Annual Academic Assessment Report Cover Sheet

Assessment reports are due the 1st Wednesday after the Fall Term

Email to: assessment@unlv.edu

Program Information:

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<td>Department</td>
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<tr>
<td>College</td>
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<tr>
<td>Department Chair</td>
<td>Christopher Kearney</td>
</tr>
<tr>
<td>Assessment Coordinator</td>
<td>Daniel Allen</td>
</tr>
<tr>
<td>Date Submitted</td>
<td><a href="mailto:Daniel.Allen@unlv.edu">Daniel.Allen@unlv.edu</a></td>
</tr>
</tbody>
</table>

Contact Person for This Report

Name: Daniel Allen
Phone: 702-895-1379
Email: Daniel.Allen@unlv.edu

Please attach a narrative (not to exceed 4 pages, excluding appendices) addressing the following:

- What are the student learning outcomes? Please provide a numbered list.
- Which learning outcomes were assessed?
- How were they assessed? (Programs must use at least one direct assessment of student learning.)
- Undergraduate programs should assess at least one University Undergraduate Learning Outcome (UULO) each year, which may or may not overlap with a program learning outcome.
- Graduate programs should assess at least one outcome related to one of the following graduate level requirements each year:
  - student engagement in research, scholarship, creative expression and/or appropriate high-level professional practice.
  - activities requiring originality, critical analysis and expertise.
  - the development of extensive knowledge in the field under study.

- What was learned from the assessment results?
- How did the program respond to what was learned?

Please limit the narrative portion of your report to no more than four pages. You may attach appendices with data, tables, charts, or other materials as needed. Please explain the relevant conclusions from any appendices in your narrative. Please contact the Office of Academic Assessment if you have questions or need assistance.
TRANSMITTAL PAGES
Doctoral Programs: Self-Study Report for 2014

Please include all required signatures.

☑ Currently Accredited (3 copies)  Date Submitted: May 1, 2015

☐ OR
☐ Applicant (4 copies)

Institution/Program Name: University of Nevada, Las Vegas/Clinical Psychology Doctoral Program

Department Name: Psychology

Location (City/State): Las Vegas, NV

Identify the traditional substantive area:
☐ Clinical  ☑ Counseling  ☐ School  ☐ Combined (list areas):

Degree Offered: ☑ PhD  ☐ PsyD

Date of last CoA site visit: 10/2008  Total number of students in program this year: 36

Is the doctoral program part of a consortium? ☑ No  ☐ Yes
(If Yes, list all consortium affiliates, including addresses and a contact person for each site):

Is the program seeking concurrent accreditation with the Canadian Psychological Association? ☑ No  ☐ Yes

Is the program invoking Footnote 4: ☑ No  ☐ Yes

Name of Institution’s Regional Accrediting Body: Northwest Commission on Colleges and Universities (NWCCU)

Current Institution Regional Accreditation Status: UNLV received its last full accreditation review by NWCCU in 2010, at which point our accreditation was reaffirmed. In 2013 we received a mid-cycle virtual (online) review, which reaffirmed our accreditation. We will receive our next full review by NWCCU in 2017.

PROGRAM CONTACT INFORMATION: The following information will be used to update our internal Office database. The individuals listed will receive copies of important program written correspondence (e.g., site visit reports, decision letters) as required by the Department of Education. Please add the relevant contact information for any other individuals who the program would like to receive such correspondence (e.g., co-directors, accreditation coordinator, Provost, etc). Signatures indicate that the self-study has been approved for submission and serve as an invitation to conduct a site visit to the program.
**Program Director:** Daniel N. Allen  
(Type name)  
(Signature)  
Full Title: Lincy Professor of Psychology  
Full Mailing Address: 4505 S. Maryland Parkway, Box 455030, Las Vegas, NV 89154-5030  
Phone Number: (702) 895-1379 Ext.  
Fax: (702) 895-1095  
Email Address: daniel.allen@unlv.edu

**Department Chair:** Christopher Kearney  
(Type name)  
(Signature)  
Full Title: Chair and Distinguished Professor of Psychology  
Full Mailing Address: University of Nevada, Las Vegas, Department of Psychology, Box 455030, 4505 S. Maryland Parkway, Las Vegas, NV 89154-5030  
Phone Number: 702-895-0183 Ext.  
Fax: (702) 895-1095  
Email Address: Chris.Kearney@unlv.edu

**College/School Name (if applicable):** College of Liberal Arts

**Dean of College/School (if applicable):** Christopher Hudgins  
(Type name)  
(Signature)  
Full Title: Dean, College of Liberal Arts  
Full Mailing Address: University of Nevada, Las Vegas, College of Liberal Arts, Box 455001, 4505 Maryland Parkway, Las Vegas, Nevada 89154-5001  
Phone Number: 702-895-3401 Ext.  
Fax: 702-895-4097  
Email Address: hughec1@unlv.nevada.edu

**President/CEO:** Len Jessup  
(Type name)  
(Signature or that of designee*)  
Full Title: President, UNLV  
Full Mailing Address: University of Nevada, Las Vegas, Box 451001, 4505 S. Maryland Parkway, Las Vegas, NV 89154-1001  
Phone Number: 702-895-3201 Ext.  
Fax: 702-895-1088  
Email Address: president@unlv.edu

*If signed by designee, please also provide the full name of that individual in addition to the full name of the person for whom he/she signed.
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**Sample program outcome evaluation surveys AND aggregate data across students (during program and after graduation)**

Alumni Survey

Proximal and Distal Outcome Aggregate Data

<table>
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<tr>
<th>Appendix</th>
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<td>App V</td>
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| Minimum requirements for successful completion of the doctoral program (e.g. Average rating across competencies, or no competency lower than “x”) |
|---------------------------------------------------------------|---------|
| Dom B3, 12-15                                               |         |
| App C, 135-136, 141                                       |         |

**Correspondence with the CoA since last review**

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**Other relevant information provided in the self-study document**

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Domain A: Eligibility

A1. Prepare Students to Practice Psychology
   See Table 1 and Domain B, pp. 8-17

A2. Program Sponsored by Accredited Institution
   See Transmittal Page and Table 1, p. 40.

A3. Program Integral Part of the Department, College, and UNLV
   The UNLV Clinical Psychology Doctoral Program (henceforth referred to as the “Program”) is located in the Department of Psychology and its central goal is to train psychological scientist-practitioners. The Program began in 1999 and was formally accredited by APA in October, 2005 and then again in 2008, and currently has 36 active clinical students. It is one of two doctoral programs in the Department (clinical and experimental), whose missions are to train graduate students as psychological scientists who possess a broad foundation of psychological knowledge, critical thinking and evaluation skills, an ability to conduct independent research that meets international standards of excellence, and—where relevant—skills necessary to address psychological concerns. The mission of the doctoral programs is central to achieving the Department’s mission to generate and disseminate psychological knowledge through original scholarly research and teaching, enhance multiculturalism and diversity, and serve the community by bringing faculty and student expertise to bear on important local and regional issues. In turn, the Department mission is consistent with the mission statement and three core themes of UNLV that include 1) Promoting Student Learning and Success, 2) Advancing Research, Scholarship, and Creative Activity, and 3) Fostering a Diverse Campus Population and Engagement with the Community (http://www.unlv.edu/about/mission-statement). UNLV is currently classified as a “Research University – High Research” by the Carnegie Foundation, with initiatives underway to attain the classification of “Research University – Very High” (see http://www.unlv.edu/tier-one).

   The Department is represented in the University budget with 27 full-time faculty lines, plus one new hire (Dr. Hines), who will begin in August, 2015. The Department has large undergraduate (approximately 1,300 majors) and doctoral programs (approximately 80 students). Ten of our 27 faculty lines are core faculty in the Program. These lines include Dr. Paul as the Associate Director of Clinical Training (ADCT) and Director of UNLV’s Partnership for Research, Assessment, Counseling, Therapy and Innovative Clinical Education (the PRACTICE), and Dr. Lefforge who is the Assistant Director of the PRACTICE. Two additional faculty members who currently hold primary administrative roles in the university (Dr. Meana, Dean of the Honors College; Dr. Heavey, Assistant Vice Provost for Undergraduate Education) are licensed clinical psychologists who contribute approximately 20% effort to our Program. Faculty members in the experimental psychology doctoral program teach breadth courses for the Program, serve on clinical student thesis and dissertation committees, and engage in other activities that support the Program. Thus, all 27 current faculty can be involved in the Program, although the majority of training is provided by the 10 core faculty members.

   The Department has 3 full-time administrative assistants, an annual operating budget to cover recurring expenses, and 50 state-funded research and teaching assistantships to provide financial support and training to doctoral students. Additionally, the Department is allocated office and
research space as well as an on-campus community mental health clinic (the PRACTICE) used as a practicum training site for Program students, in a joint relationship with the College of Education (described in greater detail in Domain C, p. 22). The University provides other support such as Lied Library, Graduate College, Disability Resource Center, Campus Life/Housing, Division of Research and Graduate Studies, Student Financial Services, Student Health Services, Student Recreation and Wellness Center, Student Counseling and Psychological Services, Wilson Advising Center, and Writing Center, among others.

The Department is led administratively by the Chair (Dr. Kearney) who works with the newly elected Director of Clinical Training (Dr. Allen as of 1/1/15), the Associate Director of Clinical Training (Dr. Paul), the Experimental Program Director (Dr. Rennels) and the experimental emphasis area coordinators (Cognitive, Neuroscience, Developmental, Quantitative/Experimental areas of study). The Department generally operates as a committee of the whole when allocating major resources, making policy decisions, and issuing recommendations for new hiring priorities, new program emphases and courses, and tenure and promotion decisions. A Department Executive Committee vets issues and garners feedback from the faculty prior to issues being brought to the entire faculty for consideration. A subcommittee structure is in place to make personnel, merit, award and other recommendations to the general faculty and/or Chair. The Chair handles implementation of routine budget decisions. The Department as a whole retains responsibility for general oversight of the clinical and experimental doctoral programs, and so all faculty members contribute to the Program to some degree.

