

DOMAIN A: ELIGIBILITY

A1. Doctoral Program to Prepare for Practice of Professional Psychology

In order to prepare students for the practice of professional clinical psychology, the Doctor of Philosophy in Clinical Psychology Program at Sam Houston State University (SHSU) is dedicated to substantive training in the broad and general foundations of psychology and professional training in the foundations of clinical psychology and its practice, including its ethical and legal elements. Specific objectives of the program are detailed in Domain B. *More information regarding eligibility is provided on the Transmittal Page and in Table 1.*

A2. Sponsored by a Nationally Accredited Institution

SHSU is accredited by the Southern Association of Colleges and Schools to offer bachelor, master, and doctoral degrees. It enrolls approximately 17,000 students. *For more information regarding national accreditation, see Transmittal Page.*

A3. Administrative Structure

The Clinical Psychology Doctoral Program (henceforth, the Program) is housed within the Department of Psychology and Philosophy (henceforth, the Department) which is a part of the College of Humanities and Social Sciences (CHSS). The missions of the University, College, Department, and the Program are integrated and compatible and provided in full in the *Program Handbook* (see Appendix C, page 318). The University Provost designates the Dean of CHSS and the Dean of Graduate Studies who ensure adherence to University policies and procedures and provide program resources. The Dean of CHSS has delegated supervision of the Program to the Department Chair, who designates the Director of Clinical Training (DCT) to manage the Program. Although University leadership provides oversight, the DCT has authority over the professional development of the Program and the Program's independence is recognized at the department, college and university levels (*see Appendix E, page 658, for the SHSU Clinical Psychology Ph.D. Program Organization Diagram*).

The university provides support that is sufficient for the Program to achieve its goals and objectives. Enrollment of 35-40 students in the program allows for meaningful peer interaction, support, and socialization. Program faculty to student ratios have remained relatively constant at approximately 1:4.5. In addition to general departmental funding, the university provides a sizable annual budget for exclusive use by the Program. Graduate Studies arranges funds to assure that all students receive stipends, and in the past year that funding was significantly increased. In April 2008, the Program was given a new clinic building with over 10,000 square feet of space and a state-of-the-art audio/visual system.

A4. Length of Program and Residency Requirements

In keeping with university policy, the Program requires full time residence for a least two of the three required academic training years (see Appendix C, *Program Handbook, page 358*). Although it is possible to complete the Program in five years, students joining the program with a baccalaureate degree typically are in residence for five years before they embark on a pre-doctoral internship, the completion of which is required before one obtains the doctoral degree (see Appendix C, *Program Handbook, page 401*).

A5. Respect for and Understanding of Cultural and Individual Diversity

SHSU, the CHSS, the Department, and the Program all work to provide an education that reflects the value of cultural and individual diversity. This is reflected in efforts to recruit, retain, and develop a diverse faculty and student body. An appreciation for human diversity also permeates the Program's curriculum and field placements. This is discussed in detail in Doman D. The university affirms that admission to SHSU is open to qualified individuals without regard to race, color, national origin, religion, sex, disability, or age. (see *Graduate Catalogue* <http://www.shsu.edu/gradcat/approcess.html>).

A6. Required Table

Item	Document Reference	Appendix/pages
Student selection	Program Handbook	Appendix C Page 329
Academic preparation & admission requirements	Program Handbook	Appendix C Page 329
Administrative and financial assistance	Program Handbook	Appendix C Pages 427-429
Student performance evaluation, feedback, advisement, retention	Program Handbook	Appendix C Pages 404-423; 424-425; 341; 431-432
Minimal level of acceptable achievement	Program Handbook	Appendix C Page 376
Student termination	Program Handbook	Appendix C Pages 352-355
Due process	Program Handbook	Appendix C Pages 354-355
Grievance policies for students and faculty	Program Handbook; Faculty Grievance Procedure http://www.shsu.edu/~vaf_www/aps/documents/820830_002.pdf	Appendix C Pages 438-440

DOMAIN B: PROGRAM PHILOSOPHY, OBJECTIVES, AND CURRICULUM PLAN**B1. Educational Philosophy and Training Model**

The Clinical Psychology Ph.D. Program at SHSU subscribes to a scientist-practitioner model. Consistent with the rationale of the Boulder Model,¹ the Program's training provides experience

¹ Raimy, V.C. (Ed.). (1950). *Training in clinical psychology*. New York: Prentice-Hall.

in applied settings in order to produce scientists who are sensitive to substantive issues in the field and who generate research that is useful to practitioners. Conversely, practitioners who have been trained as scientists understand emerging research results, assimilate those results into their daily practice, and may produce meaningful scholarship that advances the field. Thus, the Program is designed to produce clinical psychologists who integrate science and practice to contribute to the field in any academic, clinical, or consulting role they chose to pursue, including in service to the legal community. The Program is structured to be sequential, cumulative, and graded in complexity requiring students to increasingly integrate science and practice and to utilize more advanced skills as they progress through their training.

B2. Training Goals, Objectives, and Competencies

Table B2.1²

Goals, Objectives, and Competencies/Outcomes

Goal 1: To produce graduates who have a broad knowledge of scientific psychology including its history of thought and development, research methods, and applications.

Objective 1: Students will progressively develop a core understanding of the scientific foundation of psychology, including biological, social, developmental, and cognitive/affective bases of behavior, history and systems of psychology, psychological measurement, research methodology, techniques of data analysis, and issues of cultural and individual diversity.

Competency 1: Students will demonstrate critical scientific thinking through evaluating the scientific basis of research findings and presenting their work to the scrutiny of faculty, fellow students, and other professionals in the field.

Outcome Measures (See Appendix G, pages 663-665) for the Omnibus Evaluation of Competency Development [Omnibus Form]:

- Academic coursework.
- Students participating in conference presentations and/or co-authoring manuscripts.

Minimum Threshold for Achievement:

- Grades of B or greater.
- Eighty percent of students lead or co-author a conference presentation or publication.

Competency 2: Students will demonstrate a fundamental knowledge of the scientific bases of behavior.

Outcome Measures (Omnibus Form, Appendix G, pages 663-664):

- Academic coursework.
- Passing Major Area Paper or Doctoral Comprehensive Exams (see Appendix G, page 662)
- Passing Examination for Professional Practice in Psychology (EPPP)
- Effective teaching of undergraduate psychology courses (see Appendix H, pages 674-675)

Minimum Threshold for Achievement:

² This is an abbreviated table. The full table including more detail on the Minimum Threshold for Achievement can be found in *Appendix M*, pages 762-700

- Grades of B or greater.
- Successfully completing Major Area Paper (MAP) or Doctoral Comprehensive Exam (DCE).
- Eighty percent of students who take the EPPP will pass the exam.
- Teaching evaluations at or exceeding Department averages.

Objective 2: Students will progressively develop a core understanding of the scientific, methodological, and theoretical foundations of professional clinical psychology including individual differences in behavior, human development, dysfunctional behavior/psychopathology, and professional standards and ethics.

Competency 1: Students will apply scientific methods in professional practice settings through such means as developing research reviews of practice-related topics, developing case conceptualizations, and generating and testing hypotheses regarding therapeutic processes, and making recommendations on the basis of assessment data.

Outcome Measures (Omnibus Form, Appendix G, pages 665-670):

- Academic coursework.
- Passing MAP or DCE.
- Passing EPPP
- Students participating in conference presentations and/or co-authoring manuscripts.

Minimum Threshold for Achievement:

- Grades of B or greater.
- Successfully completing MAP or DCE.
- Eighty percent of students who take the EPPP will pass the exam.
- Eighty percent of students lead or co-author a conference presentation or publication.
(see Appendix D, pages 580-603)

Competency 2: Students will understand the development of evidence-based practice (EBP) in psychology and apply EBP concepts in their clinical practice.

Outcome Measures (Omnibus Form, Appendix G, pages 664; 666-670):

- Academic coursework.
- Favorable reviews of clinical practice (Omnibus Form)

Minimum Threshold for Achievement:

- Grades of B or greater.
- Intermediate or Competent ratings in the Skills in Application of Research domain (Appendix G, page 668) of the Omnibus Form by internship certification.

Goal 2: To produce graduates with the skills to conduct meaningful research that adds to the current body of knowledge in psychology.

Objective 1: Students will critique published research to determine its relevance and the appropriateness of the methodology, data analysis, and interpretation of the results.

Competency 1: Students will produce competent reviews of literature.

Outcome Measures (Omnibus Form, Appendix G, pages 664-665):

- Academic coursework.
- Successfully completing Major Area Paper
- Thesis and Dissertation research (see Appendix C, pages 370-374; 386-400)

Minimum Threshold for Achievement:

- Grades of B or greater.
- Successfully completing MAP or DCE.
- Successfully completing Thesis and Dissertation.

Objective 2: Students will conduct empirical research with resultant expertise in the area of study, data analysis, and interpretation of results.

Competency 1: Students will produce competent thesis and dissertation research.

Outcome Measures (Omnibus Form, Appendix G, page 665):

- Thesis and Dissertation research
- Students participating in conference presentations and/or co-authoring manuscripts

Minimum Threshold for Achievement:

- Successfully completing Thesis and Dissertation.
- Eighty percent of students lead or co-author a conference presentation or publication.

Goal 3: To produce graduates who have the knowledge and skills to excel in the practice of clinical psychology.

Objective 1: Students will progressively acquire the skills and knowledge to engage in the core elements of clinical psychological practice, including:

a. Theories and methods of assessment and diagnosis

Competency 1: Students will show knowledge of the scientific basis of test construction including basic psychometric constructs such as reliability and validity.

Outcome Measures (Omnibus Form, Appendix G, pages 666; 668-669):

- Academic coursework.
- Second year Capstone clinical experience (shortened below as Capstone)
- Passing EPPP
- Psychologist licensure

Minimum Threshold for Achievement:

- Grades of B or greater.
- Passing Capstone assessment.
- Eighty percent of students who take the EPPP will pass the exam.
- Over half (50%) of former students achieve licensure within 5 years.

Competency 2: Students will demonstrate a basic knowledge of the range of normal and abnormal behavior understanding individual variations (development, cultural diversity, and systemic processes) and be able to effectively conduct initial interviews and mental status examinations.

Outcome Measures (Omnibus Form, Appendix G, pages 665-668):

- Academic coursework.
- Capstone

Minimum Threshold for Achievement:

- Grades of B or greater.
- Passing Capstone assessment and therapy.

Competency 3: Students will demonstrate the ability to administer appropriate assessment measures in clinical practice settings and present integrated case formulations in written form (assessment reports), making recommendations that have the probability of improving the welfare of their clients.

Outcome Measures (Omnibus Form, Appendix G, pages 668-671):

- Capstone
- Effective performance in Psychological Services Center and field placements.

Minimum Threshold for Achievement:

- Passing Capstone assessment and therapy.
- Eighty percent of Competent ratings in the Psychological Assessment Skills domain of the Omnibus Form by internship certification (Appendix G, pages 668-669).
- Eighty percent of Competent ratings in the Professional Development and Ethics domain of the Omnibus Form by internship certification (Appendix G, page 670).

b. Theories and methods of effective intervention

Competency 1: Students will demonstrate the capacity to form effective therapeutic relationships with clients and identify appropriate intervention approaches for different problems and populations.

Outcome Measures (Omnibus Form, Appendix G, pages 667; 670):

- Academic coursework.
- Capstone

Minimum Threshold for Achievement:

- Grades of B or greater.
- Passing Capstone therapy.

Competency 2: Students will be able to develop appropriate case conceptualizations and collaborative treatment plans and implement interventions consistent with principles of evidence-based practices (empirical support, clinical judgment and respecting client preferences and diversity).

Outcome Measures (Omnibus Form, Appendix G, page 670): Effective performance in Psychological Services Center and field placements.

Minimum Threshold for Achievement:

- Intermediate or higher ratings in the Intervention Skills domain of the Omnibus Form by internship certification (Appendix G, pages 666; 670).
- Ratings of Intermediate or Competent in the Skills in Application of Research domain of the Omnibus Form by internship certification (Appendix G, pages 664-665).

- Eighty percent of Competent ratings in the Professional Development and Ethics domains of the Omnibus Form (both p. 9) by internship certification.

Competency 3: Students will use established outcome measures to evaluate treatment progress and, if indicated, modify treatment planning

Outcome Measures (PSC Quality Assurance Review Form, Appendix I, page 681):
Effective performance in Psychological Services Center and field placements.

Minimum Threshold for Achievement: Completing intermediate outcome measures for all therapy clients at the PSC.

Objective 2: Students will demonstrate knowledge of and sensitivity to issues of cultural and individual diversity in professional work and relationships with clients, organizations, and colleagues.

Competency 1: Effective demonstration of sensitivity to cultural and individual diversity in clinical practice.

Outcome Measures (Omnibus Form, Appendix G, pages 663; 671):

- Academic coursework.
- Capstone.
- Effective performance in Psychological Services Center and field placements.

Minimum Threshold for Achievement:

- Grade of B or greater.
- Passing Capstone therapy and assessment.
- Intermediate or Competent ratings in the Diversity – Individual and Cultural Differences domain of the Omnibus Form Appendix G, page 671) by internship certification.

Objective 3: Students will be exposed to clinical supervision and consultation.

Competency 1: Students will be exposed to a body of literature regarding supervision and consultation.

Outcome Measures (Omnibus Form, Appendix G, page 671):

- Participating in Supervision Seminar
- Favorable reviews of Supervision Seminar participation (Omnibus Form, Appendix G, page 671).
- Participating in Doctoral Practicum I (assessment-focused section).

Minimum Threshold for Achievement:

- Record of participating in Supervision Seminar (see Appendix J, page 683-687).
- Rating of Intermediate or Competent in the Knowledge of literature on supervision domain of the Omnibus Form (Appendix G, page 671) by internship certification.
- Grade of B or greater in Doctoral Practicum I.

Competency 2: Advanced students will engage in peer supervision.

Outcome Measures (Omnibus Form, Appendix G, page 671):

- Students functioning as peer supervisors.
- Favorable reviews of peer supervision (Omnibus Form, Appendix G, page 671).

Minimum Threshold for Achievement:

- Ratings of Intermediate or Competent in the Supervisory Skills domain (exception being the Knowledge of literature on supervision item addressed above) of the Omnibus Form (Appendix G, pages 671-672) by internship certification.

Competency 3: Advanced students will be given the opportunity to engage in professional consultation in practicum settings.

