CLINICAL PSYCHOLOGY HANDBOOK

HARVARD UNIVERSITY DEPARTMENT OF PSYCHOLOGY CLINICAL PSYCHOLOGY PROGRAM:

PHILOSOPHY, STRUCTURE, & REQUIREMENTS

UPDATED: November 12, 2021

**PURPOSE OF THIS DOCUMENT**

The purpose of this document is to outline and describe the philosophy and structure of Harvard University’s Clinical Psychology Program and to provide students with information about the courses, research, and clinical training required to earn a Ph.D. degree in clinical psychology.

The Department of Psychology provides a Graduate Student Handbook that describes the requirements, structure, student funding, and resources for the Department in general (see https://psychology.fas.harvard.edu/clinical-psychology-grad). The current document supplements that Handbook for students in our Clinical Psychology Program.

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**HARVARD UNIVERSITY** **DEPARTMENT OF PSYCHOLOGY** **CLINICAL PSYCHOLOGY FACULTY**

**CORE FACULTY**

Jill M. Hooley, D.Phil. Richard J. McNally, Ph.D. John R. Weisz, Ph.D. Matthew K. Nock, Ph.D. Katie A. McLaughlin, Ph.D. Mark L. Hatzenbuehler, Ph.D.

**Director of Clinical Training:** Richard J. McNally, Ph.D.

**Academic Director of the Clinical Program:** Jill M. Hooley, D.Phil.

**Department Chair:** Matthew K. Nock, Ph.D.

**Director of Graduate Studies:** Jesse Snedeker, Ph.D.

**DEPARTMENT OF PSYCHOLOGY – GENERAL ORGANIZATION**

The Department provides Ph.D. training in the following areas: (1) Clinical Psychology, (2) Experimental Psychopathology, (3) Cognition, Brain, and Behavior, (4) Developmental Psychology, and (5) Social Psychology. The faculty for the Clinical Psychology program is the same as for the Experimental Psychopathology program.

**CLINICAL PSYCHOLOGY TRAINING MODEL AND PROGRAM**

The Clinical Psychology program adheres to a **clinical science** model of training and is a member of the Academy of Clinical Psychological Science. We are committed to training clinical psychologists whose research advances scientific knowledge of psychopathology and its treatment, and who can apply evidence-based methods of assessment and clinical intervention. The main emphasis of the program is research, especially on severe psychopathology. The program includes research, course work, and clinical practica, and a clinical internship. The curriculum meets requirements for licensure in Massachusetts, accreditation requirements of the American Psychological Association (APA), and accreditation requirements of the Psychological Clinical Science Accreditation System (PCSAS). Students typically complete assessment and treatment practica during their second and third years in the program, and they must fulfill all departmental requirements prior to beginning their one-year internship.

The program can be completed in five years (including the internship year), and at least two of these years must be in residence in the Department of Psychology at Harvard University. However, students often take five to six years to complete their course work and dissertation and an additional year to complete their clinical internship. Therefore, students take between five and seven years to complete the entire program.

Our Ph.D. program in Clinical Psychology is accredited by the American Psychological Association. [Commission on Accreditation, American Psychological Association, 750 First Street, NE, Washington, DC 20002-4242 Tel.: (202) 336-5500], and by the Psychological Clinical Science Accreditation System (PCSAS) [Psychological Clinical Science Accreditation System. 1800 Massachusetts Avenue, NW, Washington, DC 20036-1218 Tel.: (301) 455-8046].

The Director of Clinical Training (DCT) is Professor Richard J. McNally. As DCT, Professor McNally is the person students should contact if they have questions about the activities, requirements, and responsibilities relating to the Clinical Psychology Program.

**CURRICULAR REQUIREMENTS FOR THE PH.D. IN CLINICAL PSYCHOLOGY**

Required courses and training experiences fulfill requirements for clinical psychology licensure in Massachusetts and APA criteria for accreditation of clinical psychology programs. **Students in the clinical psychology program are required to take all the following courses:**

GENERAL COURSES

Psych 2010 [Proseminar] Contemporary Topics in Psychological Research Psych 3200 Research Seminar in Clinical Science (years 1-3)

ETHICS

Psych 3900 Professional Ethics

HISTORY OF PSYCHOLOGY

Psych 2050 History of Psychology

INDIVIDUAL DIFFERENCES

Psych 2040 Contemporary Topics in Psychopathology

RACIAL-ETHNIC BASIS OF BEHAVIOR

Psych 2430 Cultural and Individual Diversity

BEHAVIORAL ASSESSMENT & TREATMENT

Psych 3250 Psychological Testing Psych 2460 Diagnostic Interviewing

Psych 2420 Cognitive-Behavioral Treatment of Psychological Disorders Psych 2445 Psychological Treatment Research

STATISTICS AND PSYCHOMETRICS

Psych 1950 Intermediate Statistical Analysis in Psychology Psych 1952 Multivariate Analysis in Psychology

Psych 3800 Psychometric Theory or 2070 Psychometric Theory and Method Using R

RESEARCH DESIGN AND METHODS

Psych 1952 Multivariate Analysis in Psychology (meets Department statistics requirement also, as above)

**Students must take at least one course in each of the following areas.** *(Note: Affective and Social Neuroscience can fulfill the requirement for either Biological Bases of Behavior or Cognitive-Affective Bases of Behavior, but not both.)*

BIOLOGICAL BASES OF BEHAVIOR

PSY 1202 Modern Neuroanatomy

PSY 1352 Foundations of Cognitive Neuroscience Research Psych 1355 The Adolescent Brain

Psych 1303 The Human Brain, Then and Now Neuro 2000 Neurobiology

Psych 1702 The Emotional Mind

COGNITIVE-AFFECTIVE BASES OF BEHAVIOR

Psych 2400 Cognitive Psychology and Emotional Disorders

SOCIAL BASES OF BEHAVIOR

Psych 2500 Proseminar in Social Psychology

Psych 3515 Graduate Seminar in Social Psychology

# Additional Training Requirements

In accordance with APA guidelines for the accreditation of clinical psychology programs, clinical students also receive training in consultation and supervision informally within the context of clinical practica in psychological assessment and treatment (e.g., Psych 3050 Clinical Practicum), and formally in Psych 2445 (Psychological Treatment Research) and Psych 3900 (Professional Ethics). Such training begins in the second semester of the first year and typically continues throughout the student’s course of study in the program. Students receive broad and general training in cutting-edge developmental psychology during the first-year seminar (Psych 2010, Contemporary Topics in Psychological Research). Students also attend the twice-monthly Clinical Science “brown bag” speaker series. Finally, students complete a year-long clinical internship.

Students are responsible for ensuring that they take courses in all the relevant and required areas listed above. Students wishing to substitute one required course for another should seek advice from their advisor and from the Director of Clinical Training prior to registering. During the first two years, students are advised to complete as many curricular and academic requirements as possible. Many requirements can be completed before the deadlines stated below.

See page 10 for additional information about Practical Clinical Training.

# Goals, Objectives, and Expected Competencies

The philosophy and training model of the program is the clinical scientist model.

# Goal #1: To train clinical psychological scientists

**Objectives for Goal #1**: The student will successfully complete the second-year research project and the doctoral dissertation. The student will publish original scholarly work in peer-reviewed scientific journals and in edited books. The student will present research at scientific conferences. The student will secure funding for research.

**Competencies Expected for these Objectives:** The relevant competencies are the ability to design, conduct, and write up one’s original research.

**How Outcomes are Measured and Minimum Levels for Achievement (MLA) for these Objectives/Competencies:** The MLA for competency in designing, conducting, and writing up one’s original research is successful completion of both the written evaluation of the doctoral dissertation and the oral defense of the dissertation as evinced by all four members of the dissertation committee voting to “pass” the student’s written doctoral dissertation and the student’s oral defense of the dissertation. Measurable outcomes relevant to the objectives for this goal include the number of published peer-reviewed journal articles, chapters, conference presentations, external grants secured, and internal grants/fellowships earned.

# Goal #2: To train competent clinical practitioners

**Objectives for Goal #2:** The objectives comprise: 1) acquisition of basic clinical skills, 2) ability to diagnose mental disorders, 3) ability to conduct and interpret standardized psychological tests, and 4) acquisition of psychotherapeutic knowledge and expertise.

**Competencies Expected for these Objectives:** 1) Exhibiting basic clinical skills essential for practice and for learning from supervision; 2) diagnostic expertise; 3) testing expertise; and 4) psychotherapeutic expertise.

**How Outcomes are Measured and Minimum Levels for Achievement for these Objectives/Competencies:** The MLA for competency #1 is a score at least a 2 (Adequate) on the 1 through 4-point Clinical Skills Evaluation Form for each of 18 criteria (Appendix C, pp. 30-31). The MLA for competency #2 is a grade of B+ in Psych 2460 (Diagnostic Interviewing). The MLA for competency #3 is a grade of SAT in Psych 3250 (Psychological Testing). The MLA for competency #4 is a grade of B+ in Psych 2420 (Cognitive-Behavioral Treatment of Psychological Disorders).

**Goal #3: To train scholars knowledgeable in psychopathology and clinical science: Objectives for Goal #3:** To master the current literature in psychopathology and clinical science.

**Competencies Expected for these Objectives:** Students will be capable of understanding the literature in psychopathology and clinical science, and to evaluate theoretical, empirical, and clinical claims critically.

**How Outcomes are Measured and Minimum Levels for Achievement for these Objectives/Competencies:** The MLA for the competencies for this goal is a grade of B+ in Psych 2040 (Contemporary Topics in Psychopathology), Psych 2445 (Psychological Treatment Research), and Psych 2420 (Cognitive-Behavioral Treatment of Psychological Disorders) and passing the Generals Exam at the Ph.D. level by achieving a score of “Pass Minus” on each question of the exam.

**TIME-LINE OF SPECIFIC DEPARTMENTAL REQUIREMENTS FOR THE**

**PH.D. IN CLINICAL PSYCHOLOGY**

**First Year**

## Required Courses (B+ or above):

Psych 2010, Contemporary Topics in Psychological Research (Proseminar); this is a survey of the several areas of study covered by the department, team-taught by all members of the faculty.

Psych 1950, Intermediate Statistical Analysis in Psychology

## First-year research project.

Students in the first year are required to select a faculty mentor who will help the student develop a research project (either part of ongoing faculty research or research initiated by the student and approved by the mentor). A proposal of the project is submitted in late fall for approval by the Committee on Higher Degrees (CHD). A scholarly report is required and will be evaluated by the mentor and completed by May of the first year.

**Second Year**

## Required Courses (B+ or above):

Psych 1952, Multivariate Analysis in Psychology

Psych 2040, Contemporary Topics in Psychopathology (by the end of the second year).

## Second-year project.

Students should begin work as early as possible under the supervision of a faculty member and second reader, assigned by the Committee on Higher Degrees, on an empirical research project of their own devising. The project must be completed and written up in the style of a journal article prior to the end

of the spring term of the second year. An oral report on the findings is presented at a meeting scheduled late in the spring of the second year, attended by all faculty members and graduate students.

**Comprehensive Examination Requirement**

A major milestone in the program has long been the General Examination. Beginning **in August 2021**, students will have the following two options to satisfy this requirement. Students **admitted in or after 2022** will be offered the Major Area Paper Option only.

*1. Traditional Option*

The General Exam is a six-hour examination covering in considerable depth the fields of clinical psychology and psychopathology. Faculty members in the clinical program develop, administer, and grade the exam. The exam is administered during the summer before the start of the third year.

*2. Major Area Paper Option*

In lieu of the traditional option, students may complete a Major Area Paper (MAP). This can take the form of a comprehensive review paper (similar in length and format to an article in *Psychological Bulletin, Clinical Psychology Review,* or the *Annual Review of Clinical Psychology*), a meta-analysis, or an extended grant proposal (e.g., an F31 application with an extended accompanying literature review). The topic of the MAP may be related to the dissertation topic but should not simply be the introduction to the dissertation. It is expected that the focus of the MAP will be related to the student’s main area of interest although this is not required. Students seeking breadth may complete a MAP on an adjacent topic to gain expertise in a secondary area. The topic of the MAP must be approved by the Clinical Area Faculty in advance.

The MAP must be submitted by February 1 of the G3 year. Students are expected to complete this requirement independently, and without significant input from their faculty advisor. Following submission of the written document, students will complete an oral examination where they will answer questions about the work and the topic area. The MAP will be evaluated by the faculty advisor and two additional faculty members selected by the Clinical Area.

**Clinical Case Conference**

\*\* Note: This is a requirement for all students admitted in or after 2022. It is also required for current students who select the MAP option.

In the G4 year, students enrolled in the clinical track will be required to present a clinical case. The presentation should last approximately one hour in total (including questions from the audience). The aim of this case presentation is two-fold: 1) to promote the scientific mindset and evidence-based practice in clinical care and 2) to develop case presentation skills for internship and/or job talks. All client information must be de-identified, and presentations must comply with HIPAA regulations.

To the extent possible, the presentation should demonstrate the following competencies:

1. Conceptualization, including an understanding of psychopathology and relevant contributions from developmental, social, cognitive, cultural, and biological domains.

2. Assessment, including a rationale for the assessment approach and methods chosen and evidence of the role of assessment in providing a diagnosis or comprehensive case conceptualization.

3. Integration of empirically supported interventions for the clinical problem, including strategies for adapting existing treatments to the clinical presentation of the client.

