Psychoeducational Clinic II  
EPSY 865  
Spring 2016  
Syllabus

Instructor: Christopher R. Niileksela, Ph.D.  
Office: JRP 641  
Office Phone: 785-864-1037  
Office Hours: Mondays 2:00-4:00pm, Tuesdays, 1:00-4:30pm or by appt.  
E-Mail: chrisn@ku.edu  
Meeting Times: Mondays 8:30-11:20  
Location: 130D Joseph R. Pearson Hall  
Course Webpage: [http://courseware.ku.edu/](http://courseware.ku.edu/)

GTA: Lina Goldenberg  
Office: JRP 130M  
Office Phone: 785-864-7021  
Office Hours: Mondays 8:00-9:00 & 11:30-12:45, Tuesdays 8:00-11:45 & 3:00-5:00, Wednesdays 8:00-4:00  
E-Mail: lgoldenberg@ku.edu

Primary Sources:

All of the following books can be obtained through the KU Libraries website at the following link: [http://link.springer.com.www2.lib.ku.edu:2048/](http://link.springer.com.www2.lib.ku.edu:2048/)


Other readings not included in these books will be posted on Blackboard.
Purpose of the Course

Psychoeducational Clinic II is the second of a two-course sequence designed to provide supervised work in the Center for Psychoeducational Services at the University of Kansas. Class time will be broken down into two sections. The first half of class time will be devoted to group supervision, including case presentations, answering questions about specific cases, and other supervision-related activities. The second half of class will be devoted to specific training and seminar in the assessment, diagnosis, and treatment of specific disorders, as well as to the development of clinical skills.

The second semester will be devoted to gaining a comprehensive understanding of the background, assessment, and intervention for psychological disorders that are commonly seen in school and clinical settings. For the second semester, we are going to focus on autism, intellectual disability, conduct disorders, mood/anxiety disorders, and nonverbal learning disabilities.

By the end of the course sequence you should have developed the following skills related to a number of disability categories:

- **Background Knowledge**
  - Develop an in-depth understanding of a variety of disabilities that are commonly seen in schools and clinics (e.g., know signs/symptoms, screening measures, general diagnostic criteria, typical assessment procedures)

- **Assessment Skills**
  - Be able to formulate a plan for the assessment of a variety of clinical issues, including learning disabilities, ADHD, autism, intellectual disability, mood disorders, and behavioral disorders
  - Be able to interpret assessment results, use results to answer referral questions, formulate a follow-up plan for assessment of unanswered questions
  - Use a variety of formal and informal assessment tools in evaluation
  - Triangulate data from a variety of sources to develop a comprehensive picture of the client

- **Treatment Development Skills**
  - Develop a general understanding of accommodations, modifications, and interventions that are appropriate for a variety of disabilities
  - Use assessment results to identify appropriate treatment strategies for families and schools
  - Understand possible mediators or moderators of treatment for specific individuals (e.g., developmentally appropriate interventions)

- **Clinical Skills**
  - Convey assessments results both in writing and verbally
  - Use the DSM-5 for diagnosis
  - Understand the similarities and differences between the DSM-5, IDEIA, and Section 504 of the Americans with Disabilities Act
  - Consult with parents about the implementation of instructional and behavioral recommendations, and foster advocacy skills for parents, children, and adolescents
- Use technology for clinical practice, such as test scoring and computer office software for communication, research, assessment, diagnosis, intervention planning, and evaluation
- Work competently with diverse individuals, including parents, students, school staff, and other professionals while working in the clinic setting

**School of Education & SPSY Program Standards**

The primary mission of the School of Education is to prepare leaders in education and human services fields. As stated in the School Code...“Within the University, the School of Education serves Kansas, the nation, and the world by (1) preparing individuals to be leaders and practitioners in education and related human service fields, (2) expanding and deepening understanding of education as a fundamental human endeavor, and (3) helping society define and respond to its educational responsibilities and challenges.” The components that frame this mission for our initial and advanced programs are Research and Best Practice, Content Knowledge, and Professionalism. These interlocking themes build our Conceptual Framework.

