DALHOUSIE UNIVERSITY

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CLINICAL PSYCHOLOGY PHD PROGRAM

CURRICULUM & INFORMATION HANDBOOK

July 2026

Please note that the information contained herein is subject to updates and changes and is intended to serve as a supplement to information available in the Department of Psychology & Neuroscience Graduate Student Handbook and FGS Guidelines.

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About this Handbook

This handbook is updated annually, and as needed, by the PhD program to distribute to Clinical Psychology PhD students. It provides valuable information and resources available to graduate students and faculty.

Although every effort has been made to ensure the accuracy of the information in this handbook, there may be errors, in part because Dalhousie is a dynamic institution where things are constantly changing. It is up to the student to confirm any important details. Please send any comments or corrections to the Clinical Program Assistant at clinprog@dal.ca.

Land Acknowledgement

We respectfully acknowledge Dalhousie University operates in the ancestral and unceded territories of the Mi'kmaq, Wolastoqey, and Peskotomuhkati Peoples. These sovereign nations hold inherent rights as the original peoples of these lands, and we each carry collective obligations under the Peace and Friendship Treaties. Section 35 of the Constitution Act, 1982 recognizes and affirms Aboriginal and Treaty rights in Canada.

We recognize that African Nova Scotians are a distinct people whose histories, legacies, and contributions have enriched that part of Mi'kma'ki known as Nova Scotia for over 400 years.

Overview

The goal of our program is to produce clinical psychologists who are thoroughly grounded in the science of psychology and the methods of clinical practice, and who strive to promote social justice in both domains. Our program and faculty strongly adhere to evidence-based practices, such as cognitive behavioural therapy.

The Clinical PhD program is a CPA accredited program, which follows the scientist-practitioner model. Clinical psychology is part of the science of psychology and we therefore emphasize both research and clinical practice. The program typically takes 6 - 7 years to complete, on average, including a one-year clinical residency.

Beginning September 2011, our Clinical Psychology Program is a fast-track PhD program in which students entering with a Bachelor's degree are registered in an MSc and then fast-tracked into the PhD, without completing a Master's thesis or obtaining a Master's degree. Fast-tracking into the PhD program will occur sometime in the first or second year of the program, depending on the student's individual circumstances and needs. Students admitted with a Master's degree in Psychology or a closely related field are eligible for direct-entry into the PhD and may be eligible for advanced standing within the program; such standing is evaluated on a case-by-case basis. *Note that fast-tracking into the Clinical PhD requires that a student has been admitted to study Clinical Psychology. Fast-tracking does not refer to the time it takes students to complete the program.*

Even though students admitted to the Clinical Psychology PhD Program with a Bachelor's degree are enrolled in an MSc before being fast-tracked to the Clinical PhD program, we do *not* offer a Master's degree in Clinical Psychology. In the rare circumstance where a student requests that we not fast-track them into the Clinical PhD Program, the student would be required to satisfy any remaining degree requirements as specified for the Psychology MSc degree (including writing and defending a Master's thesis); the student would not be eligible

to enroll in practicum or other classes restricted to Clinical PhD students and would not be eligible for licensing as a clinical psychologist.

Students admitted into the Clinical Program with a Master's degree in Psychology or a closely related field are eligible for direct-entry into the PhD Program (i.e., are not registered in the MSc program) and may be eligible for advanced standing within the program; such standing is evaluated on a case-by-case basis after admission. Students submit their requests directly to the director of clinical training (DCT), who, in consultation with the field placement coordinator and instructors for the course(s) under consideration, reviews all documentation and makes decisions regarding course exemptions and recognition of previous practica and/or thesis work. All applications for advanced placement must receive final approval by Faculty of Graduate Studies (FGS). *Please see Appendix B for details about this process.* Requests for an exemption from one comprehensive project can be made by clinical students who are admitted with a Master's degree following the successful presentation of the first clinical comprehensive project. All such requests will be considered on a case-by-case basis and will require the approval of the DCT and the dissertation supervisor. Approvals will be tentative until successful completion of the first comprehensive.

Students entering with an Honours degree in Psychology or with a non-clinical Master's degree will be admitted into a program with a 3-year residency requirement, i.e., that they are enrolled full-time and present at Dalhousie for this period. Students entering with a Master's degree in Clinical Psychology will be admitted into a program with a 2-year residency requirement.

Background:

The program began in 1989 and had been accredited by both the Canadian Psychological Association (CPA) and the American Psychological Association (APA) since its first possible application, in 1995. Since 2007, we have sought only CPA accreditation. Our Program was most recently reaccredited by CPA in 2024/2025 for a period of six years. Our program's next reaccreditation year will be 2030/2031.

Mission Statement

The Clinical Program is founded on a scientist-practitioner training model and is committed to prioritizing equity, diversity, and inclusion in all components of training. Graduates of the program will be thoroughly grounded in both the science of psychology and the methods of clinical practice, the integration of research and clinical practice, and the promotion of social justice in research and clinical practice. Clinical training focuses on evidence-based clinical practice. The program's generalist training allows students the opportunity to gain knowledge and experience in working with individuals across the lifespan as well as with individuals from diverse backgrounds.

Students are also provided with the opportunity to expand their learning into areas of interest (e.g., child psychology, adult psychology, neuropsychology, addictions, health psychology). Students who want extensive training in both science and clinical practice are the best fit for our program. Our graduates are prepared to work as clinical psychologists in a range of settings and are particularly valued in settings receptive to the integration of research and practice.

Value Statements/Principles

1. **Scientist-Practitioner Model of Training**
   Professional psychology advances itself through the scientific method.

2. **Faculty Mentorship**
   Faculty who are scientist-practitioners model the values this program wishes to instil in students. Faculty prioritize mentorship to meet the needs of students in the program.

3. **Cultivated Critical Thinking**
   Critical thinking skills are foundational skills for both science and practice and are fostered at all levels of training in the program.

4. **Development-Based Learning**
   A developmental model of supervision tailors feedback and supervision to a student's level to advance their learning.

5. **Acceptance and Respect of Diversity**
   Ethical thinking and practice permeate all aspects of the program; hence, the well-being, dignity, and respect of all peoples are paramount.

6. **Collaborative Approach**
   A collaborative framework where graduates learn to be effective members of multidisciplinary teams leads to better client-centred care and research.

7. **Beyond the Classroom Learning**
   Training is most effective if provided through multiple methods, including coursework, research (i.e., comprehensive projects and dissertation), practica, clinical workshops, and a full year residency.

GOALS

1. To provide training consistent with the scientist-practitioner model by providing graduate students with experience in and knowledge of the science and practice of psychology, and the integration of science and practice.

   Objective 1: To train graduates who are skilled researchers

   Objective 2: To train graduates who are skilled clinicians

   Objective 3: To train graduates who integrate science and practice

   Objective 4: To train graduates who are skilled at integrating an understanding of human diversity into research and clinical practice

2. To provide generalist training that ensures breadth in research, practice, and teaching skills, thus making students competitive for residency and employment positions, and prepared to take on a range of careers in the field of clinical psychology.

   Objective 5: To train graduates who have a broad knowledge of clinical skills that are applicable to work with clients of all ages.

   Objective 6: To train graduates who have a broad knowledge of clinical skills in order to work with clients who present with a wide range of difficulties related to mental health and well-being

   Objective 7: To train graduates who have a broad knowledge of clinical skills in order to work with clients from diverse backgrounds

3. To ensure that students develop the necessary skills for careers as Clinical Psychologists, as described in the MRA, and detailed in the CPA 2023 Accreditation Standards, in each of:

The **six general core content areas of psychology**: biological bases of behaviour; cognitive-affective bases of behaviour; social-cultural bases of behaviour; individual differences, diversity, growth and lifespan development; historical and scientific foundations of psychology; psychopharmacology.

The **eight foundational competencies**: individual, social, and cultural diversity; Indigenous interculturalism; evidence-based knowledge and methods; professionalism; interpersonal skills and communication; bias evaluation and reflective practice; ethics, standards, laws, policies; and interprofessional collaboration and service settings.

The **six core functional competencies**: assessment; interventions; consultation; research design and test construction; program development and evaluation; and supervision.

Objective 8: To train graduates who have strong knowledge in the core content areas to the level of preparedness necessary to enter the profession of clinical psychology

Objective 9: To train graduates who have clearly developed all core foundational and functional competency areas to the level of preparedness necessary to enter the profession of clinical psychology

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Faculty

Our Clinical Psychology PhD Program currently has eleven core clinical faculty members. These faculty members are active as scientist-practitioners in a variety of areas within clinical psychology including child and adult clinical psychology, addictions, neuropsychology, and health psychology. The core clinical faculty are responsible for teaching clinical core and elective courses. Some faculty also supervise practica as a component within their skills-based courses and in their other clinical roles in hospitals and private practices. Core clinical faculty, along with other departmental non-clinical faculty and adjunct faculty supervise

comprehensive and dissertation research projects. The core clinical faculty participate in numerous other activities (e.g., administration, dissertation committees, program and curriculum development, practicum supervision) geared toward maintaining and enhancing the quality of the Clinical Program. For a complete listing of departmental and honorary faculty and their area(s) of interest, please consult the Department of Psychology & Neuroscience website (www.dal.ca/psychandneuro).

