Site Visit Report Template for Doctoral Graduate Programs

Program Name and Institution:
Ph.D. Program in Clinical Psychology
University of Kansas

Program Director: Rick Ingram, Ph.D.

Department Chair: Ruth Ann Atchley, Ph.D.

Site Visit Team
Chair: Peter Vik, Ph.D.
Member: Harold Rosenberg, Ph.D.
Generalist: Meera Komarraju Ph.D.

Dates of Site Visit: April 17-18, 2014
(append schedule)

The accreditation standards summarized below are to be applied within the context of the “Guiding Principles of Accreditation” summarized on pp. 2-5 of the Guidelines and Principles for Accreditation of Programs in Professional Psychology (G&P). The principles emphasize:

- Broad and general preparation for practice at the entry level
- Focused and in-depth postdoctoral preparation for specialty practice
- Integration of science and practice
- The degree to which a program achieves outcomes and goals consistent with its stated training model and with the Accreditation Guidelines and Principles.

Thus, accreditation in psychology is intended to “achieve general agreement on the goals of training... encourage experimentation on methods of achieving those goals and... suggest ways of establishing high standards in a setting of flexibility and reasonable freedom."

General Instructions: Below each domain subsection, please provide a narrative (in full sentences) that specifically addresses how the program meets or fails to meet that aspect of the G&P. There is a section at the end of each domain for additional comments that may not fit into specific subsections. Please clearly cite where or how specific information is obtained (e.g. student interviews, meeting with Dean, self-study, etc.). If information is found in the self-study or other written documents, please provide specific page numbers. Feel free to delete text prompts within this template prior to submitting the final report. However, we do ask that you keep all the letter/number prompts (A.1, B.3(a), F.1(b), etc.).

Relevant Implementing Regulations (IRs) are noted in red and have been included for your information. A PDF version of the IRs is available for download at:

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Domain A: Eligibility

A1. Program offers doctoral education and training in professional psychology including preparation for practice.

The Clinical Program offers the Ph.D. degree. The training program includes coursework (see Domain B), supervised research training (MA thesis, post-MA “Task” assignment, Ph.D. dissertation), and both internal/on-campus and external/off-campus practicum experiences (see Table 2) to prepare students for a variety of career paths, including the practice of clinical psychology. The self-study report provides documentation of the specifics of each of these elements of the training program.

A2. Program is sponsored by an institution of higher education...

The Clinical Program is sponsored by the University of Kansas (KU), an accredited (and well respected) institution of higher education. Specifically, KU is accredited by the North Central Association.

A3. The program:

- Is an integral part of the mission of the academic unit in which it resides
- Is represented in the institution's budget
- Has sufficient students and necessary facilities to ensure meaningful interaction, support and socialization

First, based on our meetings with the DCT, the Department Chairperson, and the Dean of the College of Liberal Arts and Sciences, it appears that the Clinical Program is an important and integral part of both the college and department. The Chair and Dean were explicit and complimentary regarding the value of the clinical training program. Second, according to reports from both the DCT and Department Chairperson, there are sufficient funds in the budget to support the Clinical Program. Our observation of the Department and Clinic facilities supports this report. Third, the Table listing numbers of students by year, and our observation during the site visit, confirms that the Clinical Program has sufficient numbers of students, core faculty, practicum supervisors and physical facilities to support interaction, support and socialization. See Domain C for more detailed information on program facilities and resources.

A4. The program:

- Requires 3 full-time academic years of graduate study and completion of an internship prior to awarding the doctoral degree
- At least 2 of the 3 years must be at the institution...
- At least 1 year must in full-time residence...

Materials provided in self-study indicate compliance by the Clinical Program with the three requirements listed in Domain A4. During the site visit, our review of randomly-selected student files and conversations with faculty and students did not reveal any evidence contradicting compliance with these time and residency requirements.

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A5. Program engages in actions that indicate respect for and understanding of cultural and individual diversity as reflected in recruitment and retention policies, curriculum and field placements, .... The definition of diversity includes but is not limited to ....

Based on our review of the self-study materials, and our meetings with the DCT, Department Chairperson, clinical faculty members, external practicum supervisors, and graduate students, it appears that the Clinical Program engages in numerous actions indicating respect for and understanding of cultural and individual diversity. These actions include, but are not limited to, incorporating material on diversity in multiple relevant courses in the curriculum, offering a course in cultural diversity, providing external practicum placements that serve a diverse clientele, and serving clients with diverse backgrounds in the on-campus training clinic, among other actions. Results of the student satisfaction questionnaire described in the self-study also support the Program's commitment to respecting diversity. See Domain D below for additional information on this topic.

