Student Handbook

Academic Year: 2019-2020
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DISCLAIMER

This handbook is meant for current students in the program. Content is subject to change. Students will be notified via email of critical changes to the structure, policies and procedures that govern them within the program.

ABOUT THE PROGRAM

The Master of Arts in Applied Child & Adolescent Psychology: Prevention & Treatment gives current and aspiring child psychology professionals the skills to diagnose mental health disorders in children and teens and provide effective, evidence-based interventions. The program is offered by the UW Department of Psychology in collaboration with UW Professional & Continuing Education (UWPCE/UWCC). The curriculum provides a broad foundation in child psychology with a focus on evidence-based prevention and treatment.

The program consists of classes and a practicum. Courses mostly take place in the late afternoons, evenings or weekends on the UW Seattle campus, supplemented by online discussions. Students have the option of taking the five-quarter, full-time program or the part-time program, completed just over two years.

The faculty includes nationally-recognized experts in child psychology affiliated with the Department of Psychology, the Department of Psychiatry & Behavioral Sciences and the Center for Child & Family Well-Being.

CONTACTS

Lora Brewsaugh
Program Operations Specialist
132 Guthrie Hall | 206-543-3067 | lorab2@uw.edu | psychma@uw.edu

Lora is the primary contact for the program. Lora emails students with news and information related to program and helps students navigate the support resources and offices available at the University.

CORE FACULTY

Lynn Fainsilber Katz, Ph.D. (Program Director & Instructor) is a Research Professor in Child Clinical Psychology and Developmental Psychology, and Associate Director of the University of Washington’s Center for Child and Family Well-Being. Dr. Katz is nationally recognized as a leading expert in the area of family relations. She has 25 years of experience working with children and families on issues relating to marital conflict, parenting and family relationships.
She has received over $10 million of funding from the National Institutes of Health for her work on domestic violence, parenting, childhood aggression, adolescent depression and family adjustment in the context of pediatric cancer. She has also taught courses on child and adolescent behavior disorders, children’s social development, research methods, and adult psychopathology at the University of Washington. Most recently, she developed a parenting intervention for survivors of domestic violence and is adapting that program for use with children with conduct problems. She has lectured extensively on the effects of marital conflict on children, and on parenting qualities that buffer children from marital dissolution. Dr. Katz has been on the faculty at UW since 1992 and has graduate faculty status.

katzlf@uw.edu | 206-543-5625

Georganna Sedlar, Ph.D. (Practicum Coordinator & Faculty Instructor) is currently an Assistant Professor and a licensed clinical psychologist in the Department of Psychiatry and Behavioral Sciences at the University of Washington’s School of Medicine, and an Adjunct Clinical Professor in the Department of Psychology. Dr. Sedlar is immersed in numerous professional activities related to workforce development, such as teaching, supervision, and consultation. Dr. Sedlar is also a core team member of CBT Plus, a statewide initiative that trains community based mental health providers across Washington State in delivering evidence-based practices for children in Trauma Focused CBT, CBT for Anxiety, CBT for Depression, and Parent Management Training. In her work with this initiative, she has been responsible for training other trainers, providing consultation to providers, curriculum development, and evaluation of this training initiative. Her other activities include supervising clinical psychology graduate studies and psychiatry fellows and serving as a consulting psychologist for the Foster Care Assessment Program (FCAP) teams. She also works on various state sponsored initiatives and projects related to successful implementation and sustainment of evidence-based practices in Washington State.

grs1@uw.edu | 206-616-4207

Liliana Lengua, Ph.D. (Faculty Leadership Team Member) is the Carl R. Carlson Professor of Psychology and Director of the Center for Child and Family Well-Being. Dr. Lengua is a child clinical psychologist studying the effects of adversity on children, examining risk and protective factors that contribute to children’s resilience or vulnerability. She examines children’s neurobiological stress responses, temperament, coping, parenting and family contexts as risk and protective factors that account for the effects of adversity on children’s social, emotional and academic well-being. She has been an investigator on several federally-funded projects examining the development of executive function (NICHD), the effects of low income, neighborhood, family, and parenting on neurobiological systems of self-regulation, and their effects on preschool and preadolescent children’s social, emotional and academic development (NICHD, NIMH), neighborhood, family and peer effects on adolescent substance use (NIDA), and childhood risk factors for the emergence of adult mental health problems (NIDA). Dr.
Lengua is the author of over 70 published papers. She serves on the steering committee for the CDC-funded Washington State Essentials for Childhood Initiative, collaborates with the Harvard Center for the Developing Child's Frontiers of Innovation, and serves on the board of trustees for Neighborhood House, a private, nonprofit anti-poverty organization. Dr. Lengua has been on the faculty at the University of Washington since 1996 and has graduate faculty status.

liliana@uw.edu | 206-543-5655

CURRICULUM

DEGREE REQUIREMENTS
To earn the Master of Arts in Applied Child & Adolescent Psychology: Prevention & Treatment, students must complete 46 credits. The credits consist of 36 credits of coursework and 11 credits of a clinical practicum in a community-based setting.

Students will have the option of completing all course requirements in five quarters (full-time) or just over two years (part-time). Applicants state their preference for full-time or part-time enrollment as part of their application, and their offer letter reflects their admission as either a full- or part-time student. Students who choose to complete the program part-time over two years have to enroll in at least 21 course credits in their first year to ensure timely completion of the program.

TRANSFER CREDITS
The program does not currently accept transfer credits.

SINGLE COURSE ENROLLMENT FOR NON-MATRICULATED STUDENTS
The program makes some classes available to students who are not enrolled in the program on a space-limited basis. Information for single course enrolled students can be found on our website: www.appliedchildpsych.uw.edu/program-overview/courses-curriculum/single-course-enrollment/

UW MASTER OF ARTS IN APPLIED CHILD & ADOLESCENT PSYCHOLOGY: PREVENTION & TREATMENT
<table>
<thead>
<tr>
<th>Practice Issues</th>
<th>Practice*</th>
<th>Evidence-Based Treatments</th>
<th>Psychopathology &amp; Treatment</th>
<th>Conceptual Framework</th>
<th>AREA OF EXPERTISE</th>
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<tr>
<td></td>
<td></td>
<td>Parenting Interventions (3 credits)</td>
<td>Approaches to Child and Adolescent Treatment (3 credits)</td>
<td>Principles of Assessment and Behavior Change (3 credits)</td>
<td>SUMMER A</td>
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<td>Counseling Skills with Individuals &amp; Families (3 credits)</td>
<td>SUMMER B</td>
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<td>Ethics and Law in Counseling Settings (1 credit)</td>
<td>Practicum (1-7 credits)</td>
<td>CBT for Anxiety &amp; Mood Disorders (3 credits)</td>
<td>Child and Adolescent Psychopathology: Assessment and Diagnosis (3 credits)</td>
<td>Counseling Skills with Individuals &amp; Families (3 credits)</td>
<td>SUMMER INTENSIVE</td>
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<tr>
<td>Multicultural Issues (1 cr)</td>
<td>Practicum (1-7 credits)</td>
<td>TF-CBT and Trauma Treatment (3 credits)</td>
<td>Extreme and Complex Cases (3 credits)</td>
<td>Child and Adolescent Psychopathology: Assessment and Diagnosis (3 credits)</td>
<td>AUTUMN</td>
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<th>Spring</th>
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<td>Practicum (1–7 credits)**</td>
<td>Practicum (1–7 credits)**</td>
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<td>Social and Emotional Development (3 credits)</td>
<td>Critical Thinking about Research (3 credits)</td>
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*Practicum includes online discussion forums and in-person meetings about professional issues including professional resiliency and how to be successful in a team environment.

**Spring and summer practicums are structured with variable credits to allow students to complete the program in a manner that is consistent with their academic and career goals.
<table>
<thead>
<tr>
<th>Year</th>
<th>Classes</th>
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<tr>
<td>2019</td>
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<tr>
<td>SUMMER</td>
<td>Parenting Interventions (3 credits)</td>
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<td>Principles of Assessment and Behavior Change (3 credits)</td>
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<td>WINTER</td>
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<td>SUMMER INTENSIVE</td>
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<td>SUMMER</td>
<td>Principles of Assessment and Behavior Change (3 credits)</td>
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<tr>
<td>WINTER</td>
<td>Principles of Assessment and Behavior Change (3 credits)</td>
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<tr>
<td>SPRING</td>
<td>CBT for Anxiety &amp; Phobia (3 credits)</td>
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<td></td>
<td>Child and Adolescent Psychopathology: Assessment and Treatment of Extreme and Abnormal Developmental Psychopathology (3 credits)</td>
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<tr>
<td>WINTER</td>
<td>Family Therapy in Child and Adolescent Treatment (3 credits)</td>
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<tr>
<td>SPRING</td>
<td>Critical Thinking About Research and Ethics (3 credits)</td>
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<td></td>
<td>Issues in Multicultural Practice (1 credit)</td>
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<tr>
<td>SUMMER</td>
<td>CBT for Anxiety &amp; Phobia (3 credits)</td>
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<tr>
<td>WINTER</td>
<td>Principles of Assessment and Behavior Change (3 credits)</td>
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<td>WINTER</td>
<td>Principles of Assessment and Behavior Change (3 credits)</td>
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**Learning Outcomes**

The curriculum is designed to give students a theoretical foundation in child psychology and prepare graduates to diagnose and treat mental health disorders in children and adolescents.

Upon graduating from the program students will have developed skills and competencies to:

1. Diagnose psychosocial difficulties and disorders in children and youth.
2. Assess, select and design intervention activities based on evidence-based practices.
3. Deliver evidence-based psychosocial interventions for children and youth with anxiety, trauma symptoms, behavior problems and complex needs.
4. Obtain foundational knowledge of effective treatment that is generalizable to other evidence-based treatments or programs.
5. Use multiple tools to assess and analyze prevention and intervention needs for specific therapeutic or educational contexts.
6. Inform the decision-making process for the evaluation, selection and design of intervention and prevention programs.
7. Acquire and implement strategies for success in conducting professional interactions (e.g., mindfulness, effective listening, and effective verbal and written communication as appropriate to the field).
8. Inform legislative and policy-making processes.
9. Enhance their readiness for passing the certification exams for mental health professionals.
10. Understand and apply ethical principles involved in the delivery of interventions for children and youth.
11. Establish professional connections for career advancement.

**Pathway to Licensure as a Licensed Mental Health Counselor**

For those seeking to become a Licensed Mental Health Counselor (LMHC), the Master of Arts in Applied Child & Adolescent Psychology: Prevention & Treatment is designed to equip graduates with the foundational competencies outlined by the Washington State Department of Health to meet LMHC licensing requirements. Practicum hours completed during the program do not count toward LMHC licensure. If you are considering getting licensed in another state, we recommend that you make sure our program meets that state’s educational requirements. Our program may not meet state licensing requirements in other states.
**COURSE DESCRIPTIONS**

**PSYCAP 510—Conceptual Foundations of Developmental Psychopathology: Risk & Protective Factors**  
Credits: 3  
This course draws from two conceptual frameworks that form the basis of current thinking about developmental psychopathology. The developmental psychopathology perspective focuses on risk and protective factors in child psychopathology, and highlights the continuity between typical and atypical development. The bioecological model of human development emphasizes the importance of understanding bidirectional influences between the individuals’ development and their surrounding environmental context. This model provides an organizational framework for understanding intrapersonal, family, neighborhood/community and social/economic risk and protective factors relevant to understanding child mental health. In this class, we will address intra-individual (e.g., temperament, emotion regulation) as well as broad social-contextual factors that contribute to children’s mental health problems, such as parent substance use and mental health problems, intimate partner violence, poverty and contexts of abuse and neglect.

**PSYCAP 512- Social & Emotional Development**  
Credits: 3  
Social-emotional development includes the child’s experience, expression and management of emotions, and the ability to establish positive and rewarding relationships with others. It involves both intra- and interpersonal processes. Social and emotional skills are critical to being a good student, citizen and worker. In this course, we will cover the core features of social-emotional development, including temperament, attachment, emotional competence and regulation, development of the self, gender, identity development (including ethnic and racial socialization) and prosocial behavior. As healthy social-emotional development unfolds in an interpersonal context, we will focus on the role of parents, peers, romantic relationships and other caregivers as key contexts for strengthening children’s capacity to learn and develop.

**PSYCAP 514- Child & Adolescent Psychopathology: Assessment & Diagnosis**  
Credits: 3  
This course introduces students to the major disorders typically diagnosed in childhood and adolescence, including the DSM-5 diagnostic criteria, current information on their etiology and the latest research on the most effective assessment and treatment. Students examine the complexity of child psychopathology from an integrated perspective that considers biological, psychological, social and contextual influences on its development. The course aims to strengthen the critical thinking and conceptual skills necessary to formulate comprehensive case formulations and develop accurate diagnoses. Upon completion of the course, students will be able to accurately conceptualize and diagnose complex diagnostic presentations in childhood and
adolescence, including disruptive behavior disorders, affective disorders, anxiety disorders, autism spectrum disorder and eating disorders.

**PSYCAP 516— Approaches to Child and Adolescent Treatment**
Credits: 3

This course offers comprehensive details about providing evidence-based treatment to children experiencing a range of emotional and/or behavioral problems. Students learn about various treatment implementation approaches and examine the application of those approaches with diverse families (e.g., culturally, ethnically, sexually, economically). Upon completion of the course, students will understand the most effective treatments across a range of different childhood disorders and have a rubric for determining how to make treatment decisions.