The core clinical faculty and their research interests are:

- **Dr. Cheryl Aubie** (Instructor; .5 FTE)
  - Working with emotion in psychotherapy; emotion-focused approaches to parenting; psychotherapy process
- **Dr. Christine Chambers** (Professor; .4 FTE)
  - Pediatric Pain, Child Health, Pediatric Health Psychology, Knowledge Mobilization, Implementation Science, Patient-Oriented Research
- **Dr. Penny Corkum** (Professor; 1.0 FTE)
  - Neurodevelopmental disorders in children, with a specific focus on ADHD and Learning Disabilities; pediatric sleep disorders and sleep health; psycho-social interventions; digital intervention development, evaluation, and sustainability; child clinical and school psychology
- **Dr. Shannon Johnson** (Associate Professor; 1.0 FTE) – **Associate Director of Clinical Training (ADCT), Co-Director Centre for Psychological Health**
  - Clinical and cognitive neuropsychology, environmental psychology with an emphasis on human interaction with nature, behaviour change to improve well-being
- **Dr. Ellen Jopling** (Assistant Professor; 1.0 FTE)
  - Pediatric (child health) psychology; anxiety disorders and obsessive compulsive disorder in children and adolescents; selective mutism; early life adversity and complex trauma in children and adolescents
- **Dr. Alissa Pencer** (University Teaching Fellow; 1.0 FTE) – **Field Placement Coordinator (FPC), Co-Director Centre for Psychological Health**
  - Anxiety disorders and obsessive compulsive disorder in youth, substance use and mental health, prevention and early intervention in severe mental illness, e-mental health
- **Dr. Natalie Rosen** (Professor; .5 FTE) – **Director of Clinical Training (DCT)**
  - Sexual dysfunction; sexuality in life transitions (pregnancy and postpartum; menopause); Infertility; sex therapy; cognitive behavioural couple therapy; Intimate relationships
- **Dr. Meghan Rossi** (Instructor) (.5 FTE)
  - Clinical psychology; Sexuality and close relationships; Sexual function/dysfunction; Health Psychology; Psychosocial adjustment to chronic illness and life transitions
- **Dr. Simon Sherry** (Professor; 1.0 FTE)
  - Personality and psychopathology (e.g., suicide, eating disorders, anxiety, and depression) perfectionism, alcohol problems
- **Dr. Sherry Stewart** (Professor; .4 FTE)
  - Emotional disorders (anxiety, mood disorders, and PTSD); substance use; problem gambling; addiction-mental health disorder comorbidity; addictive behaviors and relationships; personality; cue reactivity; automatic cognitive processes
- **Dr. Natalie Stratton** (Senior Instructor) (1.0 FTE)
  - Sexual function/dysfunction, sexual & mental health interventions for LGBTQ+ populations, mood disorders, anxiety & anxiety-related disorders, Borderline Personality Disorder, clinical psychology, health psychology

We are fortunate to also have a large number of honorary faculty (e.g., cross, adjunct, clinical associate), who, depending on qualifications and eligibility, participate in the Clinical Psychology PhD Program in a variety of functions, e.g., teaching, supervising practica, comprehensive projects, and dissertations (NB: clinical associates are not eligible for dissertation supervision).

STUDENTS

As of September 2026, a total of 41 students are registered in the Program. All qualified applications are welcome and given serious consideration. As part of the university's vision and commitment to building a community of students, faculty, and staff in which diversity, equity, and inclusion are fundamental values, we encourage applicants from underrepresented groups. The Department of Psychology and Neuroscience values different perspectives and research in diverse populations. In addition, training in multicultural perspectives is required as part of the Clinical Program curriculum. Our Program is extremely competitive; usually a class of four to eight students is admitted each year. Class size depends on multiple factors, including supervisor availability and funding. ***Applicants are strongly encouraged to contact potential supervisors from the list of departmental faculty, including eligible adjunct* and joint or cross* appointed faculty. (*Please see Co-Supervisor requirements). Please note, clinical associates are not eligible for dissertation supervision.***

Students in our Program are active contributors to both research and clinical program planning and review. In terms of contributions to research, the novel nature of our comprehensive requirement (a series of two research or other professional projects, the first of which is supervised by the students' dissertation supervisor and the remaining one is supervised by another faculty member) greatly facilitates student involvement in research and related initiatives across the department. Students are credited appropriately for their research and professional contributions, and in most cases are listed as the first author on publications resulting from their work. We actively encourage and support our students in attending and presenting their work at academic meetings.

In terms of program planning and review, we host an informal session (referred to as "Program Pulse") once or twice per academic term to address student concerns and seek student feedback and input on program decisions and issues. The session is hosted by the director of clinical training (DCT) and field placement coordinator (FPC). All students and core faculty in the Clinical Psychology PhD Program are invited to attend. The session is held as an unstructured and open forum, where students can bring forward comments, concerns, or compliments as appropriate. The DCT, FPC, and faculty answer questions and provide follow-up (in person or via e-mail) on any issues raised that cannot be addressed within the session. The Program and faculty find the input and feedback received from students in this forum to be very helpful in program planning and evaluation.

THE CURRICULUM

The Curriculum seeks to integrate research and clinical practice and to promote an understanding of the broad field of psychology. The following is a typical sequence of study:

COURSES:

Beginning in their first year, students take a structured set of courses designed to ensure appropriate depth and breadth of training in both the science and practice of psychology. Courses cover a range of topics, including child and adult psychopathology, assessment, and treatment, as well as general courses in professional ethics, research methods, and statistics.

DISSERTATION:

The doctoral dissertation is a major aspect of the student's research training. Students are admitted to work with specific faculty members; however, changes can be made during the Program. If a student is supervised by an adjunct faculty, a co-supervisor must also be identified. Students supervised by adjunct or non-clinical departmental faculty are matched with a clinical faculty, in the capacity of a Clinical Mentor. Dissertation

committee members are selected from members of the department and suitable adjunct/cross appointed faculty and other individuals who can assist in the dissertation. As per FGS regulations, “All thesis candidates shall have one supervisor or two co-supervisors and at least two additional members.” FGS requires that at least one of the two committee members is a member of the student’s department and that 50% or more of the full committee must be ‘regular members’ of FGS. Adjunct faculty are not considered regular members of FGS.

Clinical students should form a committee no later than December of their third year and must hold a meeting with that committee along the same timeline.

Note: Students are encouraged to form their dissertation committee early in their program, with the recognition that they may elect to change the composition of their committee, if necessary, as their project develops. Faculty supervisors are encouraged to discuss committee composition with students and to help guide the selection of appropriate committee members. Dissertation committee members may include comprehensive project supervisors. The dissertation must be officially approved during a dissertation committee meeting and the student must record this date on the Clinical Program annual report form. Data collection should be underway during the third year. For more information about dissertation committees, please see the FGS Regulations.

COMPREHENSIVES:

Rather than a comprehensive exam, the department’s comprehensive requirement is a series of two projects completed under the supervision of different faculty members. The comprehensive plan should be developed to ensure sufficient breadth of training in psychology. Comprehensives must be separate from the dissertation. A listing of possible comprehensives is compiled and distributed on an annual basis.

The comprehensive plan will comprise two comp projects in addition to the students’ dissertation. One (of two) comps must be empirical in nature (i.e., includes all aspects of the scientific process) and the student must be involved in it from conception of idea to dissemination of results (typically first comp). Each student’s comprehensive plan is presented to and approved by the Clinical Program Committee at the (monthly) meeting. Some issues of relevance to students in the Clinical Program, as well as a summary of general issues relating to comprehensives, appear below. **Students are also encouraged to consult the Comprehensive Guidelines for Clinical Psychology Students (Appendix C) for suggested timelines.**

THE FIRST COMPREHENSIVE:

The comprehensive project that is proposed early in the winter term of the first year in the Program (PSYO 5000) is considered the First Comprehensive. Generally, this project is conducted under the supervision of the dissertation supervisor and involves an empirical study with original data collection. Students entering with Master's degrees complete their first comprehensive under the same conditions. The comprehensive examining committee for the first comprehensive comprises the dissertation supervisor(s), the DCT [or designate(s)], and two core clinical faculty members. The role of the committee is to evaluate quality and progress.

The first-year comprehensive project, including the written components and oral presentations and defense, are important milestones in the student’s completion of the degree. This project is a critical indicator of the student’s research abilities. Students’ performance throughout this process (written and oral) is evaluated by the examining committee, who determine whether they meet the required standards to continue in the program or not. Students must demonstrate a solid grasp of the theory/rationale, methods, statistics, and potential implications of their project.