4. Clinical data, including a discussion of how these data informed treatment decisions.

5. Cultural competence, including recognition of client’s age, gender, sexual orientation, national origin, indigenous heritage, socioeconomic status, ethnic and racial identity, religious and spiritual orientation, as well as any developmental challenges or disabilities acquired in later life.

6. Therapeutic relationship, including how the client’s individual characteristics may have interacted with the student therapist’s own background, and any issues relevant to that.

7. Ethical issues, including a recognition of ethical and legal questions or concerns that may have influenced treatment decisions or that may require further consultation / action (e.g., mandated reporting).

8. Self-reflection, including topics such as: what the student learned from the case, how the student developed as an evidenced based practitioner, and what the student might have done differently.

8. Group discussion including the ability to generate appropriate questions for group discussion involving case conference participants.

9. Presentation skills, including clarity of presentation, organization, and use of available time.

**Third & Fourth Year**

## Doctoral Dissertation Prospectus.

By the end of the first term of the fourth year, students will complete the design for an original project (it often grows out of the second-year research study) that will culminate in the dissertation. The design is submitted to a prospectus committee, appointed by the CHD, consisting of faculty members interested in the topic. That committee must approve the plan, and its members ordinarily continue to work closely with the student. Alternatively, students may choose the three-paper option, consisting of three journal articles (published or submitted) addressing a common theme.

**Fifth Year**

## Thesis and Oral Defense.

The completed dissertation must be prepared as described in [*The Form of the Doctoral Thesis*](http://www.gsas.harvard.edu/academic/thesis.html)([http://www.gsas.harvard.edu/academic/thesis.html),](http://www.gsas.harvard.edu/academic/thesis.html%29) defended at an oral examination, and approved by the department faculty.

## Clinical Internship.

Ideally, this would occur in the fifth year. However, conducting research in clinical psychology and psychopathology usually takes more time to complete than research in other areas of psychology.

Accordingly, students often do their internship in either the sixth or seventh year in the program. Students are required to complete all course work and practicum training and to defend their dissertation prospectus prior to applying for internship. Students are strongly encouraged to complete all data collection for their dissertation prior to departing for internship.

Students in the Clinical Program must successfully complete internship before being granted their doctoral degree. For example, students who complete their internship in June or July will be eligible to receive their doctoral degree the following November (provided they have successfully defended their dissertation and completed all other degree requirements).

**Master's Degree**

Students may be recommended for the non-terminal degree of Master of Arts upon completion of the relevant GSAS residence requirements and satisfaction of the degree requirements detailed above for the first two years of graduate study (e.g., completion of the Second-Year Project). Allie Pagano typically contacts students when they are eligible to petition for this degree. However, it is the student’s responsibility to initiate and complete this process.

**PRACTICAL CLINICAL TRAINING**

Students in the Clinical Psychology Program are required to register for and complete six semesters of practical clinical training (e.g., PSY 3050 Clinical Practicum, PSY 3080 Practicum in Neuropsychological Assessment). This typically begins in the second semester of the first year and continues through the third (and sometimes fourth) year. Most students elect to enroll in practica each semester; however, this is not required. Students may refrain from clinical practica during one or more semesters to focus more intensively on their research. This is not at all discouraged; however, such an arrangement requires permission from one’s primary advisor.

Clinical practicum placements typically begin each July (or September) and are made in direct consultation with the Director of Clinical Training (DCT). Placements are made based on students’ clinical training goals, current level of experience, quality of the training site, and students’ current standing in the program (e.g., students who have failed to satisfy academic requirements will be advised to satisfy them before receiving a practicum placement). Students enroll in the “observational” practicum in the spring semester of their first year, and this occurs at Cambridge Hospital. Beginning in the summer after their first year, or the fall semester of their second year, students enroll in their first clinical practicum. More advanced clinical practica, including assessment/testing practica, typically occur in the third year and beyond.

Students should inform the DCT in writing each February 1st which practicum placement best suits their interests and skill level, plus two others should their first choice be unavailable. The purpose of this process is to ensure that all students receive adequate guidance on obtaining the placement that best matches their qualifications and will best prepare them to meet their intended goals.

# Clinical practicum placements should meet the following criteria:

1. Provide 4+ hours of direct, practical training in evidence-based assessment and treatment procedures (engagement in more than 8 hours of clinical work per week must be approved by the DCT). This may involve:
	* Observing clinical assessments or treatments
	* Attending case conference and didactic sessions
	* Conducting diagnostic assessments
	* Performing psychological testing and report writing
	* Providing individual, group, or family therapy
2. Provide at least 1 hour of supervision for every 4 hours of direct client contact (a ratio of 1-to-1 is preferred). Sites must agree to provide:
	* At least 1 consistent supervisor to the student for the duration of the placement
	* A written evaluation of the student’s performance at the conclusion of the placement
3. Provide training for at least one semester (1-year placements are preferred)

Please see **Appendix A** for a list of practicum placements in which our students have trained in previous years.

Please see **Appendix B** for the Clinical Skills Evaluation Form completed by each student’s practicum supervisor at the end of the practicum.

# Focus on Clinical Science

Given the clinical science orientation of our program, we are committed to ensuring that students receive training in a range of evidence-based assessment and treatment practica. In addition, students are encouraged to seek out and develop opportunities to incorporate research experiences as part of their practicum training. This may take many different forms, depending on the training site, training faculty, and the individual student. Examples include:

Participating in program/treatment evaluation (including data analysis, manuscript preparation) Conducting a single-case experimental study of treatment provided (appropriate in all settings) Development of manualized assessment or treatment guidelines

# Policy on Voluntary Clinical Experiences

In addition to the recommended six semesters of practicum training, students may also engage in short- term voluntary clinical experiences as they arise (e.g., conducting assessments or interventions on a time-limited project). Students should receive DCT consultation and approval before engaging in such experiences.

# Clinical Internship

Students in the Clinical Psychology Program must complete a one-year clinical internship. This occurs following the completion of all academic and training requirements, typically during students’ fifth or sixth year of graduate study. Students must have defended their dissertation proposal successfully prior to applying for internship. Students should endeavor to collect all their dissertation data, if possible, prior to commencing their internship. Clinical internships provide students with an intensive, supervised clinical training experience and always occur outside the Department of Psychology. There is a formal application process (akin to applying to graduate programs) that is managed by the Association of Psychology Postdoctoral and Internship Centers (APPIC). Detailed information about internship programs and the application process can be found at [www.appic.org](http://www.appic.org/). The DCT and other faculty work closely with students to help prepare for clinical internship. Students are encouraged to speak with the DCT and other clinical faculty if they have any questions about preparing for internship (as well as post-docs and faculty positions).

**STUDENT PROGRESS REVIEWS**

At the end of each academic year, students provide their primary advisor with a review of their progress for that graduate year, including information about academic requirements satisfied, research productivity, teaching, clinical experiences, current and future funding arrangements, and a self- revaluation of basic competencies relevant for clinical practice (see **Appendix C**). Advisors provide students written feedback on their progress as well as guidance for future advancement in the program (**Appendix D**). The purpose of this process is to ensure that all students have ongoing feedback about their progress and that they receive continuous guidance regarding satisfaction of program requirements and steady progression of research, academic, and clinical development.

**DUE PROCESS AND GRIEVANCE PROCEDURE**

If a graduate student has a grievance with their advisor or other faculty, they should address that grievance as follows. Minor grievances are expected to be discussed maturely, and ideally resolved, with the “offending” parties. To address a major grievance, which includes sexual harassment and instances of unprofessional conduct (e.g., stealing or “fudging” data), graduate students should first talk either with the DGS (Head of CHD) [Director of Graduate Studies = Head of the Committee on Higher Degrees] or with one of the GSAS [Graduate School of Arts and Sciences] Deans (Garth McCavana or Margot Gill). These officers will discuss options and procedures with the graduate student. Graduate students will likely be encouraged toward informal discussion and mediation with confidential officers, especially if the complaint is of moderate seriousness and it is believed to be in the best interest of the student to resolve the issue informally. A formal complaint involves signing and filing a petition. This petition will be shown to the accused person who will file a written response, in turn shown to the complainant. FAS [Faculty of Arts and Sciences] states in writing that such an internal hearing procedure does not foreclose subsequent legal action, and that every effort will be made to protect the individual bringing the complaint from reprisals and to protect the respondent from irresponsible complaints. For more information about the time table and specific process for lodging a formal complaint, talk with the DGS or GSAS Deans.

**POLICIES REGARDING CONTINUANCE AND TERMINATION**

Each student’s advisor provides one-on-one mentoring and guidance regarding research, course work, teaching, and clinical activities throughout the year. At the end of each academic year, the student completes an Annual Report describing his or her achievements and progress in the program. This report provides the basis for a discussion between the student and the advisor regarding the student’s progress and plans for the upcoming year. Satisfactory progress enables the student to continue in the program. The report and this discussion also provide the basis for identifying any problems that may have arisen in course work, research progress, or provides the basis for discussion of progress with the student’s advisor. The advisor, in consultation with the Academic Director of the Clinical Program and the Director of Clinical Training (DCT), will specify in writing a timetable of what the student needs to do to rectify the problem and return to good standing (e.g., retaking a course, finishing course work to remove an Incomplete grade). Written feedback regarding the student’s success (or lack thereof) in meeting these objectives is provided by the advisor.

Practicum supervisors provide written feedback and evaluation of students on practicum, and they mail these reports to the Director of Clinical Training (DCT). If problems are identified, the DCT will inform the advisor of these difficulties. The advisor, the DCT, or both will meet to discuss the problem with the student and ascertain what needs to be done to rectify it. A plan to rectify matters will be put in writing, and written feedback regarding whether matters were rectified will be provided to the student.

Students who fail to achieve satisfactory grades in courses (UNSAT, B or lower, Incomplete), fail to make progress in research (e.g., not completing the Second-Year Project in a timely manner), fail to pass the Generals Exam at the Ph.D. level, or fail to receive satisfactory practicum evaluations are subject to termination from the program. Termination, however, occurs only after the student has been provided written feedback on what he or she needs to do to return to good standing, and has failed to achieve these objectives by the deadlines specified. The Department of Psychology’s Committee on Higher Degrees (CHD) is alerted to students who are having academic difficulties, and

the Head of the CHD is consulted regarding plans either to rectify the problem or to terminate the student from the program. Termination must be authorized via the CHD.

# Assessing Students in the Clinical Science Program

1. General Departmental Requirements

All students must be in academic good standing, according to the standards applied to all other students in the department.

1. Clinical Science Requirements

The Clinical Science Program has an obligation to provide society with intellectually, emotionally, socially, and morally aware psychologists who are prepared to serve society by caring for and improving the condition of others. In keeping with the APA’s Ethical Principles of Psychologists and Code of Conduct, including the cornerstone principle that psychologists must strive to benefit those with whom they work and take care to do no harm, the program has adopted the following requirements:

* 1. To work effectively with all patient populations, students must be competent in the following foundational capacities (based on those recommended by Kaslow et al., 2007, Journal of Consulting and Clinical Psychology):
		1. critical thinking
		2. judgment
		3. ethical behavior
		4. professionalism
		5. maintaining appropriate boundaries
		6. interacting effectively with others
		7. self-awareness regarding areas of weakness
		8. ability to respond to feedback
		9. ability to work effectively with others
		10. citizenship
		11. ability to regulate negative emotions (e.g., anger, anxiety)
		12. honesty and integrity
		13. emotional maturity
		14. ability to resolve conflict
		15. respect for and tolerance of diversity (racial, ethnic, religious, social or political)
		16. willingness to learn and grow as a professional
	2. If faculty members have serious concerns about deficiencies in a student's foundational competencies, the following procedure will be followed:
		1. The faculty member would raise the concerns in a formal meeting with the student.
		2. If there is no forthcoming evidence of clear and marked improvement, the faculty member would raise the concerns in a meeting of the clinical science faculty.
		3. The clinical science faculty would make suggestions about how to help the student, and the faculty member would try to implement these suggestions. Suggestions may include mentoring, tutoring, referral for counseling, recommendations for a leave of absence, or other forms of assistance designed to remediate difficulties and foster competency.
		4. If after a reasonable period there is no evidence that the student has improved, the faculty member would report this back to a meeting of the clinical faculty.
		5. Two or more of the clinical faculty would discuss the situation with the student and report this discussion to the clinical science faculty.
		6. The clinical faculty will discuss whether the student is likely to be able to improve in the relevant foundational competencies. If they decide that this is not likely, they will formally vote whether to ask the student to leave the clinical program. Prior to a faculty vote on dismissal from the program, it is advisable that the student be notified in writing of the concerns of the clinical faculty and have an opportunity to respond to those concerns.
		7. If the majority of the clinical faculty members vote to terminate a student from the clinical program on grounds of inadequate foundational competencies, the student will receive a letter signed by the head of the clinical area and the director of clinical training. The CHD will also be notified of the decision.
		8. Termination from the clinical program because of deficiencies in foundational skills does not necessarily mean that the student is terminated from the department; that is up to the CHD. Students who are terminated from the clinical program are free to engage in graduate work in other areas if they are willing and able to do so.

**STUDENT ADMISSIONS, OUTCOMES, AND OTHER DATA**

1. Time to Completion



Students can petition the program faculty to receive credit for prior graduate coursework, but it does not markedly reduce their expected time to complete the program.

