UNIVERSITY OF BRITISH COLUMBIA – OKANAGAN

GRADUATE STUDIES IN CLINICAL PSYCHOLOGY

HANDBOOK OF POLICIES & PROCEDURES

Department of Psychology
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https://psych.ok.ubc.ca/graduate/

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Read This First

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

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

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

The Clinical Psychology Program was initially accredited in 2017-18 for four years by the Canadian Psychological Association (CPA). Our reaccreditation self-study was submitted to CPA in December 2021, with the site visit completed in June 2022. We look forward to CPA’s feedback, expected in late 2022 or early 2023.

CPA Accreditation/ Head Office
141 Laurier Avenue West, Suite 702
Ottawa, Ontario
K1P 5J3
Toll free (in Canada): 1-888-472-0657
Fax: 613-237-1674
Email: accreditation@cpa.ca
Web: https://cpa.ca/accreditation
I. OVERVIEW

Philosophy

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

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

Program Objectives

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

Our campus offers an M.A. as a component of the Ph.D. degree in Clinical Psychology.

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

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

**Training Objectives for Goal 1**

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

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

**Objective 1.2:** Students will demonstrate research knowledge and skills.

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

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

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

Training Objectives for Goal 2:

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

Objective 2.2: Students will acquire knowledge and skills related to clinical assessment.
Competency 2.2.1: Students will demonstrate knowledge and skills in clinical interviewing, administration, scoring and interpretation of psychological measures.
Competency 2.2.2: Students will demonstrate knowledge and skills in diagnostic formulation and case conceptualization.
Competency 2.2.3: Students will write comprehensive clinical assessment reports including recommendations for treatment and/or ongoing care.

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

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

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

**Objective 2.5:** Students will demonstrate knowledge of the supervision and consultation literatures and gain exposure and beginning practice in clinical supervision and consultation.

- **Competency 2.5.1:** Students will acquire knowledge of the supervision literature and basic practice in providing clinical supervision.
- **Competency 2.5.2:** Students will acquire knowledge of the consultation literature.

**Professional and Research Interests**

The professional and research interests of the Clinical faculty span a broad range, and their research expertise include both quantitative and qualitative strategies of analyses. Students are encouraged to work as well with the Psychological Science faculty to broaden their scope of research training and become familiar with other areas of Psychology. Faculty research, teaching and/or clinical interests as applicable, are provided on the Psychology department website: [https://psych.ok.ubc.ca/about/contact/](https://psych.ok.ubc.ca/about/contact/)

**Faculty Members and Administrative Staff**

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

Dr. Jan Cioe, R.Psych.
Dr. Jessica Driscoll, R.Psych
Dr. Susan Holtzman, R.Psych.
Dr. Kimberly Kreklewetz, R. Psych
Dr. Maya Libben, R.Psych.
Dr. Lesley Lutes, R.Psych., *Director of Clinical Training; Graduate Program Coordinator for Clinical Psychology*

Dr. Harry Miller, R.Psych., *Associate Director of Clinical Training, Psychology Clinic Director; Associate Graduate Program Coordinator for Clinical Psychology*

Dr. Jamie Piercy, R. Psych
Dr. Zach Walsh, R.Psych
Dr. Michael Woodworth, R.Psych.

**Psychology Department Complementary* Faculty:**

Dr. Paul Davies
Dr. Liane Gabora
Dr. Marvin Krank
Dr. Jessica Lougheed  
Dr. Elena Nicoladis, *Psychology Head and Psychology Graduate Studies Committee Chair*  
Dr. Brian O’Connor  
Dr. Carolyn Szostak  
Dr. Leanne Ten Brinke  
Dr. Derrick Wirtz  

*Our complementary faculty may teach required courses within the Clinical Psychology Program. Complementary faculty may also supervise clinical student research in consultation with a Clinical faculty mentor.*

**Clinical Psychology Adjunct Faculty:**

Dr. Pamela Black, R, Psych  
Dr. Erwin Concepcion, L, Psych (USA)  
Dr. Taryn Fay-Mclymont, R, Psych  
Dr. Damian Leitner  
Dr. Meredith Reynolds, R.Psych  
Dr. Claire Sira, R.Psych  
Mr. Steve Sigmond, R.Psych  
Dr. Alison Spadafora, R.Psych  
Dr. Christopher Wilson, R.Psych  

**Administrative Support Staff**

Ms. Marlis Wecels, *Administrative Manager, Psychology Clinic & Psychology Graduate Program Liaison*  
Ms. Amanda Rivet, *Office Assistant, Psychology Clinic*  
Ms. Marla MacDonald, *Senior Assistant, Psychology Department*  
Ms. Kim Snyder, *Assistant, Psychology Department*

**II. ADMINISTRATIVE STRUCTURE**

**Governance of the Clinical Programs**

The Clinical Psychology Program’s organizational structure consists of a Director of Clinical Training and a Clinical Psychology Training Committee that together establish and implement program-specific policies. In order to meet the educational standards for professional psychology, the Clinical Psychology faculty establish and control degree requirements for clinical program students that exceed those established by the College
of Graduate Studies (CoGS) and by the Psychology Graduate Studies Committee (PGSC).

Changes in program requirements must first be approved by the Clinical Psychology Training Committee, then by the PGSC, and then by the Department of Psychology. The Clinical Psychology Training Committee is responsible for reviewing the applications of prospective students, and the decision to recommend admission to a new student must be approved by the PGSC. Annual progress reports for clinical students are first reviewed by the Clinical Training Committee prior to submission to the College of Graduate Studies.

**Director of Clinical Training (DCT)**

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

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

Additional duties include:

e. conducting regular meetings in which Clinical core faculty and student representatives meet to discuss and decide on matters relevant to the Clinical graduate program, and signing off on relevant forms and documents (e.g., APPIC forms, clinical placement goals forms);

f. liaising with practicum and internship settings, advising students with regards to M.A. and Ph.D. practicum and Ph.D. internship placements, reviewing and approving students’ requests for placements and their placement agreements, monitoring students’ progress, and addressing difficulties that might arise during students’ clinical placements; and

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

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

III. CLINICAL M.A. PROGRAM

M.A. Application and Admission

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

Prospective applicants are expected to contact 1-3 potential Psychology faculty research supervisors and discuss a possible program of study prior to formally applying to the program. The PGSC considers the suitability of supervisor-student matches when deciding whether to recommend admission for an applicant.

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

M.A. applicants must hold the academic equivalent of a four-year baccalaureate degree from UBC with:

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

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

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

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

Please also see our Psychology graduate admissions FAQ here:
https://psych.ok.ubc.ca/graduate/student-resources-admissions-faq/

To receive first-round consideration, all application materials must be submitted by December 1. Applications completed after December 1 may be considered for second-round review at the admissions committee’s discretion.

Short-listed applicants will be interviewed virtually (i.e. via Zoom) by primary supervisors and other Clinical area faculty to assess suitability for the program.

Following interviews, candidates who are selected by the Clinical program and PGSC will be recommended to the College of Graduate Studies for admission. The College of Graduate Studies verifies candidate eligibility for admission and extends formal offers of admission to successful candidates.

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

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

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

Criminal Record Check Requirement

Under the Criminal Records Review Act (CRRA), all students participating in practica for which they receive academic credit and that involve working with children and/or vulnerable adults directly, or having or potentially having unsupervised access to children and/or vulnerable adults, must undergo a Criminal Record Check in British Columbia.
The Clinical Psychology Program at UBC Okanagan is subject to the requirements of the Criminal Records Review Act, such that all students who are enrolled in programs that include a practicum component involving work with children or vulnerable adults will have to successfully clear a criminal record check for relevant offences before they will be permitted to register in the Clinical Psychology Program. If a student is found to present a risk of physical or sexual abuse to children, or physical, sexual, or financial abuse to vulnerable adults, as a result of the Check, the student will not be permitted to register and the admission offer will be withdrawn. Applicants should consider this requirement carefully before applying to this program.

Upon the deadline for admission acceptance (April 15), as stated in the admission offer letter from the College of Graduate Studies, the student must contact the Psychology Graduate Program Liaison for specific instructions as to how to arrange completion of the Criminal Record Check form as required for submission to the Ministry of Justice of British Columbia. The individual who requires the Check must also pay the required fee for their own Check, as directed by the Ministry.

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

**M.A. Program Registration & Duration**

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

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

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

Students who, for health or personal reasons, including childbirth and having primary responsibility for the care of a child, where it is necessary to interrupt their studies, must apply for a leave in writing to the Dean of the College of Graduate Studies. The period of
leave is not counted toward time to completion.
https://gradstudies.ok.ubc.ca/resources/forms/leave-of-absence-form/

M.A. Thesis Committee

Incoming students are encouraged to form an M.A. Thesis Committee as soon as possible after entering the program. By the end of the first term after registration in the program, students should form the membership of their M.A. Thesis Committee and their program of studies, and document same on the Psychology Supervisory Committee Program Plan form (see Forms here: https://psych.ok.ubc.ca/graduate/graduate-resources/ ) and submitting it to the DCT.

The M.A. Thesis Committee consists of at least three UBCO faculty members or UBCO Psychology adjuncts. One member is the supervisor, and there must be at least one, non-adjunct, full-time UBCO faculty member on the committee. In determining the number of faculty members on M.A. and Ph.D. Thesis Committees when a student has co-supervisors, the co-supervisors shall count as one committee member. At least two of the committee members must be in the Psychology Department. With the approval of the supervisor and graduate program coordinator and Head of the Department, the student can request changes to the Thesis Committee after it has been formed subject to the approval of the Dean of the College of Graduate Studies. All committee members must be approved by the College of Graduate Studies. Please refer to UBC Senate Policy O-9 here: https://senate.ubc.ca/sites/senate.ubc.ca/files/downloads/O-9-Supervision-COGS-Membership_20181122_Senate-approved_0.pdf

M.A. Program Requirements

The minimum requirements for the Clinical Psychology M.A.* are 42 credits as follows:

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

Incoming graduate students who have not previously completed the equivalent of PSYO 507 (Advanced Statistics and Research Methods) and who are deemed to have insufficient preparation to take PSYO 507 may be required to take undergraduate statistics courses instead of PSYO 507 in their first year and to complete PSYO 507 in their second year, as determined by the Clinical program.
Some students may also be required to complete additional courses or other research assignments because of deficiencies in their preparatory background. These requirements will be determined by the Clinical Training Committee before admission into the program or during the first term of registration in the program.

See Appendix B for the Clinical Psychology Standard Course Schedule & Key Milestones

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

**M.A. Practicum**

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

All practicums must be approved in advance by the DCT or Associate DCT. Students must maintain registration in their applicable Master’s level practicum courses and sections (PSYO 530 series) during completion of their practica.

**M.A. Thesis**

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

Following the thesis proposal meeting, the student as well as the committee, must complete and sign the Psychology Thesis & Dissertation Approval Form (see under Forms here: https://psych.ok.ubc.ca/graduate/graduate-resources/) and forward to the DCT for approval.

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

The student is expected to meet with his/her Thesis committee members well in advance of completing the final thesis draft, and prior to the supervisor initiating the oral examination process with the College of Graduate Studies.