The Program is led administratively by the Director of Clinical Training (DCT) and Associate Director of Clinical Training (ADCT). The DCT manages student evaluations, Admissions/Interview Day logistics, Clinical Program Subcommittee (CPS) functions, funding, Program requirements, UNLV and APA assessment reports, student grievances and petitions, Comprehensive Examinations, and interactions with the UNLV Graduate College, APA, and APPIC. The CPS exists to review student petitions and handle course transfer/waiver requests. Policy, admission, curriculum, and evaluation decisions are handled by the Clinical Program Committee (CPC) comprised of core faculty. The CPC meets to conduct business and to review the Program and students. The ADCT oversees training, including coordination of 25 current practicum sites and supervisors, mentors students through internship application and interview processes, serves as Director of the PRACTICE, supervises the PRACTICE Assistant Director (Dr. Lefforge), oversees the PRACTICE Assessment Clinic, teaches Program practicum and supervision courses, and provides clinical supervision. The Assistant Director of the PRACTICE provides administrative and clinical support to the Director, co-leads strategic initiatives, and teaches two courses each semester (e.g., Clinical Supervision, Diversity, Group Therapy).

The Department resides in the College of Liberal Arts, which is led administratively by the Dean of the College. The Dean, in consultation with the College Executive Committee comprised primarily of department chairs, is responsible for allocating operating monies, providing additional faculty and graduate student support lines, making personnel decisions, and conducting other College administrative matters. The Program is also affiliated with the Graduate College, which oversees admissions, degree conferment, contracts for graduate student support, theses and dissertations, scholarships and fellowships, and grievances.

**A4. Program Length and Residency Requirement**

The Program requires a minimum of 96 semester credit hours divided as follows: (1) 18 3-credit courses for 54 credits, (2) 6 semesters of practicum for 18 credits, (3) 2 semesters of thesis for 6 credits, (4) 4 semesters of dissertation for 12 credits, and (5) 2 semesters of internship for 6
credits. Incoming student requests for waiver/transfer credit toward the Master’s degree are evaluated individually based on procedures specified in the Program Handbook (Appendix C, p. 135). Students entering without a Master’s degree are awarded a Master’s degree after they complete the first two years of coursework, one year of practicum, and a thesis. Students are expected to enroll full-time and be present on campus for courses, research, and practicum, as applicable. The minimum full-time residency is four years in the Program for students without prior graduate work and a minimum of two years for students with a prior Master’s degree who waive/transfer maximum allowed credits. Degree requirements can be completed in five years with no prior graduate work/transfer credit, but we inform potential students about current mean time to degree completion, including internship (2013-2014 = 6.1 years).

A5. Cultural and Individual Diversity

The Psychology Department and its programs have policies and procedures designed to create a diverse learning environment, foster respect for cultural and individual differences in all of our activities, and engender multicultural competence in students to prepare them for research and practice in an increasingly multicultural society. In our efforts to create a diverse learning environment, we seek cultural and individual diversity when hiring faculty and admitting students. We model respect for diversity in all of our activities and engage in a coordinated series of activities to train multicultural competence in our students. Objective 6 of our 16 objectives (Domain B2.a., pp. 10-11) specifically focuses on increasing awareness of individual and cultural diversity. Students complete a foundational course on Diversity in Professional Psychology (PSY 750) and diversity themes are infused in other core and elective courses (See Appendix E, course syllabi, pp. 169-402). Students gain firsthand experience through practicum settings by providing assessment and intervention services to clients from diverse backgrounds. The Program also monitors composition of faculty and students, making efforts to recruit and retain those representing cultural and individual diversity. There are a wide variety of University and department diversity initiatives and programs designed to increase awareness and sensitivity to diversity issues. At the department level, diversity issues are addressed by our diversity committee with a graduate assistant position and faculty leadership dedicated to these efforts.

A6. Policies and Procedures

Policies and procedures guide our actions and are available to all interested parties via the Web, the online UNLV Graduate College Catalog, or the UNLV Clinical Psychology Doctoral Program Handbook (Program Handbook) which contains program related policies (Appendix C, pp. 126-151). The Program Handbook is given to all finalists during the application process on the interview day, to all students upon matriculation, and also to all matriculated clinical students when it is updated. Policies and procedures are regularly reviewed and updated as needed by the DCT and ADCT. Other documents outlining policies and procedures are also provided to Program students at different points in their training, such as the supervision guidelines and agreement form (Appendix J, pp. 486-495), Internship Application Guide given to students applying to internship (Appendix L, pp. 513-526), and the PRACTICE Handbook (Appendix T, pp. 721-756), which are given to matriculated students prior to beginning their first practicum. Other policies are accessible through the UNLV website, with some policies regularly included in course syllabi (Appendix E, pp. 169-402). Table A (Appendix A, p. 81-82) contains a list of program-level policy documents, including specific location for these items within the self-study, as well as web addresses for specific department and university policies that are available in electronic form. The Department webpages are located at http://www.unlv.edu/psychology and the Program webpages at http://www.unlv.edu/psychology/graduateprograms/phd-clinical. A
copy of the Program brochure is included in Appendix Q, pp. 706-707.

**Items to be addressed from prior site visit or in subsequent correspondence with APA**

Correspondence with the CoA since our last site visit is included in Appendix O (pp. 639-702). No issues were noted for Domain A at our last site visit. Subsequently, the CoA requested a copy of our policy on students with competency problems included in the Program Handbook, Appendix C, pp. 126-151 (see CoA letter dated 1/5/11, p. 692). Our response on 7/1/11 (pp. 663-66) satisfied this request (see CoA letter dated 12/19/11, p. 694).

**Domain B: Program Philosophy, Objectives, and Curriculum Plan**

**B1.a. Educational Philosophy and Training Model**

The Program adheres to a scientist-practitioner model of training as first conceived at the Boulder conference and later explicated by Belar and Perry (1992). Consistent with this model, our mission statement is: “The UNLV Clinical Psychology Doctoral Program, in the scientist-practitioner tradition, prepares students to address psychological concerns through both scholarly research and the application of psychological knowledge and skills in practice. We recognize psychology as an empirical science and expect students to have a broad understanding of existing psychological knowledge and methods. We train students to base their scholarly and professional activity on the scientific foundation of psychology, including an understanding of, and attention to, human diversity. We train students as generalists who are prepared to conduct ethically appropriate scientific research and clinical interventions with children and adults in an increasingly multicultural society. We provide an integration of didactic study, supervised clinical activity, and mentored scholarly research. This mission is consistent with, and complementary to, the mission of our sponsoring Department and University.”

The Program prepares students for entry-level practice of clinical psychology in a wide range of research and practice-oriented settings. We promote an environment in which students are treated as junior colleagues engaged collaboratively in the training process. We expose students to different viewpoints regarding important issues in psychology and model the thoughtful and respectful interchange that lies at the foundation of the scientific process. We consider the mentorship process central to our Program and therefore each student must have a mentor by the end of the first semester. In fact, most students enter the Program having already identified their mentor. Students work closely with mentors to develop research and clinical skills, knowledge of chosen areas of clinical psychology, and professional identity and deportment. Students are never without a mentor after the first semester.

**B1.b. Training Sequential, Cumulative, and Graded in Complexity**

A representative course of study is included in the Program Handbook, Appendix C, pp. 137. As detailed in the course of study, Program training activities – including courses, practicum, and research – are designed to provide a graded, sequential, and cumulative corpus of knowledge and skills with attendant attitudes and values. Specifically, Year One focuses on instruction in basics of clinical psychology. Students complete 9 courses (27 credit hours) that cover psychopathology, child/adult assessment and intervention, foundations and history of clinical psychology, ethics, and statistics (ethics course is taken in the summer immediately after Year One). Year One also involves students beginning their research. At a minimum, students identify a research mentor and choose a thesis topic. As the course of study indicates, students are encouraged to complete the thesis proposal by the end of the summer following Year One.

Year Two brings a substantial reduction in formal coursework, with students completing only 3-4 traditional courses during this year. This coursework reduction is accompanied by initiation of clinical practice in the Practicum I sequence and advancement of thesis research. The
Practicum I sequence (two semesters) introduces students to clinical practice by having them conduct assessment and intervention at the PRACTICE under close supervision by Program core faculty. During Year Three and Year Four, students participate in Practica II and III, respectively. These practica are more specialized and supervision is usually provided by community-based psychologists. These practica typically occur off-campus and build upon basic experiences in Practicum I (current practicum site descriptions are in Appendix D, pp. 152-168). During these years, students complete theses and advance to more independent dissertation research. Dissertations employ a variety of research methodologies and analytic procedures with topics relevant to clinical psychology, and serve as our final formal evaluation of the student’s ability to apply scientific principles to clinical issues. Students complete remaining required courses including breadth courses during this time and take electives that address more advanced topics in a focused way (Appendix E, syllabi, pp. 169-402). In the summer after Year Three, if the thesis is completed, students complete the Comprehensive Examination (CE). This take-home examination consists of 4 questions that are developed by core clinical faculty, of which students answer 3 of their choosing. The questions are integrative in nature and often present novel situations that students must research to develop an appropriate response. The CE is discussed in more detail in this section, in Domain F, and in the Program Handbook, Appendix C, pp. 150-151. The most recent CE with sample answers is included in Appendix F, pp. 403-442.

Integrating science and practice is central to our training model. In the Program’s didactic component, basic and applied clinical courses are centered on extant material and the scientific foundation of psychology. Students’ clinical work is similarly based on scientifically supported principles and practices. This clinical activity can then serve as fodder for scientific discussion and identify areas where additional knowledge and inquiry are needed. The Program does not adhere to a unitary scientific or theoretical view of the discipline, clinical processes, or methodology. Students are exposed to different views on important issues and challenged to think scientifically for themselves. Students’ ability to integrate science and practice is evaluated in courses, theses and dissertations, and integrative CE questions. Furthermore, diversity is considered central to a thoughtful approach to empirically informed practice and research, so is taught and reinforced (1) in a course devoted specifically to the impact and importance of diversity and multicultural competence, (2) via infusion in other courses and Program elements (see also Domains D and F), and (3) through supervised practicum experiences.

