



Masters of Science in Clinical Psychology

Graduate Student Handbook

Fall 2020



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Last Updated: 5/5/20



Letter from the Director: A welcome & expectations

Welcome to the MS Clinical Psychology Program at SJSU!

The purpose of this Handbook is to give you some information that should be helpful with your progress through the MS Clinical Psychology program at San Jose State University. You are required to review this document carefully and keep it for reference throughout your time here as a student. It will answer many of the questions you are likely to have about the program and licensing requirements including the criteria for the first and second year comprehensive exams.

One of the primary purposes of the handbook is to provide a resource for you to get information and answers to many of your questions that occur over the course of your training here. Specifically, this is the resource for information for which courses you need to enroll in and when, comprehensive examinations, fieldwork, and licensing. Please consult the handbook as a first attempt to get these types of questions answered.

As many of you know, licensing information is constantly changing. The best place to go and to stay current on requirements for licensing is the website for the Board of Behavioral Sciences at www.bbs.ca.gov. As noted in the handbook, it is important that you stay current in your knowledge of the Board licensing requirements; the Clinical Program will try to be helpful, but we cannot assume responsibility in this realm.

This is a challenging degree you are attempting. It is not designed to be unnecessarily hard, but it is difficult to impart as much education as you need in only 2 years. You may feel the pressure and stress from time to time. That said, the faculty and your fellow students are here to help. When you were admitted, we made an implicit deal with you that, if you choose to continue, we will try to help you finish the program. We do not want to create obstacles that you feel you cannot overcome. Remember, though, the key to your success here is your consistent effort in your studies and being proactive in communicating your challenges in the program.

If you feel you are struggling with any part of the curriculum, please come and see one of the faculty members. If it is in a particular course, talk with that faculty member who is teaching the course first. You can always talk with me, the director of the program, as well. You should know that, while it is rare, it is possible to fail out of the program; however, our intention is to help you graduate. If you choose to leave, that is always your right. Just know that we are here to help you at every stage of the process as much as we are able.

One of the most valuable aspects of this program comes from second year students helping first year students succeed. The only limit placed on communicating with students from other cohorts concerns sharing of materials from completed courses. Only with explicit consent from an instructor may any material from any other course (e.g., tests, quizzes, papers, etc.) ever be shared by a student who has already taken a course with a student who has not yet completed (e.g. is currently enrolled in) the course. You will know if you are given explicit consent, and if you are unclear on this, contact the instructor of that course. Sharing unauthorized materials is considered academic dishonesty and is grounds for immediate dismissal from the program.

The faculty here in the MS program are committed to two goals: First, we will only graduate qualified, professional, and ethical clinicians; second, we want to see each of you finish the program. If the first goal cannot be met, the second objective will not occur. Our desire is to see you complete your degree, but you cannot complete the program without evidencing professionalism, ethical behavior, and competence as a clinician at this level of your training. This assessment of competence occurs throughout the program. Your ethical behavior and professionalism will be evaluated in coursework, in yearly evaluations, in your comprehensive examinations, and in your clinical activities.

Part of the process of getting a master's degree in Clinical Psychology is becoming an independent student and independent person. We want to encourage and facilitate that process by having you learn to solve problems on your own. That said, please come to us if you want to talk, if you are having a hard time, or if you have questions. And of course, always feel free to stop by and say "hello." Although you are assigned an initial mentor in the program, if you feel a connection to a particular faculty member or want to work with one let him or her know, and get that process started as early as you would like.

As mentioned above, two aspects essential to the development of any therapy or health service provider are professionalism and ethical behavior. It is expected that you behave professionally and ethically while a student

here at San Jose State University. In terms of ethical practices, it is expected that each student will adhere to the strictest interpretation of the ethical guidelines and codes of the California Association of Marriage and Family Therapists (CAMFT) as well as the American Counseling Association (ACA) ethics codes if you are also perusing an LPCC license. In addition, you must adhere to the codes of academic conduct set by both your coursework in the program and by the University. You are provided with the copies these codes in this Handbook and a PDF of the ethics codes. For course guidelines, you can always find these requirements in the syllabi for the course. Finally, you can find these documents online on the SJSU MS Clinical webpage under policies and or current student links. If you are ever unclear on these guidelines, immediately discuss this with a faculty member.

If at any time, it is determined that you are acting unethically or unprofessionally, it may be grounds for immediate dismissal from the program. Unethical activity as a student certainly includes behavior with clients and professionalism at your fieldwork agency. It also includes plagiarism or cheating, and students who have cheated or plagiarized will often be dismissed. Failing to report incidents when you are aware of another student's unethical or unprofessional behavior may be grounds for dismissal from the program as well. If you have any questions about whether your behavior or another student's behavior constitutes unethical activity, do not hesitate to contact a faculty member at any time. Remember, asking if something is acceptable and not plagiarism, cheating, or unethical before that act committed is just fine. In fact, that is one way we learn what counts as unethical behavior – asking about it before it occurs. Once you have turned in an assignment and claimed it as yours, or engaged in unethical behavior, then it is subject to consequences.

Issues of plagiarism and ethical violations are rare in our program, but we take them very seriously. Our work as clinicians demands the highest integrity among the helping professions, and we require you to maintain that rigorous standard of ethics.

While all of this is quite serious, we want to return our focus to your accomplishments. We look forward to working with you during your time here. We take the best of the best applicants for MS programs, and we graduate what we believe are the top clinicians in the field. Welcome to that tradition of excellence.

Glenn M Callaghan, PhD
Director of Clinical Training
MS Clinical Psychology Program
San Jose State University



Mission statement & Evidence based practice at SJSU

The mission of this program is to train evidenced based Masters level psychotherapists for work in a variety of clinical settings including hospitals, schools, public agencies, and private practice. Evidence based practice of psychotherapy places the client first and considers the conceptualization of the client's problem including important contextual and cultural variables, is informed and guided by relevant empirical literature, and gathers data to determine choices and allow accountability. The diversity of settings and populations in which our graduates work requires that our students be flexible and open to differing clinical and cultural perspectives. Faculty in the program represent a variety of theoretical, clinical, and research interests, including Cognitive-Behavioral Therapy, Behavior Therapy, Mindfulness and Acceptance based approaches, Psychodynamic traditions, Cross-cultural interventions, Feminist Therapy, Community Psychology, and the biopsychosocial model inherent in Behavioral Medicine/Health psychology.

As a faculty we value diversity in thinking and encourage our students to sample ideas from different points of view. While we do not require conformity to any one specific theoretical orientation, we do require that any approach our students take be supported by a high standard of professional ethics and an established body of professional literature, including empirical clinical research. Graduates of this program adhere to ethical standards and demonstrate a basic familiarity with the major approaches to assessment, diagnosis and treatment, a respect for cultural diversity, and accountability for service delivery. We expect that our graduates have the ability to read and critically evaluate the literature in the field, and we require them to achieve a basic level of proficiency within at least one psychotherapeutic approach. In short, our graduate is evidence based, broadly educated, critically minded, and has the ability to ethically apply theory to practice in a diverse and changing community.

Our Definition of Evidenced Based Practice

There are four areas that serve as the foundation for evidence based care as defined by the MS Clinical Program that is interwoven with all courses throughout training.

1. Evidenced based practice is an approach to clinical treatment that begins with the client's context and preferences and a focus on case conceptualization (where the client may be an individual, couple, family, or other unit that is the focus of treatment). This conceptualization occurs within a cultural context and is informed by multiple levels of analysis including but not limited to that of the individual, family, community, education, biological variables, and advocacy.
2. Evidence based practice examines the empirical literature for research data on treatment outcomes and processes that inform and guide clinical interventions based on the conceptualization of the case.
3. Evidence based practice is consistent with measurement based care that seeks to gather information about the client to inform treatment decisions and gather data over time about clinical processes and their impact on outcome. The assessment of change processes focuses on paradigmatically driven formulations of client problems and mechanisms of change and are often idiographic, tailored to the client's problem list. Nomothetic outcome measures are utilized to document broader indices of change and convey this information to wider clinical audiences and institutional stakeholders.
4. Clinical experience can be utilized in evidence based case conceptualizations where the therapist's history with client problems and populations is weighed in balance with research evidence and the unique attributes of the client's historical and current context.



Program checklist

By Semester

The following is based on full time enrollment as a student in the program. We do not admit students into part time study in the program, but if something arises that compromises your ability to complete the program in two years, immediately contact the Program Director and your instructors. We can often work out strategies that allow for the student to complete his or her studies. Note the University deadlines are highlighted. These are hard deadlines, and failing to meet them will delay your graduation date.

1st Semester

- Join professional organization(s) of choice (CAMFT, AAMFT, etc.)
- Familiarize yourself with the BBS licensing laws and regulations
- Become familiar with fieldwork placements

2nd Semester

- Beginning in January: Apply for fieldwork placements
- Obtain signatures for Fieldwork Contract (and University MOU if needed) & Obtain student professional liability insurance
- Prepare for and take 1st year comprehensive exams

3rd Semester Full time

- Submit *Departmental Request for Candidacy* form to Graduate Studies office prior to October 1
- Complete first round of 2nd year comps
- Fill out fieldwork hours and supervisory forms for fieldwork experience/consultation

4th Semester Full time

- File *Application for Award of Master's Degree* to Graduate Studies for MS degree in Clinical Psychology before February 1
- Fill out fieldwork hours and supervisory forms for fieldwork/consultation
- Complete 2nd year written and oral exams
- Graduate!



Succeeding in graduate school

You are becoming a *Master* of a field and an independent psychotherapist. Welcome to the big leagues. Fasten your seat belt – things could get bumpy.

One of the things that makes this a very challenging experience for some students is that they view grad school simply as a continuation of their senior year as an undergraduate (aka “gradual school”). This is *not* the next step from undergraduate work. Graduate study is designed to prepare you for professional work. In our case, you are being prepared to be a psychotherapist, seeing clients, providing services to populations in need.

In just a short period, you will be able to deliver very powerful psychological interventions to people who are in serious distress. This is a huge responsibility. Your training here will be about becoming the best psychotherapist you can possibly be. This is *definitely* not a simple continuation of your undergraduate work!

For all of you, some things will need to change: How you approach your studies, your level of independence, how you relate to others in a professional context, and how you deal with stress. Overall, our goals are to help you develop your strategies for success as a psychotherapist.

In the great tradition of Top Ten lists, the following are some tips for success. These are likely issues you will address while you are here at SJSU.

There are indeed ten items here, but they are not listed from the least important to the most important. They are, of course, all essential.

Top ten tips for success

1. Aim for Mastery – Not the Top Grade

One of the classic things that will happen to many people in graduate school is they will realize they are no longer the smartest person in the class. You are here because, in all likelihood, you were one of the smartest in your undergraduate class. Now you are in a class of smarties. This is all good for you. You used to have to compete so that you could do very well and get into graduate school. You no longer have to compete for grades or scarce resources. You made it!

Each person around you will bring something to your knowledge. The diversity in background and thought among the students in the clinical program is one of your greatest assets in training. We want you to continue to do your best, but notice that the competition factor is no longer required. Getting an A grade is not nearly as important as understanding the content you are learning and knowing how to apply it. Aim for mastery of the material you are given. If you compete with anyone, compete only within yourself. All of you are successful in that you are already here. You succeed if you take the training you are given and go on to be a professional and ethical psychotherapist.

Your requirement now is to show that you are trying to do your very best, not in comparison to the person sitting next to you but your best in comparison to your own potential and becoming a great clinician.

2. Aim high and then Raise the Bar

What you are about to do will take a lot of courage. You are going to develop your core skills as a professional in just a few short years. Growth is challenging and sometimes stressful. In this process notice your desire to do just enough to get by and then return to your value of becoming better at what you want to become. Set your sights high, aim for those goals, and then be brave and raise that bar of success.

3. Take Responsibility

This is not the same as other experiences you may have had where your teachers or colleagues will tell you what you need to do. Part of becoming a professional psychotherapist is learning to take responsibility for your education and development. This means asking questions AND looking for answers on your own.

Get the most out of your graduate education. Take advantage of opportunities that come your way. This may include attending workshops, going to conferences, or getting more than the required amount of supervision or clinical training. It can also include seeking therapy and professional support to deal with stress and personal issues that might arise while you are a student here.

4. Change your Study Habits

You will likely need to learn to study differently than you did in your undergraduate work. There are three main issues that require you to change how you approach learning this material:

- (1) Not only is the material different, but there is a lot more of it;
- (2) Your goal now is NOT memorization, but integration across courses;
- (3) Your answers to questions need to be sophisticated, not generic.

With respect to the first issue, there is a great deal to read and to learn. Ask yourself to step up to the challenge of reading what you have been assigned. Be sure to budget your time and make choices about how you allocate your time.

Your professors are not sadistic. (Well, not all of them.) They are not trying to break you or cause you to go blind from reading too much. Instead, they have very thoughtfully narrowed down a massive literature into what they think you can and must read in a semester. And, yes, all of your professors know you have more than one course.

Do not try to do the reading by looking for the answers to test questions. Instead, read to look for what you need to learn from the author for your development and what the professor is asking you to *learn*.

With respect to the second and third issues, remember that you are developing your knowledge base as a professional clinician. Your answers to difficult clinical questions must show that you appreciate the complexity of the question and the individual (idiographic) component to the issues raised. For example, when considering the issues for a clinical case, do not attempt to memorize the 'top five' typical issues for all clients. Instead, consider what issues occur for this client with these problems in this context. Your answers to questions need to show that your knowledge base is building over time and integrates material from all of your coursework.