1. Program Costs



Harvard Psychology Department

Standard Financial Aid Award, Students Entering 2021

The financial aid package for Ph.D. students entering in 2021 will include tuition and health fees support for years one through four, or five, if needed; stipend support in years one and two; a summer research grant equal to two months stipend at the end of years one through four; teaching fellowship support in years three and four guaranteed by the Psychology Department; and a dissertation completion grant consisting of tuition and stipend support in the appropriate year. Typically, students will not be allowed to teach while receiving a stipend in years one and two or during the dissertation completion year.

**Year 1 (2021-22) and Year 2 (2022-23)**

Tuition & Health Fees: Paid in Full

Academic Year Stipend: $30,560 (10 months)

Summer Research Award: $6,112 (2 months)

**Year 3 (2023-24) & Year 4 (2024-25)**

Tuition & Health Fees: Paid in Full

Living Expenses: $30,560 (Teaching Fellowship plus supplement, if eligible)

Summer Research Award: $6,112 (2 months)

**Year 5 (2025-26) -** *if needed; may not be taken* ***after*** *the Dissertation Completion year*

Tuition & Health Fees: Paid in Full

**Dissertation Completion Year** *(normally year 5, occasionally year 6)*

Tuition & Health Fees Paid in Full

Stipend for Living Expenses $30,560

The academic year stipend is for the ten-month period September through June. The first stipend payment will be made available at the start of the fall term with subsequent disbursements on the first of each month. The summer research award is intended for use in July and August following the first four academic years.

In the third and fourth years, the guaranteed income of $30,560 includes four sections of teaching and, if eligible, a small supplement from the Graduate School. Your teaching fellowship is guaranteed by the Department provided you have passed the General Examination or equivalent and met any other department criteria. Students are required to take a teacher training course in the first year of teaching.

The dissertation completion year fellowship will be available as soon as you are prepared to finish your dissertation, ordinarily in the fifth year. Applications for the completion fellowship must be submitted in February of the year prior to utilizing the award. Dissertation completion fellowships are not guaranteed after the seventh year. Please note that registration in the Graduate School is always subject to your maintaining satisfactory progress toward the degree.

GSAS students are strongly encouraged to apply for appropriate Harvard and outside fellowships throughout their

enrollment. All students who receive funds from an outside source are expected to accept the award in place of the

above Harvard award. In such cases, students may be eligible to receive a GSAS award of up to $4,000 for each

academic year of external funding secured or defer up to one year of GSAS stipend support.

For additional financial aid information, please refer to the Financial Support section of the GSAS website (gsas.harvard.edu/financial-support).

Psychology students are eligible to apply for generous research and travel grants from the Department. Registration and Financial Aid are always subject to maintaining satisfactory progress toward the degree.

*The figures quoted above are estimates provided by the Graduate School of Arts and Sciences and are subject to change.*

1. Internships





1. Attrition



1. Licensure



**Appendix A.**

**List of Potential Practicum Sites**

**Appendix A. List of Potential Practicum Sites**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Site** | **Supervisors/Contact Persons** | **Hours** | **Training Experiences** | **Notes** | **Year** |
| **McLean Hospital** |  |  |  |  |  |
| OCD Institute | Jason Krompinger, Ph.D., jkrompinger@mclean.harvard.edu | ~10hrs | -Individual exposure and response prevention therapy (8hrs)-Group therapy (1hr), supervision (1hr), case conference (1hr)See: <http://www.mclean.harvard.edu/patient/adult/ocd.php>  | Past students: All currently enrolled students (G2)-20hr minimum if carrying individual cases-Application Process: Rich will send out “call for applications” from Dr. Krompinger prior to end of calendar year | 2+ |
| OCD-I Junior | Alyssa Faro, Ph.D.Alfaro@partners.org | 20hrs/week\*Potential for flexibility | See PTC brochure for details: <http://www.massptc.org/welcome/default/view_sites> | Past students: Rachel Horn (G3)\*\*Relocated to Belmont Campus\*\*Application Process: PTC Process Please submit a Curriculum Vitae, cover letter and 3 letters of reference to Dr. Alyssa Faro | 2+ |
| Gunderson Residence | Karen Jacob, Ph.D.kjacob@mclean.harvard.edu | Negotiable; 1-2 days/wk | Clinical practicum students at the Gunderson Residence assess and treat adult women diagnosed with borderline and other severe personality disorder.  Students co-lead group therapy sessions and conduct Dialectical Behavior Therapy (DBT) with individual patients.  Opportunities to attend formal training for evidence based treatments, such as Mentalization Based Treatment (MBT) and DBT, are often available to rotating students during their practicum.  Hours per week are negotiable, but most students are here on Wednesdays and Thursdays. | Past students*:* Charlene Deming (G4), Alex Rodman (G3); Edward Patzelt (G3-G4),Erik Nook (G4), Adam Jaroszewski (G4), Chelsea Boccagno (G4), Daniel Coppersmith (G3), Shirley Wang (G4)2021/2022 students: Steph DeCross (G4)Application Process: Email Dr. Karen Jacob cover letter and CV |  |
| The LEADER (Law Enforcement, Active Duty, Emergency Responder) program in the Division of Alcohol and Drug Abuse at McLean Hospital | Kate McHugh, Ph.D. | 16-20hrs | Specialized Mental Health Services for First Responders – conduct individual sessions and group therapy; substance use, PTSD | Past Students: Franckie Ramirez (G3), Osiris Rankin (G5)Application Process: Email Dr. McHugh |  |
| Behavioral Health Partial Program | Contact: Felicia Jackson, Ph.D.: fjackson@mclean.harvard.eduDirector: Thröstur Björgvinsson, PhD, ABPP tbjorgvinsson@mclean.harvard.edu | 2 options:1 day/wk (no individual work)20hrs – group and individual therapy | At the Behavioral Health Partial Hospital Program (BHPP), we help individuals to develop skills that improve their mood and ability to function in hopes of allowing them to better cope with life circumstances. To achieve this mission, the BHPP utilizes cognitive behavioral therapy (CBT) approaches (including dialectical behavioral therapy [DBT] skills for a wide range of conditions such as mood and anxiety disorders, personality disorders, thought disorders, and substance use disorders. | Past Students: Payton Jones (G3)1 day/week: Email Dr. Jackson20hrs: Standard PTC process | 2+ |
| 3 East Day Program | Alison Yaeger, Ph.D. ayaeger@partners.org | 20hrs – not currently flexible with time | Dialectical Behavior Therapy with patients with Borderline Personality Disorder and related conditionsSee PTC brochure for details: <http://www.massptc.org/welcome/default/view_sites> | Past Students: Alex Millner (G3), Sarah Hope Lincoln, Christine Cha, Kenneth Allen, Rachel Vaugn-Coaxum (G5), Jessica Schleider (G5) Pete Franz (G3); Melissa Wei (G4)Application Process: Standard PTC process\*The program has become more stringent on time requirements  | 2+ |
| McLean Anxiety Mastery Program799 Concord Ave, Cambridge, MA, 02138 (McLean Hospital satellite clinic) | Jacqueline Sperling, Ph.D. jsperling@mclean.harvard.edu | 16-24 hours/week (July 1, 2021-July 31, 2022) | <http://www.mcleanhospital.org/programs/mclean-anxiety-mastery-program>Position Description: As part of the McLean Anxiety Mastery Program at McLean Hospital, practicum students will have the opportunity to co-lead clinical evaluations as well as cognitive-behavioral therapy (CBT) skills-based groups and exposure sessions. Practicum students also will participate in family meetings. Additionally, students will have unique opportunities to provide telehealth coaching sessions and home-based exposure sessions. Practicum students also will be able to engage in collaborative work with schools and school-based exposures. Trainees will attend an intensive series of didactics on implementing CBT with children over the summer, and there will be an ongoing didactic seminar as well as individual supervision throughout the training year. For this position, we are seeking advanced practicum students who have had prior graduate-level experience delivering CBT and/or working with children/adolescents.  | 2021/2022 students: Olivia Fitzpatrick (G3)Application Process: Standard PTC processApplication Requirements: We will begin accepting applications for the 2021-2022 year starting 11/01/2020 with a deadline of 1/4/21. Interested applicants should send a letter of interest, CV, two letters of recommendation, and a graduate transcript to Jacqueline Sperling, Ph.D. If applicants do not have two letters of recommendation on file, they can have their recommenders send letters directly to Dr. Sperling. Of note, we will be adhering to the MPA’s universal application deadline (1/4/21) and position offer date (2/8/21).   |  |
| Franciscan Hospital for Children - Inpatient Mental Health | Kristy Shapiro, Ph.D.kshapiro@franciscanchildrens.org | 20hrs (not currently flexible with time) | See PTC brochure for details: <http://www.massptc.org/welcome/default/view_sites> | Application Process: Standard PTC Process\*\* NOT CURRENTLY ACCEPTING NON PTC OPTIONS |  |
| Franciscan Hospital for Children - Community Based Acute Treatment | Kristy Shapiro, Ph.D.kshapiro@franciscanchildrens.org | Not indicated on brochure  | See PTC brochure for details: <http://www.massptc.org/welcome/default/view_sites> | Application Process: Standard PTC process\*\* NOT CURRENTLY ACCEPTING NON PTC OPTIONS |  |
| Klarman Center | Patricia Tarbox, LICSW PTARBOX@partners.org | 24hrs (flexible down to 20/week) | The Klarman Center is a 20 bed open door acute residential treatment center for adolescent girls and young women ages 16 to 26\*(\* slightly older patients are screened and accepted on a case by case basis) who suffer from a primary diagnosis of Anorexia Nervosa, Bulimia Nervosa and Binge Eating Disorder in addition to other co-morbid psychiatric diagnoses including Major Depression and Bipolar Disorder, Trauma and PTSD, Anxiety Disorders, including OCD, personality disorders and serious Substance Use Disorder. We specialize in the simultaneous assessment and treatment of all the diagnostic illnesses of each patient, not only the eating disorder. In addition to the residential Component of the program, we have a twelve hour per day, seven day per week step down partial hospital treatment program to assist transition to an outpatient level of care. I have a large multi-disciplinary staff consisting of psychologists, licensed clinical social workers, psychiatrists, clinical dietitians, RN’s and residential counselors,  expressive arts therapists and an annual cohort of trainees which includes psychology practicum and interns, Post doctoral Fellows. Second year social work interns, art therapy interns and a Psychiatry Fellow who is part of the Women’s Mental Health Division, which the Klarman Center is a part of with other residential programs who treat only women.  Our treatment model provides individual therapy three times per week with one clinician, family therapy once to twice per week with a separate clinician, full psychiatric assessment and psychopharmacological assessment, nutritional counselling and a daily robust group therapy schedule. Our lengths of stay tend to be longer given the complexity of our patients, and vary from an average of 6-8 weeks to many months, affording an opportunity to know our patients and families well. We have access to specialized consultations for Trauma and Substance Use from our well-known colleagues throughout the hospital. Our practicum trainees are required to complete 24 hours per week for a full year and they may begin any time from July, August or September. We provide two hours per week of individual clinical supervision, an opportunity for a separate group supervision with one of our attending psychologists and opportunities to attend the many Grand Rounds or specialized presentations available in our Division and the rest of the hospital. | Application: Requires a face-to-face interview with full clinical team and submission of a CV and three letters of recommendation. Any applicant interested may send their materials directly to Patricia Tarbox, LICSW |  |
| **MGH** |  |  |  |  |  |
| Center for Anxiety and Traumatic Stress DisordersMassachusetts General HospitalOne Bowdoin Square, 6th FloorBoston, MA 02114 | Dr. Jonah Cohen Jonah.cohen@mgh.harvard.edu | 10+ hours per week Note: 2 days/week qualifies for an Advanced Practicum MA | **Brief Description:** This practicum is designed to introduce students to the assessment and empirically supported treatments (ESTs) of patients suffering from various Anxiety Disorders as well as Complicated Grief. Students will be expected to work a **minimum of 10 hours per week** for one academic year. Students will receive in depth training in administration of various standardized instruments including but not limited to SCID, MINI, LSAS, etc. Additionally, students will be exposed to ESTs and be able to co-lead CBT groups as well as to treat individual patients under the direct supervision of Dr. Marques. Students must be available at least one evening per week to co-lead CBT groups. For students interested in research, opportunities may be available for collaboration on conference presentations and manuscripts. However, these research projects will require an additional time commitment. - Advanced students preferred but those with less clinical exposure will also be considered. However, students must have satisfactorily completed their SCID training course prior to beginning practicum. - July start would be preferred to allow for orientation to clinical procedures. However, in rare circumstances, September start date would be considered.Update as of October 2020: By next year we are working to expand the practicum a bit to include potential opportunities for group psychotherapy and potential to collaborate on research on such topics as dissemination/implementation, psychedelic medicine, and EMA on panic. | Past students: Nicole LeBlanc, Payton Jones (G4), Ben Bellet (G4)2021/2022: students: Daniel Coppersmith (G4)-Clinical research siteApplication: Email Dr. Cohen CV and Cover letter by 12/1 (past students have emailed in November and interviewed in December) by  | 2+ |
| Bipolar Clinic & Research Program, MGH, 50 Staniford Street, Suite 580, Boston, MA 02114 | Contact: Douglas Katz, Ph.D. DKATZ5@mgh.harvard.edu | 8hrs | Description: Deliver psychosocial interventions to patients with Bipolar Disorder and comorbid conditions using a variety of modalities. DCBI staff psychologists will provide Advanced Practicum students with weekly clinical supervision and didactic learning experiences related to Bipolar Disorder and its treatment.**Therapy/Intervention:**2-8 depending on case load**Assessment:** 0-5**Supervision:**1-2**Didactics:** 1-2**Percentage of direct client contact?** 95%**Approximate dates:** August 21, 2020 - August 20, 2021**Age range:** 18-75; **Clinical characteristics:** Primary diagnosis of Bipolar Disorder with frequent comorbid diagnoses including ADHD, Substance Use Disorders, Anxiety Disorders, OCD, and Personality Disorders.**Recommended weekly meetings:** Thursday 12:00 p.m.-1:00 p.m. Psychiatry Grand Rounds; Thursday 1:15 p.m.-2:00 p.m. DCBI Research Meeting**Didactic Trainings:** Psychosocial Interventions for Bipolar Disorder; Psychopharmacological Treatment of Bipolar Disorder; Administration of diagnostic, mood rating, and functional assessments | Past students: Alex Millner (G4), David Dodell-Feder, Kenneth Allen, Tina Chou (G4), Emily Bernstein (G4), Chelsea Boccagno (G5)-Clinical research site-Application process: Contact Dr. Katz | 2+ |
| Eating Disorder Clinical and Research Program  | Jenny Thomas, Ph.D.jjthomas@mgh.harvard.edu | 10hrs | The Practicum in Cognitive and Behavioral Therapies for Eating Disorders is a one-year program designed to provide high-level clinical training in evidence-based therapies for children, adolescents, and adults with eating disorders. The primary therapeutic modalities are cognitive-behavioral therapy for adults (Fairburn, 2008; Waller et al., in press) and family-based treatment (Lock & Le Grange, 2015) for children and adolescents. The goals of the program are to: (1) provide students with supervised training in the assessment of eating disorders, including the use and interpretation of psychometrically valid measures; (2) enhance students’ foundation in case formulation and behavior change in disordered eating; (3) support students in closely monitoring weekly progress (e.g., weight, binge, frequency, purge frequency, self-report symptoms) to tailor in-session interventions and optimize outcomes; and (4) apply both CBT and FBT in a real-world clinical setting with both competence and fidelity. The Practicum takes place at the MGH Eating Disorders Clinical and Research Program (EDCRP). The EDCRP is an outpatient clinic that serves patients ages 10 and up with a variety of clinical presentations including anorexia nervosa, bulimia nervosa, binge eating disorder, avoidant/restrictive food intake disorder, rumination disorder, and other feeding and eating problems. All students get direct experience providing clinical evaluation, CBT, and FBT for a diverse set of patients; receive weekly supervision from expert clinicians who are experienced in these modalities; participate in a weekly multidisciplinary case conference; and receive specialized didactics. Individual supervision will include case discussion, review and rating of the supervisee’s taped therapy sessions, role-playing exercises, formative feedback, and bespoke homework assignments (e.g., directed reading, self-practice with CBT skills). To support their development as scientist-practitioners, students also attend the EDCRP weekly research laboratory meetings to discuss ongoing clinical research projects.The program is designed for doctoral students who have a background in cognitive-behavioral therapy and a clinical and research interest in eating disorders through their prior coursework and training. The Practicum carries a minimum 10-hour commitment (i.e., 6 hours of direct patient contact, 1 hour of individual supervision, 1 hour of multidisciplinary case conference, 1 hour of research meeting, 1 hour of session preparation and didactics). Students work closely with EDCRP faculty, including practicum supervisors Drs. Jennifer Thomas, Kamryn Eddy, Kendra Becker, and Cathryn Freid.  | Past Students: Shirley Wang (G3)Application process: Contact Dr. Thomas | 2+ |
| MGH Depression Clinic and Research Program | Dr. Paola Pedreli: ppedrelli@mgh.harvard.edu | 16hrs | Description: Trainees will conduct assessments in the context of myNIMH funded RO1 looking to develop objective phenotypes of depression based on passive assessments through a wearable and mobile phone sensors.The practicum student will be expected to spend 16 hours weekly at the DCRP conducting standardized clinical assessments and deliveringevidence-based Cognitive-Behavioral Therapy for depression in the context of clinical trials. Examples of clinical diagnosticassessments that the practicum student will become adept inadministering are: the MINI-International Neuropsychiatric Interview (MINI), the Hamilton Depression Rating Scale (HDRS), the Hamilton Anxiety Rating Scale (HAM-A), the Inventory of Depressive Symptomatology (IDS), the MGH Antidepressant Treatment Response Questionnaire (ATRQ), the Columbia- Suicide Severity Rating Scale (C-SSRS), and the Clinical Global Inventory (CGI).The trainee will be supervised by Drs. Pedrelli Paola and LaurenFisher. Drs. Pedrelli and Fisher have extensive experience conducting clinical supervision with graduate students and post docs. Supervision will consists in providing education on CBT framework, conductingrole-plays and review of audiotaped sessions. The practicum studentwill undergo extensive training in the administration of clinicalmeasures including reviewing educational material, observing and being observed administering the measures, and receiving feedback by a multidisciplinary team of psychologists and psychiatrists staffmembers of the DCRP. It is expected that reliability will be reached between four and six weeks from beginning of the practicum.Examples of studies the practicum student will assist with are: 1)RCT examining the effectiveness of a manualized CBT adapted forpatients with depression and Traumatic Brain Injury;  2) A studyexamining the accuracy of smartphone and wristband sensors to detect depressive symptoms; 3) additional clinical trials are undergoing examining efficacy of antidepressant treatments for treatment resistant depression. | -Past students: Chelsea Boccagno (G3)2021/20211 students: Azure Reid-Russell (G3)-Clinical Research site-Application: send a cover letter, CV and 2 letters of recommendation to Dr. Paola Pedreli  |  |
| ARMS (Addiction Recovery Management Service) | Dr. Jessica Nargiso JNARGISO@mgh.harvard.eduDr. James McKowenJMCKOWEN@mgh.harvard.edu |  | Outpatient treatment of adolescents and young adults with frequently comorbid substance use disorders and other mental health disorders. Co-lead client and parent groups. | Past Students: Osiris Rankin (G4)2021/2022 Students: Ellen Finch (G4) |  |
| MGH PRIDE Clinic – Community Psychiatry1 Bowdoin Sq., 6th floor Boston MA 02116 | CBT: Luana Marques, Ph.D. (Director)lmarques@partners.orgContact: Dr. Soo Youn: SooJeong.Youn@mgh.harvard.edu | 2 days | Note. No practica for 2021 training yearCommunity Psychiatry PRIDE provides excellence in training, coaching and research for underserved and vulnerable populations. For more information: <https://www.massgeneral.org/psychiatry/research/community-psychiatry-pride> We have one year-long practicum spot, and the practicum starts in the fall semester.  As part of the practicum, students are trained in 1) empirically supported, modular, transdiagnostic skill-based treatments, as well as 2) in providing coaching to paraprofessionals in these skill-based interventions to underserved populations. To enhance learning, students are assigned two hours of group supervision a week with professionals from other disciplines, including residents, fellows, social workers, and educators, and are also invited to attend PRIDE lab meetings. Research that enhances the mission of PRIDE is also encouraged. Practicum students are expected to be on site a minimum of 2 days a week. | Past Students: N/AApplications are due end of summer, and include a cover letter and CV; Send to Dr. Youn |  |
| MGH PRIDE Clinic – Neuropsychological testing1 Bowdoin Sq., 6th floor Boston MA 02116 | Nancy Lundy, Ph.D.Lundy.nancy@mgh.harvard.edu |  |  | Past Students: N/A |  |
| Integrated Brain Health |  | 20hrs | The Advanced Clinical Psychology Practicum in Integrated Brain Health is a 6-month to one-year program designed to provide extensive clinical training in the development of psychosocial skills based interventions for medical patients and the conduct of clinical trials. The bulk of the experience will be in delivering evidence-based brief skills interventions with 3 main goals: 1) preserving brain health (e.g., emotional, physical and cognitive function) across the lifespan; 2) promoting recovery after injury or surgery; and 2) optimizing management of illness. Interventions are delivered to individual patients, dyads of patients and caregivers, and groups using in person, live video or a combination. The advance practicum has 3 core components that are tailored for each individual student. The *clinical component* involves providing clinical care to individuals or groups of individuals with chronic pain, mild cognitive impairment, mild traumatic brain injury, orthopedic injuries, young onset dementia and neurofibromatosis as part of federally funded projects. Interventions are delivered either in person or via secure telehealth. The *training component* includes developing expertise in the delivery of manualized interventions, dealing with challenging cases, and using secure telehealth. Students will participate in individual and group supervision. The research component is optional and includes participation in weekly research meetings, data analyses (quantitative and qualitative), leading or assisting with manuscripts and conference presentations. The practicum students will have the opportunity to interact with predoctoral interns in the Brain Health elective of the MGH/HMS APA approved internships track, postdoctoral fellow and clinical psychologists. **In person meetings are not required and students from outside Massachusetts can assist as part of our virtual federally funded projects and participate in the required trainings via secure video. Requirements:*** Doctoral students with a background in clinical health psychology
* 20-hour weekly commitment
* Prior experience delivering manualized interventions is preferred but not required
* One year commitment is preferred but not required

