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**INTERNATIONAL GUIDELINES FOR
PSYCHOLOGY TRAINING CLINICS**

International Association of Psychology Training Clinics¹



¹ The International Association of Psychology Training Clinics was initiated in March 2018 through a collaboration of the Association of Australasian Psychology Training Clinics (AAPTC) and the Association of Psychology Training Clinics (APTC) centered in the United States of America.

For Public Comment:

INTERNATIONAL GUIDELINES FOR PSYCHOLOGY TRAINING CLINICS

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Purpose of the Guidelines

These guidelines are intended to aid in the appropriate, professional, effective, and ethical management of Psychology Training Clinics (Clinics) in higher education institutions. They are intended to facilitate the continued systematic development of the psychology profession and to help assure a sound level of professional practice by developing psychologists. They are founded on the premise that effective leadership and service provision is supported and strengthened by an explicit statement of essential guidelines for the operation of Clinics.

These guidelines are intended to serve as a flexible template for the development and operation of Clinics. The standards are intended as a starting point for educational institutions and training groups to offer guidance in the development of Clinics that provide training, service, and research opportunities for professional psychologists in training. They are intended to establish the core standards for developed Clinics and to act as aspirational guidance for developing Clinics.

The standards offered herein stem from training and education principles of dominant English-speaking cultures and may require adaptation or reinterpretation to ensure their cultural relevance and appropriate application for the communities and stakeholders they serve.

Description

Clinics are clinical settings within educational institutions designed to provide Trainees enrolled in postgraduate/graduate professional psychology programs with the foundational competencies of applied professional practice in psychology. Clinics provide a supportive and developmentally sequenced learning environment that fosters increased awareness of and sensitivity to ethical and cultural issues and evidence-based best practice paradigms.

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Clinics promote professional development for all staff, and provide appropriate professional training experiences for Trainees. They prepare Trainees to undertake further training and development in a range of practicum/placements and to practise safely and effectively in their chosen area of psychology practice.

Clinics draw from a range of theoretical perspectives informed by contemporary research and practice. Based on an evidence-based practice model, and under the supervision of qualified and experienced clinical staff or faculty, Clinics train new practitioners to apply best practice and evidence-based models of psychology to a professional standard from a foundation taught in the academic components of their program.

Clinics have an important and unique role in providing theoretical integration and a safe and smooth transition between coursework to application in the clinical setting. This is undertaken through regular, systematic, and intensive monitoring and supervision to ensure the acquisition of professional, ethical, legal, and clinical knowledge, skills and competencies.

Clinics also provide an important service to the community. Clients or patients who attend Clinics need to be provided with high quality professional care, using accepted standards of best practice, tailored to client/patient needs. Clinics must ensure safe, ethical, culturally sensitive and competent care that meets the professional and legal requirements of the jurisdiction in which the Clinic provides services. Clinics may also provide opportunities for research.

Consistent with its mandate/purpose, training is an important priority, but a Clinic's commitment to effective training should always occur with an equally uncompromising commitment to client/patient care. Further, high standards of client care and training must be ensured in any research conducted in Clinics. Precautions must be taken to minimise the risk of client/patient exploitation by clearly separating activities required for best clinical care from those for other purposes (e.g. for educational or research purposes). Practices must be conducted in a manner consistent with professional and ethical standards and include informed consent procedures.

Roles, authorities, and responsibilities

Clinic Director

Responsibilities:

The Clinic Director is responsible for the professional operation of the Clinic, including adherence to ethical and legal requirements for professional conduct and client/patient care. Clinic Directors are responsible for the standard of clinical training and practice and ensure that research conducted with Clinic clients/patients adheres to the legal and ethical standards of the jurisdiction within which they are conducted. The Clinic Director is responsible for ensuring

that client/patient care is protected during clinical training and research. Contingencies need to be in place to guard against the risk of compromised care.

Authority:

Clinic Directors must have the authority and support requisite to discharging these responsibilities, including appropriate authority over the work of Clinic staff, Trainees, Supervisors and researchers. This authority needs to be developed and exercised in consultation with and assisted by appropriate educational institution and authorities and clearly elaborated in a job/role description.

Leadership:

The Clinic Director is responsible for developing a mission statement and strategic plan to provide a clear direction for the Clinic in collaboration with the educational institution within which the Clinic is embedded. Interprofessional, interdisciplinary and intradisciplinary consultation and collaboration need to underpin the development and operation of Clinics to ensure that client/patient care and training outcomes meet the standard of practice.

Policies and procedures must be developed to guide professional, ethical, and legal practice within the Clinic. The Clinic Director needs to ensure that the Clinic operates at all levels with respect for diversity and that all personnel working within the Clinic demonstrate cultural competence. The Clinic Director needs to establish quality assurance mechanisms, such as client/patient case file audits, to ensure that these policies and procedures are adhered to by both Trainees and Supervisors.