**PSYCAP 518—Ethics & Law in Counseling Settings: Children, Adolescents & Families**
Credits: 1

This course will cover ethical and legal principles in the practice of counseling and psychology and prepare students to identify and resolve potential ethical dilemmas. The course will follow a seminar format with special emphasis on the student’s full preparation for, and active participation in, class discussions and activities.

**PSYCAP 520 – Critical Thinking about Research**
Credits: 3

Leadership in the area of child psychology and treatment requires the capacity to think critically about current research and to communicate current findings to others. This course will provide students with an understanding of core concepts in research methodology and how to critically evaluate research findings. Ethical guidelines for practice and research will also be discussed.

**PSYCAP 522- Evidence-Based Practices in Counseling Settings: Extreme & Complex Needs**
Credits: 3

In this course, students learn to effectively treat more challenging disorders, such as conduct disorder, substance abuse and suicidal behaviors. For children and families in which these problems exist, symptom presentation is often complicated by difficulties in school, involvement in the juvenile justice system and often involvement in the child welfare system. In addition to learning several evidence-based approaches (including the principles of Multisystemic Therapy and Dialectical Behavior Therapy), students learn how to work effectively in multidisciplinary teams and manage the complex needs of these families. Students also learn motivational interviewing techniques.

**PSYCAP 524- Evidence-Based Practices in Counseling Settings: CBT for Anxiety and Mood Disorders**
The course provides students with an in-depth, hands-on introduction to evidence-based treatment for children and adolescents with anxiety disorders. Students are also introduced to evidence-based approaches for treating mood disorders. Experiential components of the class include self-monitoring of thoughts, feelings and behaviors related to anxiety, goal setting, hierarchy building, and imaginal, interoceptive and in vivo exposure. Practicing the skills taught in class helps students understand more about the range of experiences clients may have in treatment for anxiety and mood disorders.

**PSYCAP 526—Evidence-Based Practices in Counseling Settings: Parenting Interventions**  
Credits: 3

In this course, students learn to treat oppositional defiant disorder and other disruptive behavior disorders in children through parent management training. Students learn the underlying skills and strategies for treatment, engage in dialogue about cultural, social, and other family factors influencing treatment, and receive training in Helping the Noncompliant Child, an evidence-based treatment with over 30 years of research (McMahon, R. J., & Forehand, R. L. (2003). *Helping the noncompliant child: Family-based treatment for oppositional behavior*. New York: Guilford Press.).

**PSYCAP 528- Multicultural Issues in Counseling Settings: Children, Adolescents & Families**  
Credits: 1

This course will cover key principles, theories and applications of multiculturalism in counseling contexts. This course will examine several aspects of various cultural experiences as they impact the client, counselor and the counselor-client relationship. Culture can represent a variety of experiences and ways people identify themselves, including race/ethnicity, class status, sexual orientation, gender, and religion. The course will follow a seminar format with special emphasis on the student’s full preparation for, and active participation in, class discussions and activities, as well as small group work and written assignments.

**PSYCAP 530- Evidence-Based Practices in Counseling Settings: Trauma-Focused CBT and Treating Trauma**  
Credits: 3

This course offers an in-depth, hands-on introduction to evidence-based Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). Students will learn the fundamentals of how to assess and treat trauma in children. The course, which integrates theory and practice, also focuses on adaptations to match client presentation, ethnicity, culture, socioeconomic status and treatment setting.
PSYCAP 532 - Principles of Assessment & Behavior Change
Credits: 3

This course provides students with an understanding of the key conceptual principles of behavior change. It covers the “nuts and bolts” that underlie most evidence-based therapeutic interventions for children and adolescents. Students explore basic principles such as positive and negative reinforcement, conditioning, extinction, response cost, functional analysis, reinforcement schedules, exposure, coercive cycle, antecedent management/stimulus control, token systems and compliance training. Students learn how to apply these principles to case conceptualization.

PSYCAP 534 - Counseling Skills With Individuals & Families
Credits: 3

In this course, students learn to treat post-traumatic stress disorder and associated symptoms through learning a cognitive behavioral approach specific to trauma treatment. Students learn Trauma-Focused Cognitive Behavioral Therapy, the most well-researched trauma treatment for children and adolescents. Students also learn therapeutic approaches that are helpful in the treatment of anxiety, especially specific phobias and generalized anxiety.

INDEPENDENT STUDY

Students have the option of completing an elective, independent study for credit/no credit on a topic of their choosing. Independent studies are not required—they are an elective option and are completed in addition to the required credits for the program. Independent studies cannot be substituted for other program courses.

The topic must relate to one of the program learning competencies listed here:

- Diagnose psychosocial difficulties and disorders in children and youth
- Deliver evidence-based psychosocial interventions for children and youth with anxiety, trauma symptoms, behavior problems, and complex needs
- Obtain foundational knowledge of effective treatment that is generalizable to other evidence-based treatments or programs
- Use multiple tools to assess and analyze prevention and intervention needs for specific therapeutic or educational contexts
- Inform the decision-making process for the evaluation, selection and design of intervention and prevention programs
- Inform legislative and policy-making processes

STRUCTURE & LENGTH
The length and structure of independent studies in the chart below should be taken as a guideline for the type of work expected to earn a given amount of credits. These are subject to negotiation, however the faculty will be more likely to approve an independent study proposal if the work and credit proposal aligns with this rubric:

<table>
<thead>
<tr>
<th>Credits</th>
<th>Structure</th>
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<tbody>
<tr>
<td>1–3</td>
<td>1 quarter in length. The student identifies and reads 10–15 scholarly articles on a given topic and turns in weekly 2–3 page reflection papers to their independent study instructor</td>
</tr>
<tr>
<td>4–7</td>
<td>2 quarters in length. The student identifies and reads 20–30 scholarly articles on a given topic and turns in a 10-15 page research paper to their independent study instructor as a final project.</td>
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<tr>
<td>8–10</td>
<td>3–4 quarters in length. The student identifies and reads 50 scholarly articles on a given topic and turns in a 20–30 page research paper to their independent study instructor as a final project.</td>
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Other activities that could count as coursework could be participating in the implementation/development of policies or projects at a practicum site, completing training/certification programs, or structured volunteer activities. Any such activity must be accompanied by a written component that parallels the credit allocation above. We recommend discussing this content with your faculty advisor before submitting a formal proposal.
**PROPOSAL & APPROVAL PROCESS**

Students should discuss their interest in an independent study with their faculty advisor as early as possible. Students may also ask their advisory to informally review their independent study proposal before submitting it.

The formal proposal should be a 1–2 page, single-spaced document. It should be submitted no later than 6 weeks prior to the start of the quarter and outline the following:

- **Topic:** 1 sentence specifying the area or topic
- **Independent Study Instructor:** The student should have an instructor in mind in advance and list their name here. If students do not have an instructor in mind, they should consult with program faculty to identify someone who can act in this role before submitting the proposal.
- **Learning Objectives:** 2–3 paragraphs specifying the questions the student wishes to answer through independent study
- **Program Relevance:** 1–2 paragraphs detailing how the independent study fulfills one or more of the program’s overall learning outcomes, listed above.
- **Paper proposal:** For independent studies 4 credits and above, 1 paragraph proposing what will be covered in a research paper.
- **Timeline:** A list of dates by which the student proposes achieving specific milestones like turning in a bibliography, completing X number of readings, and turning in assignments.

Students email proposals to Program Specialist, Lora Brewsaugh, for consideration.

**APPROVAL PROCESS**

The student will receive a reply from the Program Director within 30 days either approving the proposal, approving it with changes, or rejecting it. If the proposal is approved or approved with changes, the student has 5 business days to confirm their acceptance via email to the Program Director. Students needing to make changes to their proposal have 10 days to resubmit.

**REGISTRATION**

Independent study credits are taken under PSYCH 600 or PSYCH 700 with Lynn Fainsilber Katz as the supervising instructor, though the faculty member directing the student through independent study will likely be someone else. Students pay the same cost-per-credit rate for independent study credits as they do for PSYCAP classes. Students register for PSYCH 600 and 700 credits through the Department of Psychology main office in Guthrie Hall, Room 19A.

**PROJECT EVOLUTION**

Program faculty understand and expect that the focus and work done in an independent study may change as the work progresses. Students must keep their independent study instructor fully informed of their progress and any changes in the study’s direction. The instructor will update
the Program Director when appropriate. The Program Director may intervene if the study is changing too dramatically from its approved proposal, which could take the form of changing the number of credits associated with the study, changing the coursework required to complete the study, or altering the completion timeline.

**PRACTICUM & CAPSTONE PROJECT**

**PRACTICUM OVERVIEW**

The practicum provides an important introductory clinical and/or prevention focused experiences that enable students to:

- Become familiar with various clinical and prevention focused settings.
- Develop interactive and communication skills
- Foster their professional development
- Strengthen psychological evaluation and intervention/prevention skills and competencies.

The purpose of the practicum is to expose students to a clinical/community setting where psychologists, social workers, counselors and/or related health professionals work with individuals who have mental health and/or developmental concerns. The practicum provides students with hands on experience and an opportunity to see how their coursework applies in the workplace. Students also meet on campus with a program faculty member weekly (during the Practicum course) to consult on cases and to discuss issues related to clinical or prevention work in general. Students discuss topics such as professional resilience (mindfulness and stress management, self-care, secondary trauma, etc.), ethical issues related to working with children; and how to be successful in a team environment.

Students in intervention focused practicum placements are expected to carry a caseload of at least 6–8 clients (based on an average of 16 hours a week) in addition to participating in supervision, grand rounds, and trainings conducted by site staff if available and appropriate for the student. For students at prevention focused sites, caseload expectations and requirements will vary. The exact components of each practicum will vary depending on the services offered at each practicum site, but the practicum experience is expected to provide students with:

- The opportunity to apply and integrate the knowledge acquired throughout the program.
- A real world experience of direct intervention or prevention practice.
- Mentoring from experts in their area of interest and practice.
- Increased proficiency with necessary skills for professional practice.

Students hold the status of learners and do not replace practicum site personnel. Any service performed by students is incidental to the educational purpose of the training program. Students abide by the policies and procedures of their practicum site, including dress code. Students also
conform to the standards and practices established by UW during their clinical education program at the practicum site.

**Practicum Placement**

In the spring before to the start of practicum (approximately four to five months prior), accepted full-time students and 2nd year part time students are provided information about current practicum sites affiliated with the program. Students are asked to complete a brief survey about their interests regarding practicum and rank their top five practicum sites by preference. This information is reviewed by the Practicum Coordinator. The Practicum Coordinator, along with program faculty as needed, matches students with practicum sites based on rankings, student experience and practicum site needs and characteristics. A tentative practicum placement is assigned and communicated to the student. At this time, students are directed to contact the practicum site as soon as possible to set up an interview. Following the interview, the practicum site will provide feedback to the Practicum Coordinator. If the site agrees with the placement decision, the student will be notified and will coordinate with the site regarding attendance, orientation (if applicable) and start-date. If the site does not agree with the student placement, then another practicum placement will be assigned to the student. If placement issues persist, the Program Director and Practicum Coordinator will consult with the student to create an action plan.

**Alternative Placements**

Students may seek permission to complete their practicum at their current employer or a site other than the formally established ones if:

1. The site and practicum assignment satisfies program requirements (see approval process below).
2. The practicum experience will be qualitatively different from that of their current role, if appropriate (students will need to discuss with Practicum Coordinator).

Students interested in completing their practicum with their current employer or a new prospective site should follow the steps below:

1. Notify the Practicum Coordinator of your interest in a practicum site and obtain approval from him/her.
2. Talk to a decision-maker (e.g. supervisor, clinic director, administrator) at the potential practicum site to determine the feasibility of a practicum being offered there and to ensure that the practicum is consistent with program standards, including sites that deliver evidence-based treatments as part of their regular services to youth and families; sites that can provide a supervisor who is trained in evidence-based treatments; and a supervisor who can provide weekly individual supervision (at least one hour) to students for the year-long practicum.
3. No later than May 1, students must email the Practicum Coordinator with a detailed accounting of
   - The name of a contact person and contact information at the prospective site.
   - The student’s proposed clinical activities at the practicum site for the practicum year.
   - How the practicum is consistent with program standards.
   - If applicable, how the proposed practicum placement with their current employer is distinct from their current position (if applicable).

The Practicum Coordinator and other program faculty will make a decision about the proposed practicum placement and notify the student accordingly. If the proposed practicum site is not accepted, the student will need to select a practicum from the list of previously established available practicum sites for that training year.

**Practicum Start/End Dates**

Students are expected to remain at the same practicum site for an entire year. In the case of unforeseen circumstances, a student may change practicum placements before that time. Generally, practicum placements begin mid-to-late September and conclude the following August (no later than the last day of UW summer session term B). Some sites may require an earlier start-date (e.g., beginning of September) to accommodate their own operational schedule. Many sites require students to participate in an orientation and onboarding process, which may occur as early as August. Some practicum sites are 9 month placements. The average number of weekly hours for 9 month placements is 23 hours. 9 month placement start and end dates tend to follow the academic year (i.e., September to June). Although students in 9 month practicum placements may finish their practicum in June, they will not complete the MA program until August. All full-time and 2nd year part time students are expected to enroll in Practicum Course for the summer terms A and B.

Full-time students complete their practicum in their first year. Part-time students complete their practicum in their second year.