A6. Formal written policies are available concerning:
   • Admissions and degree requirements
   • Financial and administrative assistance
   • Student performance evaluation, feedback, advisement, retention & termination
   • Due process and grievance procedures for students and faculty

Based on our review of the self-study materials and the Clinical Program's website, it appears that written policies address all four topics listed in Domain A6. Furthermore, our review of a random subset of student files confirmed that written records are kept documenting student performance evaluation. We also noted that the Clinical Program has explicit procedures in place and does an excellent job providing advisement. In addition to informal meetings, students meet periodically with both their major professor and with an Advisory Committee comprised of 3 different faculty members.

During our meetings with graduate students, we heard no complaints about financial assistance, evaluation and feedback, or lack of due process. With regard to financial assistance, the graduate students complimented the Clinical Program for providing at least four years, and often more than four years of financial assistance, even though written policies promise funding for only the first year of graduate training.

Domain B: Program Philosophy, Objectives, and Curriculum Plan

B1. Program publicly states a philosophy and model of training consistent with the sponsoring institution's mission that emphasizes:

(a) Integration of science and practice
(b) Education that is sequential, cumulative, and graded in complexity

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The program identifies as a "Boulder Model," scientist-practitioner" training program. Faculty described this model as a balance between practice and science, with the relative emphasis varying according to the interests of individual faculty members and students. The training model is consistent with the institution's mission for research productivity and service through research and dissemination of knowledge.

As stated in the self-study, the program and curriculum emphasize a balance between academic/research and clinical/applied that can be nuanced according to a student's career trajectory. This description is generally consistent with the visitors' observations. For the most part, the approach is successful. On occasion, a student's goals may not match with the mentor's relative emphasis. Most of these situations are resolved by the student transitioning to a new advisor (a process that students and faculty agreed is fairly seamless and satisfactory).

Curriculum and training are sequential, cumulative, and graded in complexity throughout the program. This progression, which was explained in the self-study via a year-by-year description, was evident as well to visitors through our conversations with the faculty and students. Students complete research coursework and a closely mentored research project during their first two years of the program. Students exhibit increasing independence on subsequent research endeavors (dissertation). Clinical training is similarly progressive. Students receive foundational coursework in year 1 (Theories & Methods of Psychotherapy; Advanced Psychopathology; Biological Foundations of Psychopathology; Assessment I), followed by pre-practicum in the summer between years 1 and 2. In year 2, students begin practicum training in the KU Psychological Clinic, which is housed in the Psychology Department. These clinical practica continue through the fall, spring, and summer of year 2. The Clinic Director and two affiliated community-based practitioners primarily lead supervision during year 2. These community-based supervisors expressed their strong commitment to their training role, the students, and the program. One supervisor volunteered that he modeled a scientist-practitioner philosophy by engaging students in empirical and theoretical study relevant to practicum experiences.

In the fall of year 3, generalist students complete a second year of practicum in the KU Clinic and the health track students complete a practicum year at the KU Medical Center. In year 4, students may opt to pursue additional advanced clinical training. These placements encompass a range of external placements (e.g., two VA hospitals, other medical centers, practice settings) with various training emphases (e.g., DBT, CBT, Motivational Interviewing, psychoanalytic).

**B2. Program specifies objectives in terms of competencies expected of graduates consistent with:**

(a) Program's philosophy and training model  
(b) Substantive area of professional psychology that is represented  
(c) An understanding of legal, ethical, and quality assurance principles

The program self-study articulated four goals and several objectives associated with each goal. Goals are to produce graduates who: (1) have a fundamental understanding and knowledge base regarding the broader field of psychology, (2) have a fundamental understanding and knowledge base in clinical psychology, (3) are capable of benefiting the science and practice of psychology by making independent contributions to the evolving base of skills and scientific knowledge required for ethical practice, and (4) who have the requisite knowledge, skills, and personal characteristics for entry into the ethical practice of clinical psychology. Competencies associated with the each goal's objectives include such performance criteria as successful completion of coursework, satisfactory practicum ratings, post-thesis evaluations, internship readiness evaluations, completion of independent literature review and thesis/dissertation oral defense,
internship placement and performance, licensure, post graduation employment, and alumni surveys. The combination of the goals, objectives, coursework, and competencies outlined above reflect the scientist-practitioner model articulated by the KU Clinical Psychology program.