Students will submit a **study plan questionnaire** for their first comprehensive project using the form provided by the Clinical Program Assistant. This plan requires a brief description of the project (including a brief background and methods) as well as the specific objectives of the comp and expected endpoint(s). The plan should be reviewed by the dissertation supervisor prior to submission and submitted in mid-October of first year (exact date to be announced in September), to be evaluated by the comprehensive examining committee.

A **written proposal** [(APA format) including Introduction, Methods, Expected Results, and Potential Implications, not exceeding ten (10) double spaced pages (not including references)] should be submitted to the Clinical Program Assistant, who will distribute to the comprehensive committee, at least two weeks prior to the presentation. This component is typically due at the end of the first term. A 2nd Reader, whose expertise is relevant to the student's project, will also review and provide feedback which is submitted to the committee. The reader will be at arm's length from the student and supervisor (i.e., not a collaborator on the proposed project) and will ideally serve in this role for both the proposal and final version of the comp. The 2nd Reader is not a member of the examining committee. The Committee meets with the students in January of 1st year to help guide the process. For this meeting, an oral proposal of the comprehensive project is presented to the committee (15-minute presentation) and students answer questions about their proposal from the committee (15 minutes). All students who are presenting are expected to remain for the duration of all presentations. The committee must approve the written and oral proposals for the student to continue with this project as their first year comprehensive.

The final version of the comprehensive project will be submitted in writing in early-May during the second year of the program. The **comprehensive defense** will occur approximately two weeks later (mid-May). If submitting in manuscript form, the title page should be altered to indicate it is the first comp and should contain just the student's name as author with supervisor(s) identified on a separate line. The bottom of the title page can contain the APA reference to the submitted paper as this acknowledges the contributions of the coauthors and allows the committee to see it has been submitted for publication. The comprehensive is examined orally (like a thesis defense) by the committee. The examination will usually be open to the public and will consist of a 10-minute oral presentation followed by questions (approximately 20 minutes). All students who are presenting are expected to remain for the duration of all presentations. The committee will recommend to the DCT a course of action with respect to student advancement in the Program. Following successful defense/completion of the first comprehensive, students must arrange to meet with both the dissertation supervision and comp chair together on an annual basis.

Second Comprehensive and Comprehensive Plan

One additional comprehensive project, approved by the Clinical Program Committee (CPC), must be completed. The remaining comprehensive is usually supervised by faculty other than the dissertation supervisor and may include up to one other dissertation committee member. The student selects the Chair of the comprehensive committee, usually also the supervisor of this additional comprehensive project, who helps guide the student in the selection of comprehensives and the submission of a comprehensive plan. The comprehensive plan must outline the comprehensives and the dissertation (to ensure sufficient breadth of training and to avoid too much overlap in content and/or methods) as well as the outcome for the completion of the comprehensive. The Chair of the student's comprehensive plan presents it to the clinical faculty at a CPC meeting. A binder with examples of approved comprehensive plans is available in the Clinical Program Assistant's office. Students should refer to the Comprehensive Guidelines for Clinical Psychology Students for further details.

NB: Requests for an exemption from one comprehensive project may be made from clinical students who are admitted with a Master's degree following the successful presentation of the first clinical comprehensive project. All such requests will be considered on a case-by-case basis and will require the approval of the DCT and the dissertation supervisor. Approvals will be tentative until the successful completion of the first comprehensive.

Practica or Field Placements

Detailed information on practica and field placements is contained in the Practicum Guidelines. It is expected that students complete a total of approximately 1000 practicum hours during their time in the program. Students are encouraged to review the policy regarding residency readiness developed by the Canadian Council of Professional Psychology Programs (CCPPP) for additional guidance regarding appropriate numbers and types of practicum hours. The Program discourages excessive practicum hours as this generally slows

progress and does not increase competitiveness for residency. For all external practica, students must obtain the approval of the field placement coordinator (FPC) AND the dissertation supervisor for each practicum placement. The dissertation supervisor's approval is intended as a mechanism to ensure that the student is on track in all areas of their program. A student may appeal their supervisor's decision to deny permission to progress with additional practicum hours through the director of clinical training (or designate). Practica are planned in conjunction with the FPC to ensure that a broad range of experience covering various forms of clinical practice are undertaken. All clinical students must register for PSYO 8333.06 each term, each year they are in the Program prior to residency as this is the course through which practicum hours are tracked. As well, registration in this course will allow for students to be covered for liability insurance reasons. There will be no regularly scheduled classes for this course, but rather students may be asked to meet for specific reasons, which would be communicated to the students in advance of the required meeting dates. Assuming all course requirements are met for PSYO 8333.06, a grade of PASS will be recorded for each student prior to residency. Prior to receiving a PASS, the student will be assigned a grade of IP (In Progress).

Payment for Practicum

Under some circumstances, students may be provided with the opportunity to be paid for the work they are completing at a practicum. However, it is important to note that this is not typical, and most practica will be unpaid, and so payment should not be expected.

Teaching Assistant (TA) Requirement:

All Clinical Psychology PhD students are required to complete two TAships (up to 10 hrs/week for a total of 130 hours). Students will complete one TAship in their second year and one in their third year. Students with advanced standing also complete two TAships, unless they receive exemption for a maximum of one TAship (see Appendix B). All students, regardless of advanced standing, must enroll in PSYO 7100 (Seminar in Teaching Effectiveness) during their second year of the Program, which involves a concurrent mandatory teaching assistant experience in PSYO 2000/NESC 2007.

Students may also apply for additional TA/CUPE Marker positions as they become available, but note the following rules:

1) First year clinical students are typically not permitted to do TA/CUPE Marker positions.
2) A second year and beyond clinical student wanting to do more than one TA/CUPE Marker position in an academic year *must* have approval from their dissertation supervisor and the Director of Clinical Training.
3) Any clinical student hired to teach a course as a Part-Time Academic (PTA) *must* have approval from their dissertation supervisor and the Director of Clinical Training.
4) Students receiving FGS funding must not take on any TA/CUPE Marker/PTA positions that total more than an average of 16 hours per week (see Item 5.7.1 of the FGS Handbook).

Residency:

The final year of the Clinical Psychology PhD Program is a full year of clinical residency. All course work must be completed prior to beginning the residency. Comprehensives must be completed by the time of ranking residencies. To be granted permission by the DCT (or designate) to proceed with residency application, the following items MUST be submitted to the DCT (or designate) by mid-September or earlier of the year prior to residency:

1) statement and outline [supported in writing (email) by the dissertation supervisor(s)] of status of dissertation.
2) statement from the supervisor(s) indicating:
   a) Clinical Psychology PhD Program requirements completed and those remaining with timelines for their completion, and
   b) indication of the supervisor's support of residency application.

NB: The DCT (or designate) will not give approval unless it is **CERTAIN** that the comprehensives are (will be) complete by the time of ranking residencies. A statement to this effect from the comprehensive supervisor(s) is required.

3) a copy of student's CV and list of sites to which the student is planning to apply
4) statement of the student's residency goals and interests
5) AAPI pdf (excludes the essays)

Once the above documentation is received, a decision will be made regarding eligibility to apply for residency. If eligible, the DCT (or designate) will incorporate this information to personalize the APPIC Verification of Readiness. The verifications will be completed by October 28.

Please note that students applying for residency are *strongly encouraged* to apply to a minimum of six residency sites and rank a minimum of four sites where they would be willing to attend following their interviews. This guideline was developed to ensure that students have applied and ranked enough residency sites to maximize match chances. APPIC data indicates that ranking a total of eleven residency sites is the ideal number. The residency must be approved by the DCT (or designate) and must follow the guidelines for residencies outlined by the Accreditation Standards of the Canadian Psychological Association.

Committee Membership:

Although not a formal Clinical Psychology PhD Program requirement per se, all students in their residency years (i.e., first 2-3 years of the program) are expected to serve as student representatives on various departmental committees. For example, up to two student representatives sit on the Clinical Program Committee (CPC) and share one vote. They take the lead in seeking clinical student feedback and input on issues raised at CPC meetings. One of our program sub-committees, the clinical community recognition & appreciation (CCRA), is made up exclusively of students; however, the committee receives guidance and support from the director of clinical training/field placement coordinator and Clinical Program Assistant, as needed. Student contributions to our committees are greatly appreciated and student input is sought whenever possible. Serving on committees is a valuable learning experience for students and ensures that student perspectives are available.

Student Progress

The Evaluation of Students:

The quality of the student's academic, clinical and research work is evaluated in accordance with current practices in the department. Students are provided with ongoing and comprehensive evaluations throughout their time in the Clinical Psychology PhD Program. The students take the equivalent of 96 credit hours and receive a combination of qualitative and quantitative feedback from their course instructors. Regarding comprehensives, students receive supportive feedback on their proposal and formal feedback on their final submission of their first comprehensive from the DCT (or designate(s)), in addition to the feedback the student receives from their comprehensive supervisor. The second comprehensive is evaluated by the comprehensive supervisor. The chair of the student's comprehensive committee monitors the student's progress through their second comprehensive project.