**Practicum Hours**

It is expected that students in practicum in 12 month practicum sites will average 16 hours a week (typically done over 2 days at the site, but this will vary across sites). Select 12 month practicum sites require students to be on site for 20-22 hours per week. Students in 9 month placements will work an average of 22 hours per week.
When known, students will be informed of the time commitments associated with practicum assignments prior to ranking their preferences. However, students should clarify expectations regarding expected number of hours with the practicum site. Practicum hours completed during the program do not count toward LMHC licensure.

Once placed, students work with their practicum site to arrange a work schedule. Students are expected to adhere to the schedule as arranged. Students must follow the leave and absence policies and procedures of the practicum site.

During required scheduled class times, students will not be available for practicum hours. Students should also take transit time into account when creating their practicum work schedule. Generally, excluding the summer intensives, nearly all class times for 2019-20 are:

- Tuesdays starting at 5 p.m.
- Thursdays starting at 2 p.m.

**TRANSPORTATION**

Students are generally responsible for their own transportation to and from practicum sites. Some practicum sites may provide a stipend to cover transportation costs. Students should factor in any transportation limitations when ranking practicum sites. At sites where there are multiple students placed, students may consider carpooling/ridesharing if schedules can be coordinated.

**LIABILITY/WORKER’S COMPENSATION**

Students are covered by the University of Washington’s liability insurance policy while they are engaged in practicum so long as they are registered in a practicum course for credit and are practicing within the scope of the practicum (e.g., following program and practicum requirements and adhering to APA/ACA ethical codes and any ethical codes specific to the practicum site). Furthermore, practicum sites also carry their own liability insurance that covers students working in practicum, generally $1 million per occurrence and $3 million annual aggregate.

**HEALTH INSURANCE**

Students are encouraged to acquire comprehensive health and accident insurance that will provide continuous coverage during his or her participation in the education program. Students are responsible for their own health needs, health care costs, and health insurance coverage.

**BACKGROUND CHECK**

Students must successfully pass a background check before they can register for classes or begin practicum. Some practicum sites may require additional background checks prior to starting practicum. The site or Practicum Coordinator will notify students of this accordingly.
COMPENSATION
Students do not receive any payment or compensation, monetary or otherwise, for their services performed at their practicum placement.

PREREQUISITES
Full-time students begin practicum in their first year around the start of fall quarter (mid-to-late September). Part-time students begin practicum in their second year. Students must have enrolled in the following courses prior to starting practicum:

- PSYCAP 510 Conceptual Foundations of Developmental Psychopathology: Risk and Protective Factors
- PSYCAP 526 Parenting Interventions
- PSYCAP 532 Principles of Assessment and Behavioral Change
- PSYCAP 516 Approaches to Child & Adolescent Treatment
- PSYCAP 534 Counseling Skills with Individuals and Families
- PSYCAP 518 Ethics and Law in Counseling Settings

CO-REQUISITES
Students must be registered for Practicum Course (PSYCAP 560) each quarter once it begins. Students must complete a total of ten PSYCAP 560 credits in order to complete the program; these credits can be distributed across multiple quarters, but students must be enrolled in at least one credit of 560 for each quarter they serve in practicum. Students must also enroll in the following courses concurrent with their practicum:

1. PSYCAP 514 Assessment and Diagnosis (Autumn)
2. PSYCAP 524 Treatment for Anxiety and Mood Disorders (Autumn)
3. PSYCAP 522 Extreme and Complex Cases (Winter)
4. PSYCAP 530 Trauma Focused CBT/Treating Trauma (Winter)
5. PSYCAP 528 Multicultural Issues (Winter)
6. PSYCAP 512 Social and Emotional Development (Spring)
7. PSYCAP 520 Critical Thinking about Research and Ethics (Summer 2020)

Students are expected to present at least one clinical case presentation during the practicum course. Cases should be drawn from students’ caseload at their practicum. More information on case presentations will be provided during the practicum course.

PERFORMANCE EVALUATIONS
Formal written evaluation of practicum students during their practicum placement occurs at the mid-point and end of the practicum year. Formal evaluations are conducted by the practicum supervisor.
Students are evaluated on objective criteria reflecting skills that students are expected to achieve in their practicum placements, and students will be rated by their practicum site according to those criteria. Refer to Appendix B for the specific evaluation form. The UW Practicum Coordinator receives copies of these evaluations. The Practicum Coordinator has regular contact with on-site practicum supervisors to monitor student progress and determine whether remediation steps and/or student feedback is required. The Practicum Supervisor is expected to review and discuss the evaluations with the student. If warranted, the Practicum Coordinator will discuss any notable areas of concern with the student.

Students also present their practicum cases in the practicum course, and the adequacy of their case conceptualization and treatment plans will be assessed by the UW Practicum Coordinator.

**Practicum Conduct**

This Master’s program operates in partnership with organizations external to the University, each with its own policies and procedures. The practicum site is responsible for making these policies and procedures known to Master’s students, however if the site supervisor(s) fail to do so, it is the responsibility of the student assigned to the site to inquire about the policies and procedures related to their role at the site. Failure to abide by the site’s policies and procedures may result in the student’s termination from the practicum assignment, a failing grade in the course and/or possible suspension from the University.

While at practicum sites, students must identify themselves as graduate students of the UW to clients/patients/guardians. Students must also provide clients/patients/guardians with the name(s) of the site supervisor(s) to whom they’ve been assigned.

Students will not receive a passing grade in the practicum unless they demonstrate a minimal level of skill, knowledge and competence along with completing the Practicum course requirements.

**Confidentiality Practices**

Practicum client confidentiality must be maintained at all times in accordance with the policies of the site itself. In general:

- Students should not socialize near treatment rooms, in waiting areas, hallways, or other common gathering spaces within the practicum site.
- Access to spaces in which treatment is provided or records are kept must be restricted to authorized users only. This may include closing/locking doors, lowering window shades and locking computer terminals when not in use.
- White noise machines should be used when applicable.
- If practicum students/staff are observing treatment remotely via CCTV, webcam or a similar system, the volume of the service should be kept low and the door to the observation room should be closed. If necessary, headphones should be used.
Students must disclose confidential information when required to do so by state or federal law or University or practicum site policies. Examples of situations that may apply are:

- Suspected abuse or neglect of children, developmentally disabled persons or dependent adults.
- Suspicion that a client is in imminent danger of harming themselves or others.

**HIPAA**

Practicum sites abide by the Health Insurance Portability & Accountability Act (HIPAA). If students are not presented with an introduction to the HIPAA practices of their practicum site, students must ask their supervisor what those policies are to ensure they are within compliance.

**MANDATORY REPORTING**

Students serving at practicum sites are required to report suspected child abuse or neglect in accordance with State mandatory reporting policies. Students concerned about the immediate safety of a child must call 911. Students should consult their supervisor (or appropriate designee) in these cases.

Information that may be requested when making a report includes:

- The name, address, and age of the child.
- Contact information for a parent or guardian.
- Identifying information of the person committing the child abuse or neglect.
- A description of the incident, what was disclosed or witnessed, or other information that led to the suspicion of abuse or neglect.

Reporters will be asked to report only what they know, and are not expected to do any type of review or investigation prior to reporting.

Under the Abuse of Children Law, “Child” or “Children” means any person under the age of eighteen years of age. Child abuse includes:

- **Physical Abuse** – The non-accidental infliction of physical injury on or physical mistreatment of a child, when it may cause harm to the child’s health, welfare, or safety.
- **Negligent Treatment** – An act or failure to act, or the cumulative effects of a pattern of conduct, behavior, or inaction, that evidences a serious disregard of consequences that constitute a clear and present danger to a child’s health, welfare, or safety.
- **Sexual Abuse** – Committing or allowing any sexual offense against a child, including intentional touching of sexual or intimate parts for the purpose of sexual gratification
- **Sexual Exploitation** – Allowing, permitting, or encouraging a child to engage in prostitution, or obscene or pornographic depictions of a child.
• **Abandonment** – A parent or guardian foregoing the responsibility to provide essential care to a child.

**PRACTICUM PERFORMANCE ISSUES**

Should a student fail to receive satisfactory evaluations during their practicum placement, the following process occurs:

1. In coordination with the onsite practicum supervisor, the Practicum Coordinator determines and documents discrete areas where the student is showing unsatisfactory progress.
2. In coordination with the on‐site practicum supervisor, the Practicum Coordinator develops potential remedies that can help the student improve their performance.
3. The student meets with their on‐site supervisor and the Practicum Coordinator for feedback on specific areas for improvement and a discussion of supports that will be provided by the onsite supervisor and the Practicum Coordinator.
4. Regular monitoring of student progress occurs by both the on‐site supervisor and the Practicum Coordinator to see whether supports lead to improved student performance.
5. If sufficient improvement is not shown, students may be required to repeat their practicum and/or the PSYCAP 560 sequence. Termination from the program may also be considered.

The MA program in Applied Child & Adolescent Psychology and all practicum sites associated with the program retain the right to terminate a student from a practicum site prior to or during practicum if it is determined that it is in the best interest of the student, site, client(s), the MA program, or any other invested party.

If a practicum site wishes to terminate a student after appropriate remediation efforts have been implemented, the Practicum Coordinator will request documentation from the site supervisor and the student outlining the issue, attempts made to resolve the concerns/problems, and the final reason(s) for termination. This documentation will be placed in the student’s file.

**EVALUATION OF PRACTICUM SITES**

Students are requested to provide evaluations of their practicum sites. Evaluations are sent to the Practicum Coordinator, who uses feedback to ensure the practicum placement is consistent with expectations and requirements, as well as to make future planning decisions. If practicum sites are not providing satisfactory experiences, the Practicum Coordinator contacts sites as warranted to make attempts to modify the relevant aspects. If a student has significant and immediate concerns regarding their practicum site, they should contact the Practicum Coordinator prior to the evaluation period.
RESIGNATION FROM A PRACTICUM SITE

Requests to terminate from a practicum site placement should only be made under serious circumstances and as a last resort. Students wishing to terminate from a practicum site must submit a written request to the Practicum Coordinator and the MA Program Director. The request must include reasons for wishing to terminate from the site as well as the steps taken by the student and site to improve the situation. After evaluating the request, the Practicum Coordinator will then contact the practicum site supervisor.

The decision to terminate will be made by the student, the Practicum Coordinator, and the MA Program Director in consultation with the site supervisor. Students who terminate from a site are not guaranteed immediate assignment to another practicum site for the year. As a result, they may be required to take an Incomplete for the practicum for the year and finish practicum in the following year.

CAPSTONE PROJECT

Using their practicum experience, students will be required to complete a capstone project that involves the application of an evidence-based treatment or program to a specific case or to a group (in the cases of more prevention focused practicum placements). At the end of the program, the student will write a final paper and participate in a poster-style presentation. The student’s faculty advisor reviews and evaluates the student’s completed paper. Students may request review of their posters by faculty advisors, but this is not required. The poster-style presentation is attended by faculty, site supervisors, and/or advisory board members, who may ask questions and interact with individual students. This event is part of the graduation ceremony for the program.

STUDENT STATUS & RESPONSIBILITIES

1. A student’s primary responsibility is the welfare of clients. Client welfare always comes before practicum student needs.
2. Maintain confidentiality with all practicum site, affairs, records and case materials. Failure to do so could result in termination from the practicum site and a failing grade for the practicum course.
3. Develop a work schedule with the Site Supervisor and work that schedule until the end of the practicum year. Communicate with site supervisors regarding any required changes to the work schedule.
4. Students are expected to request personal time off from practicum as soon as they are aware of the need. Students should err on the side of early notification to supervisors. Students must work with supervisors and other staff as needed to ensure appropriate coverage for the clients in their absence.
5. Adhere to the following: all required ethical codes and legal statutes, the practicum site’s standards, policies and regulations, as well as the policies and procedures outlined in this manual.

6. Provide clinical and/or counseling services to the client population while integrating course knowledge into professional practice.

7. Demonstrate successfully the skills and knowledge required of a professional within the program’s specified concentration.

8. Complete appropriate documentation required by the practicum site.

9. Be on time and prepared for weekly supervision as well as all client sessions and other required meetings.

10. Actively participate in and demonstrate a willingness to receive supervision provided by the practicum site supervisor(s). This includes:
    - Developing an understanding of the scope and purpose of supervision.
    - Engage in a working alliance with on-site supervisors.
    - Attending all supervision sessions at the designated time at the practicum.
    - Accurately communicating content and scope of counseling sessions in supervision.
    - Maintaining openness to feedback in supervision and following through on directives of supervisors.
    - Willingness to videotape/audiotape interactions (if possible or required) with clients and receive feedback on such interactions.
    - Reporting to supervisor(s) in a timely manner about individuals who are at risk (full disclosure to supervisors of risks to client welfare).

11. Take an active role in supervision by developing personal goals and helping structure supervision sessions by sharing needs and concerns for continued professional development.

12. Inform the Practicum Coordinator of any potential change in their site supervisor, in advance of the change (if possible).

13. Students assigned to practicum site are students of UW and are in no sense considered employees of practicum site.

**SITE & SITE SUPERVISOR RESPONSIBILITIES**

1. Become familiar with program learning objectives.

2. Prepare other staff, in advance of the student’s arrival, and involve them in contributing to the student’s learning process, so they will also understand the goals and objectives of the MA program.