Substantive areas of professional psychology are represented in the curriculum and include Professional Ethics (PSYC 975), Theories & Methods of Psychotherapy (PSYC 946), Advanced Psychopathology (PSYC 960), Assessment (PSYC 850; PSYCH 855), and Biological Foundations of Psychopathology (PSYC 961). Students are also required to take either Diversity Issues in Clinical Psychology (PSYC 888) or Cross Cultural Counseling (PRE 875). Legal, ethical, and quality assurance coursework is represented in the Professional Ethics, Diversity Issues, and Cross-Cultural Counseling courses.

B3. Program implements a coherent curriculum that enables students to demonstrate substantial understanding of and competence in the following areas: (IR C-16 and IR C-25)

In general, the program provides relevant coursework in an accessible and meaningful sequence with some choices when possible.

(a) The breadth of scientific psychology including:

- Biological aspects: Students gain an understanding of psychopathology in relation to neuroscience and genetics by taking a required course, PSYC961: Biological Foundations of Psychopathology.

- Cognitive aspects: Students must select at least one course from a set of six options that gives them grounding in Cognitive Psychology. Students also take two courses in Cognitive Assessment (PSYC850 and 855).

Affective aspects: PSYC960, Advanced Psychopathology provides students with deeper knowledge of the role of affective/emotional regulation issues in psychopathology.

- Social Aspects: Students have a choice of taking at least one course from a set of five options including PSYC774: Advanced Social Psychology I or PSYC775: Advanced Social Psychology II. These choices provide an advanced exposure to the social underpinnings of human behavior.

- History and systems: Almost all students take PSYC805 [from a set of three options], to fulfill a requirement.

Psychological measurement, Research Methodology, Data Analysis.

- Students gain knowledge of scale construction in PSYC968 (Research Methods in Clinical Psychology). These topics are revisited in their two Assessment courses (PSYC850 and 855).

- PSYC968: Research Methodology provides all students with knowledge of the various research methods and they also gain additional information about empirically validated therapeutic techniques in PSYC946: Theories and Methods of Psychotherapy. Since the students also complete a thesis and a dissertation they gain a hands-on experience in applying specific methodology for hypothesis testing.

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• Students typically take the following two courses from a set of five options: PSYC789: Psychological Statistics covers inferential statistics, parametric and nonparametric procedures, ANOVA, and multiple regression; and PSYC790: Statistical Methods in Psychology that covers t-tests, various types of regression, and general linear models.

(b) Foundations of practice in the program's substantive area including:

• Individual differences: Students gain a deeper understanding of the role of individual differences through their required coursework that includes the two Assessment courses (PSYC850 and 855) as well as PSYC960: Advanced Psychopathology. They also gain direct knowledge via practicum experiences.

• Human development: Students take a required course in this area from a set of three options: PSYC825, PSYC863, or PSYC867 and gain knowledge about the nature of biological, cognitive and social development across the life span.

• Dysfunctional behavior/psychopathology: Students gain in-depth knowledge of the various types of dysfunctional behavior/psychopathology in terms of diagnoses and treatment by taking two required courses: PSYC960 and PSYC961. In addition, PSYC946 provides training in treatment for various types of disorders. Additional coursework in assessment along with practicum training offers extensive practical training.

• Professional standards and ethics: PSYC975: Professional and Ethical Problems in Clinical Psychology provides students with a strong basis for understanding the variety of professional and ethical dilemmas they are likely to encounter in their careers. Students have the opportunity to become knowledgeable about the APA ethical code and learn how to handle their experiences in a professional manner.

(c) Diagnosing or defining problems through assessment and implementing intervention strategies (including empirically supported procedures) including exposure to the current body of knowledge in at least the following areas: (IR C-24)

• Theories and methods of assessment and diagnosis: Students learn fundamentals of intellectual assessment, in PSYC850 (Assessment I: Foundations of Psychological Assessment) and personality assessment in PSYC855 (Assessment II: Integrative Psychological Assessment). In-depth education regarding psychopathology, diagnostic systems, and cultural/diversity implications are provided in PSYC960 (Advanced Psychopathology).

• Effective intervention and the efficacy of interventions: Students receive didactic foundational education in PSYC946 (Theories and Methods of Psychotherapy), and they subsequently build upon this knowledge through required practicum courses over a two year period (PSYC964, PSYC965, PSYC966).