A sophisticated answer to clinical questions is what your clients are seeking. If we consider issues of safety, for example, we want to talk about this client in this set of circumstances and with these contextual features in our consideration. Just noting that we want to make sure a client is safe is no

longer sufficient in a clinical context. Instead, we want to go beyond that to show we understand that safety matters for this person for these reasons.

Sophistication also includes using a graduate level vocabulary and graduate level sentence construction in our writing and in our speech. We do not want to “talk over the heads” of our clients, but to our colleagues (and faculty while you are a student), the way to show your understanding is to speak and write professionally, and use the language of the business, not lay language. For example, if a therapy discusses the issue of challenging and replacing core schema, we use that terminology – not just “getting rid of bad thoughts.”

5. Utilize Your Peers

There are so many things you can get from your peers or fellow students. Here are just a few good ideas:

- (1) Form study groups – study out loud, share the wealth, and talk out the issues
- (2) Utilize and offer social support – get help with your stress, have lunch together, exchange ideas, and laugh together
- (3) Normalize your experience – talk to your friends about your challenges and experiences. Odds are your colleagues feel the same way, and you didn’t even know it! The world feels more manageable when you are not alone.

6. Improve your writing

Writing is a key issue for clinicians. It is a much bigger part of “talk therapy” than we want to admit. Clarity, organization, spelling, and grammar in writing is essential in your life as a student – writing papers, answering exam questions – and as your life as a professional – writing intake evaluations, case notes, and providing handouts to other clinicians.

Aside from your fellow students, there are resources on campus that can be very valuable and sometimes essential for student success. The SJSU Writing Center now has two locations: Drop-in tutoring sessions are in Clark Hall, Suite 126. They regularly schedule tutoring sessions on the second floor in the MLK Library. All Writing Specialists have gone through a rigorous hiring process, and they are well trained to assist all students at all levels within all disciplines to become better writers. In addition to one-on-one tutoring services, the Writing Center also offers workshops every semester on a variety of writing topics. To make an appointment or to refer to the numerous online resources offered through the Writing Center, visit the [Writing Center website](http://www.sjsu.edu/writingcenter) at <http://www.sjsu.edu/writingcenter>.

7. Talk in class discussions

One of the best ways you will learn course and clinical material is to talk out loud during class discussions. Nothing you will say is not smart enough – unless you are not paying attention, then you are simply uneducated about the issues being discussed.

Class discussions are a large part of graduate courses. Part of your evaluations will be based on how you contribute during these discussions. Many people are shy at first, and that makes sense. Still, be sure to try to develop your voice and get in on those discussions. Always remember that class discussions are a big part of developing your clinical skills.

8. Ask for help

Part of learning to be a good clinician is asking for assistance. There is very little truth to the idea that a clinician can “heal thyself.” We know this is a stressful time. Please ask for help WHEN you need it, not after it is too late to do anything about it. This is exactly what you would expect from a client seeking your assistance. If they ask for help after the intervention is over, well, you know the rest.

Realize that you are entering the ‘culture of psychotherapy’ which means you need to assert your needs and request assistance. In no way do you need to be pushy about this. (Being aggressive will get our attention in not a good way.) You simply need to be sure, as a professional, that YOU are asking for what YOU want and need. We recognize that some people may struggle with this as they come from different cultural contexts. We want to be inviting and encouraging of you seeking help when you need it, but you do need to take responsibility here. If we can help empower you in this, please let us know. We are happy to help with this.

If you have trouble adjusting and feel you have to be a different person, please come and talk to the faculty about how this process is going. We are committed to your success in this process and in helping make you the best person you want to become.

While we do not require students seek psychotherapy as part of the core clinical curriculum, we definitely encourage it of all of our students. If a student is struggling, we *strongly* encourage it. You can receive free psychotherapy here at SJSU while a student at SJSU Counseling Services, located at the Student Wellness Center, room 300B. Professional psychologists, social workers, and counselors are available to provide consultation on issues of student mental health, campus climate or psychological and academic issues on an individual, couple, or group basis.

To schedule an appointment or learn more information, visit [Counseling Services website](http://www.sjsu.edu/counseling) at <http://www.sjsu.edu/counseling>.

9. Connect with a Faculty Member or Supervisor

Get to know a faculty member or supervisor more than just as a teacher of one of your classes or supervisor of your clinical cases. Visit them in their office hours or go to lunch with them. You will be surprised by what you can get from these relationships with respect to your professional growth. The MS Clinical Program has adopted a junior colleague model, and many of the faculty enjoy mentoring and getting to know you in a broader context than just in the classroom. Keep in mind that full mentoring is not a formal or assigned process, so it will begin with you seeking out that guidance from any one of us. We love doing it, but we won't force it on you.

One of the greatest benefits that can come from these relationships with faculty is knowing that someone believes in you and that you can make it in the program. That can help carry a lot of the weight in your graduate school experience.

10. Maintain a Balance in Your Life

Remember that part of what you are doing is graduate school. That sits in the context of the rest of your life. Your challenge will be to balance the incredible demands of this program with the rest of your life. Relationships are fundamental in feeling connected and handling the stress of school.

To this end, we will have students work on their Professional Development Plan throughout the program at SJSU. This is a form that students complete that focuses on areas of their development including balancing personal and professional life. Burnout is a real challenge to those who provide mental health services. We will work with you on strategies to avoid this and create positive coping skills for the work we do, but it will be up to you to enact these.

Please tend to your other relationships in your life. Enjoy this process as one of the many experiences open to you all of the time. Your life is happening right now, it is not waiting for you for when you "finally finish school."

Top three Bonus tips

OK, here are just a few more:



1. Check your email

You **MUST** have an active email account, make sure that the Director of the program has the correct address, and **CHECK YOUR EMAIL REGULARLY**. Most, if not all, essential correspondence for the Clinical Program will occur by email. More than this, respond to emails in a timely and professional way. This is a crucial part of your professional development.

Please be sure you have a professional email identity like the one given to you by SJSU as a student or like `Jospeh.Student@email.com`. Be sure to make it one that has your name in it and one that is easily identified as a professional (not SPAM email).

2. Keep track of your clinical hours

Start as soon as you see clients, and do **NOT** get behind on logging the hours and getting signatures. You are building good habits now, and this is the very thing that will allow you to sit for licensure!

3. Stay on top of your client notes and ALL clinical paperwork

Not only is this required by the ethical principles, is essential for quality clinical practice, but it is mandatory for success in the program here at SJSU. Always, always, always stay on top of your note writing!



Policy on Academic Disqualification and Dismissal

The goal of the MS Clinical Program is to ensure that all graduates have minimal competencies to become practicing psychotherapist who are eligible for internships and licensure. **In order to demonstrate at least minimal competencies in the required skills MS Clinical Program graduate students must earn a grade of “B” or higher (or CR where no grades are assigned) in all of their courses.** In the event that a student does not achieve the criterion of “B” work in a required course, that student must consult immediately with the faculty to determine whether a plan can be developed that may provide opportunity for remediation. NOTE: There is no guarantee a plan can be formulated, and if one cannot, it will result in disqualification and dismissal from the graduate program. **Any student who receives a grade of “B-” or lower in a required course will be classified automatically as probationary in the MS Clinical Program; a second grade of “B-” or lower will be considered sufficient basis for disqualification and dismissal from the MS Clinical Program.** Students must take all courses that are required by the MS Clinical Program at San Jose State University.

Internship, fieldwork, or practicum experiences as evaluated by faculty members and internship supervisors must also reflect the MS Clinical Program student’s ability to meet program competencies. **Professional and interpersonal skills are essential determinants of success in these settings. Any MS Clinical Program student who receives a grade of No Credit (“NC”) in a required fieldwork or internship course will be dismissed from the MS Clinical Program following a review of the circumstances surrounding the No Credit grade by Program Director of the MS Clinical Program and/or members of the MS Clinical Program Committee.** Psychology fieldwork cannot be repeated for a changed grade. Requirements for earning credit are discussed in the syllabus of each course, including the fieldwork course. Professionalism while on internship is required to earn a credit for each semester. Failing to show up for client sessions, writing assessment reports and progress notes that are complete and submitted on time are required to earn credit for the fieldwork

course. Failing to maintain this level of professionalism will result in receiving a grade of No Credit for the fieldwork course and will be grounds for dismissal from the program.

The program strongly encourages and attempts to develop the professional and interpersonal maturity of all students. **The MS Clinical Program faculty evaluates student professional and interpersonal maturity throughout the program with both formal and informal reviews.** Only students who have demonstrated a high level of professional and personal integrity consistent with the role of a psychotherapist will be permitted to continue in the program and to graduate. **Students who fail to demonstrate professional and personal responsibility (as evidenced by violations of professional conduct, interpersonal trust, or ethical practice) are subject to termination as a graduate student of the MS Clinical Program at SJSU.**

In addition, please note that failing either the first or second year comprehensive exam will result in dismissal from the program. These policies are discussed in detail in the context of the purpose and procedures of these exams below.



Contract for success

This is a contract you we ask you to sign at the beginning of your training to help establish and affirm your goals while a graduate student in the MS Clinical Program here at SJSU.

I _____ am here at San Jose State University to become the best clinician I can be. I understand that at a minimum this includes developing my understanding of clinical theory, the use of appropriate assessments in treatment, and sound comprehension of the empirical literature as it relates to clinical practice.

I agree to engage in my learning with the highest degree of professionalism and ethics.

I agree to discuss any problem with the person I am having struggle. This includes fellow students, supervisors, colleagues, faculty members, and the Director of the Clinical Program. If I cannot resolve the problem, I will go to another faculty or the Director of the Program for assistance after I have tried to resolve the problem. I will utilize help and support in this process, but I will not allow the problem to fester or to escalate. I will not engage my fellow students, colleagues, or faculty in such a way as to create factions. I understand that acting professionally is part of my evaluation as a graduate student in this program.

I agree that my performance will be evaluated regularly. Evaluations will include (but may not be limited to) my performance in coursework, in fieldwork, the comprehensive examinations, my professional and ethical behavior, and yearly evaluations by the faculty.

I agree to act in accordance with the rules of professional and ethical conduct as outlined by the California Association of Marriage Family Therapists (CAMFT).

Student signature _____ date _____



The MS Clinical Faculty

Dr. Glenn Callaghan

Dr. Callaghan conducts research on the assessment and delivery of psychotherapy for body image disturbance, depression, and personality disorders. His research also focuses on interpersonal relationship factors in psychotherapy, and idiographic assessment and classification systems. He conducts therapy and supervision from a functional contextual and behavioral perspective.

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Dr. Matthew Capriotti

Dr. Capriotti's research aims to harness the power of behavioral principles to reduce human suffering. One major line of his work focuses on developing, testing, and disseminating evidence-based interventions for young people with obsessive-compulsive spectrum disorders (e.g., chronic tic disorders and trichotillomania (hair-pulling disorder) and attention-deficit/hyperactivity disorder (ADHD)). He also pursues research aimed at identifying and resolving health and healthcare disparities faced by young people who are sexual and gender minorities (e.g., lesbian, gay, bisexual, transgender, and queer people). Dr. Capriotti conducts therapy and supervision from a behavioral perspective.

Phone: (408) 924-5600 Email: Matthew.Capriotti@sjsu.edu

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Dr. Jennifer Gregg

Dr. Gregg's research interests are in avoidance coping, chronic health conditions, PTSD, and primary care. She is specialist in conducting and training Acceptance and Commitment Therapy. Dr. Gregg conducts therapy and supervision from an existential and behavioral perspective.

Phone: (408) 924-5610 Email: Jennifer.Gregg@sjsu.edu

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Dr. Elena Klaw

Dr. Klaw's research interests are in clinical and community psychology, mentoring, gender roles, relationship violence, and adolescent development. She conducts supervision from a feminist, psychodynamic, and community perspective with adolescents, adults, and couples.

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Dr. Annabel Prins

Dr. Prins' research interests are in Post-Traumatic Stress Disorder, the prevention of PTSD, clinical training, and program evaluation. She conducts therapy and supervision from a foundation of empirically supported therapies for a variety of problems with children, adults and couples.

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Dr. Erin Woodhead

Dr. Woodhead's research interests include health care decision making among older adults, interventions to facilitate mental health treatment among older adults, and increasing aging content in undergraduate and graduate psychology curricula.

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Overview of the program

Program requirements

This 60 semester-unit graduate level program in applied psychology is designed to provide students with adequate theoretical and practical training to prepare them to work in a variety of counseling and mental health settings. The program centers around a required core of academic coursework that meets the educational requirements for the California State Marriage and Family Therapist (MFT) license. This coursework, together with 3,000 hours of acceptable supervised experience, is required to take the MFT or LPCC state licensing examinations. Note that the MFT and LPCC have different requirements and allow hours to count differently. In addition, these requirements are subject to change by the Board and often do. Each student is expected to stay up-to-date on these requirements and a lot of these requirements are in the process of changing.

Remember, that if you are interested in the LPCC, you will need to take a Career Counseling course. You can take this before or after graduation per BBS regulations. **It is not part of the 60 units required by the program, and you will need to petition for enrolling in extra units.** That form can be found on the Graduate Studies webpage (<http://www.sjsu.edu/gape/forms/>). At SJSU this **Career Counseling course is found in EDCO 266**, Education and Career Planning (3 units).