**M.A. Thesis Examination**

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

As required by the College of Graduate Studies, the oral examination defence scheduling must be initiated by the research supervisor with CoGS. It must normally be held no later than the last week in July of the second year of the M.A. Program. Per CoGS, notice of a defence must normally be posted at least 10 days in advance. Other department graduate students, faculty members, and members of the public may be approved and invited by the applicable research supervisor(s) to attend M.A. thesis defences, circumstances permitting (i.e. the nature of remote/Zoom defences may not allow for broader attendance, per the College of Graduate Studies).

Some helpful links are provided below:

*Thesis Information*

*Thesis Preparation and Formatting*

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

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

Please refer to the Clinical Psychology Standard Course Schedule & Key Milestones in Appendix B.
Application for Graduation

Following an M.A. Thesis examination, the applicable thesis committee members and the student must each submit their respective required documentation to the College of Graduate Studies. CoGS will advise a student directly when his/her program is complete and advise the student to apply for graduation. The student’s application for graduation is to be submitted through the UBC Student Service Centre well in advance of the projected date of graduation. Please note that students must apply in order to be eligible to graduate (i.e., receive a degree) regardless of whether the students plans to attend convocation. Please refer to the College of Graduate Studies Graduate Policy and Procedure Manual https://gradstudies.ok.ubc.ca/about-cogs/policies-procedures/ for further details.

Evaluation for Admission into the Ph.D. Program

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

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

M.A. students with the support of the Director of Clinical Training may request a direct transfer into the Ph.D. program, which must be approved by the Dean of Graduate Studies. In these cases, a second-year paper* is submitted instead of an M.A. thesis, and an M.A. degree is not awarded. Direct transfers from the M.A. into the Ph.D. degree program are permitted under regulations set by the College of Graduate Studies. Direct transfers can occur after 12, but not more than 18 months in the M.A. program. Direct Transfer students should note that, once transferred in to PhD, their timeline to Candidacy will be backdated to when they began in the M.A. program, per the College of Graduate Studies, and the 36 month window expected by CoGS for the student to achieve candidacy will automatically apply.

Any students interested in applying for Direct Transfer, should discuss this at the outset of their M.A. program, with both their research supervisor and the DCT.
Second-Year Paper*

Per above, a second-year paper is completed by students who have been approved to transfer directly into the Ph.D. program without an M.A. degree. This paper should represent an original empirical contribution to the student’s field of study, which is intended to be publishable. In addition to the paper, students will complete a public presentation of their research at a Department-approved forum (e.g., a research conference or a presentation open to the University community). Students will typically complete this paper no later than at the end of their second year.

*THE SECOND-YEAR PAPER REQUIREMENT IS CURRENTLY UNDER REVIEW

IV. CLINICAL PH.D. PROGRAM

Ph.D. Application and Admission Requirements

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

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

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

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

When reviewing applications to the M.A. and Ph.D. programs, the Clinical program may consider requests from applicants to receive UBCO program credits or exemptions for graduate courses taken at other universities. Such requests would be evaluated only after admission and are subject to DCT and CoGS approval.

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

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

To receive first-round consideration, all application materials must be submitted by
December 1. Applications completed after December 1 may be considered for second
round review at the admissions committee's discretion.

Short-listed applicants will be interviewed virtually (i.e. via Zoom) by primary supervisors
and other Clinical area faculty to assess suitability for the program.

Following interviews, candidates who are selected by the Clinical program and PGSC will
be recommended to the College of Graduate Studies for admission. The College of
Graduate Studies verifies candidate eligibility for admission and extends formal offers of
admission to successful candidates.

Admission to the Ph.D. program will be in one of the following categories:
1. Unconditional admission. Granted when the applicant meets all admission
requirements including the agreement of a Department of Psychology faculty
member to supervise the student, all final official documentation has been received,
and approval has been granted by the PGSC and the College of Graduate Studies.

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

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

Ph.D. Program Registration & Duration

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

The expectation is for the Clinical Ph.D. program to be completed in five academic years.
This includes the completion of the required year-long, pre-doctoral internship. If the
degree is not awarded within a period of six years from initial registration, the student's
eligibility for the degree will be terminated and the student will be withdrawn from the program. Under exceptional circumstances, extensions may be granted by the Dean of the College of Graduate Studies.

Students who, for health or personal reasons, including childbirth and having primary responsibility for the care of a child, where it is necessary to interrupt their studies, must apply for a leave in writing to the Dean of the College of Graduate Studies. The period of leave is not counted toward time to completion. 
https://gradstudies.ok.ubc.ca/resources/forms/leave-of-absence-form/

Timeline and Schedule for Completion of Ph.D. Degree

Please refer to the Clinical Psychology Standard Course Schedule & Key Milestones in Appendix B.

Ph.D. Thesis Committee

Incoming students are encouraged to form a Ph.D. Thesis (Dissertation) Committee usually during the first year of their Ph.D. The Ph.D. Thesis Committee guides students through their dissertations and helps devise and approve the students' program of study throughout their Ph.D. program. By the end of the first term after registration in the program, the student must report the membership of his or her Ph.D. Thesis Committee to the DCT using a Psychology Supervisory Committee Program Plan form (see under Forms here: https://psych.ok.ubc.ca/graduate/graduate-resources/).

The Ph.D. Thesis Committee consists of at least three UBCO faculty members or UBCO Psychology adjuncts. One member is the supervisor, and there must be at least one, non-adjunct, full-time UBCO faculty member on the committee. In determining the number of faculty members on M.A. and Ph.D. Thesis Committees when a student has co-supervisors, the co-supervisors shall count as one committee member. At least two of the committee members must be in the Psychology Department. With the approval of the supervisor and graduate program coordinator, the student can make changes to the Thesis Committee after it has been formed. All committee members must be approved by the College of Graduate Studies. Please refer to UBC Senate Policy O-9 here: https://senate.ubc.ca/sites/senate.ubc.ca/files/downloads/O-9-Supervision-COGS-Membership_20181122_Senate-approved_0.pdf

Ph.D. Program Requirements

Students in the Clinical Psychology Ph.D. Program will be required* to complete at least 42 credits of approved graduate courses, as follows:

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

- 6 credits of graduate-level statistics and methodology;
- 3 credits from each of the following cognate areas in Psychology:
  - Biological;
o Cognitive-Affective; and
  o Social

- 6 credits from each of the following areas:
  o Individual Differences;
  o Professional Practice: Assessment; and
  o Professional Practice: Intervention
- 3 credits in the historical and scientific foundations of general psychology
- 3 credits in each of the following areas:
  o Ethics and Professional Standards;
  o Program Evaluation
- 1 credit in
  o Clinical Supervision, and

- successful completion of the Clinical Comprehensive Exam (see page 22);
- 300 direct client contact hours and 150 hours of supervision (inclusive of M.A. practica hours, where applicable);
- successful defence of the doctoral dissertation (PSYO 699);
- development of an acceptable level of clinical skill; and
- successful completion of a one-year pre-doctoral internship (PSYO 730) in a CPA or APA-accredited or equivalent approved site.

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

See Appendix B for the Clinical Psychology Standard Course Schedule & Key Milestones.

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

**Ph.D. Practicum**

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

All practica must be approved in advance by the DCT or Associate DCT. Students must maintain registration in the applicable doctoral-level practicum courses and sections (PSYO 630) during completion of their practica.
Ph.D. Internship

Clinical Ph.D. candidates are required to complete a twelve-month (full-time equivalent) pre-doctoral internship. Internship settings must be approved by the program, and supervision is provided by registered doctoral-level psychologists who are approved by the program. Students are strongly encouraged to apply for CPA-accredited internships and to use the APPIC matching service. Before applying to internship sites, students must have already successfully completed their coursework and comprehensive examinations, and submitted a draft dissertation manuscript to the research supervisor.

Doctoral students must register in the applicable course and section (PSYO 730) for each applicable semester during their completion of the approved internship.

Comprehensive Examination Requirements - Revised 2022

Continuing students (2021 cohort and earlier), have the option to 1) complete each of the two Comprehensive requirements; these being i) the General Comprehensive Examination requirement; AND ii) the previous iteration of the Clinical Comprehensive Examination, OR same continuing students may 2) complete the revised two-part Comprehensive Examination – Clinical Psychology (approved by Senate in 2022; described below) comprised of:

Part 1 – Scoping Review Paper
Part 2 – Case Conceptualization, including:
   i. Written paper
   ii. Oral examination

Any continuing students (2021 cohort and earlier) who wish to complete the earlier two (2) Comprehensive exams (General and Clinical) as noted above, should speak to the DCT/Associate DCT (note: the former two requirements are not repeated here.)

The revised Comprehensive Examination – Clinical Psychology as described below will be required of all Clinical students who entered the September 2022 intake and later.

Format:

As per the guidelines from the College of Graduate Studies, the comprehensive examination is to be taken following completion of the Master’s thesis and all required coursework. The comprehensive examination is separate and distinct from the evaluation of the thesis prospectus. The purpose of the Comprehensive Examination is to provide an opportunity for the student to demonstrate scientific and clinical competence in the chosen field of clinical psychology. The Comprehensive Examination is administered to doctoral students in the Clinical Psychology Program to assess foundational and functional competencies necessary for success as a registered psychologist.
Components:

Part 1 – Scoping Review
The intent of the scoping review paper is to provide the student with an opportunity to synthesize a body of evidence and evaluate the literature on a chosen topic of interest. Specifically, the student will address a relevant question in clinical psychology, identify the breadth and extent of research on a topic, provide a summation of the findings, identify gaps in the research literature, and offer recommendations for future research. The student is expected to demonstrate advanced capacity to integrate concepts, theories, or topics from a minimum of two of the core domains in foundational clinical psychology (cognitive, biological, social, affective, and developmental) as it pertains to an area of professional competency (diversity, assessment and diagnosis, ethics and decision making, or intervention). The paper is separate from the dissertation and is expected to meet the requirements for publication in a scientific journal. Publication of the paper is not a requirement of the Comprehensive Examination.

Page limit: the document is expected to be no longer than 15 pages. The page limit does not include appendices or references.

Information on how to conduct a scoping review can be found by reviewing:


Part 2 – Case Conceptualization

a. Case Conceptualization Paper
The intent of the written case conceptualization is to evaluate the ability of the student to integrate discipline specific knowledge (cognitive, biological, social, affective, and developmental) with clinical/functional skills (diversity, assessment and diagnosis, ethics and decision making, or intervention). The case will reflect a clinical case that focuses on assessment and treatment of a prevalent form of psychopathology that is not related to student’s primary area of research. Cases used in previous coursework are not to be used for the Comprehensive Examination.
Foundational competency areas to be assessed include the following:
- Knowledge, understanding, and application of evidence-based practice
- Individual and cultural diversity
- Ethical, legal, and professional standards
- Knowledge of related disciplines and ability to interact with professionals across disciplines
- Clear and articulate expression in both written and oral formats

Functional competencies to be assessed include the following:
- Assessment and case conceptualization
- Intervention
- Consultation

Case Selection

The selection of the clinical case for the comprehensive examination is by the student and is expected to be a case seen by the student in the UBCO Psychology Clinic. The case should be based on ample case material that allows for full examination of the clinical and empirical issues. Case outcome (i.e., clinical improvement) should not be used as the basis of case selection. A comprehensive clinical psychology case presentation will include the following clinical and research elements:

Clinical Elements:
- Relevant patient social history;
- Assessment battery used in justification for measures chosen;
- Diagnoses supported by the DSM-5 TR criteria in case conceptualization;
- Treatment plan utilizing empirically supported intervention, including referrals to appropriate providers;
- Brief summary of course of treatment;
- Socio-cultural factors including ethnicity, gender, age, and other relevant factors that the student engaged in self-reflection on, or could have, that may have impacted treatment approach/progress/outcome;
- Identification and resolution of ethical dilemmas according to CPA Code of Ethics, the College of Psychologists of British Columbia (CPBC) Code of Ethics, and any other applicable laws and regulations; and
- Review of therapist’s learning and self-reflection.