**Opportunities available for 2020-2021 position:** Available for students residing in MassachusettsCo-leading/Leading manualized in person lifestyle modification groups for individuals with mild cognitive impairment or memory concerns (“My Health Brain”). Co-leading/Leading a manualized in person group mind-body physical activity program for older adults with chronic pain and subjective cognitive decline.Available for all students regardless of location:Serving as clinician on a live video manualized skills training program (4 sessions) for patients with mild traumatic brain injury and comorbid depression. Co-leading/Leading a manualized live video group mind-body physical activity training program (8 sessions) for patients with comorbid knee osteoarthritis, depression, and obesity from rural Kentucky.Co-leading/Leading a manualized live video group skills training program (8 sessions) for adults with neurofibromatosis.Co-leading/Leading a manualized live video group skills training program (8 sessions) for adolescents with neurofibromatosis. | Past Students: N/A**Application:** Submit a CV, cover letter, and 2 references (past or current mentors) to mvgates@mgh.harvard.edu Additional information about clinical service, research trials and team: <https://www.integratedbrainhealth.org/> |  |
| Center for Psychiatric Oncology & Behavioral Sciences at MGH Cancer Center | Jamie Jacobs (jjacobs@mgh.harvard.edu or 617-386-6607) and copy Dr. Lara Traeger (ltraeger@mgh.harvard.edu).  | 10 hrs | The Advanced Practicum in Psycho-Oncology is a one-year program in the Center for Psychiatric Oncology & Behavioral Sciences in the Department of Psychiatry at the Massachusetts General Hospital (MGH). The program is designed to provide extensive clinical training in psycho-oncology. The goals of the program are to: (1) provide students with supervised training in psychotherapy with patients and family caregivers during treatment for cancer and cancer survivors; (2) enhance the externs’ foundation in evidence-based interventions for psychosocial well-being and behavior change in the context of oncology; (3) provide an opportunity for externs to formulate cases and participate in report writing; and (4) enhance general competency in collaborating with a multidisciplinary care team to provide optimal clinical care. These goals are accomplished through direct supervised experiences with diverse patients at various stages along the continuum of cancer care, the opportunity to work with multidisciplinary teams within the cancer center, and didactic experiences specific to oncology, psychology, and behavioral medicine.The core of the experience takes place in the MGH Center for Psychiatric Oncology & Behavioral Sciences. This is an outpatient setting in which students gain experience with a variety of patient populations receiving treatment, nearing end of life, or coping with long-term or late onset issues in cancer survivorship. Patients may be individuals, couples, or families and may be adolescents, young adults, or adults. Types of cancer include breast cancer, lung cancer, hematologic malignancies, gastrointestinal cancer, prostate cancer, genitourinary cancer, melanoma, multiple myeloma, brain tumors, and other malignancies. Patients or family members may be seen in the clinic or during an infusion appointment in a private room. Students will gain experience with a variety of disorders and challenges including depressive disorders, anxiety disorders, adjustment disorders, post-traumatic stress disorder, substance abuse, mild cancer treatment-related cognitive impairments, symptom management, adherence to treatment, and survivorship issues. Therapeutic treatments are evidence-based including cognitive behavioral therapy, dialectical behavioral therapy, mindfulness, and acceptance commitment therapy.The program is for doctoral students who have a background in behavioral medicine and or cognitive-behavioral therapy through their course work and training, with at least two full-time academic years of graduate education in psychology. Eligible students also must have completed at least one year of supervised training in behavioral medicine (preferred) and/or cognitive behavioral therapy. The Advanced Practicum is a 10-hour commitment with at least 25% in face-to-face patient contact and at least 50% in service-related activities. Students work closely with faculty within psychiatric oncology. At the minimum, the faculty provides 1 hour of individual supervision and 1 hour of group supervision per week. Semi-annual evaluations will take place and be communicated to the degree-granting doctoral program. In addition, practicum students may participate in a weekly seminar in behavioral medicine, and a monthly psych-onc staff meeting. They can attend cancer center grand rounds, psychiatry grand rounds, and other disease-specific grand rounds. They will also have the option to participate in multidisciplinary team meetings (e.g., Center for Psychiatric Oncology & Behavioral Sciences monthly staff meetings, Cancer Outcomes Research & Education Program weekly meetings, Cancer Survivorship Research Program semi-monthly meetings). **Specific information for the upcoming 2020-2021 practicum year:*** The student will conduct all clinical opportunities for face-to-face hours via telehealth with MGH and HIPAA-approved videoconferencing. Nearly all supervision is by telephone. Therefore, the **practicum student is not required to be on-site** at MGH. However, the student is welcome to come in person for meetings, rounds, etc. (as these resume).
* All clinical face-to-face hours will come from the following clinical research studies within the MGH Cancer Outcomes Research & Education Program:
	+ STRIDE: Symptom Targeted Randomized Intervention for Distress and Adherence to Adjuvant Endocrine Therapy after Breast Cancer. An NCI-funded RCT of a 6-session, small-group, CBT-based telehealth intervention to improve symptom management, reduce distress, and enhance adherence.
	+ Neuro-CARE: A 6-session, individual, CBT-based telehealth intervention to reduce clinically significant anxiety in family and friend caregivers of patients with malignant gliomas, funded by the American Society of Clinical Oncology’s Conquer Cancer Foundation.
	+ The Transitions Program: An RCT of a 5-session CBT- and acceptance-based intervention to improve quality of life in adults who recently completed treatment for cancers with high risk of recurrence, funded by private donation.
* Additional opportunities:
	+ While not mandatory, practicum students may have the option to participate in research-based activities if they so choose, such as contributing to abstracts or manuscripts.
* Start date: This practicum will start on July 1, 2020 and continue for one year. However, there is some flexibility around this date at the student’s request.
* As a point of reference, our current practicum student from the 2019-2020 practicum year spent approximately 4-5 hours per week in face to face clinical work, 2 hours/week in supervision, and 1-2 hours in meetings, talks, or other learning opportunities.