Students' competence for professional practice is also carefully monitored via review of evaluations completed by clinical supervisors. Although our Clinical Psychology PhD Program supports students in their decision to delay beginning practica until after their second year of study, many students start in the summer after their first year. Course work in the first year involves mastery of specific assessment skills and imparting knowledge of ethics related to testing. Given that the primary clinical focus in the first year is on assessment, it is necessary that practica in the summer after the first year are assessment–focused, rather than treatment-focused.

In order to provide an overall evaluation of the student's academic, research and applied work, as well as to ensure that the student has benefited from ongoing evaluation, the Clinical Program Committee prepares an Annual Student Evaluation at the end of each academic year (typically in May or June). Each year, the student updates the web-based form, which includes noting progress in terms of courses, practica, and research as well as reviewing how they accomplished their goals from the previous year and setting goals for the upcoming academic year. Once the form is updated, the student's dissertation supervisor as well as the FPC provide qualitative feedback. The CPC reviews the information provided by the student, supervisor, and FPC during a meeting that is open to all CPC members (excluding the student representatives). Typically, the meeting consists of the director of clinical training (or designate), graduate program coordinator and field placement coordinator as well as the student's dissertation supervisor. The information on the web-based form is reviewed, and qualitative feedback is provided by the CPC. This feedback consists of written, individual feedback on each student's performance, highlighting the student's successes as well as any constructive feedback or concerns and is incorporated in the FGS annual report form.

At the residency level, it is the responsibility of the clinical supervisors and the director of training at the host residency institution to evaluate the competence and professional skills of the resident. The residency settings are required to inform the director of clinical training should any concerns regarding competence or ethical practice arise in their mid-year and year-end evaluations. In addition, a statement indicating successful or non-successful completion of the residency requirements is mandatory at the end of the residency.

Professional Suitability for the Practice of Clinical Psychology

The CPC may require a student to withdraw from the Clinical Psychology PhD Program on the grounds of unsuitability. Students in the Clinical Psychology PhD Program are required to abide by the Code of Ethics published by the Canadian Psychological Association and may be dismissed or suspended from the Clinical Psychology PhD Program for serious violations of this Code. Students may also be asked to suspend participation in the Clinical Psychology PhD Program if there is evidence of alcohol or drug abuse or other conditions that may compromise the student's ability to adhere to standards of practice. Ongoing concerns about the development of core competencies and failure to complete remediation plans are also potential reasons for a professional suitability review. Evidence of lack of professional suitability to practice clinical psychology will be brought to an ad hoc sub-committee of the Clinical Program Committee/Department. This committee will then make a recommendation to the Clinical Program Committee who will make a judgment and convey that judgment to the department chair for action. Please refer to the Procedures for Review of Professional Suitability, Appendix A.

Resources for Students

There are many resources available to students that are described in detail in the Department of Psychology & Neuroscience Graduate Student Handbook (available on Brightspace) and the Faculty of Graduate Studies Regulations. *(Additional resources specific to Clinical Psychology PhD students are highlighted below.)*

Financial Support:

Ensuring students have adequate financial support, particularly in the first few years in the Program, is a priority in helping students focus their attention on meeting their training and professional goals. Students are expected to apply for all sources of external and internal funding support for which they are eligible. Please check the Graduate Studies Scholarship Page and Faculty of Science Scholarship Page to begin your search.

Make sure to follow all instructions and take careful note of any deadlines. Any additional financial support is offered by your supervisor, as outlined in your admissions offer to the program.

All students are eligible to apply for a bursary available through the program's training clinic, the Centre for Psychological Health (CPH). Allocation of these funds is based on students' financial need each academic year.

Receiving funds from your supervisor(s) and the CPH Bursary are contingent on the following conditions: 1) that you make satisfactory progress in all aspects of the program (coursework, research, clinical practice), 2) that you **apply to** and accept all available scholarships/bursaries, and 3) that your supervisor's funding and the CPH bursary remain available.

Current tuition and fee amounts are available here. Refer to the Faculty of Science within these documents for tuition fees for our program.

Our students have been very successful in securing external funding. In addition to conference travel awards available to all students from the Faculty of Graduate Studies and other related institutions (e.g., IWK Health), many supervisors provide funding from their grants for their students to attend such meetings.

All clinical students are required to serve as a teaching assistant (TA) in the undergraduate program in Year 2 and Year 3 of their program (unless those with advanced placement receive an exemption for one). The typical TA commitment can range from 65 hours to 130 hours in one term, with a salary range of $2283 to $4565 [as per the CUPE Collective Agreement] for their work in this capacity.

Please note that Standard III.F. of the Canadian Psychological Association Accreditation Standards for Doctoral and Residency Programs in Professional Psychology, 6th Revision, 2023, Page 12 stipulates that "***Students do not work more than an average of 20 hours per week in employment outside of the program. These hours do not include teaching and research assistantships or other program-sanctioned work or clinical experiences."*** However, as per the Department of Psychology & Neuroscience Graduate Student Handbook, following the FGS guidelines, **the maximum allowable number of hours of work outside the Program is 16 hours.**

Academic Accommodations:

Our program is dedicated to students' wellness and success throughout the duration of the program. As part of this commitment, we work with the Student Accessibility Centre to support students who may require accommodation at entry or at a later point in the program. As per the Student Accessibility website "Accommodation is introduced when a protected characteristic (as defined by provincial human rights legislation) may place you at a disadvantage compared to other students who are not affected by a protected characteristic: e.g., (dis)ability. Accommodation recognizes difference." We encourage incoming students who may require accommodation on a short- or long-term basis to refer to Dalhousie's Student Accessibility Centre website.

If you have questions or would like to arrange accommodations, please contact the Student Accessibility Centre.

Test Library:

The Clinical Psychology PhD Program and the Centre for Psychological Health maintain well-stocked test libraries and accompanying materials, including a laptop and several scoring programs. Items required for coursework are located in an office anterior to the Clinical Psychology PhD Program assistant's office in the LSC and can be signed out during office hours. The CPH test library is available to all students completing practicum at the centre and is located in the storage room. Lists of these items are disseminated electronically as updated. The LSC Test Library inventory is posted in the students Teams channel, and CPH has a spreadsheet with a list of tests and online passwords available to students while on location. We welcome suggestions from students and faculty regarding items to add to these collections.

Clinical Workshops:

In response to student interest, the Clinical Psychology PhD Program and the Centre for Psychological Health aim to arrange one or two clinical workshops to be held each year. These workshops are intended to have an applied focus and provide a clinical training opportunity to complement and supplement material taught in courses. Recent example workshops include:

- 2015-2016: 1) Learning Disabilities (led by IWK and co-sponsored by Mount St. Vincent University), and 2) motivational interviewing
- 2016-2017: Emotional Focused Therapy (EFT)
- 2017-2018: An Introductory Workshop on Short-Term Psychodynamic Psychotherapy
- 2018-2019: Let's Get Dialectical: Foundational Skills of Dialectical Behaviour Therapy
- 2020-2021: Assessment and Evidence-Based Treatment of PTSD
- 2021-2022: Legal Rights, Supports, and Accommodations for Individuals with Disabilities: Implications and Suggestions for Psychologists
- 2023-2024: 1) Indigenous Adapted CBT for Beginners; 2) Psychological Assessment with Indigenous Peoples: A Strength-Based Approach for Children, Youth and Adults; 3) Navigating Linguistic Dynamics when Communicating with Limited Language Proficiency (LLP) Clients; 4) Working with Interpreters in a Therapy Setting
- 2024-2025: 1) Overcoming challenges in treating OCD: New ideas for old problems (led by Acadia University); 2) Culturally Adapted CBT for Black Canadians and Goals Based Outcome Monitoring;
- 2025-2026: 1) Working with Goals: An Introductory Workshop with Dr. Duncan Law; 2) Strengths-Based Approaches in Clinical Practice: Great in Theory, Tricky to Apply; 3) Building and Maintaining Positive Relationships through Meaningful, Client-Responsive Communication of Assessment Findings (led by IWK Psychology)

Program Support:

The DCT (or designate) and FPC meet with students once or twice per term (at a session called "Program Pulse") to discuss any program issues, provide information requested by the students, and communicate important program decisions to students. The DCT (or designate) is always available to students to discuss any issues. The DCT (or designate) is available by appointment or may have set office hours once per week so that students can discuss any issues individually or in small groups. The FPC is also available by appointment to meet with students to help solve any problems related to the students' practicum experiences.