This course aligns with the mission of the School of Education because you will be learning about the assessment, diagnosis, and intervention processes related to disabilities that are commonly encountered in the school. This will help prepare students to be leaders in their districts about assessment, diagnosis, and intervention for students with disabilities; students will learn how to determine what may need to be provided so students have the most appropriate education; and students will learn how to communicate to school professionals and parents about disabilities and how they influence education, and ultimately what can be done to improve the education for students with disabilities.

Content of this course is related to the following NCATE standards:

**NCATE #2:** The educator demonstrates an understanding of how individuals learn and develop intellectually, socially, and personally and provides learning opportunities that support this development.

**NCATE #3:** The educator demonstrates the ability to provide different approaches to learning and creates instructional opportunities that are equitable, that are based on developmental levels, and that are adapted to diverse learners, including those with exceptionalities.

**NCATE #5:** The educator uses an understanding of individual and group motivation and behavior to create a learning environment that encourages positive social interaction, active engagement in learning, and self-motivation.

**NCATE #8:** The educator understands and uses formal and informal assessment strategies to evaluate and ensure the continual intellectual, social, and other aspects of personal development of all learners.

**NCATE #10:** The educator fosters collegial relationships with school personnel, parents, and agencies in the larger community to support all students’ learning and well-being.
The SPSY program related standards that are related to this course are shown below.

**KSDE Program Standards**

**KSDE Standard #1 [Psychoeducational Assessment]:** The school psychologist uses varied models and methods of assessment as a part of a systematic process to collect data and other information, translate assessment results into empirically based decisions about service delivery, and evaluate the outcomes of services.

**KSDE Standard #2: [Consultation]:** The school psychologist has knowledge of behavioral, mental health, collaborative, and/or other consultation models and methods and of the application to particular situations; collaborates and consults effectively with others in planning and decision-making processes at the individual, group and system levels.

**KSDE Standard #3 [Academic, Cognitive Interventions]:** The school psychologist, in collaboration with others, develops appropriate cognitive and academic goals for students with different abilities, disabilities, strengths and needs; implements intervention to achieve those goals; and evaluates the effectiveness of intervention.

**KSDE Standard #4 [Behavior, Social, Emotional Intervention]:** The school psychologist, in collaboration with others, develops appropriate behavioral, affective, adaptive, and social goals for students of varying abilities, disabilities, strengths, and needs; implements interventions to achieve those goals; and evaluates the effectiveness of intervention.

**KSDE Standard #6 [Knowledge of Education/Safe Schools]:** The school psychologist has knowledge of general education, special education, and other educational related services and understands schools and other settings as systems; works with individuals and groups to facilitate policies and practices that create and maintain safe, supportive and effective learning environments for children and others.

**KSDE Standard #11 [Technology]:** The school psychologist accesses, evaluates, and utilizes information sources and technology in ways that safeguard or enhance the quality of services.

**NASP Program Standards:**

**NASP Standard II [Data Based Decision Making and Accountability] –** The school psychologist has knowledge of varied methods of assessment and data collection methods for identifying strengths and needs, developing effective services and programs, and measuring progress and outcomes. As part of a systematic and comprehensive process of effective decision making and problem solving that permeates all aspects of service delivery, the school psychologist demonstrates skills to use psychological and educational assessment, data collection strategies, and technology resources and applies results to design, implement, and evaluate response to services and programs.
NASP Standard III [Consultation and Collaboration] – The school psychologist has knowledge of varied methods of consultation, collaboration, and communication applicable to individuals, families, groups, and systems and used to promote effective implementation of services. As part of a systematic and comprehensive process of effective decision making and problem solving that permeates all aspects of service delivery, the school psychologist demonstrates skills to consult, collaborate, and communicate effectively with others during design, implementation, and evaluation of services and programs.

NASP Standard IV (Element 4.1) [Interventions and Instructional Support to Develop Academic Skills] – The school psychologist has knowledge of biological, cultural, and social influences on academic skills; human learning, cognitive, developmental processes; and evidence-based curricula and instructional strategies. The school psychologist, in collaboration with others, demonstrates skills to use assessment and data collection methods and implements and evaluates services that support cognitive and academic skills.