• Consultation and supervision (IR C-1)
Students gain exposure to consultation and supervision models through PSYC950 (Supervision and Consultation: Theory and Research). This class provides didactic exposure to supervision models, diversity issues, and consultation methods. Following

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this class, students have the opportunity to receive optional supervisory training experiences.

Readings for these classes reflect both classics and contemporary material, and the scope for all classes appears comprehensive and appropriate. Most also infuse cultural diversity into the topics covered.

(d) Issues of cultural and individual diversity relevant to all of the above.

Students can take PSYC888: Diversity Issues in Clinical Psychology or PSYC 825: Social Development that are offered every other year. Both courses expose students to issues related to cultural and individual diversity. In addition, students reported that other courses also included lecture material or homework assignments and readings that dealt with diversity related issues. Students also have the opportunity to work with diverse populations in their practicum and external placement sites (diversity in age, gender, race/ethnicity, disability, veteran status, religion, and nationality).

(e) Attitudes essential for life-long learning, scholarly inquiry, and professional problem-solving in the context of an evolving body of scientific and professional knowledge.

The program provides coursework, TAships, practicum assignments, as well as external placements along with timely feedback and mentoring; these experiences expose students to the scientist and practitioner aspects of the discipline. Students take a Proseminar course, PSYC898: Professional Issues in Clinical and Health Psychology for a total of six semesters and this exposes them to various role models and relevant presentations. Students gain experience with evidence based practices that help prepare them for their professional careers. Students are also able to attend research conferences and achieve research publications during their graduate study that allows for building networks.

B4. Program requires adequate and appropriate practicum experiences that include: (IR C-26)

(a) Placement of students in settings committed to training with appropriate and adequate supervision that provide a wide range of training experiences including empirically supported procedures (IR C-24)

The KU Psychological Clinic is the primary site for clinical training in year 2. In year 3, students train either for a second year at the Clinic (generalist track) or at the KU Medical Center (health track). Both sites offer opportunities to implement assessment and empirically supported treatment procedures. The KU Psychological Clinic provides general training with clinical supervision by the Clinic Director and several community-based affiliate faculty. Advanced (3rd year) students complete practicum placements either in the KU Psychological Clinic or the KU Medical Center. The program offers a variety of external placements, including inpatient, outpatient, and specialty training options. Onsite licensed psychologists provide supervision including individual and group supervision (with supervision from the Clinic Director). Advanced students have the opportunity to supervise junior students. Students reported that their preparation and supervision of their own supervisory roles was excellent and closely monitored.

In summary, students we met with described their clinical training as, “everything we expected and beyond!” Students felt they were placed well according to their interests, and they were supported by the Clinic Director when they sought to pursue or develop new treatment programs.
or groups. Community-based supervisors likewise expressed great appreciation for the level of preparation and skills training the KU students brought to their sites.

(b) Integration of the practicum component with other program elements including provision of adequate forums for the discussion of the practicum experience

Practicum training is integrated in a graded and cumulative manner throughout the clinical training at KU. In year 1, students take foundational courses to prepare them for clinical experiences. In the summer between years 1 and 2, students take a pre-clinical practicum to prepare them for working with clients. Across years 2 and 3, students take a minimum of five semesters of supervised practicum.

(c) Appropriate sequencing, duration, nature, and content of the practicum experiences consistent with the program’s goals and objectives

As noted, students begin their practicum training in the in-house clinic (year 2), followed by subsequent training in year 3 either at the departmental clinic or at KU Medical Center, depending on the student’s program of study. Clinical training becomes increasingly independent and (if appropriate for a student’s training) specialized across KU sites during years 2 and 3, culminating (if appropriate to a student’s skill and training needs) with opportunities to provide supervised supervision of junior colleagues.

(d) Justification of the sufficiency of the practicum experiences for internship preparation

The program provides generalist training during year 2, with increasing independence and specialization in subsequent years. These practicum experiences successfully prepare students for internship, as evidenced by the program’s excellent (near perfect) internship placement rate and the strong and favorable internship reviews the program’s students receive.

Note: Program is responsible for documenting how students achieve knowledge and competence and for setting minimal levels of acceptable achievement in the above areas (B1-4).

In the space below, provide additional comments relevant to this domain.

**Domain C: Program Resources**

C1. Program has an identifiable core faculty that includes (a) a designated psychologist leader(s) with appropriate credentials and experience, (b) who function as an integral part of the academic unit, (c) are sufficient in number for academic responsibilities, (d) have theoretical perspectives and experiences appropriate to the program’s goals and objectives, (e) demonstrate competence and credentials congruent with the program’s goals and objectives, and (f) are available and function as role models for students.

