graduate Student Honor Code at the Dean of Students' webpage.

IV. Disability/Impairment Issues

If you have an issue that affects your ability to complete your responsibilities, even temporarily (e.g., health, psychological, family, or personal reasons), please understand that is your responsibility to let those who supervise you know about it. While personal problems can impact performance, personal problems do not "excuse" you from conducting yourself in a professional manner (e.g., turning in assessment reports in a timely manner; meeting with clients on time, showing up for class and research meetings, etc.). Faculty and supervisors are willing to make reasonable accommodations, if they are consulted. However, it is difficult for such accommodations to be made if the student's challenges are unknown to faculty or supervisors.

If you have documented disability that requires University-based accommodations (e.g., Learning Disorder, a health condition, etc.) that may affect your academic, research, or clinical performance, you should consult with the Office of Disabilities Services. Early documentation of disabilities is encouraged, such that reasonable accommodation can be made in a timely manner.

The Office of Disabilities Services is a subdivision of the University of Miami Camner Center for Academic Resources.

The contact information is as follows:
Whitten University Center, Suite 2400, Telephone: 305-284-2800

Hours: 8:30 a.m. and 5:00 p.m., Monday to Friday.

V. <u>Guidance for Pregnant and Parenting Students</u>

The University of Miami is committed to creating a culture of belonging for all students, including those who are pregnant and parenting. A document providing guidance for pregnant and parenting students at the University of Miami is posted on the University's Title IX website at the following link: https://titleix.miami.edu/policies-guidance/index.html. The Department is committed to supporting the needs of pregnant or parenting students and the Associate Chair for Graduate Studies is happy to assist, as needed, if additional accommodations are needed to support such students.

Dr. Tatiana Perrino, Associate Dean of the Graduate School, is also a resource for pregnant/parenting graduate students: (305) 284-4154 / t.perrino@miami.edu.

VI. <u>Personal Problems</u>

As stated in APA's "Ethical Principals of Psychologists and Code of Conduct" (see Appendix H):

> *"Psychologists refrain from initiating an activity when they know, or should know, that there is a substantial likelihood that their personal problems will prevent them from performing their work-related activities in a competent manner. When Psychologists become aware of personal problems that may interfere with their performing work-related duties adequately, they take appropriate measures, such as obtaining professional consultation or assistance, and determine whether they should limit, suspend, or terminate their work-related duties."*

The Department takes a similar position with regard to Psychologists-in-training. Examples of personal problems include, but are not limited to, substance abuse, maladaptive social behaviors, untreated mental or physical health issues, and dishonesty in dealing with peers, supervisors, clients, or others.

If such problems are affecting you, please reach out to any of the support faculty available to you, including the Associate Chair, your Director of Clinical Training, Division Director, faculty mentors, etc. to assist in connecting with resources that may help. Ideally, such supports will be engaged prior to any limitations need to be placed on student's work-related duties but may also be encouraged as part of a support or remediation plan.

VII. <u>Non-Discrimination Policy</u>

The Department of Psychology endorses the University of Miami's policy on non-discrimination,

described on the website. The core of the policy statement reads as follows:

"It is the policy of the University of Miami that no person within the jurisdiction thereof shall, on the basis of race, religion, color, sex, age, disability, sexual orientation, gender identity or expression, veteran status, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination or harassment (including all forms of sexual harassment and sexual violence) under any program or activity of the University, regardless of whether such program or activity occurs on-campus or off-campus."

VIII. <u>Sexual Harassment Policy</u>

The Department of Psychology will not tolerate verbal or physical abuse on the part of its faculty, staff, or students <u>of any kind</u>. The Department also endorses the University's policy on sexual harassment. Full disclosure of the University of Miami's policies on sexual harassment can be found on the University website: <u>https://titleix.miami.edu/</u>. Please note the steps presented on this site for filing a grievance related to such policies. The core of the policy is provided here:

"The University of Miami is committed to providing an environment free from all forms of discrimination including sexual harassment. Sexual harassment is a form of sex discrimination that violates Title VII of the Civil Rights Act of 1964 and the University's Sexual Harassment Policy. Sexual harassment includes, but is not limited to, physical or verbal abuse of a sexual nature including graphic commentaries about an individual's body, sexually degrading remarks used to describe an individual, or unwelcome propositions and physical advances of a sexual nature. Sexual harassment also includes the threat of insinuation that sexual submission or the lack thereof will be used as a basis for employment or educational decisions affecting or interfering with an individual's salary, academic standing, or other conditions of employment, educational, or career development. It is the policy of the University to promote a cooperative work and learning environment in which mutual respect exists for all University students, faculty members, and employees. Sexual harassment is inconsistent with this objective and contrary to the University's policy."

All graduate students, faculty, and staff in the Department of Psychology are required to attend a Sexual Harassment Workshop during their first few weeks at the University.

IX. <u>Social Media: Recommended Guidelines</u> (La Greca & Danzi, 2017)

As communication channels proliferate, the lines between public and private information can blur. Personal websites, blogs, email signature lines, text messages, voicemail messages, Twitter, Instagram, etc., and media interviews, afford numerous avenues for personal expression and increasingly call for discretion and good judgment in how they are used. The following are guidelines (not requirements) intended to provide helpful suggestions for best

practices as students navigate the usage of various forms of electronic communication and social media.

When using social media, we expected that students will act with courtesy and respect toward others. Students should keep in mind that, as representatives of the University of Miami Psychology Department and the psychological profession, what is communicated on social media reflects on the university and can have an impact on the public's perception of mental health services. For this and other reasons, we recommend that you consider the following:

- Internship and post-doctoral training programs conduct web searches on applicants' names.
- Employers conduct on-line searches prior to interviews or job offers.
- Prospective clients conduct web-based searches on potential therapist names.
- Clients often approach therapists via networking sites and email.
- Legal authorities review personal websites for evidence of illegal activities.

In particular, be aware that:

- Once you have posted something via social media, it is out of your control. Others may see it, repost it, save it, forward it to others, etc. Retracting content after you have posted it is practically impossible. While there are robust and supportive online communities of academic scholars on Twitter and other social media sites that the Department encourages you to avail yourself of, these are still public forums for communication.
- Any content that you host (e.g., comments posted by others on your site) can have the same (negative) effect as content you post.
- Email signature lines and voicemail greetings that might express your individuality or reflect your sense of humor also may not portray you in a professional manner. Consider that quotations on personal philosophy, religious beliefs, and political attitudes might cause unanticipated reactions from people with differing backgrounds and viewpoints.

Guidelines for responsible social media practices include the following:

- Keep an eye on your social media "presence." Conduct periodic Google searches on yourself to find out what information can be accessed about you on the Internet. For more information see: https://www.apa.org/gradpsych/2015/11/corner
- Consider using the highest privacy settings available (i.e., "Friends only") on Facebook, Twitter, and other social networking websites. Monitor these settings periodically to ensure that privacy settings previously selected remain intact.
- Never become a "friend" of a therapy or testing client online, thereby enabling them to access personal information about you.
- Be respectful and thoughtful about what you post on public psychology forums, including those sponsored by professional organizations such as the American Psychological Association (APA).
  - Check APA's social media policy at https://www.apa.org/about/social-media-policy

- Make sure the content you post is in harmony with APA and state ethical and professional guidelines. For more information about "best practices" check this link: https://www.apa.org/monitor/2014/02/ce-corner

X. <u>Guidelines for Publication Practices</u>

The Department of Psychology follows the APA's Guidelines of Publication Practices & Responsible Authorship.

Specifically, it is emphasized that when publishing researchers should aim for:
-Accurate and honest reporting of research methodologies and results
-Avoiding dividing a project into "least publishable units"
-Avoiding publishing duplicate studies

Authorship credit should reflect the individual's contribution to the study. An author is considered anyone involved with initial research design, data collection and analysis, manuscript drafting, and final approval. However, the following do not necessarily qualify for authorship: providing funding or resources, mentorship, or contributing research but not helping with the publication itself. The primary author assumes responsibility for the publication, making sure that the data are accurate, that all deserving authors have been credited, that all authors have given their approval to the final draft; and handles responses to inquiries after the manuscript is published. More information can be found here: https://www.apa.org/research/responsible/publication/

XI. <u>Diversity and Equity</u>

The Psychology Department is strongly committed to promote diversity. We recognize there are many aspects of diversity, including differences among dimensions of race, ethnicity, gender identity, sexual orientation, religion, culture, language, socioeconomic status, age, geography, national origin, and physical abilities. We also recognize that any given individual may identify along more than one of these dimensions. The Diversity & Equity Committee was established as a joint faculty-staff-student effort to facilitate training in diversity issues and to evaluate our diversity training with representation from each.

The goals and specific objectives of the Diversity & Equity Committee include:
- Draw attention to the ways in which we, as researchers, clinicians, and professionals can incorporate a greater understanding of diversity into our multiple professional roles.
- Include a focus on diversity in professional development seminars.
- Organize discussions and activities to increase awareness of issues associated with dimensions of our own multicultural identities in relation to our work.
- Encourage integration of diversity training throughout our curriculum.
- Periodically assess the extent to which students and faculty feel that we are meeting our diversity training goals.
- Promote awareness of university and community events related to diversity

- Organize events and discussions on diversity topics
- Inform students and faculty of special events and diversity training opportunities

The Diversity and Equity Committee is open to feedback about ways we can best serve the Department in accordance with our goals. Ideas for training, speakers, events, and other opportunities may be sent to any member of the committee.

Ethics

I. <u>Plagiarism</u>

The following definitions and resources were taken from the University of Miami School of Medicine Office of Research Education and Training website.

Scientific Misconduct includes Fabrication, Falsification, and Plagiarism. A formal definition of Scientific Misconduct from the DHHS is still pending; however, there is general consensus of the elements.

Plagiarism is the intentional use of someone else's words (e.g., direct quotes), thoughts (e.g., paraphrased quotes), ideas (e.g., charts, data), or internet materials in your own writings/presentations as if you had come up with them on your own. Plagiarism is the theft of intellectual property and is not unlike stealing from a commercial business.

Another issue to consider in this context is what some term "self plagiarism," in which an author uses substantial segments of their own published material in a new publication without reference. Another example is when students present the same paper they have written for the two different course assignments.

Although the University of Miami has established strict policies against plagiarism by students there are currently no web-based courses on plagiarism available.

The Department of Psychology will assess all theses, dissertations, and qualifying papers for potential plagiarism (see Plagiarism Definitions, p. 36) using commercially available software, such as the "Safe Assignment" program provided by the Office of Instructional Advancement. All students are required to submit an electronic version of their thesis, dissertation, and/or qualifying paper to Pat Perreira at least two weeks prior to submission of the document to the Graduate School for this purpose. Students are encouraged to run their documents through the "Safe Assignment" program before they submit the document to scan for potential problems.

AS NOTED IN THE SECTION ON RETENTION, REMEDIATION, AND TERMINATION (APPENDIX D) EVIDENCE OF PLAGIARISM IS GROUNDS FOR DISMISSAL FROM THE PROGRAM.

II. Resources Related to Plagiarism and Scientific Misconduct

University of Miami Resources
University of Miami Honor Code
"What Constitutes Plagiarism" by Christopher F. Colby, President, University of Miami,
   Undergraduate Honor Council
Composition Symposium 2002 "Punishing Forgery, Preventing Plagiarism, and Teaching to
   Motivate" with Rebecca Moore Howard

Web Based Resources available
United States DHHS, Office of Research Integrity (ORI)
   1993 Conference on Plagiarism and Theft of Ideas
   ORI Provides Working Definition of Plagiarism

Other Resources on the Web
Comprehensive Plagiarism site at the University of Illinois
  (http://www.library.illinois.edu/learn/research/academicintegrity.html#ui)
"Plagiarism" by Earl Babbie, Professor Sociology Department, Chapman University
  (http://www.chapman.edu/wilkinson/english/_files/wc-plaglarism.pdf)
"What is Plagiarism?" The History News Network staff has posted three different definitions of
  plagiarism provided by the American Historical Association, Modern Language Association
  and the American Psychological Association (http://hnn.us/articles/514.html)
"On Being a Scientist: Responsible Conduct in Research" from the National Academy of Science
"Keeping Kids Honest in the Information Age: Dealing with Cyber-Plagiarism" by Lorraine
  Sherry, a Senior Research Associate at RMC Research Corporation (Denver, CO) who put
  together this article as part of her work with the STAR Center (Support for Texas Academic
  Renewal). Sherry discusses some reasons why students use the internet to "cut and paste"
  information to complete assignments. She also presents data about term paper providers
  and other sites that "encourage" plagiarism. Tips on how to teach about plagiarism,
  detection strategies, and methods to help prevent plagiarism are also covered.
Rebecca Moore Howard--Articles, Rebecca Moore Howard, Associate Professor of writing and
  rhetoric, and Writing Program Director at Syracuse University is one of the most well-known
  researchers in the area of composition and plagiarism. This site provides access to a number
  of Howard's articles on the topic of plagiarism. Howard presents a seminar at the University
  of Miami in September 2002. A video of Howard's talk is available from the Office of
  Research Education, 305-243-7970.

III. APA Ethical Principles

All students are expected to adhere to APA Ethical principles.

Commission on Accreditation Information

Our program is committed to the accreditation process and we fulfill our responsibilities to the APA Commission on Accreditation. Questions related to the program's accredited status should be directed to:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington, DC 20002
Phone: (202) 336-5979/E-mail: apaaccred@apa.org

Information can be also obtained from their website: https://accreditation.apa.org/

Part 4:

Course Requirements

Requirements & Illustrative Course Schedules by Major Area

Typical Schedule of Graduate Course Offerings in Psychology

Fall

PSY 601: *Issues in Professional Development & Research*
PSY 603: *Neuroanatomy*
PSY 605: *Cognitive Neuroscience*
PSY 610: *Behavioral Medicine: Overview of Basic Science, Public Health, & Clinical Trials*
PSY 616: *Biobehavioral Processes & Clinical Research Applications in Health Psychology*
***PSY 621**: *Theories of Development*
***PSY 624**: *Social Development*
PSY 625: *Social Psychology*
PSY 631: *Psychological Statistics, Research Methods, & Design*
PSY 633: *Structural Equation Modeling*
***PSY 638**: *Psychology of Infant Development*
PSY 640: *Adult Psychopathology*
PSY 641: *Child & Adolescent Psychopathology*
PSY 645: *Introduction to Psychological Evaluation*
PSY 650: *Laboratory in Clinical Psychology (SCID Lab; taken w/PSY 640)*
***PSY 660**: *Evidence-Based Psychological Intervention with Children & Families*
***PSY 662**: *Health Psychology Interventions*
PSY 671: *Assessment Lab (taken w/PSY 645)*
***PSY 697**: *Neuroimaging in the Psychological Sciences 1: Methods*

Fall & Spring

PSY 670: *Practicum in Clinical Psychology*
PSY 672: *Advanced Practicum in Clinical Psychology*
PSY 680/PSY 681: *Research*
PSY 684: *Readings in Psychology*
PSY 804: *APA Accredited Internship*
PSY 810: *Master's Thesis*
PSY 830: *Doctoral Dissertation*

Summer

PSY 806: *Summer Research Practicum*

Spring

PSY 604: *Cognition & Emotion*
PSY 606: *Biobehavioral Processes & Disease in Health Psychology*
PSY 614: *Diversity Issues in Psychology*
PSY 620: *(Advanced) Developmental Psychology*
***PSY 622**: *Cognitive Development*
***PSY 623**: *Language Development*
PSY 632: *Multiple Regression & Multivariate Statistics*
***PSY 634**: *Multilevel Modeling*
***PSY 636**: *Research Methods with Children & Adolescents*
PSY 646/647: *Psychological Evaluation of Adults, Children, and Families*
PSY 648: *Psychological Evaluation in Physical Disorders*
PSY 656: *Introduction to Evidence-Based Psychological Treatment*
PSY 657: *Introduction Psychotherapy, Ethics, & Professional Issues*
***PSY 691**: *Neuroimaging in the Psychological Sciences 2: Applications and Cultural Context*
PSY 696: *Cognitive & Behavioral Neuroscience Journal Club*

By Announcement

***PSY 602**: *Scientific Writing & Grantsmanship*
***PSY 609**: *Psychopharmacology*
***PSY 615**: *Foundations of Neuropsychology*
***PSY 639**: *Autism & Developmental Disabilities*
***PSY 642**: *Advanced Adult Psychopathology*
***PSY 655**: *Evolution and Sex*
***PSY 661**: *Interventions in Pediatric Psychology*
***PSY 683**: *Special Topics*
***PSY 685/PSY 687**: *Seminar in Clinical Psychology*
***PSY 698**: *Seminar in Quantitative Psychology*

** indicates course is **NOT** typically offered every year*

COURSE LIST IS NOT EXHAUSTIVE AS SOME COURSES ARE NOT REGULARLY SCHEDULED OR ARE OFFERED AS SPECIAL ELECTIVES; COURSE OFFERINGS BY SEMESTER CAN BE FOUND ON CANELINK. A FULL LIST OF COURSES IS AVAILABLE HERE.

ADULT CLINICAL Requirements

Student's Name _____ Date _____

Summary of Requirements Completed: Adult Clinical
(Please indicate when the requirement was completed, course number and grade received, as appropriate.)