NASP Standard IV (Element 4.2) [Interventions and Mental Health Services to Develop Social and Life Skills] – The school psychologist has knowledge of biological, cultural, developmental, and social influences on behavior and mental health, behavioral and emotional impacts on learning and life skills, and evidence-based strategies to promote social-emotional functioning and mental health. The school psychologist, in collaboration with others, demonstrates skills to use assessment and data-collection methods and implements and evaluates services that support socialization, learning, and mental health.

NASP Standard V (Element 5.1) [School-wide Practices to Promote Learning] – The school psychologist has knowledge of school and systems structure, organization, and theory; general and special education; technology resources; and evidence-based school practices that promote learning and mental health. The school psychologist, in collaboration with others, demonstrates skills to develop and implement practices and strategies to create and maintain effective and supportive learning environments for children and others.

**Classroom Activities**

Class Sessions: Class sessions will follow a similar format each week. Each week will probably look slightly different, but this is a general format of the class.

Part 1 Supervision (shared with practicum 10:30-11:30)
BREAK (5 minutes)
Part 2 Discussion/Class Activities (11:35-1:05)
Student Evaluation

Grading for EPSY 865

Class Activities & Professionalism (25% of grade)
- Assessment Planning/Participation: 15 points (15%)
- Case Presentation: 5 points (5%)
- Professionalism: 5 points (5%)

Psychoeducational Evaluation (75% of grade)
- Intake Session (DVD): 11 points (11%)
- Cognitive Testing (DVD): 14 points (14%)*
- Academic Testing (DVD): 14 points (14%)*
- Feedback Session (DVD): 11 points (11%)
- Psychoeducational Report: 25 points (25%)

*Although your grade will be based on your initial session with your client, this course is mastery-based. You are expected to show competence in all areas of client work. If you have a score lower than a 95% on the standardization rubric for any part of the testing you do with a client, you must repeat part or all of the tests with another person for practice until mastery is reached. Your initial grade on the standardization rubric will be used as your official grade, but you will be expected to improve your skills through extra practice to gain an acceptable level of competence in order to pass the course.

Final Course Grades will be assigned as follows. Per the School Psychology Program, a grade of a B (yes, a B- is not considered acceptable) or higher is required to successfully pass this course:

- A = 93.0 or greater
- A- = 90.00-92.99
- B+ = 87.00-89.99
- B = 83.00-86.99
- B- = 80.00-82.99
- C+ = 77.00-79.99
- C = < 77.00

Late Work: All DVDs must be reviewed and turned in to the GTA within one week of the recording. If you complete an Intake on a Wednesday, the DVD must be turned into the GTA by the next Wednesday. Two points per day will be taken off of the rubric grade for each day that the DVD is late.

Reports must be completed within one week of your final assessment session. For example, if you complete your last testing session on a Friday, the report must be turned in by the next Friday. Two points per day will be taken off of the grade for each day the report goes past the deadline. This will give us a week to review the report and hopefully get feedback scheduled within two weeks of the last assessment session. **It is very important that you write your report as you are working on the case** (e.g., write the Background Information after completing the intake, write the Cognitive Assessment section after completing the cognitive testing). Writing Psychoeducational reports takes a significant amount of time, and it is important that you do not leave this until the last minute because it will take more time to write if you wait.
Class Activities

Psychoeducational Evaluation (75% of grade)

All students will conduct at least one Psychoeducational evaluation over the course of the semester. The guidelines for conducting evaluations are included below.

General Clinic and Client Guidelines: General clinic and client guidelines are provided in your folder and will be posted on Blackboard. You are expected to be available for 6 to 8 hours of clinic time (during clinic hours) each week in addition to class meeting times. Direct client contact may consist of approximately 2-4 hours of face-to-face client work conducting interviews, assessment, feedback, consultation, or counseling. The additional CPS hours are to be used for test scoring, video review, report writing, research into client-related issues, peer supervision, and possible classroom observation or attendance at school meetings. These hours also include time spent learning the clinic procedures. There will be weeks where you may not have any hours, and other weeks where you will spend a significant amount of time in the clinic. Student clinicians may work with several clients each semester depending on the number of clients available and the size of the incoming class. It is possible that you may have fewer requirements if you must split client work with another student. Although every effort will be made to equitably assign clinic work, client needs and schedules are unpredictable. If you do not complete all aspects of clinical work during the semester, your grade will be adjusted accordingly. **It is your responsibility to ensure that your client work is progressing satisfactorily to meet the requirements.** See the course instructor or GTA if you have difficulty scheduling or meeting with your clients.