  | Application: CV and Cover letter\*Virtual for 2021/2022 training year\* Though as in person meetings resume (e.g., rounds you can attend these) |  |
| Frontotemporal Disorders Unit, Department of Neurology (Charlestown Navy Yard),  | Bonnie Wong, Ph.D., Bonnie.Wong@mgh.harvard.edu |  | The MGH FTD Unit is a comprehensive, interdisciplinary clinical research program focused on Frontotemporal Degeneration and related disorders, including Early Onset Alzheimer’s Disease, Primary Progressive Aphasia (PPA), Behavioral Variant FTD (bvFTD), Posterior Cortical Atrophy, Corticobasal Syndrome (CBS), and Progressive Supranuclear Palsy (PSP). The FTD Unit provides structured clinical research activities that include neuropsychological assessment, speech and language evaluation, neurologic examination, structural and functional neuroimaging, education and counseling of patients and caregivers, and ongoing monitoring of symptoms through research protocols. In addition, specialized services are available in partnership with other local providers, including genetic testing and counseling, and caregiver support. Due to the rarity of conditions, only a small number of students and clinicians have the opportunity to work with these patients and gain knowledge about proper assessment and treatment. Graduate students in neuropsychology work with patients diagnosed with a range of neurodegenerative disorders. In addition to mastering test administration and interpretation of neuropsychological test batteries, students are trained to write brief, targeted clinical neuropsychology reports that are used for both clinical follow-up with patients and in research studies. Neuropsychology trainees develop a nuanced understanding of how to integrate behavioral testing, patient and family reports, and clinical judgment to formulate diagnostic impressions. Students also participate in weekly didactic seminars, clinical case conferences, and contribute to unit research responsibilities and opportunities. Contributions to presentations and papers are encouraged, including case studies, analysis of longitudinal data, and educational materials. Preferred skills for working in the MGH FTD unit include neuropsychological assessment experience (tests of memory, reasoning, executive functioning), knowledge about neurodegenerative conditions, strong organizational and interpersonal skills, and experience with research methods and data analysis.  |  |  |
| OCD and Related Disorders Clinic | Sabine Wilhelm, Ph.D., Wilhelm@psych.mgh.harvard.edu |  | - Cognitive-behavioral individual Tx of OCD, BDD, trichotillomania, and tic disorders-Supervision and team meetings | Past students: N/A-Clinical research site\* Not currently accepting practicum students | 2+ |
| Home Base [www.homebaseprogram.org](http://www.homebaseprogram.org) | Elizabeth Goetter, Ph.D.GOETTER@mgh.harvard.edu |  | The SettingThe Red Sox Foundation and Massachusetts General Hospital Home Base Program serves veterans of all eras (with a focus on post 9/11 veterans) by treating combat-related posttraumatic stress disorder and related mental health problems. We provide clinical care to veterans as well as support for their families who are dealing with deployment- or combat-related stress and/or traumatic brain injuries. The Home Base Program has two primary clinical programs: an Outpatient Clinic and an Intensive Clinical Program (2-week treatment program for veterans with PTSD which includes daily individual and group therapy). The Home Base Program also offers educational courses and materials for health care providers, first responders and the public. We are bringing together world-class researchers seeking medical breakthroughs in the prevention, diagnosis and treatment of traumatic brain injury and stress-related disorders. The Practicum ExperienceThis is a one-year practicum for advanced doctoral students in clinical/counseling psychology that is designed to provide training in the evaluation, assessment, and clinical care of deployment related stress, posttraumatic stress disorder, traumatic brain injury, substance use comorbidity, and complicated grief in veterans and their families. Depending on availability and interest, there may be opportunities for research as part of the student’s practicum experience.  Individual clinical supervision (2 hours per week) from 1-2 licensed psychologist(s) will be provided. Some didactic trainings may be offered, and practicum trainees can attend Psychiatry Grand Rounds at MGH. We are unable to provide financial compensation to the practicum trainee.Applicant RequirementsTrainees must have completed a minimum of two full‑time, post‑bachelor's academic years of graduate education in an APA-accredited psychology doctoral program. A minimum of two years of previous practicum experience is required. Trainees must commit to two days and 16 hours per week. Start and end days are flexible and can be decided upon with the applicant once they are hired. | 2021/2022 Students: Emily Mellen (G3)Interested applicants should forward a letter of interest addressed to Dr. Elizabeth Goetter, along with curriculum vitae (that includes the name and contact information of 3 references) to Cheryl Brathwaite, cbrathwaite1@partners.org. Home Base Program 1 Constitution Wharf, Charlestown MA, 02129, [www.homebaseprogram.org](http://www.homebaseprogram.org). Applications will be accepted on an ongoing basis until December 31. Interviews will occur in January and completed by January 31 | 2+ |
| Home Base – Neuropsych Track | Dr. Douglas Terrydterry@mgh.harvard.edu |  | Neuropsychological Assessment of military veterans in program co-sponsored by the Boston Red Sox Foundation and MGH, based at MGH | Past Students: Emily Bernstein (G4), Erik Nook (summer between G5 and G6); Adam Jaroszewski (summer between G5 and G6) |  |
| **Center for Anxiety and Related Disorders (CARD)**  | CARD is affiliated with Boston University. |  |  |  |  |
| Child Anxiety Disorders | Rachel Merson, Ph.D., rmerson@bu.edu | 16hrs | See <http://www.bu.edu/anxiety/> for more information about the center.The Child and Adolescent Fear and Anxiety Treatment Program at the Center for Anxiety and Related Disorders (Child CARD) at Boston University is a university-based, specialty clinic, committed to providing evidenced-based clinical services to youth experiencing difficulty managing fears, anxiety, and other related conditions. The program provides state-of-the-art evaluations and treatment for children and adolescents between the ages of 3 and 17. We conduct a comprehensive initial evaluation with each new client upon which therapeutic recommendations are based. Treatment is delivered from a cognitive-behavioral framework and is typically short-term (12-16 sessions) in nature. In working with our clients, we often collaborate with other professionals involved in the child’s care including pediatricians, teachers, psychiatrists, and other mental health providers.We are pleased to offer a **16-hour a week practicum** placement for advanced graduate students (typically 3rd year and above). Students will be trained in evidence-based assessment and intervention for youth with anxiety and related conditions (e.g., OCD, depression, tic disorders, trichotillomania), and carry a caseload of 6-8 patients. In addition to providing individual and family-based treatments, students will conduct comprehensive diagnostic evaluations and be trained in semi-structured interviewing techniques and making differential diagnoses. All practicum students are required to participate in our week-long Brave Bunch program, an intensive group treatment for children with selective mutism, which will take place during the week of August 10th. Opportunities to participate in youth anxiety groups and parent training groups throughout the year also may be available. Students will receive one hour of individual supervision, one hour of group supervision, and will attend our weekly clinical team meeting and bi-weekly Brown Bag trainings. The clinical team meetings and Brown Bag trainings are held on Wednesday mornings. The practicum starts on **July 1, 2020 and is a 12-month placement, ending on June 30, 2021. There will be a mandatory orientation and training for all new students at the beginning of July**. | Past Students: Rachel Vaughn-Coaxum (G3), Jessica Schleider (G3), Melissa Wei (G3), Katherine Corteselli (G3, G4)2021/2022 students: Steven Kasparek (G3)Application: Interested applicants should submit a copy of their CV, a cover letter, a clinical writing sample (e.g., intake report, treatment summary), and one letter of recommendation to Rachel Merson by January 6, 2020. Interviews with selected candidates will take place on January 16th and January 17th.  |  |
| Adult Anxiety Disorders | Lisa Smith, Ph.D., smithl@bu.edu | 2 days | See <http://www.bu.edu/anxiety/> for more information about the center.Outpatient assessment and CBT with adults with anxiety and related disorders | Past Students: Tina Chou (G3), Emily Bernstein (G3), Erik Nook (G3), Adam Jaroszewski (G3), Osiris Rankin (G3), Ben Bellet (G3), Mike Osorio (G3), Ellen Finch (G3)2021/2022 students: Shaan McGhie (G3)Application: If first choice, contact Dr. Lisa Smith for “early decision” option in early November expressing interest and attaching CV |  |
| Advanced Practicum in Behavioral Medicine | John D. Otis, Ph.D., johnotis@bu.edu | 8-16hrs | Behavioral Medicine is the interdisciplinary field concerned with the development and integration of behavioral, psychosocial, and biomedical science knowledge and techniques relevant to the understanding of health and illness, and the application of this knowledge and these techniques to prevention, diagnosis, treatment and rehabilitation. The Behavioral Medicine Program will give students the opportunity to develop clinical skills for working with patients with a variety of presenting problems including chronic pain, anxiety, stress conditions, sleep, smoking, and substance use. A specific focus of this program is psychological approaches to chronic pain management. Students will receive training in assessment and individual therapy. Students will have the opportunity to see patients and participate in research/writing. This advanced practicum placement is flexible and may range between 8-16 hours per week depending on student interest and training needs. http://sites.bu.edu/cardbmed/ | Past Practicum Student: Shelley Kind (shelleykind@gmail.com). Shelley has offered to speak with anyone who is interested in hearing about her experience in the practicum. No Harvard students to dateApplication: Contact Dr. John Otis, Ph.D.  |  |
| Interventional Neuropsychology Program (ING) | Bonnie Wong, Ph.D., ABPP/CN, wongb@bu.edu | 10 hrs | ING offers clinical services for a wide-range of neuropsychological and neuropsychiatric needs. Our treatment and assessment model involves brief, targeted neurocognitive assessment for diagnostic clarification and to identify potential areas of intervention and treatment; cognitive-behavioral therapy for attention/executive functioning and memory skills; and ongoing monitoring that includes repeat cognitive testing as needed.Students will be trained in writing brief neuropsychological reports for referring providers, educators, and clients, with a turn-around time of two weeks or less after completion of testing. We provide patient-centered, therapeutic feedback, which will include referrals to tailored cognitive treatments (individual, group), provided either as a clinical service or as part of an IRB-approved research study.The ideal candidate would be an advanced-level (third year and above) graduate student with experience in neuropsychological testing and traditional report writing, and training in cognitive-behavioral therapy. | Past Students: N/AApplication Process: Contact Dr. Wong |  |
| **VA Boston Health Care System (Boston VAMC, Jamaica Plain/Boston** | **Overview of all VA Practica**:Please note that each rotation has assigned days for attendance that are required, and that vary across rotations. Please pay close attention to these time commitments for each rotation and discuss any questions you might have with the relevant supervisor(s). These days are typically non-negotiable due to the stringent space demands that exist in this hospital setting. The practicum rotation has the right to rescind an offer to a student who accepts, then states after accepting that he/she cannot be at the VA on any portion of the days specified when the offer was accepted.Please also note that the listed practica do not meet Massachusetts requirements as Advanced Practicum, and as a result will not qualify as clinical hours for MA licensure. Please verify the status of the rotation at the time of your interview. **See Practicum Brochure**: https://www.boston.va.gov/psychologytraining/2021PracticumBrochure.pdf**Application Details**: **For affiliate students (i.e Harvard students),**applications will be accepted **beginning on Wednesday, November 27, 2019**; interviews will begin to be arranged the following week.We will conduct interviews with affiliate students according to the following guidelines. After interviewing affiliate students, we will begin making offers according to a rank ordering of applicants.  A student will have 48 hours to consider an offer.  The core agreement is that an affiliate student can accept an early offer that is binding on both parties.  If the student wants to continue to explore options, he/she will certainly continue to be considered for a position with us.  However, they are now treated on an equal footing with non-affiliate students, meaning:  they will be ranked without further consideration of their affiliate status; they will not hear from us again until notification day.  If the first affiliate student to whom we’ve made an offer does not accept the early offer, and  if there is another affiliate student that meets our selection criteria, we then will make an offer to him/her before notification day (and the parameters described in #2 will again apply to the second student). Any unfilled positions are offered on notification day. If a position is filled prior to notification day, we will publicize that the slot is now filled to all interested parties, i.e., all applying students and their DCTs. \*\*This is like “early decision” for Harvard Students. Please only exercise this option if you aresure you would accept the offer\*\* |
| Women’s Trauma Recovery Team | Eve Davison, Ph.D.Eve.davison@va.gov  | 8-12hrs/week | Treatment of women who have served in the militaryThe Women’s Trauma Recovery Team (WTRT) is an outpatient mental health program affiliated with the Women’s Health Sciences Division of the National Center for PTSD, and serves women veterans with PTSD and other trauma-related mental health difficulties. Women veterans treated in WTRT are quite diverse on sociodemographic and other variables, have experienced a variety of military and other lifespan traumatic events (e.g., sexual assault, including military sexual trauma; childhood abuse; intimate partner violence; combat and warzone trauma), and typically have complex clinical presentations. This placement is for advanced students (fourth year or higher), and runs through mid-August. Trainees will have the opportunity to conduct comprehensive psychosocial assessments and to provide a variety of evidence-based individual psychotherapies, with a primary focus upon training in Cognitive Processing Therapy for PTSD. Trainees may also have the opportunity to collaborate on research within the Women’s Health Sciences Division. -Accepting one 8- to 12-hour/week practicum student.Schedule requirements: Tuesday mornings; Wednesdays 11:30-12:30 team meetings. Other scheduling dependent upon medical center space considerations; however, this placement with include time across at least two days of the week.  | Past Students**:** Pete Franz (G4)2021/2022: Franckie Castro-Ramirez (G4) |  |
| Center for Returning Veterans | Kevin Brailey, Ph.D.Kevin.brailey@va.gov | 12-16hrs/week | The Center for Returning Veterans is a mental health clinic providing readjustment services for veterans deployed during Operation Iraqi Freedom/Operation Enduring Freedom/Operation New Dawn. Practicum students working in the clinic will acquire assessment and treatment experience with a range of adjustment, anxiety, depressive, post-traumatic stress and comorbid substance use disorders. Students will have opportunities for training in evidence-based practices for PTSD, anxiety, and depressive disorders. Participation in a multidisciplinary team meeting and case-conference/didactic series is strongly encouraged. -Accepting one 12-16 hour/week practicum student.-Schedule requirements: prefer attendance at Tuesday case-conference/didactic team meeting, 2-3pm | Past Students: Alex Rodman (G5)2021/2022 students: Mike Osorio (G4) |  |
| PTSD Clinical Team | Kevin Brailey, Ph.D.Kevin.brailey@va.gov | 12-16 hrs/week | Practicum students working in the PTSD clinical team have the opportunity to acquire treatment experience working with veterans diagnosed with PTSD and other trauma-related disorders. This practicum is for advanced students, and acceptance is contingent on availability of office space in the medical center. Trainees have the opportunity to train in semi-structured interviewing for PTSD and evidence-based treatments for PTSD (e.g., cognitive processing therapy, prolonged exposure) as well as group therapy for PTSD. -Accepting one 12-16 hour/week practicum student-Schedule requirements: Must be available on Monday and Wednesdays  | Past Students: Marie-Christine Nizzi |  |
| Behavioral Medicine Program | Kevin Brailey, Ph.D.Kevin.brailey@va.gov | 16-20 hrs/week | The Behavioral Medicine Program provides comprehensive mental health and behavioral health services for Veterans with a broad range of medical conditions and health concerns. Practicum students in the Behavioral Medicine Program co-lead a variety of outpatient cognitive-behavioral groups (e.g., pain management, depression related to chronic medical illness, stress management, smoking cessation, weight management, and insomnia), participate in multidisciplinary care, and may have the opportunity to conduct problem focused short-term therapy. In addition, the practicum student may do consultation/liaison in the context of the renal dialysis unit. The practicum student also attends the weekly Behavioral Medicine team meeting where cases and didactics are presented. Additional opportunities may be available depending upon the days the practicum student is present on site. -Accepting one 16-20 hour/week practicum student.-Schedule requirements: Monday and/or Tuesday and Friday |  |  |
| Substance Abuse Treatment Program | Kevin Brailey, Ph.D.Kevin.brailey@va.gov | 20-24 hrs/week | Practicum students are typically involved in conducting audiotaped short-term and longer-term individual psychotherapy under licensed staff supervision, and in co-leading cognitive-behavioral substance use relapse prevention psychotherapy groups and in co-leading various psycho-educational groups (with members of our treatment team) in the Substance Abuse Treatment Program (residential and outpatient components) at the Jamaica Plain campus of VA Boston HCS. Both the shorter-term and longer-term treatments of choice are, typically, different types of empirically supported cognitive-behavioral therapy. The patient population consists primarily of poly-substance users (who typically use some combination of alcohol, cocaine, and heroin/oral opiates). Patients frequently present with co-morbid psychiatric diagnoses of depression, PTSD, and anxiety disorders, and with personality issues, medical problems, and legal and psychosocial difficulties.-Accepting two 20-24 hour/week practicum students.-Schedule requirements: Mondays, Wednesdays, Fridays |  |  |
| Neuropsychology Program | Laura Grande, Ph.D., ABPP/CN, laura.grande@va.gov | 16-20 hrs/week | The neuropsychology practicum is 16-20 hours per week, and takes place at the Jamaica Plain Campus (a neuropsychology rotation is also available at the Brockton campus; see below). Students typically see 1 patient per week for neuropsychological evaluation and gain experience in interviewing, test administration, scoring, interpretation, report preparation and feedback to patients, patient families and referral source.  The primary clinical setting is the neuropsychology consult service.  Group and/or individual therapy experiences are available but are dependent upon training needs, space and time allowances (will be in addition to assessments). Students may attend weekly case conferences. Attendance at monthly Neurobehavioral Rounds (4th Thursday of the month 9am-11am) and Neuropsychology didactics (1pm-3pm on Thursdays) are required (open to discussion if there is a significant schedule conflict).  Research opportunities are available.  Prior coursework in assessment is required. Prior coursework in cognitive assessment, neuroanatomy, and/or neuropsychology are recommended, as is prior neuropsychology assessment experience. -Accepting one-two 16-20 hour/week practicum students.-Schedule requirements: Thursday afternoons are required. Tuesdays and Wednesdays are preferred for clinic days.  | Past Students: Sarah Afienko (Masland) |  |
| General Mental Health | Kevin Brailey, Ph.D.Kevin.brailey@va.gov |  | Group and individual therapy with veterans of diverse ages. | Past Students: Alex Rodman (intakes for clinic; Fall semester G5)Note: Not currently listed on Practicum Brochure |  |
| Home Base Primary Care, Hospice/Palliative Care |  |  |  | Past students: Charlene Deming (G4)Note: Not currently listed on practicum brochure |  |
| **Judge Baker Children’s Center** |  |  |  |  |  |
| Clinical Practicum in Evidence-Based Youth Psychotherapy: Center for Effective Child Therapy | Daniel M. Cheron, Ph.D., ABPPtraining@jbcc.harvard.edu |  | <https://jbcc.harvard.edu/training/professional-training-program/cect-practicum>Judge Baker Children’s Center (JBCC), a Harvard Medical School Affiliate, is accepting applications for a clinical practicum position at the Center for Effective Child Therapy (CECT), the outpatient mental health service program at Judge Baker Children’s Center. CECT serves children and adolescents ages 2 – 19. Therapists utilize evidence-based treatments for some of the most common presenting problems including anxiety, depression, traumatic stress, and disruptive behavior.  Professional training at CECT focuses on assisting trainees in the use of effective, sustainable treatments that have withstood rigorous clinical testing (e.g., Cognitive Behavioral Therapy, Behavioral Parent Training) as well as measuring patient progress during treatment to inform therapeutic decisions. Our focus on data and quantifiable measures gives trainees unique insight into the best ways to help children and families and assists trainees in developing necessary intervention skills.  The practicum experience is between 16 - 24 hours (two to three days) per week and focuses primarily on the delivery of short-term psychotherapy to children and adolescents ages 2 to 19 as well as their families.  Trainees can expect to gain experience with a wide range of psychopathology, with a focus on anxiety disorders, depression, and disruptive behavior disorders.  Treatments center on cognitive-behavioral therapy for anxiety and depression as well as behavioral parent training techniques for disruptive behavior disorders.  Students may select a focused track on early childhood treatment and receive training in Parent-Child Interaction Therapy (PCIT) or a focused track on school-aged children and adolescents and receive training in the Modular Approach to Therapy for Children (MATCH).  Students in either track will gain exposure to clients across the age range.  Students must be available on Thursdays to attend staff seminars as part of the practicum experience, as well as evening hours to facilitate seeing clients.    **Essential Duties and Responsibilities**·       Provide time-limited psychotherapy interventions to 3-6 clients per week using cognitive-behavioral and behavioral strategies on a weekly individual outpatient basis.·       Participate in specific training and supervision in the Modular Approach to the Therapy for Children with Anxiety, Depression, Trauma, or Conduct Problems (MATCH-ADTC). ·       Participatein diagnostic evaluations with a staff psychologists using semi-structured Kiddie-Schedule for Affective Disorders and Schizophrenia (K-SADS). Note that the student will have the opportunity to observe administration of the (K-SADS) and may have the opportunity to begin learning aspects of administering it. However, this practicum will not provide the level of training needed for proficiency and reliability of K-SADS administration in other settings. ·       Participate in at least two hours of individual supervision per week.  Cases will be supervised by a licensed psychologist for one hour per week.  Additional supervision hours will be provided by postdoctoral fellows, overseen by a licensed psychologist.·       Participate in direct and/or videotaped observation of and by clinical supervisors.·       Participate in additional research and didactic activities as appropriate.**Qualifications and Skills**·       Enrolled in a doctoral graduate program in clinical, counseling, or school psychology. ·       Completion of a minimum of two full years of a core graduate program in clinical or school psychology by the start of the practicum.·       Completion of basic psychopathology coursework.·       Completion of one full year of a prior practicum experience.·       Previous or concurrent coursework in evidence-based treatments is preferred. | **Past Students:** Rachel Vaughn-Coaxum (G2)**Applications**Interested candidates should send* A cover letter describing your professional development goals and how CECT might fit in with those goals.
* A current CV
* Two (2) letters of recommendation sent directly from your recommender to training@jbcc.harvard.edu
* A de-identified assessment report (e.g., psychodiagnostic report, neuropsychological report),
* A de-identified treatment report (e.g., treatment plan, treatment summary), and
* The name and contact information for your practicum coordinator.