Department and University Support:

The departmental Graduate Affairs Ombudsman, nominated by the graduate students, functions as an independent facilitator to mediate disputes between students and other department members (e.g., supervisors, instructors) and promote a just and reasonable solution. The Graduate Affairs Ombudsman should be approached confidentially to deal with any student concerns, and such contact would be encouraged prior to any formal appeal. When student concerns cannot be resolved by the Ombudsman, a formal appeal to the departmental Chairperson may be initiated by the student. The Graduate Affairs Ombudsman is available to help students develop a plan for resolution before, and/or during, going through any formal processes. Students considering a supervisory change should consult with the DCT (or designate) and potentially also the

departmental Graduate Affairs Ombudsman. There is also a formal process for addressing concerns which is referred to in the Departmental Graduate Student Handbook (Section III.D) and Section 12 of the FGS Regulations.
At the university level, students also have access to the Dalhousie Ombudsperson, who can assist with student/supervisor or student/instructor relationships, support through an appeal process, clarification of university regulations, and situations of abuse of power.

OTHER IMPORTANT POLICIES

CRIMINAL RECORDS CHECK AND OTHER SCREENING PROCEDURES:

The Clinical Psychology PhD Program in the Department of Psychology and Neuroscience at Dalhousie University does not require a criminal records check or other screening procedures (e.g., child abuse registry check) as a condition of admission into its program. However, students should be aware that such record checks or other screening procedures are required for internal and external practica and residency placements, as well as for some research activities. Successful completion of these activities is necessary for completion of the Clinical Psychology PhD Program. Although this is not a requirement for admission to our program, students must answer the following question upon application to the program:

“Given that clinical placements and residencies require a Criminal Record Check and a Vulnerable Sector Check, do you have any criminal convictions for which a record suspension (pardon) has not been granted? If yes, you may briefly explain (optional)."

It is the student’s responsibility to have such procedures completed PRIOR TO REGISTERING IN PSYO 6108.03, Assessment Practicum: Adult AND PSYO 6107, Assessment Practicum: Child, i.e., **IN THE FALL OF FIRST YEAR**. The student is also responsible to pay all associated application fees.

Training facilities may refuse to accept students based on information contained in the record check or other screening procedure(s). If the student is unable to complete a requirement due to a failure to meet the record check or screening requirements of the facility, or if the student is refused access to the facility on the basis of the information provided, then the student may fail the course/clinical experience, and as a result may not be eligible for progression or graduation, i.e. may be dismissed from the Clinical Psychology PhD Program. Note that respective facility requirements may change from time to time and are beyond the control of the university.

Students should also be aware that many of the regulatory bodies for psychology require a satisfactory record check as a condition of professional licensure. In Nova Scotia, the Nova Scotia Regulator of Psychology (NSRP) accepts graduation from a CPA accredited program as satisfactory to be placed on the Candidate Register. For more information, please review the documentation under the link entitled “Become a Registrant” on https://www.ns-rp.ca/. For information about Criminal Records Check and Child Abuse Registry Check, please consult the field placement coordinator, the practicum manual, or see the following links:
https://www.halifax.ca/safety-security/police/criminal-record-check
https://www.novascotia.ca/apply-child-abuse-register-search

OUT-OF-PROVINCE PLACEMENT:

Students interested in pursuing out-of-province practica (or comprehensives) must seek permission from their supervisor and DCT (or designate). Since long-distance practica pose some administrative and logistical issues, permission from the FPC is also required.

CO-SUPERVISOR:

Supervisors external (i.e., adjunct, cross-appointed) to the Department of Psychology and Neuroscience are required to have a co-supervisor until a record of supervision within the Clinical Psychology Program is

established. The co-supervisor must have an established track record of supervision within our program and meet the FGS requirements for co-supervision. For more information about co-supervisory requirements see Section 9 of the FGS Regulations.

Clinical Mentor:

Students supervised by adjunct, cross-appointed, or non-clinical departmental faculty are matched with a clinical faculty, in the capacity of a clinical mentor, for the purpose of helping the student navigate program requirements. The clinical mentor is intended to supplement advice and guidance specifically on Clinical Program information (e.g., coursework, progression through the program, clinical meetings/organizations) and to direct students to the appropriate resources in the department (e.g., DCT, FPC, research supervisor, instructor). Questions about practicum and residency should be directed to the FPC. The clinical mentor is not a required or official appointment and is sought out as often as mutually agreeable during the student's program.

Space:

The department provides office space for all graduate students, but the responsibility for providing the space and equipment needed to complete the student's research falls to the dissertation supervisor.

Equality:

The Clinical Psychology PhD Program endorses Dalhousie University's policies on human rights. We actively oppose sexual harassment and discrimination based on race, gender, ethnic origin, sexual orientation, or age. For information about these policies, please visit the Office for Equity and Inclusion webpage.

Academic Regulations and Student Appeals:

Students are directed to acquaint themselves with the academic regulations contained in the latest editions of the Graduate Academic Calendar, the Faculty of Graduate Studies Regulations, and the Department of Psychology & Neuroscience *Graduate Student Handbook* (found on BrightSpace). Specific information on student appeals can be found under Section 12 in the FGS Regulations and Section III.D. in the Departmental Graduate Handbook. Appeals process for practicum is contained in the Clinical Program Practicum Handbook (see Practica or Field Placements).

Access to Student Records

(Please see Student Records Management Guidelines Clinical Psychology PhD Program available from the Clinical Program Assistant).
Access to student records shall be restricted except for:

- The student in question,
- The departmental chair,
- Those authorized by these guidelines,
- The administrative assistants of those authorized by these guidelines, but only at the direction of those authorized, or
- As required by law, no other individual may access Student Records unless the student provides their express written consent.
- Students may access any records containing their personal information. Clinical Psychology PhD students seeking to access their records should make a request in writing to the director of clinical training. Students are provided information regarding access to their records in the Graduate Student Handbook and the Clinical Program Handbook. Students may access their practicum files at any time by contacting the field placement coordinator.

Vacation/Planned Absences

It is essential that before booking time away (e.g., vacation, conference attendance), the student consults and obtains approval from whomever they are working with at the time. This includes the dissertation supervisor, practicum supervisor, and instructors of courses the student is enrolled in. Reading weeks (both Fall and Winter) are not vacation from the program. These are scheduled course breaks to allow time to catch up on one's workload, but research and practicum continue uninterrupted. In addition, a request to change from in-person to virtual attendance should always be communicated well in advance to supervisors, except in unavoidable circumstances (e.g., sudden illness). Students are expected to attend classes in-person unless the instructor says otherwise.

Program Events & Awards

The Clinical Student Citizenship Award

The Clinical Student Citizenship Award (aka the Beatrice Award) is awarded annually to the graduate student in the Clinical Psychology PhD Program who is deemed to have been the "best citizen" and the most positively helpful or supportive to fellow students (graduate or undergraduate) during their time in the Program. The award is decided through nominations and student voting. Any student within the Clinical Psychology Program may submit a nomination, and these nominees are then voted on by all students in the program to determine the award winner. This award is made possible through the generous donation by Dr. Patrick J. McGrath, who established the Clinical PhD Program in his position as inaugural Coordinator (DCT) from 1989 to 1998 and served again from 2002 to 2004.

The Administration of the Program

The Clinical Program is governed by the Clinical Program Committee (CPC). Major policies about student admissions to the Clinical Psychology PhD Program, student progress, and curriculum are developed and implemented by the CPC, and are communicated to the department as needed.

The CPC comprises:

- director of clinical training (DCT)
- associate director of clinical training (ADCT)
- chair of the Department of Psychology and Neuroscience or designate
- graduate program coordinator or designate
- all core clinical faculty
- up to two clinical graduate student(s) (who share one vote)

Course Structure

The following tables (pp. 19 & 20) are *examples* of the program structure – courses may be offered in alternates terms in the respective year. Please always consult the official online academic timetable for current course offerings.

Course Descriptions

Please visit the Graduate Studies Academic Calendar for full course descriptions.