Discipline-Specific Knowledge Courses (all 4 required; 2 courses must be taken prior to Quals/M.S. Thesis)
PSY 604: Cognition & Emotion _____ PSY 605: Cognitive Neuroscience _____
PSY 620: Developmental Psychology _____ PSY 625: Social Psychology _____

Research Methodology, Statistics, and Data (all 3 required; 2 courses must be taken prior to Quals/M.S. Thesis)
PSY 631: Psychological Statistics, Research Methods, and Design_____
PSY 632: Multiple Regression & Multivariate Statistics _____
PSY 633: Structural Equation Modeling _____

Profession-Wide Competencies (all 5 required) _____
PSY 601: Issues in Professional Development and Research _____
PSY 614: Diversity Issues in Psychology _____
PSY 645: Introduction to Psychological Evaluation (+PSY 671: Assessment Lab) _____
PSY 656: Introduction to Evidence-Based Psychological Treatments _____
PSY 657: Introduction to Psychotherapy, Ethics, and Professional Issues _____

Area-Specific Requirements (* indicates required)
PSY 640: Adult Psychopathology (+ PSY 650: SCID Lab)* _____
PSY 646/647: Psychological Evaluation of Adults, Children, and Families* _____
Advanced Intervention Course: PSY 660, 662, 685, 687 or other approved course. (*1 required) _____

Elective: (2 electives required to meet requirement of 16 3-credit courses)
PSY 602, 610, 616, 641, 642, 648, 660, 662 or other approved course: _____

Practicum in Clinical Psychology (PSY 670; indicate setting and semester completed; 6 semesters required)

	Practicum Site(s)	Face-to-Face Hours	Supervision Hours
First Year			
Second Year			
Third Year			
Fourth Year			
		Total:	Total:

Face-to-Face (450 – 500 hours required prior to internship); Supervision (minimum of 150 hours required prior to internship)
Advanced Practicum (Indicate semester(s) and assessment or therapy) _____

Additional Online Course Requirements (indicate date of completion)
PSY 001: History & Systems of Psychology (Appendix E; must be completed before staring 2nd year) _____
PSY 002: Supervision (Appendix F; must be completed before applying to internship) _____

Qualifying Procedures (indicate when passed) _____

Teaching Requirement (Indicate course and semester taught): _____

Primary Research Mentor: _____
Other/Additional Mentors: _____

Research Productivity (3 presentations or 1 publication required to graduate)

	Publication(s)	Presentation(s)		Publication(s)	Presentation(s)
First Year			Second Year		
Third Year			Fourth Year		
Fifth Year			**Overall Totals:**		

Masters thesis (indicate topic, committee members and date completed; six credits of PSY 810 required)

_____
_____

Dissertation (indicate topic, committee members, date of proposal acceptance and date of final oral.)

_____
_____

(12 credits of PSY 830 are required, from 1 to 6 per semester, no more than 3 of which may be prior to proposal acceptance.)

APA Accredited Clinical Internship (PSY 804; indicate setting and year) _____
(Enrollment in PSY 804 (Clinical Internship) is required and continuous enrollment at UM is required until dissertation defense; students may enroll for 1 dissertation credit per semester following internship to maintain continuous registration.)

Proposed Illustrative Course Schedule: <u>ADULT CLINICAL</u>

<u>FIRST YEAR</u>

<u>Fall Semester</u>

PSY 601: Issues in Professional Development and Research	1 cr.
PSY 631: Psychological Statistics, Research Methods and Design	3 cr.
PSY 640: Adult Psychopathology	3 cr.
PSY 645: Introduction to Psychological Evaluation	3 cr.
PSY 650: Lab for PSY 640 (SCID Lab)	0 cr.
PSY 671: Lab for PSY 645 (Assessment Lab)	<u>0 cr.</u>
10 cr.	

<u>Spring Semester</u>

PSY 632: Multiple Regression and Multivariate Statistics	3 cr.
PSY 646/647: Psychological Evaluation of Adults, Children, and Families	3 cr.
PSY 656: Introduction to Evidence-based Psychological Treatments	3 cr.
PSY 657: Introduction to Psychotherapy, Ethics, and Professional Issues	<u>3 cr.</u>
12 cr.	

<u>Summer</u>

PSY 806: Summer Practicum	1 cr.

PSY 001: History & Systems of Psychology (online course)
must be completed before beginning of second year
See Appendix E.

<u>SECOND YEAR</u>

<u>Fall Semester</u>

PSY 605: Cognitive Neuroscience (<u>OR</u> **PSY 625**: Social Psych)	3 cr.
PSY 633: Structural Equation Modeling	3 cr.
PSY 670: Practicum in Clinical Psychology	1 cr.
PSY 810: Master's Research	<u>3 cr.</u>
10 cr.	

<u>Spring Semester</u>

PSY 604: Cognition and Emotion (<u>OR</u> **PSY 620**: Developmental Psych)	3 cr.
PSY 614: Diversity Issues in Psychology (<u>OR</u> **PSY 620**: Developmental Psych)	3 cr.
PSY 670: Practicum in Clinical Psychology	1 cr.
PSY 810: Master's Thesis	<u>3 cr.</u>
10 cr.	

<u>Summer</u>

PSY 806: Summer Practicum	1 cr.

THIRD YEAR

Fall Semester

IF NOT Teaching:		IF Teaching:	
PSY 625: Social Psychology (OR **PSY 605**: Cog Neuro)	3 cr.	**PSY 625** (OR **605**)	3 cr.
PSY 6xx: Advanced Intervention Course	3 cr.	**PSY 680**	3 cr.
PSY 6xx: Elective	3 cr.	**PSY 681**	3 cr.
PSY 670: Practicum in Clinical Psychology	1 cr.	**PSY 670**	1 cr.
	10 cr.		10 cr.

Spring Semester

IF NOT Teaching:		IF Teaching:	
PSY 620: Developmental Psychology (OR **PSY 604/614**)	3 cr.	**PSY 620** (OR **604/614**)	3 cr.
PSY 6xx: Advanced Intervention Course (OR Elective)	3 cr.	**PSY 680**	3 cr.
PSY 6xx: Elective	3 cr.	**PSY 681**	3 cr.
PSY 670: Practicum in Clinical Psychology	1 cr.	**PSY 670**	1 cr.
	10 cr.		10 cr.

Summer

PSY 806: Summer Practicum   1 cr.

FOURTH YEAR

Fall Semester

PSY 6xx: Advanced Intervention Course (OR **PSY 680/681**: Research Credits	3cr.
PSY 6xx: Elective (OR **PSY 830**: Doctoral Dissertation)	3 cr.
PSY 670: Practicum in Clinical Psychology	1 cr.
PSY 830: Doctoral Dissertation	3 cr.
	10 cr.

Spring Semester

PSY 640/642 if not taken 3rd year (due to teaching)	3 cr.
PSY 6xx: Elective OR 730	3 cr.
PSY 670: Practicum in Clinical Psychology	1 cr.
PSY 830: Doctoral Dissertation	6 cr.
	10 cr.

PSY 002: Supervision (online course)
must be completed before applying to internship
See Appendix F.

Need: Total of 16 3-credit courses (in addition to 601), of which 4 are Discipline-Specific Knowledge courses (604, 605, 620, 625), 3 are statistics (631, 632, 633), 4 are Profession-Wide Competencies (614, 645, 656, 657), 3 are area-specific requirements (640, 646/647, advanced intervention), and 2 are electives.

Note: 2 Discipline-Specific Knowledge Courses, two statistics courses, and the History & Systems online course must be taken prior to MS/Quals.

CHILD/FAMILY CLINICAL Requirements

Student's Name _____   Date _____

Summary of Requirements Completed: Child/Family Clinical
(Please indicate when the requirement was completed, course number and grade received, as appropriate.)

Discipline-Specific Knowledge Courses (all 4 required; 2 courses must be taken prior to Quals/M.S. Thesis)
PSY 604: Cognition & Emotion _____   PSY 605: Cognitive Neuroscience _____
PSY 620: Developmental Psychology _____   PSY 625: Social Psychology _____

Research Methodology, Statistics, and Data (all 3 required; 2 courses must be taken prior to Quals/M.S. Thesis)
PSY 631: Psychological Statistics, Research Methods, and Design _____
PSY 632: Multiple Regression and Multivariate Statistics _____
PSY 633: Structural Equation Modeling _____

Profession-Wide Competencies (all 5 required)
PSY 601: Issues in Professional Development and Research _____
PSY 614: Diversity Issues in Psychology _____
PSY 645: Introduction to Psychological Evaluation (+PSY 671: Assessment Lab) _____
PSY 656: Introduction to Evidence-Based Psychological Treatments _____
PSY 657: Introduction to Psychotherapy, Ethics, and Professional Issues _____

Area-Specific Requirements (* indicates required)
PSY 641: Child and Adolescent Psychopathology*_____
PSY 646/647: Psychological Evaluation of Adults, Children, and Families* _____
PSY 660: Evidence-Based Psychological Intervention with Child and Families* _____
PSY 636: Research Methods with Children & Adolescents* (or PSY 602 – Scientific Writing & Grantsmanship) _____

Electives: (1 elective required to graduate to meet requirement of 16 3-credit courses)
PSY 602, 610, 616, 640, 648, 661, 662, 685, 687 or other approved course: _____

Practicum in Clinical Psychology (PSY 670; indicate setting and semester completed; 6 semesters required)

	Practicum Site(s)	Face-to-Face Hours	Supervision Hours
First Year			
Second Year			
Third Year			
Fourth Year			
		Total:	Total:

Face-to-Face (450 – 500 hours required prior to internship); Supervision (minimum of 150 hours required prior to internship)
Advanced Practicum (Indicate semester(s) and assessment or therapy) _____

Additional Online Course Requirements (indicate date of completion)
PSY 001: History & Systems of Psychology (Appendix E; must be completed before staring 2nd year) _____
PSY 002: Supervision (Appendix F; must be completed before applying to internship) _____

Qualifying Procedures (indicate when passed) _____

Teaching Requirement (Indicate course and semester taught): _____

Primary Research Mentor: _____
Other/Additional Mentors: _____

Research Productivity (3 presentations or 1 publication required to graduate)

	Publication(s)	Presentation(s)		Publication(s)	Presentation(s)
First Year			Second Year		
Third Year			Fourth Year		
Fifth Year			**Overall Totals:**		

Masters thesis (indicate topic, committee members and date completed; six credits of PSY 810 required)
_____
_____

Dissertation (indicate topic, committee members, date of proposal acceptance and date of final oral.)
_____
_____

(12 credits of PSY 830 are required, from 1 to 6 per semester, no more than 3 of which may be prior to proposal acceptance.)

APA Accredited Clinical Internship (PSY 804; indicate setting and year) _____
(Enrollment in PSY 804 (Clinical Internship) is required and continuous enrollment at UM is required until dissertation defense; students may enroll for 1 dissertation credit per semester following internship to maintain continuous registration.)

Proposed Illustrative Course Schedule: CHILD/FAMILY CLINICAL

FIRST YEAR

Fall Semester

PSY 601: Issues in Professional Development and Research	1 cr.
PSY 631: Psychological Statistics, Research Methods and Design	3 cr.
PSY 641: Child and Adolescent Psychopathology	3 cr.
PSY 645: Introduction to Psychological Evaluation	3 cr.
PSY 671: Lab for PSY 645 (Assessment Lab)	<u>0 cr.</u>
	10 cr.

Spring Semester

PSY 632: Multiple Regression and Multivariate Statistics	3 cr.
PSY 646/647: Psychological Evaluation of Adults, Children, and Families	3 cr.
PSY 656: Introduction Evidence-Based Psychological Treatments	3 cr.
PSY 657: Introduction Psychotherapy, Ethics, and Professional Issues	<u>3 cr.</u>
	12 cr.

Summer

PSY 806: Summer Practicum	1 cr.

PSY 001: History & Systems of Psychology (online course)
must be completed before beginning of second year
See [Appendix E](#).

SECOND YEAR

Fall Semester

IF OFFERED**: PSY 660**: Evidence-Based Psych Interventions with Children & Families	
IF NOT**: PSY 605**: Cognitive Neuroscience (<u>OR</u> **PSY 625**: Social Psychology)	3 cr.
PSY 633: Structural Equation Modeling	3 cr.
PSY 670: Practicum in Clinical Psychology	1 cr.
PSY 810: Master's Thesis	<u>3 cr.</u>
	10 cr.

Spring Semester

PSY 620: Developmental Psychology	3 cr.
PSY 636: Research Methods with Children & Adolescents (OR **PSY 602:** Scientific Writing)	3 cr.
PSY 670: Practicum in Clinical Psychology	1 cr.
PSY 810: Master's Thesis	<u>3 cr.</u>
	10 cr.

Summer

PSY 806: Summer Practicum	1 cr.

THIRD YEAR

Fall Semester
IF OFFERED: **PSY 660**: Evidence-Based Psych Interventions with Children & Families
IF NOT: **PSY 605**: Cognitive Neuroscience (OR **PSY 625**: Social Psychology)   3 cr.
PSY 605: Cognitive Neuroscience (OR **PSY 625**: Social Psychology)   3 cr.
PSY 830: Doctoral Dissertation (OR **PSY 680**: Research Credit)   3 cr.
PSY 670: Practicum in Clinical Psychology   <u>1 cr.</u>
    10 cr.

Spring Semester
PSY 604: Cognition and Emotion   3 cr.
PSY 614: Diversity Issues in Psychology   3 cr.
PSY 830: Doctoral Dissertation (OR **PSY 680**: Research Credit)   3 cr.
PSY 670: Practicum in Clinical Psychology   <u>1 cr.</u>
    10 cr.

Summer
PSY 806: Summer Practicum   1 cr.

FOURTH YEAR

Fall Semester
PSY 640: Adult Psychopathology (or other elective)   3 cr.
PSY 6xx: Elective (OR **PSY 680**: Research Credit)   3 cr.
PSY 670: Practicum in Clinical Psychology   1 cr.
PSY 830: Doctoral Dissertation   <u>3 cr.</u>
    10 cr.

Spring Semester
PSY 6xx: Elective   3 cr.
PSY 6xx: Elective (OR **PSY 680**: Research Credit)   3 cr.
PSY 670: Practicum in Clinical Psychology   1 cr.
PSY 830: Doctoral Dissertation   <u>3 cr.</u>
    10 cr.

> **PSY 002**: Supervision (online course)
> *must be completed before applying to internship*
> See Appendix F.

<u>Need</u>: Total of 16 3-credit courses (in addition to 601), of which 4 are Discipline-Specific Knowledge courses (604, 605, 620, 625), 3 are statistics (631, 632, 633), 4 are Profession-Wide Competencies (614, 645, 656, 657), 4 are area-specific requirements (641, 646/647, 660, 636), and 1 is an elective.

Note: 2 Discipline-Specific Knowledge Courses, two statistics courses, and the History & Systems online course must be taken prior to MS/Quals.

PEDIATRIC HEALTH CLINICAL Requirements

Student's Name_____ Date _____

Summary of Requirements Completed: Pediatric Health Clinical
(Please indicate when the requirement was completed, course number and grade received, as appropriate.)

Discipline-Specific Knowledge Courses (all 4 required; 2 courses must be taken prior to Quals/M.S. Thesis)
PSY 604: Cognition & Emotion _____   PSY 605: Cognitive Neuroscience _____
PSY 620: Developmental Psychology _____   PSY 625: Social Psychology _____

Research Methodology, Statistics, and Data (all 3 required; 2 courses must be taken prior to Quals/M.S. Thesis)
PSY 631: Psychological Statistics, Research Methods and Design _____
PSY 632: Multiple Regression and Multivariate Statistics _____
PSY 633: Structural Equation Modeling   _____

Profession-Wide Competencies (all 5 required)
PSY 601: Issues in Professional Development and Research _____
PSY 614: Diversity Issues in Psychology _____
PSY 645: Introduction to Psychological Evaluation (+PSY 671: Assessment Lab) _____
PSY 656: Introduction to Evidence-Based Psychological Treatments _____
PSY 657: Introduction to Psychotherapy, Ethics, and Professional Issues _____

Area-Specific Requirements (* indicates required)
PSY 636: Research Methods with Children & Adolescents* (or PSY 602: Scientific Writing & Grantsmanship) _____
PSY 641: Child and Adolescent Psychopathology*_____
PSY 646/647: Psychological Evaluation of Adults, Children, and Families*
PSY 660: Evidence-Based Psychological Intervention with Children and Families* _____
PSY 661: Interventions in Pediatric Psychology* _____ (or PSY 662: Health Psychology Interventions)
Electives (if taken): PSY 602, 610, 616, 640, 648, 685, 687 or other approved course: _____

Practicum in Clinical Psychology (PSY 670; indicate setting and semester completed; 6 semesters required)

	Practicum Site(s)	Face-to-Face Hours	Supervision Hours
First Year			
Second Year			
Third Year			
Fourth Year			
		Total:	Total:

Face-to-Face (450 – 500 hours required prior to internship); Supervision (minimum of 150 hours required prior to internship)
Advanced Practicum (Indicate semester(s) and assessment or therapy) _____

Additional Online Course Requirements (indicate date of completion)
PSY 001: History & Systems of Psychology (Appendix E; must be completed before staring 2nd year) _____
PSY 002: Supervision (Appendix F; must be completed before applying to internship) _____

Qualifying Procedures (indicate when passed) _____

Teaching Requirement (Indicate course and semester taught): _____

Primary Research Mentor: _____
Other/Additional Mentors: _____

Research Productivity (3 presentations or 1 publication required to graduate)

	Publication(s)	Presentation(s)		Publication(s)	Presentation(s)
First Year			Second Year		
Third Year			Fourth Year		
Fifth Year			**Overall Totals:**		

Master's thesis (indicate topic, committee members and date completed; six credits of PSY 810 required)
_____
_____

Dissertation (indicate topic, committee members, date of proposal acceptance and date of final oral.)
_____
_____
(12 credits of PSY 830 are required, from 1 to 6 per semester, no more than 3 of which may be prior to proposal acceptance.)

APA Accredited Clinical Internship (PSY 804; indicate setting and year) _____
(Enrollment in PSY 804 (Clinical Internship) is required and continuous enrollment at UM is required until dissertation defense; students may enroll for 1 dissertation credit per semester following internship to maintain continuous registration.)

Proposed Illustrative Course Schedule:
PEDIATRIC HEALTH CLINICAL

FIRST YEAR

Fall Semester

PSY 601: Issues in Professional Development and Research	1 cr.
PSY 631: Psychological Statistics, Research Methods, and Design	3 cr.
PSY 641: Child and Adolescent Psychopathology	3 cr.
PSY 645: Introduction to Psychological Evaluation	3 cr.
PSY 671: Lab for PSY 645 (Assessment Lab)	0 cr.
	10 cr.

Spring Semester

PSY 632: Multiple Regression and Multivariate Statistics	3 cr.
PSY 656: Introduction to Evidence-Based Psychological Treatments	3 cr.
PSY 646/647: Psychological Evaluation of Adults, Children, and Families	3 cr.
PSY 657: Introduction to Psychotherapy, Ethics, and Professional Issues	3 cr.
	12 cr.

Summer

PSY 806: Summer Practicum	1 cr.

> **PSY 001**: History & Systems of Psychology (online course)
> *must be completed before beginning of second year*
> See Appendix E.