Outcome Measures (Omnibus Form, Appendix G, page 671):

- Academic Coursework.
- Acquiring basic skills necessary for consultation (Omnibus Form, Appendix G, page 671).
- Students completing forensic evaluations and drafting reports for the court.
- Students participating as members of interdisciplinary teams

Minimum Threshold for Achievement:

- Grades of B or greater.
- Eighty percent of Intermediate or higher item ratings in the Consultation Skills domain of the Omnibus Form (Appendix G, page 671) prior to internship certification.
- Every student will complete at least one forensic evaluation and draft a report for the court.
- One hundred percent of students will be placed at practicum sites incorporating interdisciplinary teams as part of the training experience.

Goal 4: To produce graduates who can apply clinical psychological principles in the legal arena in both research and clinical practice.

Objective 1: Students will be knowledgeable regarding the ways in which clinical science and practice can inform common legal issues.

Competency 1: Effective demonstration of legal knowledge in clinical practice.

Outcome Measures (Omnibus Form, Appendix G, page 672):

- Academic Coursework.
- Skill demonstration in Forensic Assessment I (Omnibus Form, Appendix G, page 664; 672).

Minimum Threshold for Achievement:

- Grades of B or greater.
- Eighty percent of Intermediate or higher item ratings in the Knowledge regarding legal parameters governing clinical practice domain of the Omnibus Form (Appendix G, page 672) prior to internship certification.

Objective 2: Students will examine, and be qualified to conduct, research that applies clinical psychology to legal issues.

Competency 1: Research critiques pertaining to forensic assessment will be successfully completed.

Outcome Measures (Omnibus Form, Appendix G, page 664; 672):

- Academic Coursework.

- Skill demonstration in Forensic Assessment I (Appendix G, page 664, Omnibus Form).
- Students designing research proposals for forensic purposes.

Minimum Threshold for Achievement:

- Grades of B or greater.
- Eighty percent of Intermediate or higher item ratings in the Examining research that applies clinical psychology to legal issues domain of the Omnibus Form (Appendix G, pages 664; 672) prior to internship certification.

Objective 3: Students will provide consultation to the legal system.

Competency 1: Students will be qualified to conduct forensic evaluations and draft reports for the court.

Outcome Measures (Omnibus Form, Appendix G, pages 664; 672):

- Academic Coursework.
- Skill demonstration in forensic assessment (Omnibus Form, Appendix G, pages 664; 672).
- Students completing forensic evaluations and drafting reports for the court.

Minimum Threshold for Achievement:

- Grades of B or greater.
- Intermediate or higher item ratings in the Providing consultation to the legal system domain of the Omnibus Form (Appendix G, pages 664; 672) prior to internship certification.
- Every student will complete at least one forensic evaluation and draft a report for the court.

B3. Curriculum Plan to Achieve Goals and Objectives

Program Sequence. A typical sequence of courses and experiences is provided to illustrate how the Program meets its goals and objectives in a sequenced manner organized to facilitate the students' developing competencies.

First Year

During their first year, students enroll in a psychotherapy class (Theory and Research in Psychotherapy I, PSY 533) that reviews theoretical orientations and provides a framework for future course and practicum work that develops students' facility in evidence-based interventions. The course is a prerequisite to any subsequent practicum course. Advanced Physiological Psychology (PSY 560) provides an exploration of biological bases for behavior. Psychometrics (PSY 594) is a basic course in psychometric theory that serves as the prerequisite for all subsequent assessment courses. Students then become proficient with the Wechsler and Woodcock Johnson scales and other tests of individual intelligence and achievement in Assessment of Intelligence and Achievement, PSY 595. Appropriate use and misuse of such tests are addressed, with an emphasis on ethical adherence. Seminal and recent court decisions regarding intelligence testing and cultural influences on performance are also examined. A Clinical Psychology Proseminar (PSY 730) introduces students to the culture of clinical psychology and offers invitations to participate with faculty in conducting research in preparation for embarking on individual projects. Professional standards and ethics are infused throughout the curriculum (e.g., in Ethics in Clinical Practice, PSY 762). Students also enroll in

Psychopathology (PSY 530) which addresses the etiology of dysfunctional behavior, differential diagnosis, and individual differences in behavior, as well as contextual influences on it (e.g., development, cultural diversity, systemic processes). An Introduction to Experimental Design (PSY 588) prepares students to consider various methodologies they might employ to study research interests generated in part by the clinical proseminar. Advanced Statistics (PSY 587) emphasizes computer applications and includes consideration of data screening, effect sizes, and applications of the general linear model (i.e., ANOVA models and an introduction to multiple regression). If students did not matriculate with an acceptable completed thesis, they utilize this material to begin the process of formulating their thesis work and defending their proposals in Thesis I (PSY 698). Practicum I (PSY 691) addresses basic interviewing and counseling skills. Students conduct role plays with volunteers to develop their skills and learn basic issues of mental status exams, treatment planning, cross-cultural interviewing, and ethical standards in clinical practice.

Second Year

During the second year, a third psychometrics course, Assessment of Personality and Psychopathology (PSY 596) provides instruction and practice in objective personality assessment. The course in Multivariate Statistics in Psychology (PSY 787) broadens students' mastery of data analysis. A two-semester sequence of Doctoral Practicum I (PSY 882, Sections 1 and 2) is taken by all students, the second of which is the Capstone course (noted in Table B2.1). Each student is assigned to an appropriate practicum site and carries only 2-3 treatment cases for which they receive intensive supervision. During the second semester, they conduct a first basic psychological assessment. Didactic instruction and weekly individual supervision meetings culminate in a Capstone panel examination (the Capstone course noted in Table B2.1). In this forum, students are required to present a selected treatment case and a selected assessment case for review by the clinical faculty. Passing this examination is required for admission to further doctoral level practicum work (See Appendix C, pages 366-369). Additionally, Advanced Developmental Psychology (PSY 597) examines the development of human biological, cognitive, emotional, and psychosocial capacities from birth to death. History and Systems of Psychology (PSY 592) surveys the various schools of psychology and assesses their current impact on the field. The Emotions course (PSY 777) involves an intensive examination of both the cognitive and affective bases of human behavior. Students also enroll in the second thesis course (Thesis II, PSY 699), which requires successful defense of their theses.

Third Year

Continuing to build students' broad and general knowledge of psychology, the Advanced Social Psychology (PSY 532) course reviews theory and research related to social aspects of behavior. Students take Multicultural Psychology (PSY 760), which addresses cultural identity development and issues of cultural diversity germane to clinical psychology. (Consideration of cultural and individual diversity is also infused throughout the curriculum.) Additionally, students enroll in a forensic assessment course (Forensic Assessment I, PSY 860) that is both didactic and applied; students participate in at least one supervised assessment that results in consultation to the legal system. During the rest of their tenure at SHSU, students may volunteer to participate in additional forensic assessments, and most do so. Students also enroll in a course examining in more specific detail the ethical standards and ethical dilemmas of clinical practice (Ethics in Clinical Practice, PSY 762). Developmental Psychopathology (PSY 739) focuses on

the development of psychological disorders and on contextual factors facilitating (and suppressing) their development. Students further develop their assessment skills in Doctoral Clinical Practicum I (PSY 882, Section 3) where they receive supervised experience in interviewing, planning and conducting assessments, interpreting results, writing reports, making recommendations, and sharing results with clients. The experiential component of this course is provided at the Program's Psychological Services Center (PSC) or a field placement consistent with students' competencies. Students begin Doctoral Clinical Practicum II, PSY 883³ in the supervised setting of the PSC or in a field placement consistent with a student's developed competencies. In this course, students continue to gain experience in assessment, treatment planning, psychotherapy, and consultation, and they repeat this course in various field placements throughout the remainder of their residency at SHSU. All students are at some point assigned to the PSC, where they are required to participate in monthly seminars on effective supervision that include assigned readings. Once they have attended the supervision seminar, students are then required to supervise a junior student (under meta-supervision from a licensed psychologist) in either therapy or assessment for at least one semester. Finally, at the conclusion of the third year, students take a doctoral comprehensive exam. This requirement is fulfilled either by completing a Major Area Paper (MAP) or by taking a more traditional doctoral comprehensive examination (see Appendix C, pages 379-380; 381-385 for details), and when the requirement is passed, a student advances to candidacy. Work on a dissertation formally begins in Dissertation I (PSY 896, although students are encouraged to begin formulating ideas with prospective dissertation chairs prior to this point), which culminates in a draft of a dissertation proposal submitted to the dissertation director. Work continues on the dissertation (PSY 897 Dissertation II) throughout the summer along with an opportunity for elective coursework.

Fourth Year

In their fourth year, students focus on Empirically Supported Treatments (PSY 770), including an emphasis on the life long task of remaining up to date in this area. Students study current research regarding the effective treatment of various psychological disorders, the research basis for evaluating the efficacy and effectiveness of psychosocial interventions, acquire hands-on experience using an empirically supported treatment approach and consider the ever-evolving nature of the discipline. The fourth year includes a course in Mental Health Law (PSY 736) which explores state and federal constitutional, statutory, and case law regulating mental health professional practice. Students also gain further clinical experience through additional Doctoral Clinical Practicum (PSY 883), engaging in field work with a variety of supervisors. The dissertation proposal must be defended prior to application for internship and work on the dissertation will continue and ideally be completed before the student leaves for internship. Students who are certified by the DCT as ready to apply for internship also engage in interviews for internship and complete the process of ranking their choices to be included in the APPIC match program. A variety of elective classes allow students to pursue personal interests.

Fifth Year

The fifth year is spent on internship (Internship I/II/III, PSY 891/892/893) and requires enrollment for fall, spring, and summer semesters. Students who are unable to complete the

³ Note: Students who have not completed a thesis may not enroll in PSY 883 (Doctoral Clinical Practicum II).

dissertation before leaving for internship must continue to enroll in dissertation hours until they successfully complete the dissertation.

B.3 Required Table:

Elaborate in as much detail as necessary to specifically address in the table below how your program provides coverage of curriculum areas B.3.a-e:	
Curriculum Area:	Biological aspects of behavior
Required Academic/ Training Activities	1. PSY 560 (Advanced Physiological Psychology) see syllabus Appendix B, pages 145-148. Neurological dysfunction mechanisms paper
How competence assessed	1. B or better in coursework.
Curriculum Area:	Cognitive aspects of behavior
Required Academic/ Training Activities	1. PSY 777 (Emotions) see syllabus Appendix B, pages 256-260. Emerging points of view research synthesis paper.
How competence assessed	1. B or better in coursework
Curriculum Area:	Affective aspects of behavior
Required Academic/ Training Activities	1. PSY 777 (Emotions) see syllabus Appendix B, pages 256-260. Emerging points of view research synthesis paper.
How competence assessed	1. B or better in coursework.
Curriculum Area:	Social aspects of behavior
Required Academic/ Training Activities	1. PSY 532 (Advanced Social Psychology) see syllabus Appendix B, pages 138-139. Application of social psychology assignments.
How competence assessed	1. B or better in coursework.
Curriculum Area:	History and systems of psychology
Required Academic/ Training Activities	1. PSY 592 (History and Systems of Psychology), see Appendix B, pages 157-159. Four time period research review paper.
How competence assessed	1. B or better in coursework.
Curriculum Area:	Psychological measurement
Required Academic/ Training Activities	1. PSY 594 (Psychometrics), see Appendix B, pages 160-164. Create and evaluate measure, review paper critiquing psychometric research examining measure sold by test publisher. 2. Thesis and dissertation research. Select psychometrically sound measures for research. Create and evaluate measures using appropriate methods. 3. Capstone evaluation. Explain and defend assessment approach for clinical case. 4. Doctoral Clinical Practicum I and II (PSY 882 & 883, Appendix B, pages 276-305). Appropriate selection, use, and interpretation of measures and results.
How competence assessed	1. B or better in coursework. 2. Successful defense of thesis and dissertation proposal.

	<ul style="list-style-type: none"> 3. Successful capstone presentation. 4. Supervisor ratings on Practicum Evaluation of Competency Development form (see Appendix T, pages 839-844).
Curriculum Area:	Research methodology
Required Academic/ Training Activities	<ul style="list-style-type: none"> 1. PSY 588 (Experimental Design) see Appendix B, pages 153-156. Design research study and draft proposal. 2. PSY 730 (Clinical Psychology Proseminar) see Appendix B, pages 190-196. Write and discuss 8 brief research proposals, write and present one developed research proposal. 3. Thesis and dissertation research.
How competence assessed	<ul style="list-style-type: none"> 1. B or better in coursework 2. Successful defense of thesis and dissertation proposal.
Curriculum Area:	Techniques of data analysis
Required Academic/ Training Activities	<ul style="list-style-type: none"> 1. PSY 587 (Advanced Statistics) Appendix B, pages 149-152. Take home data analysis homework. 2. PSY 787 (Multivariate Statistics in Psychology) Appendix B, pages 261-264. Take home data analysis assignments. 3. Thesis and dissertation research. 4. Doctoral comprehensive examination or Major Area Paper.
How competence assessed	<ul style="list-style-type: none"> 1. B or better in coursework 2. Successful defense of completed thesis and dissertation. 3. Successful completion of doctoral comprehensive examination or Major Area Paper.
Curriculum Area:	Individual differences in behavior
Required Academic/ Training Activities	<ul style="list-style-type: none"> 1. PSY 596 (Assessment of Personality and Psychopathology) Appendix B, pages 175-178. Practice assessments using individual differences measure(s). 2. PSY 532 (Advanced Social Psychology) Appendix B, pages 138-139. Readings and discussion focusing on joint influence of person and situation on behavior. 3. PSY 777 (Emotions). Appendix B, pages 256-260. Individual differences readings. 4. PSY 760 (Multicultural Psychology). Appendix B, pages 214-224 Cultural group interaction assignment, research review, presentation.
How competence assessed	<ul style="list-style-type: none"> 1. B or better in coursework.
Curriculum Area:	Human development
Required Academic/ Training Activities	<ul style="list-style-type: none"> 1. PSY 597 (Advanced Developmental Psychology) Appendix B, pages 179-184. Class presentations and research review paper.
How competence assessed	<ul style="list-style-type: none"> 1. B or better in coursework.
Curriculum Area:	Dysfunctional behavior or psychopathology

Required Academic/ Training Activities	<ol style="list-style-type: none"> 1. PSY 530 (Psychopathology) Appendix B, pages 123-137. Differential diagnosis case reviews, class presentations, research review paper. 2. PSY 739 (Developmental Psychopathology). Appendix B, pages 205-213. Research review paper, class presentations. 3. Capstone examination. Explain and defend diagnoses for clinical cases. 4. Doctoral Clinical Practicum I and II (PSY 882 & 883, Appendix B, pages 276-305). Diagnose and treat clients.
How competence assessed	<ol style="list-style-type: none"> 1. B or better in coursework. 2. Successful capstone presentation. 3. Supervisor ratings on Practicum Evaluation of Competency Development form (see Appendix T, pages 839-844).
Curriculum Area:	Professional standards and ethics
Required Academic/ Training Activities	<ol style="list-style-type: none"> 1. PSY 762 (Ethics in Clinical Practice) Appendix B, pages 225-240. Ethics autobiography, ethical reasoning case studies, QOTP write-ups of readings. 3. Capstone course and examination. Ethical practice in assessment and treatment cases. 2. Doctoral Clinical Practicum I and II (PSY 882 & 883, Appendix B, pages 276-305). Clinical practice consistent with ethical guidelines.
How competence assessed	<ol style="list-style-type: none"> 1. B or better in coursework 2. Successful capstone presentations. 3. Supervisor ratings on Practicum Evaluation of Competency Development form (see Appendix T, pages 839-844).
Curriculum Area:	Theories and methods of assessment and diagnosis
Required Academic/ Training Activities	<ol style="list-style-type: none"> 1. PSY 530 (Psychopathology). Appendix B, pages 123-137. Coverage of DSM. Differential diagnosis case reviews. 2. PSY 595 (Assessment of Intelligence and Achievement). Appendix B, pages 165-174. Administer and interpret psychological measures. 3. PSY 596 (Assessment of Personality and Psychopathology). Appendix B, pages 175-178. Administer and interpret psychological measures. 4. Capstone examination. Explain and defend assessment approach for clinical case. 5. Doctoral Clinical Practicum I and II (PSY 882 & 883, Appendix B, pages 276-305). Appropriate assessment and diagnosis of practicum clients. 6. PSY 860 (Forensic Assessment I, Appendix B, pages 265-275). Complete court-ordered evaluation.
How competence assessed	<ol style="list-style-type: none"> 1. B or better in coursework. 2. Successful capstone presentation. 3. Supervisor ratings on Practicum Evaluation of Competency Development form (see Appendix T, pages 839-844).