The Clinical Program has a designated DCT with appropriate credentials and professional experience as a clinical psychologist. The Clinical Program core faculty function as an integral part of the broader Department of Psychology, and the non-core faculty also contribute to the education and training of clinical students by teaching courses and

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serving on research committees. The size of the core faculty, supplemented by part-time adjunct faculty, appears sufficient to meet teaching and supervision responsibilities. Although the Program will lose one core faculty member to retirement in the next year, the Department has just hired a new faculty member for the Clinical Program who is scheduled to begin teaching in the fall semester, 2014. Similar to many training programs at this time, the Clinical Program at Kansas reflects a cognitive-behavioral perspective. There is exposure to other theoretical approaches in coursework and during supervision with external practicum supervisors. Our review of the resumes provided by core and adjunct faculty indicate competence and credentials congruent with the Program’s goals and objectives. Despite reports by several graduate students of variability in the timeliness with which core faculty provide feedback on thesis and dissertation drafts, the core faculty appear genuinely committed to support student achievement and to serve as role models for students. During the site visit, we noted that relatively few core faculty members serve as clinical supervisors in the on-campus training clinic, and this may limit their opportunity to serve as models integrating scientist and practitioner roles.

C2. Program has an identifiable body of students at different levels of matriculation who are (a) sufficient in number for meaningful peer interaction and socialization, (b) qualified for the program, (c) reflect through their intended careers and professional development the program’s philosophy, goals and objectives.

Based on our review of the relevant self-study Tables listing numbers of students by year, students’ undergraduate GPAs and GRE scores, and undergraduate (and previous graduate) institutions, the KU Program has a sufficient number of students (who are highly qualified) to provide for meaningful peer interaction. During our meetings with graduate students, they were supportive of each other, and provided concrete examples of opportunities for professional and social interactions.

During our meetings with graduate students, several noted differences among the core faculty in their support for pursuit of a career in clinical practice; however, both our review of the curriculum and discussions with faculty and students indicated that students are provided training to follow a wide variety of career paths.

Our examination of the self-study, and our conversations with the DCT, confirmed that the Program has a low rate of attrition. When asked why he thought so few students dropped out, the DCT attributed high retention to cohesion among the students, the multi-member advising committees, socialization activities, and a supportive faculty. Those few students who have left the Clinical Program since the last accreditation did so for understandable personal or professional reasons.

C3. Program has additional resources needed to accomplish its goals and objectives, including (a) financial support for educational and training activities, (b) clerical and technical support, (c) training materials and equipment, (d) physical facilities, (e) student support services, and (f) access to and control over practicum training sites ...
The Clinical Program explicitly promises financial support for only the first year as a graduate student; however, and to their credit, the Clinical Program has provided, and anticipates being able to continue providing, financial support for four (if not more) years of graduate education using graduate research assistantships, graduate teaching assistantships, and associate instructorships.

In support of off campus training, the Program (and some individual faculty with grant funds) provide money for students to attend conferences and other professional development activities. The Program also has an awards program that provides funds to honor student accomplishments. As another example of financial support for training activities, the Program has funds to hire external clinical supervisors for the on-campus training clinic.

The Program supports a clinical colloquium series and has just begun an “outstanding alum” series to bring former students back to campus to meet with faculty and graduate students. The DCT and Director of the Psychology Clinic edit an annual newsletter to help inform current and past students about achievements of the Program.

With regard to clerical and technical support, the on-campus training clinic has a full-time secretary/office manager. The Psychology Department has several full-time administrative staff who, among their other responsibilities, provide support to the Clinical Program. In addition, the Department has access to IT specialists who work for the University.

The Department supports a full-time non-tenure track Director of the on-campus Psychology Clinic. The graduate students and faculty were uniformly positive in their evaluation of the contributions to the training program made by the current Director. Visitors noted the reliance on the Clinic Director to fulfill many diverse roles and services. Although the current arrangement works well and is lauded by the students, the program may consider as part of the self-study process the advantages and vulnerabilities of relying to that extent on a single full-time employee.

The on-campus training clinic is well-stocked with up-to-date testing materials, including computer administered/scored personality inventories. The recording equipment in the clinic training rooms is state-of-the-art. During the site visit, students told us that the Clinic Director has purchased any book they requested for the clinic’s own library. During our site visit, we observed the clean and well-kept physical facilities – these included numerous and nicely furnished rooms for on-campus practicum training, offices for faculty and students, and computer labs for students.