SECOND YEAR

Fall Semester

PSY 660: Evidence-Based Psychological Interventions with Child and Families OR	
PSY 661: Interventions in Pediatric Psychology	3 cr.
PSY 633: Structural Equation Modeling	3 cr.
PSY 670: Practicum in Clinical Psychology	1 cr.
PSY 810: Master's Thesis	3 cr.
	10 cr.

Spring Semester

PSY 620: Developmental Psychology	3 cr.
PSY 636: Research Methods with Children & Adolescents (OR **PSY 602:** Scientific Writing)	3 cr.
PSY 670: Practicum in Clinical Psychology	1 cr.
PSY 810: Master's Thesis	3 cr.
	12 cr.

Summer

PSY 806: Summer Practicum	1 cr.

THIRD YEAR

Fall Semester
PSY 660: Evidence-Based Psychological Interventions with Child and Families OR
    PSY 661: Interventions in Pediatric Psychology   3 cr.
PSY 605: Cognitive Neuroscience (OR **PSY 625**: Social Psychology)   3 cr.
PSY 670: Practicum in Clinical Psychology   1 cr.
PSY 680/830: Research Credit/Doctoral Dissertation   3 cr.

                                                   10 cr.

Spring Semester
PSY 604: Cognition and Emotion   3 cr.
PSY 614: Diversity Issues in Psychology   3 cr.
PSY 670: Practicum in Clinical Psychology   1 cr.
PSY 680/830: Research Credit/Doctoral Dissertation   3 cr.
                                                   10 cr.
Summer
PSY 806: Summer Practicum   1 cr.

FOURTH YEAR

Fall Semester
PSY 605: Cognitive Neuroscience (OR **PSY 625**: Social Psychology)   3 cr.
PSY 6xx: Elective   3 cr.
PSY 670: Practicum in Clinical Psychology   1 cr.
PSY 830: Doctoral Dissertation   3 cr.
                                                   10cr.

Spring Semester
PSY 6xx: Elective   3 cr.
PSY 6xx: Elective (OR **PSY 830**: Doctoral Dissertation)   3 cr.
PSY 670: Practicum in Clinical Psychology   1 cr.
PSY 830: Doctoral Dissertation   3 cr.
                                                   10cr.

> **PSY 002**: Supervision (online course)
> *must be completed before applying to internship*
> See Appendix F.

Need: Total of 16 3-credit courses (in addition to 601), of which 4 are Discipline-Specific Knowledge courses (604, 605, 620, 625), 3 are statistics (631, 632, 633), 4 are Profession-Wide Competencies (614, 645, 656, 657), and 5 are area-specific requirements (636, 641, 646/647, 660, 661).

Note: 2 Discipline-Specific Knowledge Courses, two statistics courses, and the History & Systems online course must be taken prior to MS/Quals.

HEALTH CLINICAL Requirements

Student's Name _____   Date _____

Summary of Requirements Completed: Health Clinical
(Please indicate when the requirement was completed, course number and grade received, as appropriate.

Discipline-Specific Knowledge Courses (all 4 required; 2 courses must be taken prior to Quals/M.S. Thesis)
PSY 604: Cognition & Emotion _____   PSY 605: Cognitive Neuroscience _____
PSY 620: Developmental Psychology _____   PSY 625: Social Psychology _____

Research Methodology, Statistics, and Data (all 3 required; 2 courses must be taken prior to Quals/M.S. Thesis)
PSY 631: Psychological Statistics, Research Methods and Design _____
PSY 632: Multiple Regression and Multivariate Statistics _____
PSY 633: Structural Equation Modeling _____

Profession-Wide Competencies (all 5 required)
PSY 601: Issues in Professional Development and Research _____
PSY 614: Diversity Issues in Psychology _____
PSY 645: Introduction to Psychological Evaluation _____
PSY 656: Introduction to Evidence-Based Psychological Treatments _____
PSY 657: Introduction to Psychotherapy, Ethics, and Professional Issues _____

Area-Specific Requirements (* indicates required)
PSY 606: Biobehavioral Processes and Disease in Health Psychology* _____
PSY 610: Behavioral Medicine: Overview of Basic Science, Public Health and Clinical Trials* _____
PSY 616: Biobehavioral Processes and Clinical Research Applications in Health Psychology* _____
PSY 640: Adult Psychopathology (+ PSY 650: SCID Lab)* _____
PSY 648: Psychological Evaluation in Physical Disorders* _____
PSY 662: Health Psychology Interventions* _____
Electives (if taken): PSY 602, 603, 615, 641, 660, 661, 685, 687 or other approved course: _____

Practicum in Clinical Psychology (PSY 670; indicate setting and semester completed; 6 semesters required)

	Practicum Site(s)	Face-to-Face Hours	Supervision Hours
First Year			
Second Year			
Third Year			
Fourth Year			
		Total:	Total:

Face-to-Face (450 – 500 hours required prior to internship); Supervision (minimum of 150 hours required prior to internship)
Advanced Practicum (Indicate semester(s) and assessment or therapy) _____

Additional Online Course Requirements (indicate date of completion)
PSY 001: History & Systems of Psychology (Appendix E; must be completed before staring 2nd year) _____
PSY 002: Supervision (Appendix F; must be completed before applying to internship) _____

Qualifying Procedures (indicate when passed) _____

Teaching Requirement (Indicate course and semester taught): _____

Primary Research Mentor: _____   Other/Additional Mentors: _____

Research Productivity (3 presentations or 1 publication required to graduate)

	Publication(s)	Presentation(s)		Publication(s)	Presentation(s)
First Year			Second Year		
Third Year			Fourth Year		
Fifth Year			**Overall Totals:**		

Masters thesis (indicate topic, committee members and date completed; six credits of PSY 810 required)
_____
_____

Dissertation (indicate topic, committee members, date of proposal acceptance and date of final oral.)
_____
_____
(12 credits of PSY 830 are required, from 1 to 6 per semester, no more than 3 of which may be prior to proposal acceptance.)

APA Accredited Clinical Internship (PSY 804; indicate setting and year) _____
(Enrollment in PSY 804 (Clinical Internship) is required and continuous enrollment at UM is required until dissertation defense; students may enroll for 1 dissertation credit per semester following internship to maintain continuous registration.)

Proposed Illustrative Course Schedule: HEALTH CLINICAL

FIRST YEAR

Fall Semester

PSY 601: Issues in Professional Development and Research	1 cr.
~~**PSY 610**: Behavioral Medicine: Overview of Basic Science, Public Health, and Clinical Trials~~	~~3 cr.~~
PSY 631: Psychological Statistics, Research Methods, and Design	3 cr.
PSY 640: Adult Psychopathology	3 cr.
PSY 645: Introduction to Psychological Evaluation	3 cr.
PSY 650: Lab for PSY 640 (SCID Lab)	0 cr.
PSY 671: Lab for PSY 645 (Assessment Lab)	0 cr.
Behavioral Medicine Journal Club	0 cr
	10 cr.

Spring Semester

PSY 606: Biobehavioral Processes and Disease in Health Psychology	3 cr.
PSY 632: Multiple Regression and Multivariate Statistics	3 cr.
PSY 656: Introduction to Evidence-Based Psych Treatments	3 cr.
PSY 657: Introduction to Psychotherapy, Ethics, and Professional Issues	3 cr.
	12 cr.

Summer

PSY 806: Summer Practicum	1 cr.

PSY 001: History & Systems of Psychology (online course)
must be completed before beginning of second year
See Appendix E.

SECOND YEAR

Fall Semester

PSY 625: Social Psychology	3 cr.
PSY 633: Structural Equation Modeling	3 cr.
PSY 670: Practicum in Clinical Psychology	1 cr.
PSY 616: Biobehavioral Processes and Clinical Research Applications in Health Psychology	3 cr.
	10 cr.

Spring Semester

PSY 648: Psychological Evaluation in Physical Disorders	3 cr.
PSY 604: Cognition and Emotion	3 cr.
PSY 670: Practicum in Clinical Psychology	1 cr.
PSY 810: Master's Thesis	3 cr.
	10 cr.

Summer

PSY 806: Summer Practicum	1 cr.

THIRD YEAR

Fall Semester
PSY 662: Health Psychology Interventions   3 cr.
PSY 605: Cognitive Neuroscience   3 cr.
PSY 670: Practicum in Clinical Psychology   1 cr.
PSY 810: Master's Thesis   3 cr.
                                                                               10cr.

Spring Semester
PSY 614: Diversity Issues in Psychology (if **NOT** teaching)   3 cr.
PSY 6xx: Elective   3 cr.
PSY 670: Practicum in Clinical Psychology   1 cr.
PSY 6xx: Elective   3 cr.
                                                                               10 cr.

Summer
PSY 806: Summer Practicum   1 cr.

FOURTH YEAR

Fall Semester
PSY 6xx: Elective   3 cr.
PSY 6xx: Elective   3 cr.
PSY 670: Practicum in Clinical Psychology   1 cr.
PSY 830: Doctoral Dissertation   3 cr.
                                                                               10 cr.

Spring Semester
PSY 620: Developmental Psychology   3 cr.
PSY 6xx: Elective   3 cr.
PSY 830: Doctoral Dissertation   3 cr.
PSY 670: Practicum in Clinical Psychology   1 cr.
                                                                               10 cr.

PSY 002: Supervision (online course)
must be completed before applying to internship
See Appendix F.

Need: Total of 16 3-credit courses, of which 4 are Discipline-Specific Knowledge courses (604, 605, 620, 625), 3 are statistics (631, 632, 633), 4 are Profession-Wide Competencies (614, 645, 656, 657), and 6 are area-specific requirements (606, 610, 616, 640, 648, 662).

Note: 2 Discipline-Specific Knowledge Courses, two statistics courses, and the History & Systems online course must be taken prior to MS/Quals.

EVOLUTION, COGNITION, AND BEHAVIOR Requirements

Student's Name _____   Date _____

The Evolution, Cognition, and Behavior (ECB) major area of study is an interdisciplinary program within the Psychology Department's Adult Division. This concentration is aimed at producing the next generation of evolution-minded researchers in the field of psychology. Faculty and graduate students working in this area are focused on discovering the evolved structure of the human mind. All students in this area must also fulfill the Psychology Department's requirements for the Concentration in Quantitative Psychology.

Summary of Requirements Completed: Evolution, Cognition, and Behavior
 (Please indicate when the requirement was completed, course number and grade received, as appropriate.)

Foundation Courses (all required)
PSY 601: Issues in Professional Development and Research _____
PSY 604: Cognition and Emotion **OR** PSY 605: Cognitive Neuroscience_____
PSY 620: Developmental Psychology **OR** PSY 622: Cognitive Development _____
PSY 625: Social Psychology _____

Research Methodology, Statistics, and Data (all 3 required; 2 courses must be taken prior to Quals/M.S. Thesis)
PSY 631: Psychological Statistics, Research Methods and Design _____
PSY 632: Multiple Regression and Multivariate Statistics _____
PSY 633: Structural Equation Modeling or PSY 634: Multilevel Modeling_____

Electives (9 courses required)
PSY 602: Scientific Writing and Grantsmanship
PSY 633/634 (course not taken as part of Core)
PSY 698: Seminar in Quantitative Psychology
EPS 706: Categorical Data Analysis
EPS 705: Measurement & Psychometric Theory
EPS 707: Item Response Theory
EPS 710: Meta-analytic Methods for Research Synthesis
BST 630: Longitudinal Data
EPH 751: Survival Analysis in Clinical Trials
PSY 655: Evolution and Sex
BIL 612: Biology Graduate Core I
BIL 613: Biology Graduate Core II
BIL 620: Evolution
BIL 665: Evolution and Development

Qualifying Procedures (indicate topic, committee members and date when passed)
_____

Quantitative Concentration (list courses taken as electives in fulfillment of the balance of requirements for the Quantitative Concentration, and grades in those courses)
_____
_____

Teaching Requirement (indicate course, supervisor and semester taught)
_____

Research Mentor(s)
 Primary Mentor: _____
 Other/Additional Mentors: _____

Masters thesis (indicate topic, committee members and date completed; six credits PSY 810 required)
_____
_____

Dissertation (indicate topic, committee members, date of proposal acceptance and date of final oral)
_____
_____

 (12 credits of PSY 830 are required, from 1 to 6 per semester, no more than 3 of which may be prior to proposal acceptance.)

Proposed Illustrative Course Schedule:
EVOLUTION, COGNITION, AND BEHAVIOR

FIRST YEAR

Fall Semester

PSY 601: Issues in Professional Development and Research	1 cr.
PSY 625: Social Psychology	3 cr.
PSY 631: Psychological Statistics, Research Methods, and Design	3 cr.
BIL 612: Biology Graduate Core I (elective)	<u>3 cr.</u>
	10 cr.

Spring Semester

PSY 620: Developmental Psychology	3 cr.
PSY 655: Evolution and Sex (elective)	3 cr.
PSY 632: Multiple Regression and Multivariate Statistics	3 cr.
BIL 613: Biology Graduate Core II (elective)	<u>3 cr.</u>
	12 cr.

SECOND YEAR

Fall Semester

PSY 605: Cognitive Neuroscience	3 cr.
PSY 633: Structural Equation Modeling	3 cr.
BIL 620: Evolution (elective)	<u>3 cr.</u>
	9 cr.

Spring Semester

PSY 602: Scientific Writing and Grantsmanship (elective)	3 cr.
PSY 634: Multilevel Modeling (as elective)	3 cr.
PSY 810: Master's Thesis	<u>3 cr.</u>
	9 cr.

THIRD YEAR

Fall Semester

EPS 705: Measurement and Psychometric Theory (elective)	3 cr.
PSY 810: Master's Thesis	<u>3 cr.</u>
	6 cr.

Spring Semester

EPS 707: Item Response Theory (elective)	3 cr.
PSY 830: Doctoral Dissertation	<u>3 cr.</u>
	6 cr.

FOURTH YEAR

Fall Semester

EPS 710: Meta-Analytic Methods (elective)	3 cr.
PSY 830: Doctoral Dissertation	<u>3 cr.</u>
	6 cr.

Spring Semester

PSY 830: Doctoral Dissertation	3 cr.

FIFTH YEAR

Fall Semester

PSY 830: Doctoral Dissertation	3 cr.

Spring Semester

PSY 830: Doctoral Dissertation	3 cr.

DEVELOPMENTAL Requirements

Student's Name_____Date _____

Summary of Requirements Completed: Developmental
(Please indicate when the requirement was completed, course number and grade received, as appropriate.)

Developmental Foundation Courses (all required; 3 courses, excluding PSY 601, must be taken prior to Quals/M.S. Thesis):
PSY 601: Issues in Professional Development & Research
PSY 620: Developmental Psychology (developmental core)
PSY 621: Theories of Development (developmental core)
PSY 636: Research Methods with Children and Adolescents (developmental core)
PSY 622: Cognitive Development (developmental core)
PSY 623: Language Development (developmental core)
PSY 624: Social Development (developmental core)

One Additional Departmental Core Course (1 course required):
PSY 604: Cognition and Emotion
PSY 605: Cognitive Neuroscience
PSY 614: Diversity Issues in Psychology
PSY 625: Social Psychology
PSY 641: Child & Adolescent Psychopathology
PSY 640: Adult Psychopathology

Methodology Courses (3 courses required; 2 courses must be taken prior to Quals/M.S. Thesis):
PSY 631: Psychological Statistics, Research Methods, and Design
PSY 632: Multiple Regression & Multivariate Statistics
PSY 633: Structural Equation Modeling **OR** PSY 634: Multilevel Modeling

Research Practicum
PSY 680: Developmental Research Practicum (Brownbag;1 credit) _____

Electives (3 required)
Any non-required Psychology course may be taken as an elective
   (e.g. PSY 604, 605, 625, 641, 640, 683, 638, 639, 646/647)
Non-Psychology courses (e.g., in Education and Psychological Studies) that meet with the approval of the student's mentor and the Developmental Coordinator may also serve as electives.

First Course: _____
Second Course: _____
Third Course_____

Qualifying Procedures (indicate topic, committee members and date when passed)
_____

Teaching Requirement (Indicate course, supervisor, and semester taught)
_____

Research Mentor(s)
Primary Mentor: _____
Other/Additional Mentors: _____

Master's thesis (indicate topic, committee members and date completed; six credits of PSY 810 required)
_____
_____

Dissertation (indicate topic, committee members, date of proposal acceptance and date of final oral.)
_____
_____
   (12 credits of PSY 830 are required, from 1 to 6 per semester, no more than 3 of which may be prior to proposal acceptance.)

Proposed Illustrative Course Schedule: <u>DEVELOPMENTAL</u>

FIRST YEAR
Fall Semester

PSY 601: Issues in Professional Development and Research	1 cr.
PSY 631: Psychological Statistics, Research Methods, and Design	3 cr.
PSY 605: Cognitive Neuroscience (or other departmental core course)	3 cr.
PSY 621: Theories of Development	<u>3 cr.</u>
	10 cr.

Spring Semester

PSY 632: Multiple Regression and Multivariate Statistics	3 cr.
PSY 620: Developmental Psychology	3 cr.
PSY 636: Research Methods with Children & Adolescents	3 cr.
PSY 680: Developmental Brownbag	<u>1 cr.</u>
	10 cr.

SECOND YEAR
Fall Semester

PSY 633: Structural Equation Modeling (or elective)	3 cr.
PSY 622: Cognitive Development	3 cr.
PSY 810: Master's Thesis	<u>3 cr.</u>
	9 cr.

Spring Semester

PSY 634: Multilevel Modeling (or **PSY 604**: Cognition & Emotion or other elective)	3 cr.
PSY 623: Language Development	3 cr.
PSY 810: Master's Thesis	<u>3 cr.</u>
	9 cr.

THIRD YEAR
Fall Semester

PSY 624: Social Development	3 cr.
PSY 6xx: Elective	3 cr.
PSY 646/647: Psychological Eval of Adults, Children, and Families (or other elective)	<u>3 cr.</u>
	9 cr.

Spring Semester

PSY 830: Doctoral Dissertation	3 cr.
PSY 625: Social Psychology (or other elective)	<u>3 cr.</u>
	6 cr.

FOURTH YEAR
Fall Semester

PSY 830: Dissertation	6 cr.

Spring Semester

PSY 830: Dissertation	3 cr.

BEHAVIORAL MEDICINE Requirements

Student's Name _____   Date _____

Summary of Requirements Completed: Behavioral Medicine
(Please indicate when the requirement was completed, course number and grade received, as appropriate.)