Course requirements

You must satisfactorily complete a total of 60 semester units in this program and must also demonstrate the practical skills, professionalism, emotional maturity, and ethical practices required for the profession.

Earning a grade of B or better is required in all clinical program courses that are graded. All credit/no credit courses must be passed with credit. Students must maintain a cumulative GPA of 3.0 or higher to remain in the program. Again, in terms of ethical practices, it is expected that each student will adhere to the strictest interpretation of the ethical guidelines and codes of the California Association of Marriage and Family Therapists.

This following core of graduate courses is required of all students.

Graduate Curriculum

60 units required per BBS requirements

[Does NOT include EDCO 266 for LPC track- that is NOT part of your curriculum]

PSYC 203A	Clinical Assessment	3 units
PSYC 208	Family Assessment and Intervention Techniques	3 units
PSYC 209	Seminar in the Modern Family	3 units
PSYC 210	Advanced Adult Psychopathology	3 units
PSYC 211	Advanced Child Psychopathology	3 units
PSYC 212	Life Span Development	3 units
PSYC 222	Gender and Ethnic Issues in Counseling and Therapy	3 units
PSYC 224A, B	Clinical Psychology Practicum	6 units
PSYC 225	Group Counseling	3 units
PSYC 226	Addictions Treatment	3 units
PSYC 228	Professional Ethics for Psychologists	3 units
PSYC 232	Clinical Psychopharmacology	3 units
PSYC 243	Fieldwork	6 units
PSYC 258	Methods of Psychotherapy/Counseling Procedures	3 units
PSYC 260	Crisis/Trauma Counseling	3 units
PSYC 291	Methods and Design for Applied Research	3 units
PSYC 298	Masters Project	6 units



Course sequence

Required sequence of coursework

Currently, we only accept applicants for full time study in the program. All students will complete a fieldwork placement, designed to provide the student with the **minimum** pre-degree practicum hours required for licensure. (Post-degree hours for licensure are acquired after the completion of the program). The full time track takes two years to complete all of the degree requirements. This full time track requires students to enroll in 5 courses per semester, and these courses are taken in a set sequence. The advantage to the full time track lies with the ability to finish the program in two years.

Although we only offer a full-time track, circumstances may change for a student, and he or she may be unable to complete the program in a timely manner. In this case, a student may petition to go part-time. The Clinical Committee will decide this petition on a case-by-case basis.

Class attendance is mandatory. See the Policy on Attending Classes below.

**Required Sequence of Courses for
MS in Clinical Psychology Leading to MFT or LPCC Licensure**

First Year		
Fall Semester		
PSYC 203A	Clinical Assessment	3 units
PSYC 211	Advanced Child Psychopathology	3 units
PSYC 222	Ethnic and Gender Issues in Counseling and Psychotherapy	3 units
PSYC 228	Professional Ethics for Psychologists	3 units
PSYC 258	Methods of Psychotherapy/Counseling Procedures	3 units
		Total: 15 units
Spring Semester		
PSYC 209	Modern Family	3 units
PSYC 210	Advanced Adult Psychopathology	3 units
PSYC 212	Life Span Development	3 units
PSYC 225	Group counseling	3 units
PSYC 232	Clinical Psychopharmacology	3 units
		Total: 15 units
Second Year		
Fall Semester		
PSYC 224A	Clinical Psychology Practicum I	3 units
PSYC 243	Field Work	3 units
PSYC 260	Crisis/Trauma counseling	3 units
PSYC 226	Addictions Treatment	3 units
PSYC 298	Masters project	3 units
		Total: 15 units
Spring Semester		
PSYC 208	Family Therapy (Family and Couples)	3 units
PSYC 224B	Clinical Psychology Practicum II	3 units
PSYC 243	Field Work	3 units
PSYC 291	Methods & Design for Applied Research	3 units
PSYC 298	Masters project	3 units
		Total: 15 units
60 units required		TOTAL: 60 units



Policy Regarding Missing Classes in the MS Clinical Program

It is the policy of the MS Clinical program that graduate students are required to attend all classes as scheduled.

Illness and health issues

Given this policy, it is understandable that students may miss one class meeting during the semester for unanticipated reasons including illness, family emergencies, or other health related issues. Students are expected to contact the course instructor before missing the class, and when that is not possible to contact the instructor as soon as possible.

Incomplete or missing coursework will be arranged with completion dates if this is possible. Not all missing coursework may be able to be completed if a class is missed.

Internship demands

Faculty members in the MS Clinical Program appreciate the challenges faced by students on internship trying to balance the schedule set by the graduate program and that set by the agency. Sometimes these schedules conflict, particularly around trainings that occur early in the semester.

Overall, it remains the policy of the program that students must prioritize course attendance and MS Clinical program obligations above schedules set by agencies. Course times cannot be changed to accommodate agency scheduling.

Typically, students and agencies work these issues out without a problem. Often agency supervision times can be adjusted, and when they cannot, students can be reassigned to another supervisor.

In many cases, students can miss one class per semester for training with the prior approval of the instructor before the class is missed and before the student commits to missing that day of class. It is rarely the case that students can miss more than one class for agency related trainings, as that represents a substantial absence from the curriculum for that semester.

Outside employment

Outside employment does not constitute an acceptable reason to miss classes while a graduate student in the MS Clinical program. Class work missed when absent for this reason may not be able to be made up (subject to instructor discretion).

Program response to missing several classes

Missing more than one class in a semester can make it difficult to successfully pass a graduate level course. When students miss more than one class, the instructor will discuss this with the student and may bring the issue to the Clinical Committee for discussion and further action depending on the number or absences, the content missed, and the reasons for missing class.

Please note that your PSYC 243 (fieldwork), PSYC 224 (consultation) meetings count as classes. Missing more than one of those meetings can result in failing the course and dismissal from the program.



Program Learning Outcomes and University Learning Goals

List of MS Clinical Program Learning Outcomes (PLOs)

1. Interventions and evidence-based applications
 - 1.1 Students will demonstrate breadth of knowledge of a variety of psychotherapy theories and in-depth knowledge of one chosen theory of intervention
 - 1.2 Students will demonstrate knowledge of empirically supported clinical interventions and evidence ability to select treatments for individual clients given this literature
2. Communication and case presentation
 - 2.1 Students will demonstrate effective integration and communication of clinical case material
 - 2.2 Students will demonstrate the ability to synthesize contextual and cultural variables into presentations of client materials
 - 2.3 Students will effectively respond to queries about clinical material and engage in discussions about their clients with supervisors and peers
 - 2.4 Students will be able to think about and discuss cases other than their own, applying theories, principles, and relevant empirical findings to those cases
3. Competent Assessment and Evaluation
 - 3.1 Students will demonstrate understanding of different assessment devices and strategies for assessing client outcome over the course of treatment including standardized nomothetic and idiographic approaches
4. Professional clinical practice
 - 4.1 Students will demonstrate depth and breadth of understanding in areas including, but not limited to, psychotherapy theory, service delivery, ethics, assessment,

research methods, family/couples therapy, cultural diversity, psychopharmacology, and issues relevant to adult and child clinical populations. Students will be able to apply this knowledge to clinical cases

5. Preparation and meeting professional licensing requirements
 - 5.1 Students will demonstrate fulfillment of coursework and other pre-degree licensing requirements outlined by the Board of Behavioral Sciences

Map of PLOs to University Learning Goals (ULGs)

<p>ULG 1 – Specialized Knowledge PLO 1: Interventions and evidence-based applications</p>
<p>ULG 2 – Broad Integrative Knowledge PLO 2: Communication and Case presentation</p>
<p>ULG 3 – Intellectual Skills PLO 1: Interventions and evidence-based applications PLO 2: Communication and Case presentation PLO 3: Competent Assessment and Evaluation</p>
<p>ULG 4 – Applied Knowledge PLO 1: Interventions and evidence-based applications PLO 2: Communication and Case presentation PLO 3: Competent Assessment and Evaluation PLO 4: Professional clinical practice</p>
<p>ULG 5 – Social and Global Responsibilities PLO 4: Professional clinical practice PLO 5: Preparation and meeting professional licensing requirements</p>

Alignment-Matrix of PLOs to Courses

PLO 1. Interventions and evidence-based applications

- 1.1 Students will demonstrate breadth of knowledge of a variety of psychotherapy theories and in-depth knowledge of one chosen theory of intervention
 - 1st and 2nd year comprehensive exams (PSYC 298 in second year)
 - PSYC 210, 211, 258, 243, 226, 260, 224A, B

- 1.2 Students will demonstrate knowledge of empirically supported clinical interventions and evidence ability to select treatments for individual clients given this literature
- 1st and 2nd year comprehensive exams (PSYC 298 in second year)
 - PSYC 243 Fieldwork evaluation
 - PSYC 203A, 210, 211, 258, 208, 225, 226, 232, 260, 291

PLO 2. Communication and Case presentation

- 2.1 Students will demonstrate effective integration and communication of clinical case material
- 1st and 2nd year comprehensive exams (PSYC 298 in second year)
 - PSYC 203A, 210, 211
- 2.2 Students will demonstrate the ability to synthesize contextual and cultural variables into presentations of client materials
- 1st and 2nd year comprehensive exams (PSYC 298 in second year)
 - PSYC 203A, 210, 211, 222, 212, 208, 209
- 2.3 Students will effectively respond to queries about clinical material and engage in discussions about their clients with supervisors and peers
- All courses require student engagement around clinical material, specifically, the following focus on client and supervisor discussions:
 - PSYC 224A,B, 243, 298 (2nd year comprehensive exams)
- 2.4 Students will be able to think about and discuss cases other than their own, applying theories, principles, and relevant empirical findings to those cases
- PSYC 243 Fieldwork
 - PSYC 224 A B Practicum
 - 2nd year comp (oral)
 - Course presentations in PSYC 203A, 208, 209, 211, 210, 211, 212, 222, 225, 228, 260, 226

PLO 3. Competent Assessment and Evaluation

- 3.1 Students will demonstrate understanding of different assessment devices and strategies for assessing client outcome over the course of treatment including standardized nomothetic and idiographic approaches
- PSYC 243 Fieldwork
 - PSYC 224 A, B Practicum
 - PSYC 298 2nd year comprehensive exam (oral)

- PSYC 210, 211, 258, 291, 228, 260, 226

PLO 4. Professional clinical practice

4.1 Students will demonstrate depth and breadth of understanding in areas including, but not limited to, psychotherapy theory, service delivery, ethics, assessment, research methods, family/couple therapy, cultural diversity, psychopharmacology, and issues relevant to adult and child clinical populations.

Students will be able to apply this knowledge to clinical cases

- PSYC 243 Fieldwork
- PSYC 224 A, B Practicum
- 1st year comprehensive exams
- PSYC 298 2nd year comp (oral)
- PSYC 228, 208, 203A,B, 212, 222, 225, 260, 291

PLO 5. Preparation and meeting professional licensing requirements

5.1 Students will demonstrate fulfillment of coursework and other pre-degree licensing requirements outlined by the Board of Behavioral Sciences

- All courses have created License Learning Objectives (LLOs) to map the course objectives to the licensing requirements set by the Board of Behavioral Sciences (BBS) in California
- MS Clinical committee reviews student preparation and professionalism each year
- This is indexed by satisfactory completion of all courses and fieldwork evaluations
- This is required by satisfactory performance on performance 1st and 2nd year comprehensive exams (PSYC 298 in second year)
- The program assesses this with post-graduation licensing examination pass rates



Registering for classes

Determining your Courses



Your required courses were listed section 8. The actual times that these classes will occur will be listed in the *Schedule of Classes* put out each semester by the University. These schedules are typically available on-line through <http://MySjsu.edu>. The Director of the Program will try to have the next semester's schedule (time of classes) available before it is published by the university. Typically, however, the days and times of the courses are out of the instructor's (and the Director's) control.

Remember that all of the courses you take while a graduate student have top priority in your scheduling. This includes fieldwork placement meetings, outside work, personal appointments, and so on. It is neither acceptable nor professional to ask a faculty member to schedule an event (e.g., a test) or a class meeting time around your needs. If you have time conflicts, do approach the faculty member and explain your situation. Do not demand a change, but do have a conversation about the conflict. A solution will likely present itself if you do approach the problem this way.

Getting the add codes

You will need add codes for many if not all of the MS Clinical courses you take as a graduate student. You can get these by requesting them from the instructor of that class. He or she will give you the codes for each of your classes. These are the add codes you will enter using the on-line registration.

Using on-line registration

In order to register for classes you will need to use SJSU's on-line registration system available at <http://my.sjsu.edu>. To use this system you will need a user ID and password that are sent to you by Admissions. Go to the website for questions and answers in this process.



Comprehensive exams

All MS clinical graduate students are required to satisfactorily complete two comprehensive examinations covering the required courses and training. The first of these exams is given toward the end of the first year. The second occurs toward the end of your second year.

The first exam applies knowledge of case conceptualization, diagnosing, and treatment planning to case vignettes. The second exam is based on an extensive case conceptualization paper with an oral presentation and defense of a client the student has treated during the course of their training at SJSU.

Please note that the guidelines provided here are for the comps at the time of this printing. *These guidelines CAN and DO change.* The Program Director will provide the guidelines for the year you take the exams.

Purposes of the comps

The purposes of the comprehensive examination process are (1) to identify and potentially ameliorate core deficiencies in student knowledge and application of clinical skills; and (2) to enable students to evidence applied knowledge in a variety of ways that allow them to continue their graduate studies and continue on to and complete their fieldwork training. These are cumulative examinations, and each student's performance is required to meet minimal competency as defined below.