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

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

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

b. Oral Examination

The Oral Examination will be conducted by each student’s Comprehensive Examination Committee during the first week of the University examination period. The Oral Examination will consist of an expanded exploration of the clinical case presented in the Case Conceptualization paper. During the Oral Examination, students should be prepared to:

• Explain and expand upon any element of the case conceptualization paper;
• Demonstrate the ability to reflect on professional practice and professional development; and
• Be able to answer and conceptualize issues about the case in the context of potentially different variables, factors, or data.

The Oral Examination will adhere to the following format:

• The duration of the oral examination will be 60 to 90 minutes (60 minutes minimum);
• The duration of the student’s introduction will be no longer than 1 minute;
• The duration of the examiner’s questions will be 60 or more minutes;
• There will be at least 3 rounds examiner’s questions;
• The examination will be held in camera (private, not open to the public);
• Examiners from outside the students graduate program cannot be included;
• Examiners who are not members of the Clinical Training Committee (i.e., Core faculty) can be included; and
• The student’s research supervisor may have a role in the examination if wanted by the student and by the faculty.

Schedule

Regular Examination Schedule:
Graduate students are expected to take the Comprehensive Examination during the second year of the PhD program for students who enter the Clinical Psychology Program at the MA level, or the third year of the PhD program for those students who entered the Clinical Psychology Program at the PhD level.
Students will submit the Scoping Review Paper no later than February 1 for a Comprehensive Examination scheduled in Term 2.

Students will submit the Written Case Conceptualization by close of business 2 weeks before the first day of university examinations;

The Oral Examination will be scheduled during the first week of examinations (unless there is a known exam conflict and the date can be moved somewhere else within the examination period) of the same term.

**Early (Accelerated) Examination Schedule:**

Upon consultation with their Research Supervisor, doctoral students may choose to take the Comprehensive Examination on an accelerated or early schedule. Should students choose this option, the Comprehensive Examination must be taken in Term 1 of the Winter Session of the second year of the PhD program for students who enter the Clinical Psychology Program at the MA level, or Term 1 of the third year of the PhD program for those students who entered the Clinical Psychology Program at the PhD level (see Table 1 below).

- Students will submit the Scoping Review Paper no later than October 1 for a Comprehensive Examination scheduled in Term 1.
- Students will submit the Written Case Conceptualization by close of business 2 weeks before the first day of university examinations;
- The Oral Examination will be scheduled during the first week of examinations (unless there is a known exam conflict and the date can be moved somewhere else within the examination period) of the same term.

**Case Selection Timing and Procedures:**

Students planning on taking the Comprehensive Examination according to the regular schedule will identify an appropriate case in the first week of Term 2 to have a sufficient amount of time to prepare. Similarly, students who opted to take the Comprehensive Examination according to the accelerated schedule will identify an appropriate case in Term 1 to have a sufficient amount of time to prepare. Should students encounter difficulty identifying an appropriate case, they are encouraged to consult with their Research Supervisor and/or a past Clinical Supervisor. Case selection should be submitted to the Associate Director of Clinical Training using the Comprehensive Examination Case Form no later than the second week of the term they will be taking the examination (see Appendix H for the Case Selection Form).

Any students who fail to select cases by the second week of the term that they will be taking the examination will not be allowed to take the Comprehensive Examination that term. Further, the students will be considered to have failed their first attempt at the Comprehensive Examination and must successfully pass the written and oral components of the examination during their second attempt in accordance with the retake procedures and schedule.
All Comprehensive Examination activities will occur at the end of the term as stated above and as reflected in Table 1. No component of the Comprehensive Examination may be taken during the Summer Session, except in extenuating circumstances with the approval of the DCT or Associate DCT.

Retake Schedule

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

Table 1.

<table>
<thead>
<tr>
<th>Term</th>
<th>Scoping Review Paper</th>
<th>Written Case Conceptualization Standard Due Date</th>
<th>Oral Exam Standard Date</th>
<th>Retake Term</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regular Schedule</td>
<td>Term 2 of Year 2 of Ph.D. (M.A. entry track) OR Term 2 of Year 3 of Ph.D. (Ph.D. entry track)</td>
<td>February 1 Term 2</td>
<td>2 weeks before first day of exams</td>
<td>First week of exams</td>
</tr>
<tr>
<td>Accelerated Option</td>
<td>Term 1 of Year 2 of Ph.D. (M.A. entry track) OR Term 1 of Year 3 of Ph.D. (Ph.D. entry track)</td>
<td>October 1</td>
<td>2 weeks before first day of exams</td>
<td>First week of exams</td>
</tr>
</tbody>
</table>
Adjudication

Scoping Review Paper

The Scoping Review Paper will be scored as PASS or PASS with minor/major revisions based on demonstration of the key competencies outlined in the Scoping Review Paper competency checklist. A passing score from two out of three committee members constitutes successful completion of the Scoping Review Paper. The Committee Chair will inform the student of the outcome of the Scoping Review Paper within one week following submission. If the Committee’s decision is a PASS, the student moves on to Part 2 of the Comprehensive Examination. If the Committee’s decision is a PASS with minor/major revisions, students must complete the revisions within two weeks in accordance with guidelines as set out below in order to be eligible to continue with the expected timeline for completion of Part 2. If students are unable to meet the requirement of a PASS for the Scoping Review within two weeks following adjudication, this will constitute a FAIL and result in the student rescheduling all components of the Comprehensive Examination. In other words, the inability to complete required revisions within two weeks post adjudication precludes advancement to Part 2 of the Comprehensive Examination. A new Comprehensive Examination schedule will need to be submitted. If required, the Committee Chair will outline the conditions of the Scoping Review Paper revisions to the student. (See below for the scoring rubric for the Scoping Review Paper).

Scoping Review Paper Revisions

If the student is required to conduct minor or major revisions, the student will follow the feedback given by their Comprehensive Committee for making those revisions. The revisions are due no later than 2 weeks post committee decision. Documents requiring revisions should have changes visible using Track Changes and must also have a letter accompanying the revised Comprehensive Examination document that outlines changes that were made to each specific point of feedback provided by the Comprehensive Committee. Page limits for the actual Comprehensive Examination remain the same as given above; the revision letter has a page limit of 2 double-spaced pages. It is generally expected that the Committee will be able to grade the revised documents within one week, although this may vary dependent upon when the revisions are submitted and the degree of revisions that were conducted. As is true with journal manuscripts, it is possible that reviewers’ comments may differ from, and in some cases contradict, each other. Graders are aware of this as they will have access to the other grader’s comments. If a student is confused by any of the comments, they should feel free to consult Committee members for clarification.

Written Case Conceptualization

The Written Case Conceptualization will be scored as PASS or FAIL based on demonstration of the key competencies outlined in the Written Case Conceptualization competency checklist. A passing score from two out of three committee members
constitutes successful completion of the Written Case Conceptualization. If students earn a failing score, they must retake the Written Case Conceptualization portion of the Examination according to the procedures outlined below (see below for the scoring rubric for the Written Case Conceptualization). A failure of the Written Case Conceptualization precludes advancement to the Oral Examination. The Committee Chair will inform the student of the outcome of the Written Case Conceptualization prior to the Oral Examination. The Committee Chair will outline the conditions of the Written Case Conceptualization retake to the student.

**Written Case Conceptualization Retake Procedures**

In the event that a student receives a failing score on the Written Case Conceptualization, the student must (a) identify one new case, and (b) re-write and re-submit the new Written Case Conceptualization at the end of the next term according to the standard dates (see Table 1). The Comprehensive Examination Committee membership will remain unchanged unless a Committee member needs/wants to recuse themselves from the retake. The Comprehensive Examination Committee will evaluate the student’s performance on the new case only. Upon re-taking the exam, the student must achieve a PASS on the Written Case Conceptualization.

**Oral Examination**

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

**Oral Examination Retake Procedures**

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

- Intake information;
- Measures administered/scores and results;
- Case conceptualization;
- Diagnostic impressions;
- Treatment summary; and
- Reflections.
*This case summary document is essentially the same format of the original written case, without the literature review. For re-take purposes, this document is not for evaluation; it is solely for the examiners to discuss in preparation for the oral examination retake.*

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

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

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

**Comprehensive Examination Committee Membership**

The Comprehensive Examination Committee for each student will consist of 3 members. Two members will be core clinical faculty (members of the Clinical Training Committee) who are registered psychologists. The third committee member may be a non-clinician faculty member; however, this should typically be reserved for the non-clinical faculty Research Supervisor of the student if they wish for them to be on their committee. The Clinical Supervisor of the case being submitted for the Comprehensive Exam is not permitted to be included in the student’s list of desired Comprehensive Examination Committee members.

Students can have input into the selection of one member of their Comprehensive Examination Committee by submitting the names of three possible members in rank order of preference. Students may include their Research Supervisor and past Clinical Supervisors in their list of three Committee member candidates. Faculty members will be approached in the order of preference listed by the student and will be confirmed to the Committee based on their availability and willingness to serve. The remaining two Committee members will be selected by the Associate DCT in consultation with the Clinical Training Committee. The Associate DCT will notify students of their assigned Comprehensive Examination Committee when all Committee members are confirmed. The Associate DCT, in consultation with the Committee, will select the Chair of the Committee.
Scoring Rubric for the Scoping Review Paper

- Focuses on important, relevant, and operationally defined topics
- There is a clear case for why a literature review of the topics is important to advance the science and/or practice in the field.
- A description of the scoping review process used during the literature review is evident. (There are clear guidelines for conducting a scoping review in the three sources listed earlier in this section; see page 23 of this Handbook.)
- An inclusive review of previous research related to the relevant topic. This includes identification of problems, contradictions, controversies, strengths, and next steps with respect to the topic.
- Critical analysis of interpretations of the findings with consideration of how interpretations change as new findings are reported.
- Discussion of the methodological diversity of studies reported, and populations studied in the literature review and the implications of this diversity for new knowledge or future research.
- Provision of innovative questions and commentary on the topic not discussed before in the literature. Considers ideas that generate new hypotheses and new research or that discuss the clinical implications of the review.

Admission to Candidacy

As required by CoGS, the typical doctoral student will be expected to achieve candidacy (i.e. to have completed all required coursework the two comprehensives are complete, and have a committee-approved dissertation proposal) upon completion of a three-year residency period (36 months in the PhD program) not including CoGS-approved leaves. A student who is not admitted to candidacy within four years from the date of initial registration will be required to withdraw from the program. It is possible to apply for an extension in unusual circumstances.