Foundation Courses (all required)
PSY 601: Issues in Professional Development and Research _____
PSY 604: Cognition and Emotion _____
PSY 605: Cognitive Neuroscience _____
PSY 614: Diversity Issues in Psychology _____
PSY 620: Developmental Psychology _____
PSY 625: Social Psychology _____
PSY 640: Adult Psychopathology _____

Research Methodology, Statistics, and Data (all 3 required; 2 courses must be taken prior to Quals/M.S. Thesis)
PSY 631: Psychological Statistics, Research Methods and Design _____
PSY 632: Multiple Regression and Multivariate Statistics _____
PSY 633: Structural Equation Modeling _____
_____

Behavioral Medicine (required)
PSY 606: Biobehavioral Processes and Disease in Health Psychology _____
PSY 610: Behavioral Medicine: Overview of Basic Science, Public Health, and Clinical Trials _____
PSY 616: Biobehavioral Processes and Clinical Research Applications in Health Psychology _____

Electives (at least 2 required)
PSY 603: Neuroanatomy _____
PSY 609: Psychopharmacology _____
PSY 615: Foundations of Neuropsychology _____
PSY 645: Introduction to Psychological Evaluation _____
PSY 648: Psychological Evaluation in Physical Disorders _____
Other Psychology courses: _____
Courses in other departments: _____

Qualifying Procedures (indicate topic, committee members and date when passed)
_____

Quantitative Concentration (list courses taken as electives in fulfillment of the balance of requirements for the Quantitative Concentration, and grades in those courses)
_____
_____

Teaching Requirement (indicate course, supervisor and semester taught)
_____

Research Mentor(s)
Primary Mentor: _____
Other/Additional Mentors: _____

Masters thesis (indicate topic, committee members and date completed; six credits PSY 810 required)
_____
_____

Dissertation (indicate topic, committee members, date of proposal acceptance and date of final oral)
_____
_____

(12 credits of PSY 830 are required, from 1 to 6 per semester, no more than 3 of which may be prior to proposal acceptance.)

Proposed Illustrative Course Schedule: <u>BEHAVIORAL MEDICINE</u>

FIRST YEAR

Fall Semester

PSY 601: Issues in Professional Development and Research	1 cr.
PSY 610: Behavioral Medicine: Overview of Basic Science, Public Health, and Clinical Trials	3 cr.
PSY 640: Adult Psychopathology	3 cr.
PSY 631: Psychological Statistics, Research Methods, and Design	3 cr.
Behavioral Medicine Journal Club	<u>0 cr</u>
	10 cr.

Spring Semester

PSY 606: Biobehavioral Processes and Disease in Health Psychology	3 cr.
PSY 632: Multiple Regression and Multivariate Statistics	3 cr.
PSY 604: Cognition and Emotion	<u>3 cr.</u>
	9 cr.

SECOND YEAR

Fall Semester

PSY 605: Cognitive Neuroscience	3 cr.
PSY 633: Structural Equation Modeling	3 cr.
PSY 603: Neuroanatomy (elective)	<u>3 cr.</u>
	9 cr.

Spring Semester

PSY 625: Social Psychology	3 cr.
PSY 620: Developmental Psychology	3 cr.
PSY 810: Master's Thesis	<u>3 cr.</u>
	9 cr.

Summer

PSY 810: Master's Research	3 cr.

THIRD YEAR

Fall Semester

PSY 616: Biobehavioral Processes and Clinical Research Applications in Health Psychology	3 cr.
PSY 614: Diversity Issues in Psychology	3 cr.
PSY 6xx: Elective	<u>3 cr.</u>
	9 cr.

Spring Semester

PSY 609: Psychopharmacology (elective)	3 cr.
PSY 830: Doctoral Dissertation	<u>3 cr.</u>
	6 cr.

FOURTH YEAR

Fall Semester

PSY 830: Doctoral Dissertation	3 cr.
PSY 6xx: Elective	<u>3 cr.</u>
	6 cr.

Spring Semester

PSY 830: Doctoral Dissertation	3 cr.
PSY 830: Doctoral Dissertation	<u>3 cr.</u>
	6 cr.

COGNITIVE AND BEHAVIORAL NEUROSCIENCE Requirements

Student's Name_____ Date _____

Summary of Requirements Completed: Cognitive and Behavioral Neuroscience
 (Please indicate when the requirement was completed, course number and grade received, as appropriate.)

Foundations in Neuroscience (required for all CBN students; all courses are 3 credits except where noted)
PSY 601: Issues in Professional Development and Research (1 credit)_____
PSY 603: Neuroanatomy _____
PSY 604: Cognition and Emotion _____
PSY 605: Cognitive Neuroscience _____
PSY 697: Neuroimaging in the Psychological Sciences 1: Methods _____
PSY 691: Neuroimaging in the Psychological Sciences 2: Applications and Cultural Context _____

Statistics (required for all CBN students; all courses are 3 credits; 2 courses must be taken prior to Quals/M.S. Thesis)
PSY 631: Psychological Statistics, Research Methods and Design _____
PSY 632: Multiple Regression and Multivariate Statistics _____
PSY 633: Structural Equation Modeling _____
       or PSY 634: Multilevel Modeling _____

Additional Requirements (any 3 courses/9 credits mandatory; all courses are 3 credits)
#CSC 650: Computational Neuroscience _____
#CSC 746: Neural Networks and Deep Learning _____
#PSY 633: Structural Equation Modeling _____
#PSY 634: Multilevel Modeling _____
@PSY 610: Behavioral Medicine: Overview of Basic Science, Population Health, and Clinical Trials _____
@PSY 606: Biobehavioral Processes and Disease _____
@PSY 616: Biobehavioral Processes and Clinical Research Applications _____
*PSY 622: Cognitive Development _____
*PSY 620: Developmental Psychology _____
*PSY 623: Language Development _____
*PSY 624: Social Development _____
*PSY 636: Research Methods with Children and Adolescents _____
*PSY 641: Child and Adolescent Psychopathology _____

#*Suggested for students with computational/quantitative interests (note 633 and 634 cannot be double counted)*
@*Suggested for students with health interests*
**Suggested for students with developmental interests*

Electives (for all CBN students; all courses are 3 credits except where noted)
Cognitive and Behavioral Neuroscience Journal Club (no credit) _____

Departmental Core Courses   *Other*
PSY 614: Diversity Issues in Psychology_____   PSY 602: Scientific Writing and Grantsmanship_____
PSY 620: Developmental Psychology_____   PSY 609: Psychopharmacology _____
PSY 625: Social Psychology _____   PSY 615: Foundations of Neuropsychology _____
PSY 640: Adult Psychopathology _____   PHS 741: Membrane Physiology & Biophysics _____

Qualifying Procedures (indicate topic, committee members and date when passed)
_____

Teaching Requirement (indicate course, supervisor and semester taught)
_____

Research Mentor(s)
Primary Mentor: _____
Other/Additional Mentors: _____

Master's thesis (indicate topic, committee members and date completed; six credits PSY 810 required)
_____
_____

Dissertation (indicate topic, committee members, date of proposal acceptance and date of final oral.)
_____
_____

 (12 credits of PSY 830 are required, from 1 to 6 per semester, no more than 3 of which may be prior to proposal acceptance.)

Proposed Illustrative Course Schedule:
COGNITIVE AND BEHAVIORAL NEURSCIENCE

First Year
Fall Semester
PSY 601: Issues in Professional Development and Research   1 cr.
PSY 605: Cognitive Neuroscience   3 cr.
PSY 631: Psychological Statistics, Research Methods and Design   3 cr.
PSY 6xx: Additional Required Course (or Elective)   <u>3 cr.</u>
                                                                                   10 cr.

Spring Semester
PSY 604: Cognition and Emotion   3 cr.
PSY 632: Multiple Regression and Multivariate Statistics   3 cr.
PSY 6xx: Additional Required Course (or Elective)   <u>3 cr.</u>
                                                                                   9 cr.

Second Year
Fall Semester
PSY 603: Neuroanatomy   3 cr.
PSY 633: Structural Equation Modeling (<u>OR</u> **PSY 634**: Multilevel Modeling)   3 cr.
PSY 697: Neuroimaging in the Psychological Sciences 1 – Methods   <u>3 cr.</u>
                                                                                   9 cr.

Spring Semester
PSY 691: Neuroimaging in the Psychological Sciences 2 - Applications and Cultural Context   3 cr.
PSY 6xx: Additional Required Course (or Elective)   3 cr.
PSY 810: Master's Research   <u>3 cr.</u>
                                                                                   9 cr.

Third Year
Fall Semester
PSY 6xx: Additional Required Course (or Elective)   3 cr.
PSY 810: Master's Research   <u>3 cr.</u>
                                                                                   6 cr.

Spring Semester
PSY 6xx: Additional Required Course (or Elective)   3 cr.
PSY 830: Doctoral Dissertation   <u>3 cr.</u>
                                                                                   6 cr.

Fourth Year
Fall Semester
PSY 830: Doctoral Dissertation   3 cr.
PSY 830: Doctoral Dissertation   <u>3 cr.</u>
                                                                                   6 cr.

Spring Semester
PSY 830: Doctoral Dissertation   3 cr.
PSY 830: Doctoral Dissertation   <u>3 cr.</u>
                                                                                   6 cr.

APPENDICES

Appendix A:
Resources of Interest to Psychology Graduate Students

Psychology Department Resources
- University of Miami Department of Psychology website
- Psychology Department Login site contains many of the forms and resources mentioned in this handbook, as well as other useful information
- Department room reservation calendar
- The "Grad_Students" folder on the department server also contains a number of resources of interest including teaching materials and a guide to research funding opportunities. This folder can be found here: \\datastore01.psy.miami.edu\Groups\Grad_Students

University of Miami Resources
- University of Miami website
- University of Miami Graduate School website
- University of Miami Graduate Student Handbook
- University of Miami Toppel Career Center
- University of Miami Student Health Service
- University of Miami Office of Disability Services
- Graduate Student Honor Code
- University of Miami Writing Center
- University of Miami Camner Center for Academic Resources
- University of Miami Student Counseling Center
- University of Miami Multicultural Student Affairs

Other Resources
- American Psychological Association: https://www.apa.org/

Appendix B:
Minimum Levels of Acceptable Achievement in the Graduate Program

The minimum levels of acceptable achievement in the Graduate Program are indicated below. (Please also see Appendix D: *Retention, Remediation, and Termination*, for further details.)

I. Coursework

a. Students must receive a grade of B- or higher (or Satisfactory if graded U/S) in all required courses to remain in good standing in the program.

   i. For clinical students, this includes the online courses in History and Systems (PSY 001) and Supervision (PSY 002). Furthermore, certain assignments or exams within select courses must also earn a grade of B- (80%) or higher. Should a student not pass one of these components of the class, the assignment/exam must be repeated until performance reaches a satisfactory level.

b. Students must also maintain an overall GPA of 3.0 or higher across all courses.

II. Research

a. Students must complete a Responsible Conduct in Research seminar provided by the Department of Psychology. This seminar meets during both the initial orientation week for new graduate students and periodically throughout the first year of student training.

b. Students must engage in 15 - 20 hours of research per week, each semester, to remain in good standing.

c. Students are expected to receive an overall rating of "satisfactory" from their research mentor each semester, which is based on students' progress toward their stated research goals. Mentors provide this rating though the Graduate Student Research Evaluation Form at the end of each semester. Ratings on this form may range from 1 (*unacceptable*) to 5 (*outstanding*). If a student receives a lower rating, this may trigger a remediation plan and an overall evaluation of unsatisfactory.

d. Students must satisfactorily complete and defend a master's thesis (typically by the 2nd or 3rd year of the program) and receive overall ratings of at least 3 (*average/acceptable*) on the SACS rating form's 5-point scale. Students must also receive ratings of at least 3 (*average/acceptable*) out of 5 on rating form items pertaining to the study methodology.

e. Students must satisfactorily complete and defend a dissertation project (typically before or during the clinical internship year, and prior to the end of the 7th year of program enrollment). As above, the student must receive a rating of at least 3 (*average/acceptable*) out of 5 both overall and for items pertaining to study methodology on the SACS rating form.

Additional Research Requirements for Students in the Clinical Program
Upon entering the Clinical Psychology program, students must complete and receive a passing grade on the university-sponsored IRB-required CITI course for human subject research. This course must be taken every two years while in graduate training.

By the time of application for clinical internships (usually the fall of the 4th or 5th year), students must have either:
- a) Presented 3 papers/posters at a scientific meeting (e.g., APA, SBM, SRCD, ABCT) as a first author during their graduate training.

    OR
- b) Published a peer-reviewed journal article or book chapter as author or co-author during their graduate training.

Clinical students also must have received an overall rating of "Satisfactory" for their research (via the Graduate Student Research Evaluation Form) by the spring semester preceding internship application to be eligible to apply.

III. <u>Qualifying Procedures or Papers</u>

Clinical Psychology students must receive an overall grade of at least a 1.5 (on a scale from 0-3) on each component of the Clinical Qualifying Procedures. This includes the case analysis, on which, in additional to passing with a minimum overall grade of 1.5, students must also receive an individual grade of 1 (*marginal*) or higher for the assessment and intervention aspects of the case.

As part of qualifying procedures, clinical students must also submit a first-authored empirical paper for publication as part of the qualifying procedures. The Qualifying Research Paper Evaluation Form is used to evaluate the research paper, and students must receive a rating of at least 3 (*good*) on a 5-point scale both overall and on items assessing the quality of the research methods, statistical analysis, and measurement model used. The student's ability to address diversity issues is also assessed and must receive a rating of 3 or higher.

Psychological Sciences students must successfully complete a first-authored paper, grant application, and/or a written examination. Please see the section on Qualifying Requirements for the Psychological Sciences for specific requirements by major area of study. In general, an overall grade of 3 (*good*) or better constitutes a passing grade on the qualifying paper, grant application, or examination. Submissions receiving a grade of 2 (*fair*) or lower will need to be revised and resubmitted for evaluation.

IV. <u>Teaching</u>

Students are expected to teach an undergraduate class and receive satisfactory evaluations from students and the faculty supervisor.

V. Clinical Practice Training and Internship (for Clinical Graduate Students)

Students must receive a satisfactory grade (S) in all required clinical practica; as with coursework, an unsatisfactory grade may require repeating the practicum with a satisfactory evaluation. Practicum grades are based on students' evaluations from their clinical supervisors, with input from the clinical faculty. Each semester, clinical supervisors rate students' clinical skills and competencies in important areas such as ethical and legal standards, individual and cultural diversity, professional values and conduct, communication and interpersonal skills, assessment, intervention, supervision, and consultation and interdisciplinary skills. Students must achieve ratings of "Meets Expectations" in certain areas (assessment, and communication and interpersonal skills) by the end of their training at the PSC in their second year. Furthermore, students must achieve ratings of "Meets Expectations" or higher across all areas by the end of the Spring Semester before applying to internship, in order to be eligible to apply. (In general, when students receive ratings of "below expectations" or "needs improvement" on their practicum evaluations, this may trigger a remediation plan and an overall evaluation of "unsatisfactory.")

While training at the PSC, clinical students are further evaluated through additional means: first, during the PSC Orientation Workshop, students must receive a passing grade (Pass) on reflection papers addressing their reactions to the APA ethical principles and guidelines that cover diversity. Second, in Case Conference, students must receive satisfactory evaluations ("Meets Expectations" or higher) on their Case Conference Evaluation Forms for both Therapy and Assessment by the end of the spring semester.

Prior to internship application, students must acquire a minimum of 450 face-to-face hours (intervention plus assessment) and 150 hours of supervision.

Students must satisfactorily complete a year long, full-time clinical internship. It is expected that most if not all students will complete their clinical internship at a site that is accredited by the American Psychological Association or the Canadian Psychological Association. In unusual circumstances, students may complete their internship at a non-accredited site (preferably one that is an APPIC member site), with the permission of the Director of Clinical Training and the student's Clinical Coordinator.

Appendix C:
Grievance Procedures & Procedures for Documenting Complaints

I.   Grievance Procedures

Graduate students have multiple avenues available for handling complaints or concerns that may arise. Students have the option of consulting with any faculty member of their choosing, their faculty research mentor, Clinical Coordinator, Director of Clinical Training (DCT), Division Director, Graduate Director, and/or the Department Chair. The department also has a faculty Ombudsperson who can hear complaints and concerns and help to resolve differences. The faculty ombudsperson is Dr. Brian Doss.

Additionally, the department has a student ombudsperson. The student ombudsperson is elected by the graduate students to serve in this position and is a peer who can guarantee that information provided to them is kept confidential (in so far as is allowed by the state of Florida). The role of the student ombudsperson is to be a sounding board for any concerns that arise and provide guidance to students. The student ombudsperson also serves to manage the mentor evaluation process (see Mentor and Faculty Evaluation section), which is another method of sharing any grievances. For the 2022-23 academic year the student ombudsperson is Katie Dillon.

Students are encouraged to discuss concerns using any of the above options. Any faculty member of the student's choosing, the student ombudsperson, and faculty ombudsperson can all serve as a sounding board and can provide advice or guidance. If a student wishes to pursue a change based on the presenting concern, the following steps should be used:

Step 1: The student should first attempt to resolve the concern with the faculty member, mentor, or supervisor, if possible. The student is encouraged to discuss the concern and attempt to find a resolution.

Step 2: If step 1 is not successful, the student should then present the concern to a member of the faculty. Students have the option of consulting with any faculty member of their choosing, their faculty research mentor, Clinical Coordinator, Director of Clinical Training (DCT), Division Director, Graduate Director, and/or the Department Chair. (Note: the faculty ombudsperson can serve in this role, but the student must specifically inform the ombudsperson that they wish to pursue action.) If a student presents a concern to a faculty member prior to Step 1, they will be encouraged to discuss the concern with the faculty member in question.

Step 3: Mediation between the student and faculty member, mentor, or supervisor may be necessary. At this stage, the Department Chair, Director of Graduate Studies and/or Division Director is involved in the mediation. This results in a mediation agreement, which the student and faculty member, mentor, or supervisor both formally endorse willingness to follow.

Step 4: If the mediation agreement is not followed, the student must inform the Department Chair or Division Director. If mediation is not successful, the student will be aided in making the appropriate changes.

