

## PRACTICUM CONTRACT

**STUDENT:** Jane Doe

**YEAR IN PROGRAM:** 2<sup>nd</sup> (first practicum)

**DATES OF PRACTICUM:** September 1, 2014-April 30, 2015

**PRACTICUM LOCATION:** Vancouver Child Clinic

**SUPERVISOR:** John Doe

The following contract delineates the guidelines agreed upon by the student and the supervisor listed above.

### ***Goals:***

***Knowledge*** (e.g., knowledge of diagnostic issues related to the population served, theoretical underpinnings of case formulation, understanding of ethical principles)

- Develop knowledge of common childhood disorders, including diagnostic criteria.
- Develop knowledge of ethical and clinical issues particular to working with children and families – e.g., issues of consent, use of age appropriate language
- Develop knowledge of the impact of developmental and family factors on child behavior, assessment, and treatment
- Develop knowledge of evidence-based practice of child treatments

***Assessment*** (e.g., familiarity with a clinical assessment interview, ability to administer, score and interpret relevant psychometric tests)

- Develop skill in administering unstructured interviews, standardized and unstandardized rating scales, and observational measures (lab and school) assessing child, parent, and teacher perspectives
- Develop skill in integrating information from multiple informants and sources
- Develop skill in case formulations and treatment planning based on behavioral(e.g., SORKC) or cognitive-behavioral models
- Develop skill in writing assessment and other reports

***Treatment*** (e.g., ability to create and implement a treatment plan, ability to conduct a therapy session alone, ability to evaluate client progress as therapy proceeds, ability to develop a therapeutic alliance and an appropriate professional stance for that form of therapy)

- Develop skill in presenting treatment plans to children and parents
- Develop skills in implementing and monitoring behavioral and cognitive behavioral treatments, using either a functional analysis approach or an evidence-based manualized treatment
- Develop skills in recognizing the limitations to manualized treatments, and in modifying these as appropriate for particular clients
- Develop skills in building rapport with children and parents, and in self-reflecting on your behavior as a therapist

**Administrative** (e.g., integrate interview and test material in an assessment report, summarize weekly progress in a summary note, ability to effectively terminate a therapy case [i.e., determining need for other referrals, making new referrals, closing a file])

- Develop skills in case documentation (e.g., writing progress notes)
- Develop skills in inter-professional communication (e.g., consulting with schools)
- Develop skills in case management (e.g., arranging referrals)

**Supervision** (e.g., ability to conceptualize and summarize weekly sessions for supervision, openness to discussing difficult therapy experiences, willingness to try new approaches, openness to feedback)

- Develop skills in summarizing sessions, identifying areas for development (e.g., what do you which you had done differently in session), and in planning next steps of treatment, including strategies for overcoming barriers or obstacles to treatment
- Develop skills for integrating empirical literature with clinical planning

**Clinical Activities:**

1. To complete a minimum of 4 assessments including clinical interview and relevant psychometric tests. Draft reports will be written within 1 week of completion of the assessment and presented for review and, after revision, countersigning.
2. Cognitive Behavioural or Behavioural treatment of a minimum of 4 clients over the course of the year.
3. Completion of weekly summary notes within one week of each session, and presentation of these notes at supervision for countersigning.
4. Completion of draft termination reports within 1 week of completion of treatment and presented for review and, after revision, countersigning.
5. Completion of termination process sheet (referral, termination note, file closure) within 1 week of therapy termination.
6. Participation in weekly group supervision sessions, and individual supervision as required.

**Supervision:**

1. Supervision will be provided by Dr. Doe
2. Supervision sessions will be for 1.5 hours (group) on a weekly basis, with additional individual time as needed.
3. During these sessions, the student will provide:
  - a summary of the previous session
  - a description of any difficulties or successes during the session
  - suggestions of future directions
4. Supervisor will review sessions by video tape for all assessment sessions, and up to 1 hour per week of additional client sessions. The 1 hour chosen is at the student's discretion.
5. Feedback will be provided by supervisor in the form of notes and in person supervision.

SIGNATURES:

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Practicum Student

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Practicum Supervisor

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Clinic Director