Program unique within the institution. The Program is unique at UNLV. It is the only doctoral-level degree program focusing on simultaneous training in scientific methods and provision of psychological services. Doctoral-level programs in the UNLV Educational Psychology Department focus on practice of psychology in schools (doctorates in Learning and Technology, Educational Psychology, and School Psychology). UNLV Masters-level degree programs for mental health practitioners – such as Masters in Social Work, Masters in Marriage and Family Therapy, and Masters in Community Health Counseling – do not stress scholarship.

B2. Central Educational Goal, Objectives, and Competencies

Our central Program goal is to train psychological scientist-practitioners who possess a broad foundation of psychological knowledge, an ability to design and implement scientific investigations, and skills necessary to intervene in psychological concerns. This central goal leads directly to our 16 proximal training objectives, which are delineated into 8 foundational objectives and 8 functional objectives (functional objectives 15 and 16 are aspirational). Our objectives and competencies were revised following our last self-study based largely on work of
the Competency Benchmarks Work Group (Fouad et al., 2009). Our goal was to align the Program with national efforts to establish profession-wide competencies with benchmarks developed based on A Practical Guidebook for the Competency Benchmarks and other resources (http://www.apa.org/ed/graduate/competency.aspx).

**B2.a. Proximal Foundational and Functional Objectives** and their associated competencies that lead to students’ development of required professional competencies include:

**Foundational Objectives (1, 2, 3, etc.) and Competencies (A, B, C, etc.)**

**Objective 1: Broad Knowledge of the Discipline of Psychology** (including methods of psychological science, knowledge and skills necessary to address psychological problems, integration of science and practice, and skills to communicate effectively orally and in writing).
- A. Broad Knowledge; B. Psychological Science; C. Skills to Address Psychological Problems; D. Integration of Science and Practice; E. Oral and Writing Skills.

**Objective 2: Professionalism** (professional values and ethics as evidenced in behavior and comportment that reflect the values and ethics of psychology, integrity, and responsibility).
- A. Integrity-Honesty; B. Deportment; C. Accountability; D. Concern for the Welfare of Others; E. Professional Identity.

**Objective 3: Reflective Practice/Self-Assessment/Self-Care** (practice conducted with personal and professional self-awareness and reflection; with awareness of competencies; and with appropriate self-care).
- A. Reflective Practice: Personal and professional self-awareness and reflection; B. Self-Assessment: Awareness of competencies; C. Self-Care: Appropriate self-care.

**Objective 4: Scientific Knowledge and Methods** (understanding research, research methodology, techniques of data collection and analysis, biological, cognitive and affective bases of behavior, and development across the lifespan; respect for scientifically derived knowledge).
- A. Scientific Mindedness; B. Scientific Foundation of Psychology; C. Scientific Foundation of Professional Practice.

**Objective 5: Relationships** (relate effectively and meaningfully with individuals, groups, and/or communities).
- A. Interpersonal Relationships; B. Affective Skills; C. Expressive Skills.

**Objective 6: Individual-Cultural Diversity Awareness** (awareness, sensitivity, and skills working professionally with diverse individuals, groups, and communities representing various cultural and personal backgrounds/characteristics defined broadly consistent with APA policy).
- A. Self as Shaped by Individual and Cultural Diversity; B. Others as Shaped by Individual and Cultural Diversity; C. Interactions of Self and Others as Shaped by Individual and Cultural Diversity; D. Applications Based on Individual and Cultural Context.

**Objective 7: Ethical Legal Standards and Policy** (application of ethical concepts and awareness of legal issues regarding professional activities with individuals, groups, and organizations).
- A. Knowledge of Ethical, Legal, and Professional Standards and Guidelines; B. Awareness and Application of Ethical Decision Making; C. Ethical Conduct.

**Objective 8: Interdisciplinary Systems** (knowledge of key issues and concepts in related disciplines; identify and interact with professionals in multiple disciplines).
- A. Understanding the Shared and Distinctive Contributions of Other Professions; B. Functioning in Multidisciplinary and Interdisciplinary Contexts; C. Understand How Participation in Interdisciplinary Collaboration/Consultation Enhances Outcomes; D. Respectful and Productive Relationships with Individuals from Other Professions.

**Functional Objectives (1, 2, 3, etc.) and Competencies (A, B, C, etc.)**
Objective 9: Assessment (assessment and diagnosis of problems, capabilities, and issues associated with individuals, groups, and/or organizations).
   A. Measurement and Psychometrics; B. Evaluation Methods; C. Application of Methods; D. Diagnosis; E. Conceptualization and Recommendations; F. Communication of Findings.

Objective 10: Intervention (interventions designed to alleviate suffering and to promote health and well-being of individuals, groups, and/or organizations).
   A. Knowledge of Intervention; B. Intervention Planning; C. Skills; D. Intervention Implementation; E. Progress Evaluation.

Objective 11: Consultation (ability to provide expert guidance or professional assistance in response to a client’s needs or goals).
   A. Role of Consultant; B. Addressing Referral Question; C. Communication of Findings; D. Application of Methods.

Objective 12: Research/evaluation (generating research that contributes to the professional knowledge base and/or evaluates the effectiveness of various professional activities).
   A. Scientific Approach to Knowledge Generation; B. Apply Scientific Method to Practice.

Objective 13: Supervision (supervision and training in the professional knowledge base and evaluation of the effectiveness of various professional activities).
   A. Expectations and Roles; B. Processes and Procedures; C. Skills Development; D. Awareness of Factors Affecting Quality; E. Participation in the Supervision Process; F. Ethical and Legal Issues.

Objective 14: Teaching (providing instruction, disseminating knowledge, and evaluating acquisition of knowledge and skill in professional psychology).
   A. Knowledge; B. Skills.

Objective 15: Management/administration (manage the direct delivery of services and/or the administration of organizations, programs, or agencies).
   A. Management; B. Administration; C. Leadership; D. Evaluation of Management and Leadership.

Objective 16: Advocacy (actions targeting the impact of social, political, economic, or cultural factors to promote change at the individual [client], institutional, and/or systems level).
   A. Empowerment; B. Systems Change.

Our foundational and functional competencies differ across several developmental levels for each student. For proximal objectives we focus on competency development for students in year 1 at the pre-practicum level, and those in years 2+ (and before internship) at the practicum level. We also assess performance on internship through feedback provided by internship sites. Table B.2 provides descriptions of our competency expectations for students at the first two developmental levels and behavioral benchmarks for each competency based on developmental level (Appendix B, pp. 84-119). Included are descriptions of how each competency is measured with minimal levels of achievement specified for each, as defined later in Domain B (pp. 12-13). Methods used to measure competencies based on developmental level are consistent with the training sequence described in section B1.b. For example, one means of assessing competencies for first year students is receiving a B- or better in courses that are taken in the first year of study (e.g., intervention, assessment, psychopathology, diversity, and ethics). On the other hand, practicum courses and breadth courses, which are taken in the second, third, and fourth years of study, are used to assess student competencies in years 2+. Similarly, thesis, dissertation, and the CE are used evaluate student competencies in years 2+.

B2.b. Distal Objectives
In addition to our proximal goal and objectives, two distal goals apply to graduates of the Program. The effectiveness of the Program is largely determined by the extent to which our graduates: (1) pursue career paths that are consistent with our Program goal of training scientist-practitioners, and (2) affirm the success of the Program in meeting our proximal objectives outlined above and in Table B.2, as summarized in the following goals and objectives.

Goal 1. Graduates will pursue career paths consistent with our Program goal as evidenced by:

- **Objective 1**: Passing EPPP
- **Objective 2**: Attaining Licensure
- **Objective 3**: Employment as Psychologists
- **Objective 4**: Continued Scholarship
- **Objective 5**: Professional service and organization involvement

Goals 2. Graduates will attest they value scientist-practitioner training and received competent training in our 16 Foundational and Functional objectives described in B2.a.

We understand that not all of these distal goals and objectives will apply equally to all graduates of the Program. For example, those in academic careers may not pursue licensure but will most likely engage in formal classroom teaching and be directly involved in research activities. Others who pursue clinical practice may have limited teaching or research activities, but will pursue licensure, engage in intervention/assessment activities, and provide consultation. We do anticipate that when viewed as a group, our graduates will engage in these activities and affirm the Program met its proximal objectives and goal of training scientist-practitioners.

**B3.a-e. Understanding of, and Competence in, Core Content Areas**

Table B3 clearly outlines how the Program exposes students to the current body of knowledge in the individual areas delineated in B3.a-e, and provides brief descriptions of how we achieve each of these areas of competence and understanding. Many of these competencies are aligned with courses. When this is the case, students must earn a B- or better in the course to apply it to their degree. Syllabi for all courses are in Appendix E (pp. 169-402), which also includes a list that differentiates required vs. elective courses (p. 169). Competencies are also aligned with other program elements with their own evaluation procedures, such as the CE (example exam and answers, Appendix F, p. 404), practicum training (Student Competency Review Form, Appendix G, pp. 443-464), mentorship (Student Annual Evaluation Form, Appendix H, pp. 465-475), thesis and dissertation research (pass/fail proposal and defense), conference attendance, professional organization membership, and other research (Student Annual Evaluation Form, Appendix H, pp. 465-475), and alumni outcomes (Alumni Survey, Appendix I, pp. 476-485). Each of the areas and methods of evaluation will be discussed in more detail in the following sections and in Section F. We do not use any online or distance mediated educational methodologies.

**Required minimal levels of achievement.** Required achievement levels are closely monitored in the following areas to assure that all students meet Program training objectives and acquire and demonstrate substantial understanding of, and competence in, each of the core content areas and objectives: (1) Course grades, (2) Comprehensive Examination (3) theses, dissertations, and other research, (4) Progress in the Program, (5) Engagement in mentoring process, (6) Clinical practica, and (7) Completion of internship.