If a problem cannot be resolved at the department level, the next step is to present complaints to the Dean of Students or Dean of the Graduate School. The webpage for the Dean of Students contains more information on University procedures for complaints and concerns. The page also has a link to the handbook on *Students Rights and Responsibilities*. Also of interest is the graduate honor code. Links to these resources are listed below.

- **Dean of Students:** https://doso.studentaffairs.miami.edu/
- **Dean of the Graduate School**: https://people.miami.edu/profile/gprado@miami.edu
- **Students Rights and Responsibilities Handbook:** https://doso.studentaffairs.miami.edu/_assets/pdf/policies/student_rights_and_responsibilities_handbook.pdf
- **Graduate Honor Code:** https://doso.studentaffairs.miami.edu/_assets/pdf/honor-council/grad_honor_code.pdf

II.   Procedures for Documenting Complaints

After appropriate discussions with the above faculty and/or advisors have occurred, but have not resolved the issue, it may be the case that a student wishes to file a formal complaint (e.g., to request reinstatement in the clinical program after a dismissal). In such cases, the procedures for due process are as follows.

1. The student should write a letter to their Division Director and Department Chair making the formal request and explaining the case. For clinical complaints (e.g., why an individual should be reinstated into the clinical program) the student should write this letter to the DCT and the Department Chair.
2. The request will then be reviewed by the Department's Advisory Group (i.e., the Department Chair, Associate Chair, Division Directors, and the DCT).
3. The Advisory Committee will present the formal complaint and make a recommendation to be made to the entire department faculty.
4. The recommendations of the Advisory Group will then be discussed and voted on by the full Department Faculty.
5. If the complaint is dismissed by the Department or the decision is not to the satisfaction of the student, the student can file a formal complaint with the Graduate School (see the UM Graduate Student Handbook).

Appendix D:
Retention, Remediation, and Termination

Required Courses

Students must receive a grade of B- or higher in all required courses to remain in good standing in the program. Students who receive a grade below B- in any required course MAY BE GIVEN the option of retaking the course. Students who fail to repeat the course with a grade of B- or higher may be dismissed from the program. At the end of every semester each student's course work performance is evaluated by the faculty in their division and by the psychology department faculty as a whole. The Graduate School of the University of Miami also requires that all graduate students maintain a minimum of a 3.0 GPA.

Research

Students must engage in 15 or more hours of research per week, each semester, to remain in good standing. At the beginning of each semester students must submit an outline of their planned research activities and this must be reviewed with and signed by their faculty research mentor. At the end of every semester, all students' research progress is evaluated by their faculty mentor, by the division faculty, and by the psychology department faculty as a whole. Students who fail to make satisfactory progress towards the goals proposed in their research outline may receive an unsatisfactory evaluation and in extreme cases may be terminated from the program.

Master's Thesis

Students are expected to successfully defend and complete a master's thesis by the middle of their third year in residence; students who have not completed a master's thesis by that time will receive an unsatisfactory evaluation, will not be allowed to register for more than two courses (in addition to research credits), and may be placed on probationary status. Students who fail to successfully complete a master's thesis by the fall of the fourth year will be placed on probationary status and may not take any courses (except research credits) until they complete the master's thesis. Failure to complete the thesis by the end of the fourth year may result in termination from the graduate program.

All students are expected to submit the complete and final thesis document to the graduate school within THREE months of having a formal thesis defense. Students who defend a thesis in May, and subsequently complete qualifying procedures the same summer, must submit their final thesis document to the graduate school by the beginning of the fall semester for that year; failure to do so may jeopardize the student's admission to Ph.D. candidacy.

Qualifying Procedure/QUALIFYING PAPER and Admission to Doctoral Candidacy

Advancing to doctoral candidacy after completion of the master's degree is not automatic; for advancement to the Ph.D. the faculty may not approve students whose performance has been marginal. One criterion for advancing to Ph.D. candidacy is the successful completion of the qualifying procedures. Clinical students are required to participate in the Clinical Qualifying Procedures during the summer after the defense of their master's thesis (typically the summer after their third year in the program) and must defend the thesis project no later than May 15th of the year they expect to take qualifying exams. The Clinical Qualifying Procedures occur in late May to early June. Students who fail any of the components of the procedures will be required to retake them during the subsequent fall semester; failure to do so will result in termination from the clinical program.

Dissertation

Students must complete a formal dissertation by the end of their 7th year in the program. Clinical students may not apply for internship (typically in the early fall of their 4th or 5th year) until they have established a dissertation committee and successfully defended their dissertation proposal. Students who do not complete and defend their dissertations within seven years will need to re-certify their graduate credits and may be dismissed from the program.

Internship

For students enrolled in the clinical program, failure to successfully complete a clinical internship by the end of the seventh year in the program may result in program dismissal.

Clinical Work

For clinical graduate students, failure to demonstrate satisfactory performance (e.g., grade of B- or higher) in any clinical course – even after retaking the course, receiving an unsatisfactory practicum evaluation, or failure to abide by APA ethical standards (e.g., confidentiality, record keeping), may result in dismissal from the program. Ethical guidelines and standards are discussed on pages 58 (clinical ethics) and 67 (general ethics); the APA ethics code can be found in Appendix H and online (https://www.apa.org/ethics/code/).

Professional Conduct

Clinical students are in a professional training program, and those who do not behave in a professional manner throughout their training may be dismissed from the program. Examples of unprofessional behavior include: frequently arriving late for classes, supervision, clinical appointments with clients, or other professional meetings; excessive defensiveness with supervisors or instructors; rude, disrespectful behavior with faculty, classmates, or

clients: inappropriate dress, especially during clinical activities; and intoxication on campus. Evidence of unethical behavior in research, clinical work, or classes (e.g., cheating on exams, PLAGIARISM) is grounds for program dismissal.

Personal Problems

As stated in APA's *"Ethical Principals of Psychologists and Code of Conduct"* (see Appendix H):

> *"Psychologists refrain from initiating an activity when they know, or should know, that there is a substantial likelihood that their personal problems will prevent them from performing their work-related activities in a competent manner. When Psychologists become aware of personal problems that may interfere with their performing work-related duties adequately, they take appropriate measures, such as obtaining professional consultation or assistance, and determine whether they should limit, suspend, or terminate their work-related duties."*

The Department takes a similar position with regard to Psychologists-in-training. Examples of personal problems include, but are not limited to, substance abuse, maladaptive social behaviors, untreated mental or physical health issues, and dishonesty in dealing with peers, supervisors, clients, or others.

If such problems are affecting you, please reach out to any of the support faculty available to you, including the Associate Chair, your Director of Clinical Training, Division Director, faculty mentors, etc. to assist in connecting with resources that may help. Ideally, such supports will be engaged prior to any limitations need to be placed on student's work-related duties but may also be encouraged as part of a support or remediation plan.

Overall Assessment

The decision to recommend a student for admission to candidacy for the Ph.D. degree ultimately resides with the departmental faculty. Faculty advisors and the department as a whole take factors other than satisfactory grades into consideration in determining qualifications for advanced degrees. As mentioned in the "Academic Advising" section of this manual, departments keep records of deferred and plus and minus grades, as well as written evaluations by instructors and supervisors. These factors, along with other skills, aptitude, and record of professional behavior, are considered by the Department in determining satisfactory progress and in decisions to permit students to continue in master's and doctoral degree programs.

Remediation

a. *Written notification of problems*. Given the nature of our program and the evaluation process, independent evaluators (e.g., clinical supervisors, DCT, clinical faculty) could readily document any problems that students might experience. Students are provided

with detailed, specific feedback in their written evaluation letters when their progress is unsatisfactory or requires placing them on probation. They are also given the names of one or more faculty (e.g., DCT, Division Director, research mentor, Clinical Coordinator) who is available to discuss the feedback with them. Every effort is made to speak with the student in a timely manner. In most cases, students will have already received feedback from a clinical supervisor, research mentor, or course instructor that their performance has been unsatisfactory. Students are also able to discuss their concerns with their research advisor, DCT, Division Director, academic advisor, practicum supervisor, or other suitable faculty member.

b. _Guidance regarding steps to remediation_. Via meetings with the designated faculty (as noted above), and/or with the student's research mentor, DCT, Division Director, or Clinical Coordinator, a remediation plan is developed if the problem is considered remediable. In some cases a "support plan" rather than a "remediation plan" may be engaged with a student that is at-risk for unsatisfactory performance in one or more scholarly or professional domains. For example, in the clinical realm, a student may have difficulty acquiring certain skills, progress more slowly than expected, and/or acquire skills and then deteriorate in performance. When a concern is raised about a student by a supervisor or during the semester evaluations, our practice is to clearly describe the concern, linking it to measurable or observable behaviors (e.g., competencies indicated on the practicum evaluation form) in the support or remediation plan. For example, concerns have been raised about students' professional skills, such as the timely preparation of assessment reports or case notes.

Our emphasis on observable behaviors/competencies, together with independent evaluators, increases the likelihood that the student will accept feedback and understand how remediation efforts are operationalized. In addition, our practice is to involve the student in a dialogue about the nature of the observed problems, so that the student has an opportunity to offer an opinion about what is causing the problem and make suggestions regarding its resolution. Following a student-faculty meeting to discuss concerns and remediation plans, the student is asked to prepare a summary of the conversation, which is then reviewed and approved by the participating faculty and placed in the student's department file.

Remediation plans are linked to the conceptualization of the problem and require specific goals for the student. Plans also specify a period of follow-up, a timeline for re-evaluation, and consequences for failure to correct the problem. Examples of our remediation efforts include the following: 1) supplementary practicum with augmented supervision in the case of a clinical competency deficit; 2) counseling to address poor stress management skills that interfered with a student's progress; and 3) a leave of absence (with encouragement for therapy) to resolve personal issues that impede performance for students whose problems are believed to be personal in nature (e.g., family problems, psychiatric illness, substance use).

c. *Written feedback regarding corrective actions*. Whenever substantive written feedback is provided to a student (in the "end of the semester" letter) that requires corrective action, the following occurs. The corrective plan is reviewed again by the Clinical Committee and by the Division faculty (that represent the student's major area of study) at the next formal evaluation period (typically, the end of the following semester), and often at one or more intermediary points. For example, the Clinical Committee typically meets mid-semester, and this provides an opportunity to review the progress of a student who may have received an unsatisfactory clinical evaluation. Follow-up written evaluations are provided to students by the end of the following semester, if not sooner. The follow-up letter, together with a meeting with the DCT and/or the relevant Clinical Coordinator, summarizes the progress the student has made in remediation. Students who remediate successfully are notified in writing and verbally of their good standing. If a student has had several opportunities for: (a) additional experience, (b) additional, closer supervision, and (c) regular feedback, and if that student has not progressed satisfactorily, the student may be asked to work toward a terminal master's degree, a non-clinical degree, or may be required to terminate the program, as circumstances warrant. The latter feedback is provided in writing as well as verbally, during a meeting with the student.

Appendix E:
PSY 001 - History & Systems of Psychology

Course Description

History and Systems of Psychology is an online course consisting of six modules that address key experiments, movements, and historical issues in the field of psychology. Major topics include: early experimental psychology in Germany, origins of scientific psychology in the United States, early schools of psychology, Freud and psychoanalysis, behaviorism, and cognitive psychology. Additionally, the final module of the course is dedicated to diversity, equity, and inclusion in psychology, particularly in regard to race, gender, and sexuality. Readings for this module will include original research articles. The overall goal of this course is to demonstrate competency in the area of history and systems of psychology, in accordance with the American Psychological Association's Standards of Accreditation.

Course Requirements

You will need to review each module on Blackboard. Modules contain assigned readings and videos. At the end of each module, you will need to complete a series of multiple-choice quiz questions. To pass the course, you must achieve a grade of 80% or higher on all quizzes. Module 2 and 6 also include discussion questions; these will be graded as pass-fail based upon completion.

In order to register for the course, you must contact the Sr. Program Coordinator for the Clinical Program, Adrianne Rondon (a.rondon@miami.edu), who will enroll you. Once you have completed all modules and exams, please e-mail Adrianne to let her know you completed the course. This course is self-paced and may be accessed at any time, but must be completed before the beginning of the second year of your graduate studies at the University of Miami. In addition, once you begin the course, it must be completed by the end of that semester (i.e., fall, spring, or combined summer session).

Readings

Benjamin Jr, L. T. (2007). *A brief history of modern psychology, 2nd edition*. Wiley.
**The department has purchased multiple copies of this text, which are available for you to borrow for brief time periods. Please e-mail Adrianne Rondon (a.rondon@miami.edu) to borrow a copy. The text is also available at the UM Library and is available for rent online through Amazon.com.

Honor Code

This evaluated educational experience abides by the University of Miami Student Honor Code:
All forms of scholastic dishonesty are prohibited, whether related to a written or oral examination, a thesis, term paper, mode of creative expression, computer-based work, or other academic undertaking. Scholastic dishonesty includes but is not limited to cheating, plagiarism, collusion, and violating the professional ethics of research projects. Moreover, students are expected to warn fellow students who do not appear to be observing proper ethical standards and to report violations of this Code. In determining what constitutes academic dishonesty, a student should be guided by the purposes of the Student Honor Code, common sense, and information provided by the instructor. All graduate students are responsible for reading, understanding, and upholding this Code.

For more information, please see http://www6.miami.edu/dean-students/pdf/undergrad_honorcode.pdf

Module	Topic(s)	Selected Readings/Materials	Assignments
1	1a: Germany and the birth of a new science 1b: Origins of scientific psychology in America 1c: Early schools of	Benjamin Ch. 3 (pp. 38-57) Benjamin Ch. 4 (pp. 58-76) Benjamin Ch. 5 (pp. 77-97) Cummings Center for the History of Psychology	Module 1 Quiz (updated)

		American psychology	(2021). Examining psychology's contributions to the belief in racial hierarchy and perpetuation of inequality for People of Color in the United States. Cummings Center for the History of Psychology. (pages 1-6)	
2		2a: The Historical Promotion of Racism in Psychology 2b: Dismantling Systemic Racism in Psychology	American Psychological Association. (2021). Apology to People of Color for APA's Role in Promoting, Perpetuating, and Failing to Challenge Racism, Racial Discrimination, and Human Hierarchy in US:[Resolution adopted by the APA Council of Representatives]. (executive summary only) American Psychological Association. (2021). Role of Psychology and the American Psychological Association in Dismantling Systemic Racism Against People of Color in the United States [Resolution adopted by the APA Council of Representatives]. The Association of Black Psychologists (2021). Response Letter to the APA's Apology. Buchanan, N. T., Perez, M., Prinstein, M. J., & Thurston, I. B. (2021). Upending racism in psychological science: Strategies to change how science is conducted, reported, reviewed, and disseminated. American Psychologist, 76(7), 1097.	Module 2 Quiz Module 2 Discussion forum
3		Freud and psychoanalysis	Benjamin Ch. 7 (pp. 118-138) Video: Psychotherapy: Sigmund Freud	Module 3 Quiz
4		Behaviorism	Benjamin Ch. 8 (pp. 139-159) Video: B.F. Skinner in 2 minutes	Module 4 Quiz
5		Cognitive psychology	Benjamin Ch. 11 (pp. 203-223)	Module 5 Quiz
6a		Diversity, equity, and inclusion in psychology: Psychology and race	Benjamin Ch. 10 (pp. 182-202) Black, S. R., Spence, S. A., & Omari, S. R. (2004). Contributions of African Americans to the field of psychology. Journal of Black Studies, 35, 40-64. Winston, A. S. (2020). Scientific racism and North American psychology. In Oxford research encyclopedia of psychology.	
6b		Diversity, equity, and	Drescher, J. (2015). Out of DSM: Depathologizing	Module 6 Quiz

| | inclusion in psychology: Psychology, gender, and sexuality | homosexuality. Behavioral sciences, 5(4), 565-575.

Hyde, J. S., Bigler, R. S., Joel, D., Tate, C. C., & van Anders, S. M. (2019). The future of sex and gender in psychology: Five challenges to the gender binary. American Psychologist, 74(2), 171. Please read intro (pg 171-172), all "Summary" sections (pgs. 174, 176, 179, 181, and 183), and "Costs of the Gender Binary" section (pg. 183 - 189)

Ussher, J. M. (2013). Diagnosing difficult women and pathologising femininity: Gender bias in psychiatric nosology. Feminism & Psychology, 23(1), 63-69. | Module 6 discussion forum |

Appendix F:
PSY 002 - Supervision

Students must complete a program-approved **online CE course on supervision** (PSY 002: *Supervision*) prior to applying for internship. Students register on their own and typically take this course during the summer before applying to internship; however, they may take the course at any time prior to **October 1st** of the year they apply.

Students must provide a certificate of completion from the program-approved continuing education provider. The department will reimburse the student for the cost of the course.

To register go to: https://ce4less.com/CourseList. The course title is "**Supervision: A Guide for Mental Health Professionals**".

Additional instructions for course access: https://login.psy.miami.edu/grad/CE4less.pdf

To seek reimbursement, please send Adrianne Rondon (a.rondon@miami.edu) a screenshot of your certificate showing your grade, as well as proof of payment. Make sure the receipt includes your name and that it is marked "paid" not "due." She will then process the reimbursement for you.

For any additional questions about course access, registration, and reimbursement please contact Adrianne Rondon.