YEAR 1

Fall Term

Course #	Course Title
5000.06[1]	Research Assignment (First Comprehensive)
6103.03	Adult Assessment: Historical and Contemporary Perspectives and Practical Applications
6104.03	Psychopathology: A Lifespan Perspective
6105.03	Ethics and Professional Decision Making
6106.03	Foundational Practice Skills for Clinical Psychology
8011.03	Colloquium
8333.06[1]	Field Placement
9000.00[1,2]	Master's Thesis
REGN 9999[1]	Graduate Program Fee Registration

Winter Term

Course #	Course Title
5000.06[1]	Research Assignment (First Comprehensive)
6001.03	Fundamentals of Statistics and Experimental Design
6102.03	Child Assessment: Historical and Contemporary Perspectives and Practical Applications
6108.03	Mental Health and Psychoeducational Assessment Practicum: Adult
8011.03	Colloquium
8333.06[1]	Field Placements
9000.00[1,2]	Master's Thesis
REGN 9999[1]	Graduate Program Fee Registration

Spring/Summer Term

Course #	Course Title
6107.03	Mental Health and Psychoeducational Assessment Practicum: Child
8333.06[1]	Field Placements
9000.00[1,2]	Master's Thesis
REGN 9999[1]	Graduate Program Fee Registration

YEAR 2

Fall Term

Course #	Course Title
5000.06[1]	Research Assignment (First Comprehensive)
6003.03	Multivariate Statistics
6204.03	Cognitive, Affective and Behavioural Bases of Intervention: A Lifespan Perspective
7100.03	Seminar in Teaching Effectiveness
8012.03	Colloquium
8333.06[1]	Field Placement
9000.00[1,2]	Master's Thesis
9402.00[3]	Teaching Assistantship – Masters
REGN 9999[1]	Graduate Program Fee Registration

Winter Term

Course #	Course Title
5000.06[1]	Research Assignment (First Comprehensive)
6209.03	Research Seminar
6213.03	Culture and Identity: Diversity Issues in Clinical Psychology
6214.03	Professional Practice in Intervention
8012.03	Colloquium
8333.06[1]	Field Placements
9000.00[1,2]	Master's Thesis
REGN 9999[1]	Graduate Program Fee Registration

Spring/Summer Term

Course #	Course Title
8333.06[1]	Field Placements
9000.00[1,2]	Master's Thesis
REGN 9999[1]	Graduate Program Fee Registration

YEAR 3 **Fall Term** **Course #**	**Course Title**
6303.03	Advanced Clinical Practice Skills in Supervision, Consultation and Program Evaluation
6304.06	Clinical Rounds/Case Conference
XXXX.03[4]	Elective
8013.03	Colloquium
8333.06[1]	Field Placements
9530.00[1]	Doctoral Thesis
9403.00[3]	Teaching Assistantship – PhD
Comprehensive Project II[6]	
REGN 9999[1]	Graduate Program Fee Registration
Winter Term **Course #**	**Course Title**
6804.03	Topics in Neuropsychology
6301.03[5]	Advanced Clinical Intervention: Child
or	
6302.03[5]	Advanced Clinical Intervention: Adult
6304.06	Clinical Rounds/Case Conference
XXXX.03[4]	Elective
8013.03	Colloquium
8333.06[1]	Field Placements
9530.00[1]	Doctoral Thesis
Supervision Practicum[6]	
9403.00[3]	Teaching Assistantship - PhD
Comprehensive Project II[6]	
9413.00[7]	Comprehensive Examination
REGN 9999[1]	Graduate Program Fee Registration
Spring/Summer Term **Course #**	**Course Title**
8333.06[1]	Field Placements
9530.00[1]	Doctoral Thesis
REGN 9999[1]	Graduate Program Fee Registration

YEAR 4 **Fall Term** **Course #**	**Course Title**
8333.06[1]	Field Placements
9530.00[1]	Doctoral Thesis
REGN 9999[1]	Graduate Program Fee Registration
Winter Term **Course #**	**Course Title**
8333.06[1]	Field Placements
9530.00[1]	Doctoral Thesis
REGN 9999[1]	Graduate Program Fee Registration
Spring/Summer Term **Course #**	**Course Title**
8333.06[1]	Field Placements
9530.00[1]	Doctoral Thesis
REGN 9999[1]	Graduate Program Fee Registration
YEAR 5 – Residency Year **ALL TERMS** **Course #**	**Course Title**
9100.00[1]	Pre-Doctoral Internship
REGN 9999[1]	Graduate Program Fee Registration

[1] **Students must register in the course code** for transcript purposes **but there is no class-time/practicum component** associated with it.

[2] **Students will register in Master's Thesis until they are fast-tracked into the PhD.**

[3] **Teaching Assistantships only need to be taken in <u>one</u> term** for both Year 2 and 3. PSYO 9402 <u>must</u> be taken in the same semester as PSYO 7100, but students may choose to take their TAship (PSYO 9403) in either the Fall **<u>or</u>** Winter term of their third year.

[4] **A total program requirement of one** .03 credit hour course, typically taken in 3rd or 4th year. Electives should be selected based on individual career goals and gaps in training. In consultation with the DCT (or designate) and supervisor(s), an elective may be taken in other departments within or outside Dalhousie University. With permission from the supervisor(s) and DCT (or designate), additional electives may also be taken/audited.

[5] **Students are required to take <u>ONE</u>** of either PSYO 6301 or PSYO 6302 depending on their area of specialization. These courses are offered in alternating years. Students may choose to take both PSYO 6301 and PSYO 6302 and may count the other as the one required elective, or take advantage of auditing the course.

[6] **Requirements for which the student will not register**. Supervision Practicum (in-house supervision practicum) should be completed in Year 3 or 4 after completion of PSYO 6303.

[7] **PSYO 9413** should only be registered in the term that the second comprehensive is successfully completed. A PASS grade will be given to signify the student has met the program's comprehensive requirements.

<u>NB</u>: If a student has not completed all requirements for the PhD within five years, the Faculty of Graduate Studies may grant a 1-year extension at the request of the Department. However, the Department may request no more than three such extensions on behalf of the student and will do so only if there is evidence of satisfactory progress.

Appendix A

Dalhousie Clinical Psychology PhD Program Procedures for Review of Professional Suitability

These guidelines have been developed to outline the steps in the review of professional suitability.

Considering the need for expedient review, the designation "in writing" in each of the following steps may be in the form of electronic mail.

In situations where professional suitability is being evaluated, a sub-committee will be formed and will include two core clinical faculty members and a non-clinical departmental faculty, appointed by the DCT and Department Chair.

In the review process, the student has the right to representation, such as the department's Graduate Affairs Ombudsperson or a university-level ombudsperson. The student is required to inform the Sub-Committee Chair, in writing, they will have a representative present during the review hearing.

There are several pathways/scenarios that may initiate this process including, but not limited to, an informal complaint from an instructor or supervisor, ongoing concerns regarding development of competencies, and/or a failed remediation plan. When the DCT determines that a review of professional suitability *may be* warranted, a meeting of the clinical faculty members of the Clinical Program Committee will be called to discuss the complaint/concerns, vote on whether to proceed with a review, and to select the clinical members of the sub-committee. The Department Chair will be asked to identify a non-clinical committee member.

1. Within two (2) days of the Clinical Program Committee's decision to proceed with a review, the student shall receive a copy of these procedures and a formal, written notification of the Sub-Committee's composition and the intention to review the student's suitability for practice. The student shall be informed of their right to representation and their right to consult with the department's or university's student Ombudsperson.

2. Within ten (10) days of the notification to the student, a written complaint shall be submitted by the complainant(s) to the Sub-Committee. This submission should include:
    a. a description of the exact nature of the observations leading to the complainant's concerns with regard to suitability for practice, including a specific description of events and chronology
    b. a description of any steps taken by the complainant to address or remediate the complaint with the student
    c. a description of the student's response to this remediation
    d. all related documentation
    e. suggestions for resolution of the concerns, which may include but are not limited to, remedial training and/or supervision, restriction on the student's participation in clinical work, and/or suspension or dismissal from the program

3. In recognition that the issue of professional suitability requires consideration of patterns of behaviour, rather than isolated events, written submissions may be sought from others within or involved with the Program who are in a position to observe and evaluate the student's behaviour, skills, conduct, and competence as they relate to clinical practice. The Sub-Committee will review the complaint and will determine if additional written submissions are required. If applicable, a list of those from whom written submissions will be requested will be generated and requests for written submissions will be made within 7 days of receiving the written complaint. The Sub-Committee will request that written submissions be provided to the committee within 10 days. The student shall be informed, in writing, of the names of those from whom submissions are being sought.

4. Upon receipt of the complaint by the Chair of the Sub-Committee, the procedure is as follows:

a. The Chair shall acknowledge the complaint in writing, informing the complainant of the procedure to be followed.
b. Following the written submissions deadline, the Chair shall write to the student, enclosing a copy of all written submission(s) received and a description of the review process, and shall invite the student to submit a written response to the Sub-Committee Chair within fourteen (14) days. This written response may include, but is not limited to:
    i) a description of the events leading to the complaint
    ii) details of any relevant circumstances seen to mitigate the impact of these events on the student's suitability for practice
    iii) a description of any steps taken by the student to remediate the complaint
    iv) all supporting documentation
    v) response to suggestions for resolution of the concerns; alternative suggestions may be included
c. The Chair shall copy all materials received [complaint(s), additional submissions, and student response] to the members of the Sub-Committee.
d. Review Hearing: A review hearing shall be scheduled to take place within sixty (60) days of the initial notification to the student, unless the student has voluntarily withdrawn from the Program or has notified the Chair that they refuse to participate in the hearing. The Sub-Committee Chair will decide the student's status in the program and allowable activities during the period between the initial complaint and the hearing based on the nature of the complaint.

    The complainant(s) and the student shall be informed of the date, time, place, and duration of the hearing, and all relevant submissions (complaint(s) and student response) shall be copied to the complainant(s), student, and Sub-Committee members.