Curriculum Area:	Theories and methods of effective intervention
Required Academic/ Training Activities	<ol style="list-style-type: none"> 1. PSY 533 (Theory and Research in Psychotherapy). Appendix B, pages 140-144. Case conceptualizations with EBP based treatment plans. 2. PSY 770 (Empirically Supported Treatments), Appendix B, pages 241-249. Class presentations (cover an EST not discussed in class; case presentation using an EST with a real client). 3. Capstone examination. Explain and defend treatment approach for clinical case. 4. Doctoral Clinical Practicum I and II (PSY 882 & 883, Appendix B, pages 276-305). Appropriate assessment and diagnosis of practicum clients.
How competence assessed	<ol style="list-style-type: none"> 1. B or better in coursework. 2. Successful capstone case presentation. 3. Supervisor ratings on Practicum Evaluation of Competency Development form (see Appendix T, pages 839-844).
Curriculum Area:	Theories and methods of consultation
Required Academic/ Training Activities	1. Doctoral Clinical Practicum I and II (PSY 882 & 883, Appendix B, pages 276-305). Effective consultation in clinical settings.
How competence assessed	<ol style="list-style-type: none"> 1. Supervisor ratings on Practicum Evaluation of Competency Development form (see Appendix T, pages 839-844). 2. B or better in coursework.
Curriculum Area:	Theories and methods of supervision
Required Academic/ Training Activities	1. Supervision seminar see Appendix J, pages 683-687. Students required to work as peer supervisor for one semester.
How competence assessed	1. Ongoing evaluation by licensed meta-supervisor.
Curriculum Area:	Theories and methods of evaluating the efficacy of interventions
Required Academic/ Training Activities	<ol style="list-style-type: none"> 1. PSY 533 (Theory and Research in Psychotherapy). Appendix B, pages 140-144. Design clinical trial. 2. PSY 770 (Empirically Supported Treatments), Appendix B, pages 241-249. 3. Per-session use of OQ45 for every client treated at PSC (see Appendix I, pages 677-680).
How competence assessed	<ol style="list-style-type: none"> 1. B or better in coursework. 2. Quality assurance reviews of PSC case files (see Appendix I, page 681). 3. On-going supervisor evaluations of PSC practicum students concerning integration of OQ45 results in treatment planning.
Curriculum Area:	Issues of cultural and individual diversity that are relevant to all of the above
Required Academic/ Training Activities	1. PSY 760 (Multicultural Psychology) Appendix B, pages 214-224. Cultural group interaction assignment, research review, presentation

	<p>2. Doctoral Clinical Practicum I and II (PSY 882 & 883, Appendix B, pages 276-305). Appropriate consideration of diversity in assessment, diagnosis, consultation, and treatment.</p> <p>3. Capstone examination. Describe appropriate cultural considerations in diagnosis, treatment planning, and treatment strategy.</p>
How competence assessed	<p>1. B or better in coursework.</p> <p>2. Supervisor ratings on Practicum Evaluation of Competency Development form (see Appendix T, pages 839-844).</p> <p>3. Successful capstone presentations.</p>
Curriculum Area:	Attitudes essential for lifelong learning, scholarly inquiry, and professional problem-solving
Required Academic/ Training Activities	<p>1. PSY 730 (Clinical Psychology Proseminar, Appendix B, pages 190-196). Assignments require students to propose research studies that follow-up existing studies. Career development readings and class discussion.</p> <p>2. PSY 770 (Empirically Supported Treatments, Appendix B, pages 241-249). Assignments require students to implement the principles and techniques of an EST with a real client. Readings and assignments focus on developing an evidence-based practice orientation toward clinical work.</p>
How competence assessed	1. B or better in coursework.

B4. Practica – University and Field (see Appendix D, page 566, for more information)

Since the 2006 site visit, the following practicum placements have been used.

Independent sites (those supervised directly by agency licensed psychologists):

ADAPT Counseling: Provides experience treating children and families, some of whom have specific problems with sexual acting out. Students also assist in providing training for various agencies.

Ben Taub General Hospital: Provides experience with the assessment and treatment of acutely disturbed psychiatric inpatients. Hospital based outpatient treatment is also rendered.

Rusk State Hospital: This is a psychiatric hospital operated by the State of Texas. Students perform both treatment and assessment of both civil and court-committed case and have the opportunity to work as part of an interdisciplinary team.

Federal Bureau of Prisons: Two sites have been used providing experience with treatment of both male and female inmates, as well as crisis intervention services and staff consultation.

Texas Youth Commission: Two state schools allow students the experience of working with troubled juveniles and providing consultation to paraprofessional staff.

Greater Houston Neurosurgery Center: This site provided opportunities for students to assist in conducting neuropsychological evaluations and to participate in consultation to medical staff.

Private Practice Settings: Three settings (Harman, Massey, & Saunders) have provided students opportunities to pursue treatment and assessment of a full range of

outpatients and to do some forensic assessment work. These placements also familiarize students with the ins and outs of private practice.

Harris County Juvenile Services: Students at this site gain experience in adolescent assessment at the novice or intermediate level. It also allows students to observe more complex assessments.

The Institute for Rehabilitation and Research: This is a hospital setting, located in the TX Medical Center that provides students opportunities to conduct neuropsychological assessment under the supervision of a psychologist holding an ABPP in neuropsychology. It also provides experience in working with an interdisciplinary team and in providing consultation to various disciplines.

Touchstone Neurobehavioral Resources: This site provides experience assessing and treating institutionalized individuals with brain injuries or other neurological disorders. Students provide consultation and work as part of an interdisciplinary team.

SHSU Psychological Services Center: The SHSU training clinic provides assessment and treatment experience ranging from novice to advanced. Clients include adults, children, families, couples, and the judicial system.

Satellite Sites (those for which students provide services through the PSC and supervised directly by licensed psychologists from the PSC):

Montgomery County Adult Probation: This site requires both assessment and treatment of adult offenders, as well as opportunities to provide group and individual treatment at a residential substance abuse facility. Cases range from novice to advanced.

Montgomery County Juvenile Services: This site primarily focuses on the assessment of troubled juveniles.

Walker County Adult Probation: This site provides students experience in both assessment and treatment of adult offenders. Cases range from novice to advanced.

All field settings have been approved by the DCT as clearly committed to training. All field settings are visited by the DCT prior to such approval, and periodically afterwards as indicated. All outside supervisors are interviewed and their credentials examined by the DCT. Every effort is made to maintain open lines of communication with facilities during students' practicum assignments. Outside supervisors are asked to submit written evaluations of each student each semester (those forms are included in Appendix T, pages 839-844).

The Program's first three years emphasize clinical experiences at the PSC or at carefully selected sites appropriate for the emerging skills of the novice clinician. All students are enrolled in an on-campus practicum class where they present and discuss cases from their various settings. Available practicum sites now include community outpatient services, rehabilitation agencies, probation and correctional facilities, hospital settings, and private practices. Opportunities are available for students to conduct therapy and assessment with populations of all ages. Potential clientele include persons with a variety of diagnoses, including those who are acutely psychotic or suffering from serious neurological disorders. Students also participate in court-ordered evaluations. In all placements, students are provided opportunities to integrate theory and

practice and are encouraged to ask questions and to discuss their experiences. Students are also encouraged to develop research questions applicable to practicum sites.

In the practicum assignment process, the DCT works to ensure that all students receive supervised practicum experience with youth and adults, and with assessment and therapy across a spectrum of psychopathology. The DCT meets with students individually to discuss their training interests, training needs, and potentially appropriate sites. Although the DCT makes an effort to respect student preferences regarding practicum placements, students are required to work in a variety of sites throughout their graduate career. Student may not restrict their practicum experiences to a particular population or setting.

Formative and Summative Evaluation:

At the end of each semester, all clinical supervisors collaborate on feedback regarding clinical development and competence that will be individually provided to each student. Development of clinical competencies is discussed with the student, and any areas needing remediation are reviewed with the student. A growth plan is developed, if needed, to remediate deficiencies. Specific points at which intervention may be triggered are outlined in Table B.2.

Students performance is comprehensively evaluated each year by the Program faculty. As a prerequisite for the evaluation, students complete a self-assessment delineating accomplishments, strengths, and weaknesses with respect to the prior academic year. Specifically, students review their academic, clinical, and research accomplishments, and assess their contributions to the Program community. If their evaluation letters from the previous year identified any areas that needed remediation, they are required to address their progress in those areas. Also, ongoing evaluation is provided by University supervisors in both research and clinical settings and by field supervisors of clinical work. If students are not developing or progressing appropriately, the Program faculty confers and suggests remedial measures designed to promote the development of required competencies to the student. Feedback regularly sought and received from internship sites indicates that students are generally well-prepared for the internship experience (see Domain F, page 33) on student evaluations.

Issues of Concern

Following the 2006 site visit, the CoA expressed concern regarding the Program's coverage of the cognitive and affective basis of behavior. Several letters were exchanged and the Program ultimately initiated a course (PSY 777, Emotions) designed to cover both elements. In the Fall of 2009, CoA agreed that the course was sufficient to provide broad and general coverage of both areas. All correspondence on this issue is included in Appendix L, pages 692-760.

DOMAIN C: PROGRAM RESOURCES

C1. Core Faculty, Associated Faculty, and Other Contributors

The Department has the full-time equivalent of 20 psychology faculty members. Of those 9 comprise the core program faculty and 9 others (including two colleagues from the College of Criminal Justice) function as associated faculty. Ten other contributors who are not on the

University faculty serve in various adjunct roles. To be designated core faculty, one must devote no less than 50% of one's university time to the Program. Duties may include teaching classes taken by Program students, directing theses and dissertations, serving on thesis and dissertation committees, developing and grading doctoral comprehensive examinations, serving on Major Area Paper committees, screening candidates for Program admission, providing clinical supervision, evaluating Capstone competencies, mentoring doctoral students on other research projects (including pursuing grant funding), contributing to overall program design (e.g., the Program Handbook, clinic procedures, degree requirements), and arranging practicum opportunities. Associated faculty are all members of the university faculty who perform important functions for the Program but devote less than 50% of their time to such endeavors. Typically, these individuals teach classes, provide clinical supervision, and contribute to student research, including theses and dissertations. The major role of other contributors is providing direct clinical supervision for students engaged in doctoral practicum. However, some of them occasionally make presentations for the student cohort and serve on thesis/dissertation committees or support the externship provided by the Sam Houston Area Psychological Association (SHAPA).

C1a. Core Faculty Members as a Unit

The Program faculty are a designated departmental committee officially appointed by the Department Chair in consultation with the DCT. This committee meets weekly to engage in program planning and to conduct on-going business. The committee is chaired by the DCT in consultation with the Associate DCT, and it is collectively responsible for the design, maintenance, and day-to-day operation of the Program. This includes formulating the degree plan, establishing and evaluating competencies necessary for students to achieve in order to complete the Program, making admission decisions, evaluating overall student progress and any needs for remediation, determining marketing strategies for the Program, overseeing all clinical placements offered to students, and evaluating all critical elements of the Program. They are subject to administrative oversight at the Department, College, and University levels, but the independence of the core faculty in making professional and clinical decisions has been well respected by university administrators.

C1b. Determining Sufficiency of Number and Kind of Faculty

Given the goals and objectives of the Program, it is essential that faculty offer sufficient expertise that will provide students (a) basic knowledge of the broad and general principles of psychology, (b) skills and experience in psychological research that enable them to produce presentations and publications, (c) basic clinical competencies necessary to proceed to a pre-doctoral internship, and (d) training as legally informed clinicians. Our current faculty give us sufficient resources to accomplish all of these objectives. Broad and general graduate level courses are taught by individuals who are teaching (and publishing) in their areas of expertise (e.g., Bruce, Desforjes, R. Miller, Wilson). Expertise in research is taught and modeled by faculty members with extensive records of publication that include students as frequent co-authors (e.g., Anastasi, Boccaccini, Henderson). Students may join a variety of research teams (some of them supported by federal funding), and sufficient faculty are available to assure that students can assemble appropriate committees for both theses and dissertations. Given the Program's emphasis, research mentors are available with expertise in both forensic applications of clinical psychology (e.g. Boccaccini, Henderson, Lyons, A. Miller, H. Miller, Varela) and in

more general areas of clinical psychology (e.g., Allen, Harman, Henderson, Nelson, Noland). Some of them focus mainly on adult populations (e.g., Boccaccini, Nelson, Varela), but others have special research interests in children and adolescents (e.g., Allen, Henderson, Noland), thus broadening student research opportunities. The DCT's experience as an active participant in national training organizations for over 10 years (e.g., CUDCP, ADPTC) supports the conclusion that this Program offers the numbers and expertise of faculty members generally found in clinical psychology doctoral programs.