Students who fail either comprehensive examination are normally granted one additional opportunity to pass during a re-test condition. **Failure to pass either first or second year comprehensive examinations by the second attempt will result in dismissal from the graduate program.**

Comprehensive exams (comps) are difficult. These are opportunities for students to demonstrate their knowledge gained at each point of evaluation in the program. These are valuable assessment points during your training. Cramming for these exams is not advised, as the material covered in each exam spans all of what has been taught to that point in time.

Comps are *not* meant to be a nuisance or simply hurdles to overcome. They are *not* designed to eliminate students from the program. Comps are designed to allow a formal evaluation of progress prior to the student going to work in the community on their internship.

Faculty take this assessment very seriously, and we require students to do the same. Comps are difficult to prepare for, and we encourage students to begin preparing early. Form study groups; help each other through this process. For the first year comps: Practice, practice, practice! For the second year comps: Write, rewrite, edit, and rewrite again!

First year comps

NOTE: The first year comprehensive exams are typically modified each year in small ways. The following is provided (1) to give you an idea of what each section will look like, (2) to clearly provide the policy about passing the comps and the process of retakes, and (3) to provide a format of the questions for the comps, as they can be different than even “practice comps” given in classes.

In any event, you will be given the structure and guidelines for the first year comp exams well before the exams take place.

Here are the procedures, questions, and policies from the most recent cohort:

First year vignettes are typically given on two different days, with one case given each day lasting 3 hours each, beginning the first week after spring break of the second semester of the first year. Two brief cases will be provided in written format, 1 adult case and 1 child case. Students must complete answers for each case (one adult and one child vignette) on each day the case is given. Questions will incorporate material from courses taken during the Fall and (to the extent covered) Spring semesters. All comps are read and graded blindly to the identity of the student by faculty members. An indication of passing or failing the exams will be available within two weeks after the vignettes are completed. Specific numerical scores are not provided, but feedback about performance both overall and on specific sections is given to each student.

As described in the Guidelines below, students have two chances to pass each case. If a failing score is earned on the entire exam (less than 80%), the student will retake a new case under testing conditions. If the retake case is not passed, the student will be dismissed from the program. If a total score of more than 80% is earned, but a section or sections are failed, typically the student will rewrite those sections in out of testing conditions and does not have to sit for a second exam.

Exams are taken in a computer lab using keyboards and computers only. No additional resources (aside from a pencil, pen, and highlighter) are allowed in the room during the vignette comp exams. Using any outside resource (including the internet) will constitute cheating and will be grounds for immediate dismissal from the program.

These cases are similar to but often slightly more comprehensive than what students have completed in their coursework. The cases and questions are meant to be challenging, but they are not meant to trick a student in any way. Students are encouraged to ask faculty about these when they have concerns.

Vignette Guidelines

- There will be 2 cases provided, 1 adult and 1 child.
- Each case will be given on a different day.
- Students must complete answers for each adult and child case. Questions will incorporate material from courses taken during the first semester and, to the degree possible, the second semester.
- 3 hours will be allotted to complete each case vignettes on each day.
- Faculty will make every attempt to review and grade vignettes within two weeks after test administration.
- Faculty readers will be blind to the identity of each student's write-up being evaluated.
- One faculty reader will read one of the two cases, and a different faculty reader will read the other.
- Each question (section) on the exam must be passed with a minimum of 70%.
- A score of **80%** or greater is needed to pass the **entire vignette** as scored by a faculty member. That means that a score of less than 80% on *every* section will not pass the entire comp. One or two scores of 70% may pass provided the total comp exam score is above 80%.
- Specific scores are not provided to students. Feedback in the form of "Pass," "Provisional Pass," or "Fail" is provided to each vignette. The reader of each vignette will provide feedback to each student upon request of either the Program Director, the reader, or the student. Students will be notified of the identity of the reader(s) once all students have been made aware of their scores.
- If one or more questions (sections) score below 70%, but the entire vignette is passed (at above 80%), then that student will earn a "Provisional Pass." A "Provisional Pass" requires the student rewrite the particular failed section or sections (question or questions) out of test conditions. That rewrite is usually due within one week of discussion with the reader.

- If a total score of less than 80% occurs on a vignette (or both vignettes), then that vignette (or both vignettes) will be repeated in test conditions. If only one vignette is passed, but the other vignette is failed, only that failed vignette will need to be repeated in test conditions.
- If a vignette is failed or marginally passed (score of 78, 79, 80, or 81), a second faculty member will score the vignette. If there is a scoring discrepancy between the two faculty readers, with one score above 80% and one below, a third faculty reader will serve as the tiebreaker.
- One repeated administration is allowed should a student fail to meet the 80% for either child or adult vignette (or both).
- Upon repeat (retake) of a comprehensive exam, if the student fails either or both cases, the student will be dismissed from the program.

Vignette Questions

As of last year, here are the questions that are asked in the first year exam. These may change slightly year to year. If there are substantial changes (e.g., to the number or title of a section), you will be informed.

1. **Diagnosis [20 pts]**

- (a) Provide a primary diagnosis for the case.
- (b) Include your rationale for selecting this diagnosis using the information provided.
- (c) Include at least two relevant differential diagnoses and/or additional diagnoses, and why they were ruled out, deferred, or considered as a provisional co-morbid disorder.

2. **Ethics and Legal [20 pts]**

- (a) What ethical and legal considerations are associated with this case?
- (b) How would you address these in treatment?

3. **Testing Data and Assessment [20 pts]**

- (a) How do you interpret the assessment information provided, and how do the data inform your diagnosis and initial treatment plan?
- (b) What additional questions or information might you want to know for this case?
- (c) What additional nomothetic measures might you consider administering for this client?
- (d) What are two or three idiographic assessment questions you might generate for this client to track data and why would you choose those (i.e., what would the data tell you about the case)?
- (e) What other assessment methods (e.g., interviews, self-report, collateral report, direct observation) would you want to use and why?

4. Treatment Issues [20 pts]

- (a) What are the key therapeutic issues and what would you target first for treatment? Be sure to state why you have chosen these issues to prioritize.
- (b) Provide a few treatment goals and a corresponding initial treatment plan for this client.
- (c) What is/are the mechanism(s) of change you would target
- (d) How will you evaluate change in the mechanism (process) as well as progress, and outcome for this client?
- (e) Are there any psychopharmacological issues that you would want to address in this case?

5. Contextual Features [20 pts]

- (a) Discuss what contextual features you considered in this case in making the diagnosis and differentials. You can also describe what you would want to assess determine in this process.
 - a. Generate hypotheses about why contextual features may be important for this client with these problems and this diagnosis.
- (b) Discuss what contextual features you believe are important in this case in considering the ethical and legal issues that may be involved.
 - a. Describe what you would want to assess determine in this process.
 - b. Generate hypotheses about why contextual features may be important for this client with these problems and these ethical or legal issues.
- (c) Clearly discuss what contextual features you considered in this case in considering the assessment data you are interpreting.
- (d) Describe what contextual variables you would consider in choosing additional assessment approaches for this client including the hypotheses about why contextual features may be important for this client with these problems.
- (e) Discuss what contextual features you considered in this case in setting up this treatment approach for this client and generate hypotheses about why contextual features may be important for treating this client with these problems.

Second year comps

The Second Year Comp is completed in two phases. The first phase is the written portion, and the second is the oral portion. This is considered your master's project and is part of the letter sent to graduate studies verifying you have completed your graduate school culminating experience. In this way, it is your version of a masters' thesis, though our second year comp is called a "project" by SJSU.

You will write one practice of the second year comp in your consultation group in the Fall semester and the official second year comp in the Spring semester. You will discuss the comp and the progress you make in the consultation group you are assigned to (PSYC 224), and you receive units for the written product (and orals) by registering for the PSYC 298 course in the Fall and Spring semesters of your second year. The consultation group faculty member will discuss with each student the development of the comp, but the writing will be entirely the responsibility of the student.

You are expected to write a complete comp for the Fall semester, and you must complete a professional, thorough, complete comp to earn credit for the PSYC 298 units.

In the Spring semester your comp will be officially evaluated as part of your culminating experience. This **must** be a different case than the client you wrote about in the Fall semester of your second year for the practice comp. You must earn a grade of credit for this course to graduate from the clinical program and earn your master's degree.

The Written Portion

The written portion of the second year comp evidences your conceptualization, treatment development, and how you conducted professional and ethical therapy for a specific client you have seen in your training as a student in the MS program on your fieldwork placement.

To clarify, the purpose of the comp is to show your ability to conceptualize a case from within a theoretical perspective, to show how you employ evidence based practice (including using the literature and tracking data), to demonstrate ethical practice, to show an understanding and appreciation of contextual features including gender, ethnicity, and family variables, and to show how you made use of supervision. In the oral portion of the exam, the purpose is to show how you can respond to questions about your case based on your presentation including issues related to crisis management, ethical dilemmas, the use of supervision, and so on.

This must be a case you have **not** written about or received graded feedback in another context (including your practice comp in the Fall semester). It is (of course) acceptable to have discussed such cases in supervision and fieldwork.

You cannot self-plagiarize from work done for other classes. You must thoroughly reference all of your work from resources in the literature. Remember that plagiarism is only plagiarism (read as *unethical*) when you have turned in a paper and are claiming the content as yours. If you are not

sure what is acceptable and not acceptable, just ask before you turn in the assignment.

A second year comp should never contain more than a few lines of text about a theory in the absence of your client. Said more plainly, you do not write a theory section and then an application section (as may occur in some types of assignments for other courses). Instead, you will write about the theory in the context of *this* client. For example, do not provide a “book report” on cognitive therapy and then talk about your client from that perspective. You will write about your case as you understand *this* client with *these* problems from within *this* perspective. If you try to separate these two issues, client from theory, you will not be able to demonstrate your conceptualization skills in any real way.

Similarly, diagnosis and assessment as well as contextual variables (e.g., gender and ethnicity factors) and legal and ethical issues must be presented as they relate to this client with these problems. You are free to write about real applications of psychotherapy such as the use of cognitive-behavioral interventions (CBT), not “pure” cognitive or “pure” behavioral interventions. That said, be very careful about using eclectic interventions that do not allow you to show how you understand the mechanism of the problem and the mechanism of change as you approached this client with treatment.

General Guidelines

Formatting: Papers should be no more than 35 double spaced pages in length (excluding title page, figures, appendices, and references), and must be written in APA style, using a 12 pt font. Successful papers will not be less than 30 pages. Be certain to use the most current version of the APA Publication Manual. Include a cover sheet with title, name, student identification number, and date. Your student identification number should be on the top right corner of each page as a header. Your consultation group leader will let you know how to submit the final copy (electronic or hard copy); do not submit in any type of folder. Papers with more than 2-3 typographical (spelling) errors will be returned for rewriting. Having a paper returned is grounds for failing the first attempt of the comp, so please make use of grammar and spelling check programs and proofreaders.

Case Selection: The comp will be on a client you have seen for a reasonable period in a clinical setting. The case used cannot be one used in any other write-up. The case you choose for the final spring semester comp write-up cannot be the case you use for the practice comp write up in the Fall semester. The case should be an individual client whether in the context of individual therapy or a child or adolescent seen as part of family

treatment. The case should not be an individual seen in group therapy. You can choose a couple for the comp, but be certain to discuss this with your consultation group leader before beginning to write the comp. You should have seen the client for at least 6 to 8 sessions for this task.

Content Quality: The general purpose of this culminating experience project is to demonstrate your ability to write and defend a concise, yet comprehensive case study of a therapy client from a theoretical and professional perspective. Extensive reading, particularly in the theoretical orientation and discussion of contextual variables you choose to incorporate into diagnosis and treatment, will be necessary. You are encouraged to discuss general theoretical issues with faculty to enhance your level of understanding and to clarify your thinking process; however, specifics of your comprehensive exam write up will always be your own. You are encouraged to show your work to other students, solicit feedback, and discuss the case with them. Again, all writing must be yours.

Faculty may choose to give feedback on sections on the first semester write up as the student works on those sections. For the second semester comp (official culminating experience comp that is defended orally), students may discuss the write up process with faculty, but the faculty will not give feedback on any written section or the overall comp until it is turned in and evaluated.

Grading Procedures: Each written comprehensive will be read by your consultation group leader who helped develop the case. The same faculty member will serve as the student's oral examiner. A passing score of 80% on the case study is required to move to the oral exam (grading criteria are below). The student will be typically be notified whether he or she received a passing score within two weeks after receipt of their paper.

If the student receives a failing score, typically a second faculty reader of the exam will read the written exam. This is not required for the first failure and rewrite (second attempt) of the exam. If the student fails the rewrite (second attempt) of the exam, a second reader will be assigned to confirm the failure of the written portion. If the second reader determines that the **second attempt written portion is failed, the student will be disqualified from the program, will receive a no credit grade for PSYC 298 and cannot graduate from the program.**

Due Dates: The written comprehensives will typically be due on the Friday immediately following Spring Break. The Oral Examination will follow approximately 1-3 weeks after receipt of the written exam.

Content and Scoring of the Written Portion

The following outline is required to complete the comprehensive exam. While there is room for personal judgment as dictated by your specific case, keep in mind that a comp exam will, *at the very least*, cover each of the outlined areas. The sequencing of information should follow the format below. You should identify each section with a header, but you do not repeat the entire question as listed below.