3. Site supervisor and/or designated staff will meet with student prior to the start of the practicum year to discuss practicum site policies and procedures as well as training needs, such as desired client populations, practicum and supervision arrangements, etc., and establish a schedule for the year.
4. Orient the student to the organization, including policies and procedures.
5. Designate an appropriate work space for the student.
6. Respond promptly to all communications from students, the program, and/or program coordinator.
7. Initiate immediate contact with the Practicum Coordinator when there are problems with student adjustment, performance or behavior.
8. Provide a minimum of one hour per week of formal individual supervision. Supervisors can have a range of professional designations (e.g., LMHC, LICSW, MD, Ph.D., etc.) The student may also participate in additional supervisory sessions (e.g., group supervision, informal consultation) that are offered at the site. The primary supervisor must be licensed in his/her field and competent in the area to be supervised. At the beginning of the training year, students and their primary supervisors will meet to develop their specific plans for clinical training, type and amount of client contact, and supervision.
9. Evaluate the practicum student’s performance formally through mid-term and final evaluations. Sample evaluation form included as Appendix B. These forms will be supplied by the Practicum Coordinator and the results of the evaluations will be discussed with the student and turned into the Practicum Coordinator.
10. Assist the student in completing all documentation in a professional and timely manner.
11. Consult whenever necessary with the Practicum Coordinator regarding the students’ progress (or lack thereof).
12. Participate and collaborate with Practicum Coordinator in the development of a corrective action plan, if warranted.
13. Notify the Practicum Coordinator in writing if there is an anticipated change in the student’s supervisor. The site should make timely arrangements for an appropriate supervisor in order to avoid disruption in the student’s training and clinical work.

**Practicum Coordinator Responsibilities**

1. Serve as the primary liaison between student, program and practicum site regarding the practicum experience.
2. Coordinate placement of students at practicum sites.
3. Meet with practicum students on a weekly basis throughout the practicum year as part of the practicum course to discuss practicum-related issues, including case conceptualization and case consultation.
4. Respond in a timely manner to all student, site supervisor and practicum site requests for information related to practicum/policies/procedures.
5. Maintain communication with students regarding practicum sites, including any concerns, and work to resolve these concerns as warranted.
6. Maintain regular communication with practicum sites (including site supervisors) regarding student progress, possible conflicts or performance concerns and work with
practicum site and student in successfully resolving concerns or conflicts at the practicum.

7. Develop corrective action plans, in collaboration with site supervisors, when warranted to address concerns about student practicum performance.

8. Obtain evaluations from practicum sites on student performance twice a year and reviews notable concerns with students.

9. Obtain student evaluations of practicum sites and provide feedback to practicum sites as warranted. Feedback is provided in a way that protects student anonymity.

10. Conduct on-site visits of practicum sites and follow-up visits as necessary.

UW BASICS

UW STUDENT GUIDE
The UW Student Guide is your first stop for university policies, academic resources, registration, housing, financial aid, health care and counseling, transportation and more. www.washington.edu/students/

UW PROFESSIONAL & CONTINUING EDUCATION
This program is administered through UWPCE. UWPCE publishes its policies and resources online: www.pce.uw.edu/help/resources-policies

GRADUATE STUDENT POLICIES, PROCEDURES & STUDENT LIFE
As a graduate student of the UW, students must familiarize themselves with the policies and procedures that apply to their role here. The Graduate School’s website divides these resources into two sections.

- Policies & procedures for all graduate students:
  grad.uw.edu/policies-procedures/general-graduate-student-policies/
- Policies & procedures for master’s students:
  grad.uw.edu/policies-procedures/masters-degree-policies/

There are other resources available on the Graduate School website worth exploring, like the calendar of events and Core Programs, meant to help students incorporate their new degree into their professional life.

MANAGING YOUR INFORMATION & ACCESS

MYUW & EMAIL FORWARDING
MyUW is the main portal for a variety of student-specific information as well as campus resources, like library computer access. Students must have established their UW NetID to access MyUW. You will also receive emails in your UW account ([NetID]@uw.edu). You must
check these emails regularly. **NOTE:** Students must abide by the privacy practices of their practicum sites. Students who choose to manage their UW email using Office 365 are adhering to the strictest privacy option available. Students who receive practicum-related email in their UW account AND who have their UW mail forwarded to a personal account on a service like Gmail or Yahoo may be in violation of their practicum site’s privacy policy. Email help@uw.edu or call 206-221-5000 for assistance with mail setup and forwarding.

myuw.washington.edu

**DIRECTORY INFORMATION**
Individual email addresses, telephone numbers and other information can be located through the UW Directory website (www.washington.edu/home/peopledir/), provided the student authorizes release of directory information to the public. Please note that at this time, the Faculty and Staff search feature in the directory is open to the public, but the “search students” feature requires UW NetID login to view. Visit www.washington.edu/students/studentdirinfo.html for more information about the student directory. Students are responsible for setting their own directory information to either restrict or allow release.

Students who prefer not to authorize the release of directory information and do not want their directory information to appear in the University Student Directory must inform the Office of the Registrar by logging on to their MyUW account and choosing to "restrict access" to directory information. Students may choose to opt out of directory information at any time via their MyUW account. **Students should be aware** that restricting the release of directory information has other consequences. For instance, a FERPA restriction makes it difficult or impossible for potential employers to verify enrollment, or to verify the fact that students have earned a degree from the University. The University cannot notify a student’s home town paper about awards and honors the student receives (e.g., Dean's list). For this reason alone, many students choose to remove their FERPA restriction.

**FAMILY EDUCATIONAL RIGHTS & PRIVACY ACT (FERPA)**
The Family Educational Rights and Privacy Act (FERPA) is a federal law that protects the privacy of student education records. Visit www.washington.edu/students/reg/ferpa.html for full details.

Generally speaking, FERPA allows the University to disclose education records or personally identifiable information from education records in the following circumstances: with the written consent of the student, if the disclosure meets one of the statutory exemptions, or if the disclosure is directory information and the student has not placed a hold on release of directory information. Pursuant to WAC 478-140-024(5), directory information at the University of Washington is defined as:

- Student’s name
- Street address
- Email address
- Telephone number
- Date of birth
- Dates of attendance
- Degrees and awards received
- Major and minor field(s) of studies
- Class
- Participation in officially recognized activities and sports
- Most recent previous educational agency or institution attended by the student
- Weight and height, if student is a member of an intercollegiate athletic team

FERPA allows the University to release a student’s directory information to anyone unless the student informs the Office of the University Registrar that he or she does not wish directory information to be released.

In addition, FERPA also affords students certain rights with respect to their education records. Please review *UW Notification of Students’ Rights Under FERPA* ([www.washington.edu/students/reg/ferpa.html#Q2](http://www.washington.edu/students/reg/ferpa.html#Q2)) for full details and resources.
Under the provisions of the Family Educational Rights and Privacy Act (FERPA), you have the right to:

- Inspect and review information contained in your education records,
- Challenge the contents of your education records,
- Request a hearing if the outcome of the challenge is unsatisfactory,
- Submit an explanatory statement for inclusion in the education record if the outcome of the hearing is unsatisfactory,
- Prevent disclosure with certain exceptions of personally identifiable information,
- Secure a copy of the institution policy, and
- File complaints with the US Department of Education concerning alleged failures by institutions to comply with the act. Contact information is available on the UW FERPA web site.

Requests to review student files should be sent to Lora Brewsaugh via email (lorab2@uw.edu).

**THE HUSKY CARD/STUDENT ID**

Students of the UW are required to obtain a Husky Card, the student ID card. The card grants access to services on campus as well as student discounts around the city. To obtain a card, students bring their student ID number and state- or federally-issued photo ID to an ID Center during business hours. Cards can also be obtained from the ID Center at the Seattle, Bothell or Tacoma campus. The Seattle campus ID Center is located on the ground floor of the Odegaard Undergraduate Library and is open Monday–Friday, 8 a.m.–5 p.m. A staff person will take a picture and print the card. The process normally takes a few minutes, depending on customer volume. The first card is free, but there is a fee for replacements. For more information, visit Husky Card Services ([www.hfs.washington.edu](http://www.hfs.washington.edu)).

**UW ACADEMIC CALENDAR & PRACTICUM HOURS**

The UW Academic Calendar ([http://www.washington.edu/students/reg/calendar.html](http://www.washington.edu/students/reg/calendar.html)) lists critical dates for University holidays, class registration and tuition payment.

University operations, including classes, are generally not in operation on holidays. Students should confirm the class schedule with their instructor(s) if there is any confusion.

Holidays and reduced hours of operation may occur at the practicum site on a schedule that differs from the University. Students must familiarize themselves with the attendance policies, holiday schedule and leave authorization process of their practicum site.

**OFFICE OF STUDENT FINANCIAL AID (OFSA)**

Student Financial Aid can help students field funding issues and better understand their financial aid options. Please also refer to the section *Financial Aid & Other Funding* later in this
handbook for information specific to our program. www.washington.edu/financialaid | osfa@uw.edu | 206-543-6101

**HEALTH INSURANCE**

UW students who are U.S. citizens or permanent residents can obtain insurance from a variety of private and public sources. For more information, visit www.washington.edu/ship/affordable-care. International students are required to obtain insurance while studying in the US. For more information, visit www.washington.edu/ship/international-student-insurance-health-plan.

**REQUIRED IMMUNIZATIONS**

All matriculated UW Seattle campus students are required to provide proof of measles immunity. Students are not able to register for classes without satisfying the requirement. Hall Health Center administers the UW Measles Requirement program for the UW Registrar’s office. Visit Hall Health’s website for instructions on how to submit your measles verification. registrar.washington.edu/course-registration/registration-policies/immunization

Practicum sites may follow their own immunization standards and practices. Students in the program must abide by the immunization standards of their practicum site.

**UNIVERSITY BOOKSTORE**

The University Bookstore has several branches, including the main branch on University Way, as well as a branch in the Husky Union Building (HUB). Inventory includes textbooks and other books, Husky gear, technology and software, school and art supplies, gifts, newsstand and more. The University Book Store also maintains vending machines in the Health Sciences, Suzzallo and Odegaard Libraries for purchase of Scantron forms for exams and other supplies.

**LIBRARIES**

The Husky Card functions as the student library card. The UW has an extensive online research collection as well as media and entertainment resources. www.lib.washington.edu

**TRANSPORTATION SERVICES**

Students enrolled in the master’s program have access to the student public transit pass, or U-PASS, through their Husky Card. For information about U-PASS as well as information on getting to and from campus, please visit Transportation Services. facilities.uw.edu/transportation

**UW COMMENCEMENT & PROGRAM GRADUATION**

Though practicum continues into summer quarter, our students are eligible to participate in the UW’s commencement ceremony so long as they have submitted their application to graduate in the spring. www.washington.edu/graduation/eligibility
The Program Specialist notifies graduating students by email when they can register for the UW’s graduation ceremony in May and when they are first eligible to submit their master’s degree requests in June.

Our program’s graduation ceremony and capstone poster presentation is typically held in the early evening on a weeknight in July or August.

**ACADEMIC & PROFESSIONAL EXPECTATIONS**

This section lays out a series of skills, qualities, and expectations for program students. Failure to meet these expectations are subject to corrective action up to and including expulsion from the program. Failure to meet these standards can also result in a delay or withholding of a practicum placement assignment, which can delay or impede successful completion of the program. See the handbook section on Corrective Action for more information.

**FACULTY ADVISING APPOINTMENTS**

Each student is assigned a faculty advisor. Students meet once a quarter with their advisor. This meeting typically occurs during weeks 4–6 of the quarter. The Program Specialist sends email reminders and prompts students to make appointments. These appointments provide an opportunity for students and advisors to discuss the student’s progress through the program, practicum experience and professional development. As the program continues, the agenda also touches on the capstone project, graduation and post-degree plans.

**CODE OF CONDUCT**

Students of the University of Washington must abide by the Student Code of Conduct ([www.uw.edu/cssc/expectations](http://www.uw.edu/cssc/expectations)). This code is occasionally updated. Students are expected to make themselves aware of any changes. Students must familiarize themselves with the code. The code includes, but is not limited to, the following topics:

- Expectations regarding academic integrity and professionalism
- Disciplinary proceedings
- Parking and traffic regulations
- The Family Education Rights and Privacy Act (FERPA)
- Discriminatory harassment
- Plagiarism
- Physical/Verbal abuse
- Theft and/or misuse of campus resources
- Substance abuse
- Sexual misconduct
- Possession/use of firearms, explosives, chemicals and weapons
- Reporting violations
- The appeals process

A description of the process for investigating alleged conduct code violations can be found here: [www.washington.edu/cssc/for-students/overview-of-the-student-conduct-process/](http://www.washington.edu/cssc/for-students/overview-of-the-student-conduct-process/)

**PROFESSIONAL STANDARDS & EXPECTATIONS**

Students accepted into the program must demonstrate certain baseline physical, cognitive, emotional and character skills from the start. Students are also expected to continue developing these skills as the program progresses and to incorporate feedback from faculty and practicum site supervisors into their behavior.

Successful completion of the program requires that:

- Students exhibit the skills necessary to perform well in classes, coursework and practicums. This includes, but is not limited to:
  - Being punctual to classes and practicum shifts.
  - Communicating upcoming and sudden absences in a timely, responsible manner (e.g. informing practicum supervisors of upcoming vacations several weeks in advance; emailing AND calling out sick the night before or morning of a practicum shift; making up missed practicum shifts whenever possible; arranging alternative makeup assignments with class instructors for missed sessions).
  - Effective and professional verbal and written communication skills.
  - Turning in completed assignments on time.
  - Absorbing knowledge of classroom material and practicum training information at a reasonable pace and demonstrating mastery of that information when necessary.
  - Willingness and ability to learn the technical/computer skills necessary to navigate UW and practicum systems.
  - The ability to independently evaluate information for accuracy and integrity and synthesize this information into cohesive, persuasive arguments.