Please refer to candidacy information and required forms in the Graduate Policies and Procedure Manual here: https://gradstudies.ok.ubc.ca/about-cogs/policies-procedures/ and here: https://gradstudies.ok.ubc.ca/resources/forms/1446/

Direct Transfer students should note that, once transferred in to PhD, their timeline to Candidacy will be backdated to when they began in the M.A. program, per the College of Graduate Studies, and the 36 month window expected by CoGS for the student to achieve candidacy will automatically apply.

Ph.D. Dissertation Proposal

The Research Supervisor must convene a meeting of the Ph.D. Thesis Committee with the student at least once every year to discuss the dissertation and to ensure that satisfactory progress is being made. A satisfactory dissertation proposal is normally
submitted to the Thesis Committee before the start of the third Ph.D. year and must normally be presented orally by the candidate to the Department of Psychology. Dissertation proposals must be stand-alone, written documents that include an abstract, a literature review, one or more well-justified research questions, a method section, a results section, a discussion section, and a references section. Data collection must not begin before proposals have been approved by all members of the Thesis Committee and by the Department Head. Proposal defences should be held between 10 am and 4 pm, all Thesis Committee members must be present, and an event announcement should be circulated to Psychology faculty and graduate students at least 10 days in advance. Department faculty and graduate students may be allowed to attend, circumstances permitting (i.e., remote proposal defences may be restricted to committee members only). After the oral presentation, the student’s Thesis Committee will discuss the acceptability of the proposal. The Thesis Committee will then make one of the following recommendations:

1. formally approve the proposal. Such approval implies that the Thesis Committee considers the procedures outlined in the proposal as appropriate for the adequate investigation of the stated problem;
2. approve the proposal contingent on the outcome of preliminary investigation(s);
3. withhold approval of the proposal until certain inadequacies (for example, changes in experimental design) are overcome; or
4. not give its approval because the problem is an inappropriate one.

Following the PhD Dissertation proposal, the student as well as the committee, must complete and sign the Psychology Thesis & Dissertation Approval Form (see under Forms here: https://psych.ok.ubc.ca/graduate/graduate-resources/) and forward to the DCT for approval. The student must also provide the final dissertation proposal (electronic copy) to Marlis Wecels, for the student’s department file.

The student is expected to meet with his/her dissertation committee members prior to completing the final dissertation draft, and prior to the supervisor initiating the oral examination process with the College of Graduate Studies.

**Ph.D. Dissertation Examination**

The student’s primary research supervisor is responsible for initiating the defence scheduling process with the College of Graduate Studies. CoGS’ website outlines the procedures for preparing dissertations, preconditions for a dissertation defence, the scheduling of dissertation examinations, examination committee composition, external examiners, examination procedures, the responsibilities of examiners, the procedures that examiners must follow when adjudicating a dissertation, and submission of the final dissertation.

Notice of a defence must normally be posted at least 10 days in advance. Psychology graduate students, faculty members, and members of the general public are normally
allowed to attend each dissertation defence, circumstances permitting (i.e. the nature of remote defences may not allow for non-committee member/public attendees)

Some helpful links are provided below:

*Thesis Information*

*Thesis Preparation and Formatting*

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

**V. CLINICAL PLACEMENTS**

**Criminal Records Check Clearance Status and Reporting of Changes**

As stated in the Admissions section(s) of this Handbook, all conditionally-admitted clinical students are required to clear a Criminal Record Check for working with children and/or vulnerable adults prior to being permitted to register in the program/embarking upon practica. Further, for program continuance, all clinical students must maintain their clearance throughout the program, complete updated criminal checks as required by law (i.e., every 5 years, at the time of printing of this Handbook).

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

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

Please refer to Appendix A for Criminal Records Check information

**Liability Insurance Coverage**

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

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

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

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

Paid practica are not permitted by the program.

All clinical placements must be approved in advance by the DCT and/or Associate DCT.

Clinical Supervisors

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

M.A. Clinical Practicum

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

**Ph.D. Clinical Practicum**

Students in the Ph.D. program are required to complete clinical practica in which they accrue a minimum of 200 direct client contact hours and 85 hours of supervision. This may be undertaken any time during the Ph.D. training, but it must be completed prior to applying for internship. All practicum placements must be approved by the DCT/Associate DCT. A small portion of the clinical practicum (not more than 10%) can entail involvement in research activities that take place at the training site.

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

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

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

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

During the course of the practicum, students will:

- keep a log of their supervision hours with the primary and secondary supervisors by using Time2Track* (https://time2track.com). Time2Track documents the types and duration of the clinical activities in order to collect essential data for APPIC application and/or professional registration with a regulatory body. Moreover, the DCT requires the information to complete APPIC recommendations for students. For the purpose of the program, Time2Track adds up the total number of hours undertaken in various activities during the entire practicum: assessment, intervention/therapy, clinical documentation, supervision, professional development (conferences, readings required for the practicum, etc.), and other
types of activities specific to the practicum experience. It also allows students to print off their hours to send to the DCT for approval at the end of the practicum. All clinical students are expected to utilize the Time2Track software and to check with the UBC Okanagan Clinical Psychology program regarding setting up an account and associated annual subscription costs.

- complete an informal mid-point self-evaluation using the Student Report on Clinical Placement and Performance Appraisal (see Appendix F), in Time2Track or in paper form, if necessary; as a guide depending upon the nature and length of the rotation; students will confirm this mid-point requirement with the DCT/Associate DCT at the beginning of each rotation.

*the Clinical program has an institutional account with Time2Track that is renewed annually through the program and is set-up a cost-share between the Psychology Clinic and the students.

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

- complete a self-evaluation using the Student Report on Clinical Placement and Performance Appraisal form (see Appendix F), in Time2Track or in paper form, if necessary;
- review the self-evaluation with the Clinical Supervisor and have the primary Clinical Supervisor provide their own evaluation using the Student Report on Clinical Placement and Performance Appraisal (Appendix F); both the Supervisor and student sign the document. The form is then forwarded to the DCT who reviews and signs it, and places it in the student’s file. If the student has more than one primary supervisor, it is requested that separate evaluations be undertaken with each supervisor. If secondary supervisors are involved in the student’s training and it is the opinion of the primary supervisor that an evaluation by the secondary supervisor would be useful and informative, the program will also appreciate receiving evaluations from the secondary supervisor;
- complete the Student’s Evaluation of Practicum Supervisor form (see Appendix G); and
- maintain a copy of all forms before submitting them to the DCT and/or Associate DCT

Pre-doctoral Internship

Students in the Ph.D. program are required to complete a one-year (12 month), full-time equivalent pre-doctoral internship. This is normally undertaken in the Ph.D. Year 5 (Ph.D. Year 4 for those who opted to condense the length of their doctoral training). It is recommended that students defend their dissertation before beginning the internship, but at a minimum, students must have their dissertation data collected and manuscript written and delivered to the supervisor prior to the application process.
In order to determine if a student is ready to proceed with the application process for internship in the next academic year, students are asked to notify the DCT by May 1\textsuperscript{st} of the year they plan to apply for internship. The following materials should be submitted to the DCT prior to the Spring retreat:

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

A decision regarding internship application readiness will be made by the Training Committee shortly after the Spring retreat in order to help students determine their course of action for the internship application year (e.g., whether they should begin to gather information for their applications). However, it is strongly encouraged that students have several conversations and discussions with their Research Supervisor and DCT long before this date so that there is a clear internship application plan in place. Once students have been approved to apply for internship, they are required to enrol in the Internship Preparation course (PSYO 625) for the Fall semester. This course aims to familiarize students with the internship application and match process and to help them to create and refine their APPI applications. The DCT writes a letter of support for each student’s APPIC application at this time as well. If the student is not approved for internship readiness by the Training Committee, he/she will not be enrolled in PSYO 625 and the DCT will not write a letter of support for their APPIC application.

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

**APPIC Application Process**

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

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

**Pre-doctoral Internship Learning Expectations, Logs, and Evaluations**

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

Prior to starting a pre-doctoral internship, students are advised to:

- check whether they need to have their own practitioner’s liability insurance. Students on unpaid internships (which are rare) will have their liability insurance covered through the University. Students on paid internships will have to secure their own liability insurance coverage or have their coverage provided through their training site.
- confirm if their internship site has requirements for them to submit to a new Criminal Record Check and if so, make necessary arrangements for completing same as directed by the internship site.

At the beginning of the internship, students are advised to:

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

During the course of the internship, it is recommended that students:

- keep a log of their supervision hours with the primary and secondary supervisors by using Time2Track. Time2Track permits the student to review the amount of time spent on supervision. Reports from Time2Track should be forwarded to the DCT at the end of the clinical placement to be placed in the student’s file. Students are asked to keep a copy of the sheets for their own information prior to submitting it to the program.
- document (using Time2Track) the total number of hours undertaken in various activities during the entire internship: assessment, intervention/therapy, clinical documentation, supervision, professional development (conferences, readings required for the practicum, etc.), and other type of activities specific to the internship experience. Keeping a log of their clinical and professional activities is also essential for qualifying for future professional registration with a regulatory body (i.e. a provincial or territorial licensing body).
- an internship site supervisor may elect for the student to log and track hours using an alternative established tracking system; in such cases internship students should notify the DCT at the outset of the rotation to advise of same.

At the **mid-point** of an internship rotation, students are expected to:

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

At the **end** of Ph.D. internship rotation, students are required to:

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

- students should maintain a copy of all forms before submitting them to the DCT.

VI. MONITORING OF STUDENT PROGRESS AND ANNUAL REPORTING

Annual Records of Progress for the Clinical Psychology Program

Graduate students are evaluated in a comprehensive manner on an annual basis using the Clinical Psychology Program’s Annual Record of Progress (see Appendix I for a recent print version). The digitized version of this report must be completed and submitted as instructed annually by the Clinical program. It must include a copy of the student’s C.V., a detailed list of Clinical courses completed to date with grades, and a summary of clinical hours from Time2Track, as applicable. The purpose of this evaluation is to ensure that students are progressing with the goals, objectives, and competencies against established timelines as required by the program and by CoGS, to identify areas of strength and/or difficulty, to provide students with necessary feedback on their progress, to implement scaffolding/remediation planning as indicated, or to provide exit planning from the Clinical Program where applicable.

The Annual Record of Progress requires information about all elements of the program, including coursework, clinical skill development, practica, research progress, comprehensive exams, thesis/ dissertation progress, awards, grants, and scholarships, publications, presentations, teaching assistantships, research assistantships, departmental citizenship, candidacy status, internship readiness/ progress, and work/ life balance. This information is collected using both categorical and written responses. Students must complete the form first to allow for an opportunity to reflect on progress and to demonstrate self-awareness and insight into strengths and weaknesses as a student. He/she must then meet with their Research Supervisor(s) to discuss the Annual Record of Progress; the Research Supervisor then makes any necessary additions to the digitized draft document before sending it as a soft copy to the DCT/ Associate DCT prior to the Spring Clinical Psychology Faculty Retreat. The Research Supervisors each present their students’ Annual Record of Progress at the Retreat where the forms are used to facilitate a comprehensive review of each student.

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

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

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

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

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

A student may be required to withdraw when he/she has:

   a. demonstrated conduct which, if participated in by a practicing clinical psychologist, would result in violation of the standard of conduct and regulations of the CPBC, or Code of Ethics published by CPA, or the Ethical Principles of Psychologists published by the American Psychological Association (APA; as applicable);
   b. in any clinic or practicum demonstrated incompetence in practice due to ongoing impairment of functioning;
   c. jeopardized professional judgment through self-interest; or
   d. demonstrated behaviour with respect to other students, colleagues, faculty, the University, or the public which is exploitive, irresponsible, or destructive.