Grading: Your grade for the Psychoeducational Evaluation is based on five components, which include one comprehensive Psychoeducational report and four videos (intake, cognitive testing, achievement testing, and feedback). Performance in each clinical area will be graded. Grading rubrics for each element of client work will be provided online. Consideration in grading will be given to extraordinary performance, special client issues, ethical problems, number of clinic hours, responsiveness to supervision, and other aspects of clinical performance that may not be fully reflected in the grading rubrics. **It is expected that each DVD and self-evaluation are turned in to the GTA within one week of the recording date.** Two points per day will be deducted on late DVDs.

- **Intake Session:** The intake session consists of the paperwork and interview with the parent/client. You will use the intake interview form that was used in previous courses, along with any other interview forms that may be necessary for the specific case.

- **Cognitive testing:** For most evaluations, we complete a comprehensive cognitive test. This includes tests such as the WJ-IV, WISC-V, KABC-II, or WAIS-IV. The test that is used will depend on the client and the referral concerns. More often than not, we often follow up with other more specific tests, such as the CTOPP-2, TOMAL-2, or WRAML.

- **Academic Testing:** For most evaluations, we complete a comprehensive academic achievement test, which may include the WJ IV, WIAT III, or KTEA-3. The test that is used will depend on the client and referral concerns. Similar to cognitive testing, we often need to follow up with specific achievement areas, using tests like the GORT-5, TOWRE-2, OWLS, KeyMath, CMAT, or TOWL.
• **Social-Emotional Assessment.** Although not specifically graded, most evaluations also include a social emotional measure, such as the BASC-2 or an Achenbach scale. There are also numerous other scales that we administer to gather information on executive functioning, attention, anxiety, depression, or other social emotional concerns.

• **Psychoeducational Report:** The Psychoeducational Report is where you synthesize all of the information that has been gathered during the evaluation and provide written feedback that includes a diagnosis (if appropriate) and recommendations.
  o It is best to write up each section of the report as you work through the case. For example, writing up the background information after you complete the intake, writing the section on cognitive abilities after the intelligence test, etc. Do not fall behind on scoring or writing. It becomes significantly more difficult to write each section the further away in time the session occurred.
  o Your first report draft should be submitted within one week following the final assessment session.
  o The first draft of the report is the draft that will be graded, so it must be complete. In other words, you should feel comfortable enough with the report that you would give it to a parent.
  o You will receive the graded and critiqued draft back within 2-3 days.
  o The second draft should be submitted for review within 2-3 days after you receive the critiqued first draft.
  o The second draft will be submitted and critiqued, and returned to you within 2-3 days.
  o Although changes may not be extensive, be aware that a third draft is often required!
  o The final draft must be approved, printed, and signed **prior** to the feedback session.
  o **Do not hold the feedback session until your report is complete, approved, and signed.**

• **Feedback Session:** The feedback session is where you review the results of the evaluation with the client. You are required to review all of the testing that was completed, explain what the tests measure and what the results mean, describe the conclusions, and review recommendations.

**Professionalism:** Professionalism includes the following:
• Promptness with scheduling and appointments
• Noting the appointments in the Outlook Calendar
• Keeping and maintaining accurate files (there will be 2-4 file audits each semester)
• Closing files appropriately
• Updating your logs regularly
• Maintaining professional demeanor in CPS
• Setting up and seeking supervision when needed

You will be rated on each of these areas using a rubric. Students who have questions about procedures should direct those questions to one of the CPS staff, Kristen Hensley (the Director of CPS), or the GTA. Failure to maintain accurate and complete files or to follow clinic procedures will result in grade reductions and other possible consequences.
**Dress:** CPS is a clinic that provides professional services for those who come here. It is important that we look professional when seeing clients. Although there are no specific dress codes (e.g., shirt and tie required), it is very important to look professional for clients. So, if you are going to wear something and you think to yourself “I wonder if this is too casual?” it probably is. Dress like you would if you were working in an office job or in the schools. No jeans please!