1. **Course grades:** Students must earn a grade of B- or better in each course taken for the degree program. Students who receive lower grades are immediately placed on academic probation. They are informed in writing that they must retake the course and earn a passing grade during the next 12 months and that they must not receive any other non-passing grade while on probation or they may be separated from the Program. Once the student successfully retakes the course, s/he is removed from probation. Students may be placed on formal academic probation
twice after which any non-passing grade may cause them to be separated from the Program.

2. Comprehensive examination (CE): Students must pass the CE. The CE evaluates and reinforces student competencies as emerging scientist-practitioners. The CE is a 2-week, take-home test given in August each year (2014 CE and example answers, Appendix F, pp. 403-442). Our Program’s objectives guide CE construction and new CE questions are developed by core Program faculty each year. Students are provided with four questions and choose to answer three. Questions are integrative, addressing key areas of clinical psychology including psychopathology, ethics, assessment, intervention, diversity, research methods and statistics. To successfully answer three questions, students must address all key areas. Answers are limited to 10 double-spaced pages plus references, and scored by two core Program faculty. A score of 75%+ must be achieved for each question. Students who fail one or two questions receive feedback from the readers and may rewrite their answers within one month of the time the examination was returned. Students who do not provide satisfactory revisions (scored 75%+) or fail more than two questions retake the entire examination at the next administration. Students who fail the examination twice are separated from the Program.

3. Thesis, dissertation and other research: (a) Students must receive a Satisfactory grade on the thesis/dissertation proposal and defense. (b) Students must demonstrate active involvement in research through conference presentations and/or publication. (a) Thesis and dissertation requirements are central pillars of our scientist-practitioner training model. Each student must complete and defend a Master’s thesis. The thesis must be empirical, supervised by a primary advisor, and overseen by two other committee members from the Department and one Graduate College representative from outside the Department. Students submit a formal written proposal to the committee that includes an (I) introduction to the research topic, (II) literature review of relevant scholarly literature to support the study rationale, and (III) methods section involving a detailed description of the methods to be employed and data analytic strategies. After the proposal is approved, any changes suggested by the committee are incorporated and the student then conducts the proposed research. When finished, the student submits the final document to the committee, which now includes a (IV) results section and (V) discussion section. The written proposal and final thesis are orally defended, and the committee awards a Satisfactory grade for acceptable thesis proposal and defense. The student then files the completed thesis with the Graduate College for final approval. The thesis is designed to provide the student with an initial experience in conducting empirical research. The dissertation follows the same procedures but the research project is more substantial and independent than the thesis. Theses and dissertations are made available to all faculty members for review, and all university faculty members, students, or community members may attend and ask questions at the oral defense of the dissertation. Votes regarding the satisfactory nature of a thesis or dissertation are reserved for committee members only. (b) Beyond thesis and dissertation requirements, students are expected to maintain continuous involvement in research and are strongly encouraged to present scholarly work at conferences and in professional publications (see also Domain F). At a minimum, we expect our students to co-author at least one professional manuscript which may include journal articles, book chapters, or encyclopedia entries.

4. Progress in the program: Students must make adequate progress in the program. Adequate progress is defined by the Program Timeline which is given to all students at time of matriculation (see Appendix M, p. 528). The Program Timeline provides time periods (optimal, acceptable, marginal) for completion of major program milestones, and indicates those milestones that result in academic probation if not completed within the specified time period.
(see underlined milestones). Students failing to make adequate progress are notified in writing in their annual evaluation letter and placed on probation. The letter specifies terms of probation and delineates what the student must complete during a specified time period to be removed from probation. Students failing to meet terms of their probation may be separated from the Program.

5. Engagement in the mentoring process: Students must actively engage in the mentoring process. Students entering our Program have typically identified a mentor during the interview process and are anticipated to work with that mentor when they matriculate. Engagement in the mentoring process includes attending regular individual and often group (lab) meetings with the mentor, timely responses to emails, etc. Frequency of meetings vary, but typically occur approximately 10 times each semester. Students may also work with other core and associated faculty, often in the context of research collaborations, which is encouraged. Some students may elect to change mentors after entering the program if their professional interests and research directions change, which is allowed. In these cases, the DCT meets with the student, current mentor, and prospective mentor to facilitate mutual agreement. Many core competencies are developed through the mentorship process such as professionalism, reflective self-practice/self-assessment/self-care, scientific knowledge and methods, relationships, ethical and legal standards, and others as well, making active engagement in mentorship a critical element of training. Engagement in mentorship is assessed in a number of qualitative ways and reflected in students’ annual evaluations where faculty mentors provide narrative comment on student progress in the program for the prior year (Student Annual Evaluation Form, Appendix H, pp. 465-475). Students who are not actively engaged are notified in writing in their annual evaluation letter and a plan is developed for remediation. Students who continue to fail to engage in mentorship may be placed on academic probation or separated from the Program.

6. Clinical practica: Students must (a) not receive practicum ratings of Below Expectations (B) on the Student Competency Review Form, (b) obtain grades of B- or better in PSY 767, (c) obtain 900 or more practicum hours and (d) provide formal feedback to supervisors regarding supervisor. (a) Student practicum performance is monitored by clinical supervisors and formally evaluated at the end of each semester, at which time supervisors complete the Student Competency Review Form that provides behavioral benchmarks for each of our 16 competencies to report progress of each student (Appendix G, pp. 443-464). The form is used as a guide for practicum supervisors when evaluating student performance. Benchmarks included on the form differ across developmental levels for each student: those in year 1 at the pre-practicum level, and those in years 2+ (and before internship) at the practicum level. Supervisors consider the following descriptors when evaluating student competencies and benchmarks: B = Below expectations; this is an area of clear concern; focused attention, remediation, or other intervention is required for this skill to meet minimal standards of competence; E = Emerging or a growth edge for the student to focus on in the next practicum semester; D = Demonstrating good progress or growth in existing knowledge and skills; S = Definite strength. Students are evaluated based on expectations for other students at the same developmental level or level of training. Final ratings are completed at the end of the academic year (spring semester) although interim ratings are also completed mid-year in order to identify any areas of weakness that might require a remediation plan. The ADCT collects and reviews all evaluation forms. The Program models its practicum evaluation process according to competencies outlined by Hatcher and Lassiter (2005) and endorsed by APTC and APPIC.

(b) Additionally, during practicum, students are enrolled in PSY: 767 Clinical Practicum (Appendix E, pp. 367-402). The ADCT assigns the course grade which is informed by supervisor
evaluations and student’s performance in the practicum course/case conference meetings. Students having difficulty developing their practicum skills are counseled, a remediation plan is implemented, and they may be required to gain additional practicum experience. (c) For students to be well prepared for internship, they are expected to accrue a minimum of 900 practicum hours prior to going on internship, which is described in more detail in section B4 and in the Practicum Handbook (Appendix L, pp. 500-512). (d) Finally, effective practicum experiences provide opportunities for students to give feedback to supervisors about the quality of supervision, the practicum site, and other matters. This feedback occurs as the student meets for supervision with the supervisor, but we also require that students complete a formal evaluation twice each year, after the first and second semesters of practicum, using the Practicum Supervisor and Site Evaluation form contained in Appendix K, pp. 496-498.

7. Internship: Student must successfully obtain and complete an internship conforming to APPIC standards. Internship is the capstone clinical training experience. Program expectations and policies for internship are articulated in the Internship Application Guide, Appendix L, pp. 513-526. The program determines successful completion based on letters sent from internship sites to the Program when the student successfully completes. Students are encouraged to apply to and accept only APA accredited internships, although some students select non-accredited sites for a variety of reasons. In these cases, Program policy requires that the DCT, ADCT and mentor review the internship and judge that is largely equivalent to APPIC standards (pp. 515-516). Student performance below expected competencies identified by the internship site are also considered as part of this minimal level of achievement. Students must pass the CE and defend their dissertation proposal before applying for internship.

B4: Practicum Training

Table 2 provides information about practicum settings and student placement (pp. 41-47) and descriptions of current practicum sites are provided in Appendix D, pp. 152-168.

Formal practicum training begins in Year Two and occurs for a minimum of 3 years (9 months/academic year). Students are assigned to the same site for the fall and spring semester. Students are expected to obtain a minimum of 50 direct assessment and intervention hours per semester for a minimum of 300 total direct hours overall (50 x 6 practicum semesters). In accruing these hours, students work a minimum of 10 hours per week including supervision, which translates into 10 hours x 15 weeks/semester = 150 hours/semester = 300 hours/year = 900 hours over three years (minimum of 300 direct and 600 supervision/support hours required to graduate). Students have the option and often elect to extend their work to 12 months at their assigned site, and may also opt to take either a summer or secondary practicum opportunity. Because of this, students generally accrue more than 900 hours. For example, our most recent two cohorts of 7 students applying for internship accrued an average of 1359 direct assessment and intervention hours (range 1017-1410 hours), and an average of 429 supervision hours (range 249-675 hours), for a ratio of 1 supervision hour/3.2 direct hrs. Students log practicum hours each semester using the APPIC MyPsychTrack program. Logs are reviewed and collected by the ADCT, Dr. Paul, to ensure that students meet minimum requirements.

The ADCT coordinates and supervises practicum training. Didactic preparation for practicum training begins in Year One when students complete 7 courses that lay a foundation for clinical practice. Consistent with our scientist-practitioner philosophy, courses emphasizes empirical foundations of professional activity in psychology. During this year, skills necessary for success in the initial practicum placement are developed in core assessment and interventions courses and PSY 714: History and Foundations of Clinical Psychology, through role play, report writing,
and other activities. Interpersonal, communication, writing or other difficulties that may interfere with the initial practicum experience are sometimes identified during this first year. Remediation occurs when this is the case. Prior to starting practicum in Year Two, the ADCT meets with each student to “engineer” practicum placements over the practicum years to ensure each practicum experience builds on the previous experience and culminates in a portfolio of experiences that meet students’ career goals (see Appendix L, Practicum Training Plan, p. 508).