The syllabus for this course is shown below.
_____

PSY 002: Supervision: A Guide for Mental Health Professionals

Instructor: Amanda Gillmore, PhD and Heidi Dalzell, PsyD
CE4less: Continuing Education for Mental Health Professionals
https://ce4less.com/Supervision-A-Guide-for-Mental-Health-Professionals-Revised-Ceu

Course Objectives
  After finishing this course, the participant will be able to:
- Discuss the differences between authoritative and facilitative supervision
- Describe the different theoretical approaches to supervision
- Explain the principles of ethical decision-making
- Describe the concept of professional boundaries

Topics Covered
- Definition of "supervision" and how to distinguish it from the process of psychotherapy
- Characteristics of effective supervision and ineffective supervisors
- Broad issues related to the supervisory relationship
- The use of the Myers-Briggs Type Indicator and how MBTI traits reflect individual differences between supervisor and supervisee

- Authoritative and facilitative approaches to supervision
- Supervision competencies proposed by Association of Psychology Postdoctoraland Internship Centers (APPIC)
- Various approaches to supervision (Psychodynamic, Cognitive Behavioral, Feminist, Person-Centered, Developmental, Systems Approach)
- Responsibilities involved in supervision (supervisor, supervisee, client)
- Ethical and legal issues in supervision, including informed consent, confidentiality, and competence (including ACES best practices)
- Conditional confidentiality
- Multicultural competence in supervision
- Questions that may be helpful in promoting multicultural competence
- Importance of the supervisory contract and components that may be included in this contract
- Challenges and opportunities related to boundaries in supervisory relationships (dual relationships, supervision versus therapy, intimate/sexual relationships, parallel process and countertransference reactions)
- Supervision formats; the benefits of structure versus unstructured supervision, including when each is appropriate
- Use of self-report as a form of supervision
- Issues connected to live therapy supervision
- Use of other methods such as audio or videotaping and use of process notes
- Kagan's method of Interpersonal Process Recall (IPR)
- Ways to encourage supervisee reflectivity
- Possible components of an individual supervisory session
- Authoritative, participative, co-operative and peer group formats
- Components of a fair evaluation
- Formative and summative evaluation
- Evaluation of supervisees, including use of evaluation instruments, supervisee self- assessment and communicating feedback
- Common issues that may lead to conflict between supervisor and supervisee and ways to address these conflicts
- Supervisee-specific strategies (e.g., the anxious supervisee, the apatheticsupervisee)
- Supervisor administrative functions, including the reasons for record keeping and the components of a supervision record

Materials

Course participants will access Supervision: A Guide for Mental Health Professionals – Revised, an online course provided by ce4less.com. The course reading may be obtained from this website:

Dalzell, H. * Gilmore, A. (2016). *Supervision: A guide for mental health professionals – revised.* Retrieved from: https://ce4less.com/Supervision-A-Guide-for-Mental-Health-Professionals-Revised-Ceu

Assignments

Students will access the course materials by signing up for the course on ce4less.com. They will complete the reading listed above, followed by the online course post-test. They must pass the test and submit a certificate of completion to Adrianne Rondon (arondon@miami.edu).

Appendix G:
Requirements for Students Completing Practicum at the Miami VA

ALL trainees:
- Are enrolled in the designated training program and have met criteria for their specified level of training;
- Meet the physical requirements of the training program;
- Have had tuberculosis screening as required by the Center for Disease Control (CDC) or VA standards;
- Have had hepatitis B vaccination or have signed declination waivers;
- Have been vaccinated for influenza per VHA policy; currently by November 30th each year or, if declining vaccination, trainees are aware of the requirement to wear a face mask throughout the influenza season while at the VA healthcare facility;
- Have been screened against the Health and Human Services' List of Excluded Individuals and Entities (LEIE). https://exclusions.oig.hhs.gov/ (all paid and WOC trainees)

As applicable:
- Trainees covered by a TQCVL are considered to be in satisfactory physical condition and meet the essential requirements of their training program.
- International medical school graduates have had primary source verification of the Educational Council for Foreign Medical Graduates (ECFMG) certificates.
- Licensed trainees have been screened against the National Practitioner Data Bank (NPDB) https://www.npdb.hrsa.gov/
- Trainees born male, both U.S. citizens and immigrants, who are between 18 and 25 years old, have registered with the Selective Service or provided a Status Information Letter.
- If required by the admission criteria of the training program, all trainees have had primary source verification of education and other credentials.
  NOTE: List may not be all inclusive. Please mark which items below are required and have been verified.
  - X   Reference letters
  - X   Primary source verification of current and past license(s) or registration(s) in any field
  - X   Certification(s) through the state licensing board(s) and/or national and state certification bodies
  - X   Drug Enforcement Administration (DEA) registrations
  - X   National Provider Identifier (NPI) registration
  - X   Other: APA Accredited

As applicable, for non-U.S. citizen trainees:
- Documented proof of current immigrant or non-immigrant status has been reviewed and attached to include:
  - Appropriate visa (J-1, J-2, H-1B, H-4, E-3) status; or
  - Permanent Resident Card (formerly "Green Card"); or
  - Deferred Action for Childhood Arrivals (DACA) trainee, Employment Authorization Document (Form I-766).
  - Other visas require discussion with the VA Designated Education Officer (DEO) and may need decision of VA General Council.
- Appointment of non-US citizens must be approved by the Medical Center Director.

Appendix H:
Ethical Principles of Psychologists and Code of Conduct
CONTENTS

INTRODUCTION AND APPLICABILITY

The American Psychological Association's (APA's) Ethical Principles of Psychologists and Code of Conduct (hereinafter referred to as the Ethics Code) consists of an Introduction, a Preamble, five General Principles (A–E), and specific Ethical Standards. The Introduction discusses the intent, organization, procedural considerations, and scope of application of the Ethics Code. The Preamble and General Principles are aspirational goals to guide psychologists toward the highest ideals of psychology. Although the Preamble and General Principles are not themselves enforceable rules, they should be considered by psychologists in arriving at an ethical course of action. The Ethical Standards set forth enforceable rules for conduct as psychologists. Most of the Ethical Standards are written broadly, in order to apply to psychologists in varied roles, although the application of an Ethical Standard may vary depending on the context. The Ethical Standards are not exhaustive. The fact that a given conduct is not specifically addressed by an Ethical Standard does not mean that it is necessarily either ethical or unethical.

This Ethics Code applies only to psychologists' activities that are part of their scientific, educational, or professional roles as psychologists. Areas covered include but are not limited to the clinical, counseling, and school practice of psychology; research; teaching; supervision of trainees; public service; policy development; social intervention; development of assessment instruments; conducting assessments; educational counseling; organizational consulting; forensic activities; program design and evaluation; and administration. This Ethics Code applies to these activities across a variety of contexts, such as in person, postal, telephone, internet, and other electronic transmissions. These activities shall be distinguished from the purely private conduct of psychologists, which is not within the purview of the Ethics Code.

Membership in the APA commits members and student affiliates to comply with the standards of the APA Ethics Code and to the rules and procedures used to enforce them. Lack of awareness or misunderstanding of an Ethical Standard is not itself a defense to a charge of unethical conduct.

The procedures for filing, investigating, and resolving complaints of unethical conduct are described in the current Rules and Procedures of the APA Ethics Committee. APA may impose sanctions on its members for violations of the standards of the Ethics Code, including termination of APA membership, and may notify other bodies and individuals of its actions. Actions that violate the standards of the Ethics Code may also lead to the imposition of sanctions on psychologists or students whether or not they are APA members by bodies other than APA, including state psychological associations, other professional groups, psychology boards, other state or federal agencies, and payors for health services. In addition, APA may take action against a member after their conviction of a felony, expulsion or suspension from an affiliated state psychological association, or suspension or loss of licensure. When the sanction to be imposed by APA is less than expulsion, the 2001 Rules and Procedures do not guarantee an opportunity for an in-person hearing, but generally provide that complaints will be resolved only on the basis of a submitted record.

The Ethics Code is intended to provide guidance for psychologists and standards of professional conduct that can be applied by the APA and by other bodies that choose to adopt them. The Ethics Code is not intended to be a basis of civil liability. Whether a psychologist has violated the Ethics Code standards does not by itself determine whether the psychologist is legally liable in a court action, whether a contract is enforceable, or whether other legal consequences occur.

The modifiers used in some of the standards of this Ethics Code (e.g., reasonably, appropriate, potentially) are included in the standards when they would (1) allow professional judgment on the part of psychologists, (2) eliminate injustice or inequality that would occur without the modifier, (3) ensure applicability across the broad range of activities conducted by psychologists, or (4) guard against a set of rigid rules that might be quickly outdated. As used in this Ethics Code, the term reasonable means the prevailing professional judgment of psychologists engaged in similar activities in similar circumstances, given the knowledge the psychologist had or should have had at the time.

In the process of making decisions regarding their professional behavior, psychologists must consider this Ethics Code in addition to applicable laws and psychology board regulations. In applying the Ethics Code to their professional work, psychologists may consider other materials and guidelines that have been adopted or endorsed by scientific and professional psychological organizations and the dictates of their own conscience, as well as consult with others within the field. If this Ethics Code establishes a higher standard of conduct than is required by law, psychologists must meet the higher ethical standard. If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to this Ethics Code and take steps to resolve the conflict in a responsible manner. If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing authority in keeping with basic principles of human rights.

PREAMBLE

Psychologists are committed to increasing scientific and professional knowledge of behavior and people's understanding of themselves and others and to the use of such knowledge to improve the condition of individuals, organizations, and society. Psychologists respect and protect civil and human rights and the central importance of freedom of inquiry and expression in research, teaching, and publication. They strive to help the public in developing informed judgments and choices concerning human behavior. In doing so, they perform many roles, such as researcher, educator, diagnostician, therapist, supervisor, consultant, administrator, social interventionist, and expert witness. This Ethics Code provides a common set of principles and standards upon which psychologists build their professional and scientific work.

This Ethics Code is intended to provide specific standards to cover most situations encountered by psychologists. It has as its goals the welfare and protection of the individuals and groups with whom psychologists work and the education of members, students, and the public regarding ethical standards of the discipline.

The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment and lifelong effort to act ethically; to encourage ethical behavior by students, supervisees, employees, and colleagues; and to consult with others concerning ethical problems.

GENERAL PRINCIPLES

This section consists of General Principles. General Principles, as opposed to Ethical Standards, are aspirational in nature. Their intent is to guide and inspire psychologists toward the very highest ethical ideals of the profession. General Principles, in contrast to Ethical Standards, do not represent obligations and should not form the basis for imposing sanctions. Relying upon General Principles for either of these reasons distorts both their meaning and purpose.

Principle A: Beneficence and Non-malfeasance

Psychologists strive to benefit those with whom they work and take care to do no harm. In their professional actions, psychologists seek to safeguard the welfare and rights of those with whom they interact professionally and other affected persons, and the welfare of animal subjects of research. When conflicts occur among psychologists' obligations or concerns, they attempt to resolve these conflicts in a responsible fashion that avoids or minimizes harm. Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence. Psychologists strive to be aware of the possible effect of their own physical and mental health on their ability to help those with whom they work.

Principle B: Fidelity and Responsibility

Psychologists establish relationships of trust with those with whom they work. They are aware of their professional and scientific responsibilities to society and to the specific communities in which they work. Psychologists uphold professional standards of conduct, clarify their professional roles and obligations, accept appropriate responsibility for their behavior, and seek to manage conflicts of interest that could lead to exploitation or harm. Psychologists consult with, refer to, or cooperate with other professionals and institutions to the extent needed to serve the best interests of those with whom they work. They are concerned about the ethical compliance of their colleagues' scientific and professional conduct. Psychologists strive to contribute a portion of their professional time for little or no compensation or personal advantage.

Principle C: Integrity

Psychologists seek to promote accuracy, honesty, and truthfulness in the science, teaching, and practice of psychology. In these activities psychologists do not steal, cheat, or engage in fraud, subterfuge, or intentional misrepresentation of fact. Psychologists strive to keep their promises and to avoid unwise or unclear commitments. In situations in which deception may be ethically justifiable to maximize benefits and minimize harm, psychologists have a serious obligation to consider the need for, the possible consequences of, and their responsibility to correct any resulting mistrust or other harmful effects that arise from the use of such techniques.

Principle D: Justice

Psychologists recognize that fairness and justice entitle all persons to access to and benefit from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists. Psychologists exercise reasonable judgment and take precautions to ensure that their potential biases, the boundaries of their competence, and the limitations of their expertise do not lead to or condone unjust practices.

Principle E: Respect for People's Rights and Dignity
Psychologists respect the dignity and worth of all people, and the rights of individuals to privacy, confidentiality, and self-determination. Psychologists are aware that special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous decision-making. Psychologists are aware of and respect cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status and consider these factors when working with members of such groups. Psychologists try to eliminate the effect on their work of biases based on those factors, and they do not knowingly participate in or condone activities of others based upon such prejudices.

ETHICAL STANDARDS

1.   Resolving Ethical Issues

1.1   Misuse of Psychologists' Work
If psychologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation.

1.2   Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority
If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict. If the conflict is unresolvable via such means, psychologists may adhere o the requirements of the law, regulations, or other governing legal authority.

1.3   Conflicts Between Ethics and Organizational Demands
If the demands of an organization with which psychologists are affiliated or for whom they are working conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and to the extent feasible, resolve the conflict in a way that permits adherence to the Ethics Code.

1.4   Informal Resolution of Ethical Violations
When psychologists believe that there may have been an ethical violation by another psychologist, they attempt to resolve the issue by bringing it to the attention of that individual, if an informal resolution appears appropriate and the intervention does not violate any confidentiality rights that may be involved. (See also Standards 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority, and 1.03, Conflicts Between Ethics and Organizational Demands.)

1.5   Reporting Ethical Violations
If an apparent ethical violation has substantially harmed or is likely to substantially harm a person or organization and is not appropriate for informal resolution under Standard 1.04, Informal Resolution of Ethical Violations, or is not resolved properly in that fashion, psychologists take further action appropriate to the situation. Such action might include referral to state or national committees on professional ethics, to state licensing boards, or to the appropriate institutional authorities. This standard does not apply when an intervention would violate confidentiality rights or when psychologists have been retained to review the work of another psychologist whose professional conduct is in question. (See also Standard 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority.)

1.6   Cooperating With Ethics Committees
Psychologists cooperate in ethics investigations, proceedings, and resulting requirements of the APA or any affiliated state psychological association to which they belong. In doing so, they address any confidentiality issues. Failure to cooperate is itself an ethics violation. However, making a request for deferment of adjudication of an ethics complaint pending the outcome of litigation does not alone constitute non-cooperation.

1.7   Improper Complaints
Psychologists do not file or encourage the filing of ethics complaints that are made with reckless disregard for or willful ignorance of facts that would disprove the allegation.

1.8   Unfair Discrimination Against Complainants and Respondents
Psychologists do not deny persons employment, advancement, admissions to academic or other programs, tenure, or promotion, based solely upon their having made or their being the subject of an ethics complaint. This does not preclude taking action based upon the outcome of such proceedings or considering other appropriate information.

2. <u>Competence</u>
2.1 Boundaries of Competence
(a)   Psychologists provide services, teach, and conduct research with populations and in areas only within the boundaries of their competence, based on their education, training, supervised experience, consultation, study, or professional experience.

(b)   Where scientific or professional knowledge in the discipline of psychology establishes that an understanding of factors associated with age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status is essential for effective implementation of their services or research, psychologists have or obtain the training, experience, consultation, or supervision necessary to ensure the competence of their services, or they make appropriate referrals, except as provided in Standard 2.02, Providing Services in Emergencies.

(c)   Psychologists planning to provide services, teach, or conduct research involving populations, areas, techniques, or technologies new to them undertake relevant education, training, supervised experience, consultation, or study.

(d)   When psychologists are asked to provide services to individuals for whom appropriate mental health services are not available and for which psychologists have not obtained the competence necessary, psychologists with closely related prior training or experience may provide such services in order to ensure that services are not denied if they make a reasonable effort to obtain the competence required by using relevant research, training, consultation, or study.

(e)   In those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists nevertheless take reasonable steps to ensure the competence of their work and to protect clients/patients, students, supervisees, research participants, organizational clients, and others from harm.

(f)   When assuming forensic roles, psychologists are or become reasonably familiar with the judicial or administrative rules governing their roles.

2.2   Providing Services in Emergencies
In emergencies, when psychologists provide services to individuals for whom other mental health services are not available and for which psychologists have not obtained the necessary training, psychologists may provide such services in order to ensure that services are not denied. The services are discontinued as soon as the emergency has ended or appropriate services are available.

2.3   Maintaining Competence
Psychologists undertake ongoing efforts to develop and maintain their competence.

2.4   Bases for Scientific and Professional Judgments
Psychologists' work is based upon established scientific and professional knowledge of the discipline. (See also Standards 2.01e, Boundaries of Competence, and 10.01b, Informed Consent to Therapy.)

2.5   Delegation of Work to Others
Psychologists who delegate work to employees, supervisees, or research or teaching assistants or who use the services of others, such as interpreters, take reasonable steps to (1) avoid delegating such work to persons who have a multiple relationship with those being served that would likely lead to exploitation or loss of objectivity; (2) authorize only those responsibilities that such persons can be expected to perform competently on the basis of their education, training, or experience, either independently or with the level of supervision being provided; and (3) see that such persons perform these services competently. (See also Standards 2.02, Providing Services in Emergencies; 3.05, Multiple Relationships; 4.01, Maintaining Confidentiality; 9.01, Bases for Assessments; 9.02, Use of Assessments; 9.03, Informed Consent in Assessments; and 9.07, Assessment by Unqualified Persons.)

2.6   Personal Problems and Conflicts
(a)   Psychologists refrain from initiating an activity when they know or should know that there is a substantial likelihood that their personal problems will prevent them from performing their work-related activities in a competent manner.

(b)   When psychologists become aware of personal problems that may interfere with their performing work-related duties adequately, they take appropriate measures, such as obtaining professional consultation or assistance, and determine whether they should limit, suspend, or terminate their work-related duties. (See also Standard 10.10, Terminating Therapy.)

3. Human Relations

3.1 Unfair Discrimination

In their work-related activities, psychologists do not engage in unfair discrimination based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law.

3.2 Sexual Harassment

Psychologists do not engage in sexual harassment. Sexual harassment is sexual solicitation, physical advances, or verbal or nonverbal conduct that is sexual in nature, that occurs in connection with the psychologist's activities or roles as a psychologist, and that either (1) is unwelcome, is offensive, or creates a hostile workplace or educational environment, and the psychologist knows or is told this or (2) is sufficiently severe or intense to be abusive to a reasonable person in the context. Sexual harassment can consist of a single intense or severe act or of multiple persistent or pervasive acts. (See also Standard 1.08, Unfair Discrimination Against Complainants and Respondents.)

3.3 Other Harassment

Psychologists do not knowingly engage in behavior that is harassing or demeaning to persons with whom they interact in their work based on factors such as those persons' age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status.

3.4 Avoiding Harm

Psychologists take reasonable steps to avoid harming their clients/patients, students, supervisees, research participants, organizational clients, and others with whom they work, and to minimize harm where it is foreseeable and unavoidable.

3.5 Multiple Relationships

(a)   A multiple relationship occurs when a psychologist is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the psychologist has the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person.

A psychologist refrains from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the psychologist's objectivity, competence, or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists.

Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical.