The present cohort of faculty clinicians allows for practicum classes of no more than 9 students (typically 5-8, some of whom receive direct supervision from a psychologist serving as an outside supervisor). No faculty member is asked to supervise a case for which he or she lacks the required competence and experience. The current cohort provides expertise in assessing and treating children and adolescents (e.g., Allen, Harman, Henderson, Noland, Johnson), families and couples (e.g., Allen, Henderson), and persons with special needs in the area of behavioral medicine (e.g., Nelson). They are also skilled in providing forensic assessment (e.g., Conroy, Johnson). All clinicians provide some supervision of more general adult cases. The current faculty also provides expertise for consultation to outside practicum sites with special populations (e.g., neuropsychology – Nelson; forensic populations – Conroy, Henderson, Johnson).

C1c. Theoretical Perspectives and Academic/Applied Experience

The faculty are trained in a variety of theoretical perspectives, but many rely on Cognitive Behavioral approaches to treatment. However, as can be seen from the course syllabi, rather than emphasizing a particular theoretical perspective, the Program strongly supports the application of evidenced based practice, and many supervisors are trained in, and provide supervision of, the application of empirically supported treatments.

Program faculty vary with regard to the degree to which their professional activities reflect research, clinical practice, or a balance between the two. Some are totally devoted to furthering the field through academic research, publishing in a variety of venues and mentoring student research projects (e.g., Boccaccini, R. Miller). The DCT is primarily responsible for developing clinical aspects of training, as well as supervising the majority of forensic work. Other faculty conduct research, pursue grant funding, and incorporate clinical work and supervision into these endeavors (e.g., Allen, Henderson, A. Miller). This mix provides a wide variety of role models and is congruent with the Program's goals and objectives, which emphasize training across the research-practice spectrum.

C1d. Competence and Credentials

Extensive publication records in clinical psychology and in psychology with a forensic emphasis (e.g., Boccaccini, Henderson) speak to the special research competence of the Program faculty. Faculty members have also been the recipients of research and teaching awards at the College and University, and national and international levels (e.g., Boccaccini, Henderson, R. Miller). Faculty expertise has been recognized in grant awards from federal agencies (e.g., Boccaccini, Henderson, Nelson). Two faculty are certified by the American Board of Professional Psychology in their special areas of expertise – Conroy (forensic) and Nelson (clinical health).

Associated faculty include an individual with a degree in law as well as psychology (Lyons), who is especially qualified to teach mental health law and mentor legally informed clinicians.

C1e. Available Role Models

The Program does not use a mentor model. Students are accepted by the Program and not by an individual faculty member. As such, students are encouraged to work with a variety of faculty members both in research and clinical arenas. With a low student to faculty ratio (i.e., 4.5:1 for Program faculty), students often do both research and clinical work under a variety of supervisors and take advantage of a mixture of role models. Program evaluations have suggested that students appreciate these opportunities and generally judge the faculty to be open and welcoming (see Appendix N, pages 772-801, for an example).

SHSU has a three-course-per semester teaching load. Doctoral courses count as two courses, so a Program faculty member who is teaching a doctoral (700 or 800) class usually teaches no more than one additional course that term. All in-coming faculty are placed on a slightly reduced load, and little University service is expected of them, allowing them to concentrate on instruction and supervision while meeting their research obligations and departmental tenure standards. In addition, some faculty have reassigned time for grant-funded activities or for administrative duties (e.g., DCT, Associate DCT, Clinic Director).

C2. Evaluating Applicants

Each year applicants are evaluated in three stages: 1) review of applications, 2) Interview Weekend, and 3) determination of offers and waitlists. Immediately following the application deadline (December 1st), a subcommittee of the Program faculty reviews all applications and suggests whom should definitely be invited for an interview, whom should be further considered for a possible interview, and whom should not receive further consideration. These judgments include careful consideration of GRE scores, GPAs (taking into account one's institution and level of training), three letters of recommendation, and a personal statement indicating why one believes one is a good match to this particular program. The entire Program faculty then meets, reviews the committee suggestions, and determines who will be invited to campus for an interview. Interview Weekend generally includes 22-28 applicants. Each has the opportunity to interview with three faculty members and a number of current students, and each tours the campus and attends an extensive question-and-answer session. Applicants interact with Program students and faculty informally as well; the weekend ends with a social gathering of faculty and students. The following Monday faculty receive input from current students in the Program before making final decisions regarding offers to be extended and the order of the waitlist. CUDCP guidelines are followed throughout the process.

C3. Additional Resources

Students are made aware of additional resources by the Program and University websites, an orientation day for new students that occurs the week before fall classes begin, an evening orientation for new graduate students sponsored by the Office of Graduate Studies, and the Program and Clinic Handbooks. All students must sign a form acknowledging receipt of a copy of the Program Handbook.

C3a. Financial Support

All program students currently receive a 9-month stipend of \$16,000 annually from the University (a 62% increase in funding since our last accreditation), they usually receive additional summer funding from the Program (generally around \$3,000). Stipends are dispersed as research assistantships (including some funded by grants), teaching assistantships, scholarships, clinical assistantships (either internal or external), or assignments to relevant activities within the University (e.g., the McNair Scholars Program). Students are also eligible for loans through the Office of Financial Aid. The Office of Graduate Studies provides travel funds for students who are presenting at conferences. Each year, the Program also makes small research awards on a competitive basis to assist students in pursuing research projects. Psychological Services Center (PSC) funds are also available to pay honoraria for guest speakers for the Program from outside the institution.

C3b. Clerical and Technical Support

The Department has two full-time secretaries and a work study student. In addition, the Program has its own full time secretary and two work study students. Computer Services provides technical support for the computer system, and the University holds maintenance contracts with technical support services for other machinery. Assistance with grant-writing, public relations, graphic design, and mentoring is also available. Technical assistance is provided for creating training materials (e.g., DVDs, audio files) or for offering materials online.

C3c. Training Materials and Equipment

The Program maintains its own library and an extensive collection of psychological testing materials for the exclusive use of doctoral students and faculty. The PSC is equipped with a state-of-the-art observation system allowing for video recording in any room, live supervision, and bug-in-the-ear capabilities, all with special protections put in place to assure confidentiality. A variety of computer software is provided both by the Department and the Program. LCD projectors, lap top computers, and VCR or DVD players are all available.

C3d. Physical Facilities

The Department recently relocated to a new building housing its College that offers dedicated classrooms equipped with smart boards and projectors for computer-aided instruction, faculty offices, research labs, and graduate student offices. Each faculty office has a computer, monitor, printer, and telephone. Wireless access is available throughout the campus. The Department also has its own conference room and break room. In addition, students have access to computer labs with high speed printers.

The PSC recently moved to its own free-standing, 10,000 square-foot building. It is comfortably furnished with a large lobby area, six dedicated therapy offices, a family room, two class rooms (one of which can be used as a conference room with seating for 50 and that contains a library collection of clinically-relevant books and journals), a kitchen area, and ample storage space. Like all buildings on campus, it is disability accessible.

C3e. Student Support Services

The University Division of Student Services supports the Graduate Student Organization. The well-staffed Health Center administers medical examinations and treatment. Mental health and disability services are provided to students free of charge by the University Counseling and

Disability Services Center. Similarly, legal services are available at no charge to students through an office Legal Aid Services. The Health and Kinesiology Center has extensive exercise and intramural sports facilities available for faculty, staff, and graduate students. The Office of Graduate Studies and the Office of Financial Aid work closely with Program students to meet their needs. The Newton Gresham Library provides an extensive collection of materials that includes online access to PsycARTICLES and other full-text journal articles. Interlibrary loan is also available.

C3f. Practicum Site Facilities

In addition to the on-campus training clinic, practicum sites are investigated and developed by the DCT to provide training and supervision consistent with the Program's goals, objectives, and training model. Each site is visited initially by the DCT and then, following the initial visit, on an as-needed basis. The DCT serves as official liaison to clinicians designated as primary supervisors at each site and is also responsible for student practicum assignments. These are made each semester with consideration for student needs and desires, student fit, and the agency mission. Student evaluations done at the end of each semester play a major role in deciding whether any site or individual supervisor is continuing to meet the Program's training needs.

C4. Not Applicable

Additional Domain C Items. CoA previously asked that the Program address distribution of faculty teaching loads, supervision responsibilities, and administrative duties in our next self study. All Program faculty are considered "research faculty" and required to teach the equivalent of 3 courses per semester. However, doctoral courses count as two courses. Therefore, the DCT and the Department Chair collaborate to assure that each Program faculty member routinely teaches a doctoral course each semester so that Program faculty rarely teach more than two courses. In addition, all faculty are granted a one-course release when they have chaired five theses or three dissertations, so Program faculty sometimes teach only one course.

At the time of the 2006 site visit, the Program was seeking to hire an additional licensed clinical psychologist in a staff position to assume full time supervision responsibilities. Dr. Darryl Johnson assumed this position in Fall 2007. He is competent in supervision of both assessment and therapy of adults and juveniles. He also is qualified to perform forensic work. This has significantly reduced the direct supervision loads of Program faculty members.

At the present time, Dr. Conroy still functions as both DCT and Clinic Director. However, Dr. Boccaccini has assumed the position of Associate DCT and has taken responsibility for student advisement and other administrative duties. In addition, the newly hired staff supervisor (Dr. Johnson) has assumed the duties of Assistant Clinic Director and is fully involved in the administration of the clinic and other practicum sites. This has effectively redistributed the administrative duties.

DOMAIN D: CULTURAL AND INDIVIDUAL DIFFERENCES AND DIVERSITY

D1. Systematic Efforts to Attract and Retain Diverse Students and Faculty

Systematic plans have been devised at the University, Department, and Program levels to increase the diversity of our faculty and student cohorts. These include attention to both recruitment and retention.

Faculty. The Human Resources Department of the University maintains an Affirmative Action Plan (HR Finance and Operations Human Resources Policy ER-4 [http://www.shsu.edu/administrative/policies/finop/human_resources/documents/ER-4.pdf]). Although this plan includes provisions specifically designed to prevent discrimination, it also includes a Faculty Recruitment Plan to Remedy Underutilization of Minorities and Women (http://www.shsu.edu/administrative/policies/finop/human_resources/documents/ER-4.pdf).

The Program has adopted a specific four-pronged strategy to both recruit and retain a diverse faculty. First, our web-based promotional materials are designed to highlight the Program's emphasis on Diversity. Since our last accreditation, we have added a diversity section to our website (see Appendix D, page 605) that details experiences and research projects (completed and in progress) that address diversity issues. Second, speakers sponsored by the Program are brought to campus to promote training in and acceptance of multiculturalism. For example, Melba Vasquez (currently President Elect of APA), well known for her publications and presentations in this regard, was the Program's Spring Speaker in 2008. Third, the Program strives to publicize its work in the area of diversity to relevant organizations. For example, in 2009, students and faculty arranged a presentation on the Program's work in diversity for the Sam Houston Area Psychological Association (SHAPA), an organization from which we have been successful in recruiting presenters and supervisors. And, finally, the Program strongly supported the Texas State System's "Grow Your Own" scholarship program (see Appendix V). This program provides an opportunity for qualified minority students to receive substantial scholarship funding to complete their graduate school work on condition that they agree to return to SHSU as a tenure-track faculty member following completion of their degree and/or post-doctoral training. This award was won by one of our Asian-American students in 2007, and she will be joining our faculty following completion of her post-doctoral training in the Fall of 2012.

Students. The University's Division of Student Services has created an office for Multicultural and International Student Services (MISS http://www.shsu.edu/~miss_sa/v2/)); it enhances the higher-educational experience for all students, although particular attention is given to under-represented students in the areas of race, culture, religion, sexual orientation, gender, and physical disability. As part of its mission to educate students to understand and respect diversity and to train students to promote social justice, the MISS office sponsors many cultural programs each year. These include monthly diversity luncheons, International Student Coffee Hours, UniDiversity Week, Black History Month, and Hispanic Heritage Month Programming. The University has generally been successful in attracting minority students, with a student body of over 25% recognized minorities.

The Program specifically strives to recruit and retain a diverse student body by identifying Program applicants who would increase diversity, sponsoring speakers who can address issues of diversity and multiculturalism, taking advantage of conference opportunities to recruit diverse students, making special note of research related to diversity on our website, and paying special attention to diversity in regard to physical décor. When reviewing applicants, faculty consider a

person's credentials and fit with the Program, and what the person might bring to the diversity of the Program. Faculty make a special effort to invite a diverse group of students for Interview Weekend, and both faculty and students serve in leadership roles in organizations focused on diversity and mental health issues (e.g., a student serves as Southern Regional Representative of the Association of Black Psychologists, and Craig Henderson is faculty sponsor for the SHSU student association). In addition to Dr. Melba Vasquez, our Spring Speaker series has included Dr. King Davis (an African American who is Director of the Hogg Foundation). From 2007-2009, the DCT or a representative has provided information regarding our Program during the CUDCP diversity open house offered at the annual CUDCP conference. The PSC is the one physical building over which the Program has complete control. In this setting, efforts are made to display decorative items reflecting cultural diversity; holiday decorations provided by the students are encouraged with the caveat that they reflect the full spectrum of culture represented by the particular holiday season.

The Program works to retain students of diverse backgrounds—like all students—by pursuing a warm and supportive tone that offers substantial opportunity for students to voice concerns or difficulties. New students are paired with an older student mentor who assists them with details of initial adjustment. All students are encouraged to be involved in the Program's graduate student organization which arranges social activities as well as programs related to academic pursuits and group projects. Finally, all students are encouraged to join research teams that include the full spectrum of students.

D2. Training in Cultural and Individual Diversity

Discussion of the literature relating to cultural diversity is begun in students' first semester in the Program when they enroll in the PSY 730, Clinical Psychology Proseminar and PSY 533, Theory and Research in Psychotherapy. PSY 597, Advanced Developmental Psychology, is generally taken in the first or second year and includes specific examination of cultural beliefs regarding child rearing, rites of passage, marriage and family, sexual orientation, religion, and death and dying. Cultural influences are also considered in PSY 777, Emotions. Later in the sequence PSY 770, Empirically Supported Treatments, includes coverage of diversity. A specific course (PSY 760, Multicultural Psychology) is required of all students at the doctoral level. This course was originally a social/research-oriented course taught by a non-clinician. However, in response to student feedback, it was totally revamped in 2006. It is now very clinically oriented, includes student presentations involving contact with various cultural groups, and has incorporated the assistance of the campus International Student Organization.