Students in Year Two are assigned to the Program’s on-campus training clinic, the PRACTICE. Students must maintain caseloads of 5-6 carefully screened psychotherapy clients throughout the year, engage in routine outcome monitoring with all clients, complete 2 comprehensive psychological assessments and integrated reports each semester, and attend and participate in weekly multidisciplinary staff/consultation meetings at the PRACTICE. Core faculty provide a minimum of two hours of direct face-to-face supervision each week, at least one being individual supervision. Also, faculty supervisors devote approximately two additional hours per week per student to indirect supervisory functions (e.g., observing videotapes, in-session modeling, co-therapy). Students in Years Three and Four – that is, second- and third-year practicum students – are assigned to Program-approved training sites in the Las Vegas/Clark County area. These practicum sites are typically unfunded although there are some exceptions noted in the description of practicum sites, Appendix D, pp. 152-168. Site supervisors are aware of our training model and goals, maintain ongoing communication with the ADCT, and participate in an annual supervisor retreat providing 3 CEs covering topics in practicum training provided by the ADCT. All student practicum hours at these sites are currently supervised by licensed clinical psychologists. Students interview with practicum site supervisors at our annual Practicum Fair held on campus in the spring of each year. Assignment to practicum sites are made by mutual agreement between student, advisor, ADCT, and practicum site supervisor, in line with students’ training needs, professional interests, and goals.

Each student is required to take 18 credits of PSY 767: Practicum (3 credits per semester for 3 years) and must be enrolled in PSY 767 to be engaged in clinical activity. First- and second-year practicum students are also required to attend two hours of practicum seminar per week, which is taught by the ADCT. The seminar involves clinical case presentations and didactic instruction with an emphasis on further enhancing competencies related to interpersonal and relationship building skills, ethical awareness and conduct, self-assessment and self-care, response to supervision, theoretical knowledge, assessment and intervention skills, individual and cultural differences, and professional development including supervision and consultations skills. Students also write a self-assessment each year to encourage active self-appraisal consistent with developing reflective practice and self-assessment skills (Program Objective 3).

As the Program has developed, the ADCT has actively cultivated relationships with many sites to provide expanded training opportunities for students. At our last site visit, we had 16 practicum sites; we now have 25 sites for 2015-2016 (Appendix D, pp. 152-168). These sites include a variety of settings and training opportunities. Some sites provide advanced training in intervention, psychological and neuropsychological assessment in private practice settings in which children, adolescents, and/or younger and older adults are seen, and clinical and forensic (criminal and civil) referral questions are addressed. Other sites are state treatment agencies for youths or adults with serious emotional disturbances or developmental, learning, and other mental disorders. University-based counseling facilities and on-campus specialized child treatment facilities are also represented. Medical centers, including our new VA facility and the Lou Ruvo Center for Brain Health Cleveland Clinic, provide opportunities to work with clients.
presenting with a variety of medical, neurologic, and psychiatric disorders. Nonprofit community clinics and treatment facilities provide services to children, adults, and persons who are indigent. Many sites also offer opportunities to work in a multidisciplinary setting in which individual and cultural differences are well represented. Other training opportunities also exist to meet the unique training needs and career goals of our students and Program.

Practicum sites are carefully selected and closely monitored. Each site is initially reviewed by the ADCT. Criteria for sites to be approved include (1) clear commitment to student training, (2) ability to provide appropriate on-site supervision, and (3) opportunity for practicum students to provide services appropriate to their level of training in psychological assessment, intervention, and other areas. We do not accept training sites where students serve primarily as observers of others providing services. On-site supervisors are licensed psychologists who agree to train students in the activities of a psychologist and provide, at a minimum, weekly supervision. Supervisors and supervisees are provided with guidelines outlining supervisee rights and supervisor expectations (Appendix J, pp. 486-495). The ADCT meets regularly with supervisors throughout the year to monitor quality of supervision provided to students. Supervisors provide feedback to the Program regarding student performance in the fall and spring of each academic year. Additionally, students provide feedback regarding their supervisor and assigned site at these times (see Appendix K, pp. 496-498, for Practicum Supervisor and Site Evaluation Form).

As part of our self-assessment, students’ ratings of supervisors and sites are reviewed and corrective action is taken when needed to ensure high quality training (see Domain F1.c, p. 37). Finally, all students are provided with our Practicum Handbook developed by our ADCT, which outlines practicum policies and procedures, and is reviewed with all students in a mandatory workshop held each spring with first-year students (Appendix L, pp. 500-512).

These practicum experiences provide sufficient training for internship preparation. Our success in preparing students for internship was recently highlighted in an article published in Training and Education in Professional Psychology (Callahan, J. L…2013. Hidden gems among clinical psychology training programs. TEPP, 7, 278-284), that identified our Program as among the top 10 programs nationally (a “hidden gem”) in placing students in internships and producing exceptionally better outcomes than expected, given predoctoral characteristics. Findings were based on comparisons with 233 accredited clinical doctoral programs for the years 2006-2010. **Items to be addressed from prior site visit or in subsequent correspondence with APA**

At our last site visit, the CoA noted four items to be addressed (Appendix O, p. 685). We were asked to “explain how all students are provided with the means to demonstrate substantial broad and general understanding and competence in” (1) “affective aspects of behavior”, (2) “human development”, and (3) “history and systems of psychology”, and also (4) “how it provides coverage in theories and methods of supervision to ALL students”. **Responses.** Our letter dated July 23, 2010 (p. 654ff) responded effectively to CoA’s request for items 1, 3, and 4 (see CoA letter on 1/5/11, p. 692). Our response letters dated July 1, 2011 (pp. 663ff) and June 29, 2012 (pp. 667ff) responded effectively to item 2 (see CoA letter on 12/18/12, p. 696).

**Domain C: Program Resources**

Faculty and Student Qualifications and Characteristics discussed in Domain C are included in Tables 3-7, pp. 48-66. CVs for Core Faculty, Associated Faculty and Other Contributors are included in Appendix N, pp. 529-638. **C1a-e: Faculty Resources**

The Psychology Department currently has 27 full time faculty lines, including 23 tenure or tenure track lines, and 4 faculty in residence lines. All lines are state funded and renewable. Ten
of these 27 are core faculty lines for the Program as defined by IR C-18 (Drs. Allen, Benning, Culbert, Donohue, Freeman, Holland, Hurlburt, Kearney, Paul, and Lefforge). Eight core faculty are licensed to practice psychology, and two recent hires are unlicensed but preparing for licensure (Drs. Benning and Freeman). In addition to these 10 lines, two other full-time faculty who have primary administrative responsibilities are licensed psychologists (Dr. Meana, Dean of Honors College; Dr. Heavey, Assistant Vice Provost for Undergraduate Education) and devote 20% effort to the Program. Since the last self-study, the University has been responsive to filling core faculty vacancies created by retirements (Drs. Floyd, Kern, and Warren) or administrative reassignments (Drs. Heavey and Meana), providing lines to hire five additional core faculty members (Drs. Benning, Culbert, Freeman, Holland, and Lefforge). Most core faculty are on 2-2 teaching loads although some are on lower loads due to intensive research or graduate student mentoring responsibilities. Faculty who supervise graduate students’ Year One practicum experiences receive 1 course reassignment each semester (typically 3 students per faculty per semester). The current number of core Program faculty members is unchanged since the previous self-study and comparable to other accredited clinical doctoral programs (mean 10.7, median = 10; CoA 2014 Annual Report).

Core faculty function as an integral part of the Psychology Department. Eight core clinical faculty are tenured or tenure track and thus have full voting privileges in all matters of departmental governance. Two core clinical faculty members, the ADCT (Dr. Paul), and the PRACTICE Assistant Director (Dr. Lefforge) hold non-tenure-track full time Faculty in Residence positions. Their positions do not include research expectations but are ongoing, state-funded, promotable faculty lines. They have voting privileges for all governance matters except personnel matters (e.g., hiring, promotion, tenure). Dr. Kearney is Chair of the Department and continues as a core faculty member. Core faculty attend department meetings, are members of department committees (e.g., personnel, merit, awards), and are active in leadership.

Core faculty have theoretical perspectives and academic and applied experiences appropriate for the Program’s goal of training scientist-practitioners. All core faculty are graduates of APA accredited clinical psychology programs. They have expertise in a range of specialty areas in clinical psychology such as geropsychology (Dr. Holland), emotion and psychopathology (Dr. Benning), eating disorders (Dr. Culbert), childhood irritability and bipolar disorders (Dr. Freeman), neuropsychology (Dr. Allen), childhood anxiety disorders (Dr. Kearney), and childhood externalizing disorders and substance abuse (Dr. Donohue), among others. Core faculty have a variety of theoretical orientations including cognitive behavioral, behavioral, interpersonal, eclectic, and integrative. Individual, group and family behavioral and family system approaches are represented. All faculty emphasize importance of evidence-based interventions in their teaching, supervision and research where indicated. The eight core faculty with research responsibilities have active laboratories to carry out empirical research and in this context, provide research mentoring to clinical graduate students. Nine core faculty members published scholarly research in the past 7 years and all presented at professional conferences. All core faculty members maintain memberships in professional organizations. Most core faculty routinely co-author scholarly works with students. Clinical faculty collectively receive strong student evaluation ratings for Program courses they teach. As an example, core faculty taught 13 Program courses during spring and fall semesters of 2014. Students provided anonymous ratings on a 1 – 4 scale (Strongly Disagree – Strongly Agree) at the end of each course using a standard college form (see Course Evaluation Form, Appendix P, p. 704). The mean student rating on item 24, “Overall, this is an excellent instructor” was 3.81 (sd = 0.23).
We also have 14 faculty members with training in various areas of clinical and experimental psychology that are Associated Program Faculty as defined by IR C-18. All are full-time tenure track or tenured Department members and hold doctoral degrees in psychology. They serve as research collaborators, members of student dissertation/thesis committees, provide instruction in breadth, statistics, and methods courses, serve on department committees relevant to the Program, and belong to relevant professional organizations. Most are active researchers and publishers. We also have a group of 31 Other Program Contributors as defined by IR C-18 who primarily provide on-site supervision for advanced practicum placements, but may also teach courses in the Program. Those who supervise students at practica sites are doctoral level psychologists who are licensed to practice in Nevada. Those who teach Program courses have Ph.D.s in psychology with relevant background and training. For example, Dr. Wayne Weiten teaches a course to prepare graduate students for teaching (PSY 757: Teaching of Psychology). Dr. Weiten is a well-known best-selling introduction to psychology textbook author.