**Logs:** Logs must be kept up to date and are part of the professionalism grade. These will be filled out electronically and can be kept on your flash drive in your clinic mailbox. You should create a new log for each week that has includes your cumulative hours for the entire year. For PhD students, these logs are especially important for you to have when you are applying for internships. You want to make sure that your logs are clear, up to date, and comprehensive. They should be detailed enough that you know what you did (e.g., watched video and rescored the WISC-V), for whom (use initials, e.g., TD), and when (9/21/15, 1:00-3:15pm, 2.25 hours). The time on your logs should be kept in 15 minute increments.

**Files:** Complete, accurate and up-to-date client files must be maintained according to legal and ethical standards, including instructional and treatment plans, progress notes, client correspondence, and any required documentation. Documentation of client contacts and progress on cases in your files is essential. Files will be audited monthly or more often. This audit becomes a part of your grade in professionalism.

**Video recordings:**

- Each DVD you turn in must be accompanied by a self-critique of your performance.
- Each DVD of a cognitive assessment session must be accompanied by the test protocol or a note about where to find it (i.e., client file with initials).
- Turn in your completed DVD to the GTA with your critique and test protocol within one week after the session has been recorded.
- After the GTA rates each session, you must meet with the GTA for feedback.
- In-class video reviews may be held once or twice per semester, depending on time.
- CPS policy is to record all sessions for your review, for supervision, to answer client questions and concerns, and for you to select portions for class.
- You are encouraged to hand in any additional DVDs for individual supervision. This is your chance to have your work thoroughly examined – take advantage of it!

**Supervision**

- **Peer Supervision:** Students should find a peer to work with throughout the semester. You will need to schedule at least one half hour peer week for peer supervision. This can be a great time to get feedback about a case you are working on, answer questions about assessments, or help with making recommendations. Be sure to document this supervision time in your logs.
- **University Supervision:** There will be specific times that you should obtain supervision about cases in the clinic. I want to make sure I know where everyone is with their cases, so my plan for supervision is as follows:
After intake: You must meet with the course instructor after intake to make sure the case is appropriate, to clarify the goals of the assessment, and plan for the next sessions.

After each assessment session: You must set up a time to meet with the course after each assessment session. You must score all the tests before meeting with me. This is especially important to ensure that we will have all of the appropriate tests and follow-up questions answered in order to reach the appropriate conclusions about the case.

Before feedback: You may meet with the course instructor or GTA as needed to determine appropriate assessments, answer questions about scoring or interpretation, and to help reach diagnostic conclusions to prepare for the feedback session. The GTA will be available to provide supervision throughout the semester. It is always best to stay in contact on the progress of your cases and get feedback often!

- Group Supervision: Attendance and participation in weekly one and one-half hour University-based group supervision is required.

Class Participation (25% of grade)

Assessment Planning: For each of the disorders we are talking about this semester, you will be asked to take the information that you learned from the readings and develop a plan for an evaluation. Each Assessment Planning component will have three parts:

1. Development of a plan for collecting relevant background information.
2. Development of a plan for assessment based on background information.
3. Development of recommendations and intervention plans based on the evaluation results.

Each week, you will complete one part of the Assessment Planning for each of the disorders we will be discussing. This information must be brought to class for discussion, where we will work in small groups and together to put together our information and develop a strong assessment plan.

Case Presentation: Case study presentations will be required. These case presentations will include case conceptualization and presentations prior to or following feedback. Each case should be succinctly presented and include the relevant background data or data you have collected, and an initial hypothesis or plan of action. Your presentation should not exceed 30 minutes, including additional time for class discussion and/or feedback about the case. More details about what is expected in case presentations will be provided in class. In addition, you may bring in DVD clips of your sessions so that the class can provide supervision on specific aspects of the evaluation process. If you are in practicum, this presentation can be over a practicum case, if it is appropriate for the class.