Multiculturalism in the practicum setting is introduced in PSY 691, Practicum I, both by discussion and by students presenting a cultural self-analysis. It is continued as an element of evaluation in the students' Capstone examination at the end of their second year. Students experience cultural diversity in subsequent practicum settings ranging from the more rural population of the PSC to the very urban diversity of metropolitan Houston. Students are encouraged to seek out client assignments reflecting a diverse population and to maintain records of these contacts for internship applications. Respect for cultural and individual diversity is infused across the curriculum as demonstrated in Table D1 below. Doctoral Comprehensive Examinations commonly include questions regarding diversity in clinical work (see Appendix O,

pages 821-823, for an example). As noted in Domain B, students are specifically evaluated in areas of multicultural competence throughout their time in the Program.

Table D1

Courses in Which Multicultural Issues Are Addressed	
Advanced Developmental Psychology	Forensic Assessment I & II
Assessment of Personality and Psychopathology	Mental Health Law
Doctoral Clinical Practicum I & II	Multicultural Psychology
Emotions	Practicum I
Empirically Supported Treatments	Psychopathology
Ethics in Clinical Practice	Theory & Research in Psychotherapy I & II

Additional Domain D Issues. CoA previously asked that we comment on our strategic plan for increasing faculty diversity and our success in that area in our next self study. Specifically, we have developed a four pronged plan: 1) We highlight our commitment to diversity on our website. 2) We bring programs and speakers to campus to focus on diversity. 3) We participate in diversity programs at national conferences such as CUDCP. 4) We continue to support the Texas State System’s “Grow Your Own” scholarship program. Specifics of the plan are mentioned above. Since our last site visit we have hired a Latino Program faculty member (Dr. Jorge Varela) and have secured a commitment for a new Asian-American faculty member from our student ranks (Lisa Kan) through the Texas State University System’s “Grow Your Own” program. She will be joining the faculty in 2012.

DOMAIN E: STUDENT-FACULTY RELATIONS

E1. Student Rights

The faculty and students strive to create an environment of mutual respect and collegiality. Program faculty work diligently to include students in decision-making that affects their training. A representative elected by the students attends all Program faculty meetings, and the first agenda item each week is student questions or concerns. Students are encouraged to examine potential conflicts and to respond to them in light of the APA Ethical Principles of Psychologists and Code of Conduct and the *Student-Faculty Relationships* section of the *Program Handbook*, Appendix C, pages 362-363, which addresses collaborative and dual relationships. Major committees often include a student representative.

During the initial orientation that occurs before Fall classes begin, incoming students are provided with a *Program Handbook* that discusses major policies and covers programmatic procedures. Important procedures are discussed at the orientation, but students also acknowledge receipt of the *Handbook* in writing, and are encouraged to carefully review the document. As they progress through the program, students are notified by the DCT of relevant new or revised policies, and new handbooks are redistributed when updates occur. The student grievance policy (see *Program Handbook Appendix C, pages 438-440*), academic honesty policy (see *Program Handbook, Appendix C, page 437*) and other policies, such as those concerned with racial and sexual harassment, are also on the website in the Student Guidelines furnished by Student

Services. Finally, services such as library and financial aid information are provided in the Student Guidelines. URL addresses to the websites follow:

- ▶ Grievance Policy
(<http://www.shsu.edu/students/guide/grievnc/index.html>)
- ▶ Academic Policies and Procedures
(<http://www.shsu.edu/students/guide/polpro/index.html>)
- ▶ Newton Gresham Library
(<http://library.shsu.edu/>)
- ▶ Student Services
(http://www.shsu.edu/~slo_stdss/)
- ▶ Financial Aid
(http://www.shsu.edu/~sfa_www/)
- ▶ Dean of Students Policies
(<http://www.shsu.edu/students/guide/dean/index.html>)
- ▶ Related University Policies including Racial and Sexual Harassment
(<http://www.shsu.edu/students/guide/related/index.html>)

E2. Faculty Accessibility to Students

Within the Program, students are not limited to a single mentor, and they are encouraged to interact and engage in research with a variety of faculty members. There is an open door policy inviting students to talk with the DCT or any faculty member about concerns related to the Program.

Students may request group meetings with faculty to discuss new (either actual or potential) developments. Likewise, Program faculty have arranged meetings with the student body to disperse accurate information regarding issues of interest. Student input is solicited on issues such as selecting incoming students and the hiring of new Department faculty.

The majority of courses are taught by Program faculty, which naturally ensures accessibility. Furthermore, access is provided through supervision of clinical skills and research as well as regular meetings of faculty-led research teams. Faculty are required to post their office hours on their syllabi, although substantial additional contact takes place via phone calls, email, and drop-in consultation. Program faculty are also sometimes invited to students' social gatherings.

E3. Respect for Student Diversity

The Program is steadfast in its respect for its students. Grievance procedures are well publicized, and student absences for religious holidays are readily allowed. The University policy regarding absences on religious holidays is available at <http://www.shsu.edu/administrative/faculty/sectionb.html#stuabs>.

The Program strives to be responsive to special needs or requests related to individual diversity. For example, the Program has made accommodations for students with disabilities, (e.g., purchasing dictation software to support a student's record-keeping). The Program also arranged a practicum placement for a Spanish-speaking student who desired a supervised clinical

experience serving Spanish-speaking clients. (Further discussion of respect for cultural and individual differences among students was presented in Domain D.)

Students are completing the Program in a timely fashion. At the time of this writing, no one is lagging behind an expected graduation date (i.e., the year in which their pre-doctoral internship is completed). Over a 7-year period, students have obtained their degrees in 5.7 years on average, with those entering at the MA/MS level graduating 1 year sooner than those entering at the BA/BS level. Since the Program officially accepted the first class in 1998, 89 students have entered the program, 38 have graduated, 37 remain in the Program and 14 have withdrawn. This yields an overall attrition rate of 15.8%. Of those 14, students left the Program due to death (1), serious illness (1), transfer to another university (2), and dismissal (5), with the remainder leaving for other personal reasons (5).

E4. Information Provided to Students at the Time of Admission/Annual Evaluation

Before their first semester begins, incoming students attend an orientation session designed to acquaint them with the Program, the Department, and the University. Students are provided the *Program Handbook* (which is also available on-line), which details the degree plan, performance expectations, and evaluation procedures. Procedures for maintaining clinical privileges, revocation of clinical privileges, and remediation opportunities are in the *Program Handbook* as well. Any revisions or new policies are made available on the Program listserv, with electronic copies posted online, and/or hard copies placed in student mail boxes.

Each student in the Program receives a yearly evaluation letter that is placed in his or her file (see *Program Handbook*, Appendix C, page 413). This letter focuses on the student's performance in the four primary areas of (a) academics, (b) research, (c) clinical work, and (d) departmental citizenship. Each summer, students are asked to provide a self-evaluation letter in which they assess their performance in these areas, listing their academic achievements, their perspective on their clinical development, special accomplishments during the year (e.g., conference presentations, publications, awards) and perceived weaknesses. This letter then goes to the DCT who, in consultation with the Program faculty, identifies the faculty member working most closely with the student; he or she then drafts an evaluation letter. All of the Program faculty then meets to review the letter and to add their contributions. After any modifications are made, the student and the primary faculty member meet to discuss the letter. (Examples of evaluation letters and a remediation plan and result are included in Appendix P, pages 825-826, and Appendix Q, pages 828-829.)

Goals of the process and letter are to:

- ensure that, at least once each year the entire Program faculty share their assessments of each student in the Program
- help provide the student with an overview of his or her annual performance
- chart the trajectory of the student's graduate career
- provide a formal means for ensuring that students are aware of their appropriate progress in the Program and any approaching deadlines
- provide students with feedback about aspects of their performance and professional development that might not otherwise be formally evaluated (e.g., ability to work with peers, strengths and weaknesses relative to academic or clinical career paths).
- provide the student with guidance regarding any problems that require remediation.

In addition to the annual evaluation, faculty frequently discuss in their weekly meetings ongoing appraisals of student progress as the need arises. Faculty address any substantial concerns about students long before the annual review.

E5. Records of Formal Complaints and Grievances

The Program is not aware of any formal student complaints or grievances since the last site visit in June of 2006. Should such a complaint be received, it would be kept in a locked cabinet in the Psychological Services Center. The cabinet also houses two files on each student and former student: one file contains academic records and the other contains evaluations of clinical performance.

DOMAIN F: PROGRAM SELF-ASSESSMENT AND QUALITY ENHANCEMENT

F1. Continuing Self-Study

The Program has developed a systematic self-assessment and quality enhancement process to provide aggregated outcome data regarding its effectiveness in achieving Program goals and objectives. Proximal and distal outcome data for each Program goal is provided in *Attachment F1* and Tables 8-10.

- (a) **Effectiveness in achieving goals and objectives.** The Program evaluates its effectiveness in meeting the goals, objectives, and required competencies outlined in Domain B through a systematic process of weekly, semesterly, and yearly evaluations (see *Self Assessment Process* flowchart, Appendix F, page 660).

Step 1. All Program faculty members and a student representative meet weekly to discuss day-to-day Program functioning, identify potential problems, and work towards solving them as they arise. Sub-committees of faculty and students may be formed to more fully investigate problems and propose solutions. Recently addressed issues include: adding the Capstone course to develop and assess student competencies, improving the Program's website, adding new practicum sites and supervisors, and developing remediation plans for students who were failing to progress in the Program (student representative not present).

Step 2. At the end of each semester, students provide evaluations of their practicum experience (see Appendix K, pages 689-690) and each course they completed (see Appendix S, pages 836-837). Each practicum supervisor also provides an evaluation of each supervisee (see Appendix T, pages 839-844). We also evaluate students' progress on required competencies based on the work in graduate training conducted by the Association of Psychology Training Clinics (APTC) and expanded upon by the Assessment of Competency Benchmarks Work Group (ACBWC; Fouad et al., 2009). Students' progress in achieving Program competencies (described in Domain B) are documented in the Omnibus Evaluation of Competency Development form (see Appendix G, pages 662-672). Finally, the Department Chair evaluates each student instructor using information from the University-based teaching evaluation system.

Step 3. Annual evaluation begins with a thorough examination of the development of each student in the Program. This process begins with each student submitting a written self-evaluation letter, describing progress in the areas of coursework, research, clinical experience, and teaching. The Program faculty then meet to discuss whether each student is making progress toward the Program's goals, objectives, and required competencies. Information used for this review includes the student's self-evaluation letter, end of semester evaluations from supervisors, transcripts, thesis/dissertation progress, publications, conference presentations, results from doctoral comprehensive exams and Capstone performance, and perceptions of the student's progress from faculty members. Table 1, Appendix W, page 852 provides aggregated proximal outcome data for many of the competency indicators used in this evaluation process. The Program faculty compose an annual evaluation letter integrating the information above and provide this to the student (see Appendix P, pages 825-826 for sample evaluation letters).

The second component of the yearly evaluation is to collect and review information about distal outcomes of student performance, such as success at securing APA-accredited internships, post-doctoral positions, and full-time employment (see *Tables 8-9*).

The third component of the yearly evaluation is a thorough, anonymous evaluation of the Program provided by each current student (see Appendix C, pages 424-425). Responses to this evaluation are compiled for the faculty by a student representative (see sample in Appendix N, pages 772-801). The Program integrally involves students in Program decisions. In addition to the student representative who attends the weekly faculty meeting, student meetings are held as needed. Students currently serve on standing committees focusing on the Program's handbook, self study, and website. The Program also disseminates information to students using a Program listserv (Clindoc).

With respect to feedback regarding the effectiveness of the Program's training model and philosophy (and the practical implementation of these broader issues in the development of student competencies) in preparing students for their future work and careers, the Program bi-annually surveys graduates about the strengths and weaknesses of the Program (see Appendix U, page 846). Our current survey data suggests that Program graduates were very pleased with their exposure to diverse practicum settings, their assessment training, and in particular, forensic assessment, and applying psychological concepts, theories, and practices to the legal system. The strengths highlighted by Program graduates suggest that they are pleased with the way in which the Program's training model and philosophy is preparing them to be successful in their jobs and careers. Weaknesses highlighted by program graduates include low stipends, faculty turnover, and a desire for more training in providing supervision (see Appendix W, Figure 3, page 865). We have addressed these deficiencies by working with the university administration to increase student stipends, retaining new faculty (no departures since 2008), and expanding the supervision seminar to require students to provide peer supervision, when in the past it was voluntary. Relative to previous survey data, graduates report that they are better trained to provide consultation (increase from an average of 3.75 to 4.36), supervise (increase from 2.61 to 3.63, although this was still a relative weakness), and overall increase in satisfaction (increase from 4.08 to 4.55).

- (b) **Relation of Program's Graduate Education and Professional Training Process to Goals, Objectives, and Competencies.** Table B2 provides detailed information about how the Program goals and objectives presented in Domain B are met through the Program's graduate education and professional training. Please see Appendix W, pages 852-865 for a summary of how the Program is currently meeting its goals, objectives, and competencies in terms of proximal and distal outcome data. Tables in Appendix W summarize are organized by Program goals, objectives and competencies discussed in Section B and summarize the following indicators of program success: (a) students' mastery of scientific psychology; (b) students mastery of Capstone, doctoral comprehensive exams, and Major Area Papers; (c) ratings of students' providing instruction of undergraduate courses; (d) students' mastery of the EPPP exam; (e) Program students' ratings of instructors of foundational scientific and clinical psychology courses; (f) time to completion of students' theses and dissertations; (g) number of student presentations and publications; (h) proportion of students achieving Intermediate or Competency ratings in key Program competencies listed in the Omnibus Form (see Appendix W, pages 852-859); and (i) student evaluations of practicum supervisors and placements. Please also see Tables 8, 9, and 10, which show students' internship placements, dissertation projects, employment settings, licensure status, and graduation rates.

FIc. Program modifications based on outcome data and other feedback on Program processes and outcomes

The Program's procedures for maintaining achievement and making programmatic changes are outlined in the Self Assessment Process flowchart (see Appendix F, page 660). The most common process for implementing change is to (a) have an issue raised by a student, faculty member, or practicum supervisor; (b) seek opinions of students and faculty about the nature and extent of the problem; (c) consult relevant university and professional standards to identify options for change; and (d) if it is determined that a change is needed, the Program makes the appropriate change or seeks appropriate approval to make the change. The Program has used the process and procedures discussed above to implement several key changes in response to student evaluations of the Program, Program outcome data, feedback from consultants and CoA, and developments in the field of clinical psychology.

1. The Program moved into a new Psychological Services Center and obtained a licensed staff psychologist to provide clinical supervision. Prior to the move to the new PSC, lack of sufficient space for students to provide clinical services, and receive supervision, was one of the most frequently mentioned issues in student Program evaluations.
2. The Program has successfully recruited faculty members to provide additional diversity in the clinical and research opportunities available to students (Allen, child maltreatment; Allen also provides clinical supervision for child clients, a previous Program weakness), as well as recruiting new faculty with strong forensic training,

but new research interests (A. Miller, sexual victimization; Cramer, sexual minority hate crimes; Varela, multicultural/multilingual issues in forensic psychology).