The University offers a wide variety of student support services, and information about these services is provided to graduate students in orientation and other materials. A meeting with the Dean of the University Library documented support for student and faculty research. Specifically, the Library has a budget for requested book purchases, it participates in inter-library loan programs to acquire other books for use by students and faculty, it subscribes to several electronic data bases (e.g., PsycINFO) and e-journal services (e.g., Wiley package, Sage package, APA journals), and it even delivers

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requested materials to faculty offices. The Library also hosts an open-access program, called KU Scholar Works, which includes materials and articles authored by faculty and students in the Department of Psychology.

The Clinical Program has access to an impressive variety of practicum training sites, including their own on-campus Psychological Clinic (over which they have complete control) and numerous off-campus sites, including VA Medical Centers, community mental health settings, and university-affiliated medical hospital settings. During the site visit, we met with off-campus practicum supervisors, and they provided numerous examples of their concrete support for clinical training of students enrolled in the KU program. The external supervisors were also very complimentary of the intelligence, preparation and professionalism of KU clinical students. The Director of the training clinic coordinates regular evaluation of students by external supervisors.

C4. If the program is a consortium ....

Not applicable – this program is NOT a consortium.

Domain D: Cultural and Individual Differences and Diversity

In the space below each sub domain, please provide a narrative in full sentences that specifically addresses all of the items.

D1. The program: (IR C-22)

- Has made systematic and long-term efforts to attract and retain students and faculty from differing ethnic, racial, and personal backgrounds (see A.5 for definition of diversity)
- Ensures a supportive learning environment for training diverse individuals who represent a broad cultural and individual spectrum
- Avoids actions that restrict program access on grounds irrelevant to success in graduate training (see Footnote 4 for exceptions)

The program has made systematic and long-term efforts to attract and retain students and faculty from diverse backgrounds. At the faculty level, they currently have diversity in gender and with the recent hire of their best applicant they have also been able to add slightly more diversity in ethnicity/race as the new faculty member is an African-American female. At the student level, there is representation of different backgrounds due to gender, ethnicity, sexual orientation, religion, and nationality. The program is proactive about providing a supportive learning environment for educating and training diverse individuals and does not prevent access to qualified students.

D2. Program has a thoughtful and coherent plan to provide students with relevant knowledge and experiences about the role of individual and cultural diversity in psychological science and practice. (IR C-23)

The program offers a curriculum that includes a specific course on Diversity and also integrates diversity elements into all its course readings, assignments, case studies, applications, etc. As part of their clinical training, the students interact with clients from varied socio-economic and race/ethnicity backgrounds (African-American, Hispanic). Students who are independent course

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instructors have the opportunity to interact with students who are from diverse backgrounds (particularly international students). At off-site practicum placements, students have an opportunity to interact with clients who are very diverse in terms of being veterans, older, disabled, or non-native speakers of English. Finally, the program conducts a Speaker Series and invites speakers who inform students and faculty about issues related to diversity and multicultural factors in clinical training.

In the space below, provide additional comments relevant to this domain.

Overall, the faculty and students reported being satisfied with the opportunities to interact with individuals from diverse backgrounds, gain knowledge and clinical experience regarding issues of individual and cultural diversity in clinical psychology.

Domain E: Student-Faculty Relations

In the space below each sub domain, please provide a narrative in full sentences that specifically addresses all of the items.

E1. The program:
   • Recognizes the rights of students and faculty to be treated with courtesy, respect, collegiality, and ethical sensitivity
   • Informs students of these principles and of their avenues of recourse should issues arise

The university, the department, and the Clinical Psychology graduate program provide separate orientations for students, when they first arrive. They also receive a package of information that contains information about the program and the surrounding area. This package includes information about what a student can do should she or he wish to file a grievance. Additionally, students reported that they obtained useful information from their research advisor/mentor and the other members of their research lab. Further, all the first year students occupied the same office space and senior level students often stopped by to answer questions, or provide guidance.

E2. Faculty members are accessible to students, provide guidance and supervision that encourages timely completion, and serve as role models who promote students' acquisition of relevant knowledge, skills, and competencies.

Students from each cohort have a student representative who attends faculty meetings to provide input regarding students' experiences. Students mentioned that faculty members were responsive to emails and visits during office hours. Students described that they enjoyed performing 'skits' at the end of each Fall semester during which they described their faculty members and themselves. They reported that this occasion provided all of them a chance to be lighthearted and laugh at themselves and helped in developing a sense of closeness between students and faculty members.