(b)   If a psychologist finds that, due to unforeseen factors, a potentially harmful multiple relationship has arisen, the psychologist takes reasonable steps to resolve it with due regard for the best interests of the affected person and maximal compliance with the Ethics Code.

(c)   When psychologists are required by law, institutional policy, or extraordinary circumstances to serve in more than one role in judicial or administrative proceedings, at the outset they clarify role expectations and the extent of confidentiality and thereafter as changes occur. (See also Standards 3.04, Avoiding Harm, and 3.07, Third-Party Requests for Services.)

3.6 Conflict of Interest

Psychologists refrain from taking on a professional role when personal, scientific, professional, legal, financial, or other interests or relationships could reasonably be expected to (1) impair their objectivity, competence, or effectiveness in performing their functions as psychologists or (2) expose the person or organization with whom the professional relationship exists to harm or exploitation.

3.7 Third-Party Requests for Services

When psychologists agree to provide services to a person or entity at the request of a third party, psychologists attempt to clarify at the outset of the service the nature of the relationship with all individuals or organizations involved. This clarification includes the role of the psychologist (e.g., therapist, consultant, diagnostician, or expert witness), an identification of who is the client, the probable uses of the services provided or the information obtained, and the fact that there may be limits to confidentiality. (See also Standards 3.05, Multiple Relationships, and 4.02, Discussing the Limits of Confidentiality.)

3.8   Exploitative Relationships

Psychologists do not exploit persons over whom they have supervisory, evaluative, or other authority such as clients/patients, students, supervisees, research participants, and employees. (See also Standards 3.05, Multiple Relationships; 6.04, Fees and Financial Arrangements; 6.05, Barter With Clients/Patients; 7.07, Sexual Relationships With Students and Supervisees; 10.05, Sexual Intimacies With Current Therapy Clients/Patients; 10.06, Sexual Intimacies With Relatives or Significant Others of Current Therapy Clients/Patients; 10.07, Therapy With Former Sexual Partners; and 10.08, Sexual Intimacies With Former Therapy Clients/Patients.)

3.9   Cooperation With Other Professionals

When indicated and professionally appropriate, psychologists cooperate with other professionals in order to serve their clients/patients effectively and appropriately. (See also Standard 4.05, Disclosures.)

3.10   Informed Consent

(a)   When psychologists conduct research or provide assessment, therapy, counseling, or consulting services in person or via electronic transmission or other forms of communication, they obtain the informed consent of the individual or individuals using language that is reasonably understandable to that person or persons except when conducting such activities without consent is mandated by law or governmental regulation or as otherwise provided in this Ethics Code. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.)

(b)   For persons who are legally incapable of giving informed consent, psychologists nevertheless (1) provide an appropriate explanation, (2) seek the individual's assent, (3) consider such persons' preferences and best interests, and (4) obtain appropriate permission from a legally authorized person, if such substitute consent is permitted or required by law. When consent by a legally authorized person is not permitted or required by law, psychologists take reasonable steps to protect the individual's rights and welfare.

(c)   When psychological services are court ordered or otherwise mandated, psychologists inform the individual of the nature of the anticipated services, including whether the services are court ordered or mandated and any limits of confidentiality, before proceeding.

(d)   Psychologists appropriately document written or oral consent, permission, and assent. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.)

3.11   Psychological Services Delivered To or Through Organizations

(a)   Psychologists delivering services to or through organizations provide information beforehand to clients and when appropriate those directly affected by the services about (1) the nature and objectives of the services, (2) the intended recipients, (3) which of the individuals are clients, (4) the relationship the psychologist will have with each person and the organization, (5) the probable uses of services provided and information obtained, (6) who will have access to the information, and (7) limits of confidentiality. As soon as feasible, they provide information about the results and conclusions of such services to appropriate persons.

(b)   If psychologists will be precluded by law or by organizational roles from providing such information to particular individuals or groups, they so inform those individuals or groups at the outset of the service.

3.12   Interruption of Psychological Services

Unless otherwise covered by contract, psychologists make reasonable efforts to plan for facilitating services in the event that psychological services are interrupted by factors such as the psychologist's illness, death, unavailability, relocation, or retirement or by the client's/patient's relocation or financial limitations. (See also Standard 6.02c, Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work.)

4.   Privacy And Confidentiality
4.1   Maintaining Confidentiality

Psychologists have a primary obligation and take reasonable precautions to protect confidential information obtained through or stored in any medium, recognizing that the extent and limits of confidentiality may be regulated by law or established by institutional rules or professional or scientific relationship. (See also Standard 2.05, Delegation of Work to Others.)

4.2   Discussing the Limits of Confidentiality

(a)   Psychologists discuss with persons (including, to the extent feasible, persons who are legally incapable of giving

informed consent and their legal representatives) and organizations with whom they establish a scientific or professional relationship (1) the relevant limits of confidentiality and (2) the foreseeable uses of the information generated through their psychological activities. (See also Standard 3.10, Informed Consent.)

(b)   Unless it is not feasible or is contraindicated, the discussion of confidentiality occurs at the outset of the relationship and thereafter as new circumstances may warrant.

(c)   Psychologists who offer services, products, or information via electronic transmission inform clients/patients of the risks to privacy and limits of confidentiality.

4.3   Recording
Before recording the voices or images of individuals to whom they provide services, psychologists obtain permission from all such persons or their legal representatives. (See also Standards 8.03, Informed Consent for Recording Voices and Images in Research; 8.05, Dispensing With Informed Consent for Research; and 8.07, Deception in Research.)

4.4   Minimizing Intrusions on Privacy
(a)   Psychologists include in written and oral reports and consultations, only information germane to the purpose for which the communication is made.

(b)   Psychologists discuss confidential information obtained in their work only for appropriate scientific or professional purposes and only with persons clearly concerned with such matters.

4.5   Disclosures
(a)   Psychologists may disclose confidential information with the appropriate consent of the organizational client, the individual client/patient, or another legally authorized person on behalf of the client/patient unless prohibited by law.

(b)   Psychologists disclose confidential information without the consent of the individual only as mandated by law, or where permitted by law for a valid purpose such as to (1) provide needed professional services; (2) obtain appropriate professional consultations; (3) protect the client/patient, psychologist, or others from harm; or (4) obtain payment for services from a client/patient, in which instance disclosure is limited to the minimum that is necessary to achieve the purpose. (See also Standard 6.04e, Fees and Financial Arrangements.)

4.6   Consultations
When consulting with colleagues, (1) psychologists do not disclose confidential information that reasonably could lead to the identification of a client/patient, research participant, or other person or organization with whom they have a confidential relationship unless they have obtained the prior consent of the person or organization or the disclosure cannot be avoided, and (2) they disclose information only to the extent necessary to achieve the purposes of the consultation. (See also Standard 4.01, Maintaining Confidentiality.)

4.7   Use of Confidential Information for Didactic or Other Purposes
Psychologists do not disclose in their writings, lectures, or other public media, confidential, personally identifiable information concerning their clients/patients, students, research participants, organizational clients, or other recipients of their services that they obtained during the course of their work, unless (1) they take reasonable steps to disguise the person or organization, (2) the person or organization has consented in writing, or (3) there is legal authorization for doing so.

5.   Advertising and Other Public Statements
5.1   Avoidance of False or Deceptive Statements
(a)   Public statements include but are not limited to paid or unpaid advertising, product endorsements, grant applications, licensing applications, other credentialing applications, brochures, printed matter, directory listings, personal resumes or curricula vitae, or comments for use in media such as print or electronic transmission, statements in legal proceedings, lectures and public oral presentations, and published materials. Psychologists do not knowingly make public statements that are false, deceptive, or fraudulent concerning their research, practice, or other work activities or those of persons or organizations with which they are affiliated.

(b)   Psychologists do not make false, deceptive, or fraudulent statements concerning (1) their training, experience, or competence; (2) their academic degrees; (3) their credentials; (4) their institutional or association affiliations; (5) their services; (6) the scientific or clinical basis for, or results or degree of success of, their services; (7) their fees; or (8) their publications or research findings.

(c)   Psychologists claim degrees as credentials for their health services only if those degrees (1) were earned from a regionally accredited educational institution or (2) were the basis for psychology licensure by the state in which they practice.

5.2   Statements by Others
(a)   Psychologists who engage others to create or place public statements that promote their professional practice, products, or activities retain professional responsibility for such statements.

(b)   Psychologists do not compensate employees of press, radio, television, or other communication media in return for publicity in a news item. (See also Standard 1.01, Misuse of Psychologists' Work.)

(c)   A paid advertisement relating to psychologists' activities must be identified or clearly recognizable as such.

5.3   Descriptions of Workshops and Non-Degree-Granting Educational Programs
To the degree to which they exercise control, psychologists responsible for announcements, catalogs, brochures, or advertisements describing workshops, seminars, or other non-degree-granting educational programs ensure that they accurately describe the audience for which the program is intended, the educational objectives, the presenters, and the fees involved.

5.4   Media Presentations
When psychologists provide public advice or comment via print, internet, or other electronic transmission, they take precautions to ensure that statements (1) are based on their professional knowledge, training, or experience in accord with appropriate psychological literature and practice; (2) are otherwise consistent with this Ethics Code; and (3) do not indicate that a professional relationship has been established with the recipient. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)

5.5   Testimonials
Psychologists do not solicit testimonials from current therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence.

5.6   In-Person Solicitation
Psychologists do not engage, directly or through agents, in uninvited in-person solicitation of business from actual or potential therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence. However, this prohibition does not preclude (1) attempting to implement appropriate collateral contacts for the purpose of benefiting an already engaged therapy client/patient or (2) providing disaster or community outreach services.

6.   Record Keeping and Fees
6.1   Documentation of Professional and Scientific Work and Maintenance of Records
Psychologists create, and to the extent the records are under their control, maintain, disseminate, store, retain, and dispose of records and data relating to their professional and scientific work in order to (1) facilitate provision of services later by them or by other professionals, (2) allow for replication of research design and analyses, (3) meet institutional requirements, (4) ensure accuracy of billing and payments, and (5) ensure compliance with law. (See also Standard 4.01, Maintaining Confidentiality.)

6.2   Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work
(a)   Psychologists maintain confidentiality in creating, storing, accessing, transferring, and disposing of records under their control, whether these are written, automated, or in any other medium. (See also Standards 4.01, Maintaining Confidentiality, and 6.01, Documentation of Professional and Scientific Work and Maintenance of Records.)

(b)   If confidential information concerning recipients of psychological services is entered into databases or systems of records available to persons whose access has not been consented to by the recipient, psychologists use coding or other techniques to avoid the inclusion of personal identifiers.

(c)   Psychologists make plans in advance to facilitate the appropriate transfer and to protect the confidentiality of records and data in the event of psychologists' withdrawal from positions or practice. (See also Standards 3.12, Interruption of Psychological Services, and 10.09, Interruption of Therapy.)

6.3   Withholding Records for Nonpayment
Psychologists may not withhold records under their control that are requested and needed for a client's/patient's emergency treatment solely because payment has not been received.

6.4   Fees and Financial Arrangements
(a)   As early as is feasible in a professional or scientific relationship, psychologists and recipients of psychological services reach an agreement specifying compensation and billing arrangements.

(b)   Psychologists' fee practices are consistent with law.

(c)   Psychologists do not misrepresent their fees.

(d)   If limitations to services can be anticipated because of limitations in financing, this is discussed with the recipient of services as early as is feasible. (See also Standards 10.09, Interruption of Therapy, and 10.10, Terminating Therapy.)

(e)   If the recipient of services does not pay for services as agreed, and if psychologists intend to use collection agencies or legal measures to collect the fees, psychologists first inform the person that such measures will be taken and provide that person an opportunity to make prompt payment. (See also Standards 4.05, Disclosures; 6.03, Withholding Records for Nonpayment; and 10.01, Informed Consent to Therapy.)

6.5   Barter With Clients/Patients
Barter is the acceptance of goods, services, or other nonmonetary remuneration from clients/patients in return for psychological services. Psychologists may barter only if (1) it is not clinically contraindicated, and (2) the resulting arrangement is not exploitative. (See also Standards 3.05, Multiple Relationships, and 6.04, Fees and Financial Arrangements.)

6.6   Accuracy in Reports to Payors and Funding Sources
In their reports to payors for services or sources of research funding, psychologists take reasonable steps to ensure the accurate reporting of the nature of the service provided or research conducted, the fees, charges, or payments, and where applicable, the identity of the provider, the findings, and the diagnosis. (See also Standards 4.01, Maintaining Confidentiality; 4.04, Minimizing Intrusions on Privacy; and 4.05, Disclosures.)

6.7   Referrals and Fees
When psychologists pay, receive payment from, or divide fees with another professional, other than in an employer-employee relationship, the payment to each is based on the services provided (clinical, consultative, administrative, or other) and is not based on the referral itself. (See also Standard 3.09, Cooperation with Other Professionals.)

7.   Education and Training
7.1   Design of Education and Training Programs
Psychologists responsible for education and training programs take reasonable steps to ensure that the programs are designed to provide the appropriate knowledge and proper experiences, and to meet the requirements for licensure, certification, or other goals for which claims are made by the program. (See also Standard 5.03, Descriptions of Workshops and Non-Degree-Granting Educational Programs.)

7.2   Descriptions of Education and Training Programs
Psychologists responsible for education and training programs take reasonable steps to ensure that there is a current and accurate description of the program content (including participation in required course- or program-related counseling, psychotherapy, experiential groups, consulting projects, or community service), training goals and objectives, stipends and benefits, and requirements that must be met for satisfactory completion of the program. This information must be made readily available to all interested parties.

7.3   Accuracy in Teaching
(a)   Psychologists take reasonable steps to ensure that course syllabi are accurate regarding the subject matter to be covered, bases for evaluating progress, and the nature of course experiences. This standard does not preclude an instructor from modifying course content or requirements when the instructor considers it pedagogically necessary or desirable, so long as students are made aware of these modifications in a manner that enables them to fulfill course requirements. (See also Standard 5.01, Avoidance of False or Deceptive Statements.)

(b)   When engaged in teaching or training, psychologists present psychological information accurately. (See also Standard 2.03, Maintaining Competence.)

7.4   Student Disclosure of Personal Information
Psychologists do not require students or supervisees to disclose personal information in course- or program-related activities, either orally or in writing, regarding sexual history, history of abuse and neglect, psychological treatment, and relationships with parents, peers, and spouses or significant others except if (1) the program or training facility has clearly identified this requirement in its admissions and program materials or (2) the information is necessary to evaluate or obtain assistance for students whose personal problems could reasonably be judged to be preventing them from performing their training- or professionally related activities in a competent manner or posing a threat to the students or others.

7.5   Mandatory Individual or Group Therapy
(a)   When individual or group therapy is a program or course requirement, psychologists responsible for that program allow students in undergraduate and graduate programs the option of selecting such therapy from practitioners unaffiliated with the program. (See also Standard 7.02, Descriptions of Education and Training Programs.)

(b)   Faculty who are or are likely to be responsible for evaluating students' academic performance do not themselves provide that therapy. (See also Standard 3.05, Multiple Relationships.)

7.6   Assessing Student and Supervisee Performance
(a)   In academic and supervisory relationships, psychologists establish a timely and specific process for providing feedback to students and supervisees. Information regarding the process is provided to the student at the beginning of supervision.

(b)   Psychologists evaluate students and supervisees on the basis of their actual performance on relevant and established program requirements.

7.7   Sexual Relationships With Students and Supervisees
Psychologists do not engage in sexual relationships with students or supervisees who are in their department, agency, or training center or over whom psychologists have or are likely to have evaluative authority. (See also Standard 3.05, Multiple Relationships.)

8.   Research and Publication
8.1   Institutional Approval
When institutional approval is required, psychologists provide accurate information about their research proposals and obtain approval prior to conducting the research. They conduct the research in accordance with the approved research protocol.

8.2   Informed Consent to Research
(a)   When obtaining informed consent as required in Standard 3.10, Informed Consent, psychologists inform participants about (1) the purpose of the research, expected duration, and procedures; (2) their right to decline to participate and to withdraw from the research once participation has begun; (3) the foreseeable consequences of declining or withdrawing; (4) reasonably foreseeable factors that may be expected to influence their willingness to participate such as potential risks, discomfort, or adverse effects; (5) any prospective research benefits; (6) limits of confidentiality; (7) incentives for participation; and (8) whom to contact for questions about the research and research participants' rights. They provide opportunity for the prospective participants to ask questions and receive answers. (See also Standards 8.03, Informed Consent for Recording Voices and Images in Research; 8.05, Dispensing with Informed Consent for Research; and 8.07, Deception in Research.)

(b)   Psychologists conducting intervention research involving the use of experimental treatments clarify to participants at the outset of the research (1) the experimental nature of the treatment; (2) the services that will or will not be available to the control group(s) if appropriate; (3) the means by which assignment to treatment and control groups will be made; (4) available treatment alternatives if an individual does not wish to participate in the research or wishes to withdraw once a study has begun; and (5) compensation for or monetary costs of participating including, if appropriate, whether reimbursement from the participant or a third-party payor will be sought. (See also Standard 8.02a, Informed Consent to Research.)

8.3   Informed Consent for Recording Voices and Images in Research

Psychologists obtain informed consent from research participants prior to recording their voices or images for data collection unless (1) the research consists solely of naturalistic observations in public places, and it is not anticipated that the recording will be used in a manner that could cause personal identification or harm, or (2) the research design includes deception, and consent for the use of the recording is obtained during debriefing. (See also Standard 8.07, Deception in Research.)

8.4   Client/Patient, Student, and Subordinate Research Participants

(a)   When psychologists conduct research with clients/patients, students, or subordinates as participants, psychologists take steps to protect the prospective participants from adverse consequences of declining or withdrawing from participation.

(b)   When research participation is a course requirement or an opportunity for extra credit, the prospective participant is given the choice of equitable alternative activities.

8.5   Dispensing With Informed Consent for Research

Psychologists may dispense with informed consent only (1) where research would not reasonably be assumed to create distress or harm and involves (a) the study of normal educational practices, curricula, or classroom management methods conducted in educational settings; (b) only anonymous questionnaires, naturalistic observations, or archival research for which disclosure of responses would not place participants at risk of criminal or civil liability or damage their financial standing, employability, or reputation, and confidentiality is protected; or (c) the study of factors related to job or organization effectiveness conducted in organizational settings for which there is no risk to participants' employability, and confidentiality is protected or (2) where otherwise permitted by law or federal or institutional regulations.