3. The Program has worked with University administrators to increase student stipends by 60%, addressing the most frequent student concern raised in the annual program evaluation. In addition, the Program has worked with University administrators to reduce tuition and fees for students on internship.
4. To implement competency-based training models, the Program replaced the Master's Comprehensive Exam with the Capstone course and evaluation (see Appendix C, pages 366-369).
5. Low instructor ratings in the *Psychotherapy* (PSY 533) and *Assessment of Personality and Psychopathology* (PSY 596) courses (see Figures 1 and 2 in Appendix W, pages 855-856) prompted changes in instructor and course emphasis (e.g., stronger emphasis on application of course content, case conceptualization, and evidence-based practice). In instructor and course emphasis. Students' ratings of both these courses have improved considerably.
6. New practicum sites have been added to increase the diversity of clinical experiences available to students (e.g., additional inpatient and juvenile experiences).

F2. Monitoring the Relation among Program Goals, University Goals, Needs for Psychological Services, and National Standards of Professional Practice

(a) **Coordination of University and Program Goals.** The University's goals are implemented through the Program by producing professional psychologists who have the background in psychology, research, clinical skills, and legal issues to work toward improving current understandings of mental health. Institutional support for these efforts is reflected in expanding the number of faculty lines in the Department as a whole, securing additional space for a new Psychological Services Center, and significantly increasing student stipends. The Dean of Graduate provides financial support for Program students, and faculty supervising student research, by providing funding for presenting research at national conferences, which allows students to learn about developments in the field of clinical psychology.

(b) Appropriateness of Program Goals for Meeting Local, Regional, and National Needs.

The appropriateness of the Program's goals and objectives for meeting local and regional needs is monitored through feedback from practicum site supervisors, agencies served by the Psychological Services Center (PSC), and the involvement of students and faculty in local and regional organizations.

The DCT conducts visits of practicum sites to assist in the training of students. Feedback based on these site visits has been universally positive and agencies continue to request – and, when possible, fund – our practicum students. In addition, the Program's clinic (PSC) is designed to function as a community treatment center. Over the past 4 years, state funding for mental health services in the primarily rural area surrounding the University has been severely curtailed. Over this same period, referrals to the PSC, the

network of referring agencies, and contracts for service to government agencies and the courts have increased concomitantly.

The PSC continues to seek new ways to train students to meet local and regional needs. For example, the PSC volunteered counseling services for evacuees during two recent hurricanes, and several faculty and student have received training in Psychological First Aid, a research-supported intervention for assisting families going through natural disasters.

Faculty have partnered with community agencies in obtaining grant funding to expand mental health services. With the assistance of Program graduate students, faculty have provided CEU workshops for professionals in the community, both on campus and at other locations in the state. Faculty actively participate in the Texas Psychological Association and the Sam Houston Area Psychological Association (SHAPA), and a Program student is selected annually as an extern for this regional psychological association. Serving as an extern provides the student with experiences such as visiting the state legislature to address legislative issues impacting the practice of Psychology, and assisting in the provision of training for regional practitioners.

With respect to national needs, the Program's students have been successful at securing APA-accredited internships and competitive post-doctoral fellowships across the United States (see Tables 8 and 9). Feedback from internship sites in the form of mid-year and end-of-year evaluation letters has been overwhelmingly positive, assessed both informally and with outcome data. Evaluations of our students received from internships from 2002 to the present yield an average rating of 4.4 on a 5 point scale (5 indicating excellent performance). Our graduates have also been successful at obtaining employment across the country (see Table 9).

- (c) **Appropriateness of Program Goals for Meeting National Standards of Practice.** The Program adheres to the Ethical Principles of Psychologists and Code of Conduct of the American Psychological Association and standards of professional practice developed by such organizations as APA Divisions 12 and 41, the Council of University Directors of Clinical Psychology (CUDCP), and the Association of Psychology Training Clinics (APTTC). Program faculty members are active participants in these organizations, which assists the Program in keeping pace with national developments.

Since the last site visit, the Program has expanded course offering to thoroughly cover both cognitive and affective bases of behavior (see Domain B). Teaching, administrative, and supervisory loads have also been re-assessed and re-distributed (see Domain C). Finally, the Program has developed a strategic plan to improve diversity among faculty and students, and we have succeeded in both, obtaining one ethnic minority faculty, and a commitment to another (as part of the Grow Your Own Initiative, see Appendix V, pages 848-850 (see also Domain D).

- (d) **Program Response to Evolving Scientific and Professional Trends.** Program Faculty are active in scientific and professional organizations and present at the professional

meetings of these organizations (see faculty curriculum vitae). Students are encouraged to join professional organizations and attend and present at conferences. Financial support for attending conferences and training is provided by the Program, PSC, and the Office of Graduate Studies. Program administrators are also members of professional organizations focusing on training in clinical psychology (CUDCP, APTC). Finally, the Program hosts colloquia and invites professionals active in the field to present and discuss emerging research and practice issues.

- (e) **Systematic Review of Graduates' Career Development.** The DCT maintains a database of contact information and career accomplishments for all Program graduates (see Table 9).

DOMAIN G: Public Disclosure

G1. Program documents providing public information include materials from our official website and printed brochures for the Program and the Psychological Services Center. The *SHSU Graduate Catalogue* is also readily available (and kept up-to-date at www.shsu.edu/gradcat/).

Program Brochure:	Appendix R, Pages 831-832
Psychological Services Center brochure:	Appendix R, Pages 833-834
Program web pages:	Appendix D, Pages 441-656

Anyone requesting general information regarding our program will immediately be referred to our website and then encouraged to call and/or e-mail us with specific questions. In addition, all new students receive a hard copy of the *Program Handbook* (see Appendix C, pages 307-440) during initial orientation. All data required by IR C-20 are included on the Program website at the link entitled "Disclosure of Education & Training Outcomes" (see Appendix D, pages 572-579) The Program's accredited status is located on the front page of the Program website www.shsu.edu/clinpsy along with the address, telephone number, and email of the APA Commission on Accreditation.

G2. In addition to the required outcome statistics, the Program website (see Appendix D, pages 441-656) has links to information regarding the types of clinical experiences students can expect to have (Practicum Sites), the actual internship sites at which students have matched (Internship & Employment Sites), the specific jobs our graduates have secured (Internship & Employment Sites), areas of faculty research interest (Faculty), multicultural diversity experiences (Diversity), and areas in which our students have published or made conference presentations (Student Publications).

DOMAIN H: RELATIONSHIP WITH THE ACCREDITING BODY

H.1. Since our last application for accreditation, we are aware of no departures from the G & P standards established by CoA.

H.2. There have been some changes in the Program faculty/supervisor composition since the last site visit in 2006. In June 2006, our Program faculty included Drs. Marcus Boccaccini, Stacy

Carter, Mary Alice Conroy, Craig Henderson, Rowland Miller, Daniel Murrie, and David Nelson. With the exception of Dr. Miller (a social psychologist), all were clinical psychologists. Dr. Heather Littleton, another clinical psychologist, was expected to join the faculty in August, 2006. Since that time, Drs. Murrie, Carter, and Littleton have left the University, and three other clinical psychologists, Drs. Brian Allen, Audrey Miller, and Jorge Varela have been hired into those positions. With Dr. Allen, the Program acquired additional child clinical expertise. In July, 2010, Dr. Rob Cramer, another clinical psychologist, joined the Program faculty. In June, 2006, the Program was seeking an additional clinical psychologist as a staff psychologist whose sole duty would be the provision of clinical supervision; that position has since been filled with the hiring of Dr. Darryl Johnson. Thus, the program has added a faculty member and a full-time supervisor since the last site visit.

In terms of Program resources, the University has provided a larger facility to house the Psychological Services Center. This has not changed the services offered at the clinic or the role of student clinicians and supervisors in providing those services, but it has allowed a much larger, more comfortable space for these purposes.

Beginning in Fall 2010, the 9-month stipend for all of the Program students will be raised from \$10,000 per year to \$16,000 per year. Additional summer funding is also routinely available. It is hoped the improved financial support will enhance the Program's recruitment efforts.

Neither the Program nor the University have plans that would change the nature, function, or mission of the doctoral program in the foreseeable future.

H.3. The Program is currently up-to-date in regard to annual dues to the CoA. The application fee has not yet been paid, but it will be paid promptly on receipt of invoice.

TABLE 1

Doctoral Programs
Domain A (Eligibility)

Institution Name: Sam Houston State University

Program Title: Clinical Psychology Ph.D. Substantive Area: Clinical Psychology

Degree(s) Awarded to Program Graduates - (Check all that apply)

Ph.D. X Psy.D. _____ Ed.D. _____

Date of Last Site Visit: June 2, 2006

Number of Program Students Awarded Degrees Each Academic Year for the Past 7 Years:

Degree	2010-11	2009-10	2008-09	2007-08	2006-07	2005-06	2004-05
Ph.D.		6	3	6	5	9	5
Psy.D.							
Ed.D.							

Are any students in your program currently respecializing? _____ yes _____ X no

A copy of the most recent program Handbook is provided in Appendix B (Program Handbook).

A copy of the department/college/institutional Procedures and Policies applicable to students is provided in the Graduate Catalog 2009-2011 (<http://www.shsu.edu/gradcat/>).

Table 2
Practicum settings

Name of setting	Year(s) in which setting was used (begin with earliest)	Highest degree of supervisor	Credentials of that supervisor	Number of students placed each year in that setting	Type of setting (use setting code, see pp. 36-37)	Services provided (use activity codes, see pp. 36-37)	Types of clients served
ADAPT	2001 - 2011	Ph.D.	Licensed Psychologist	1	33 Private Practice	2, 3, 4	Children Adolescents Families
Ben Taub General Hospital	2004-2011	Ph.D.	Licensed Psychologist ABPP	2	6,13	2, 3, 4	Adults Inpatient Adolescents
Federal Bureau of Prisons							
Federal Prison Camp - Bryan	2004-2005	Ph.D.	Licensed Psychologist	2	10	2,3,4	Adults
Federal Prison Camp - Houston	2006-2008			1			
Texas Youth Commission							
Crockett State School	2009-2010	Ph.D.	Licensed Psychologist	1	10	2,3,4	Adolescents
Giddings State School	2006-2007						
Greater Houston Neurosurgery Center	2006-2007	Ph.D.	Licensed Psychologist	1	33 Private Facility	2	Adults Adolescents
Private Practice Harman	2004-2008	Ph.D.	Licensed Psychologist	1	33 Private Practice	2, 3, 4	Children Adolescents Adults

Massey Saunders	2007-2011 2006-2009								Families
Harris County Juvenile Services	1999-2011	Ph.D.	Licensed Psychologist	1	10	2,3	Adolescents		
Loos Private Practice	2004-2005	Ph.D.	Licensed Psychologist	1	33 Private Practice	2, 3, 4	Children Adolescents Adults Families		
Mental Health Mental Retardation Authority -- Conroe	2003 - 2005	Ph.D.	Licensed Psychologist	1	1	4	Adults		
Mental Health Mental Retardation Authority -- Livingston	1999-2005	Ph.D.	Licensed Psychologist	1	1	4	Adults		
Montgomery County Adult Probation	2003-2011	Ph.D.	Licensed Psychologist	4	10	2,3,4	Adults		
Montgomery County Juvenile Services	2008-2011	Ph.D.	Licensed Psychologist	1	10	2,3	Adolescents		
SHSU Counseling Center	2001-2005	Ph.D.	Licensed Psychologist	3-5	12	4	Adults		
SHSU Psychological Services Center	1999-2011	Ph.D.	Licensed Psychologist ABPP	6	1	1, 2, 3, 4, 6	Children Adolescents Adults Families		
The Institute for	2000-2011	Ph.D.	Licensed	1	3	2	Children		

Rehabilitation and Research (TIRR)				Psychologist ABPP				Adults
Touchstone Neurobehavioral Resources	2004-2011	Ph.D.	2	Licensed Psychologist	8	2, 3, 4		Adults
Veteran's Administration Medical Center	2004-2005	Ph.D.	1-3	Licensed Psychologist	7	4		Adults
Walker County Adult Probation	2007-2011	Ph.D.	4	Licensed Psychologist	10	2,3,4		Adults

TABLE 3
Current Program Faculty
(Summary Information)

CORE PROGRAM FACULTY

<u>Name</u>	<u>Title</u>	<u>% Of time Devoted to Program</u>	<u>Role/Contribution to Program</u>	<u>Other Responsibilities</u>	<u>Highest Degree Earned</u>	<u>Psych Licensure</u>
Brian Allen	Assistant Professor	90%	Teaches; departmental/university service		Psy.D.	Yes
Marcus Boccaccini	Associate Professor; Associate Director of Clinical Training	100%	Teaches; advising; chair theses and dissertations		Ph.D.	No
Mary Alice Conroy	Professor	90%	Director of Clinical Training; Clinic Director; Professor	Occasional university committee service; occasional undergraduate course as assigned	Ph.D.	Yes
Robert Cramer	Assistant Professor	100%	Teaches; clinical supervision; conducting research		Ph.D.	No
Craig Henderson	Associate Professor	80%	Teaches; clinical supervision; chairing student research projects; conducting research; service for the Doctoral Program	Research; college and departmental service	Ph.D.	Yes
Audrey Miller	Assistant Professor	75%	Teaches; clinical supervision; chairing student research	Consulting Editor, <i>Journal of Research in Personality</i> ; <i>ad hoc</i> Reviewer, <i>Asian</i>	Ph.D.	No

				projects; conducting research	<i>Journal of Social Psychology, Basic and Applied Social Psychology, European Journal of Social Psychology, Journal of Research in Personality</i>		
Rowland Miller	Professor	66%	Teaches; Director of Theses and Dissertation, research mentor		Ph.D.	No	
David Nelson	Associate Professor	75%	Teaches; supervises clinical practice; research including research mentoring		Ph.D.	Yes	
Jorge Varela	Assistant Professor	75%	Teaches; supervises clinical practice; research supervisor/mentor; thesis & dissertation committee member; collaborate with Ph.D. students on other research projects	Teaches graduate and undergraduate courses as assigned; thesis committee member	Ph.D.	Yes	