There appears to be an inconsistency between faculty with regard to the level of research support and mentorship provided. Health track students felt supported and encouraged by mentors and subsequently were satisfied with their productivity. Within the generalist track, faculty and students alike shared concerns that some mentors have limited

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openness to student interests and ideas. Related difficulties arose with certain mentors that included routinely missing appointments and excessive delays (up to 2 months) in returning thesis and dissertation drafts. These delays in turning around drafts of thesis and dissertation manuscripts can slow degree progress and frustrate graduate students. Visitors note, however, that these concerns have come to the attention of program leadership, and steps have already been taken to resolve the issues.

E3. Respect for cultural and individual diversity is demonstrated in accordance with Domain A5.

Both students and faculty members reported that they believed that there was respect for diversity due to cultural and individual level factors (gender, age, religion, language, race/ethnicity, or sexual orientation) as well as diversity in theoretical perspectives.

E4. Upon admission students’ are given written policies and procedures regarding requirements, expected performance, program continuance, and termination procedures. Students receive, at least annually, written feedback on the extent to which they are meeting the program’s requirements and expectations including:

(a) Timely, written notification of all problems and opportunity to discuss them
(b) Guidance regarding steps to remediate all problems (if remediable)
(c) Written feedback on the extent to which corrective actions have or have not been successful in addressing the issues of concern

During their first year in the Program, students select an Advisory committee of 2-3 faculty members that provides the student with evaluation of performance in course work, progress in research, and offers guidance/mentoring tips for improvement, on a regular and annual basis, every Spring semester. This is done through a formal, face-to-face meeting. During this process, students identify future goals and steps for achieving these goals. We observed documentation of these Advisory Committee meetings in our review of a randomly selected subset of student files.

Students also have the opportunity to provide feedback to the program regarding evaluations of courses and practicum experiences. Students did mention that they would like the program to: a) standardize the expectations of the supervisors at external placements, b) have a larger number of placements in the Medical Center in Kansas City, c) have some flexibility in scheduling TAships before practicum placements are finalized, and d) reduce the wide variability in how quickly they received feedback on their theses/dissertations as some professors were quicker than others in the turn-around time.

E5. Programs keep records of all formal complaints and grievances filed since the last accreditation site visit and make these available as part of the CoA’s periodic reviews. (IR C-3) (IR C-12)

The program maintains a system for logging any formal complaints and grievances since the last accreditation site visit. So, far there have been no formal complaints or grievances during this time period.

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Note: Programs must adhere to institutional regulations and applicable local, state, and federal statutes concerning due process and fair treatment.

In the space below, provide additional comments relevant to this domain.

The program appears to be doing an effective job of maintaining collegial and respectful student-faculty relations. Students report that they are satisfied and pleased with their program of study as well as the atmosphere in the department. They appreciate the opportunity to get varied and useful professional training experiences that place them at a competitive advantage in gaining internship matches.

Domain F: Program Self-Assessment and Quality Enhancement

In the space below each sub domain, please provide a narrative in full sentences that specifically addresses all of the items.

F1. With appropriate involvement of students, the program engages in regular, ongoing self-studies that address:

(a) Its effectiveness in achieving goals and objectives in terms of outcome data while students are in the program and after completion
(b) How its goals and objectives are met through the program’s educational and training processes
(c) Its procedures to maintain current achievements or to make program changes as necessary

(a) Both proximal and distal outcome data are collected to monitor and assess the program’s success at meeting its goals. Proximal data sources include completed coursework, progress ratings based on post-thesis defense evaluations (this is a new source, so no data are yet available), Internship Candidate Competence and Readiness evaluations, oral comprehensive examination, internship placement and completion rates, internship evaluations, completion of thesis, “task” paper, and dissertation, and student self-report ratings of program components. Distal outcomes are based on EPPP passing scores, licensure, post graduation employment settings, and self-report ratings of the program components. Review of these data, in regard to program goals and objectives, revealed that the program is meeting its goals pertaining to student competencies, and that students (current and former) are satisfied with their training.

(b) Goals and objectives are met through curriculum design, sequential, graded, and cumulative training in research settings and clinical practica, and regular student tracking (ongoing updates and annual formal evaluations). The program regularly assesses students’ performance, including evaluation of clinical activities from practicum supervisors, research accomplishments, and overall annual progress. All student files the visitors examined contained copies of the annual student evaluations. Current students are engaged in ongoing professional activities related to publications, presentations, and membership in professional organizations.