C2 a-c: Student Resources

We currently have 36 students in the Clinical Psychology Doctoral Program, which is similar to other accredited clinical doctoral programs (median number 40; 2014 CoA Annual Report). For 2008-2013 our incoming classes ranged from 6 - 9, with a class of 4 entering in 2014 because fewer students accepted our offers of admission than anticipated. Eight students have been accepted for 2015-2016. Four students left our Program from 2008-2014: two experienced significant familial/personal events, and two decided the program was a poor fit for their professional goals. When making admissions decisions, we consider several factors: sufficient number to ensure meaningful peer interaction and ample class size, number of students faculty members can effectively mentor, and adequate graduate assistant funding to support all students. We also consider academic qualifications (GPA and GRE scores), relevant research and clinical experience, letters of recommendation and intent, fit with Program goals including the goal of diversity, and fit with a mentor. Based on these criteria, approximately 20 applicants are invited to campus for our Interview Day. During this day, Program philosophy, including our scientist-practitioner orientation and importance of a genuine interest in research and scientific training, is presented to and explored with finalists with the hope of creating a good match between our expectations and offerings and incoming students’ interests and goals. Though we understand many students will seek careers that involve predominantly practice-related activities, we want them to share our value of integrated science and practice training. We hope some students will share our commitment to research sufficiently to pursue primarily research or academic careers.

We do not have cutoffs for GPA and GRE scores, but generally admit students who have 3.5 undergraduate GPAs or better and GRE subscale scores above 550/151. Exceptions are made in cases where we do not believe GRE scores reflect ability, such as for applicants from non-traditional or diverse backgrounds. Students admitted from 2008-2014 had undergraduate GPAs of 3.7 (range 3.4-3.8) and GRE subscale scores averaging above 590/155 (Verbal), 690/154 (Quantitative), and 700 (Psychology). Current admittance rates are similar to those since our last self-study and consistent with our ongoing goals of ensuring close faculty mentorship and providing funding for all students. In coming years, we expect to accept similar class sizes. During this accreditation time period, 42 students fulfilled all Program requirements and graduated (Table 1, p. 40). Five other students are likely to graduate in 2014-2015, needing only to complete internship and/or defend their dissertation. Five students are currently on internship, 34 students obtained internships, and 2 students will enter internship in 2015.

C3: Other Resources
Financial support for training and educational activities. The primary form of student support is state-funded Graduate Assistantship (GA) positions, although some students are funded by grants as research assistants. GA positions carry a stipend level of $13,000 paid over 9 months from the end of September to the end of May in return for up to 20 hours of work per week in support of faculty teaching or research. This stipend increases to $15,000 when they advance to doctoral candidacy. GA positions also carry a waiver of out of state tuition and cover 75% ($197.50) of the cost of the first 10 graduate credits (currently $264.00 per credit) taken in the fall and spring semesters (20 credits total), and the majority of tuition costs for up to 10 credits taken in the summer. In addition, about two-thirds of the annual student health insurance policy is paid by the assistantship ($1,000 of the $1,494 cost of the policy), which now provides $100,000 health insurance coverage. GA positions do not cover fees and some other costs, which are approximately $700 per semester. The Department currently has an allocation of 50 GA positions. Approximately half of these GA positions are used to fund Program students and half to fund experimental doctoral program students, depending on the size of the classes admitted each year, which varies somewhat on a yearly basis. We expect the number of future GA positions for clinical students to remain the same or increase in coming years. The Universities support in providing this number of GA positions is one reason we have been able to provide funding to all students who desire it while they complete their first five years of study at UNLV. GA responsibilities in Years One and Two consist of assisting professors with classroom (e.g., grading assignments, administering tests) and research activities. In Years Three and Four, students typically teach two sections of an undergraduate course. For these teaching positions, students initially teach PSY 101: General Psychology and, concurrent with their first semester of teaching, take the course PSY 757: Teaching of Psychology (Appendix E, pp. 358-361). The course prepares students each week for the upcoming lectures. In their second year of teaching, students may continue to teach PSY 101 or elect to teach more advanced undergraduate courses consistent with their clinical and research interests.

Being able to fund all students enrolled in the Program through year five has been possible by limiting size of incoming cohorts, student and Department success in securing University-based funding sources for students, and available grant positions offered by faculty members. We anticipate that in 2014-2015, all pre-internship clinical students who request funding in years 1 – 5 will receive funding. Number of students supported by federally funded grants has increased since our last accreditation, a trend which we hope to continue in coming years. Our students have also been successful in receiving competitive grants and scholarships offered by the Graduate College. For example, one clinical student received the UNLV Ferguson Fellowship ($20,000 plus fees paid), two received a President’s Fellowships ($25,000) and five received Barrick Fellowships ($15,000). These yearly awards are given to one or two graduate students across all UNLV graduate programs and thus are highly prestigious. Numerous other students have received smaller awards through the university and College of Liberal Arts. For example, for 2014-2105, two students received Sterling Scholarships ($5,000), five received Patricia Sastaunik scholarships ($2,500), and 8 received Summer Session Scholarships ($2,000). Students can apply for research and travel grants of up to $1,250 per year from the Graduate and Professional Student Association (http://www.unlv.edu/gpsa/sponsorship-awards/sponsorships). The PRACTICE also provides 20 hour/week support for three Program students over the summer. Additional financial assistance is available through UNLV Student Financial Services.

In addition to student funding, the Department has an operating budget sufficient for ongoing expenses and to purchase training equipment. Historically, faculty members were provided $800-
$1,000 per year for professional travel from the College of Liberal Arts, although for 2014-2015 each faculty member received $2,500 in faculty development funds to use for travel, equipment purchase, or other professional purposes. The Department also pays state Psychology licensing fees for all Program faculty, consistent with its emphasis on clinical training as an integral part of the Program. Internal grant programs are also available to fund faculty research, such as Faculty Opportunity Awards (http://www.unlv.edu/research/awards-foa). The University supports the Program by providing the DCT, ADCT, and Assistant Director of the PRACTICE 12-month contracts. Also, the DCT has a reduced teaching load of one course per semester. Mentoring multiple doctoral students and maintaining active research programs account for course reassignments. Practicum supervision for 3 clinical students at the PRACTICE also counts as teaching one course per semester.

**Clerical and technical support.** The Department has 3 full-time administrative assistants and two 20 hour/week undergraduate student employees. None are assigned to the Program for a fixed percentage of time, but all are available to support Program activities such as admissions, evaluations, and internship applications. The DCT works with the Department Chair and office manager to determine which staff person will assist with various administrative tasks. Technical support for all computer and electronic equipment is provided via the Office of Information Technology (OIT). Students and faculty members have access to computer help lines and technical consulting. Audiovisual equipment is also available via OIT.

**Training materials and equipment.** Since the last APA site visit, our Psychology Department Assessment Clinic was integrated as a specialty clinic within the PRACTICE (July 1, 2012) and merged with School Psychology’s assessment library. It provides low-cost services to the community and was partly established to ensure students achieve a minimum number of assessment hours and integrated reports. The Assessment Clinic has an extensive test library, with 80 different assessment measures and 37 questionnaires/checklists to assess various cognitive processing variables (executive functioning, memory, etc.), academic achievement, personality, social and emotional functioning, with assessments for children, adolescents, and adults. The PRACTICE also has computer scoring for approximately 30 commonly used measures including the WMS, WAIS, WISC, WCJ, ASEBA, BASC, Vineland, PAI, MMPI, and DKEFS. Finally, The PRACTICE also maintains a small library of clinical videos and books (79) including treatment planners, assessment books, therapy resources, etc.

The Department maintains a computer lab (shared with the Department of Sociology) that is accessible to all Program students. Computers are equipped with SPSS, EQS, Microsoft Office, and Adobe Creative Suite, including Dreamweaver, among other programs. The Department also has site licenses for E-Prime, Qualtrics, and other software for research activities.

The University has an extensive state of the art library. The physical structure provides ample space for students to read or study, with a large graduate student lounge with computers, printers, and study space. Journal and book holdings of the library are good with remote access to various databases, including PsycINFO, PsycARTICLES, Academic Search Premier, IRIS, Scopus, Web of Knowledge, and JSTOR, among others. Ability to retrieve articles, books, or documents not held by the library is excellent through Document Delivery Services, which provide copies of journal articles within a very short period of time, often within one day of the request.

**Physical facilities.** The Psychology Department is housed in Classroom Building Complex, Building B (CBC-B), where most Psychology graduate courses are taught. Each faculty member has an office and all research-active faculty members have lab space. Graduate students have office space in their professor’s research laboratories or utilize the library Graduate Student
lounge, adjacent to CBC-B. Finally, graduate students who teach have shared offices with computers and telephone. All physical facilities are accessible to individuals with disabilities.