- Students establish and maintain healthy, professional working relationships with classmates, instructors, practicum staff and clients. This includes, but is not limited to:
  - Being proactive about discussing potential areas of disagreement and conflict.
  - Having an open-minded, even-tempered communication style.
  - Willingness to compromise when appropriate.
  - Respecting the boundaries of others by erring on the side of keeping a friendly, respectful distance, both physically and verbally.

- Students behave professionally in classroom and practicum settings and uphold the University's mission and values, even while off campus. This includes, but is not limited to:
Following the dress code and nametag/ID badge policies at practicum sites.

- Adhering to the privacy and confidentiality policies of the University and practicum sites.

Failure in any of these areas can result in corrective action which can include academic probation, temporary or permanent suspension from a practicum site, and a withholding of practicum placement. Students who cannot be placed in practicum will not be able to complete the program. Students who cannot complete the duration of a practicum assignment may also not be able to graduate.

**VALUES**

Students must affirm the value of human diversity. Students must interact in a respectful, compassionate and appropriate manner with all persons regardless of the person’s age, class, race, religious affiliation (or lack thereof), gender, disability, sexual orientation and/or value system. Students must not impose their own personal, religious, sexual and/or cultural values on their clients. Students must know how their own values, beliefs, emotions and past experiences affect their thinking, behavior and relationships. Students must be willing to examine and change their behavior when it interferes with their professional and academic interactions. Students must be able to work effectively with others in subordinate positions as well as those in authority.

**APA’s Ethical Principles of Psychologists & Code of Conduct**

Students must abide by the American Psychological Association’s (APA) Ethical Principles of Psychologists & Code of Conduct ([www.apa.org/ethics/code](http://www.apa.org/ethics/code)). This code includes topics such as resolving ethical issues, competence, privacy and confidentiality, record keeping, assessment and informed consent to therapy.

**Attendance & Content Mastery Policy**

Communication, punctuality, class attendance, and making up for missed class sessions are stated professional standards within the program. Instructors and site supervisors understand the inevitability and unavoidability of occasional absences and strive to accommodate students whenever possible, however student academic performance and content mastery are compromised by absences. Poor communication around absences and tardiness also impact student performance in the program by demonstrating poor professionalism, which is subject to corrective action.

**Class Attendance**

Students must attend at least 80% of sessions in order to pass each class ([www.pce.uw.edu/help/completing-program/attendance-policy](http://www.pce.uw.edu/help/completing-program/attendance-policy)).

Attendance may influence grades reliant on class participation. The calculation of participation grades will be outlined in course syllabi and verbally by class instructors.
Students should notify instructors of anticipated, upcoming absences from class whenever possible. Instructors will work with students to identify alternative assignments that can substitute for attendance and participation whenever possible.

**Practicum Attendance**

Student attendance at 90% of assigned practicum shifts is required to adhere to site training regimens and demonstrate mastery of learning outcomes. Sites may allow for students to schedule makeup shifts for missed sessions.

**Communication**

The following are examples of good communication around absences and lateness:

- Several weeks in advance, the student informs a site supervisor in writing of an upcoming vacation or doctor’s appointment that will cause them to be absent. The student reminds the supervisor as the date approaches.
- When the student is feeling ill, they notify their site supervisor by phone AND email the night before or morning of their practicum shift. For class absences, the student emails the instructor as soon as they know they will not be in attendance and asks what work they can do to compensate for the absence.
- The student experiences a family emergency or is injured. They notify their instructor and site supervisor as soon as they are able to. If possible, they provide an estimate of when they will be back.

The following are examples of poor communication with respect to lateness and tardiness:

- Repeatedly being absent or showing up late to class and/or practicum.
- Not providing advance notice, or providing short notice, of planned absences to practicum supervisors or class instructors.

**Attendance & Tardiness Corrective Action**

When circumstances permit, the student will first receive a verbal warning notifying them that tardiness or absences are impacting their performance, and if these issues persist will result in corrective action. At this level, no official record is made.

Students whose tardiness and/or absence is impacting their class performance are given a letter from the practicum site, class instructor, or from a program representative. The letter outlines the problem behavior, how it is impacting their performance, how it should be corrected, and presents a reasonable timeline for improvement. A copy of the letter goes into the student’s program file. The corrective action could include:

- Scheduling and attending makeup shifts.
- Additional coursework to compensate for missed class time/classroom participation.
• Providing weekly or biweekly status updates to the Program Director, Practicum Coordinator, and/or site supervisor.

If the student fails to abide by the terms of the corrective action timeline, they may not pass the impacted course(s). The program attempts to allow students to retake courses and extend practicum assignments to make up for lost sessions, however this is not always possible.

**GRADE POLICY**

In reporting grades for graduate students, graduate degree-offering units enter grades as numbers, the possible values being 4.0, 3.9, and decreasing by one-tenth until 1.7 is reached. Grades below 1.7 are recorded as 0.0 by the Registrar and no credit is earned. A minimum of 2.7 is required in each course that is counted toward a graduate degree. A minimum cumulative grade-point average of 3.0 is required for graduation. For more information, visit: [grad.uw.edu/policies-procedures/graduate-school-memoranda/memo-19-grading-system-for-graduate-students/](grad.uw.edu/policies-procedures/graduate-school-memoranda/memo-19-grading-system-for-graduate-students/)

**OTHER UW RESOURCES**

**DIVISION OF STUDENT LIFE**

The Division of Student Life includes resources for health and safety, campus life, diversity and disability services, financial services and more.

[www.washington.edu/studentlife/](www.washington.edu/studentlife/)

**MENTORING RESOURCES**

Mentoring focuses on the human relationships, commitments, and resources that help graduate students find success and fulfillment in their academic and professional pursuits. The following websites lists numerous resources for both students and faculty.

Mentoring Resources for Graduate Students and Faculty
[grad.uw.edu/for-students-and-post-docs/core-programs/mentoring/](grad.uw.edu/for-students-and-post-docs/core-programs/mentoring/)

Center for Teaching & Learning, Services for Departments and Programs

Center for Workforce Development
[www.engr.washington.edu/cwd/](www.engr.washington.edu/cwd/)

Students are also encouraged to meet with their advisor or Program Director as appropriate, to discuss mentoring as needed.

**GRADUATE AND PROFESSIONAL STUDENT SENATE (GPSS)**
The University of Washington Graduate & Professional Student Senate (GPSS) is the official student government for graduate and professional students at the University of Washington. GPSS is comprised of two senators from each degree-granting department, four officers, and several staff members. GPSS represents students to the University and the Legislature, funds graduate programming, and hosts regular social events.

depts.washington.edu/gpss/

**INTRAMURAL ACTIVITIES BUILDING & WATERFRONT ACTIVITIES CENTER**

Tuition includes a gym membership at the Intramural Activities Building (IMA) and use of the Waterfront Activities Center (WAC).


**DISABILITY RESOURCES FOR STUDENTS (DRS)**

Disability Resources for Students (DRS) arranges academic accommodations for enrolled students. Students with access needs are responsible for requesting the accommodation(s) they need in order to fulfill the course and degree requirements. Services must be arranged in advance and require documentation of the disability, verifying the need for such accommodation or service. Technical and adaptive equipment is available through both the Disability Resources for Students Office and Desktop Computing Services. To request an accommodation for the academic program, please visit the DRS website to start the process. To request disability accommodations to attend events, contact the Disability Services Office (DSO): 206-543-6450. See statements on Equal Opportunity and Affirmative Action and Special Accommodations.

011 Mary Gates Hall, Box 352808 | 206.543.8924 (voice and relay), 206.616.8379 (FAX) | uwds@uw.edu | depts.washington.edu/uwdrs/

**OFFICE OF MINORITY AFFAIRS AND DIVERSITY**

The Office of Minority Affairs and Diversity offers a range of services, including academic support programs, financial aid counseling and opportunities, and social and cultural activities. Visit their Services for UW Students page for more information.

206-685-0518 | cpromad@uw.edu | www.washington.edu/omad/ | www.washington.edu/omad/services-for-uw-students/

**TITLE IX**

Title IX of the Education Amendments of 1972 is a federal law that states: “No person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity receiving Federal financial assistance.”
Title IX, Washington State law, and University of Washington policy prohibit discrimination based on sex, sexual orientation, gender, gender expression, pregnant or parenting status, and LGBTQ (lesbian, gay, bisexual, transgender, queer) identity. You can file a report and seek support and resources through the UW’s Title IX Office.

www.washington.edu/compliance/titleix

**UW SHUTTLES**
The UW Shuttles system includes free transportation options for students, faculty, staff, and medical center patients and their families between key UW sites, such as the UW Medical Center, Harborview Medical Center, UW Roosevelt Clinic, UW Tower, Fred Hutchinson Cancer Research Center, Seattle Cancer Care Alliance, and the UW South Lake Union facility. Buses are wheelchair lift equipped. Other shuttle options include Dial-A-Ride, an additional complementary shared-ride service for those with mobility limitations, and NightRide, for U-PASS holders.

facilities.uw.edu/services/tags/Shuttles

**STUDENT PARENT RESOURCE CENTER**
The Student Parent Resource Center provides resources and financial support to students with children, including the Childcare Assistance Program which may cover costs of licensed childcare for children (ages birth to 12 years old) while enrolled in an eligible program of study.

520 Schmitz Hall | 206-543-1041 | stuparrc@uw.edu | osfa.washington.edu/wp/sprc/

**STUDENT LEGAL SERVICES (SLS)**
Student Legal Services (SLS) is a law office on the UW-Seattle campus that provides confidential legal advice and representation to current students, including a free 40-minute legal consultation.

HUB 306 | 206-543-6486 | depts.washington.edu/slsuw/

**STUDENT INFORMATION UPDATES**
Students are responsible for updating directory information (e.g., email address, current address, telephone, emergency contacts, and authorization to release information) through:

- UW Office of the Registrar online (myuw.washington.edu) using your UW Net ID or by phone at 206-543-3868, 24-hours a day.
- It is important that directory information be kept current, as important messages from the school and University are sent to students based on what is listed in these records.
**CAMPUS SAFETY & WELL-BEING**

**SAFE CAMPUS**
There are many resources at the UW meant to support the safety and well-being of UW students, and many of them are collected under the Safe Campus resource. The resources include contact information for the UW Police Department (UWPD), the Health and Wellness Student Card Program, the UW Counseling Center and Hall Health.

deps.washington.edu/safecamp/

**UW ALERT**
Students should enroll in UW Alert. This free service will text and email news of emergencies happening on campus or if campus operations, including classes, are suspended for reasons like adverse weather.

www.washington.edu/safety/alert/

**HEALTH & WELLNESS**
Health & Wellness includes programs related to student care, suicide prevention, substance abuse, sexual assault, relationship violence, stalking and harassment.

deps.washington.edu/livewell/ | livewell@uw.edu | 206-543-6085 (For emergencies, call 911)

**UW POLICE DEPARTMENT (UWPD)**
Emergency: 911
Non-Emergency: 206-685-UWPD (8973)
Anonymous Tips: 206-685-TIPS (8477)
Business: 206-543-0507
Email: uwpolice@uw.edu
3939 15th Ave NE, Seattle, WA 98105

**HALL HEALTH CENTER**
Hall Health Center is an outpatient clinic that provides health care to University of Washington students, alumni, faculty and staff as well as the general community. Clinics and services include primary, specialty and mental health care, as well as immunization, pharmacy, the Women’s Health Clinic, radiology, STD Testing, health promotion, lab, medical records, physical therapy, measles requirement and health promotion services.

315 East Stevens Circle (upper campus, across from the HUB)
Information 206-685-1011
Patient Service Center (for appointments): 206-616-2495
Consulting Nurse Service: 206-221-2517
deps.washington.edu/hhpccweb/
HALL HEALTH MENTAL HEALTH CLINIC
Services include individual and couples counseling and therapy, crisis counseling and intervention, medication evaluation and management, group therapy and support groups, campus outreach services, mindfulness medication, and after-hours care.

315 East Stevens Circle (upper campus, across from the HUB)
Phone: 206-543-5030
Fax: 206-543-4716
In Crisis: 206-583-1551 (Monday–Friday, 8a.m. – 5 p.m.)
King County Crisis Line: 206-461-3222 (after hours and on weekends)
depths.washington.edu/hhpccweb/project/mental-health-clinic/

UW COUNSELING CENTER
The UW Counseling Center provides short-term counseling, assessment, referral, and crisis intervention services to currently enrolled University of Washington students. Services include:

- Individual, couple and group counseling
- Crisis services
- Career counseling
- Light therapy for Seasonal Affective Disorder (SAD)
- Biofeedback training
- Podcasts, online mental health screenings, and other resources

401 Schmitz Hall, 206-543-1240 | www.washington.edu/counseling/

THE PSYCHOLOGICAL SERVICES AND TRAINING CENTER (THE CLINIC)
The Clinic provides psychotherapy and psychological assessment to residents of the Seattle metropolitan area, including University of Washington students and their families. The Department of Psychology at the University of Washington maintains the Psychological Services and Training Center as a training site for graduate students in the clinical psychology Ph.D. program. Graduate student therapists provide therapeutic services and are supervised by licensed psychologists and other experienced mental health professionals.
Guthrie Annex 1 | 206-543-6511
www.psych.uw.edu/psych.php?p=362
Crisis Resources

Crisis Clinic
The Crisis Clinic provides immediate help to individuals, families and friends of people in emotional crisis. The clinic can help you determine if you or your loved one need professional consultation and can link you to the appropriate services. They can provide immediate language interpretation in more than 155 languages. Calls are anonymous and confidential.