ASSOCIATED PROGRAM FACULTY

<u>Name</u>	<u>Title</u>	<u>% Of time Devoted to Program</u>	<u>Role/Contribution to Program</u>	<u>Other Responsibilities</u>	<u>Highest Degree Earned</u>	<u>Psych Licensure</u>
Jeff Anastasi	Professor	5%	Teaches; serving on thesis/dissertation committees		Ph.D.	No
Jerry Bruce	Professor Associate Dean	10%	Teaches; signs materials for doctoral students in the Dean's Office, active in SHAPA which serves a function for doctoral students	Teaches graduate and undergraduate courses as assigned; serving on various committees (curriculum committees); serving as Associate Dean	Ph.D.	Yes
James Crosby	Assistant Professor	5%	Research Committee Member	Teaches courses as assigned	Ph.D.	Yes
Donna Desforges	Professor	10%	Chaired and served on thesis and dissertation committees, co-authored presentations and publications, teach graduate courses in Social Psychology and History and Systems	Teaches undergraduate courses in psychology; graduate course in Learning; supervision of MA program student research; university service, including Faculty Senate, Deans Advisory Council, and Community Service	Ph.D.	No
Marsha Harman	Professor	0%	Support	MA clinical program; Director, Professional and Academic Center for Excellence (PACE)	Ph.D.	Yes
Phillip Lyons	Professor	15%	Teaches; serving on dissertation committees		J.D. Ph.D.	No
Holly Miller	Associate Professor	10%	Teach Group Psychotherapy class; supervise clinical work; serve on Thesis	Assistant Dean for Undergraduate Programs; teach in the College of Criminal Justice; chair	Ph.D.	Yes

				and Dissertation Committees	Thesis and Dissertation Committees		
Ramona Noland	Associate Professor	5-10%	Dissertation Committee Member; MAP Committee Member; Presentations to Student Organization	Director of Specialist in School Psychology Program	Ph.D.	Yes	
Christopher Wilson	Professor Department Chair	5%	Working with Director of Clinical Training to ensure the smooth operation of the program	Helping to adjust stipends	Ph.D.	No	

OTHER CONTRIBUTORS

<u>Name</u>	<u>Title</u>	<u>% Of time Devoted to Program</u>	<u>Role/Contribution to Program</u>	<u>Other Responsibilities</u>	<u>Highest Degree Earned</u>	<u>Psych Licensure</u>
Corwin Boake	Neuropsychologist (TIRR) Associate Professor of Physical Medicine & Rehabilitation (UT-Houston Medical School)	≤5%	On-site practicum supervisor	Director of postdoctoral fellowship in clinical neuropsychology; chair of departmental fellowship committee; co-investigator on research grants; member director of American Board of Clinical Neuropsychology (ABPP)	Ph.D.	Yes
Sharon Brown	Clinical Neuropsychologist	10-20%	On-site practicum supervisor	Neuropsychological assessments, treatment planning team member, group facilitator, assist with developing behavioral protocols, administrative duties	Ph.D.	Yes
Jerome Caroselli	Staff Neuropsychologist	5 – 10%	On-site practicum supervisor; wrote letters of recommendation for 3 – 5 students applying for internship with whom I supervised	Provide neuropsychological services on inpatient and outpatient basis.	Ph.D.	Yes
Nicole Dorsey	Chief Psychologist, Director of Intern Training	5%	Supervision	Supervision of pre-doctoral interns and practicum students from several graduate programs, supervision of Master's level clinicians, conducting evaluations, administrative duties within the department	Ph.D.	Yes

Darryl Johnson	Staff Psychologist	100%	Supervisor for students at the Psychological Services Center; onsite supervisor for students placed at off-campus practicum sites. These sites include Montgomery County Community Corrections Facility, Montgomery County Juvenile Probation Department, the 12 th and 278 th Judicial District Community Supervision and Corrections Department (Walker County), and Touchstone Neurorecovery Center	Act as Clinic Director in the absence of the Psychological Service Center's Clinic Director	Ph.D.	Yes
Traci Kramer-Dudley	Director of Clinical Services	≤5%	On-site practicum supervisor	Mental health assessment; suicide assessments; training for suicide procedures and reviewing all psychological assessments; supervise 4 Master level psychologists. We have a MH program, Sex offender groups and aggression replacement groups	Ph.D.	Yes

J. Ray Hays	Professor	≤5%	On-site practicum supervisor; served on one dissertation committee	Clinical work with psychiatric and medical inpatients, outpatients, supervision and teaching of psychology trainees, medical and psychiatric residents and medical students, write, and all other things attendant to being a professor in a medical school	Ph.D., J.D.	Yes
Ronald Massey	Clinical Psychologist	≤5%	Served on two dissertation committees; attended APA site visit; presentations for doctoral students; incorporated students into several CE presentations at TPA; through SHAPA have involved students in making presentations to SHAPA; through SHAPA have helped supervise externs; visited MDCSC practicum site on several occasions	Full time private practice with 25% being forensic in nature. Work with all age groups.	Ph.D.	Yes
Robert McLaughlin	Director, ADAPT Counseling; Associate Professor of Allied Health Sciences, Baylor College of Medicine; Clinical Psychologist in private practice	≤5%	Weekly 2-hour staffing and case conference and weekly consultations	Program Administration; provide clinical supervision; conduct specialty risk assessments; provide psychotherapy and sex offender treatment; teach Health Behavior Counseling Course for the Physician Assistant Program at Baylor College of Medicine; serve as the Behavioral	Ph.D.	Yes

				<p>Consultant for the Physician Assistance Cancer Education (PACE) project at Baylor College of Medicine funded by the National Cancer Institute; guest lecturer</p>		
<p>Robbie Sharp</p>	<p>Co-Director of ADAPT Counseling</p>	<p>≤5%</p>	<p>Weekly 2-hour staffing and case conference and weekly consultations; 1-hour supervision</p>	<p>Program Administration; provide clinical supervision; conduct specialty risk assessments; provide psychotherapy and sex offender treatment</p>	<p>Ph.D.</p>	<p>Yes</p>

Table 3 Continued

Faculty Demographics (number of Current Faculty who identify themselves as):

		Core Program Faculty	Associated Program Faculty	Other Contributors
African American/Black	M			
	F			1
Caucasian	M	6	5	6
	F	2	4	3
Hispanic/Latino	M	1		
	F			
Asian/Pacific Islander	M			
	F			
Multiethnic or None of Above	M			
	F			
TOTAL NUMBER	M	7	5	6
	F	2	4	4
Other	M			
	F			
Total Number Subject to Americans with Disabilities Act	M			
	F			
Foreign Nationals (individuals who are not U.S. Citizens or resident Aliens)	M			
	F			

Table 3 Continued

Professional Activities for the Past Seven Years
(for current faculty only – the number who are):

	Members of Professional Societies	Authors/Co-authors of Papers at Professional Meetings	Authors/Co-authors of Articles in Prof/Scientific Journals	Recipients of Grants or Contracts	Engaged in Delivery of Direct Professional Services
Core Program Faculty	9	9	9	7	7
Associated Faculty	9	9	9	2	4
Other Contributors	10	10	10	3	10

Table 4(a)
Student Statistics

Please report the number of students in the last seven years who:

<i>(Year entering program)</i>	<u>2010-2011</u>	<u>2009-2010</u>	<u>2008-2009</u>	<u>2007-2008</u>	<u>2006-2007</u>	<u>2005-2006</u>	<u>2004-2005</u>
Applied to program:	128	102	116	92	63	67	42
Were offered admission:	17	13	8	12	16	12	8
Enrolled in academic year:	9	7	8	7	8	8	6
Of total enrolled, number admitted as "respecialization":	0	0	0	0	0	0	0

Student Professional Activities Since Enrollment in the Program

	<u>2010-2011</u>	<u>2009-2010</u>	<u>2008-2009</u>	<u>2007-2008</u>	<u>2006-2007</u>	<u>2005-2006</u>	<u>2004-2005</u>
Members of Professional Societies ¹	N/A	7	6	8	8	5	6
(Co)Authors of Papers at Professional Meetings	N/A	0	5	7	6	6	6
(Co)Authors of Articles in Prof/Scientific Journals	N/A	0	1	3	4	4	5

¹ These numbers include student involvement in national organizations such as APA as well as state and local organizations.

Table 4(b)**Student Demographics**

(Number of students entering the program during the noted academic year who identify themselves as):

		2010-2011	2009-2010	2008-2009	2007-2008	2006-2007	2005-2006	2004-2005
African American/Black	M							
	F		1			1		
Caucasian	M	1		1	1	2	3	
	F	8	4	6	5	3	5	4
Hispanic/Latino	M		1					
	F		1		1	1		
Asian/Pacific Islander	M							
	F							2
American Indian/Alaska Native	M							
	F			1				
Multiethnic (individuals identifying with more than 1 above)	M							
	F					1		
Other	M							
	F							
TOTAL	M	1	1	1	1	2	3	0
	F	8	6	7	6	6	5	6
Subject to Americans with Disabilities Act	M			1				
	F							
Foreign Nationals	M							
	F			1				
Number of students enrolled who are respecializing								

Table 4(c)

For the following academic years:

	<u>2010- 2011</u>	<u>2009- 2010</u>	<u>2008- 2009</u>	<u>2007- 2008</u>	<u>2006- 2007</u>	<u>2005- 2006</u>	<u>2004- 2005</u>
# of Students who applied for internship:	4	5	7	3	7	5	6
# Who received funded internships:	4	5	7	3	7	5	6
# Who received unfunded internships:	0	0	0	0	0	0	0
# Who received APA or CPA-accredited internships:	4	5	7	3	6	3	6
# Who received APPIC member internships:	4	5	7	3	7	3	6
# Who received internships conforming to CDSPP guidelines:							
# Who obtained 2-year half-time internships:							

Table 5
Educational History of Students Admitted to Doctoral Program

Id #	UG institution	UG major	UG degree	Year of degree	UG GPA	GRE-Verbal	GRE-Quant	Grad institution	Major	Degree	Year Obtained Grad Degree	Grad GPA
04.001	University of North Carolina	Psychology Criminal Justice	BA	2000	3.60	540	650	John Jay	Forensic Psychology	MA	2004	3.85
04.002	George Mason U.	English	BA	1997	4.00	530	580	Catholic U. of America	Psychology	MA	2002	3.78
04.003	U. of Houston	Psychology	BS	2000	3.29	520	640	SHSU	Clinical Psychology	MA	2002	4.00
04.004	U. of Houston	Psychology	BS	2001	3.86	670	670	NA	NA	NA	NA	NA
04.005	Loyola U.	Psychology	BS	2004	3.70	630	800	NA	NA	NA	NA	NA
04.006	St. Louis U.	Psychology	BA	2004	3.79	440	700	NA	NA	NA	NA	NA
05.001	Appalachian St. U.	Bus. Admin.	BS	1997	3.18	490	690	Marymount U.	Forensic Psychology	MA	2003	3.74
05.002	Grand Valley State U.	Psychology	BS	2003	3.14	570	540	Chicago School of Prof. Psychology	Forensic Psychology	MA	2005	3.97
05.003	SHSU	Psychology	BS	2005	4.00	470	600	NA	NA	NA	NA	NA
05.004	U. of California – San Diego	Cognitive Science	BS	2005	3.48	600	640	NA	NA	NA	NA	NA
05.005	U. of Pittsburgh	Anthropology Psychology	BS	2003	3.46	700	580	NA	NA	NA	NA	NA
05.006	U. of Ottawa	Psychology	BS	2005	6.20	520	680	NA	NA	NA	NA	NA
05.007	U. of S. Alabama	Psychology	BS	2001	3.09	520	580	U. of S. Alabama	Psychology	MS	2004	4.00
05.008	U. of Kansas	Psychology	BA	2005	3.36	640	660	NA	NA	NA	NA	NA

06.001	UH Clearlake	Psychology	BS	2000	3.50	500	590	Prairie View A & M	Juvenile Forensic Psychology	MS	2005	3.78
06.002	UT Dallas	Psychology Chemistry	BA BS	2001	3.60	560	750	UT Arlington	Criminology	MA	2004	4.00
06.003	DePauw	Psychology	BA	2004	3.73	540	640	NA	NA	NA	NA	NA
06.004	TX Lutheran U	Psychology	BA	2005	3.75	570	570	NA	NA	NA	NA	NA
06.005	SHSU	Psychology	BS	2005	3.77	610	610	NA	NA	NA	NA	NA
06.006	McNeese St. U.	Psychology	BS	2002	2.85	550	710	McNeese St. U.	Counseling Psychology	MA	2006	MA
06.007	Indiana U.	Psychology	BA	2006	4.00	510	560	NA	NA	NA	NA	NA
06.008	Seattle U	Psychology	BS	2006	4.00	650	720	NA	NA	NA	NA	NA
07.001	Brown	Psychology	BA	2003	3.42	550	650	Columbia	Dev Psychology	MA	2004	3.90
07.002	W KY U	Psychology Sociology	BA	2004	3.05	570	640	John Jay	Forensic Psychology	MA	2006	3.73
07.003	U of OR	Psychology	BA	2004	3.71	630	640	John Jay	Forensic Psychology	MA	2006	3.78
07.004	U of S FL	Psychology	BA	2007	3.90	630	660	NA	NA	NA	NA	NA
07.005	Flagler College	Psychology	BA	2007	3.47	570	640	NA	NA	NA	NA	NA
07.006	Holy Cross	Psychology Sociology	BA	2005	3.00	540	710	John Jay	Forensic Psychology	MA	2007	3.80
07.007	Westminster College	Psychology	BA	2004	3.58	460	660	Cleveland St. U	Clinical Psychology	MA	2007	4.00
08.001	U of H	Psychology	BS	2003	3.72	460	740	NA	NA	NA	NA	NA
08.002	Syracuse U	Arts & Science Psychology	BA	2008	3.55	540	680	NA	NA	NA	NA	NA
08.003	UC San Diego	Psychology	BS	2007	3.40	640	710	NA	NA	NA	NA	NA
08.004	U of FL	Psychology	BS	2008	3.98	620	620	NA	NA	NA	NA	NA
08.005	Westminster College	Psychology	BS	2007	3.91	640	650	NA	NA	NA	NA	NA

08.006	U of Calgary	Psychology	BA	2004	4.00	580	650	Boston U	Psychology	MA	2007	3.80
08.007	John Jay	Forensic Psychology	BA	2006	3.77	630	640	John Jay	Forensic Psychology	MA	2008	3.93
08.008	Syracuse U	Psychology Pub Rel	BA/BS	2008	3.88	540	700	NA	NA	NA	NA	NA
09.001	Boise St. U	Psychology	BS	2005	3.45	590	610	Columbia TC	Psychology	MA	2009	3.70
09.002	U of San Diego	Psychology	BA	2008	3.40	500	710	NA	NA	NA	NA	NA
09.003	UTEP	Psychology CJ	BA	2009	3.63	510	590	NA	NA	NA	NA	NA
09.004	USC	Psychology	BA	2008	3.23	580	570	NA	NA	NA	NA	NA
09.005	UN-Omaha	Psychology CJ	BA/BS	2004	3.55	590	650	U of Denver	Forensic Psychology	MA	2008	3.92
09.006	C St. Ch. Is.	Psychology	BA	2006	3.56	650	610	NA	NA	NA	NA	NA
09.007	John Jay	Forensic Psychology	BA	2006	3.70	520	520	John Jay	Forensic Psychology	MA	2008	3.40