**Student support services.** For physical health needs, our students have access to the Student Health Center ([https://www.unlv.edu/srwc/health-center](https://www.unlv.edu/srwc/health-center)) which is an AAHCA accredited facility. The UNLV Student Counseling and Psychological Services provides care for mental health needs ([https://www.unlv.edu/srwc/caps](https://www.unlv.edu/srwc/caps)). We also maintain a network of local psychologists willing to provide services to students and their family members on a sliding-scale fee basis. Students are professionally insured by the University while they perform practicum work and must maintain malpractice insurance when engaged in practicum work. Graduate students do not have access to additional University-based legal services. Other University-based units that provide student support are listed in A3, pp. 5-6

**Practicum training facilities.** With the College of Education, the Program operates an on-campus training facility, the PRACTICE, which replaced our prior on-campus training site, the Center For Individual, Couple and Family Counseling (CICFC). The PRACTICE is a community mental health training clinic whose mission is to 1) provide teaching, supervision, and clinical training experiences for UNLV graduate students by faculty experts, 2) provide low-cost, quality behavioral, cognitive and mental health assessment and therapy services to the UNLV and greater Las Vegas communities, and 3) support behavioral, cognitive and mental health research by UNLV faculty and graduate students. It was initially funded with $500,000 provided by the UNLV provost and provides a technologically sophisticated training clinic for students in the clinical Program, M.S. Clinical Mental Health Counseling program, and Ed.S. School Psychology program. The PRACTICE boasts an integrated digital video recording and electronic medical records system networking 30 computer workstations (with Titanium and Landro software) to a secure server hosted and maintained by UNLV OIT for use by student clinicians and supervisors in their clinical-practicum training functions. It has 19 therapy spaces with video and audio recording capabilities, 2 conference rooms, offices for the Director and Assistant Director, and offices allocated for GAs, test scoring, a clinical library, and storage. Electronic medical records allow efficient tracking of student progress notes, treatment plans, etc., and provide real-time monitoring of outcomes from evidence based interventions. Outcomes are assessed each session using Duncan’s Outcome Rating Scale and Session Rating Scale, and reviewed in supervision each week.

The PRACTICE implements a multidisciplinary approach by partnering with the UNLV Center for Autism Spectrum Disorders, UNLV Child School Refusal and Anxiety Disorders Clinic, and Fetal Alcohol Syndrome and Autism Clinics. It employs a full-time Director, Assistant Director, administrative assistant, and five graduate assistants. It is governed by both Colleges under its clinic director (Dr. Paul) who works in consultation with an advisory board made up of one representative from each contributing department and an IT representative. The College of Liberal arts supports the PRACTICE by contributing the PRACTICE Director’s stipend and 3 doctoral level GA positions for Program students. The College of Education contributes physical space to house the PRACTICE, a full time Administrative Assistant, two Master’s level GA positions, and part time IT support. Client fees (therapy and assessment) and student fees generated from courses taught in all supporting departments cover operational and training costs for student training, totaling approximately $65,000 per year. The PRACTICE also has two postdoctoral positions and some director discretionary money to be used for fundraising and position recruitment, which is provided through two awards made by the Kagi Foundation totaling approximately $200,000. A copy of the PRACTICE Handbook which provides more
detailed information is included in Appendix T, pp. 721-756.

Second-year students complete practicum at the PRACTICE under supervision of core program faculty. Third- and fourth-year students participate in practicum either on-campus, but primarily at off-campus training sites. These sites are described in greater detail in B4. pp. 15-17 and Appendix D, pp. 152-168. We have ample practicum sites for our students (25 for 2015-2016) and excellent collaborative relationships with each site.

**C4. Consortium.** The Program is not part of a consortium.

**Items to be addressed from prior site visit or in subsequent correspondence with APA**

From our site visit, the CoA noted **three items** to be addressed (Appendix O, p. 681): (1) The site visitors noted a shortage of office space for graduate students that do not have teaching assistantships, and requested “a narrative response...to update the Commission on the program’s progress in resolving the shortage of office space for all graduate students.” (2) The Program was asked to discuss in the current self-study whether our arrangement with the Center for Individual, Couple, and Family Counseling (CICFC), our on-campus training clinic at that time, was “sufficient to provide the administrative support for a quality practicum site experience for students.” There were no full-time staff to cover administrative duties. (3) We were also asked to address in this self-study “whether the program has sufficient clerical support”.

**Responses:** (1) Our letter dated July 22, 2009 (p. 652) responded effectively to the CoA's request for an update on progress in resolving shortage of graduate student office space (see CoA letter on 12/15/09, pp. 687ff). (2) Since the last site visit, we have established a new training clinic, the PRACTICE, described earlier in Domain C, p. 21. The level of administrative support is a substantial improvement over our prior arrangement with the CICFC to ensure quality practicum experiences for Program students. (3) We have three full-time administrative assistants and approximately 40 hours per week of student worker assistance to provide clerical support to the Department.

**Domain D: Cultural and Individual Differences and Diversity**

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

The Department’s and Program’s policies and intent regarding diversity and multiculturalism match UNLV’s mission of “Nurturing equity, diversity, and inclusiveness that promotes respect, support, and empowerment” and its core theme to “Foster a Diverse Campus Population and Engagement with the Community” ([https://www.unlv.edu/about/mission-statement](https://www.unlv.edu/about/mission-statement)). The Department has worked to create an increasingly diverse environment, and highly values diversity in hiring and admissions decisions. We have achieved some success in increasing student diversity, but more progress is needed. We continue to move forward in realizing our goal of a diverse faculty. In addition to our efforts to create a diverse learning environment, our Program is designed to develop multicultural competence in students via didactic, practicum, and research experiences. The department’s commitment to increasing awareness and sensitivity to diversity issues and our efforts along these lines are highlighted on our department diversity webpage ([http://www.unlv.edu/psychology/about/diversity](http://www.unlv.edu/psychology/about/diversity)). Our internal commitment to diversity is also partly manifested by active, rotating service of experimental and clinical faculty, including the DCT, on our Department Diversity Committee as well as formal articulation in the following Program Handbook statement (p. 133): “Multicultural competence is an integral part of the program’s research and clinical training mission. The curriculum instructs students in multicultural competencies at all levels of the research enterprise (critical evaluation of existing literature, design, methodology, interpretation of findings) and of clinical activity (assessment, intervention, program development, consultation, program evaluation). Additionally, we value,
seek and support diversity among faculty and students with regard to age, sex, sexual orientation, ableness, socio-economic status, race, culture, and other forms of diversity.”

The University and Department adhere to the Nevada System of Higher Education nondiscrimination policy, which reads in part: “The Nevada System of Higher Education (NSHE) is committed to providing a place of work and learning free of discrimination on the basis of a person's age, disability, whether actual or perceived by others (including service-connected disabilities), gender (including pregnancy related condition), military status or military obligations, sexual orientation, gender identity or expression, genetic information, national origin, race, or religion. Where discrimination is found to have occurred, the NSHE will act to stop the discrimination, to prevent its recurrence, to remedy its effects, and to discipline those responsible.....It is expected that students, faculty and staff will treat one another and campus visitors with respect” (http://www.unlv.edu/hr/policies/harassment#3). As an Affirmative Action/Equal Employment Opportunity employer and educator, the University of Nevada, Las Vegas is committed to the principles of equal opportunity for all of its students, faculty, employees, and applicants for admission and employment.

Psychology department efforts are supported by UNLV’s Office of Diversity Initiatives (ODI) (http://www.unlv.edu/diversityinitiatives), which advocates, promotes, and supports the advancement of equity, inclusiveness, and empowerment of a continuously changing collegiate and global community. As part of the ODI, the Cultural Competence Academy provides workshops, seminars, and training sessions designed to provide opportunities for faculty and staff to develop knowledge, skills and awareness related to cultural issues and working with diverse populations (http://www.unlv.edu/diversityinitiatives/cca). Because of its high enrollment of minority students, UNLV has been designated a Minority Serving Institution (MSI) by the U.S. Department of Education (http://www.unlv.edu/diversityinitiatives/msi) and is ranked among the top ten most diverse college campuses in the nation according to U.S. News & World Report's "Best Colleges" publication (http://news.unlv.edu/release/unlv-ranked-among-top-ten-most-diverse-college-campuses-nation).

**Student recruitment and retention.** We currently have 36 clinical students, 7 of whom (19.4%) are members of ethnic minority groups. Four students are Hispanic, two are Asian, and one is African-American. One of these students is a foreign national (Chile) and two other Caucasian students are from Canada and Russia. This is a decrease since our 2008 self-study (24.5%) and below the 30.2% reported by APA for accredited clinical doctoral programs. We continue to seek greater cultural diversity in our Program, and for our incoming class of 8 students, two are Hispanic, one is biracial and another is a foreign national from Germany. One student of ethnic minority status prematurely departed the Program after deciding it was not a good fit for his professional and personal goals. The current gender ratio is skewed toward female admissions, as is the case nationally. Our current student body is 30.7% male, which increased from 16.3% in 2008 and is above the national percentage of 22.8% for accredited clinical doctoral programs. Student age range is 22-49 years with some well-qualified non-traditional students making career changes. We currently have one student with a documented disability and have no knowledge of receiving any other such applicants.

Programmatic efforts by the Department to increase sensitivity to diversity issues are led by our Diversity Committee with faculty leadership dedicated to this committee as well as a graduate assistant position (20 hrs/week). One example of our efforts was the development of the Program’s Outreach Undergraduate Mentoring Program which is designed to mentor students from diverse backgrounds in preparation for graduate studies in psychology at UNLV or
elsewhere (OUMP; [http://www.unlv.edu/psychology/undergrad/outreach](http://www.unlv.edu/psychology/undergrad/outreach)). There are currently 22 students in OUMP, with 12 graduate student mentors. Diversity is represented by students who are African-American and Hispanic, first generation college attendees, from low SES communities, identify as LGBTQ, and have physical and learning disabilities. Workshops are offered focusing on relevant topics (e.g., Psychology and Careers, Preparing a CV, Interview Skills, etc.). OUMP students are informed of RA and scholarship opportunities, conferences for underrepresented students, webinars related to graduate school, and other relevant resources. Individual mentoring is provided to clarify their interests and help guide them towards programs that are a good fit, discuss the application/graduate school process and review application materials, and provide other support as needed. Students are recruited into OUMP by emails sent at the start of semesters to undergraduate psychology majors and all faculty teaching psychology courses, application distribution and presentation in psychology courses, Psi Chi, and the Psychology Club, as well as fliers posted in undergraduate buildings (Appendix Q, pp. 708-709).