    Parties with legitimate standing or parties who provided written submissions to the committee may be called as witnesses during the hearing.

    No new materials may be introduced during the review hearing without the approval of the Sub-Committee. All parties with legitimate standing will be called as witnesses at the hearing and will only be present at the hearing when called in as a witness.

    Following the hearing, there will be a private deliberation by the Sub-Committee.

    All parties who attend will be reminded that all aspects of the hearing are confidential.

    The following order shall be observed and all participation is voluntary:
        i) Presentation by the complainant(s)
        ii) Presentation by the student or representative
        iii) Presentations by other parties with legitimate standing recognized by the Chair
        iv) Questions to the complainant by the student or representative, to the student by the complainant(s), questions to either the student or complainant from parties with legitimate standing; and questions to parties with legitimate standing by the student
        v) Any questions by the Sub-Committee
        vi) A closed deliberation session will follow and include only the Sub-Committee members; the Sub-Committee's decision may propose such remedies as it considers appropriate and are within the power of the Sub-Committee under Departmental, Faculty, and University regulations

e. In judging the student's professional suitability, the Sub-Committee shall rely upon the information obtained through the review process outlined above and shall be guided by the following statement, adapted from the University of Saskatchewan, Department of Psychology's Policy on Evaluation of Student Competence:

Criteria for the Evaluation of Professional Suitability:

The goal of Dalhousie's Clinical Psychology PhD Program is to produce clinical psychologists who are thoroughly grounded in both the science of psychology and the methods of clinical practice. The Program also has an ethical and legal obligation to protect both the public and the profession from any foreseeable harm resulting from the professional activities of its faculty or students. The Program offers advanced training relating to Core Competencies and areas of Foundational Knowledge in Clinical Psychology in order to prepare students for clinical work. However, it is understood that, in addition to this training, students in the program must possess a basic professional suitability for clinical psychology practice, sufficient to allow them to meet the standards laid out in the Canadian Code of Ethics for Psychologists. Thus, Faculty, Supervisors, and Administrators in the Program have a responsibility to evaluate students' performance and abilities in coursework, seminars, scholarship, comprehensive examinations, practica, or related program requirements, as well as the student's professional and ethical conduct in the fulfillment of these program requirements as outlined in section iii (a to d) below.
A student may be deemed to have inadequate professional suitability under any of the following circumstances:

i. *The student's conduct clearly and demonstrably impacts the performance, development, or functioning of the student; represents a risk to public safety; or damages the representation of psychology to the profession or public*
ii. *The student has engaged in one or more serious violations of the Canadian Psychology Association's Code of Ethics, beyond those which would be expected given the student's level of training and professional experience*
iii. *The student has demonstrated a pattern of behavior which suggests significant deficits in any of the following areas:*
    a. *Interpersonal and professional competence (e.g., the ways in which student-trainees relate to clients/patients, peers, faculty, allied professionals, the public, and individuals from diverse backgrounds or histories)*
    b. *Self-awareness, self-reflection, and self-evaluation (e.g., knowledge of the content and potential impact of one's own beliefs and values on patients/clients, peers, faculty, allied professionals, the public, and individuals from diverse backgrounds or histories)*
    c. *Openness to processes of supervision (e.g., the ability and willingness to explore issues that either interfere with the appropriate provision of care or impede professional development or functioning)*
    d. *Resolution of issues or problems that interfere with professional development or functioning in a satisfactory manner (e.g., by responding constructively to feedback from supervisors or program faculty; by the successful completion of remediation plans; by participating in personal therapy in order to resolve issues or problems)*

Where any of the above conditions have been met, and it is deemed that the student is likely to benefit sufficiently from additional intervention, training, and/or supervision to allow the student to function in accordance with the Canadian Code of Ethics, the student may be suspended or restricted in their participation in the program until such time as such remediation has taken place and the student is deemed to have demonstrated sufficient improvement in their abilities, conduct and/or behavior.
Where any of the above conditions have been met and the student has failed to benefit from remedial training, intervention or supervision, or is deemed unlikely to benefit from such intervention, training, and/or supervision, the student shall be dismissed from the Program.

- Following the Review Hearing, the Sub-Committee shall prepare a written decision, including a summary of the facts of the case, a discussion of the implications of these facts for the student's professional suitability, and recommendations for further action. This decision shall be forwarded to the Director of Clinical Training, for the consideration of the Clinical Program Committee in rendering its final decision in the matter. A copy of this decision shall be made available to the student and the complainant(s) and all parties will be informed that confidentiality regarding the decision must be maintained.

- The Director of Clinical Training shall inform the student and the Department Chair of the Clinical Program Committee's final decision, and any resulting action.

Further appeal of the decision at the Faculty of Graduate Studies level, according to University Regulations (FGS Academic Appeals Committee Procedures), is possible if the student is not satisfied with the process at the Departmental level.

Appendix B

Guidelines and Procedures for Decisions regarding Exemptions for Students with Advanced Standing in the Clinical Psychology PhD Program

Note: Advanced placement refers to all students in the Clinical Psychology PhD Program who enter the Program with a Master's degree, regardless of whether the degree is in Psychology or whether it has a clinical focus. All requests for advanced placement will be vetted by the DCT, FPC, and respective instructors, and are subject to approval by the Faculty of Graduate Studies (FGS).

Process

1. Once students have accepted the offer of admission into the Clinical Psychology PhD Program, those with Master's degrees are reviewed to determine exemptions. Students are not reviewed for exemptions prior to being admitted or prior to their confirmation of acceptance.[1] Prior to admission/acceptance, the Director of Clinical Training (DCT), if asked by the student, will share with the student the process that is taken to evaluate for exemptions and the likely outcome. However, this information is informal until the time the student accepts admission into the Program.

2. Once the student with advanced standing (e.g., Master's degree) accepts our admission offer, the student is contacted via email by the Clinical Program Assistant asking for detailed information that will allow the DCT, in consultation with respective course instructor(s), the associate DCT and/or the field placement coordinator (FPC), to evaluate previously completed courses for exemptions.

3. To be evaluated for course exemptions, the student is asked to submit:
    a. A table listing the course(s) the student is requesting to be exempted from, as well as the calendar description(s) of the course(s) that the student believes fulfill the Clinical Psychology PhD course credit.
        i. For example, if the student is requesting to be exempted from PSYO 6102.03 Psychological Assessment: Child, the student would include this in the first column of the table, the next column would list the corresponding course title(s) and calendar description(s) of the course(s) that they had taken in their Master's degree that is believed to be equivalent.
    b. The syllabus for each course from their Master's degree that they believe fulfills a course requirement in the Dalhousie Clinical PhD Program.

4. Students with a Master's degree may also apply for exemption from the General Elective Requirement. As with other exemption requests, the student should clearly state why they believe the course fulfills the elective course requirement (i.e., it must be relevant to the field of psychology).

5. Students with a Master's degree may apply for exemption for one of the two required Teaching Assistantships. To be granted exemption for one TAship, the course outline(s) of courses for which the student TAed must be submitted.

6. The DCT will review the information submitted by the student and will consult with the respective course instructors of the courses for which the student is requesting an exemption.

7. The submission is reviewed by the DCT in consultation with the associate DCT and/or the field placement coordinator and respective course instructor(s).

8. A formal letter detailing the decision regarding exemptions is sent via email to the student (and copied to the respective instructor(s), and the dissertation supervisor(s)). Outcomes of the review include that the

student may not receive an exemption, may be exempted from the entire course, may be asked to complete certain components of the course, or may be asked to audit the course[2].

9. Students with questions or concerns about the decision are encouraged to discuss these with the DCT. All concerns brought to the DCT are revisited by the DCT with the associate DCT and/or the field placement coordinator, and the respective instructor(s). Any changes are communicated to the student via another formal letter sent by email. If no changes are made, the rationale for the decision is communicated to the student.

10. If the student is not satisfied with the decision made by the DCT, in collaboration with the course instructor(s), associate DCT and/or the field placement coordinator, then the student's concerns would be brought to the Clinical Program Committee (CPC) and discussed in a closed meeting. The CPC's vote would represent the final decision, unless the student chooses to put forth a formal grievance. At this point, the Program would follow the procedures outlined by the Faculty of Graduate Studies (FGS).

11. Requests for an exemption from one comprehensive project can be made from clinical students who are admitted with a Master's degree <u>following the successful presentation of the first clinical comprehensive project</u>. All such requests will be considered on a case-by-case basis and will require the approval of the DCT and the dissertation supervisor.

Footnotes:

1. The decision to wait until after the student accepts our offer of admission was made as it is a lengthy and time-consuming process to conduct the review to determine exemptions. The program does not want to engage in this process if the student is unsure of whether they will accept our admission offer.
2. Given that some of our courses are lifespan focused, students may be exempted from only certain components of the course. For example, a student coming into our program with a school psychology Master's degree will have training in child psychology but not adult psychology and so would be required to complete all adult components of the courses. Also, there may be situations where a student's past course does not cover all the material in one of our courses (e.g., a previous statistics course may not have covered a certain statistical technique) and in these situations we may require that the student complete this component in our course, even though they are generally exempted from the course. In situations where partial exemption is given, a student may be required to complete an independent studies course to cover these components.