24-Hour Crisis Line: 206-461-3222 or 866-4CRISIS, (866-427-4747)

Crisis Chat
CrisisChat is part of a national crisis chat network. They offer online chat option for someone who needs to talk, but prefers to communicate online instead of over the phone. www.crisischat.org/chat

King County 2-1-1 Community Resources Online (CRO)
Dial 2-11 or 206-461-3200 or 800-621-4636. The most up-to-date and comprehensive database of health and human services available for all of Washington State.

Policy on Sexual Harassment
Federal Laws and UW Policy prohibit all forms of sexual harassment. Visit the UW Health and Wellness website about Sexual Harassment (depts.washington.edu/livewell/sexual-harassment/) for more details about rules and definitions, how to and where to seek help, and more. Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when:

- Submission to such conduct is made either an implicit or explicit condition of an individual’s academic, work, living environment or participation in a University community.
- Submission or rejection of such conduct is used as the basis for a decision that affects an individual’s academic, work, living environment or participation in a University community.
- The conduct is sufficiently severe, persistent or pervasive that it could reasonably be expected to create an intimidating, hostile or offensive learning or work environment, or has the purpose or effect of unreasonably interfering with an individual’s academic, work, living environment, or participation in a University community.

Students may also contact the following:

- Health & Wellness Advocate: hwadvoc@uw.edu
- University Complaint Investigation and Resolution Office (UCIRO)
- Title IX Investigation Office, compliance.uw.edu/investigation
- UW SafeCampus or 206-685-SAFE (7233)
DEFERRAL REQUESTS

Admitted students may apply to defer enrollment for one academic year, however deferral requests are not automatically granted. To request deferral, students email the Program Specialist, Lora Brewbaugh (lorab2@uw.edu) and state their reasons for requesting the deferral. The admissions committee reviews the request and takes into account:

- The circumstances that precipitated the deferral request.
- The quality of the student’s application in relation to other admitted students.
- The student’s conduct in between being accepted into the program and submitting the deferral request.
- The program’s financial obligations with respect to tuition revenue and operational expenses.

The Program Specialist notifies the student of the request outcome or provides a status update within 3–4 weeks of receiving the request.

Students may only request to defer once. Students whose deferral requests are denied are welcome to re-apply to the program in the future as new students. If the deferral request is accepted, the student will be sent an Intent to Return form by email in March. The student must fill out and submit the form to the Program Specialist within 10 business days of receiving it in order to secure their place in the program.

REGISTRATION

Students register through MyUW. Students will need a list of the courses they are registering for and the courses’ SLN code. For PSYCAP 560, students may also need guidance in how many credits they are registering for. The Program Specialist can provide a list of courses each student should register for as well as how many PSYCAP 560 credits they are advised to take.

To find course SLNs, access the UW Time Schedule (https://www.washington.edu/students/timeschd/). Click on UW PCE Time Schedule from the right menu, then find “PSYCAP” on the page. This will pull up a time schedule with course numbers and SLNs.

Then, within MyUW, go to the Academics tab and click on “Register with SLN.” Follow the prompts and submit.
Registration must be done before the first day of class. Visit www.pce.uw.edu/help/registration-costs/how-to-register for more information. You can contact UWPCE for registration-related questions at 206-543-2310 or c2reg@uw.edu. You may also contact the Program Specialist.

TUITION & FINANCIAL AID

COSTS
This is a self-sustaining, fee-based program administered by the UW Department of Psychology in collaboration with UWPCE (www.pce.uw.edu). Fees are due at the start of each quarter. The estimate below is based on 2019-2020 rates and is subject to change without notice. Course fees are charged on a per-credit basis and are the same for resident (Washington State) and non-resident students.

<table>
<thead>
<tr>
<th>Cost per credit:</th>
<th>$740</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of credits required:</td>
<td>46</td>
</tr>
<tr>
<td>Estimated total course fees:</td>
<td>$34,040</td>
</tr>
</tbody>
</table>

In addition to these fees, students pay other required fees each quarter. These include a quarterly registration fee, U-PASS fee and technology fee. There are additional costs that include, but are not limited to, textbooks, printing, late registration (if applicable) and personal travel expenses associated with getting to and from campus and practicum sites. Some practicum sites may make travel stipends available to students based on the site’s distance from the UW Seattle campus; students may not use their home address when determining whether they qualify for a stipend provided by the site.

Note: Students can often avoid “convenience fees” associated with credit cards by paying online with a web check.

FUNDING
We encourage students to start exploring how they will fund their education early — even before applying to the master's program. Many funding programs have application deadlines in December and January. Students in fee-based programs are not eligible for tuition exemptions or University grants.

FEDERAL FINANCIAL AID & THE OFFICE OF STUDENT FINANCIAL AID
Disclaimer: Program staff, including the authors of this section, are not specialists or experts in federal financial aid. In addition, the program is not responsible for setting or conveying financial aid policy to its students. It is the responsibility of all students to learn and be aware of financial aid policies that impact them. We include this section so that students are aware of questions and concerns they may wish to explore if they are considering or using federal financial aid. The Program Specialist for the master’s program, Lora Brewsaugh, can serve as a...
good first point-of-contact for questions, but will likely refer you to the Office of Financial Aid if you have questions about federal financial aid.

Student Financial Aid (www.washington.edu/financialaid/) can help students field funding issues. Students can apply for various forms of financial aid to help cover their educational costs, including federal financial aid (fafsa.ed.gov), scholarships and private loans. For more information, visit the fee-based programs page of the Office of Student Financial Aid website (www.washington.edu/financialaid/getting-started/eligibility/fee-based-programs). Students on federal financial aid should also investigate the Public Service Loan Forgiveness program (studentaid.ed.gov/sa/repay-loans/forgiveness-cancellation/public-service).

Students using federal financial aid should be aware of a few policies that impact students in our program:

**Credit Minimum:** Federal financial aid policies require that graduate students be enrolled in a minimum of five credits in order to receive funds for that quarter. No funds will be disbursed for quarters in which the student has registered for less than five credits. Full-time students can take advantage of the variable credit structure of practicum to ensure they are enrolled in at least five credits each quarter so that they meet the minimum credit requirement for aid disbursement. Year 2 of the curriculum for part-time students does not carry five credits per quarter, though some quarters can be structured to carry five credits. For the remaining quarters, students must work out alternative funding.

For **full-time students** on financial aid in 12 month practicum assignments, we recommend allotting PSYCAP 560 credits like this to ensure you meet the five credit minimum every quarter:

<table>
<thead>
<tr>
<th>Autumn Quarter</th>
<th>Winter Quarter</th>
<th>Spring Quarter</th>
<th>Summer Quarter</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 credit</td>
<td>2 credits</td>
<td>2 credits</td>
<td>5 credits</td>
</tr>
</tbody>
</table>

For **part-time students** in 12 month assignments, we recommend allotting PSYCAP 560 credits in Year 2 as displayed below. This *will not* qualify students for federal funding for spring and summer quarters, which means they will need to make other arrangements or plan to pay out-of-pocket for two credits. Under this allotment, students on federal financial aid would get their disbursement for autumn and winter.

<table>
<thead>
<tr>
<th>Autumn Quarter</th>
<th>Winter Quarter</th>
<th>Spring Quarter</th>
<th>Summer Quarter</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 credits</td>
<td>4 credits</td>
<td>1 credit</td>
<td>1 credit</td>
</tr>
</tbody>
</table>

**Summer Intensive Schedule:** The summer intensive courses *count towards autumn quarter*, but begin before the federal aid disbursement date for autumn.

**Loan Repayment:** Some loan repayment schedules begin after the last quarter of being enrolled for 5 or more credits, not necessarily after your last enrolled quarter. Your repayment schedule
will depend on your own loan history and the types of loans you are on. Contact the Financial Aid Office with any questions about repayment schedules at osfa@uw.edu or 206-543-6101.

“Part-Time” Program: The UW Office of Student Financial Aid (OSFA) classifies our program as a “part-time” program because 3 out of 5 quarters for full-time students require taking less than 10 credits. As a result, OSFA will automatically under- and over-disburse for each quarter unless students inform OSFA of their credit load each quarter. For this reason, we strongly advise that students on federal financial aid request changes to their award (www.washington.edu/financialaid/receiving-aid/request-changes-to-your-award/) using the Revision Request for Additional Expenses form before the start of the academic year. Students can and should attach a worksheet that specifies the number of credits they plan to enroll in each quarter. Failure to do so can result in over- and under-disbursement and can require repayment of excess disbursement.

SCHOLARSHIPS & AWARDS
The Graduate Funding Information Service (www.lib.washington.edu/commons/services/gfis) assists UW graduate students in their search for funding opportunities for graduate school-related expenses. GFIS representatives host workshops, post funding announcements and meet one-on-one with students.

Students may search for funding sources through the WashBoard.org (fortress.wa.gov/wsac/thewashboard/AboutUs.aspx). Qualifying students can apply for veteran’s education benefits (osfa.washington.edu/wp/veterans/).

EMPLOYER ASSISTANCE
Some employers will cover all or part of the cost of a professional education. Students should check with their employer to see if such a program is available.

LEAVE & REENROLLMENT, WITHDRAWALS & REFUNDS
Policies governing extended leave, reenrollment, withdrawals and refunds are governed by UWPCE. For more information, visit www.pce.uw.edu/help/registration-costs/drops-withdrawals-and-refunds

GRIEVANCES
The Department of Psychology is committed to supporting graduate students and working to resolve any problems and/or conflicts that may arise. Students are encouraged to address situations proactively. It is recommended that students attempt to resolve any problems or conflicts informally. At this level, the subject remains confidential.
Depending upon the nature of the student’s concern, the appropriate avenue for addressing the situation may vary. Within the department it may be best to confer with the Program Specialist, Lora Brewsbaugh. If this is not appropriate, or this does not lead to a satisfactory resolution, the student should contact the Faculty Director, Lynn Fainsilber Katz, or the Department Chair. At any time, the student may also contact the Department of Psychology Ombudsperson, Jane Simoni (jsimoni@uw.edu, 206-685-3291).

If necessary, a formal complaint may be made in writing. Once a statement is put in writing it becomes part of the record and at that point is available to anyone with an interest in the subject, including those involved in the situation. This can be done either within or outside the department.

If the student fails to resolve the difficulties within the department, there are avenues available outside the department as well; for example, the Ombud: www.washington.edu/ombud/, 206-543-6028.

There is also the University Complaint Investigation and Resolution Office (UCIRO). UCIRO is responsible for investigating complaints that a University employee has violated the University’s non-discrimination and/or non-retaliation policies. A UCIRO investigation may be requested either by an individual or by the administrative head of a University organization.

In addition, UCIRO is responsible for investigating and responding to most Charges of Discrimination filed by individuals with external agencies, such as the Equal Employment Opportunity Commission (EEOC) and the Washington State Human Rights Commission (WSHRC).

If you would like to make a complaint or obtain additional information about UCIRO, please contact 206-616-2028 or email uciro@uw.edu. For more information, visit: compliance.uw.edu/UCIRO

**CORRECTIVE ACTION**

When appropriate, program staff and faculty provide informal warnings and help outline improvement plans. Documentation will be added to the student’s program file, but at this level the matter remains confidential within the program and potentially the practicum site.

Violations of the Academic and Professional standards described and referred to in this handbook are grounds for corrective action, which may include temporary removal from class and/or practicum, a delay or denial of practicum placement, and/or dismissal from the program. Violations of the Student Conduct Code and APA professional standards are referred to UW Community Standards & Student Conduct for possible disciplinary action. www.washington.edu/cssc.
POOR ACADEMIC PERFORMANCE

Poor academic performance is defined for graduate students as having a grade point average (GPA) below 3.0. Students whose cumulative or quarterly GPA falls below a 3.0 are provided with a letter from the Program Director explaining performance expectations and a timetable for correcting deficiencies. The following areas are considered:

- Performance in the fulfillment of degree program requirements.
- Maintenance of a minimum GPA of 3.0 cumulatively and for every quarter of coursework.
- Performance during informal coursework and seminars.
- Research capability, progress and performance.

Students whose cumulative GPA drops slightly below a 3.0 (i.e. 2.99–2.95) OR who fail to meet expectations for performance and progress outlined in this handbook may receive a warning in writing from the Program Director. The warning is made part of the student’s file with the program, but does not appear on the student’s transcript.

ACADEMIC PROBATION PROCESS

ACADEMIC PROBATION

A Student may be put on academic probation for a full academic quarter if:

- The student’s cumulative GPA drops below 3.0.
- The student does not correct the deficiency which caused the warning action within the time limit specified within the warning.
- The student departs suddenly and substantially from academic and practicum obligations.

Students are informed in writing of their probation status be the end of the second week of the quarter. A student’s probation status is reviewed by the Dean of the Graduate School and appears on transcripts. Students are given an opportunity to meet with their faculty advisor and the Program Director in order to discuss the terms of their probation and outline a process for improvement. A student can be placed on academic probation for several consecutive or non-consecutive academic quarters.

FINAL ACADEMIC PROBATION

After at least one quarter on probation, the program may recommend to the Graduate School that the student be placed on final probation for a full academic quarter. Students are notified of their final probation status by the end of the second week of the quarter. A student may be recommended for final probation if:

- The student has not corrected the condition(s) which caused the probation recommended within the time limit specified by the graduate program.
The student failed additional performance requirements and did not progress toward completion of the graduate program.

**DROP**

After one quarter on final probation, if the student’s performance does not improve by the specified timeframe, the program may recommend to the Graduate School that a student be dropped. This would occur within the first five days of an academic quarter. If the Graduate School accepts the recommendation, the Graduate School notifies the Registrar and the student is immediately removed from the program.