8.6   Offering Inducements for Research Participation

(a)   Psychologists make reasonable efforts to avoid offering excessive or inappropriate financial or other inducements for research participation when such inducements are likely to coerce participation.

(b)   When offering professional services as an inducement for research participation, psychologists clarify the nature of the services, as well as the risks, obligations, and limitations. (See also Standard 6.05, Barter with Clients/Patients.)

8.7   Deception in Research

(a)   Psychologists do not conduct a study involving deception unless they have determined that the use of deceptive Techniques is justified by the study's significant prospective scientific, educational, or applied value and that effective nondeceptive alternative procedures are not feasible.

(b)   Psychologists do not deceive prospective participants about research that is reasonably expected to cause physical pain or severe emotional distress.

(c)   Psychologists explain any deception that is an integral feature of the design and conduct of an experiment to participants as early as is feasible, preferably at the conclusion of their participation, but no later than at the conclusion of the data collection, and permit participants to withdraw their data. (See also Standard 8.08, Debriefing.)

8.8   Debriefing

(a)   Psychologists provide a prompt opportunity for participants to obtain appropriate information about the nature, results, and conclusions of the research, and they take reasonable steps to correct any misconceptions that participants may have of which the psychologists are aware.

(b)   If scientific or humane values justify delaying or withholding this information, psychologists take reasonable measures to reduce the risk of harm.

(c)   When psychologists become aware that research procedures have harmed a participant, they take reasonable steps to minimize the harm.

8.9   Humane Care and Use of Animals in Research

(a)   Psychologists acquire, care for, use, and dispose of animals in compliance with current federal, state, and local laws and regulations, and with professional standards.

(b)   Psychologists trained in research methods and experienced in the care of laboratory animals supervise all procedures involving animals and are responsible for ensuring appropriate consideration of their comfort, health, and humane treatment.

(c)   Psychologists ensure that all individuals under their supervision who are using animals have received instruction in research methods and in the care, maintenance, and handling of the species being used, to the extent appropriate to their role. (See also Standard 2.05, Delegation of Work to Others.)

(d)   Psychologists make reasonable efforts to minimize the discomfort, infection, illness, and pain of animal subjects.

(e)   Psychologists use a procedure subjecting animals to pain, stress, or privation only when an alternative procedure is unavailable and the goal is justified by its prospective scientific, educational, or applied value.

(f)   Psychologists perform surgical procedures under appropriate anesthesia and follow techniques to avoid infection and minimize pain during and after surgery.

(g)   When it is appropriate that an animal's life be terminated, psychologists proceed rapidly, with an effort to minimize pain and in accordance with accepted procedures.

8.10   Reporting Research Results

(a)   Psychologists do not fabricate data. (See also Standard 5.01a, Avoidance of False or Deceptive Statements.)

(b)   If psychologists discover significant errors in their published data, they take reasonable steps to correct such errors in a correction, retraction, erratum, or other appropriate publication means.

8.11   Plagiarism

Psychologists do not present portions of another's work or data as their own, even if the other work or data source is cited occasionally.

8.12   Publication Credit

(a)   Psychologists take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have substantially contributed. (See also Standard 8.12b, Publication Credit.)

(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 acknowledged appropriately, such as in footnotes or in an introductory statement.

(c) Except under exceptional circumstances, a student is listed as principal author on any multiple- authored article that is substantially based on the student's doctoral dissertation. Faculty advisors discuss publication credit with students as early as feasible and throughout the research and publication process as appropriate. (See also Standard 8.12b, Publication Credit.)

8.13   Duplicate Publication of Data

Psychologists do not publish, as original data, data that have been previously published. This does not preclude republishing data when they are accompanied by proper acknowledgment.

8.14   Sharing Research Data for Verification

(a)   After research results are published, psychologists do not withhold the data on which their conclusions are based from other competent professionals who seek to verify the substantive claims through reanalysis and who intend to use such data only for that purpose, provided that the confidentiality of the participants can be protected and unless legal rights concerning proprietary data preclude their release. This does not preclude psychologists from requiring that such individuals or groups be responsible for costs associated with the provision of such information.

(b)   Psychologists who request data from other psychologists to verify the substantive claims through reanalysis may use shared data only for the declared purpose. Requesting psychologists obtain prior written agreement for all other uses of the data.

8.15   Reviewers
Psychologists who review material submitted for presentation, publication, grant, or research proposal review respect the confidentiality of and the proprietary rights in such information of those who submitted it.

9.   Assessment
9.1   Bases for Assessments
(a)   Psychologists base the opinions contained in their recommendations, reports, and diagnostic or evaluative statements, including forensic testimony, on information and techniques sufficient to substantiate their findings. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)

(b)   Except as noted in 9.01c, psychologists provide opinions of the psychological characteristics of individuals only after they have conducted an examination of the individuals adequate to support their statements or conclusions. When, despite reasonable efforts, such an examination is not practical, psychologists document the efforts they made and the result of those efforts, clarify the probable impact of their limited information on the reliability and validity of their opinions, and appropriately limit the nature and extent of their conclusions or recommendations. (See also Standards 2.01, Boundaries of Competence, and 9.06, Interpreting Assessment Results.)

(c)   When psychologists conduct a record review or provide consultation or supervision and an individual examination is not warranted or necessary for the opinion, psychologists explain this and the sources of information on which they based their conclusions and recommendations.

9.2   Use of Assessments
(a)   Psychologists administer, adapt, score, interpret, or use assessment techniques, interviews, tests, or instruments in a manner and for purposes that are appropriate in light of the research on or evidence of the usefulness and proper application of the techniques.

(b)   Psychologists use assessment instruments whose validity and reliability have been established for use with members of the population tested. When such validity or reliability has not been established, psychologists describe the strengths and limitations of test results and interpretation. Psychologists use assessment methods that are appropriate to an individual's language preference and competence, unless the use of an alternative language is relevant to the assessment issues.

9.3   Informed Consent in Assessments
(a)   Psychologists obtain informed consent for assessments, evaluations, or diagnostic services, as described in Standard 3.10, Informed Consent, except when (1) testing is mandated by law or governmental regulations; (2) informed consent is implied because testing is conducted as a routine educational, institutional, or organizational activity (e.g., when participants voluntarily agree to assessment when applying for a job); or (3) one purpose of the testing is to evaluate decisional capacity. Informed consent includes an explanation of the nature and purpose of the assessment, fees, involvement of third parties, and limits of confidentiality and sufficient opportunity for the client/patient to ask questions and receive answers.

(b)   Psychologists inform persons with questionable capacity to consent or for whom testing is mandated by law or governmental regulations about the nature and purpose of the proposed assessment services, using language that is reasonably understandable to the person being assessed.

(c)   Psychologists using the services of an interpreter obtain informed consent from the client/patient to use that interpreter, ensure that confidentiality of test results and test security are maintained, and include in their recommendations, reports, and diagnostic or evaluative statements, including forensic testimony, discussion of any limitations on the data obtained. (See also Standards 2.05, Delegation of Work to Others; 4.01, Maintaining Confidentiality; 9.01, Bases for Assessments; 9.06, Interpreting Assessment Results; and 9.07, Assessment by Unqualified Persons.)

9.4   Release of Test Data
(a)   The term test data refers to raw and scaled scores, client/patient responses to test questions or stimuli, and psychologists' notes and recordings concerning client/patient statements and behavior during an examination. Those portions of test materials that include client/patient responses are included in the definition of test data. Pursuant to a client/patient release, psychologists provide test data to the client/patient or other persons identified in the release. Psychologists may refrain from releasing test data to protect a client/patient or others from substantial harm or misuse or misrepresentation of the data or the test, recognizing that in many instances release of confidential information under these circumstances is regulated by law. (See also Standard 9.11, Maintaining Test Security.)

(b)   In the absence of a client/patient release, psychologists provide test data only as required by law or court order.

9.5   Test Construction
Psychologists who develop tests and other assessment techniques use appropriate psychometric procedures and current scientific or professional knowledge for test design, standardization, validation, reduction or elimination of bias, and recommendations for use.

9.6   Interpreting Assessment Results
When interpreting assessment results, including automated interpretations, psychologists take into account the purpose of the assessment as well as the various test factors, test-taking abilities, and other characteristics of the person being assessed, such as situational, personal, linguistic, and cultural differences that might affect psychologists' judgments or reduce the accuracy of their interpretations. They indicate any significant limitations of their interpretations. (See also Standards 2.01b and c, Boundaries of Competence, and 3.01, Unfair Discrimination.)

9.7   Assessment by Unqualified Persons
Psychologists do not promote the use of psychological assessment techniques by unqualified persons, except when such use is conducted for training purposes with appropriate supervision. (See also Standard 2.05, Delegation of Work to Others.)

9.8   Obsolete Tests and Outdated Test Results
(a)   Psychologists do not base their assessment or intervention decisions or recommendations on data or test results that are outdated for the current purpose.

(b)   Psychologists do not base such decisions or recommendations on tests and measures that are obsolete and not useful for the current purpose.

9.9   Test Scoring and Interpretation Services
(a)   Psychologists who offer assessment or scoring services to other professionals accurately describe the purpose, norms, validity, reliability, and applications of the procedures and any special qualifications applicable to their use.

(b)   Psychologists select scoring and interpretation services (including automated services) on the basis of evidence of the validity of the program and procedures as well as on other appropriate considerations. (See also Standard 2.01b and c, Boundaries of Competence.)

(c)   Psychologists retain responsibility for the appropriate application, interpretation, and use of assessment instruments, whether they score and interpret such tests themselves or use automated or other services.

9.10   Explaining Assessment Results
Regardless of whether the scoring and interpretation are done by psychologists, by employees or assistants, or by automated or other outside services, psychologists take reasonable steps to ensure that explanations of results are given to the individual or designated representative unless the nature of the relationship precludes provision of an explanation of results (such as in some organizational consulting, preemployment or security screenings, and forensic evaluations), and this fact has been clearly explained to the person being assessed in advance.

9.11. Maintaining Test Security
The term test materials refers to manuals, instruments, protocols, and test questions or stimuli and does not include test data as defined in Standard 9.04, Release of Test Data. Psychologists make reasonable efforts to maintain the integrity and security of test materials and other assessment techniques consistent with law and contractual obligations, and in a manner that permits adherence to this Ethics Code.

10.   Therapy
10.1   Informed Consent to Therapy
(a)   When obtaining informed consent to therapy as required in Standard 3.10, Informed Consent, psychologists inform clients/patients as early as is feasible in the therapeutic relationship about the nature and anticipated course of therapy, fees, involvement of third parties, and limits of confidentiality and provide sufficient opportunity for the client/patient to ask questions and receive answers. (See also Standards 4.02, Discussing the Limits of Confidentiality, and 6.04, Fees and Financial Arrangements.)

(b)   When obtaining informed consent for treatment for which generally recognized techniques and procedures have not been established, psychologists inform their clients/patients of the developing nature of the treatment, the potential risks involved, alternative treatments that may be available, and the voluntary nature of their participation. (See also Standards 2.01e, Boundaries of Competence, and 3.10, Informed Consent.)

(c) When the therapist is a trainee and the legal responsibility for the treatment provided resides with the supervisor, the client/patient, as part of the informed consent procedure, is informed that the therapist is in training and is being supervised and is given the name of the supervisor.

10.2   Therapy Involving Couples or Families
(a)   When psychologists agree to provide services to several persons who have a relationship (such as spouses, significant others, or parents and children), they take reasonable steps to clarify at the outset (1) which of the individuals are clients/patients and (2) the relationship the psychologist will have with each person. This clarification includes the psychologist's role and the probable uses of the services provided or the information obtained. (See also Standard 4.02, Discussing the Limits of Confidentiality.)

(b)   If it becomes apparent that psychologists may be called on to perform potentially conflicting roles (such as family therapist and then witness for one party in divorce proceedings), psychologists take reasonable steps to clarify and modify, or withdraw from, roles appropriately. (See also Standard 3.05c, Multiple Relationships.)

10.3   Group Therapy
When psychologists provide services to several persons in a group setting, they describe at the outset the roles and responsibilities of all parties and the limits of confidentiality.

10.4   Providing Therapy to Those Served by Others
In deciding whether to offer or provide services to those already receiving mental health services elsewhere, psychologists carefully consider the treatment issues and the potential client's/patient's welfare. Psychologists discuss these issues with the client/patient or another legally authorized person on behalf of the client/patient in order to minimize the risk of confusion and conflict, consult with the other service providers when appropriate, and proceed with caution and sensitivity to the therapeutic issues.

10.5   Sexual Intimacies With Current Therapy Clients/Patients
Psychologists do not engage in sexual intimacies with current therapy clients/patients.

10.6   Sexual Intimacies With Relatives or Significant Others of Current Therapy Clients/Patients Psychologists do not engage in sexual intimacies with individuals they know to be close relatives, guardians, or significant others of current clients/patients. Psychologists do not terminate therapy to circumvent this standard.

10.7   Therapy With Former Sexual Partners
Psychologists do not accept as therapy clients/patients persons with whom they have engaged in sexual intimacies.

10.8   Sexual Intimacies With Former Therapy Clients/Patients
(a)   Psychologists do not engage in sexual intimacies with former clients/patients for at least two years after cessation or termination of therapy.

(b)   Psychologists do not engage in sexual intimacies with former clients/patients even after a two-year interval except in the most unusual circumstances. Psychologists who engage in such activity after the two years following cessation or termination of therapy and of having no sexual contact with the former client/patient bear the burden of demonstrating that there has been no exploitation, in light of all relevant factors, including (1) the amount of time that has passed since therapy terminated; (2) the nature, duration, and intensity of the therapy; (3) the circumstances of termination; (4) the client's/patient's personal history; (5) the client's/patient's current mental status; (6) the likelihood of adverse impact on the client/patient; and (7) any statements or actions made by the therapist during the course of therapy suggesting or inviting the possibility of a post-termination sexual or romantic relationship with the client/patient. (See also Standard 3.05, Multiple Relationships.)

10.9   Interruption of Therapy
When entering into employment or contractual relationships, psychologists make reasonable efforts to provide for orderly and appropriate resolution of responsibility for client/patient care in the event that the employment or contractual relationship ends, with paramount consideration given to the welfare of the client/patient. (See also Standard 3.12,

Interruption of Psychological Services.)

10.10 Terminating Therapy
(a)   Psychologists terminate therapy when it becomes reasonably clear that the client/patient no longer needs the service, is not likely to benefit, or is being harmed by continued service.

(b)   Psychologists may terminate therapy when threatened or otherwise endangered by the client/patient or another person with whom the client/patient has a relationship.

(c)   Except where precluded by the actions of clients/patients or third-party payors, prior to termination psychologists provide pre-termination counseling and suggest alternative service providers as appropriate.

AMENDMENTS TO THE 2002 "ETHICAL PRINCIPLES Of PSYCHOLOGISTS AND CODE Of CONDUCT" IN 2010 AND 2016

2010 Amendments
Introduction and Applicability
If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to this Ethics Code and take steps to resolve the conflict in a responsible manner. ~~If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing authority~~ in keeping with basic principles of human rights.

1.02 Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority
If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists <u>clarify the nature of the conflict</u>, make known their commitment to the Ethics Code, and take <u>reasonable</u> steps to resolve the conflict <u>consistent with the General</u> <u>Principles and Ethical Standards of the Ethics Code</u>. ~~If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing legal authority,~~ <u>Under no circumstances may</u> <u>this standard be used to justify or defend violating human rights</u>.

1.03 Conflicts Between Ethics and Organizational Demands
If the demands of an organization with which psychologists are affiliated or for whom they are working <u>are in</u> conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and ~~to the extent feasible, resolve the conflict in a way that permits adherence to the Ethics Code.~~ <u>take reasonable steps to resolve the conflict consistent with the General Principles and Ethical Standards of the Ethics Code. Under no circumstances may this standard be used to justify or defend violating human rights</u>.

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2016 Amendment

3.04 Avoiding Harm
(a) Psychologists take reasonable steps to avoid harming their clients/patients, students, supervisees, research participants, organizational clients, and others with whom they work, and to minimize harm where it is foresee- able and unavoidable.

(b) <u>Psychologists do not participate in, facilitate, as- sist, or otherwise engage in torture,</u>
<u>defined as any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person, or in any other cruel, human, or degrading behavior that violates 3.04a.</u>

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American Psychological Association. (1953). Ethical standards of psychologists. Washington, DC: Author.
American Psychological Association. (1959). Ethical standards of psychologists. American Psychologist, 14, 279-282.
American Psychological Association. (1963). Ethical standards of psychologists. American Psychologist, 18, 56-60.
American Psychological Association. (1968). Ethical standards of psychologists. American Psychologist, 23, 357-361.
American Psychological Association. (1977, March). Ethical standards of psychologists. APA Monitor, 22-23.
American Psychological Association. (1979). Ethical standards of psychologists. Washington, DC: Author.
American Psychological Association. (1981). Ethical principles of psychologists. American Psychologist, 36, 633-638.
American Psychological Association. (1990). Ethical principles of psychologists (Amended June 2, 1989). American Psychologist, 45, 390-395.
American Psychological Association. (1992). Ethical principles of psychologists and code of conduct. American Psychologist, 47, 1597-1611.
American Psychological Association. (2002). Ethical principles of psychologists and code of conduct. American Psychologist, 57, 1060-1073.
American Psychological Association. (2010). 2010 amendments to the 2002 "Ethical Principles of Psychologists and Code of Conduct." American Psychologist, 65, 493.
American Psychological Association. (2016). Revision of ethical standard 3.04 of the "Ethical Principles of Psychologists and Code of Conduct" (2002, as amended 2010). American Psychologist, 71, 900.

Appendix I:
Council of University Directors of Clinical Psychology (CUDCP) Expectations for Internship Eligibility

A copy of these expectations can be found [here](#) on the CUDCP website.

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

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

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

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

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

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

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

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

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

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

UM Student Responsibility Form
(Please complete and return to Pat Perreira by November 1.)

Name: _____

(Please Print)

Track: _____

Advisor: _____

I have received a copy of the University of Miami Graduate Student Handbook. I understand that it is my responsibility to read and understand the requirements and procedures detailed in the handbook. I also understand that I am responsible for following through on the program requirements and procedures.

Signed: _____   Date: _____