(c) The program remains abreast of progress regarding training via memberships and attendance at CUDCP, ADPTC, APCS, and CCHPTP. As a result of these memberships, the program engaged in a comprehensive evaluation of program curriculum and requirements during the 2004-2005 school year. Since then, less substantial program changes have been implemented as need arises (e.g., addition of a post-masters defense evaluation). Visitors became aware of two

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examples where the program responded to self-identified concerns. In one example, program leadership became aware of some mentoring issues with a few faculty members (see Domain E). Program leaders subsequently took steps to resolve these difficulties. In the second example, core faculty recognized that the graduate statistics course required by the department provided adequate theoretical foundations but did not prepare students for applied statistical analyses. The program responded by developing a course that trained students to apply data analytic procedures to clinical research questions. More generally, the self-study noted that core faculty used the current self-study process as an opportunity to generate discussions regarding program functioning during Fall 2013.

F2. Program periodically and systematically reviews its goals and objectives, training model, and curriculum, and related outcome data relative to:

(a) Sponsoring institution’s mission and goals
(b) Local, state, regional, and national needs for psychological services
(c) National standards of professional practice
(d) Evolving body of scientific and professional knowledge
(e) Graduates’ job placements and career paths

The Program’s goals and objectives fit with the University’s mission and goals for research, service, and teaching. Faculty scholarship and service (local, regional, and national), as well as the job placements of recent graduates reflects the program’s attention to needs for psychological services and standards of professional practice. Program faculty keeps up on needs for psychological services through active participation in relevant professional associations (e.g., local, state, regional, and national) and national training organizations (e.g., CUDCP and ADPTC). Their strong commitment to research and publication keeps them current on scientific and professional knowledge. Faculty also involves students to a great extent in research scholarship. As such, attention to evolving scientific and professional knowledge is an endeavor shared between faculty and students. Graduates of the program have appropriate placements and accomplishments that represent their scientist-practitioner training. Graduates from the program have taken a wide range of professional positions in academic, research, clinical, and postdoctoral positions (see Table 9). Consistent with the training model, initial and subsequent job placements reflect research or academic positions (approximately one-third), clinical positions (just under half), and postdoctoral positions. The EPPP pass rate for graduates between 2007 and 2012 is 91%.

In the space below, provide additional comments relevant to this domain.

Domain G: Public Disclosures

G1. (a) Program describes itself accurately and completely in documents available to current and prospective students and other “publics.” Specifically, descriptions of the program should include goals, objectives and training model, requirement for admission and graduation, curriculum, resources, policies and procedures, research and practicum experiences, and education and training outcomes.

Our review of the website for the Clinical Program (http://psych.ku.edu/clinical/) reveals that there is information regarding the Program’s philosophy and various training opportunities in the clinical health track and general adult track. The website provides a
listing of courses and when they might be taken during one’s education, information about financial support for students, admissions policies and procedures, and support for diversity, among other topics. The website is well-organized and easy to navigate.

G1. (b) Accreditation status including name, address, and telephone number of the CoA is included.

The “home” page of the Clinical Program notes their current and historical status as an accredited program, and the text below appears at the bottom of the Program’s “home” page:

“For additional information or questions on the accreditation of the KU Clinical Psychology Program, contact the Office of Program Consultation and Accreditation, American Psychological Association, 750 First Street NE, Washington, DC 20002-4242. Web: http://www.apa.org/ed/accreditation/ Phone: 202-336-5979. E-Mail: apaaccred@apa.org.”

**Domain H: Relationship with Accrediting Body**

In the space below each sub domain, please provide a narrative in full sentences that specifically addresses all of the items.

**H1. Program abides by the CoA’s published policies and procedures.**

**H2. Program informs the CoA in a timely manner of changes in its environment, plans, resources, and operations that could affect program quality. (IR C-19)**

**H3. Program pays necessary fees to maintain accredited status.**

Correspondence between CoA and the Program Director indicates that the program complies with CoA policies and procedures and maintains proper communications with CoA. Presumably, the program is current with CoA fees.

**In the space below, provide additional comments relevant to this domain.**

**Schedule for American Psychological Association Site Visitors to Clinical Psychology Program at the University of Kansas, April 17-18, 20134**

The site visitors are staying at the Oread Hotel
At Fraser Hall, the site visitors’ “Home Base” will be 341 Fraser.
Peter Vik, Ph.D
Professor and Ph.D. Program Director
School of Professional Psychology
Pacific University
190 Se. 8th Avenue, Suite 260
Hillboro, OR 97123

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