Your instructor for your Consultation Team will be the primary grader of your comps. A second reader may be used for the comps under some circumstances.

- **Background (10 pts)**
 - Include reason for referral, client demographics/identifying information, description and history of presenting problem.
 - Do NOT include any true or actual identifying information of client, place of employment, etc.
- **Context (15 pts)**
 - Client's place in context of interpersonal and family dynamics
 - Role of gender, ethnicity, and culture for this client; socioeconomic factors
 - State how these contextual variables can impact the presenting problem and the course of treatment.
- **DSM-5 diagnosis, including differentials (15 pts)**
- **Assessment/Evaluative Data (20 pts)**
 - Include data taken at intake and assessment sessions.
 - Include standardized or nomothetic AND idiographic devices used to assess problem severity and track treatment progress; illustrate with graphs/tables in appendix
 - Be sure to identify the rationale behind the selection of your measures.
 - Figures/graphs do not count in 35-page limit
- **Theoretical Formulation (50 pts)**
 - Describe and discuss your theoretical orientation in terms of what it says about mental health in the context of this client and the identified problems he or she has. You may have a few statements that are more generic (i.e., why are some people healthy and others not? What leads to dysfunction?), but you really need to focus on the application of statements of the mechanism of the problem (theoretical origin of that type of

- psychological distress) and the mechanism(s) of change in the context of this client with these problems. (20 pts)
 - State how contextual features of this case are part of your conceptualization of the problems and treatment for this client. (10 pts)
 - Identify and interpret relevant literature, including treatment outcome studies that support your approach to this case. (10 pts).
 - How would an *alternative* theoretical conceptualization of this client prove useful in your understanding or treatment? Briefly provide an example of a case formulation for this client using another theory (10 pts).

- **Describe the *process* and *progress* of treatment** (20 pts)
 - This section should include discussions of change in process and progress measures used for this case. Identify how the client changed towards the outcome goals (progress) and how you can show the client changed due to your proposed mechanism of action (process).
 - This includes what you did when components of your treatment plan did not prove effective (what modifications did you make based on theory) as well as how treatment progressed (e.g., how things went)

- **Legal and Ethical Issues** (20 pts)
 - What specific legal or ethical issues did you encounter or would you anticipate? Discuss solutions.

- **Supervision** (10 pts.)
 - Address how supervision contributed to the development and treatment of this case.
 - e.g., How did you utilize supervision? What could have been done differently with supervision?

- **Doing Things Differently** (10 pts.)
 - Describe how you might approach therapy differently now that you have done some or all of the therapy.

- **Personal Issues** (10 pts.)
 - Describe and address any personal issues raised while treating this client.
 - Address any "mistakes" you made and what you were able to learn from them.

- **Writing and References** (20 pts.)

- Writing style, grammar, spelling, and professionalism will be evaluated.
- Reference all materials used and be able to present this material if requested by a reader.
- APA style **must be used** for all in-text references as well as in the reference list.
- All references in the text must be cross-checked for being in the reference section and vice-versa.

Total Points: 200

Criteria for passing:

- All sections above must be scored at 70% or better.
- Overall score must meet or exceed 80%

The Oral Portion of the Exam

If and when students pass the minimum criteria for the written portion of the second year comp, then they will have an oral portion of the comp scheduled. The oral portion provides time for students to briefly present the same case that was described in the written portion, to interact with other students about each other's cases, and to field questions about their cases from faculty member examiners. Examiners will ask students questions about each case, initially about their own, then about other students who are also being examined that day. These questions may be to clarify what was written, to amplify specific features of the case, or to pose questions about hypothetical scenarios. The following are general guidelines for oral portion of the second year comp.

Typically two to three hours will be allotted for the oral examination, including time for feedback. Students will be notified of their pass/fail status prior to leaving the oral exam and will be given feedback on their performance.

Two faculty will serve as oral examiners. One will be your Consultation Team leader and the other will be a different faculty member. The identity of the second faculty member will not be known until after the written exam has been turned in. You should write the comp as if the entire faculty were reading it.

The second examiner will not typically pass or fail the written portion, your Consultation Team leader will primarily perform that task. Again, under some circumstances a second reader may be brought in to grade the written portion.

A passing evaluation is needed on the oral examination by both faculty members to qualify for graduation.

It is important to remember that you are writing to more than one audience when you complete the written portion of your comp exam. Certainly, your consultation group leader is one audience, but your second faculty oral examiner will also be an audience member. You will not know who this person is in advance, so your writing needs to address program goals and objective and should not be tailored to one specific to one reader.

Evaluation of the Oral Portion

1. The oral examinations will typically be conducted in group format.
2. Between two and three hours are typically allotted for the student orals for the whole group including time for feedback.
3. The faculty oral examiners will have read and evaluated the written portion.
4. The format of the oral exam will be similar to that of a case conference or case presentation to colleagues. Students will be expected to show depth of coverage, breadth of knowledge, professionalism, understanding of ethical issues, all no obvious omissions, errors, or gross dysfluencies.
5. Criteria/Areas of Feedback.
 - a. Organization and coherence
 - b. Demonstration of maturity and non-defensiveness in case presentation including an ability to see strengths and weaknesses of how the case was conceptualized, an ability to generate alternative approaches and the strengths and weaknesses of doing so.
 - c. Demonstrate insight into any additional training that would be helpful.
 - d. Ability to answer specific questions about the case including ethical and professional questions.
6. General feedback and a pass or fail grade will be provided to student by the end of their examination hour(s).
7. Questions will be asked of (1) students' own cases and (2) other students' cases. Therefore, each student will be required to read each other's case papers before coming to the oral presentation meeting. The evaluation will be based on each students' answers about their own case write ups as well as about others' cases.
8. The Oral Exam will take place approximately 1-3 weeks after submission of the written portion of the second year comps.
9. If the oral portion is evaluated as not passing (a fail), a second faculty evaluator may be called in to sit in the oral exam second administration with the original oral examiner.

10. If the student fails the second oral administration, he or she will be disqualified from the program, will receive a no credit grade for PSYC 298, and will not graduate from the program.



Writing and speaking in English

Writing in English is an essential aspect of graduate training in clinical psychology. These skills are used daily by professionals in the field. It is essential that graduate students in the program possess adequate proficiency in graduate level writing. Much of our work as clinical psychologists is done in writing and presenting written reports.

According to University policy, all classified graduate students will be required to demonstrate their competency with regard to writing skills as a requirement for the awarding of the Master's degree (referred to as Graduate Writing Assessment Requirement or GWAR). This requirement will be satisfied in the MS Clinical Psychology program through the successful completion of Psychology 203A.

For those students not yet comfortable with their skills in written (or spoken) English, we strongly encourage you to seek additional assistance with your in writing and oral skills. The writing demands on graduate students are intense, and we want all of our students to have a successful experience in the program.

If any student is determined to have insufficient writing or oral skills, he or she may be required to take additional coursework in psychology or in other departments on campus to improve these skills.

Our assumption is not that you will necessarily go on to a career in research and writing for publication. However, part of evidence based practice is writing and referencing the literature. You are required to do this in the style set your field, psychology. Though it goes without saying, being fluent in spoken English is central to conducting effective psychotherapy with many populations.

To that end and in addition to requirements for writing in English, it is expected that all MS Clinical Psychology graduate students be sufficiently

proficient in the current edition of the *Publication Manual* by the American Psychological Association, the writing standard in the field of professional psychology. In the event that a student is not competent with this type of writing, he or she may be required to complete additional requirements set forth by the program.

SJSU Writing Center

The Writing Center now has two locations: Drop-in tutoring sessions are in Clark Hall, Suite 126. They regularly schedule tutoring sessions on the second floor in the MLK Library. All Writing Specialists have gone through a rigorous hiring process, and they are well trained to assist all students at all levels within all disciplines to become better writers. In addition to one-on-one tutoring services, the Writing Center also offers workshops every semester on a variety of writing topics. To make an appointment or to refer to the numerous online resources offered through the Writing Center, visit the [Writing Center website](http://www.sjsu.edu/writingcenter) at <http://www.sjsu.edu/writingcenter>.



Student insurance

Professional liability insurance is **required** before you begin seeing clients in the second year as part of your fieldwork experience. It usually takes 3-4 weeks to acquire insurance, so you should apply toward the end of your second semester in the program.



You **will be required** to show your supervisor a certificate of insurance prior to seeing any clients on fieldwork.

Below are some resources for obtaining insurance. The requirements for insurance vary depending on the carrier. Contact the individual carriers to determine rates and requirements.

Some possible carriers

CAMFT – offers student level insurance on their website



Getting involved

We strongly encourage you to join a professional organization. A student membership in one or more of the following professional organizations will provide you with important information necessary for professional development (i.e., updated licensing regulations, upcoming seminars, current issues in the field, literature review, etc.).

Each professional organization has local chapters and/or related affiliations, which may closely relate to your area of specialization; they will provide a list when you request an application.

California Association of Marriage and Family Therapists (CAMFT)
3465 Camino del Rio South, Suite 350
San Diego, CA. 92108
(619) 280-0505
www.camft.org (membership application available online)

[Local Chapters of CAMFT: You must first join at the state level before joining the local chapter]

American Psychological Association (APA)
Membership Records
1200 17th Street NW
Washington, D.C. 20036
www.apa.org



Counting hours of experience



Please note that the BBS is continually re-evaluating how hours count and in which categories. It behooves the MS Clinical student to stay abreast of these requirements by going on line to their webpage. The *MS Clinical Psychology Fieldwork Packet* provided to SJSU's MS Clinical graduate students will have more details on all of this.

You should also be aware that the LPCC and MFT licensing requirements are very different with respect to the number of and type of hours that count toward pre-degree requirements and toward application to licensure. Pre-degree hours required for the MFT do count toward the 3000 required hours. However, pre-degree hours required for the LPCC do NOT count toward that 3000. There are more hours required of the LPCC student (pre-degree) as well.

There are specific forms for each of the two paths, LPCC and MFT. These must be completed and tracked in order to apply to either or both licenses. You cannot use MFT forms for your LPCC application for licensure. While you can use hours gained for both, you cannot use the same forms.

Finally, please note as discussed below that you cannot count hours until you are enrolled and have begun PSYC 243 in the Fall semester. You can go to trainings and do some other non-therapy tasks before the classes begin at SJSU (i.e., the official start of the semester) but you cannot count clinical therapy hours until then.



Fieldwork/pre-degree internship

The MS Clinical Psychology degree requires a minimum of 6 units of fieldwork/pre-degree internship experience (as of 2018, the fieldwork experience was renamed an internship). All first year comps must be passed and coursework must be completed with a minimum GPA of 3.0 before starting external fieldwork/internship placements. Additionally, faculty evaluations of student progress in the program must be deemed satisfactory. This allows some assurance that students are ready for more independent work in the community.

Accrual of licensing hours earned through community placements cannot begin until you are enrolled in the Fieldwork seminar. In other words, **you may not begin your fieldwork placement and receive licensing hours or credit for Psychology 243 until the Fall semester begins of your second year.** This is a legal requirement set by the BBS and supported by SJSU. The licensing board does not allow you to begin this process in the summer.

When you go on internship is determined by courses taken more than the semester or year. If you modify your program of study, then this will change when you can go on fieldwork.

The ***SJSU MS in Clinical Psychology Fieldwork Packet*** has much of the information below and in much more detail. It covers both the MFT and LPCC hours requirements and necessary work towards licensing.



Employment at an agency while being a pre-degree intern. Your fieldwork placement (sometimes called an unofficially referred to as an internship) is attached to your coursework at SJSU and is performed for course credit. While some fieldwork placements have stipends or other financial awards attached to them, students, as trainees, are **not** considered employees of the agency where they have their fieldwork placement.

Although students are sometimes offered employment while they are trainees (sometimes in the first semester of their placement), the clinical faculty have observed that students who become employed while on placement can have serious challenges with completing the program. This is due largely to the number of client hours and other demands placed on the employee versus those limited by the status of trainee.

We strongly encourage any student considering becoming an employee while pre-degree as a trainee speak with the director of the program before agreeing to that contract.

The clinical faculty understand the importance and value of being paid for one's services, but the increase in workload can sometimes make it impossible for students to complete program requirements and graduate from the program.

Above all, we want students to succeed in the program, to become well trained clinicians, and to complete all program requirements to successfully graduate.

Course requirements

You enroll in two courses attached to your fieldwork placement. The first is PSYC 243, and you earn course credit for completing the fieldwork experience. The second course is PSYC 224A/B, where you engage in small group consultation about cases with SJSU clinical faculty members to help develop your case conceptualization skills and professional development.

There is no fully standardized method of teaching the course connected to the consultation you receive with clinical faculty (PSYC 224A/B). Students register for PSYC 224A and 224B to earn course credit for these meetings. During the course, students are able to discuss questions or problems in their placements, as well as present on treatments and cases. If you have any questions regarding fieldwork, please contact the current instructor of fieldwork or the Director.

MFT requirements

Students are required to complete a *minimum* of 12 hours per week at their placement when registered for 3 units. For the MFT, students must have a maximum of 5 contact hours per 1 unit registered. This means, the student should have no more than 15 client hours per week for a 3 unit course.



The Board of Behavioral Sciences requires that students accrue a minimum of 150 hours of face-to-face counseling experience during the practicum experience (before graduation), a requirement that is typically met without difficulty in the normal course of the program. In addition, there are 75 required hours engaged in client-centered advocacy or face-to-face experience counseling individuals, couples, families, or groups.