The Clinic Director needs to ensure appropriate safeguards are in place for the safety, privacy and security of all client/patient material, including where technologies are employed for all client/patient purposes, such as billing, file storage, and supervisory purposes.

Evaluation:

Clinic Directors are responsible for ensuring that evaluations of Supervisors and supervision, the Clinic facilities and operation, client/patient outcomes, and the practicum/placement itself are regularly conducted. They are also responsible for facilitating evaluation of their own performance by those to whom they report, with input from peers and students. Procedures for these evaluations need to be documented.

Workload:

If the Clinic Director has academic or other duties, the demands of the role of the Clinic Director need to be properly considered. A method to equate the work of the Clinic Director to other types of work within the educational institution needs to be devised to ensure a fair and equitable workload.

Administrative/Clerical Staff:

Clinics require sufficient adequately trained administrative staff to support the Clinic Director in the fiscal and service delivery management of the Clinic. Duties may include reception and management of client/patient appointments, billing, documentation, Clinic resources, etc.

Clinic administrative staff are required to be informed of and adhere to rules of client/patient and Trainee confidentiality. They are to follow and implement Clinic policies, procedures, and guidelines relevant to the Clinic. A Clinic Administration Manual will assist in the guidance of administrative staff and administrative procedures for all Clinic personnel.

Staff training and confidentiality:

Individuals staffing the Clinic, whether they are office staff, graduate assistants, Supervisors, peer counsellors, peer support specialists, interpreters/translators, or volunteers must understand and closely adhere to the ethical guidelines and Clinic policies and procedures relevant to their roles in the Clinic. Particular attention needs to be paid to activities that involve direct client/patient contact or access to confidential client/patient information. Processes for training staff and clinicians need to be documented.

Supervisors and Supervision

The purpose of supervision is:

- To ensure standards for safe and competent client/patient care are met.
- To facilitate the Trainee's acquisition and enhancement of all aspects of competence (including knowledge, skills, relationship, and attitude-values) in a holistic and integrated manner.
- To assess Trainee competence in a fair, objective, and rigorous manner.

Supervisor role definition and delineation:

The clinical and legal responsibilities of the Clinic Director, Supervisors, and Trainees need to be clearly delineated and communicated to ensure that accountability for client/patient care and Trainee development is evident.

Legal and ethical responsibilities:

Supervisors must meet the requirements for Supervisory practice and comply with the laws, statutes and ethics codes relevant to the specific jurisdiction in which they work. When online technologies are used, Supervisors are responsible for the compliance with established safeguards to ensure that client/patient privacy and confidentiality are not jeopardised.

Supervisors need to assure that multicultural and diversity needs of clients/patients are integrated into clinical services in accordance with the cultural guidelines of their region or country.

Supervisor competence:

Supervisors who hold responsibility for client/patient care need to be able to demonstrate the range of relevant practitioner and Supervisory competencies required by the jurisdiction in which they work. The educational institution is obligated to provide support for continued education and training to enable appropriate development of Supervisors in their practitioner and Supervisory roles.

Supervisor competence needs to be evaluated systematically and, where available, by reliable and valid methods and instruments.

Supervisors must ensure that multicultural, cross-cultural, and linguistic competencies directly related to client/patient care are integrated into clinical services in accordance with the cultural guidelines of their region or country.

Assessment of Trainees:

Supervisors must take particular care to ensure they carry out their professional gate-keeping role with fairness and rigor to ensure that Trainees who fall short of competence or evidence impairment are recommended for appropriate remedial or other action to the training institution and/or the regulatory authority.

Trainee Responsibilities

Regulation:

Trainees must meet and maintain the status and requirements of the educational institution at which they are enrolled and of the regulatory authorities for the jurisdiction in which they practise.

Legal and ethical responsibilities:

Trainees must understand and adhere to the ethical and legal requirements of the profession within the jurisdiction of practice. They must adhere to the policies, procedures, and guidelines of the Clinic, and of the educational institution within which the work is conducted.

Develop competencies:

Trainees need to be mindful of the limitations of their competencies, and to seek education, consultation, and supervision as required.

Service delivery:

Trainees need to work collaboratively with clients/patients using evidence-based approaches. They need to demonstrate an appropriate level of professionalism in all dealings with clients/patients, including the timely completion of case documentation and reports.

Supervision:

Trainees need to demonstrate an openness to the Supervisor's guidance and adhere to directives in accordance with the legal and ethical requirements under which the Trainee practises. Trainees who find themselves in conflict with their Supervisor need to follow their program's policies related to conflict resolution or grievances.