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

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

7. Readiness for Internship – evaluated by all faculty members and approved as ready for internship;

8. Professional Development Activities and accomplishments are also noted.
Following the comprehensive evaluation by the Training Committee and applicable Clinical area faculty at the Spring retreat, the Research Supervisor summarizes the feedback from the Training Committee within the student’s digitized Annual Record of Progress form, meets with the student to discuss progress feedback, signs the report then sends the report to the DCT. The student reviews and signs the final copy which is then routed to CoGS for review, and a digital copy is also sent to the Clinical program from CoGS for the students’ department file.

If an overall evaluation is anything other than satisfactory, the DCT will schedule an in-person meeting with the student and their Research Supervisor(s) to follow-up and discuss next steps.

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

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

The Annual Record of Progress is discussed by the PGSC to determine student eligibility for Okanagan Graduate Research Scholarship (OGRS) funding. The PGSC recommends to CoGS which students should receive an OGRS, and the amount of funding they should receive (such awards in past have been allotted in increments of $3,000-$6,000/yr). Criteria for OGRS eligibility is set out by CoGS, and the PGSC considers several factors when making recommendations to CoGS. Availability of OGRS funding is subject to annual budgets, and funding is not guaranteed. See more about OGRS here: https://gradstudies.ok.ubc.ca/resources/award-opportunities/ogrs/
Annual Evaluation by the College of Graduate Studies (CoGS)

Although the Clinical Training Committee is primarily responsible for evaluating students’ progress and addressing concerns about a lack of progress at the Clinical Program level, CoGS also reviews the Annual Record of Progress to ensure that students are meeting University wide deadlines (e.g., reaching candidacy according to the established timeline) and progress expectations as a graduate student using the appropriate Progress Report Review Checklist to indicate what requirement the student has or has not been met. Following review, CoGS typically communicates the student’s progress to the student, research supervisor and DCT according to one of the following options:

1. The student shall be advised that progress is satisfactory.
2. The student shall be advised that progress is unsatisfactory with specific suggestions for improvement noted.
3. The student shall be withdrawn from the program.

Students must address outstanding issues following guidelines as provided by CoGS (e.g., submitting a form with rationale to request an extension for meeting candidacy) in consultation with their research supervisor and the DCT as and where required. Please see http://gradstudies.ok.ubc.ca/forms.html for the forms which may be required to respond to CoGS.

VII. RESOLUTION OF STUDENT DIFFICULTIES

Course instructors, research and clinical supervisors, or other individuals who interact with students might identify difficulties. If the difficulty is minor, it is recommended that the matter be resolved informally with the student and in consultation with the DCT, where appropriate.

When significant problems are identified, the DCT, the student, and the instructor/supervisor involved are responsible for developing a remediation plan. The plan should include the following:

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

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

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

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

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

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

Senate Policy O-9 outlines regulations for the supervisory privileges and sets out regulations for membership in the College of Graduate Studies:
https://gradstudies.ok.ubc.ca/policies-procedures/supervisors/#item1

In addition, the College of Graduate Studies (CoGS) outlines “Suggested Procedures for Conflict Resolution” for graduate students to resolve problems with their supervisors in the CoGS Graduate Policy and Procedure Manual found on the CoGS website:
https://gradstudies.ok.ubc.ca/policies-procedures/supervisors/#item2

Please also see information in Section IX below, regarding the Office of Ombudsperson for Students.
VIII. FINANCIAL ASSISTANCE AND EMPLOYMENT

Financial Assistance

Newly admitted students will be assessed by the College of Graduate Studies for Okanagan Graduate Research Scholarships (OGRS), ranging in past from $5,000-$6,000/yr. Continuance of OGRS funding in future years, depends upon several factors including merit as well as months of study. Incoming Clinical Psychology students are also eligible for paid Psychology department graduate teaching assistantships (GTA) from September – April each year. Under the terms of the BCGEU collective agreement, Master’s students have rights to the GTA work for up to 2 years, subject to satisfactory performance. Doctoral students have similar rights that extend for up to 4 years.

Students may also have supplemental employment through research assistantships with various faculty, but typically with their Research Supervisor. Availability of graduate research assistantships (GRA) funding varies highly by supervisor, and is not guaranteed.

The Psychology Department may also reimburse students with up to $500 each year for conference-related travel. The Irving K. Barber Faculty of Arts and Social Sciences may also provide travel grants when available to graduate students for eligible activities. Additionally, the Office of Research Studies offers internal funding opportunities for graduate students (see http://ors.ok.ubc.ca/funding/internal.html). Availability of travel-related grants is subject to institutional budgets and not guaranteed.

PhD students completing a Psychology Clinic Director-approved practicum elective requiring travel, may be eligible for a one-time reimbursement ($750 for domestic travel and $1,000 for international travel.) Further, PhD students who are pursuing DCT-approved internships, may be eligible to apply for a one-time reimbursement for up to $500 in travel-related costs for in-person internship interviews (if applicable; many interviews have gone virtual due to COVID-19).

Generally, students must apply for all travel related grants with supporting documentation (receipts, itineraries, event details, boarding passes, etc.) Funds are granted on a reimbursement basis only after the events are completed, and after the student has returned home (advances are not available).

In 2021, per campus Senate, current and incoming Ph.D. students at UBC Okanagan will be provided with a minimum funding package of at least $20,000 per year, for up to the first four years of a Ph.D: https://gradstudies.ok.ubc.ca/tuition-awards-and-finance/minimum-funding-policy/

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

Employment

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

IX. MISCELLANEOUS IMPORTANT ISSUES

Credit for Courses Taken at Other Universities

In the event that a student is accepted to the Clinical Psychology Program with prior graduate training, his/her transcripts and practicum experience may be evaluated to determine the degree to which he/she may have already fulfilled the degree requirements set forth by the Clinical Training Committee. At or shortly before the student commences the Clinical program, relevant course transcripts and course outlines as provided by the student, are reviewed upon request of the student by the DCT/ Associate DCT and the professor who teaches the equivalent course at the University, to determine whether the previous class taken was sufficient. If the previously taken course is deemed to be sufficient, the DCT/Associate DCT submits a form to recommend to CoGS to recommend that the student be granted transfer credit, or course exemption (whichever may apply), for the given course. The Dean of CoGS makes all final decisions about approval of transfer credits and course exemptions.

If the previous training is not deemed to be sufficient, the student will be required to take the specified course at UBC (Okanagan campus). A similar protocol is used for practicum hours accrued at a previous institution; the DCT/ Associate DCT and one additional member of the Clinical Training Committee will review the practicum syllabus and the affiliated practicum evaluation to determine whether sufficient training has been provided and necessary competencies achieved. Regardless of the number of hours accrued during previous graduate training, only 50 direct client hours may be transferred to the Clinical Psychology Program; the student will need to complete the remaining 250 required direct client hours under the supervision of the Clinical Training Committee. If a student has completed an empirical M.A. thesis in Psychology, then the student will not be required to complete a second M.A. thesis. Requests for transfer of previous course credit and the identification of remaining coursework is typically evaluated by the DCT/Associate DCT within the first month of the student enrolling in the program. The DCT/ Associate DCT meets with all incoming students individually in September of their first year to discuss their previous training and to create a training plan, including timelines for coursework and program requirements.

Eligibility for transfer credits and course exemptions may vary depending on whether the student is enrolled in the Master’s or doctoral program, and same can only be applied for following admission to the respective program. Please see: http://www.calendar.ubc.ca/okanagan/index.cfm?tree=18,285,984,1167

Minimum Course Grades

There are different minimum course grade requirements for M.A. versus Ph.D. students Per the College of Graduate Studies (CoGS), M.A. students must obtain a minimum
grade of 60% (C-) in coursework to receive course credit. However, per CoGS, only 6 credits of courses with grades in the C to C+ range (60-67%) may be counted toward a master’s program. For all other courses, students must obtain a minimum of 68%.

Per CoGS, Ph.D. students must obtain a minimum grade of 68% in coursework to receive course credit. Marks less than 68% are unacceptable and the Department may require a student to repeat the course or may view the mark as grounds for termination from the program.

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

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

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

Research Supervisors

A key individual in a student’s graduate education is their Research Supervisor(s). In the Psychology Department, the Research Supervisor is a CoGS-approved mentor who provides much of the training through close collaboration. This training includes guiding the student in setting up a research program and in collecting, maintaining, analyzing, and interpreting data. The Research Supervisor provides the student with most of the specific information needed to become an independent researcher (see the CoGS Graduate Policy and Procedure Manual for more details on the role and responsibilities of Research Supervisors at https://gradstudies.ok.ubc.ca/about-cogs/policies-procedures/#item26. The primary Research Supervisor must normally be a full faculty member in the Psychology Department. In addition, the supervisor must adhere to criteria as set out in UBC Senate Policy O.9:
https://senate.ubc.ca/sites/senate.ubc.ca/files/downloads/O-9-Supervision-COGS-Membership_20181122_Senate-approved_0.pdf

At the beginning of the graduate student’s first term in the MA program, as well as the first term in the PhD program, research supervisors and supervisees (graduate students) are required to complete the Research Supervisor/Supervisee Contract (provided by the
program at the outset of the MA and PhD) and submit this document to the Director of Clinical Training. The aim of the contract is to define the expectations and responsibilities of the graduate student and the supervisor.

At the end of each academic year, graduate students are also required to submit an Annual Research Supervisor Feedback Form to the DCT or to the Head if the DCT is the research supervisor. The information on this feedback form is confidential and allows the DCT (or Head) to mediate if there is conflict between Research Supervisors and Supervisees. See Appendix J for the Annual Research Supervisor Feedback Form.

Should the graduate student have a change in supervisors at any point during their MA or PhD program, this must be approved by the DCT and by CoGS, completion and submission of a new Research Supervisor/Supervisee Contract shall be required. Proposed research supervisors must meet the criteria as set out in Senate Policy O-9.

**Timeline for Faculty Feedback on Student Work**

All research supervisors and thesis/dissertation committee members are expected to provide their feedback on student theses and all other student work in a timely fashion. Specifically, faculty feedback is to be provided within three weeks after student submission of their work. Holiday time can be excluded from these time counts.

**Awards and Scholarships**

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

**Teaching Assistantships**

Typically, all graduate students are employed as teaching assistants (GTAs) during the academic year (September – April) which are paid employment positions in the Department of Psychology. Students cannot be accepted into the Clinical Psychology Program if they have not been allotted a GTA unless their Research Supervisor is able to provide them with equivalent funding through a research assistantship (GRA) for the length of their degree. Students are allotted a Master’s GTA for a maximum of two years and a Ph.D. GTA for a maximum of four years. Students are notified at the beginning of each year whether they have received a teaching assistantship. If the student accepts the teaching assistantship, the necessary forms and documentation must be submitted to the Psychology Department Senior Assistant by the stated deadline(s). While students must be guaranteed a GTA for a period of six years, they have the option to refuse the position or request a half–time position (working only 6 hours/week rather than the typical 12 hours/week). **If students refuse the GTA for a**
consecutive 12-month period, they may no longer have rights to the position and the GTA opportunity may be offered to fund a new graduate student.