Note that the total pre degree hours for MFTs is 225. 75 hours can be client-centered advocacy (CCA), but the other 150 hours must be face-to-face hours (individuals, couples, families, groups). If you have 225 hours face to face, that is great. If it is less, you can fill it with CCA, as long as you have the 150-hour minimum.

Note, that as far as can be determined, supervisors may sign off on CCA at their discretion. This means, they may or may not endorse these hours. They **MUST** be signed off if required to meet the 225 hour pre-degree minimum to graduate (because the student intern meets the 150 face-to-face hours but not the total of 225).

The BBS definition of CCA and the requirement for pre-degree hours from the BBS website: *What is client centered advocacy (CCA)?* States that

CCA is defined in Business and Professions Code (BPC) Section 4980.34(h) as including, but not limited to “researching, identifying, and accessing resources, or other activities, related to obtaining or providing services and supports for clients or groups of clients receiving psychotherapy or counseling services.” at http://www.bbs.ca.gov/pdf/publications/mft_sup-exp_changes_sb33_faq.pdf

Please note: The 150 face-to-face client contact hours are ACTUAL clients seen, not just scheduled.

Students should note that it is *likely* that their placement will require more hours than those required by the fieldwork class. You must honor your contract with the agency, even if it means exceeding hours required by the program. If you feel the demands by the agency are excessive, discuss this immediately with your consultation team faculty member or Director.

Extra hours will count toward licensing up to the limit set by the BBS.



Applicants for the MFT license may have no more than 750 pre-degree experience, and they must have at least 1,700 hours of post-degree experience. Applicants for the MFT license must have 3,000 total hours.

NOTE: If you do not have the requisite 150 face-to-face direct contact hours, you will **not be able to earn credit for PSYC 243 nor graduate until those hours are completed.** This may mean your degree is awarded in the Summer or in the next Fall semester. You cannot earn your degree until this 150-hour minimum is completed.

LPCC requirements

Note that for the LPCC a minimum of 280 supervised hours providing face-to-face clinical counseling of individuals, families or groups. Also note that none of these pre-degree hours count toward the 3000 required to sit for licensure.

Also keep in mind that you will need to take a Career Counseling course. At SJSU this is EDCO 266, Education and Career Planning (3 units).



Please note that the LPCC hours requirements are difficult to obtain in the two semesters that most students are on placement. To date, about half of those perusing the LPCC are able to complete the 280 face-to-face direct clinical contact client hours requirement before the Spring semester ends of the second year.

In the event that students wish to continue perusing the LPCC, the option is open to delay graduation until August of that summer following the second year. Students may still participate in commencement, but the student **MUST file a delay of graduate form with Graduate Studies**, and the Director will file the Culminating Experience Memo AFTER the hours have been completed.

As of now, there is no university requirement to register for a class over the summer if continuing to peruse those hours. However, if the student is still perusing hours in the following Fall semester, that student **MUST** register for the Fall semester (which would be the student's third year).

This decision process **MUST** be discussed with the Director of the Clinical Program. It is often easily done and completely fine, but it cannot be done without the Director's approval.

NOTE: If you do not have the requisite 280 face-to-face direct contact hours, **AND** you wish to continue to pursue the LPCC (which is completely optional), you will **not be able to earn credit for PSYC 243 nor graduate until those hours are completed.** This will mean your degree is awarded in the Summer

or in the next Fall semester. You cannot earn your degree until this 150-hour minimum is completed.

Choosing a placement

The fieldwork placement will be facilitated by the Clinical faculty member teaching fieldwork the coming Fall. This professor will help provide information and contacts with fieldwork placement sites and supervisors. The professor teaching fieldwork will also serve as a liaison between the student and the fieldwork supervisor. Be sure to speak to second year students, as they are out on placements and have a lot of knowledge to share!

Most placement application deadlines are in February and March. We recommend getting all necessary materials into agencies by the end of January or beginning of February. Most agencies appreciate a phone call of introduction during which they will provide basic information regarding the internship and ask you basic information regarding your experience and fieldwork preferences. They may request that a cover letter and resume be mailed to the intern director. After review of resumes, agencies will then contact applicants regarding the interview process.

Searching for a fieldwork placement can be a trying and time consuming process, which requires forethought about career goals and current capabilities. Students are urged to pursue placements that will allow them to acquire a broad range of experiences. Specialization is best accomplished during the more advanced stages of training. In deciding on a placement, it is important to obtain answers to the following questions:

- What kind of supervision am I guaranteed?
- With whom would I be working as a supervisor?
- What is the orientation to therapy?
- What is the length of the commitment? Hours per week?
- What responsibilities are included in a typical week?
- What are the in-service training opportunities?
- Will I be allowed to participate in staff meetings?
- How are interns treated?
- Who does the agency service (clients)?
- Is there a current intern I can talk to?
- Are interns involved in doing intakes?
- Does this match with my professional goals?

The program requires that each placement must, at a minimum, provide the following:

- a. A supervisor who has been licensed for the required number of years set by the BBS.
- b. A minimum of one hour of individual supervision each week per five client hours. Group supervision is adjunctive and cannot take the place of individual supervision. While completing pre-degree hours, you will be classified as a trainee (see section V). (Note: Interns must have an average of one hour of supervision or two hours of group supervision, as long as the group is made up of eight or fewer individuals.) The BBS requires that an applicant for licensure must have received one hour of individual supervision per week for at least 52 weeks of training as either a trainee and/or intern.
- c. A supervisor is on site or readily available at all times.
- d. A broad range of clinical experiences is provided.



NOTE: You **MUST** file your **Fieldwork Contract** with the Program Director after consulting with the Fieldwork coordinator (professor teaching the fieldwork course) before you formally accept an offer with a fieldwork agency. Failure to do so may result in you having to decline their offer. This can and will damage your and the Program's relationship with the agency. Please do not do this.



The following BBS forms must be completed as you accrue client hours on your Fieldwork placement:

- **Responsibility Statement for Supervisors**
- **MFT experience Verification**
- **Weekly Summary of Hours of experience**

These forms are included in the Appendix and may be downloaded from the BBS website at: www.bbs.ca.gov. Specifically, go to <http://www.bbs.ca.gov/bbsforms.htm>

FAQs about Fieldwork

Note that this is a brief overview. For all the FAQs from the BBS go to: <http://www.bbs.ca.gov/lic-reg8.htm>

What kind of site counts for training?

You may work in any agency that provides the minimum contact and minimum supervision set by both the MS Clinical Program and the BBS. Experience must have breadth and cannot consist of only one type of service provision (e.g., substance abuse counseling).

Trainees may **NOT** work in a private practice.

The health facility must be licensed as defined in sections 1250, 1250.2, 1250.3, 1502, 1760.2 and 11834.02 of the Health and Safety Code.

How many hours per week are required for the placement?

You need 150 face to face hours. This translates to an average number of AVERAGE direct contact hours of 6 contact hours per week for 30 weeks (15 in each semester).

For students who enroll in a qualifying degree program on or after January 1, 1995, the practicum shall include a minimum of 150 hours of face-to-face experience counseling individuals, couples, families, or groups.

How many hours per week are required for supervision?

As a trainee (fieldwork student) you must be able to show at least one hour of individual supervision or two hours of group supervision for every five hours of direct client counseling (this includes telephone counseling).

(1) During each week in which experience is claimed and for each work setting in which experience is gained, an applicant shall have at least one (1) hour of one-on-one, individual, face-to-face supervisor contact or two (2) hours of face-to-face supervisor contact in a group of not more than eight (8) persons receiving supervision. No more than five (5) hours of supervision, whether individual or group, shall be credited during any single week.

Who can be a supervisor?

Requirements of supervision: Licensed MFT or Ph.D. Clinical or Counseling Psychologist seeing 5 clients per week

You may be supervised by a person licensed for at least two years in California as a marriage, family and child counselor, clinical social worker, psychologist or physician who is certified in psychiatry by the American Board of Psychiatry and Neurology. Please note that the physician must possess full certification in psychiatry.

This **does not** include "board eligible" psychiatrists.

How much supervision counts toward licensure as a trainee?

On and after January 1, 1998, only five hours of supervision per week will be credited. However, you may need to document more than five hours per week in order to comply with the ratio counts. Be sure to document **all** hours received on the experience verification form.

What do I need to turn in to SJSU about the field work?

Each student must have the fieldwork supervisor sign a contract between the site and the MS program. Right now, you need to get it from us.

This **must** be returned to the Fieldwork coordinator.

What forms do I need to keep track of for licensure?

These forms are downloadable at: <http://www.bbs.ca.gov/bbsforms.htm>

1. Responsibility statement for supervisors





Each supervisor shall provide the intern or trainee with the original signed “Responsibility Statement for Supervisors of a Marriage, Family, and Child Counselor Intern or Trainee.” The intern shall provide the board with his or her signed “Responsibility Statement for Supervisors of a Marriage, Family, and Child Counselor Intern or Trainee” from each supervisor upon application for licensure. The trainee shall provide the board with his or her signed “Responsibility Statement for Supervisors of a Marriage, Family, and Child Counselor Intern or Trainee” revised 1-00 from each supervisor upon application for internship. This form must be submitted with your application for licensure.

2. **MFT (or LPC) experience verification**
3. **Weekly summary of hours**

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Graduation requirements



Helpful tip! Be sure to make and keep a photocopy of **everything** you turn in to the University for graduation. Sometimes the University misplaces things in the shuffle, and having a copy of what you turned in can be very helpful. (This a good tip for licensing requirements, too.)

Advancement to candidacy

Advancement to candidacy for the Masters degree will typically occur in the first semester in your second year (usually October 1) provided all courses have been passed satisfactorily with a B- or better (and cumulative GPA is 3.0 or higher). Advancement also requires the successful completion of the first-year comprehensive examination and the approval of the MS Clinical Psychology Program Committee. Feedback regarding the Committee's deliberations will be provided throughout the student's tenure in the program.

At any point during the program, unsatisfactory performance may result in special requirements being set for the student or the student being dismissed from the program. These actions will be taken by a vote of the Committee and will be based on the following criteria:

1. Academic progress in coursework
2. Professional and personal growth, emotional maturity, and ethical behavior
3. Performance on comprehensive examinations



Each student must complete and submit a “**Departmental Request for Candidacy and Graduate Degree Program**” by the appropriate deadlines to the Office of Graduate Studies. This must be signed by the Director of the Clinical Program, so be certain to allow yourself time to get a signature. Students should download and complete the appropriate forms from Graduate Studies at <http://www.sjsu.edu/gradstudies>.

The Candidacy form must be turned in by the deadline stipulated by Graduate Studies. This deadline is often at the end of September or the first of October. This must be filed the academic year the student expects to graduate (i.e., the year by October 1 if he or she expects to graduate in May of the following year).

Note: Failure to meet this deadline will prevent the student from graduating on time.

Graduation

In order to graduate, each student must complete and submit the “**Application for Award of Master’s Degree.**” Students should download and complete the appropriate forms from Graduate Studies at <http://www.sjsu.edu/gradstudies>. The deadline for this is typically February 1 of the year you are gradating (in May).



The Application for Award of Master’s Degree form must be turned in by the deadline stipulated by Graduate Studies. This deadline is the first of February. This must be filed the semester the student expects to graduate.

Note: Failure to meet this deadline will prevent the student from graduating on time. This is especially important with respect to beginning to earn post-degree internship hours.

Finally, the Director will submit a signed Verification of Culminating Experience form to Graduate Studies. **This can only be filed after fulfilling all of the educational requirements.** This is not a form you are responsible for at all. The Director of the program will turn this in at the close of the semester in May.

Commencement/Convocation

Currently, there is only one Commencement/Convocation Ceremonies set by the University in late May. We strongly encourage you to participate in the convocation where you be hooded for your masters by the faculty member of your choice.

The MFT license

If you are interested in MFT licensure, it is recommended that you obtain the most recent licensing hours and information from:

Board of Behavioral Sciences
 1021 "O" Street, Room A-198
 Sacramento, CA. 95814
 (916) 445-4933
www.bbs.ca.gov



At this time, the MS Clinical Psychology program fully meets the coursework requirements for the MFT license. The BBS changes requirements from time and time. When you enter a program, typically, the requirements for an application for an MFT license will stay the same for the year you enter. While it is not expected this will occur, if the program curriculum changes and a portion of that no longer meets the MFT requirements, you will be notified of what is needed for application for licensure. Check out <http://www.bbs.ca.gov/lic-req8.htm> for a great set of FAQs and answers about MFT licensing.

The 'Trainee' (pre-degree Fieldwork experience)

The BBS is responsible for MFT licensure in the state of California. According to the BBS, a student becomes a "trainee" after satisfactorily completing 12 units of graduate work in an approved program.

A trainee may apply up to

- 750 hours of clinical experience (this includes supervision and providing therapy)
- 250 hours of workshops or seminars, and

toward the total 3,000 hours required for licensure for a total of 1,300 pre-degree hours.

The 'Intern' (post-degree clinical experience)

An "intern" is one who possesses the master's degree and is working toward licensure. The intern must earn a minimum of 1500 hours post-degree.

The Board and we realize that a maximum of 1300 pre-degree hours would imply a minimum of 1700 post-degree hours, but their wording is such that they theoretically require only 1500 post-degree hours.