Appendix C

Navigating Comprehensive Projects and Timelines: Guidelines for Clinical Psychology Students

This document is intended to highlight key parts of the comprehensive requirements and suggested timelines for clinical psychology students. It does not include *all* relevant information, and students should carefully refer to the Clinical Program Handbook for more details and information. The comprehensive system is a unique opportunity to tailor student learning to individual needs and goals, while ensuring a breadth of exposure and experience in the field of psychology.

What are the comprehensive requirements?

Rather than a Comprehensive Exam, the Clinical Program's comprehensive requirement is a series of two projects. The comprehensive plan, which consists of a set of brief proposals for these two projects as well as for the dissertation, should be developed in collaboration with the dissertation supervisor (for the dissertation component) and a comprehensive chair (selected by the student; see timeline below for further description of this role) to ensure sufficient breadth of training in the field of psychology. A template for the comprehensive plan is available from the Graduate Program Administrator. The Clinical Program Assistant also has a binder of sample comprehensive plans that students are encouraged to consult. Each clinical student's comprehensive plan is presented—by their comprehensive chair—to and approved by the clinical faculty at their regular meetings (held every 1-2 months).

The following definitions apply. See also example outcomes for comps, in the section below.

Empirical study: A study that includes all aspects of the scientific method from conceptualization, data collection, data analysis through to dissemination. The study may be quantitative or qualitative in nature so long as it follows rigorous methods. A meta-analysis is also an empirical study.

Empirical project: A project which may include some, but not all, aspects of the scientific process as outlined above. An empirical project may also include a systematic review or meta-analysis.

The comprehensive projects include one empirical study and one empirical study or project:

1. The first comprehensive project is an empirical study completed under the supervision of the dissertation supervisor[s]. Students entering the program with a Master's degree complete their first comprehensive under the same conditions, though they may request an exemption from their second comprehensive project after successful presentation of the first one. In such cases, a description of the Master's project should be included in the comp plan in place of the second comp project. Eligibility for an exemption must be discussed with and approved by the DCT; further details on this process can be found in the Clinical Program Handbook. Students must submit a formal (a) brief questionnaire for the first comprehensive project, (b) written proposal for this first comprehensive project and (c) orally present their proposal. They must also submit a final manuscript summarizing the results of this project and successfully complete an oral defense of the project. All written and oral presentations are evaluated by a Comprehensive Examining Committee consisting of the dissertation supervisor(s), the DCT [or designate(s)], and two core clinical faculty members. Please refer to projected timelines below.

2. A second comprehensive project, that can be an empirical study or project, is completed under the supervision of a different faculty member to enhance breadth of training and exposure to different supervision models. Students can also choose to complete a teaching certificate for their second comprehensive project.

Limitations and exceptions

Of the two comprehensive projects, only one can include a meta-analysis or systematic review. Neither are required, however.

What is the ideal scope of each comprehensive project and what are the expected outcomes?

Comp 1: The first comprehensive project has the largest scope as it typically includes all phases of the scientific process from conceptualization to manuscript writing. The expected outcome is a draft of a manuscript incorporating at least one round of feedback from the supervisor as well as successful completion of the written and oral components as deemed by the examining committee.

Comp 2: While empirical in nature, comp 2 often has a more limited scope than comp 1. For example, students might use archival data rather than collecting their own data. Whether a written product is required for the comp may depend on what stage of the scientific process the student becomes involved with. Students are encouraged to write-up the results of their comp for publication, but this does not need to be the endpoint. Many students work on a corresponding publication after their comp is officially completed given the benefits to their training as well as to their academic record (e.g., for scholarship applications).

Example outcomes might include, but are not limited to:

- Learning a new statistical analysis, completing the analyses, and drafting the data analysis and results section of a manuscript
- Completing the analyses for a study and presenting the results at a conference (i.e., also becoming familiar with the relevant content literature, preparing an abstract and presentation)
- Learning a new data collection technique and collecting a pre-determined amount of data. Writing the corresponding Methods section for a manuscript (i.e., while another co-author has written the other sections).
- Conducting a meta-analysis and writing the results section of a manuscript (i.e., while another co-author has written the Introduction and Discussion)
- Conducting a scoping or systematic review for a new research area and writing the results section of a manuscript (i.e., while another co-author has written the Introduction and Discussion).
- Learning about a new theory and literature and writing the Introduction, Methods and Discussion sections of a paper (i.e., while another co-author has conducted the analyses and written the results).
- Completing a teaching certificate through Dal's Centre for Learning and Teaching https://www.dal.ca/dept/clt/programs/CUTL.html

When should I complete each of the comprehensive requirements?
Please note that the description below is intended to be a guideline and there is flexibility depending on individual circumstances and preferences. A graphical depiction of these guidelines is presented at the end of this document.

Comp 1 planning: Planning for the first comprehensive project should begin immediately upon entering the program in September of Year 1.

Comp 1 questionnaire: A completed comp 1 questionnaire is typically due mid-October.

Comp 1 proposal submission & presentation: The Comp 1 proposal is typically due at the end of December (before the break) of Year 1 in the program. The presentation is typically in January.

Comp 1 final manuscript submission & defence: The Comp 1 final manuscript is typically due in May of Year 2 in the program. The defence is approximately three-four weeks after the manuscript has been submitted.

Comp plan (planning and approval): Students should begin discussing their comprehensive plan with the dissertation supervisor and comprehensives chair in Summer of Year 2 (i.e., after defending Comp 1). This is after the term in which students take Research Methods (P6209), wherein they will complete an assignment to assist with dissertation planning. Students should aim to submit a comprehensive plan no later than December of Year 3. Thus, this 6-month period will be a busy "planning" phase in the program as students will need to:

a) Identify a comp chair. The comp chair is a faculty member who is familiar with our comp system (i.e., if your dissertation and comps are all supervised by external faculty, we recommend you choose an internal faculty member as your comp chair). They will assist in preparing the comprehensive plan to ensure it meets the program requirements. The comp chair will present the student's plan for approval and is also responsible for collecting and submitting comp completion forms from all supervisors.
b) Identify supervisor(s) for comp #2
c) Develop brief proposal for comp #2 (approximately 0.5-1 page each)
d) Develop your dissertation proposal (approximately 2 pages)

Note: If you have your comps planned but have not completely finalized your dissertation, you can still submit your comp plan for approval. You will be required to submit an amendment to your comp plan once your dissertation proposal is finalized.

Comp 2: Aim to begin Comp 2 in Year 3 of the program. Allow for up to one year to complete this comp.

Dissertation: Data collection for the dissertation should begin in Year 3 at the latest. The reason we recommend allotting one year to complete your second comp is because students will also be conducting dissertation research at the same time. However, the comp project itself should not require a full year to complete; rather, it is completed simultaneously with the dissertation, courses, and clinical practica. Students should consider when they have "quieter" periods in their dissertation research and make a push to complete the second comp during that time.

Comp completion: Both comprehensives must be completed and signed off by the supervisors and comps chair **prior to the student applying for residency (i.e., by mid-October in Year 4 or 5, ideally, but in later years the deadline would still be mid-October for applying to residency that year).** This requirement is in relation to the comps and does not include the dissertation. The supervisor of the second comp must submit a comp completion form to the Graduate Program Administrator and Clinical Program Assistant. The student should ensure their comp supervisor completes and submits the comp completion form after finishing their second comp. All forms are available from the Graduate Program Administrator.

Please note that the descriptions below are intended to be a guideline and there is flexibility depending on individual circumstances and preferences. If you have your comps planned but have not completely finalized your dissertation, you can still submit your comp plan for approval. You will be required to submit an amendment to your comp plan once your dissertation proposal is finalized.

Comp 1

Comp 1 planning
- Begin immediately upon entering the program in September of Year 1.

Comp 1 proposal & defence
- Proposal due mid-December of Year 1.
- Presentation is mid-January of Year 1

Comp 1 submission & defence
- Final manuscript typically due in May of Year 2.
- Defence is three/four weeks after the manuscript has been submitted.

Comp Planning & Approval

Winter Year 2
- Begin discussing comp plan with dissertation supervisor and comp chair (after defending comp 1)
- Take Research Seminar (P6209) to assist with dissertation planning

Fall Year 3
- Submit comp plan (No later than December of Year 3)
- Begin Comp 2 (allow one year to complete)

Summary of Tasks for Year 2
- Identify comp Chair
- Identify supervisors for comp #2
- Develop brief proposal for comp #2
- Develop dissertation proposal

Comp Completion
- Before applying to residency
- Mid-October of Year 4, ideally