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


Access, Privacy, and Records Management

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

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

Furthermore, as a clinician, you will have access to personal information of clients in the in-house Psychology Clinic throughout your practica. Prior to embarking upon Clinic practica, specific guidance concerning the collection, use and disclosure of clients’ personal information will be addressed by the Psychology Clinic Director.

Format For Thesis & Dissertation

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

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

**Academic Integrity**

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

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

- [http://help.library.ubc.ca/planning-your-research/academic-integrity-plagiarism/](http://help.library.ubc.ca/planning-your-research/academic-integrity-plagiarism/)

**Authorship Credit**

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

Here are two good articles on the topic:


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

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

APA: Ethical Principles of Psychologists and Code of Conduct

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

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

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

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

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

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

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

Guidelines, Additions and Caveats

1. Timeliness:

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

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

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

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

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

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

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

Process Recommendations:

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

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

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

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

Outcome Recommendations:

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

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

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

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

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

**Online Personal and Professional Image**

In an increasingly technologically connected and public world, students are encouraged to remain mindful of behaviour and its consequences online, including the use of social networking, blogs, listservs, and email. It is likely that students, clients, supervisors, potential internship sites, research participants, and future employers may be interested in searching or accessing online information about you. While all of the information that may exist about you may not be within your control, students are urged to exercise caution and restraint and to utilize safeguards when possible. Activities online, including those that you may consider purely personal in nature, or online activities initiated by family and friends, may reflect upon your professional life. Keep in mind the ideals of the preamble to the CPA ethics code in which we aspire to do no harm to our clients, our research participants, or the profession with our actions – see full text Canadian Code of Ethics for Psychologists, Fourth Edition, here: [https://cpa.ca/docs/File/Ethics/CPA_Code_2017_4thEd.pdf](https://cpa.ca/docs/File/Ethics/CPA_Code_2017_4thEd.pdf)

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

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

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

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

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

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

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

Acceptable Use and Security of UBC Electronic Information and Systems

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

Student Declaration and Responsibility

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

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

The student declaration is important. It imposes obligations on students and affects rights and privileges, including property rights. A student must not enroll at the University if she/he does not agree to become bound by the declaration above. By agreeing to become a student, she/he makes the declaration above and agrees to be bound by it.
Each student is required to provide the necessary information required for the University’s records. The student is also to keep Enrolment Services and the College of Graduate Studies informed of any changes in her/his name or contact information.

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

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

Health or Emotional Difficulties

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

Health and Wellness Clinic at UBCO for students

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

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

Counselling at UBCO

Counsellors at the Student Health and Wellness Centre provide a space for students to examine and explore behaviours, relationships, feelings, or thoughts which cause concern or challenges in a student’s life. Whether these problems are primarily impacting personal, social, or academic life, counsellors can help students to strengthen the ability to cope and provide a valuable source of support. The counsellors can help students deal with a variety of issues.
http://students.ok.ubc.ca/health-wellness/counselling.html

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

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

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

Library Research Support

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

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

Writing Support

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

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

Disability Resources

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

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

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

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

**Office of the Ombudsperson for Students**

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

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

**Safewalk & Campus Security**

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

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

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

**International Students**

International Programs and Services at UBCO provides advising, transition services, and programs for international students. They are available to assist you with issues related to safety, health insurance, employment, and your transition to UBC. For more information, please see: http://students.ok.ubc.ca/international/welcome.html
Additionally, the College of Graduate Studies also has information for International Students here: https://www.grad.ubc.ca/prospective-students/application-admission/minimum-academic-requirements-international-credentials

**Sexual Violence Prevention and Response Office**

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

Visit https://svpro.ok.ubc.ca/ or call 250.807.9640

**Independent Investigations Office**

If you or someone you know has experienced sexual assault or some other form of sexual misconduct by a UBC community member and you want the Independent Investigations Office (IIO) at UBC to investigate, please contact the IIO. Investigations are conducted in a trauma informed, confidential and respectful manner in accordance with the principles of procedural fairness. You can report your experience directly to the IIO via email: director.of.investigations@ubc.ca or by calling 604.827.2060 or online by visiting https://investigationsoffice.ubc.ca/

**Indigenous Graduate Student Resources and Support**

The College of Graduate Studies, in partnership with Indigenous Program and Services and faculty members, assists and supports Indigenous students throughout their journey from application to graduation. Please see more information here: https://gradstudies.ok.ubc.ca/indigenous-graduate-students/ and here: https://students.ok.ubc.ca/indigenous-students/
Appendices

Appendix A: Criminal Record Check information
Appendix B: Clinical Psychology Standard Course Schedule & Key Milestones
Appendix C: Graduate Programs Grading Scale
Appendix D: Clinical Psychology Practicum Placement Settings
Appendix E: Clinical Practicum Placement Goals Form
Appendix F: Student Report on Clinical Placement and Performance Appraisal
Appendix G: Student’s Evaluation of Practicum Supervisor Form
Appendix H: Clinical Practice Comprehensive Forms
Appendix I: Annual Record of Progress Form
Appendix J: Research Supervisor Feedback Form
Appendix A: Criminal Record Check

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

Retrieved October 27, 2021 from:

https://www2.gov.bc.ca/gov/content/safety/crime-prevention/criminal-record-check

**Who Must Have Their Criminal Record Checked**

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

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

**Post-Secondary Students**

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

Retrieved October 27, 2021 from:

https://www2.gov.bc.ca/gov/content/safety/crime-prevention/criminal-record-check/employer-organizations

**Selected excerpts of the CRIMINAL RECORDS REVIEW ACT**

[RSBC 1996] CHAPTER 86

**Part 4.1 — Registered Students**

*General duty of education institutions*

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

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

(1.1) An education institution may require a registered student to undergo a criminal record check even if the registered student could undergo a criminal record check verification.
(2) An education institution must inform registered students of the requirements of this Act.

**Registered students**

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

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

**New convictions or outstanding charges**

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

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

Retrieved October 27, 2021 from:  
https://www.bclaws.gov.bc.ca/civix/document/id/complete/statreg/00_96086_01#part4.1
Appendix B: Clinical Psychology Standard Course Schedule & Key Milestones

<table>
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<tr>
<th>Year 1 of 7 (MA Year 1) Winter Term I (Sep-Dec)</th>
<th>Instructor</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSY 507 Advanced Statistics and Research Methods</td>
<td>Dr. O’Connor</td>
<td>Broad and General</td>
</tr>
<tr>
<td>PSY 510 Psychopathology I – Descriptive Pathology</td>
<td>Dr. Szostak</td>
<td>Core Clinical</td>
</tr>
<tr>
<td>PSY 514 Psychological Assessment I</td>
<td>Dr. Wilson</td>
<td>Core Clinical</td>
</tr>
<tr>
<td>PSY 599 MA Thesis course (all terms)</td>
<td>Research Supervisor</td>
<td>College of Graduate Studies</td>
</tr>
</tbody>
</table>

**Thesis Committee must be formed by end of Term I**

<table>
<thead>
<tr>
<th>Year 1 of 7 (MA Year 1) Winter Term II (Jan-Apr)</th>
<th>Instructor</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSY 507 Advanced Statistics and Research Methods</td>
<td>Dr. O’Connor</td>
<td>Broad and General</td>
</tr>
<tr>
<td>PSY 511 Psychopathology II – Theoretical Foundations</td>
<td>Dr. Szostak</td>
<td>Core Clinical</td>
</tr>
<tr>
<td>PSY 515 Psychological Assessment II</td>
<td>Dr. Wilson</td>
<td>Core Clinical</td>
</tr>
<tr>
<td>PSY 599 MA Thesis course (all terms)</td>
<td>Research Supervisor</td>
<td>College of Graduate Studies</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year 1 of 7 (MA Year 1) Summer Terms I and/or II (May-Jun/Jul-Aug)</th>
<th>Instructor</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSY 512 Ethics &amp; Professional Standards in Clinical Psychology</td>
<td>Dr. Driscoll</td>
<td>Core Clinical</td>
</tr>
<tr>
<td>PSY 530C Comprehensive Psychological Assessment Practicum (in-house Psychology Clinic) begins</td>
<td>Dr. Miller</td>
<td>Clinical Practice</td>
</tr>
<tr>
<td>PSY 599 MA Thesis course (all terms)</td>
<td>Research Supervisor</td>
<td>College of Graduate Studies</td>
</tr>
</tbody>
</table>

**MUST PROPOSE MA THESIS RESEARCH TO COMMITTEE BEFORE BEGINNING OF SECOND YEAR**

<table>
<thead>
<tr>
<th>Year 2 of 7 (MA Year 2) Winter Term I (Sep-Dec)</th>
<th>Instructor</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSY 516 Psychological Intervention I – Externalizing Disorders</td>
<td>Dr. Walsh</td>
<td>Core Clinical</td>
</tr>
<tr>
<td>PSY 530C Comprehensive Psychological Assessment Practicum (in-house Psychology Clinic) continues</td>
<td>Dr. Miller</td>
<td>Clinical Practice</td>
</tr>
<tr>
<td>PSY 599 MA Thesis course (all terms)</td>
<td>Research Supervisor</td>
<td>College of Graduate Studies</td>
</tr>
</tbody>
</table>

**MUST FORMALLY APPLY TO THE CLINICAL PHD PROGRAM FOR FOLLOWING SEPTEMBER, PRIOR TO DECEMBER 1 DEADLINE**

<table>
<thead>
<tr>
<th>Year 2 of 7 (MA Year 2) Winter Term II (Jan-Apr)</th>
<th>Instructor</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSY 517 Psychological Intervention II – Affective Disorders</td>
<td>Dr. Libben</td>
<td>Core Clinical</td>
</tr>
<tr>
<td>PSY 530C Psychological Assessment Practicum (in-house Psychology Clinic) continues</td>
<td>Dr. Miller</td>
<td>Clinical Practice</td>
</tr>
<tr>
<td>PSY 599 MA Thesis course (all terms)</td>
<td>Research Supervisor</td>
<td>College of Graduate Studies</td>
</tr>
</tbody>
</table>
### Clinical Psychology Standard Course Schedule & Key Milestones, continued

<table>
<thead>
<tr>
<th>Instructor</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>YEAR 2 of 7 [MA Year 2] Summer Terms I and/or II</strong></td>
<td></td>
</tr>
<tr>
<td>PSYO 590C Psychological Assessment Practicum (in-house Psychology Clinic) continues until end of Summer Term I</td>
<td>Dr. Miller</td>
</tr>
<tr>
<td>PSYO 599 MA Thesis course (all terms)</td>
<td>Research Supervisor</td>
</tr>
</tbody>
</table>

**MUST ORALLY DEFEND THESIS BY END OF JULY [NO DEFENCES IN AUGUST] AND SUBMIT REQUIRED REVISIONS TO COGS PRIOR TO THIRD YEAR/ PHD**