A minimum of 2 years of supervised experience (may include both pre-degree and post-degree hours) is required for licensure. For a minimum of 52 weeks, which may be non-consecutive, the student must have at least one hour of individual supervision per week.

Here is a helpful link related to internships in California: <http://www.cpic.net/>



Counting hours

In general, the following is to provide an overview of hours. More detailed descriptions are provided in the Clinical Fieldwork Handbook.

That resource tends to be much more up to date and has answers to many of your questions.

Students may apply up to 500 hours of leading group therapy and 250 hour of phone counseling towards the 3,000 required hours. These hours, also, may be accrued either pre- or post-degree.

A maximum of 250 hours of testing, evaluation, report writing, and completing progress/process notes may be applied toward the 3000 hours, but these hours may only be gained post-degree, as progress notes written pre-degree do not count as acceptable hours.

At least 500 of the 3000 hours must be in diagnosing and treating families, couples, and children.

Sitting for the MFT license

Upon completion of the necessary hours, the registered intern may then sit for the MFT exam.

Students should note that all hours must have been gained within 6 years of the date that licensing application is filed. However, 500 hours are exempt from this requirement, assuming they are gained during the supervised fieldwork practicum (that is, in the pre-degree period).



Required information

NOTIFICATION TO STUDENTS OF DESIGN OF DEGREE PROGRAM: CERTIFICATION OF FULFILLMENT OF REQUIREMENTS FOR STUDENTS IN THE MS CLINICAL PROGRAM AT SAN JOSE STATE UNIVERSITY

In accordance with the Business and Professions Code Section 4980.38(a), "Each educational institution preparing applicants to qualify for licensure shall notify each of its students by means of its public documents or otherwise in writing that its degree program is designed to meet the requirement of Section 4980.37 and shall certify to the board that it has so notified its students," we are providing you with a copy of these sections. Please review them carefully.

The MS Clinical Psychology program at SJSU meets all of the requirements set by the Business and Professions code for the MFT and LPC (note that the Career Counseling course is not offered by the Department of Psychology nor is it part of the required 60 units in the program). **Please note that each course syllabus will list how the program meets the requirements for licensing in the section called Licensing Learning Objectives (LLOs).**

If you have any questions, please do not hesitate to contact the Director of Clinical Training or any graduate faculty member in the MS program.

This section is taken from a much larger body. You can view this section and the larger laws and regulations at <http://www.bbs.ca.gov/pdf/publications/lawsregs.pdf>

We encourage you to review the full laws and regulations. Information about the source of this document and contact information for the Board of Behavioral Sciences is listed at the end of these reprinted sections.

BOARD OF BEHAVIORAL SCIENCES LAWS AND REGULATIONS RELATING TO THE PRACTICE OF MARRIAGE, FAMILY, AND CHILD COUNSELING, LICENSED CLINICAL SOCIAL WORK, AND LICENSED EDUCATIONAL PSYCHOLOGY

§ 4980.36. QUALIFYING DEGREE PROGRAM FOR LICENSURE OR REGISTRATION; BEGINNING GRADUATE STUDY AFTER AUGUST 1, 2012 OR COMPLETING GRADUATE STUDY AFTER DECEMBER 31, 2018

1. (a) This section shall apply to the following:

1. (1) Applicants for licensure or registration who begin graduate study before August 1, 2012, and do not complete that study on or before December 31, 2018.
 2. (2) Applicants for licensure or registration who begin graduate study before August 1, 2012, and who graduate from a degree program that meets the requirements of this section.
 3. (3) Applicants for licensure or registration who begin graduate study on or after August 1, 2012.
2. (b) To qualify for a license or registration, applicants shall possess a doctoral or master's degree meeting the requirements of this section in marriage, family, and child counseling, marriage and family therapy, couple and family therapy, psychology, clinical psychology, counseling psychology, or either counseling or clinical mental health counseling with an emphasis in either marriage, family, and child counseling or marriage and family therapy. The degree shall be obtained from a school, college, or university approved by the Bureau for Private Postsecondary Education, or accredited by either the Commission on Accreditation for Marriage and Family Therapy Education, or a regional or national institutional accrediting agency that is recognized by the United States Department of Education. The board has the authority to make the final determination as to whether a degree meets all requirements, including, but not limited to, course requirements, regardless of accreditation or approval.
- (c) A doctoral or master's degree program that qualifies for licensure or registration shall be a single, integrated program that does the following:
- (1) Integrate all of the following throughout its curriculum:
 - (A) Marriage and family therapy principles.
 - (B) The principles of mental health recovery-oriented care and methods of service delivery in recovery-oriented practice environments, among others.
 - (C) An understanding of various cultures and the social and psychological implications of socioeconomic position, and an understanding of how poverty and social stress impact an individual's mental health and recovery.
 2. (2) Allow for innovation and individuality in the education of marriage and family therapists.
 3. (3) Encourage students to develop the personal qualities that are intimately related to effective practice, including, but not limited to, integrity, sensitivity, flexibility, insight, compassion, and personal presence.
 4. (4) Permit an emphasis or specialization that may address any one or more of the unique and complex array of human problems, symptoms, and needs of Californians served by marriage and family therapists.
 5. (5) Provide students with the opportunity to meet with various consumers and family members of consumers of mental health services to enhance understanding of their experience of mental illness, treatment, and recovery.
- (d) The degree described in subdivision (b) shall contain no less than 60 semester or 90 quarter units of instruction that includes, but is not limited to, the following requirements:
- (1) Both of the following:
 - (A) No less than 12 semester or 18 quarter units of coursework in theories, principles, and methods of a variety of psychotherapeutic orientations directly related to marriage and family therapy and marital and family systems approaches to treatment and how these theories can be applied therapeutically with individuals, couples, families, adults, including elder adults, children, adolescents, and groups to improve, restore, or maintain healthy relationships.
 - (B) Practicum that involves direct client contact, as follows:

- (i) A minimum of six semester or nine quarter units of practicum in a supervised clinical placement that provides supervised fieldwork experience.
- (ii) A minimum of 150 hours of face-to-face experience counseling individuals, couples, families, or groups.
- (iii) A student must be enrolled in a practicum course while counseling clients, except as specified in subdivision (c) of Section 4980.42.
- (iv) The practicum shall provide training in all of the following areas: (I) Applied use of theory and psychotherapeutic techniques.
 - (II) Assessment, diagnosis, and treatment planning.
 - (III) Treatment of individuals and premarital, couple, family, and child relationships, including trauma and abuse, dysfunctions, healthy functioning, health promotion, illness prevention, and working with families.
 - (IV) Professional writing, including documentation of services, treatment plans, and progress notes.
 - (V) How to connect people with resources that deliver the quality of services and support needed in the community.
 - (v) Educational institutions are encouraged to design the practicum required by this subparagraph to include marriage and family therapy experience in low income and multicultural mental health settings.
- (vi) In addition to the 150 hours required in clause (ii), 75 hours of either of the following, or a combination thereof:
 - (I) Client centered advocacy, as defined in Section 4980.03.
 - (II) Face-to-face experience counseling individuals, couples, families, or groups. (2) Instruction in all of the following:
 - (A) Diagnosis, assessment, treatment planning, and treatment of mental disorders, including severe mental disorders, evidence-based practices, psychological testing, psychopharmacology, and promising mental health practices that are evaluated in peer-reviewed literature.
 - (B) Developmental issues from infancy to old age, including instruction in all of the following areas:
 - (i) The effects of developmental issues on individuals, couples, and family relationships.
 - (ii) The psychological, psychotherapeutic, and health implications of developmental issues and their effects.
 - (iii) Aging and its biological, social, cognitive, and psychological aspects. This coursework shall include instruction on the assessment and reporting of, as well as treatment related to, elder and dependent adult abuse and neglect.
 - (iv) A variety of cultural understandings of human development.
 - (v) The understanding of human behavior within the social context of socioeconomic status and other contextual issues affecting social position.
 - (vi) The understanding of human behavior within the social context of a representative variety of the cultures found within California.
 - (vii) The understanding of the impact that personal and social insecurity, social stress, low educational levels, inadequate housing, and malnutrition have on human development.
 - (C) The broad range of matters and life events that may arise within marriage and family relationships and within a variety of California cultures, including instruction in all of the following:
 - (i) A minimum of seven contact hours of training or coursework in child abuse assessment and reporting as specified in Section 28, and any regulations promulgated thereunder.
 - (ii) Spousal or partner abuse assessment, detection, intervention strategies, and same gender abuse dynamics.
 - (iii) Cultural factors relevant to abuse of partners and family members. (iv) Childbirth, child rearing, parenting, and stepparenting.

(v) Marriage, divorce, and blended families.

(vi) Long-term care.

(vii) End-of-life and grief.

(viii) Poverty and deprivation.

(ix) Financial and social stress.

(x) Effects of trauma.

(xi) The psychological, psychotherapeutic, community, and health implications of the matters and life events described in clauses (i) to (x), inclusive.

(D) Cultural competency and sensitivity, including a familiarity with the racial, cultural, linguistic, and ethnic backgrounds of persons living in California.

(E) Multicultural development and cross-cultural interaction, including experiences of race, ethnicity, class, spirituality, sexual orientation, gender, and disability, and their incorporation into the psychotherapeutic process.

(F) The effects of socioeconomic status on treatment and available resources.

(G) Resilience, including the personal and community qualities that enable persons to cope with adversity, trauma, tragedy, threats, or other stresses.

(H) Human sexuality, including the study of physiological, psychological, and social cultural variables associated with sexual behavior and gender identity, and the assessment and treatment of psychosexual dysfunction.

(I) Substance use disorders, co-occurring disorders, and addiction, including, but not limited to, instruction in all of the following:

(i) The definition of substance use disorders, co-occurring disorders, and addiction. For purposes of this subparagraph, "co-occurring disorders" means a mental illness and substance abuse diagnosis occurring simultaneously in an individual.

(ii) Medical aspects of substance use disorders and co-occurring disorders. (iii) The effects of psychoactive drug use.

(iv) Current theories of the etiology of substance abuse and addiction.

(v) The role of persons and systems that support or compound substance abuse and addiction.

(vi) Major approaches to identification, evaluation, and treatment of substance use disorders, co-occurring disorders, and addiction, including, but not limited to, best practices.

(vii) Legal aspects of substance abuse.

(viii) Populations at risk with regard to substance use disorders and co-occurring disorders.

(ix) Community resources offering screening, assessment, treatment, and follow up for the affected person and family.

(x) Recognition of substance use disorders, co-occurring disorders, and addiction, and appropriate referral.

(xi) The prevention of substance use disorders and addiction.

(J) California law and professional ethics for marriage and family therapists, including instruction in all of the following areas of study:

(i) Contemporary professional ethics and statutory, regulatory, and decisional laws that delineate the scope of practice of marriage and family therapy.

(ii) The therapeutic, clinical, and practical considerations involved in the legal and ethical practice of marriage and family therapy, including, but not limited to, family law.

(iii) The current legal patterns and trends in the mental health professions.

(iv) The psychotherapist-patient privilege, confidentiality, the patient dangerous to self or others, and the treatment of minors with and without parental consent.

(v) A recognition and exploration of the relationship between a practitioner's sense of self and human values and the practitioner's professional behavior and ethics.

(vi) The application of legal and ethical standards in different types of work settings.

(vii) Licensing law and licensing process.

(e) The degree described in subdivision (b) shall, in addition to meeting the requirements of subdivision (d), include instruction in case management, systems of care for the severely mentally ill, public and private services and supports available for the severely mentally ill, community resources for persons with mental illness and for victims of abuse, disaster and trauma response, advocacy for the severely mentally ill, and collaborative treatment. This instruction may be provided either in credit level coursework or through extension programs offered by the degree-granting institution.

(f) The changes made to law by this section are intended to improve the educational qualifications for licensure in order to better prepare future licentiates for practice, and are not intended to expand or restrict the scope of practice for marriage and family therapists.

§ 4980.37. QUALIFYING DEGREE PROGRAM FOR LICENSURE OR REGISTRATION; BEGAN GRADUATE STUDY BEFORE AUGUST 1, 2012 AND COMPLETED GRADUATE STUDY BEFORE DECEMBER 31, 2018

1. (a) This section shall apply to applicants for licensure or registration who began graduate study before August 1, 2012, and completed that study on or before December 31, 2018. Those applicants may alternatively qualify under paragraph (2) of subdivision (a) of Section 4980.36.
2. (b) To qualify for a license or registration, applicants shall possess a doctoral or master's degree in marriage, family, and child counseling, marriage and family therapy, couple and family therapy, psychology, clinical psychology, counseling psychology, or either counseling or clinical mental health counseling with an emphasis in either marriage, family, and child counseling or marriage and family therapy. The degree shall be obtained from a school, college, or university accredited by a regional or national institutional accrediting agency that is recognized by the United States Department of Education or approved by the Bureau for Private Postsecondary Education. The board has the authority to make the final determination as to whether a degree meets all requirements, including, but not limited to, course requirements, regardless of accreditation or approval. In order to qualify for licensure pursuant to this section, a doctoral or master's degree program shall be a single, integrated program primarily designed to train marriage and family therapists and shall contain no less than 48 semester units or 72 quarter units of instruction. This instruction shall include no less than 12 semester units or 18 quarter units of coursework in the areas of marriage, family, and child counseling, and marital and family systems approaches to treatment. The coursework shall include all of the following areas:
 1. (1) The salient theories of a variety of psychotherapeutic orientations directly related to marriage and family therapy, and marital and family systems approaches to treatment.
 2. (2) Theories of marriage and family therapy and how they can be utilized in order to intervene therapeutically with couples, families, adults, children, and groups.
 3. (3) Developmental issues and life events from infancy to old age and their effect on individuals, couples, and family relationships. This may include coursework that focuses on specific family life events and the psychological, psychotherapeutic, and health implications that arise within couples and families, including, but not limited to, childbirth, child rearing, childhood, adolescence, adulthood, marriage, divorce, blended families, stepparenting, abuse and neglect of older and dependent adults, and geropsychology.
 4. (4) A variety of approaches to the treatment of children.