**Application Due Date:** December 16, 2019**Notification Date:** February 10, 2020**Start Date:** September 1, 2020* \*Judge Baker Children's Center has committed to following the MPA Practicum Training Collaborative program policies for the 2020-2021 training year.
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| Clinical Training Practicum in School-Based Mental Health and Special Education (Manville School) | Anne Cangello, Psy.D.training@jbcc.harvard.edu |  | Judge Baker Children’s Center (JBCC), a Harvard Medical School Affiliate, is accepting applications for a one (1) year clinical trainee placement. JBCC is an established center of excellence for implementation, training, quality improvement, and service initiatives focused on improving behavioral health for children and adolescents. JBCC is also home of the Manville School, a therapeutic day school for students from kindergarten through 10th grade who experience emotional, neurological, or learning difficulties that have impacted their ability to succeed in previous school settings.  Manville has a strong tradition of providing innovative educational programming and comprehensive, evidence-based clinical services.  As a result of the integration of these service components, Manville is a school where students with challenging needs can experience academic success, social development, and emotional growth. The trainee will carry a caseload of at least 3 students enrolled in the Manville School by the end of the year.  As clinicians and case managers for these students, the trainee will provide individual therapy sessions and will serve as co-leaders in group therapy services.  In addition, family contact is essential and often clinically indicated, and may include parent training and formal family therapy.  In their roles as case managers, trainees will coordinate the service planning and service delivery of a student’s interdisciplinary Manville team.  The Manville team consists of staff from various disciplines who are working with the student and their parents/guardians.  Each team member contributes a unique perspective regarding the student’s educational, behavioral, social and/or emotional functioning. The trainee also facilitates communication between Manville staff and any outside providers working with the child and family.  The case manager role will be supported in individual and group supervision with other psychology and social work trainees.  Trainees have the opportunity to further develop relationship skills through these contacts and interventions.  All trainees are supervised by a licensed, full-time Manville clinician (either a psychologist or social worker), and participate in various training activities during the course of the practicum. **Essential Duties & Responsibilities:**·       Provide weekly clinical and targeted case management services to at least three students enrolled at Manville School for the entire school year.·       Work collaboratively with parents and caregivers to support school-based intervention·       Facilitate monthly classroom interdisciplinary team meetings and annual case conferences.·       Collaborate with external collateral service providers to support student care.·       Participate in IEP and case conference meetings. ·       Complete comprehensive diagnostic and treatment status reports for each student on an annual basis.·       Provide clinical consultation to the classroom team in an on-going way throughout the year·       Conduct safety assessments (self-injurious or aggressive behaviors) and mental status evaluations.·       Review principles of ethical practice and principles related to confidentiality and mandated reporting·       Participate in bi-weekly intern training seminars organized and led by Manville’s Clinical Supervisors·       Participate in weekly clinical team meeting.·       Trainees will have the opportunity to attend the Child Mental Health Forum Lecture Series co-sponsored by Boston Children’s Hospital. ·       Trainees who are in doctoral programs in psychology will have the opportunity to conduct psychological testing batteries, including WISC-IV, projective tests (e.g.: TAT), personality tests (e.g.: MMPI-A when appropriate), and behavioral / symptom checklists.  ·       ALL TRAINEES must be available from 9:00 AM – 3:00 PM from August 26, 2018 through August 30, 2018 for staff training.·       ALL TRAINEES must be available weekly on Wednesdays and Fridays for critical school and staff meetings and seminars.**Qualifications and Skills:**Candidates must meet all of the following requirements:·       Applicants must be currently enrolled in a Doctoral program in Clinical, Counseling, or School Psychology or a Master’s program in Social Work or Counseling·       At least two years prior experience providing clinical services.·       Strong clinical service coordination skills.·       Excellent interpersonal, organizational and communication skills and be comfortable collaborating with a range of professionals from other fields.Strong applicants will have:·       Prior experience delivering evidence-based interventions in a school-based setting.  | **Application:**Interested candidates should send a cover letter specifically addressing your experience related to the job responsibilities above, a curriculum vitae·       two letters of recommendation, emailed directly from a supervisor overseeing your prior clinical work**Application Due Date:** January 6, 2020**Notification Date:** February 10, 2020**Position Start Date:** August 31, 2020\* Judge Baker Children's Center has committed to following the MPA Practicum Training Collaborative program policies for the 2020-2021 training year. |  |
| The Camp Baker Summer Treatment Program | Sarah Tannenbaum, PsyD, campbaker@jbcc.harvard.edu | 6 week intensive during summer | <https://campbaker.org/>Camp Baker currently has eight graduate-level summer training positions available. Camp Baker is a therapeutic summer program based off of the Summer Treatment Program (STP) model and is specifically designed for 6-12 year old children with ADHD. The STP has positive effects on the serious behavioral, social, and academic difficulties exhibited by children diagnosed with ADHD. Summer trainees at Camp Baker will implement the treatment program in a camp setting for children with ADHD. They will receive extensive training and experience implementing the research-based intervention. Students with STP experience are often highly sought-after in graduate training programs in clinical psychology, social work, medicine, and education. Previous trainees within Camp Baker have gone in to successful careers in all of these fields. Camp Baker is currently accepting applications for two roles: 1) Graduate Counselor and 2) Behavior Support Specialist. Please visit our website for a detailed description of roles and responsibilities for each position: https://jbcc.harvard.edu/employment-opportunities-sei. All aspects of the training program are supervised by a licensed clinical psychologist. Trainees typically gain over 200 hours of experience providing treatment directly to children. Opportunities for participating in behavioral parent training are also available. Trainees complete a week-long training prior to the start of treatment and receive ongoing supervision. Training begins Monday, July 1, 2019 with the July 4th holiday off. Camp Baker runs from Tuesday, July 10th and continues through Friday, August 16th, 2019. Trainees typically work from 7:30am until 4:30pm and stay from 7:30am-6pm one evening per week. The stipend for graduate-level positions this summer is $2,500.  | Past students: Christine Cha, Nancy Lau, Mei Yi Ng2021 students: Grant Jones (G4 summer), Rachel Horn (G4 summer)**Application Process:** Interested applicants should send• A cover letter describing your professional development goals and how Camp Baker might fit with those goals• A current CV• A de-identified assessment report, treatment report, or other psychology-related writing sample• The name and contact information for your practicum coordinator (for applicants looking to gain practicum or academic credit)• Three letters of recommendation (sent to Dr. Tannenbaum from the recommender directly) |  |
| **Boston Study Child Center** |  |  |  |  |  |
| **Boston Child Study Center** | Dr. Beth Jerskey: bjerskey@bostonchildstudycenter.com. |  | See Brochure: <https://bostonchildstudycenter.com/wp-content/uploads/2019/10/2020-2021-Training-Announcement_Externs.pdf>See Training Tracks: <https://bostonchildstudycenter.com/wp-content/uploads/2019/11/2020-2021-Training-Program-Descriptions.pdf> | Past Students: Melissa Wei (G3 – Neuropsych; G5 – DBT-PE) |  |
| **Massachusetts Mental Health Center** |  |
| CEDAR (Center for Early Detection, Assessment, and Response to Risk)75 Fenwood Road Boston  | Michelle Friedman-Yakoobian, Ph.D.mfriedm3@bidmc.harvard.edu | 20hrs; Flexible down to 16hrs | See PTC brochure for details: <http://www.massptc.org/welcome/default/view_sites>The CEDAR clinic helps young people and their families* Understand recent changes in thoughts, feelings or behavior
* Consider treatment options
* Stay on track or get back on track with work, school or self-care
* Learn strategies for reducing stress and increasing protective factors