Evaluation:

Trainees need to be evaluated on the full scope of their professional performance, including but not limited to clinical and professional competencies, suitability for professional practice, collegiality, and capacity to utilise supervision. Evaluation needs to be ongoing with formal standardised assessment tools utilised at least at the midpoint and endpoint of each training rotation.

Managing Trainee Performance Difficulties

Role of the Educational Institution:

The training program of the educational institution needs to establish benchmarks and standards for adequate progress through clinical training, in accordance with standards established by relevant international and local licencing/registration bodies. Policies and procedures must be developed to assess Trainees' clinical and professional competence, and to determine their fitness to practice. These policies need to evidence careful consideration of due process and outline opportunities for remediation where warranted.

Remediation:

Trainees who show insufficient progress or demonstrate deficits in professional or clinical competencies, need to be provided with a pedagogically informed remediation plan, with clearly defined milestones for competence attainment, and thresholds for placement failure and course termination, should they fail to meet the specified requirements.

Termination:

Where major breaches of ethical or legal responsibilities occur, or remediation is not successful, the Trainee should not be permitted to progress in training.

Clinic Requirements

All contracts and agreements, such as those with academic departments, agencies, schools, and mental health related organisations, need to be identified and updated annually. An organizational chart needs to be developed and updated as required. All relevant staff, their

titles, and general responsibilities need to be documented. Specific areas of expertise in assessment and treatment offered by the Clinic via the expertise of specific Supervisors need to be identified for service users.

Areas designated as Clinic space need to be clearly marked and easily identifiable. Effective use of signage needs to be implemented. The size of key spaces (e.g., waiting room, therapy rooms, offices, meeting space), need to be consistent with the associated needs of the Clinic. Clinics need to follow all relevant laws regarding accessibility and provide individual accommodations as is required by law or the standard of care.

Clinic staff, Trainees, and Supervisors must have access to adequate emergency resources, including contact with a Supervisor, medical personnel, security, etc. at all times that clients/patients are being provided services in the Clinic.

Training in preparation for working in the Clinic

Collaborative, evidence-based treatment:

Trainees need to be adequately prepared and assessed for competence to deliver, under supervision, best practice models of care, that are legally, ethically and culturally bound, prior to Clinic entry. Programs and Clinics need to promote a research mindset that respects evidence and the scientific method.

Supervisors need to be adequately trained and experienced to provide supervision to Trainees.

Emergency management training:

Clinic staff, Supervisors and Trainees need to receive adequate training to manage medical, physical and psychological emergencies (e.g. de-escalation strategies) in a professional manner prior to commencing work in the Clinic.

Cultural competence/diversity training:

Clinic staff, the Clinic Director, Supervisors and Trainees all need to have undertaken training in the multicultural and diversity needs of clients/patients, and to maintain these competencies while working within the Clinic.

Policies and Procedures

Policies and procedures need to provide specific guidance on general client/patient management and risk management (e.g. service pathways, risk assessment and management, management of serious issues such as child protection, domestic violence, criminality, and substance abuse, file security, bookkeeping, etc.). Monitoring and evaluation of client/patient progress and outcome, and Trainee competencies are essential to enhance efficacy and reduce harms.

Policy and procedure manuals and other documentation:

A regularly updated working policy and procedures manual needs to be developed and made available to all relevant personnel, e.g. Trainees and Supervisors, Clinic staff etc., to ensure compliance with its guidelines. The manual needs to reflect the mission and structure of the Clinic and its associated training program.

Operational procedures need to be explicated in relation to all critical areas such as: services provided, Clinic workflow, ethical issues (including informed consent, confidentiality, multiple relationships etc.), risk assessment and management, communication with clients/patients, record keeping, supervision guidelines and policies, practicum evaluation, grievance management, problem resolution and due process procedures.

The manual must specifically instruct staff, Supervisors and Trainees on how to respond and manage critical incidents and emergencies (e.g. managing violence or self-harm, the use of duress alarms, evacuation procedures, security/police involvement).

Billing and financial management:

Where Clinics provide fee-for-service, billing policies need to be clearly articulated, appropriately disseminated, and consistent with ethics guidelines to ensure transparency and fully informed consent for services provided. Written information regarding the fee structure needs to be directly available to clients/patients, Supervisors, and Trainees.

Clinic Operations

Clinic operational policies assure professional client/patient care through meeting the obligations and standards of training and supervision within the jurisdiction of operation. All relevant standards need to be considered, giving the highest priority to the most conservative standards of the all authorities under which the Clinic operates.

Clinics need to operate throughout the year with consistent supports to provide continuity of client/patient care, to ensure the viability of the Clinic's role in the community, and to provide on-going training for Trainees.

Clinics need to have clear policies on community advertisements, screenings, the acceptance of new clients/patients, and communication between Trainees and clients/patients, in keeping with the professional requirements of the jurisdiction within which the Clinic operates.

Emergency management:

Policies and procedures need to be developed to provide for emergency and after-hours coverage, as well as emergency referral resources in the community. Emergency management policies and procedures need to be provided in a format that allows for ready access to information and resources as required.

Follow-up of all clients/patients that miss appointments or drop out of services needs to be conducted by the Trainee (or Supervisor if the Trainee is unavailable) until the case is appropriately closed or referred to another professional.

Admission/intake of clients/patients:

Guidelines for client/patient admission/intake and related administrative processes need to be consistent with the Supervisors' competencies, the learning needs of Trainees, and ethical obligations to prospective patients.

Informed consent:

Development of comprehensive informed consent procedures that meet the requirements of the jurisdiction and all authorities under which the Clinic operates are necessary. These are likely to cover such areas as:

- a) Fees and billing
- b) Information regarding the services provided, including assessment methods, and therapeutic strategies to be employed.
- c) Consent to assessment, treatment, monitoring, and evaluation as appropriate.
- d) Limits to confidentiality according to the legal regulations under which the Clinic operates.
- e) How client/patient files/records are stored.
- f) Who has access to client/patient files/records.
- g) Access to records with/without the client's/patient's written consent, in accordance with the legal jurisdiction within which the Clinic operates.
- h) Additional specific guidelines (e.g. copies of privacy policies), that are consistent with national and regional mental health laws.
- i) The name and contact information of the supervising psychologist.
- j) Voluntary consent for de-identified data usage for research purposes where relevant.

Records and record keeping:

Clinics must maintain strict and secure client/patient recordkeeping. Ensuring the confidentiality and security of records is required by the authorities under which psychologists practice.

Safeguards of the client/patient file/records need to be scaled according to Clinic staff involvement in the care of the client/patient (i.e. treating Trainee and Supervisor vs the front desk receptionist), and clearly delineated in the policies and procedures manual. Access to client/patient clinical or case notes must be limited to the Trainee/s and Supervisor/s responsible for the care of the specific client/patient.

Information Technology (IT):

Clinics maintain an active IT plan, in coordination with university IT resources, which need to include training, compliance, data confidentiality, recovery and maintenance. Video recording

or live observation of sessions for training purposes need to follow relevant legal requirements for creating, storing, sharing, and deleting patient information. Some of these requirements may be dictated by local/state/national professional bodies or licensing/registration boards.

If the Clinic maintains a website, the information maintained on the website needs to maintain basic information regarding the Clinic and its services and operations, and link to other appropriate services. A plan for regular review and updating of Website information needs to be developed and followed.

ePsychology service provision:

ePsychology (also known as telehealth or telepsychology) delivers psychological assessment, therapy, or other services via an electronic format (e.g. videoconference or telephone) and may be included as part or all of service delivery within the Clinic placement. ePsychology services are required to be established with specific attention to client/patient safety and privacy including protecting the confidentiality of all material produced (e.g., communication by email, phone, and video as well as client/patient records). Therefore, ePsychology platforms require a high level of security. Strong default encryption, authentication, and authorization settings specific to the location and jurisdiction are essential. ePsychology services are required to comply with all relevant legal, professional and ethical requirements governing the service.

Clinics are expected to develop and document specific procedures and policies, that include professional and ethical guidelines and codes, for the delivery of e-services. These need to be adhered to in conjunction with established procedures and policies of the Psychology Clinic. Staff and trainees require additional specific training to provide safe and effective ePsychology services. Policies and procedures that ensure staff adherence to clinic ePsychology protocols are recommended (e.g., trainee readiness checks, attestation forms, and regular case audits).

Grievance Policies

Clinics must be committed to providing a fair, supportive, and professional environment for all clients/patients, Trainees, Supervisors, staff, and researchers. Grievances need to be managed professionally, and sensitively in relation to all parties. Specific formal pathways for clients/patients, Trainees, Supervisors, Clinic staff, and researchers to deal with grievances, that adhere to due process, at all levels of complaint need to be developed and followed.

Research conducted with clients/patients of the Clinic

Without compromising commitment to high standards of client/patient care and training requirements, Clinics promote and support applied research initiatives. The Clinic Director needs to be involved in the approval processes for all research activity involving clients/patients of the Clinic to ensure that patient/client and training needs take proper priority over those of research as necessary. Research conducted with clients/patients of the Clinic needs to faithfully comply with all relevant legal, professional and ethical requirements governing research.

International Association of Psychology Training Clinics
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Thank you to the following individuals for contributing to the development of these guidelines, which are currently open to public comment. To offer public comment, please complete the following survey:

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