The board shall, by regulation, set forth the subjects of instruction required in this subdivision.

(c) (1) In addition to the 12 semester or 18 quarter units of coursework specified in subdivision (b), the doctoral or master's degree program shall contain not less than six semester units or nine quarter units of supervised practicum in applied psychotherapeutic technique, assessments, diagnosis, treatment planning, and treatment of premarital, couple, family, and child relationships, including dysfunctions, healthy functioning, health promotion, and illness prevention, in a supervised clinical placement that provides supervised fieldwork experience within the scope of practice of a marriage and family therapist.

2. (2) For applicants who enrolled in a degree program on or after January 1, 1995, the practicum shall include a minimum of 150 hours of face-to-face experience counseling individuals, couples, families, or groups.
3. (3) The practicum hours shall be considered as part of the 48 semester or 72 quarter unit requirement.
4. (d) As an alternative to meeting the qualifications specified in subdivision (b), the board shall accept as equivalent degrees those master's or doctoral degrees granted by educational institutions whose degree program is approved by the Commission on Accreditation for Marriage and Family Therapy Education.
5. (e) In order to provide an integrated course of study and appropriate professional training, while allowing for innovation and individuality in the education of marriage and family therapists, a degree program that meets the educational qualifications for licensure or registration under this section shall do all of the following:
 1. (1) Provide an integrated course of study that trains students generally in the diagnosis, assessment, treatment planning, and treatment of mental disorders.
 2. (2) Prepare students to be familiar with the broad range of matters that may arise within marriage and family relationships.
 3. (3) Train students specifically in the application of marriage and family relationship counseling principles and methods.
 4. (4) Encourage students to develop those personal qualities that are intimately related to the counseling situation such as integrity, sensitivity, flexibility, insight, compassion, and personal presence.
 5. (5) Teach students a variety of effective psychotherapeutic techniques and modalities that may be utilized to improve, restore, or maintain healthy individual, couple, and family relationships.
 6. (6) Permit an emphasis or specialization that may address any one or more of the unique and complex array of human problems, symptoms, and needs of Californians served by marriage and family therapists.

(7) Prepare students to be familiar with cross-cultural mores and values, including a familiarity with the wide range of racial and ethnic backgrounds common among California's population, including, but not limited to, Blacks, Hispanics, Asians, and Native Americans.

(f) Educational institutions are encouraged to design the practicum required by this section to include marriage and family therapy experience in low income and multicultural mental health settings.

§ 4980.38. NOTIFICATION TO STUDENTS OF DESIGN OF DEGREE PROGRAM; CERTIFICATION OF FULFILLMENT OF REQUIREMENTS

(a) Each educational institution preparing applicants to qualify for registration or licensure shall notify each of its students by means of its public documents or otherwise in writing that its degree program is designed to meet the requirements of Section 4980.36 or 4980.37, and shall certify to the board that it has so notified its students.

(b) An applicant for registration or licensure shall submit to the board a certification by the applicant's educational institution that the institution's required curriculum for graduation and any associated coursework completed by the applicant does one of the following:

(1) Meets all of the requirements set forth in Section 4980.36.

(2) Meets all of the requirements set forth in Section 4980.37 and paragraphs (4) and (5) of subdivision (a) of Section 4980.41.

§ 4980.39. ADDITIONAL COURSEWORK: AGING AND LONG-TERM CARE

1. (a) An applicant for licensure whose education qualifies him or her under Section 4980.37 shall complete, as a condition of licensure, a minimum of 10 contact hours of coursework in aging and long-term care, which may include, but is not limited to, the biological, social, and psychological aspects of aging. On and after January 1, 2012, this coursework shall include instruction on the assessment and reporting of, as well as treatment related to, elder and dependent adult abuse and neglect.
 2. (b) Coursework taken in fulfillment of other educational requirements for licensure pursuant to this chapter, or in a separate course of study, may, at the discretion of the board, fulfill the requirements of this section.
- (c) In order to satisfy the coursework requirement of this section, the applicant shall submit to the board a certification from the chief academic officer of the educational institution from which the applicant graduated stating that the coursework required by this section is included within the institution's required curriculum for graduation, or within the coursework, that was completed by the applicant.
- (d) The board shall not issue a license to the applicant until the applicant has met the requirements of this section.

§ 4980.396. REQUIRED COURSEWORK OR SUPERVISED EXPERIENCE: SUICIDE RISK ASSESSMENT AND INTERVENTION

- (a) On or after January 1, 2021, an applicant for licensure as a marriage and family therapist shall show, as part of the application, that he or she has completed a minimum of six hours of coursework or applied experience under supervision in suicide risk assessment and intervention. This requirement shall be met in one of the following ways:
1. (1) Obtained as part of his or her qualifying graduate degree program. To satisfy this requirement, the applicant shall submit to the board a written certification from the registrar or training director of the educational institution or program from which the applicant graduated stating that the coursework required by this section is included within the institution's curriculum required for graduation at the time the applicant graduated, or within the coursework that was completed by the applicant.
 2. (2) Obtained as part of his or her applied experience. Applied experience can be met in any of the following settings: practicum or associateship that meets the requirement of this chapter, formal postdoctoral placement that meets the requirements of Section 2911, or other qualifying supervised experience. To satisfy this requirement, the applicant shall submit to the board a written certification from the director of training for the program or primary supervisor where the qualifying experience has occurred stating that the training required by this section is included within the applied experience.
 3. (3) By taking a continuing education course that meets the requirements of Section 4980.54. To satisfy this requirement, the applicant shall submit to the board a certification of completion.
- (b) As a one-time requirement, a licensee prior to the time of his or her first renewal after January 1, 2021, or an applicant for reactivation or reinstatement to an active license status on or after January 1, 2021, shall have completed a minimum of six hours of coursework or applied experience under supervision in suicide risk assessment and intervention, using one of the methods specified in subdivision (a).
- (c) Proof of compliance with this section shall be certified under penalty of perjury that he or she is in compliance with this section and shall be retained for submission to the board upon request.



Getting your own psychotherapy

Personal psychotherapy hours may be accrued at any time during the program. SJSU has an on-campus Counseling Center providing individual and couple therapy to registered students, up to 6 sessions per semester, at no cost.

The SJSU Counseling Services is located at the Student Wellness Center, room 300B. Professional psychologists, social workers, and counselors are available to provide consultation on issues of student mental health, campus climate or psychological and academic issues on an individual, couple, or group basis. To schedule an appointment or learn more information, visit [Counseling Services website](http://www.sjsu.edu/counseling) at <http://www.sjsu.edu/counseling>.

Personal psychotherapy hours should be logged using the "honor system," as the Board does not require your therapist to sign off on the sessions you attend. Remember that personal psychotherapy hours count 3 hours for every one hour you receive, up to 100 hours. The BBS triple counts that 100 for a total of up to 300 hours. These are in addition to those required face-to-face hours, not in lieu of them.

You are not required to get your own psychotherapy. At no time will this be an explicit requirement of our program, though the program encourages you to both have this experience and it is useful for coping with stress. There are numerous advantages to receiving psychotherapy for those who want to become therapists:

- You may get help with stress you have during the program
- You may get assistance with issues that emerge during your training
- You may experience what it is like to be a client during therapy (often called being "on the other side of the couch").

If you have questions about getting your own psychotherapy, please feel free to talk to any of the clinical faculty or the Director of the Clinical Program.



SJSU & Academic Integrity

Clinical psychology is a field bound heavily by ethics of practice. These extend directly to your training as a student. Any evidence of academic dishonesty (sharing unauthorized materials, plagiarism, cheating, etc.) will be grounds for immediate dismissal from the program.

As stated earlier, there are very explicit rules regarding sharing of materials from other completed courses.

Only upon explicit consent from an instructor may any material from any other course (e.g., tests, quizzes, papers, etc.) ever be shared by a student who has already taken a course with a student who has not yet completed (e.g. is currently enrolled in) the course.

Students may not discuss the content of the first year compressive exam. That is, they may not inquire or discuss the specific cases or test questions used in past compressive exams with students who have completed these exams.

Again, sharing unauthorized materials is considered academic dishonesty and is grounds for immediate dismissal from the program. If you are unclear on this, please immediately contact the instructor or Director of the program.



All students are encouraged to work through the plagiarism tutorial through the SJSU library at <http://libguides.sjsu.edu/plagiarism>

The following definitions are from the SJSU policy statement:

CHEATING: At SJSU, cheating is the act of obtaining or attempting to obtain credit for academic work through the use of any dishonest, deceptive, or fraudulent means. Cheating at SJSU includes but is not limited to:

Copying in part or in whole, from another's test or other evaluation instrument; Submitting work previously graded in another course unless this has been approved by the course instructor or by departmental policy. Submitting work simultaneously presented in two courses, unless this has been approved by both course instructors or by departmental policy. Altering or interfering with grading or grading instructions; Sitting for an examination by a surrogate, or as a surrogate; any other act committed by a student in the course of his or her academic work which defrauds or misrepresents, including aiding or abetting in any of the actions defined above.

PLAGIARISM: At SJSU plagiarism is the act of representing the work of another as one's own (without giving appropriate credit) regardless of how that work was obtained, and submitting it to fulfill academic requirements. Plagiarism at SJSU includes but is not limited to:

The act of incorporating the ideas, words, sentences, paragraphs, or parts thereof, or the specific substances of another's work, without giving appropriate credit, and representing the product as one's own work; and representing another's artistic/scholarly works such as musical compositions, computer programs, photographs, painting, drawing, sculptures, or similar works as one's own.

Academic integrity

Your commitment as a student to learning is evidenced by your enrollment at San Jose State University. The [University Academic Integrity Policy S07-2](http://www.sjsu.edu/senate/docs/S07-2.pdf) at <http://www.sjsu.edu/senate/docs/S07-2.pdf> requires you to be honest in all your academic course work. Faculty members are required to report all infractions to the office of Student Conduct and Ethical Development. The [Student Conduct and Ethical Development website](http://www.sjsu.edu/studentconduct/) is available at <http://www.sjsu.edu/studentconduct/>.

Instances of academic dishonesty will not be tolerated. Cheating on exams or plagiarism (presenting the work of another as your own, or the use of another person's ideas without giving proper credit) will result in a failing grade and sanctions by the University. For this class, all assignments are to be completed by the individual student unless otherwise specified.

The following is from SJSU's policy on Academic Integrity (found at <http://www.sjsu.edu/cs100w/policies/plagiarism.html>)

1.0 Definitions of Academic Dishonesty

1.1 Cheating

At SJSU, cheating is the act of obtaining or attempting to obtain credit for academic work through the use of any dishonest, deceptive, or fraudulent means. Cheating at SJSU includes but is not limited to:

1.1.1. Copying, in part or in whole, from another's test or other evaluation instrument including homework assignments, worksheets, lab reports, essays, summaries, quizzes, etc.;

1.1.2. Submitting work previously graded in another course unless this has been approved by the course instructor or by departmental policy;

1.1.3. Submitting work simultaneously presented in two courses, unless this has been approved by both course instructors or by the department policies of both departments;

1.1.4. Using or consulting, prior to, or during an examination, sources or materials not authorized by the instructor;

1.1.5. Altering or interfering with the grading process;

1.1.6. Sitting for an examination by a surrogate, or as a surrogate;

1.1.7. Any other act committed by a student in the course of their academic work which defrauds or misrepresents, including aiding or abetting in any of the actions defined above.

1.2 Plagiarism

At SJSU plagiarism is the act of representing the work of another as one's own without giving appropriate credit, regardless of how that work was obtained, and/or submitting it to fulfill academic requirements. Plagiarism at SJSU includes but is not limited to:

1.2.1 The act of incorporating the ideas, words, sentences, paragraphs, or parts of, and/or the specific substance of another's work, without giving appropriate credit, and/or representing the product as one's own work;

1.2.2 Representing another's artistic/scholarly works such as musical compositions, computer programs, photographs, paintings, drawing, sculptures, or similar works as one's own.

2.0 Notification of Standards of Detecting Plagiarism

2.1 SJSU or its faculty may subscribe to and/or use plagiarism detection services.

2.2 Any plagiarism detection service with which SJSU contracts must ensure the anonymity of all submitted work to third parties.

2.3 Except for the stated purpose of storing submitted work in databases and/or using the database solely for the intended purpose of detecting plagiarism, any plagiarism detection service with which SJSU contracts shall agree that to the fullest extent possible, ownership rights of all submitted work shall remain with the work's author and not with the plagiarism detection service.



MFT (CAMFT) Ethical Standards

LPCC (ACA) Ethical Standards

These are now provided as additional PDFs separate from this document. They are no longer inserted into the student handbook.

You are responsible for reading these and adhering to them (CAMFT minimally, ACA if you are interested in the LPCC). They will be taught and discussed in class as well.