Other Issues of Importance

Note to Students with Disabilities: The Academic Achievement and Access Center (AAAC) coordinates academic accommodations and services for all eligible KU students with disabilities. If you have a disability for which you wish to request accommodations and have not contacted
the AAAC, please do so as soon as possible. They are located in 22 Strong Hall and can be reached at 785-864-4064 (V/TTY). Information about their services can be found at http://www.disability.ku.edu. Please contact me privately in regard to your needs in this course.

Late Work and Academic Integrity: All work for this course should be turned in on time. I understand that everyone is busy this year, but planning ahead and organization should help you complete everything adequately, and on time. Preparing for and attending class is very important to successfully complete this course. Missing class for minor reasons is not recommended. If there is a family emergency or other reason that requires you to miss class, please contact me as soon as possible.

Words from KU on academic integrity: “Academic integrity is a central value in higher education. It rests on two principles: first, that academic work is represented truthfully as to its source and its accuracy, and second, that academic results are obtained by fair and authorized means. "Academic misconduct" occurs when these values are not respected. Academic misconduct at KU is defined in the University Senate Rules and Regulations.
www.governance.ku.edu/usrr.html#art2sect6. A good rule of thumb is ‘if you have to ask if this is cheating, it probably is.’”

The issue academic integrity and especially of digital plagiarism has raised concerns about ethics, student writing experiences, and academic integrity. KU subscribes to a digital plagiarism detection program called Turnitin.com, which may be used to check papers submitted in this course. You may be asked to submit your papers in a digital format (e-mail attachment, BlackBoard™ digital drop box) so that your paper can be checked against web pages and databases of existing papers. Although you may never have engaged in intentional plagiarism, many students do incorporate sources without citations; this program can alert me to this if it is present. For further information on academic integrity at KU please review this website http://www.vpss.ku.edu/academic.shtml
**Course Calendar**
Changes may be made to the syllabus and course calendar during the semester depending on time required for certain topics. If this happens every effort will be made to let you know as soon as possible so you can plan accordingly. (AP = Assessment Planning)

<table>
<thead>
<tr>
<th>Date</th>
<th>Topics</th>
<th>Readings</th>
<th>Assignments Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 5: 2/15/16</td>
<td>Intellectual Disability: Background</td>
<td>DSM-5 Section on Intellectual Disability Bergeron &amp; Floyd (2013)</td>
<td>AP ID 1</td>
</tr>
<tr>
<td>Week 8: 3/07/16</td>
<td>Behavioral Disorders: Background</td>
<td>DSM 5 Section on CD, ODD, DMDD Hughes et al. (2008) Chapters 1-3</td>
<td>AP BD 1</td>
</tr>
<tr>
<td>Week 9: 3/14/16</td>
<td><strong>SPRING BREAK</strong></td>
<td><strong>Bring books to the beach</strong></td>
<td><strong>None</strong></td>
</tr>
<tr>
<td>Week 10: 3/21/16</td>
<td>Behavioral Disorders: Assessment</td>
<td>Hughes et al. (2008) Chapters 4-6</td>
<td>AP BD 2</td>
</tr>
<tr>
<td>Week 12: 4/04/16</td>
<td>Anxiety/Mood Disorders: Background</td>
<td>DSM-5 SAD, GAD, Depression McKay &amp; Storch Chapter 3</td>
<td>AP Anx/Dep 1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Matson (2009) (pp. 219-223 &amp; pp. 245-251)</td>
<td></td>
</tr>
<tr>
<td>Week 14: 4/18/16</td>
<td>Anxiety/Mood Disorders: Intervention</td>
<td>Erford et al. (2010); Matson (2009) (pp. 232-238 &amp; pp.258-261)</td>
<td>AP Anx/Dep 3</td>
</tr>
<tr>
<td>Week 15: 4/25/16</td>
<td>NVLD: Background &amp; Assessment</td>
<td>Davis &amp; Broitman (2011) Chapters 1-7</td>
<td>AP NVLD 1</td>
</tr>
<tr>
<td>Week 16: 5/02/16</td>
<td>NVLD: Assessment &amp; Intervention</td>
<td>Davis &amp; Broitman (2011) Chapters 8-11</td>
<td>AP NVLD 2 &amp; 3</td>
</tr>
</tbody>
</table>
References for Additional Readings