**MUST DEMONSTRATE ACADEMIC AND CLINICAL COMPETENCIES TO GAIN ADMISSION TO PHD PROGRAM**

<table>
<thead>
<tr>
<th>Instructor</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>YEAR 3 of 7 [PhD Year 1] Winter Term I [Sep-Dec]</strong></td>
<td></td>
</tr>
<tr>
<td>PSYO *** Elective of Broad and General Courses</td>
<td>Faculty</td>
</tr>
<tr>
<td>Social (320: Health Psychology, 521: Psychology of Intergroup Relations); History (506: Contemporary Theories of Psychology); 522: Biological Bases of Behaviour; 523: Cognitive Basis of Behaviour; 524: Clinical Supervision; 526: Program Evaluation</td>
<td>TBA</td>
</tr>
<tr>
<td>PSYO 699 Ph.D. Thesis/Dissertation course [all terms]</td>
<td>Research Supervisor</td>
</tr>
</tbody>
</table>

**DISSERTATION COMMITTEE MAY BE FORMED BY END TERM I OF FIRST YEAR OF PHD**

<table>
<thead>
<tr>
<th>Instructor</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>YEAR 3 of 7 [PhD Year 1] Winter Term II (Jan-Apr) &amp; Spring/Summer Term I and/or II (May-Jun/Jul-Aug)</strong></td>
<td></td>
</tr>
<tr>
<td>PSYO *** Elective of Broad and General Courses</td>
<td>Faculty</td>
</tr>
<tr>
<td>Social (320: Health Psychology, 521: Psychology of Intergroup Relations); History (506: Contemporary Theories of Psychology); 522: Biological Bases of Behaviour; 523: Cognitive Basis of Behaviour; 524: Clinical Supervision; 526: Program Evaluation</td>
<td>TBA</td>
</tr>
<tr>
<td>PSYO 630 - Practice</td>
<td>Research Supervisor</td>
</tr>
</tbody>
</table>

**DISSERTATION COMMITTEE MUST BE FORMED BY END OF WINTER TERM 2 OF FIRST YEAR OF OR PHD DISSERTATION MAY BE PROPOSED IN TERM 2, OR IN SUMMER TERM 1 IF COMMITTEE WAS FORMED IN TERM I**

*New students who have entered the program at the PhD level, may complete the Comprehensive requirements in the third year of the PhD program with approval of the DCT.*

<table>
<thead>
<tr>
<th>Instructor</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>YEAR 4 of 7 [PhD Year 2] Winter Term I [Sep-Dec]</strong></td>
<td></td>
</tr>
<tr>
<td>PSYO *** Elective of Broad and General Courses</td>
<td>Faculty</td>
</tr>
<tr>
<td>Social (320: Health Psychology, 521: Psychology of Intergroup Relations); History (506: Contemporary Theories of Psychology); 522: Biological Bases of Behaviour; 523: Cognitive Basis of Behaviour; 524: Clinical Supervision; 526: Program Evaluation</td>
<td>TBA</td>
</tr>
<tr>
<td>PSYO 630 - Practice</td>
<td>Research Supervisor</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Instructor</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>YEAR 4 of 7 [PhD Year 2] Winter Term II (Jan-Apr) &amp; Spring/Summer Term I and/or II (May-Jun/Jul-Aug)</strong></td>
<td></td>
</tr>
<tr>
<td>PSYO *** Elective of Broad and General Courses</td>
<td>Faculty</td>
</tr>
<tr>
<td>Social (320: Health Psychology, 521: Psychology of Intergroup Relations); History (506: Contemporary Theories of Psychology); 522: Biological Bases of Behaviour; 523: Cognitive Basis of Behaviour; 524: Clinical Supervision; 526: Program Evaluation</td>
<td>TBA</td>
</tr>
</tbody>
</table>
### PSYD 630 - Practica

<table>
<thead>
<tr>
<th>Instructor</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>TBA</td>
<td>Clinical Practice</td>
</tr>
</tbody>
</table>

**PSYD 699 Ph.D. Thesis/Dissertation course (all terms)**

- **Instructor**: Research Supervisor
- **Requirement**: College of Graduate Studies

**DISSERTATION MUST BE PROPOSED (BEFORE END OF JULY) BY END OF YEAR 4; COMPREHENSIVE REQUIREMENTS MAY BE COMPLETED IN YEAR 4 IF DISSERTATION PROPOSAL HAS BEEN COMPLETED.**

### Year 5 of 7 (PhD Year 3) Winter Term I (Sep-Dec)

<table>
<thead>
<tr>
<th>Instructor</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty</td>
<td>Core Clinical</td>
</tr>
</tbody>
</table>

**Social (520: Health Psychology, 522: Psychology of Intergroup Relations); History (506: Contemporary Theories of Psychology); 522: Biological Bases of Behaviour; 523: Cognitive Basis of Behaviour; 524: Clinical Supervision; 526: Program Evaluation**

### Year 5 of 7 (PhD Year 3) Winter Term II (Jan-Apr) & Spring/Summer Terms I and/or II (May-Jun/ Jul-Aug)

<table>
<thead>
<tr>
<th>Instructor</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty</td>
<td>Core Clinical</td>
</tr>
</tbody>
</table>

**Social (Health Psychology 520, Psychology of Intergroup Relations 522); History (Contemporary Theories of Psychology 506); Cognitive Basis of Behaviour 523; Biological Bases of Behaviour 526**

### Year 6 of 7 (PhD Year 4) Winter Term I (Sep-Dec)

<table>
<thead>
<tr>
<th>Instructor</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Lutes</td>
<td>(Recommended but not required)</td>
</tr>
</tbody>
</table>

**PSYD 625 Internship Preparation**

**PSYD 630 - Practica (Possibility of Being Senior Student)**

**PSYD 699 Ph.D. Thesis/Dissertation course (all terms)**

- **Instructor**: Research Supervisor
- **Requirement**: College of Graduate Studies

**COMPREHENSIVE REQUIREMENTS MUST BE COMPLETED BY END OF WINTER TERM II IN YEAR 5**

**STUDENT APPLIES FOR CANDIDACY (FOLLOWING SUCCESSFUL COMPLETION OF REQUIRED COURSEWORK, COMPREHENSIVE REQUIREMENTS, AND DISSERTATION PROPOSAL INCLUSIVE)**

**DRAFT OF THE DISSERTATION MANUSCRIPT MUST BE PROVIDED TO SUPERVISOR PRIOR TO SEPTEMBER 15 OF YEAR 6**

### Year 6 of 7 (PhD Year 4) Winter Term II (Jan-Apr) & Spring/Summer Terms I and/or II (May-Jun/ Jul-Aug)

<table>
<thead>
<tr>
<th>Instructor</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Research Supervisor</td>
<td>College of Graduate Studies</td>
</tr>
</tbody>
</table>

**PSYD 699 Ph.D. Thesis/Dissertation course (all terms)**

### Year 7 of 7 (PhD V) All terms - Winter I and II (Sep-Apr); and Spring/Summer I and II (May-Aug)

<table>
<thead>
<tr>
<th>Instructor</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Lutes</td>
<td>Clinical Practice</td>
</tr>
</tbody>
</table>

**PSYD 730 Accredited Internship**

**PSYD 699 Ph.D. Thesis/Dissertation course (all terms)**

**INTERNSHIP YEAR; DISSERTATION SHOULD NORMALLY BE DEFENDED BY END OF JULY (NO DEFENCES SCHEDULED IN AUGUST), BY END OF YEAR 7**
Appendix C: Graduate Programs Grading Scales

MASTER'S GRADING SCALE

For master’s students registered in the College of Graduate Studies, Fail (F) for individual courses is defined as below 60%:

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

However, only 6 credits of courses with grades in the C to C+ range (60-67%) may be counted toward a master's program. For all other courses, students must obtain a minimum of 68%. Some graduate programs may require a higher passing grade for specific courses.
**DOCTORAL GRADING SCALE**

For doctoral students registered in the College of Graduate Studies, Fail (F) for individual courses is defined as below 68%. Some graduate programs may require a higher passing grade for specific courses.

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

Retrieved October 27, 2021 from:  
[https://gradstudies.ok.ubc.ca/policies-procedures/registration-records/#item10](https://gradstudies.ok.ubc.ca/policies-procedures/registration-records/#item10)
Appendix D: Clinical Psychology Practicum Placement Settings

Comprehensive Psychological Assessment (Initial & Advanced, In-house Clinic)

Psychological Intervention (Advanced General, In-house Clinic)

Healthy Weight Specialty Service (Advanced Specialty, In-house Clinic)

Youth Forensic Assessment & Treatment (Advanced Specialty, Community)

Problematic Substance Use Treatment (Advanced General, In-house Clinic)

Acquired Brain Injury-Neuropsychology (Advanced Specialty-Inpatient, Kelowna General Hospital)
Adolescent Psychiatric Clinic (Advanced Specialty, Inpatient, Kelowna General Hospital)

Interior Health (Advanced General - Outpatient, Community)

Adult Forensic Assessment (Advanced Specialty, Community)

Disability Resource Centre (Advanced Specialty, UBCO Campus)

Child and Youth Assessment (Advanced Specialty, In-house Clinic)

Walk In Wellbeing Service (Advanced General, In-house Clinic)

Tertiary Residential Neuropsychiatry Elective (Advanced Specialty, Multiple Sites)

Inpatient Psychiatry Elective, University Hospital of Northern British Columbia (Advanced Specialty)

Substance Use Assertive Community Treatment (Advanced Specialty, Community Health)

Private Practice (Advanced Specialty, Community)

Assessment & Treatment of Pain (Advanced Specialty, In-house Clinic)

Acquired Brain Injury Transitional Neurorehabilitation (Advanced Specialty, Community)

Note: practicum offerings may not operate each year and are subject to change
Appendix E: Clinical Psychology Practicum Placement Goals

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

Student name: ________________________________
Practicum site: ________________________________
Practicum supervisor: __________________________
Practicum semester(s) i.e., 2015W Term 1, 2015W Term 2: _______________________

Interpersonal Goals

1. ________________________________
2. ________________________________
3. ________________________________

Intrapersonal Goals

1. ________________________________
2. ________________________________
3. ________________________________

Individual supervision hours_________ Group supervision hours __________
Student’s clinical contact hours in: Assessment _____ Treatment _____

Faculty Supervisor’s name: _______________________
Faculty Supervisor’s signature: ___________________ Date: _______
Student’s signature: _____________________________ Date: _______
DCT signature: ____________________________ Date: _______
Appendix F: Student Report on Clinical Placement and Performance Appraisal Form

Student's name: ____________________________  Date: ____________________________

Practicum name/site: ____________________________  Supervisor: ____________________________

Part I. Student Report on Clinical Placement

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

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

What is the breakdown of your clinical placement hours? Please estimate if you are unable to specify precisely:

Direct client contact: ____________ hours  Supervision – Group: ____________ hours
Consultation: ____________ hours  Supervision – Individual ____________ hours

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

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

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

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

__________________________
Part II. Performance Appraisal Form

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

Rating Scale

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

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

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

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

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

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

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

This is the student’s _____________ practicum.

(first, second, third, etc.)