Who does CEDAR serve?The CEDAR clinic is for young people (ages 14-30) who are experiencing new or worsening symptoms that may be warning signs for psychosis.  These can include:* Difficulties thinking clearly or concentrating
* Suspiciousness or uneasiness with others
* Increased sensitivity to sights or sounds

Withdrawing from friends and family | Past Students: David Dodell-Feder, Application Process: Standard PTC process |  |
| PREP(Prevention and Recovery in Early Psychosis) | Lauren Utter, Psy.D. | 20-24hrs | See PTC brochure for details: <http://www.massptc.org/welcome/default/view_sites> | Past Students: David Dodell-Feder, Steph DeCross (G3)Application Process: Standard PTC process | 2+ |
| Mental Illness/Problematic Sexual Behavior Program | Roseaura Cruz, Ph.D. | Not stated | See PTC brochure for details: <http://www.massptc.org/welcome/default/view_sites>Goals: To provide MI/PSB specific assessment and treatment services for DMH clients throughout Metro Boston. To balance the DMH mission goal of enabling client to live, work and participate in their communities with preventing the victimization of others. To provide training, consultation, and case-specific in-services to care providers who with DMH individuals with MI/PSB issues | Application Process: PTCPlease submit a cover letter and a copy of your curriculum vitae to:Rosaura Cruz, Ph.D.MI/PSB MMHC Team LeaderRosaura.cruz@state.ma.us(617) 626-960775 Fenwood Rd.Boston, MA 02115Past Students: N/A |  |
| Cognitive-Behavioral Therapy Team  | Robert Goisman, MDSusan Gelfman, OTR/T |  | -Work with patients in the Partial Hospitalization Program for Schizophrenia.-Individual therapy -Group therapy for specific goals, such as to decrease paranoia and delusions, increase self-care, or lessen addictions.  | \* Not currently active | 2+ |
| Southard Clinic, Massachusetts Mental Health Center, 180 Morton Street, Jamaica Plain, MA 02130 | June Wolf, PhD, ABPPJune\_wolf@hms.harvard.edu  |  | Patients may receive psychodynamic, cognitive-behavioral, psychopharmacologic, or family systems treatment, individually, in couples, or in groups. Southard Clinic clients may be self- referred or by counseling centers, practitioners at other hospital outpatient services, and private practitioners in the community at large. Trainees also have the opportunity to work in sub-specialty areas such as psychological testing, cognitive-behavioral therapy, and psychopharmacology.See <http://www.massmentalhealthcenter.org/training/index.htm> for more information.  | \*Not currently active |  |
| Dialectical-Behavioral Therapy Team (Partial Hospitalization Program) | Rudolph Blier, PhDChristopher Morse, PhDElizabeth Simpson, MD |  | -Teach skills, lead addiction groups, do individual therapy with Borderline Personality Disorder and Paranoid Schizophrenic patients | \*Not currently active | 3+ |
| **Psychological Assessment & Consultation Assoc. (Formerly MetroWest)** |  |  |  |  |  |
| 40 Accord Park Drive, Suite 108 Norwell, MA 02061 | *Dr. Stacy Horner**shorner@psych-assess.com* |  | Child, adolescent, adult, and geriatric neuropsychological assessment | Past students: Jessica Schleider (G4), Kathryn Fox (G4), Katherine Corteselli (G4)2021/2022 students: Rachel Horn (G4) Application Process: Email Dr. Horner |  |
| **Cambridge Hospital** |  |
| Observational Practicum | Kimberlyn Leary, Ph.D., kleary@challiance.org | ~2-6/wk | -Observe clinical evaluations & interventions, attend seminars | Past students : All currently enrolled studentsApplication Process : Rich emails G1 class around November with details | 1 |
| Adolescent Inpatient Training (Adolescent Assessment Unit) | Carolyn Conklin, Ph.D. | 20/wk | See PTC brochure for details: <http://www.massptc.org/welcome/default/view_sites> | Application Process: Standard PTC process |  |
| Child Inpatient Training (Child Assessment Unit) | Carolyn Conklin, Ph.D. | 24/week | See PTC brochure for details: <http://www.massptc.org/welcome/default/view_sites> | Application Process: Standard PTC processApplication Deadline: Jan 6, 2020Match/Notification Day: Feb 10, 2020 |  |
| Latino Mental Health (Outpatient Service) | Carolyn Conklin, Ph.D. | 20/wk | See PTC brochure for details: <http://www.massptc.org/welcome/default/view_sites> | Application Process: Standard PTC process |  |
| Primary Care Behavioral Health | Carolyn Conklin, Ph.D. | 20/wk | See PTC brochure for details: <http://www.massptc.org/welcome/default/view_sites> | Application Process: Standard PTC process |  |
| Central Street (Adult Outpatient Clinic) | Marla Eby, PhDDeborah Woodford, PhDDeidre Barrett, PhDPatricia Harney, PhD | 16-20/wk | -Conduct intakes (1/wk)-Conduct individual psychotherapy (8/wk) with wide range of adult disorders -Observe and co-lead anxiety management groups-Weekly supervision , seminars, & case conference (3-4 hrs/wk)See: <http://www.challiance.org/departments_ii/outptserv.htm>  | \*Not currently active | 3+ |
| Somerville Hospital (Adolescent Inpatient and Assessment Unit) | Eric Nass, PhDSharon Greenwald, PhD | 16-20/wk(Sept-May) | -Individual (1-2 cases) and group (1/week) psychotherapy-Supervision (1 group), seminars (3hrs), and grand rounds (1hr)-Inpatient assessment and treatment-Individual, family, and group therapy-Coordinate with school and other outside systems including DSSSee: <http://www.challiance.org/departments_ii/acuteservices.htm>  | \*Not currently active | 3+ |
| Asian Clinic | Lisa DesaiXialolu Hsi, PhDPedro Barbosa, PhD | 16-20 hrs(Sept-May) | -Individual psychotherapy (8-10hrs)-Supervision (3hrs), seminars, team meetings, case conferenceSee: <http://www.challiance.org/departments_ii/outptserv.htm> for more information.  | \*Not currently active | 3+ |
| Victims of Violence | Judith Herman, MDJayme Shorin, LCSWBarbara Hamm, PsyD | 20/wk | -Individual (8 hrs/wk) and group (1.5 hrs/wk) psychotherapy, including a stress management group-Supervision (1hr), seminars (6hrs), and case conference (2hrs)See: <http://www.challiance.org/departments_ii/victimsofviolence.htm>  | \*Not currently active | 3+ |
| Children’s Hospital |  |  |  |  |  |
| Eugene J. D’Angelo, Ph.D., ABPPChief, Division of PsychologyDirector, Outpatient Psychiatry ServiceDepartment of PsychiatryChildren’s Hospital Boston300 Longwood AvenueBoston, MA 02115 | Eugene J. D’Angelo, Ph.D.eugene.dangelo@childrens.harvard.edu |  | No current formal prac placement; Interested students may email Dr. D’Angelo to discuss potential opportunities | Past students: Sarah Hope Lincoln  |  |
| Biobehavioral Pediatric Pain Lab, Children’s Memorial Hospital | Christine Sieberg, Ph.D. Christine.sieberg@childrens.harvard.edu |  | No current formal practicum option. Note from Dr. Seiberg:“I have several ongoing clinical research projects going on and always take summer and academic year students. My current projects, which mostly involve fMRI and pain psychophysics, would likely not be allowed to be counted for clinical hours; however, I have had clinical psychology doctoral students in the past who have still found the experience positive. ​Of note, I am submitting an R21 this cycle on an ACT based intervention for women with endometriosis-associated pain and if successful (although I won't know until the summer) that study would likely count toward clinical hours if a student helped to conduct the intervention. I am happy to further discuss my ongoing projects with you or any interested student” | Past Students: Cora Mukerji  |  |
| **Rhode Island Hospital/Hasboro Children's Hospital - Pediatric Neuropsychology** |  |  |  |  |  |
|  | Christine Trask, Ph.D.:ctrask@lifespan.org | 8-10hrs | Neuropsych testing with pediatric populations | Past students: Rachel Vaughn-Coaxum (G4) |  |
| **Brigham and Women’s Hospital, Boston MA** |  |  |  |  |  |
| Brigham Health Advanced Practicum Training: Outpatient Program | Shannon Sorenson, Ph.D., ssorenson@bwh.harvard.edu | 2—24hrs; 3-4 days Sept-May | See PTC brochure for details: <http://www.massptc.org/welcome/default/view_sites>The psychology advanced practicum training program within Brigham Psychiatric Specialties (BPS) at Brigham and Women’s Hospital (BWH) is designed to provide 3rd or 4th year doctoral students in psychology with an enriching 9-month (September through May) placement to develop expertise in psychological treatment within a hospital-based outpatient psychiatry service. The program is for advanced practicum students who can commit to a 3 or 4-day training schedule for a total commitment of 20 hours each week.Practicum trainees will provide individual psychotherapy to a wide range of diagnostically diverse patients in the outpatient clinic. All individual therapy patients will first be seen for an intake evaluation to determine their psychotherapy needs within the clinic. All psychotherapy cases are referred internally within the BPS clinic from existing providers. Practicum trainees’ activities in training will include: provision of individual psychotherapy to approximately 6-8 patients per week, membership on an interdisciplinary treatment team, weekly supervision, and opportunities to attend Thursday Psychiatry Grand Rounds at BWH. Opportunities to develop, recruit for and co-lead psychotherapy groups with faculty or other trainees are also available. Our clinic provides treatment from a variety of modalities, including (but not limited to) cognitive behavioral therapy, Acceptance and Commitment Therapy, Exposure and Response Prevention, Dialectical Behavioral Therapy, mindfulness-based treatments, and integrative dynamic psychotherapy. Trainees can expect that there will be an emphasis within case conceptualizations, delivery of interventions, and discussions in supervision that are culturally-based and responsive. | Application Process: PTC ProcessInterested psychology graduate students should submit the following:1. Cover letter2. Curriculum Vitae3. 3 Letters of reference (References should include at least one from an academic source and one from a clinical supervisor)Complete applications should be sent via email to:Shannon Sorenson, Ph.D., ssorenson@bwh.harvard.edu | 3+ |
| Brigham Health Advanced Practicum Training: Inpatient Program | Christopher AhnAllen, Ph.D., cahnallen@bwh.harvard.edu | 20hrs; Sept-May | See PTC brochure for details: <http://www.massptc.org/welcome/default/view_sites>The psychology advanced practicum training program at Brigham and Women’s Faulkner Hospital (BWFH) is designed to provide 3rd or 4th year doctoral students in psychology with an enriching 9-month (September through May) placement to develop expertise in psychological assessment and treatment within an acute inpatient psychiatry service. The program is for advanced practicum students who can commit to a 3 or 4-day training schedule for a total commitment of 20-hours each week. Provision of psychological services for patients within an acute inpatient setting is a unique opportunity to care for those with serious mental illness, dual diagnostic illnesses, and complex medical and psychiatric problems within an interdisciplinary acute inpatient setting. | Application Process: Standard PTC processApplication: Interested doctoral students and faculty in the program are encouraged to contact Dr. Christopher AhnAllen to discuss questions about the training program. Applications for the 2019-2020 training year are due by 12pm on January 7th, 2019 per the Massachusetts Practicum Training Collaborative.Interested psychology graduate students should submit the following: 1. Cover letter 2. Curriculum Vitae3. 3 Letters of reference (References should include at least one from an academic source and one from a clinical supervisor)4. Psychological testing report (optional)Complete applications should be sent via email to:Christopher AhnAllen, Ph.D.cahnallen@bwh.harvard.edu |  |
| **Beth Israel Deaconess Medical Center** |  |  |  |  |  |
| Cognitive Neurology Unit | Sara Hoffschmidt, Ph.D. shoffsch@bidmc.harvard.edu |  | See PTC brochure for details: <http://www.massptc.org/welcome/default/view_sites>The Cognitive Neurology Unit (CNU) at BIDMC welcomes advanced doctoral students in psychology seeking experience in clinical neuropsychology. The CNU is an outpatient clinic staffed by an interdisciplinary team of neuropsychologists, neurologists, neuropsychiatrists, social workers, and trainees from all disciplines. Specialty clinics include the Concussion and TBIClinic, Executive Function Clinic, Brain Fit Club, and Memory A2Z Program. Neuropsychological evaluation is an integral part of all treatment teams. Therapeutically focused evaluations are provided to adult patients with a variety of neurological problems including learning and attention disorders, head injury, stroke, multiple sclerosis, epilepsy, andneurodegenerative disorders.The CNU practicum is designed to promote mastery of skills in all areas of neuropsychological evaluation, including interviewing, testing, scoring, report writing, and providing patient feedback. The practicum trainee is involved in assessment of two to three patients per week.Additional clinical activities include cognitive remediation and therapy groups coordinated through the Brain Fit Club. Academic expectations include participation in rounds and didactic seminars. Up to two hours of weekly supervision and didactics are provided. Although the practicum is designed with a clinical emphasis, research opportunities are available for interestedstudents able to commit additional time on site. The practicum is unpaid and is a 12-month training program (July 1st - June 30th); a twelve month commitment is required. Applicants should be in the third or fourth year of their doctoral program. A strong interest in neuropsychology, demonstrated by prior testing experience, is preferred.Expectations for practicum students:-Mastery of test administration and scoring during the early portion of the practicum-Complete scoring/data sheet and behavioral observations on each case-Report writing responsibilities (two to four reports/month)-Attend CNU/CNBS Grand Rounds (Wed 3-5)-Attend and present at weekly neuropsychology seminar (Wed 2-3)-Attend weekly supervisory sessions with primary and secondary supervisors-Co-lead at least one cognitive remediation groupTo learn more about the CNU, please see our website: www.cognitiveneurologyunit.com.) | Application: PTC ProcessInterested students should forward a letter of interest, CV, transcript, and three (3) letters of recommendation to Dr. Sara Hoffschmidt, PhD at shoffsch@bidmc.harvard.edu. | 2+ |