Table 6
Students' present status

ID #	For students still in program:		For students who graduated: Year of graduation (if completed)	For students who did not complete degree:	
	Year in Program	Full or Part-time		Date left program	Reason for leaving
04.001			2009		
04.002	6 th	Full			
04.003	6 th	Full			
04.004	6 th	Full			
04.005			2009		
04.006	6 th	Full			
05.001				2006	Wanted terminal Master's Degree
05.002	5 th	Full			
05.003	5 th	Full			
05.004	5 th	Full			
05.005	5 th	Full			

05.006	5 th	Full				
05.007			2006	Deceased		
05.008			2007	Resigned to pursue other interests		
06.001			2007	Resigned to pursue other interests		
06.002	4 th	Full				
06.003	4 th	Full				
06.004	4 th	Full				
06.005	4 th	Full				
06.006	4 th	Full				
06.007	4 th	Full				
06.008			2008	Leave of absence; returned 2010		
07.001	3 rd	Full				
07.002	3 rd	Full				
07.003			2009	Was asked to resign due to severe ethical violations		
07.004	3 rd	Full				
07.005	3 rd	Full				
07.006	3 rd	Full				
07.007	3 rd	Full				
08.001	2 nd	Full				
08.002	2 nd	Full				
08.003	2 nd	Full				
08.004	2 nd	Full				

08.005	2 nd	Full				
08.006	2 nd	Full				
08.007	2 nd	Full				
08.008	2 nd	Full				
09.001	1 st	Full				
09.002	1 st	Full				
09.003	1 st	Full				
09.004	1 st	Full				
09.005	1 st	Full				
09.006	1 st	Full				
09.007	1 st	Full				

Table 7
Current Students Matriculating Beyond Their 7th Year in the Program

ID #	Unfinished Requirements	Expected Graduation Date	Current Financial Support

Table 8

Program Graduates: Internship and Dissertation/Final Project

ID#	Year of graduation	Name and location of internship	Accredited Yes or No	APPIC Member Yes or No	Funded Yes or No	Title of Dissertation/Final Project	Dissertation/Project Advisor
98.007	2003	Wyoming State Hospital, Evanston, WY	YES	YES	YES	Psychopathy & male sex offenders: A social relations analysis	David Marcus
97.001	2004	Federal Medical Center, Carswell, TX	YES	YES	YES	Empirical criteria for the determination of suicide by legal intervention	Phillip Lyons
00.008	2004	United States Medical Center for Federal Prisoners, Springfield, MO	YES	YES	YES	Examination of the rehabilitative and validity of the Psychopathic Personality Inventory-Revised and the construct of psychopathy	Holly Miller
00.004	2004	Federal Medical Center, Carswell, TX	YES	YES	YES	Examining attributions of responsibility in juvenile delinquents: Does maturity of judgment and "other punishment" influence the experience of culpability in adolescents?	Phillip Lyons
99.007	2004	Eastern State Hospital, Vinita, OK	YES	YES	YES	Motivation for change and psychopathy as predictors of treatment response and outcome in a therapeutic community for dually diagnosed offenders	David Marcus
98.003	2005	Eastern Virginia Medical School, Norfolk, VA	YES	YES	YES	The utility of the Sorenson and Pilgrim Actuarial Model in predicting institutional violence among death row inmates	John Edens
99.001	2005	Arkansas State Hospital, Little Rock, AR	YES	YES	YES	Assessing and understanding police officers' cognitive appraisals and attributions for traumatic events	Phillip Lyons
00.006	2005	Porterville Developmental Center, Porterville, CA	YES	YES	YES	Mental health and psychosocial characteristics of juvenile offenders: Relationship to dispositional outcomes	Phillip Lyons
00.003	2005	United States Medical Center for Federal Prisoners, Springfield, MO	YES	YES	YES	Predicting recidivism among sex offenders: Utility of the Static-99, Minnesota Sex Offender Screening Tool-Revised, and Psychopathy Checklist-Revised	Daniel Murrie

98.005	2005	United States Medical Center for Federal Prisoners, Springfield, MO	YES	YES	YES	The latent structure of adolescent problematic substance abuse: Taxometric analysis of the MAYSI -2 alcohol and drug use scale	Rowland Miller
99.005	2005	Wyoming State Hospital, Evanston, WY	YES	YES	YES	Violence risk assessment in intimate partner stalking: Predictors of physically violent behavior in a stalking population	Mary Alice Conroy
00.001	2005	Wyoming State Hospital, Evanston, WY	YES	YES	YES	Assessment of sex offenders for civil commitment proceedings: An analysis of report content	Mary Alice Conroy
99.002	2006	Northeastern Oklahoma Psychology Internship Program	YES	YES	YES	Correlates of gender on juror decision-making in sexual abuse cases	Donna Desforges
00.005	2006	Federal Medical Center Lexington, KY	YES	YES	YES	Attachment and sex offenders	Rowland Miller
98.006	2006	Kerrville State Hospital, Kerrville, TX	NO	YES	YES	Self-verification Processes in Probation Failure	Rowland Miller
99.008	2006	Wyoming State Hospital, Evanston, WY	YES	YES	YES	Symbolic racism, legal authoritarianism, and social dominance orientation: An investigation of correlates and predictors of attitudes regarding police use of force	Donna Desforges
01.009	2006	Central CA Psychology Internship Consortium Fresno, CA	NO	YES	YES	The latent structure of depression: A taxometric analysis of data from the National Comorbidity Study	David Marcus
99.003	2006	Wyoming State Hospital Evanston, WY	YES	YES	YES	Examining PAJ profiles among forensic and civil psychiatric patients	Daniel Murrie
01.006	2007	Northeastern Ohio Universities College of Medicine	YES	YES	YES	Validity Scales of the Spanish language translation of the Personality Assessment Inventory	Marc Boccaccini
01.007	2007	Arkansas State Hospital Little Rock, AR	YES	YES	YES	The impact of educative and evaluative expert witness testimony on trial outcome: A meta-analytic review	Marc Boccaccini
00.007	2007	Community	NO	YES	YES	Captain's log: effectiveness of computerized cognitive training on	Marsha Harman

							ADHD symptoms	
98.002	Counseling Center of Mercer County, Hermitage, PA	2007	NO	YES	YES	YES	Do attitudes toward the death penalty influence psychologist decision-making in competence for execution evaluations?	Mary Alice Conroy
01.001	Laurelwood Hospital Willoughby, OH	2007	YES	YES	YES	YES	A qualitative and quantitative review of the published research on dialectical behavior therapy: An update on Scheel	Daniel Murrie
01.005	Federal Medical Center Carswell, Ft. Worth, TX	2007	YES	YES	YES	YES	An exploratory analysis of the reliability of psychological autopsies	Mary Alice Conroy
01.008	Florida State Hospital, Chattahoochee, FL	2007	YES	YES	YES	YES	Predicting treatment outcome and recidivism in juvenile sex offenders: Utility of the JSOAP-II and ERASOR in an outpatient treatment program	Daniel Murrie
01.003	United States Medical Center for Federal Prisoners, Springfield, MO	2007	YES	YES	YES	YES	Internalized homophobia, gender roles, and disordered eating in an online sample of gay men, bisexual men, and men who have sex with men (MSM)	Marc Boccaccini
02.001	Federal Medical Center Rochester, MN	2008	YES	YES	YES	YES	An examination of scoring accuracy on intelligence and achievement measures	Craig Henderson
01.004	Superior Court of DC Child Guidance Clinic, Washington, DC	2008	YES	YES	YES	YES	Specialty training in clinical psychology doctoral programs: How do accredited programs portray what they offer?	Marc Boccaccini
01.002	Atascadero State Hospital Atascadero, CA	2008	YES	YES	YES	YES	Perceived coercion, procedural justice, and treatment motivation in a sex offender treatment program	Marc Boccaccini
03.003	Federal Medical Center Carswell, Ft. Worth, TX	2008	YES	YES	YES	YES	A latent profile analysis of the PAI scores of female sexual offenders: Implications for assessment and treatment	Holly Miller
03.001	Federal Medical Center, Rochester, MN	2009	YES	YES	YES	YES	Gender differences on the Youth Psychopathy Traits Inventory: Examining differential item functioning	Craig Henderson
03.004	Baylor College of Medicine, Houston, TX	2009	YES	YES	YES	YES	Witness preparation training: Eye tracking methods to determine differences between naive observers and trained raters	Marc Boccaccini
	U. of Massachusetts Medical Ctr. Worcester, MA							

02.004	2009	BC Mental Health and Addiction Services, Coquitlam, BC	YES	YES	YES	An exploration of childhood abuse, self-esteem, and mood disorders in sexual offending against children	Craig Henderson
04.001	2009	United States Medical Center for Federal Prisoners, Springfield, MO	YES	YES	YES	Discrepancies in parent-adolescent reports of psychopathology in adolescents with serious emotional disturbance	Craig Henderson
04.005	2009	Mendota Mental Health Institute, Mendota, WI	YES	YES	YES	A taxometric analysis of psychopathy in an incarcerated female population	Craig Henderson
02.003	2009	Federal Medical Center Rochester, MN	YES	YES	YES	An analysis of the Texas sexually violent predator commitment process: Assessing commitment decisions	Mary Alice Conroy
03.002	2009	Western State Hospital, Tacoma, WA	YES	YES	YES	Adaptive behavior assessment on individuals with psychopathic traits: Differential item functioning between those low and high in psychopathy	Marc Boccaccini

Table 9
Program Graduates: Employment

ID #	Initial employment setting (Use codes on next pages)	Initial job title	Current employment setting (Use codes on next pages)	Current job title	Professional achievements (e.g., licensure, fellow status, or diplomate)
97.001	14	Post-Doctoral Fellow	14	Private Practice Conroe, TX	Licensed TX
98.002	99		99	(Serious health problems)	
98.003	16	Post-Doctoral Fellow	16	Assistant Professor James Madison University	Licensed VA
98.005	10	Staff Psychologist	15	Psychology Supervisor SHSU Clinical Psychology Doctoral Program	Licensed TX
98.006	9	Staff Psychologist	9	Staff Psychologist Kerrville State Hospital	Licensed TX
98.007	9	Post-Doctoral Fellow	10	Forensic Psychologist Wyoming State Hospital	Licensed WY, MN
99.001	14	Post-Doctoral Fellow	8	Clinical Psychologist Whiting Forensic Division of CT Valley Hospital	Licensed CT
99.002					
99.003	9	Post-Doctoral Fellow	10	Chief Psychologist Correctional Mental Health Center, Jessup, MD	Licensed WY, MD
99.005	10	Staff Psychologist	10	Staff Psychologist FCI Butner, NC	Licensed NC, SC

99.007	9	Post-Doctoral Fellow	9	Director of psychology and Clinical Training Larned State Hospital Larned, KS	Licensed KS
99.008	3	Post-Doctoral Fellow	9		Licensed VA
00.001	14	Post-Doctoral Fellow		Staff Psychologist Lakes Crossing Center, Sparksville, NV	Licensed NV
00.004	14	Post-Doctoral Fellow	14	Private Practice	Licensed WI
00.005					
00.006	15	Assistant Director SHSU Policing Institute	10	Psychologist Harris County Juvenile Probation Department	
00.007	1	Staff Psychologist	1	Outpatient Therapist Range Mental Health Center Virginia, MN	Licensed MN
00.008	3	Post-Doctoral Fellow	10	Drug Abuse Program Coordinator Federal Bureau of Prisons Herlong, CA	
00.003	10	Post-Doctoral Fellow	10	Staff Psychologist Federal Bureau of Prisons Seagoville, TX	Licensed TX
01.001	10	Staff Psychologist	10	Staff Psychologist	
01.002	2	Clinical Therapist Liberty Health Care Illinois			
01.003	9	Staff Psychologist	9	Forensic Evaluator Central State Hospital Petersburg, VA	Licensed VA
01.004	9	Staff psychologist	9	Staff Psychologist Atascadero State Hospital	Licensed CA

						Atascadero, CA	
01.005	9	Post-Doctoral Fellow				Assistant Professor Marymount University	
01.006	10	Staff Psychologist	9			Staff Psychologist Forensic Center Ann Arbor, MI	Licensed MI
01.007	9	Staff Psychologist	9			Staff Psychologist Atascadero State Hospital Atascadero, CA	
01.008	10	Staff Psychologist	10			Clinical Director Sexual Offense Resource Services Denver, CO	Licensed CO
01.009	10	Staff Psychologist	10				Licenses CA
02.001	8	Post-Doctoral Fellow				Assistant Professor Argosy University, DC	Licensed DC
02.003	20	Staff Psychologist FCI Beaumont Beaumont, TX	20			Staff Psychologist FCI Beaumont	
02.004		Staff Psychologist Southern Alberta Forensic Psychiatric Services Calgary, Alberta					
03.001	8	Post-Doctoral Fellow					
03.002	9	Post-Doctoral Fellow					
03.003	10	Post-Doctoral Fellow	10			Staff Psychologist	Licensed PA
03.004	3	Post-Doctoral Fellow					
04.001	3	Post-Doctoral Fellow					
04.005		Post-Doctoral Fellow					

Table 10
Program Attrition, Retention, and Graduation

Year of Entry	N	Status	Attendance Year										
			Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8 or beyond			
Prior to 2004		Graduated											
		Continued Enrollment											
		Left Program											
		Total											
2004	6	Graduated						2					
		Continued Enrollment							4				
		Left Program											
		Total						2		4			
2005	8	Graduated											
		Continued Enrollment								5			
		Left Program	2	1									
		Total	2	1					5				
2006	8	Graduated											
		Continued Enrollment						6					
		Left Program	1	1									
		Total	1	1			6						
2007	7	Graduated											
		Continued Enrollment							6				
		Left Program		1									
		Total		1					6				
2008	8	Graduated											
		Continued Enrollment											
		Left Program		1									
		Total		1					6				

			Continued Enrollment						8	
			Left Program							
			Total						8	
2009		7	Graduated							
			Continued Enrollment			7				
			Left Program							
			Total			7				
2010			Graduated							
			Continued Enrollment							
			Left Program							
			Total							

Appendix A
Curriculum Vitas