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

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

## Competencies (Objective 3)

<table>
<thead>
<tr>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>a) Students will demonstrate knowledge and skills in implementing and evaluating a variety of empirically-supported psychological interventions.</strong></td>
</tr>
<tr>
<td>Knowledge of scientific, theoretical, empirical, and contextual bases of intervention.</td>
</tr>
<tr>
<td>Skills in basic clinical skills, such as empathic listening, framing problems, etc.</td>
</tr>
<tr>
<td>Skills in assessment of treatment progress and outcome.</td>
</tr>
<tr>
<td>Demonstrates general psychotherapy or process skills.</td>
</tr>
<tr>
<td>Develops, implements, and revises treatment plans.</td>
</tr>
<tr>
<td><em>Ability to implement evidence-based interventions, covering a wide range of developmental, preventive, and “remedial” interventions, depending on the focus and scope of the practicum site.</em></td>
</tr>
<tr>
<td>Crisis management skills and responding to psychological/ psychiatric emergencies.</td>
</tr>
<tr>
<td>Demonstrates an ability to use a variety of intervention methods (e.g., individual, group, family).</td>
</tr>
</tbody>
</table>
### Competencies (Objective 4)

#### a) Students will demonstrate knowledge and skills related to ethical conduct in psychology practice, research, and teaching.

- Knowledge of principles of ethical practice and decision making (CPA, 2000; CPBC, 2014).
- Legal knowledge related to the practice of psychology [Federal (e.g., FIPPA), Provincial Law].
- Recognizes and analyzes ethical and legal issues across the range of professional activities in the practicum setting.
- Recognizes and understands the ethical dimensions/features of own attitudes and practice in the clinical setting.
- Seeks appropriate information and consultation when faced with ethical issues.
- Practices appropriate professional assertiveness related to ethical issues (e.g., by raising issues when they become apparent to the student).

#### b) Students will demonstrate progress towards establishing a professional identity as a clinical psychologist and an attitude of lifelong learning.

- Evidences sufficient commitment to practicum training (i.e., time, effort, reading).
- Timeliness: completing professional tasks in allotted/appropriate time (e.g., evaluations, notes, reports); arriving promptly at meetings and appointments.
- Developing an organized, disciplined approach to writing and maintaining notes and records.
- Negotiating / managing fees and payments.
- Organizing and presenting case material; preparing professional reports for health care providers, agencies, etc.
- *Demonstrates scholarly, critical thinking and a commitment to the development of the profession.*

#### c) Students will demonstrate an awareness of their own beliefs and values as they relate to and impact professional practice and activity as well as demonstrate appropriate and effective interpersonal and attitudinal skills with clients.

- Interpersonal skills: listens and is empathic with others; respect for/interest in others’ cultures, experiences, values, points of view, goals and desires, fears, etc. These skills include verbal as well as non-verbal domains.
- Cognitive skills: critical thinking, organized reasoning, intellectual curiosity, and flexibility.
- Affective skills: affect tolerance; tolerance/understanding of interpersonal conflict; tolerance of ambiguity and uncertainty.
- Personality/Attitudes: desire to help others; openness to new ideas; honesty/integrity/valuing of ethical behavior.
- Expressive skills: communicates one’s ideas appropriately, feelings and information in verbal and non-verbal channels.
- Reflective skills: examines and considers one’s own motives, attitudes, behaviors and one’s effect on others.
### Competencies (Objective 4 c continued)

| Personal skills: personal organization, personal hygiene, and appropriate dress. |
| *Awareness of one’s own beliefs and values as they relate to and impact professional practice and activity. |

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

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

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

| With support staff: |
| Is respectful of support staff roles and persons. |

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

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

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

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

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

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

### Competencies (Objective 6)

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

<table>
<thead>
<tr>
<th>Competencies</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Specific Course Outcomes (to be filled in from syllabus):</strong></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td></td>
</tr>
</tbody>
</table>

### Written Comments:

_____________________________________

Student

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

Student:

Supervisor(s):

Practicum Site:

Term(s):

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

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

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

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

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

   1  2  3  4  5  6  7
   Strongly Disagree Neutral Strongly Agree
2. The supervisor was dependable and accessible (e.g., kept appointments and adhered to schedule, could be reached if needed):

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

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

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

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

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

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

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

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

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

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

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

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>Neutral</td>
<td>Strongly Agree</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

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

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<tr>
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<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>Neutral</td>
<td>Strongly Agree</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

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

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<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>Neutral</td>
<td>Strongly Agree</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>Neutral</td>
<td>Strongly Agree</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>Neutral</td>
<td>Strongly Agree</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>Neutral</td>
<td>Strongly Agree</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
My overall evaluation of the supervisor:

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

The best thing about my supervisor/supervision was:

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

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

Other comments?

Please submit completed form to Dr. Lesley Lutes, Director of Clinical Training, at lesley.lutes@ubc.ca
Appendix H: Clinical Practice Comprehensive Forms

COMPREHENSIVE EXAMINATION CASE SELECTION FORM

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

CLINICAL PSYCHOLOGY CASE

Client Characteristics

Age
Gender
Ethnicity

Reason For Referral

Diagnostic Impressions (can be Provisional)

Assessments Used (if any, other than clinical interview)

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

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

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

1st choice: _________________________________________

2nd choice: _________________________________________

3rd choice: _________________________________________

Student Name: ____________________________________ Date: _______________
Clinical Assessment & Psychotherapy Written Case Document
Competency Checklist

Student name: ___________________________ Date: _________________

Committee member name: ___________________________

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

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

Written comments:
Clinical Assessment & Psychotherapy Case- Oral Comprehensive Exam Competency Checklist

Student name: __________________________________________ Date:________________

Committee member name: ________________________________

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

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

Written comments:

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

Student Name:

Term:

Time Taken Exam (circle): 1st 2nd

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

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

Overall Recommendation:

Chair of Committee:__________________________________________

Name________________________Signature____________________Date________
Appendix I - *SAMPLE Annual Record of Progress Form

INSTRUCTIONS TO STUDENTS AND SUPERVISORS:

1) Students complete an unsigned draft of this form as a self-assessment and: i) insert Clinical hours summary from Time2Track in Clinical section below; ii) attach or insert a full list of courses completed to date, with grades; iii) attach current CV. Students emails their completed draft, with CV, to research supervisor(s) on or before ____________

2) Supervisors review draft and add their own comments; attach supporting documents and forward electronic copy to Dr. Harry Miller on or before ____________ for roundtable discussion with applicable Clinical faculty members and DCT at the Clinical Faculty Spring Retreat on ____________

3) Following roundtable discussion, supervisor completes final version and inserts Clinical Training Committee overall comments, discusses with student, both parties sign it, then the supervisor forwards the signed copy, along with the supporting documents, to DCT/ designate by ____________

4) DCT and Associate DCT review signed report, add own signatures and submit completed report to the College of Graduate Studies on or before their annual report deadline of ____________

Student Name: ___________________________ Student Number: ___________________________

Date of Clinical Faculty Review: ____________

Date entered UBCO for graduate school: ____________

Date entered UBCO Clinical Psychology: ____________

Year in Program as of previous September: ____________

Anticipated Program End Date (Month / Year): ____________

Name of Research Supervisor(s): ____________________________________

Names of Committee Members:

1. ________________________________________

2. ________________________________________

3. ________________________________________

Coursework (student attaches list of courses completed with grades)

☐ [1] Coursework has been exemplary

☐ [2] Coursework has been satisfactory

☐ [3] You earned a grade below B in a core, practicum, or internship course

☐ retake the core course the next time it is offered

☐ develop a 1-semester IEP with the practicum/internship instructor

☐ [4] Your coursework requirements are complete (date) ____________

☐ [5] Incomplete coursework must be completed (provide detailed plan with timeline):

Student comments:
Supervisor comments:

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

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

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

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

Clinical hours in the past year (since the last annual review):

Number of assessment hours _____
Number of treatment hours _____
Number of individual supervision hours _____
Number of group supervision hours _____
Number of integrated reports _____

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

TOTAL clinical hours to date (cumulative):

Number of assessment hours:
Number of treatment hours:
Number of individual supervision hours:
Number of group supervision hours:
Number of integrated reports:

Student comments:

Supervisor comments:
Research Progress

☐ [1] Research progress has been exemplary
☐ [2] Research progress is satisfactory
☐ [3] Research progress is unsatisfactory
☐ [4] Participation in a research group has been satisfactory
☐ [5] Thesis proposal was defended (date) _______________
☐ [6] Thesis should be/ was defended by (date) _______________
☐ [7] Dissertation proposal should be defended/ was by (date) _______________
☐ [8] Dissertation should be defended by/ was defended (date) _______________
☐ [9] Dissertation defence was completed on (date) _______________

Student comments:

Supervisor comments:

Comprehensive Exam 1 – General Comprehensive Exam

☐ [1] You have successfully completed the General Comprehensive (date) _______________
☐ [2] You have begun work on the General Comprehensive and will complete this requirement by (date) _______________
☐ [3] You have not yet begun work on the General Comprehensive Exam but plan to begin by (date) _______________

Student comments:

Supervisor comments:

Comprehensive Exam 2 – Clinical Comprehensive Exam

☐ [1] You have successfully completed the Clinical Comprehensive Exam (date) _______________
☐ [2] You have unsuccessfully attempted the Clinical Comprehensive Exam and will retake this requirement by (date) _______________
☐ [3] You have not yet completed the Clinical Comprehensive Exam but plan to by (date) _______________
**Student comments:**

**Supervisor comments:**

**Candidacy (this section for PhD students only)**

- [ ] [1] You successfully achieved Candidacy, per the College of Graduate Studies (date) __________
- [ ] [2] You have not yet achieved Candidacy but plan to by (date) __________

**Teaching Assistantship**

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

- [ ] [1] Held a full-time (12 hour/week) assistantship
- [ ] [2] Held a half-time (12 hour/week) assistantship
- [ ] [3] Did not hold an assistantship

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

**Supervisor comments:**

**Departmental Citizenship/Engagement**

- [ ] Your involvement in the departmental level meetings and engagement has been exemplary.
- [ ] Your involvement in the departmental level meetings and engagement has been satisfactory.
- [ ] Your involvement in the departmental level meetings and engagement has been unsatisfactory.

**Student comments:**

**Supervisor comments:**

**Work / Life Balance**

Maintaining an effective work / life balance is critical to a student's professional development. Please comment on the student’s ability to maintain work / life balance throughout the year:
Readiness for Internship

☐ You have been approved by the faculty as ready for internship based on the Clinical program requirements.

☐ You plan to submit an internship readiness package at the upcoming Clinical Faculty retreat.

☐ N/A

For students on Probation/Remediation:

☐ [1] You have met the requirements specified in your Remediation Plan and are no longer on Probation/Remediation.

☐ [2] You have failed to meet requirements while on probation and have the option to petition the faculty to remain in the program

Feedback:

Clinical Training Committee’s overall comments (summarized by research supervisor following retreat):

DCT additional comments:

Signatures

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

[Printed Name __________________________] [Signature] __________________________ [Date]  
Research Supervisor
Lesley D. Lutes, Ph.D.               Date
Director of Clinical Training

Harry Miller, Ph.D.                           Date
Psychology Clinic Director/ Associate Director of Clinical Training

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

Student                       Date

*the above is a sample earlier print version of the annual progress report for Clinical students; as of 2022, this form has been digitized
Appendix J: Graduate Research Supervisor Feedback Form

Student Information

<table>
<thead>
<tr>
<th>Name</th>
<th>Program</th>
<th>Research Supervisor</th>
<th>Review Period <em>I.e.</em> 2019-2020 Academic Year</th>
</tr>
</thead>
</table>

Supervisor Feedback

In the last academic year, has your supervisor...

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

Additional Comments

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

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

Signature   Date