Note: Students interested in learning more about each of these sites should contact the Harvard faculty person listed above each site. Harvard faculty will then work with the student and the practicum site to negotiate placement, hours, responsibilities, etc.

**Appendix B.**

**Clinical Skills Evaluation Form**

# Harvard University, Department of Psychology Clinical Skills Evaluation Form

Name of Student: Date:

Name of Evaluator:

Training Site:

Please rate the student’s competence in each of the following areas of clinical skill.

# 1 2 3 4

## Needs attention Adequate Above average Superior

 1. Adopts a professional manner when interacting with patients/clients.

 2. Adopts a professional manner in interactions with staff and supervisors.

 3. Is willing to learn.

 4. Responds appropriately to feedback.

 5. Has appropriate boundaries in interactions with patients/clients.

 6. Is aware of and sensitive to ethical issues.

 7. Demonstrates proficiency in clinical case conceptualization.

 8. Works well as a member of a treatment team.

 9. Is able to implement a treatment plan in an effective manner.

 10. Is able to ask for help when necessary and appropriate.

 11. Has good fundamental clinical skills (interviewing, empathic listening, etc.).

 12. Is able to consider clinical problems from multiple perspectives.

 13. Is able to work well with patients/clients from diverse backgrounds.

 14. Is able to handle difficult clinical situations in an effective and sensitive manner.

 15. Is a likeable individual to work and interact with.

 16. Demonstrates skill at applying scientific knowledge to clinical practice.

 17. Demonstrates knowledge and proficient use of appropriate assessment methods.

 18. Demonstrates knowledge and proficient use of evidence-based treatment methods (when applicable).

# Overall Evaluation:

Strengths:

Areas for Improvement:

Supervisor’s Signature:

Please return this form to:

Professor Richard J. McNally, Director of Clinical Training Department of Psychology, Harvard University

33 Kirkland Street

Cambridge, MA 02138

Thank you!

**APPENDIX C.**

**Graduate Student Annual Report Form**

Student name:

Year:

Date:

# Annual Report: 2020-2021 Academic Year

1. Please list the courses that you have taken this year:
2. Please describe the progress you have made with your research this year. Please include papers published, presentations made, projects and collaborations with other labs, and grants and grant applications, as well as progress made regarding your own research.
3. Please describe the clinical practica (if required) that you have been involved with this year. Include site, type of population served, type of clinical contact and supervision, as well as time commitment devoted to practicum activities.
4. Please describe the progress you have made toward meeting the relevant departmental requirements for your program this year (e.g., completed first or second year project, finished all required coursework, received approval for dissertation research (i.e., passed prospectus) etc., etc.
5. Please describe your plans and goals for academic work (including work over the summer) and for the 2018-2019 academic year. Please be specific about what you intend to accomplish.

# Clinical Competence Self-Rating

Recent developments in the assessment of professional competence (see Kaslow et al., 2007) have identified the following areas as important. Please rate your competencies in these domains using the scale below.

1= deficient in a major way

2 = needs some work/improvement 3 = average

4 = good

5 = excellent

1. critical thinking
2. judgment
3. ethical behavior
4. professionalism
5. maintaining appropriate boundaries
6. interacting effectively with others
7. self-awareness regarding areas of weakness
8. ability to respond to feedback
9. working with others
10. citizenship
11. ability to regulate negative emotions (e.g., anger, anxiety)
12. honesty and integrity
13. emotional maturity
14. ability to resolve conflict
15. respect for and tolerance of diversity (racial, ethnic, religious, social or political)
16. willingness to learn and grow as a professional
17. overall knowledge about psychopathology
18. overall knowledge about assessment and diagnosis
19. overall knowledge about clinical treatment
20. familiarity and knowledge of APA ethical guidelines

# Areas of Strength and Weakness

What do you consider to be your greatest strengths as a clinical psychologist? What areas still present challenges for you? What are you currently doing to address these issues?

**Appendix D.**

**Annual Student Evaluation Ratings**

**Clinical Program**

**ANNUAL STUDENT EVALUATION RATINGS**

STUDENT NAME:

Academic Year Began Program Program

Years in

Academic Advisor Research Advisor

The faculty will rate and briefly summarize the student's performance in each of the following areas using the ratings categories described below. Evaluations will be followed with a written evaluation letter to each student. A remediation plan, if needed, will be outlined in the letter.

* (5) Excellent: reserved for the unusual student who is making exceptional progress for his/her level of training
* (4) Good: given to students who are making good progress for his/her level of training and seem to be on target for successful completion of the program
* (3) Satisfactory: students who are making adequate progress.
* (2) Fair: given to students who are making less than expected progress and have problems that need to be addressed
* (1) Poor: given to students who are showing significant problems that must be addressed, or have failed one or more parts of the program, or have one or more academic classes that must be repeated in order to obtain the minimal acceptable grade.
* (0) Not Applicable: given to students who may not have had the opportunity to obtain experience in the area, have been on internship or who have completed their academic coursework but have not yet obtained their degrees.

ACADEMIC PERFORMANCE: *(overall academic coursework, completion of courses, grades, performance on exams, quality of writing, critical-analytic skills, written communication skills, class participation; intellectual engagement; teaching and/or scholarly activity)*

0 (N/A)……..…..1(poor)……….……2(fair)……..………3(satisfactory)… 4

(good) 5(excellent)

CLINICAL PERFORMANCE: *(performance in assessment and psychotherapy sequence; performance in clinical comprehensive exam; Practicum competencies as defined by CCTC as evaluated by in-house and externship clinical supervisors)*

0 (N/A)……..…..1(poor)……….……2(fair)……..………3(satisfactory)… 4

(good) 5(excellent)

RESEARCH PERFORMANCE *(performance in research sequence courses, progress and quality of doctoral projects, critical thinking, writing skills, research sophistication; active participation/leadership in mentor’s research projects, ability to use and interpret quantitative and qualitative strategies and methodologies; independence and competence of ideas, collection of data)*

0 (N/A)……..…..1(poor)……….……2(fair)……..………3(satisfactory)… 4

(good) 5(excellent)

GRADUATE STUDENT ROLE (*evidence of substantive theoretical, clinical, academic, research interest in clinical psychology; colloquia attendance; motivation; class attendance, timely work, class attendance, and class progression; collegiality and good citizenship with faculty and students; attendance and presentations in conferences; leadership and/or service to department and/or school [teaching assistantships, volunteering time, mentoring role, participating in school-wide, clinical program and OPS activities, extra-curricular activities, coverage and support of other students.*

0 (N/A)……..…..1(poor)……….……2(fair)……..………3(satisfactory)… 4

(good) 5(excellent)

PROFESSIONAL BEHAVIOR/ ATTRIBUTES: *(evidence of ethical, legal, and professional knowledge and behavior that could impact on role as clinical psychologist; interpersonal skills in professional settings; professional responsibility; ability to maintain appropriate boundaries and conduct with patients, students, staff and faculty; respect for cultural, racial, gender, age, sexual orientation, and theoretical diversity, etc.)*

0 (N/A)……..…..1(poor)……….……2(fair)……..………3(satisfactory)… 4

(good) 5(excellent)

OTHER (define: )

0 (N/A)……..…..1(poor)……….……2(fair)……..………3(satisfactory)… 4

(good) 5(excellent)

**OVERALL RATING:**

0 (N/A)……..…..1(poor)……….……2(fair)……..………3(satisfactory)… 4

(good) 5(excellent)

Additional Comments by Faculty in Annual Review Meeting:

Research Progress:

Teaching:

Generals Exam

Clinical work:

Summarized Feedback:

Plan and Timeline for Remediation (if needed)

Date and Type of Student Response to Feedback:

Advisor’s Signature: Date:

Student’s Signature: Date: