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PSYX 534.02: Applied Clinical Methodology

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The objective of this practicum is to increase students' therapeutic, assessment and evaluation skills, and to assist each student in developing a unique therapeutic "voice." The practicum will emphasize working with child and adult clients with a variety of presenting problems. Generally the orientation will emphasize therapeutic approach derived from (or compatible with) attachment theory. For child cases, opportunities for play therapy, parent-child dyadic therapies (e.g., Dyadic Developmental Psychotherapy (Daniel Hughes); Parent-Child Interaction Therapy (Sheila Eyberg)) and parent consultation will be offered along with cognitive-behavioral techniques. Students will also learn to collaborate and consult with other professionals working with the parent and child. For adult cases, students will be guided in examining the impact of the therapeutic relationship on clients in the context of Emotion-focused (Greenberg), Accelerated Experiential Dynamic Psychotherapy (Fosha), Mentalization-based Treatment (Fonagy) and cognitive-behavioral techniques. Students will present cases and share video recordings during group meetings during which they will be encouraged to conceptualize cases and formulate treatments. As part of individual supervision, students are expected to review and discuss video recordings and their experiences in session with clients, and to read and master psychotherapy, assessment and psychopathology literature relevant to their particular clients. As opportunities arise, interested qualified students will be able to engage in child and adult psychological evaluations, along with parental competence evaluations.

Group Supervision meetings will include case presentations, discussion of ethical and professional issues, clinical updates, peer consultation, video review, discussion of group readings, and presentation of training videos. In addition, we will read and discuss material on topics relevant to the practicum as determined by the professor and students. Guest presenters are likely to be invited on topics relevant to the readings or to students' psychotherapy cases. I will endeavor to show my own videos for discussion if I am able to obtain consent of clients.

Individual Supervision meetings will include interpersonal process recall, review of progress notes, and video review, along with discussion of the client's history and current functioning, the nature of your therapeutic relationship and methods, discussion of therapeutic techniques, and related problems as they arise. As topics are discussed, I am likely to recommend that you engage in individual readings in areas that will benefit you and your clients. These meetings will be scheduled weekly and I will be available for additional supervision on a case by case basis.

Student evaluations will consist of formative feedback, comments, and other forms of guidance which I provide during each individual supervision session and by me and your peers during group supervision meetings. A formal evaluation, using the program's standard evaluation forms for the evaluation of students' clinical skills, will be completed at the conclusion of the semester. A narrative evaluation (Clinical Skills Development Form) may also
be provided at the end of the semester and we will talk about your assessment and therapeutic skills, clinical documentation, and professional/ethical behavior. Your final evaluation will also address your history of following and implementing CPC policies. These forms will be discussed in an individual supervision meeting toward the end of the semester and will be placed in your Psychology Department individual file. I will also ask you to evaluate me at mid-semester and at the end of the semester by giving me oral feedback and (at semester end) by anonymously completing the standard evaluation forms.

Clinical supervision can be a delicate process in which you and I share views and information. You or I may raise interpersonal issues focused not only on clients but on the therapist-client relationship as well as the supervisory relationship itself. If you find that you have concerns about this, I encourage you to discuss them with me as they arise. If for some reason you are uncomfortable in expressing your concerns directly to me, I invite you to share them with the Clinic Director, Dr. Jen Robohm or with the Director of Clinical Training, Dr. Bryan Cochran.