**IMMEDIATE REMOVAL FROM THE PROGRAM OR PRACTICUM**

The program can immediately remove a student temporarily from classes and/or practicum if there are serious concerns about the student’s conduct or safety concerns necessitating investigation and resolution.

The program will notify the student in writing of the effective date of the temporary removal and reason for removal. The program will notify the student’s practicum placement site as appropriate. During the course of the investigation, the student has the right to meet with the Associate Dean for Academic Affairs, Program Director, Practicum Coordinator and relevant course instructors to contribute to fact finding. After the investigation is complete, the student will be notified in writing of the program’s decision which can include, but are not limited to, reinstatement to the course(s), reinstatement or a transfer of the student’s practicum placement, permanent removal from the practicum placement, or permanent removal from the program. The program attempts to conduct investigations as quickly as possible and will communicate its timeline to the student whenever possible, however timelines are subject to change.

**APPEALS**

Students may appeal these recommendations directly to the Program Director, Lynn Fainsilber Katz. Additional appeals must follow the process outlined in Graduate School Memorandum No. 33, Academic Grievance Procedure. [grad.uw.edu/policies-procedures/graduate-school-memoranda/memo-33-academic-grievance-procedure/](grad.uw.edu/policies-procedures/graduate-school-memoranda/memo-33-academic-grievance-procedure/)

**AFTER GRADUATION**

**RECORDS & TRANSCRIPTS**

Credit courses appear on your UW transcript. Students enrolled in credit courses can view their grades and print an unofficial transcript through MyUW. If you need an official transcript, you can order one from the UW Registrar’s office. [www.washington.edu/students/reg/transcripts.html#Q7](www.washington.edu/students/reg/transcripts.html#Q7)
ALUMNI PROGRAM

After you complete a UWPCE certificate program, you’ll be invited to join our alumni community program. This program offers access to a suite of free services just for certificate alumni, including a private LinkedIn group, quarterly newsletter and invitations to exclusive networking events.

www.pce.uw.edu/about/alumni
APPENDIX A: 2019-2020 PRACTICUM SITES

ASIAN COUNSELING AND REFERRAL SERVICE
https://acrs.org/
Type/Setting: Community mental health center - Outpatient clinic
Primary patient diagnoses: Psychological disorders (e.g., anxiety, depression, disruptive behaviors)
Evidence-based treatments offered: CBT for anxiety, CBT for depression, TF-CBT, and parent management training; DBT skills (not full course of treatment)
Practicum activities/description: Provides outpatient services, including assessment and counseling to children, youth and families, maintain a caseload of clients in a community setting, assist in facilitating group activities, participate in weekly supervision, attend relevant team meetings

CADENCE
cadencechat.com
Type/Setting: Specialty clinic
Primary patient diagnoses: Psychological disorders (e.g., anxiety, depression, disruptive behaviors)
Evidence-based treatments offered: CBT: exposure for all anxiety disorders, behavioral activation, behavioral parent training, habit reversal training (although rare), family based treatment for anorexia, and general CBT for bulimia. DBT
Practicum activities/description: Individual therapy if appropriate, co-leading DBT multi-family skills group, analysis of treatment outcomes across programs

CHILD STUDY AND TREATMENT CENTER (CSTC)
www.dshs.wa.gov/bha/division-state-hospitals/child-study-and-treatment-center
Type/Setting: Hospital
Primary patient diagnosis: Psychological disorders, dually diagnosed, neurodevelopmental delays, learning disordered, social emotional delays, abuse/trauma
Evidence-based treatments offered: Therapeutic milieu operates on the principles of CBT, with a focus on skill building and resiliency; adaptations of Dialectical Behavioral Therapy and motivational interviewing for the setting; Trauma Focused Cognitive Behavior Therapy TF-CBT), with expert consultation; capacity to provide parent-training, with bug in the ear technology. Other treatments offered: A multifamily group therapy program; a very active adventure-based recreational therapy program.
Practicum activities/description: Providing/participating in individual/group therapies, family treatments. Participating in the development of treatment plans, behavioral analyses, and milieu programming. Participating in recreational therapy activities.

COMPASS HEALTH LYNNWOOD

Last updated: 4/11/19
**Type/Setting:** Community mental health center - Outpatient clinic. Compass Health - Lynnwood serves children and families residing in Snohomish County. Outpatient services offered include individual therapy, family therapy, and group therapy using evidenced-based practices as well as case management services to coordinate with schools, Children’s Administration, juvenile justice and other systems that are involved with the particular client.

**Primary patient diagnoses:** Psychological disorders (e.g., anxiety, depression, disruptive behaviors)

**Evidence-based treatments offered:** Cognitive Behavior Therapy for Depression, Cognitive Behavior Therapy for Anxiety, Parenting interventions, Trauma Focused CBT

**Practicum activities/description:** Provide individual, group and family therapy services, case management activities, opportunities to receive clinical consultation from clinical psychologist during some group consultation meetings, one hour of weekly individual supervision with either a licensed LMFT or LMHC. Compass Health has an open door policy so students can expect to find a provider for help with cases.

**ECHO GLEN**

https://www.dshs.wa.gov/ra/juvenile-rehabilitation/echo-glen-childrens-center

**Type/Setting:** Echo Glen Children’s Center in Snoqualmie is a medium/maximum secure facility that provides treatment services to youth who have been adjudicated for a variety of misdemeanor and felony crimes. Youth are placed at Echo Glen after they complete their initial processing and court proceedings while residing in the Juvenile Detention Center of their home community.

**Primary patient diagnoses:** Psychological disorders (e.g., anxiety, depression, disruptive behaviors)

**Evidence-based treatments offered** Dialectical Behavior Therapy (DBT), Integrated Treatment of Complex Trauma for Adolescents (ITCT-A), Trauma Focused Cognitive Behavior Therapy (TF-CBT), Trauma Affect Regulation: Guide for Education and Therapy (TARGET)

**Practicum activities/description:** Students will broadly obtain a solid foundation in practicing principles of Trauma Informed Care within a Juvenile Justice Institution and will have opportunities to work directly with youth who have experienced complex trauma. Use of standardized assessments of Depression, Anxiety and Post Traumatic Stress (e.g., Beck Depression Inventory, UCLA PTSD index) including administration of instruments at the post treatment assessment, Trauma informed case conceptualization and treatment planning

**EVIDENCE BASED TREATMENT CENTER OF SEATTLE (EBTCS)**

ebtseattle.com

**Type/Setting:** Specialty clinic—mainly treating anxiety disorders and obsessive-compulsive and related disorders

**Primary patient diagnoses:** Psychological disorders (e.g., anxiety, depression, disruptive behaviors)

**Evidence-based treatments offered:** ERP (Exposure and Response Prevention as CBT treatment) for OCD in an outpatient intensive program; CBT for anxiety; Parent Management Training for Disruptive Behavior Disorders.

**Practicum activities/description:** The practicum student will primarily participate in the
intensive outpatient setting. Practicum students will partner with staff members as well as have a licensed supervisor throughout the practicum. There will be opportunities to observe a variety of clinicians who are licensed mental health therapists or psychologists. You will be learning from experts in the field who will provide mentoring, support, feedback and supervision. There are 2 main tracks which a practicum student could participate in. It is anticipated that the student would cross over both of these tracks:

1. **OCD track**—Obsessive Compulsive Disorder (OCD) is the primary diagnosis. Patients have usually have had prior hospitalizations and are often not going to school. This track takes a wraparound approach. Treatment activities include Exposure with Response Prevention (E/RP), coordination with schools, parent training, figuring out complex diagnostic issues, and working with community partners (e.g., making referral for Autism evaluation). Practitioners in this track see patients in their homes, and at schools. Practicum students would be part of a team, in which they would be extending the dose of treatment.

2. **School refusal track**—This track is for patients who are not attending school. Providers work with patients for 8–12 weeks to get them back at school. In this track, the training would be mostly in family systems. The practicum student would have opportunities to work with ODD diagnoses, adolescents, as well as some anxiety disorders.

**FRIENDS OF YOUTH**

[www.friendsofyouth.org](http://www.friendsofyouth.org)

**Type/Setting:** Community mental health center/outpatient clinic, School setting

**Primary patient diagnoses:** Psychological disorders (e.g., anxiety, depression, disruptive behaviors), Dually diagnosed (substance use and mental health disorders), Substance use/abuse, Juvenile offenders, Social emotional delays, Abuse/trauma

**Evidence-based treatments offered:** Behavioral Activation, Behavioral Parent Training/Parent Management Training (PMT), CBT, TF-CBT, DBT, Motivational Interviewing, Multisystemic Therapy (MST)

**Practicum activities/description:** Students would do individual and group therapy, and school based services. Students can receive group and individual supervision.

**HARING CENTER/EXPERIMENTAL EDUCATION UNIT**

[haringcenter.org](http://haringcenter.org)

**Type/Setting:** Early childhood school community. The site has Birth to 3 programs, a preschool for typically developing 3-5 year olds, those on ECEAP, as well as those with disabilities. There’s also a Kindergarten

**Primary patient diagnoses:** Children ages 0-6 years old. Neurodevelopmental delays, Learning disordered, Social emotional delays, Other: economically disadvantaged

**Evidence-based treatments offered:** Incredible Years, Applied Behavior Analysis

**Practicum activities/description:** Work with family support team to teach Incredible Years
training to children and parents. Work as part of the school Behavior team. Conduct FBAs and write and implement behavior plans. This practicum is best suited for students who: 1) are interested in developmental delays and/or autism as well children with challenging behaviors; 2) want to work with younger children (0-6 years old) and their families; and 3) has an interest in working with schools.

**HopeSparks (Tacoma)**

[hopesparks.org](http://hopesparks.org)

**Type/Setting:** Community mental health center/outpatient clinic. We are a community mental health agency focused on providing evidence-based treatments in a welcoming environment.

**Primary patient diagnoses:** Psychological disorders (e.g., anxiety, depression, disruptive behaviors), dually diagnosed (substance use and mental health disorders), juvenile offenders, neurodevelopmental delays, social emotional delays, abuse/trauma

**Evidence-based treatments offered:** Trauma-focused cognitive behavioral therapy, Parent Child Interaction Therapy, Cognitive Behavioral Therapy (for depression, anxiety, behavior), Helping the Non-Compliant Child.

**Practicum activities/description:** HopeSparks is a community mental health agency focused on providing evidence-based treatments in a welcoming environment. Practicum students would have a variety in their caseload, though about 60% of the clients we serve are children and families. HopeSparks focuses primarily on treating trauma, anxiety, behavioral issues and depression. Groups are available to shadow and we have partnerships with other community agencies (physical health, schools, child advocacy center, housing authority) if the student was interested in shadowing or participating.

**Nexus Youth and Families (Various Locations)**

[nexus4kids.org](http://nexus4kids.org)

**Type/Setting:** Outpatient; school based services

**Primary patient diagnoses:** Psychological disorders, dually diagnosed, neurodevelopmental delays, learning disordered, social emotional delays, abuse/trauma

**Evidence-based treatments offered:** Cognitive Behavior Therapy (CBT); CBT for Anxiety, CBT for Depression, CBT for Child Trauma; PCIT; Incredible Years; Dialectical Behavior Therapy (DBT)

**Practicum activities/description:** Practicum students would engage in assessments and intakes, individual therapy, group therapy, meetings with caregivers, case management, working in schools, attending field trips with clients, collaboration with providers, etc.

**Puget Sound Educational Services District (PSESD)**

[www.psesd.org](http://www.psesd.org)

**Type/Setting:** School

**Primary patient diagnoses:** Substance use/abuse, suicide, abuse/trauma, behavioral problems

**Evidence-based treatments offered:** DBT, CBT, and Motivational Interviewing (MI)
Practicum activities/description: There are two different practicum opportunities for students and most likely students will do a combination of them: 1) Prevention area – Working in the schools on family/parent drug and alcohol concerns, student trauma, and suicide prevention. Activities: Groups, screenings, 1:1, classroom guidance. 2) Prevention & community based area - similar to #1 activities described above but also work with community based coalition. Activities: Student would work w/ 1-2 school (high school or middle school). Student would work separately with coalition, planning community events, doing outreach within the community where school district is located. Attending meetings, working with coalition re: events, helping to run events. More policy focused. Interventions would focused on: suspension, drugs/alcohol issues, CPS reporting, suicide protocol, and helping keep kids in school. Practicum students can attend staff meetings/trainings

RYTHER
www.rythert.org

Type/Setting: Community mental health center/outpatient clinic
Primary patient diagnoses: Psychological disorders (e.g., anxiety, depression, disruptive behaviors ), Learning disordered, Social emotional delays, Abuse/trauma

Evidence-based treatments offered: We train in the ARC model and the intern would be able to observe/use this. We also have an experiential course that the intern could observe and are working with the STAY program which they could also observe and use pieces of. Others include Behavioral Activation, Behavioral Parent Training/Parent Management Training (PMT), CBT, TF-CBT, DBT, Group Therapy and Motivational Interviewing.

Practicum activities/description: Outpatient services provides clinical placements for second year students in Master’s level programs. Interns have a minimum 24 hours weekly commitment and are required to be on site Wednesday evenings. Interns will receive clinical training and hold their own caseloads.

Training: Interns will receive training in Motivational Interviewing, CBT+, TF-CBT, professionalism, Behavior Management, using the CALOCUS and other assessment tools, Tiering clients with the county, medical record keeping and clinical writing. We hold additional trainings for many other forms of therapy that are voluntary.

Supervision: Interns receive weekly individual supervision from their direct supervisor. Bi-weekly supervision from the intern coordinator for the first 3 months and attend team meeting where we consult with our psychiatrists as well as an autism specialist and a CBT specialist on a rotating basis. Interns have the opportunity to drop in to many consultation groups including the PCIT consult group, the DBT consult group, High risk consultation group and the co-occurring consult group.

Caseload: Interns are asked to carry a caseload of 8-12 clients. This will be a combination of family and individual cases with kids from a wide variety of cultural and ethnic backgrounds. We require interns to run the child behavior skills group and have a variety of other groups that
interns can take part in voluntarily such as the DBT skills group, 7 challenges co-occurring group, Peaceful alternatives to tough situations group, parent support group, art therapy group, etc.

Other skills: Interns will be asked to keep up with clinical writing and social work for client on their caseload. Occasionally, we will assign desk tasks designed to improve clinical writing.

SEATTLE CHILDREN’S HOSPITAL – AUTISM CENTER
www.seattlechildrens.org/clinics-programs/autism-center

Type/Setting: Specialty clinic
Primary patient diagnoses: Psychological disorders, neurodevelopmental delays, social-emotional delays

Evidence-based treatments offered: ABA-based interventions, RUBI parent training model
Practicum activities/description: Students conduct educational sessions with parents (parent psychoeducation), individual therapy with children (classroom-based ABA model; ABA approaches to address challenging behaviors; ABA approaches to address feeding behaviors) and with parents (RUBI model, which is a structured parent training (PT) manual for children with ASD).

SEATTLE CHILDREN’S OUTPATIENT PSYCHIATRY AND BEHAVIORAL MEDICINE CLINICS, MOOD AND ANXIETY PROGRAM (MAP)

Type/Setting: Specialty Clinic (e.g., anxiety, autism, sexual assault/trauma)
Primary patient diagnoses: Psychological disorders (e.g., anxiety, depression, disruptive behaviors)

Evidence-based treatments offered: Practicum students will participate most significantly in our Mood and Anxiety Program (MAP) which is an outpatient specialty clinic with locations in Seattle and Bellevue. Involvement will be at both sites with more time spent in the Bellevue clinic location. Programs occur at specific times and days that don't interfere with graduate courses. It is necessary to attend on specified days/times in this practicum.
1. Cognitive Behavior Therapy (CBT) for anxiety with concurrent groups for children, teens and parents.
2. ERP (Exposure and Response Prevention as CBT treatment) for OCD in an Outpatient Intensive Program (OCD IOP). A rare and remarkable treatment program that changes lives and teaches skills needed to work with parents and children/teens with anxiety and OCD
3. Incredible Years and concurrent Dina School evidence based parenting program for children with "disruptive behaviors". Program includes strong focus on parent-child relationship and positive approaches including emotion, social and persistence coaching in addition to other parenting skills with concurrent Dina School to teach skills to 6-8 year old children
4. There are many additional evidence based treatments we offer in the clinic which students
will be exposed to without direct involvement in these evaluation and treatment programs. These include a comprehensive Dialectical Behavior Therapy (DBT) program, Eating Disorders program, Gender Team evaluations, Collaborative Assessment and Management of Suicidality (CAMS), CBTi for insomnia, CBIT for tics/Tourette's, Habit Reversal Training (HRT) for Skin picking and Trichotillomania, Evaluations of Bipolar and Psychotic Disorders, Behavioral Activation for Depression, Selective Mutism group program, ADHD evaluations, group programs to teach teens organizational and study skills, Deaf and Hard of Hearing (DHH) program, Neuropsychological evaluation service, inpatient treatment program (Psychiatry and Behavioral Medicine Unit), Emergency Department, Pediatric Psychology and Consultation-Liaison Service. We have training clinic, Early Childhood Clinic (ECC), and PEARL Clinic for ADHD and related concerns as well as the Mood and Anxiety Program (MAP) specialty clinic. The students will join our MAP Consult Team and OCD IOP team.

**Practicum activities/descriptions:** There will be tremendous opportunities to observe a variety of clinicians who are licensed mental health therapists or psychologists. Practicum students will partner with licensed providers in group treatment programs to learn evidence based practices and increasingly take a more active role. You will be learning from experts in the field who will provide mentoring, support, feedback and supervision. Our outpatient clinics are part of the Seattle Children's/University of Washington academic medical center with providers and trainees from several different mental health disciplines. Students will join our Mood and Anxiety Program (MAP) Consult Team as well as our Obsessive-Compulsive Disorders (OCD) Intensive Outpatient Program (IOP) team and be involved in evidence based treatment programs administered in group format for Anxiety, OCD and Disruptive Behaviors. There is significant involvement of parents in all of our programs.

**SOUND (VARIOUS LOCATIONS)**

www.sound.health

**Type/Setting:** Community mental health center and school settings

**Primary patient diagnoses:** Psychological disorders (e.g., anxiety, depression, disruptive behaviors), dually diagnosed (substance use and mental health disorders), substance use/abuse, abuse/trauma

**Evidence-based treatments offered:** TF-CBT

**Practicum activities/description:** Practicum students will have a variety of clinical opportunities, including direct services: one-to-one counseling; play therapy; family therapy, and psycho-educational groups; participation in initial intake assessments; developing treatment plans and crisis plans together with clients; and a range of case management activities.
THIRA HEALTH
https://thirahealth.com/
Type/Setting: Intensive outpatient and partial hospitalization setting that provides Dialectical Behavior Therapy (DBT) to female clients (including transgender individuals).
Primary patient diagnoses: Psychological disorders (e.g., anxiety, depression, disruptive behaviors )
Evidence-based treatment offered: Dialectical Behavior Therapy, Cognitive behavior therapy, bibliotherapy, expressive arts therapy
Practicum activities/description: Facilitating DBT skills group with a seasoned therapist (i.e., providing co-therapy). Students may also be able to run a DBT skills group on their own with consultation/supervision. Students will be trained to be DBT skills coaches to work with clients in the milieu and will be trained to conduct suicide risk assessments and generate suicide risk management plans. As students gain mastery of DBT skills, they would move to more individual work with a client/family.

UW RESILIENCE AND WELLNESS PRACTICUM
https://education.uw.edu/people/faculty/mazza
Type/Setting: School (college and high school)
Primary patient diagnoses: Not applicable. Preventative-based practicum.
Evidence-based treatment offered: DBT, brief CBT
Practicum activities/description: Part 1) Participation and support of UW undergrad course in Resilience and Wellness, lecture and labs. Extra guidance and support for students who need extra help in understanding and practicing skills.
Part 2) Co-teaching (with school counselor) DBT skills at Roosevelt High School to 10th graders in a study skills class. Two times per week.

YOUTH EASTSIDE SERVICES (YES)
www.youtheastsideservices.org
Type/Setting: Community mental health center/outpatient clinic; possibly school based
Primary patient diagnoses: Psychological disorders (e.g., anxiety, depression, disruptive behaviors ), social emotional delays, abuse/trauma
Evidence-based treatments offered: Cognitive Behavior Therapy (CBT); Dialectical Behavioral Therapy (DBT)
Practicum activities/description: Provide individual and family counseling to children, adolescents and their families at school and agency sites, as assigned; develop treatment plans and provide appropriate case management and ongoing clinical services. Participate in weekly supervision, bi-monthly intern meetings, and trainings. Maintain caseload at agreed upon level; work two evenings per week. Opportunities to co-lead groups and attend trainings.
APPENDIX B: PRACTICUM SITE EVALUATION OF STUDENT PERFORMANCE

The information in this form is submitted electronically to the Practicum Coordinator twice (at the mid-point and end of the practicum year).

Name of respondent:
Respondent email:
Name of student evaluated in this form:

Please rate the clinical competencies below using the following scale

1: Below expectations
2: Somewhat below expectations
3: Meets expectations
4: Above expectations
5: Significantly above expectations
N/O: Not observed

- Ability to establish rapport and relate effectively to patients (including youth and caregivers)
- Degree of skill in interviewing
- Ability to understand patients’ psychological functioning through observations, interviews, and patient data (e.g., standardized measures)
- Ability to diagnose psychosocial difficulties and disorders in children and youth
- Ability to communicate clinical data via verbal report to clients
- Ability to communicate clinical data via written report
- Ability to identify appropriate evidence based practice based on assessment information
- Ability to apply appropriate evidence base practice with fidelity and flexibility to address clinical target(s)
- Demonstrates clinical skills needed for particular clinical target/diagnosis
- Demonstrates the ability to discuss diagnostic formulation and case conceptualization
- Demonstrates sensitivity to diverse populations and patient backgrounds
- Demonstrates awareness of their own clinical competencies and areas for continued development
- Demonstrates basic knowledge regarding the range of normal and abnormal behavior
- Ability to apply core scientific conceptualizations of human behavior (e.g., behavioral principles, parent-child relationship, family systems) in clinical work with clients
With respect to your **supervision** of the student, please rate the criteria below using the following scale:

1: Below expectations  
2: Somewhat below expectations  
3: Meets expectations  
4: Above expectations  
5: Significantly above expectations  
N/O: Not observed

- Comes to supervision well prepared  
- Demonstrates intellectual curiosity during supervision  
- Demonstrates flexibility during supervision  
- Demonstrates adequate self-awareness  
- Receptive and open to feedback during supervision  
- Makes effective use of supervision (e.g., presents cases, brings in patient data, etc.)  
- Adjusts practice as needed based on feedback  
- Communicates effectively with supervisor  
- Seeks out supervision/consultation appropriately
With respect to the student's **professionalism**, please rate the criteria below using the following scale:

1: Below expectations  
2: Somewhat below expectations  
3: Meets expectations  
4: Above expectations  
5: Significantly above expectations  
N/O: Not observed

- Completes required documentation (e.g., progress notes, treatment plans, etc.) in timely manner  
- Attends meetings, appointments and other required practicum activities on time  
- Complies with practicum site’s policies and procedures  
- Maintains satisfactory professional interactions and relationships with staff, other students/peers, allied professionals  
- Shows awareness of and attention to self-care  
- Possesses emotional stability and maturity  
- Demonstrates appropriate personal hygiene and attire  
- Demonstrates awareness of ethical issues/dilemmas and works to resolve them appropriately  
- Demonstrates progress in alignment with personal goals established during early practicum meetings  
- Notifies supervisor (or designated personnel) appropriately re: absences, request for leave, etc.
Please provide a general summary of the student’s current level of professional performance, including specific strengths and weaknesses:

Were any special activities or projects initiated by this student? If so, please describe them. If not, enter N/A.

Please provide a general summary of the student’s current level of clinical competency, including particular strengths and weaknesses. Please recommend specific areas for continued growth and development in your answer.

Do you have any recommendations for further training (e.g., areas for special emphasis, supervisory related)? If not, please enter N/A.
Both sides of this form must be signed and dated. When complete, turn this form in by hand, mail or through campus mail to:

Lora Brewsaugh  
University of Washington  
Department of Psychology  
Box 351525  
Seattle, WA 98195

By my signature below AND on the following page, I agree to the following:

1. I have read and understand the *Student Handbook for the Master’s in Applied Child & Adolescent Psychology: Prevention & Treatment*.

2. I am aware of systems and tools used at the University of Washington (UW) that allow me to access my student information and limit release of this information to the public.

3. I agree to abide by the UW’s *Student Code of Conduct*.

4. I agree to abide by the APA’s *Ethical Principles of Psychologists and Code of Conduct*.

5. I am familiar with the policies and procedures outlined by the school that apply to all students as well as those that apply specifically to graduate students.

6. I am aware that the Student Code of Conduct and policies and procedures are occasionally updated, and that it is my responsibility to stay aware of changes.

7. I am aware that my program is administered by UW Professional & Continuing Education (UWPCE), and that all UWPCE policies with respect to registration, payment schedules, costs and fees and tuition forfeiture apply to me.

8. I am aware of the degree requirements for the course, including the number of credits I must complete (36), the minimum permissible grade for each class (2.7) and the minimum cumulative grade point average for all of my classes (3.0).

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**PRINT NAME**

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**SIGNATURE**  
**DATE**
9. At my practicum site(s), if the policies and procedures that govern my position are not made clear during the site’s orientation process, I will ask my site supervisor(s) for this information to ensure that I do not violate the integrity of the practicum organization or jeopardize my performance in practicum. I understand that a violation could result in my termination from the practicum assignment, a failing grade in the course and/or possible suspension from the University.

10. I agree to comply with the vaccination/immunization requirements of my practicum site.

11. I agree to allow the University to share the results of my criminal background check with the practicum site(s) to which I am or will be assigned.

12. I will identify myself as a graduate student of the UW to clients/patients/guardians at practicum sites and will provide the name(s) of my site supervisor(s).

13. I understand that I will not receive a passing grade in the practicum unless I demonstrate a minimal level of skill, knowledge and competence along with completing the course requirements.

14. I understand the content in this handbook that pertains to financial aid and financial aid policy is advisory only, and that it is my responsibility to seek counsel through the Office of Student Financial Aid so that I understand the terms of my loan package(s).

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**PRINT NAME**

**SIGNATURE**

**DATE**

The program uses photography of program events and classes for marketing and informational purposes. Photography can prominently feature students. Students are not required to allow use of their likeness in this way and can decline by leaving this section blank. Photographs of students may still appear in the private Facebook group for the program.

- By affixing my initials below, I allow the program and University to use pictures of me taken at formal and informal program events for marketing and informational purposes.

**INITIALS**