We have a number of other mechanisms in place for minority student recruitment and retention including: (1) Admissions process that takes culture into account, including culturally appropriate consideration of scores as well as examination of other measures of potential success; (2) Department policy allowing funding for applicants from diverse backgrounds to interview with our Program; (3) Department policy to prioritize funding for minority students; (4) Minority student recruitment is a mandate of the Department Diversity Committee; (5) Accessing minority student associations at UNLV to identify qualified potential minority candidates for our program; (6) Mentoring program whereby existing students are matched, taking into consideration aspects of diversity, with incoming students to provide support and assistance in the Program and community; (7) Meetings between the DCT and minority students and cohorts to discuss concerns; (8) Recruitment efforts directed to minority students at non-UNLV institutions via listserves, graduate program events, CUDCP and APA recruitment fairs; (9) Faculty attendance at multicultural and other conferences to recruit minority students; (10) As the diversity of our faculty membership hopefully grows, an increased matching of minority students to minority faculty members; (11) Maintain multicultural coverage throughout the curriculum and in practica; and (12) Student orientation to relevant campus organizations advancing multicultural issues. The Program Brochure used to recruit students explicitly states our commitment to diversity and is included in Appendix Q, p. 706.

**Faculty recruitment and retention.** The Department currently has 27 faculty members, and one more female faculty member (Dr. Hines) will join us in August, 2015. Of these 27, 12 are women (44%), one of whom represents an ethnic minority (Hispanic). The percentage of female faculty increased since our prior site visit in 2008 (37.5%), but the current percentage of faculty representing ethnic minorities (3.7%) has declined from our last site visit (4.2%), which was due to an expansion of current faculty (from 24 to 27) and poor success in our efforts to hire additional faculty representing ethnic minorities. The professor currently representing an ethnic minority is a clinical faculty member and mentors students in the program, but also serves as Dean of the UNLV Honors College. Since the APA site visit in 2008, one male experimental faculty member retired (Dr. Koettel) as did three clinical faculty members, one female and two male (Drs. Warren, Kern, and Ferraro). Although we are highly committed to multiculturalism, attempts to increase ethnic diversity of our faculty during recent hiring cycles were not successful. During a recent search for a clinical psychologist, for example, the search committee actively researched qualifications of diverse applicants and interviewed one Hispanic female. We offered her the position but she accepted a position elsewhere. We have however increased the
number of female faculty in the Program since our last site visit. We hired one female faculty member who joined our core Program faculty (Dr. Culbert), one female candidate for our neuroscience position (Dr. Pritchard), one female candidate for our developmental psychology position (Dr. Robnett), three female faculty members into Faculty In Residence positions (Drs. Lefforge, McMurray, and Villa), and one female faculty member for a neuroscience position who will join us in August of 2015 (Dr. Hines). Four other hires in clinical psychology and neuroscience were male and not ethnically diverse (Drs. Benning, Holland, Hyman, and Freeman). We hope to continue increasing percentage of female faculty, and increase the ethnic diversity of our faculty through upcoming hires, including clinical hires, in 2015 and beyond.

Despite our limited success in increasing faculty ethnic diversity, our faculty members remain committed to principles of multiculturalism as central to our Department culture and Program mission. This commitment is evidenced by Department mechanisms in place for minority faculty recruitment and retention including: (1) Prioritizing qualified minority candidates in faculty searches and hiring advertisements; (2) Openness to non-traditional backgrounds such as community work that may be less academic in nature; (3) Matching new faculty to faculty mentors sharing a significant cultural dimension; (4) Introduction of faculty members to campus organizations and colleagues with shared cultures; (5) Departmental support and encouragement for developing courses specific to cultural concerns; (6) New faculty orientation to address issues of concern to new faculty, such as faculty governance, committees, campus-wide cultural organizations, promotion, and tenure; (7) Regularly scheduled meetings with mentor, graduate program directors, and Chair to discuss existing concerns; (8) Reduced emphasis on impact factor of journals to allow for publication in ethnic studies journals that may have lower impact factors as well as utilization of qualitative and non-traditional methodologies; and (9) Supporting initiatives developed by the Diversity Committee (e.g., parental leave). Examples of recent faculty recruitment announcements are included in Appendix R, pp. 710-714.

The Program did bring one Hispanic female candidate to the point of a job offer recently (but then lost her to another institution), suggesting that our plan for recruiting diverse faculty and staff is not entirely insufficient. Nonetheless, the Program has decided that its recruitment plan should be enhanced in the future, to maximize our chances of successful minority recruitment. To this end, the Program plans on expanding its efforts in advertising job openings, to include listserves that reach minority and diverse groups, direct mailings to accredited doctoral programs at institutions known to train significant numbers of minority and diverse students, and at venues (e.g., CUDCP and APA) where potential applicants can be made aware of job possibilities.

**D2. Efforts to Educate Students About Diversity and Test Cultural Competencies**

Integrating multicultural competencies in our curriculum has been a developmental and incrementally successful process. Since our Program began, faculty members have actively incorporated individual and cultural differences into all coursework to provide students with the diversity knowledge, skills, and attitudes required to work in a multicultural society. To build faculty skills by which to achieve multicultural infusion, the Department has also purchased materials to help individual professors with this integration. Faculty members have worked to increase the explicit incorporation of cultural competencies into syllabi, and the Diversity Committee has been tasked with reviewing syllabi from all relevant graduate courses to boost new reading and other materials pertinent to diversity topics. The program also uses guest lecturers from the community who speak on issues related to cultural competencies. Recent lecture topics include Suicide in Latino/a Youth (Patti Jo Velasquez, Ph.D.), Working with Religious Diversity in Psychotherapy (Vicki Genia, Ph.D.), Transgender and Intersex (Tiger...
Devore, Ph.D.), Understanding Needs of Returning Veterans in the Context of Military Culture (Ross D. Bryan, U.S. Army Retired), Interpersonal and Domestic Violence (Jean Nidetch Women's Center), Issues working in an underserved community (Southern NV Adult Mental Health/Mobile Crisis), and Serving the LGBTQ Community (The Center).

Clinical students are required to take PSY 750: Diversity in Professional Psychology, which is specifically designed to instruct in cultural competencies. Competencies are tested via active and engaged participation, reaction papers to assigned readings, and a course project involving a written review of a topic of direct relevance to the practice of culturally competent clinical practice, research, or teaching. Students describe this intensive course as informative and helpful. Also, diversity issues are covered in each core clinical course in a variety of ways (PSY 714, 715, 716, 725, 726, 736, 750, 755, 767; Appendix E, pp. 169-402). For example, PSY 716: Assessment of Adults addresses multiculturalism across self-report and interview assessments, with discussions of how the NEO-PI-R/3 factor structure replicates across cultures and how Openness is different and perhaps not well-represented in the NEO-PI instruments across cultures, how disorders present themselves differently across cultures, whether the same scores have the same psychological meanings across cultures, differences in psychological mindedness that can influence symptom presentation, and limitations of using translators who are not skilled with psychiatric nomenclature and constructs (among other topics). PSY 714: History and Foundations of Clinical Psychology includes a diversity experience and reaction paper, which involves each student creating for themselves an experience in which they are a minority amongst a majority, and writing a paper that summarizes their thoughts, feelings, and behaviors in reaction to the experience. These and other formal teaching methods increase sensitivity and awareness of diversity issues in the practice of professional psychology. Popular elective courses specifically include relevant diversity topics (PSY 743, 744, 752, 762), as do breadth courses where relevant (PSY 704, 705, 707, 712, 721).

Practicum placements are another way we educate students about diversity. Students provide psychological services to diverse clients defined in a number of ways, including disability status, ethnicity, SES, sexual orientation, psychological disorders and symptom severity, among others (see practicum site descriptions, Appendix D, pp. 152-168). As a more detailed example, the PRACTICE provides services to clients representing all major minority and lower-income groups. Clients range in age from 2-82 years of age, 9% are African American, 48% are Caucasian, 6% are Asian/Pacific Islander, 16% are Hispanic, 9% are mixed race, 1% are Native American, and 11% are Other/no response. Four percent of clients identify as LGBTQ. Fifty-two percent of clients report annual household income of under $20,000. Supervisor evaluations of students’ interactions with these diverse clients are an important way we determine whether cultural competencies are met and assess outcomes vis-à-vis our diversity training. Similarly, student evaluations of supervisors’ sensitivity to multicultural issues assist us in determining quality of practicum sites in addressing diversity issues (see Appendix K, p. 498). Finally, practicum supervisors are directly trained in multicultural competence in supervision through topics presented by the ADCT in her annual supervisor CE workshops. For example, in 2014, the presentation focused on training students to serve a diverse community.

Advanced students are also tested on cultural competencies in their Comprehensive Examination. In addition to the expectation that diversity issues will be properly addressed in all research projects, students are encouraged to address multiculturalism in their theses and dissertations. Since our last accreditation, a number of students have directly researched culture and diverse groups, with dissertations and other research relating to child maltreatment and
disorders, parenting attitudes, juvenile delinquency, aging, sexuality, service in the armed forces, and obesity bodily perceptions and eating disorders, among other areas. Their findings have been disseminated through scholarly presentations and publications (see Appendix S, pp. 715-720, for examples of department diversity publications). One recent graduate won the Tony Wong diversity award from the National Academy of Neuropsychology. Overall, we have several mechanisms in place for instructing cultural competencies: (1) Diversity in Professional Psychology (PSY 750); required course; (2) Infusion of multicultural issues in courses and practica; (3) Guest lecturers from the community with multicultural expertise; (4) Multicultural workshops for students and faculty; (5) Provision of relevant didactic materials for faculty; (6) Departmental sponsorship of faculty attendance at multicultural conferences; (7) Practica exposing students to diverse populations and culturally informed assessment and interventions; (8) Inclusion of multicultural issues and topics in the CE; (9) Encouragement to include multicultural issues in theses, dissertations and other research; (10) Diversity Committee review of syllabi for better integration of cultural competencies; and (11) Workshops for faculty on integrating multicultural competencies across topic areas.

**Items to be addressed from prior site visit or in subsequent correspondence with APA**

No issues were noted for Domain D at our last site visit or since that time to be specifically addressed in the Program’s next self-study or in narrative form.

**Domain E: Student-Faculty Relations**

**E1: Student Rights and Grievance Procedures**

The Program’s actions and activities are characterized by mutual respect and courtesy between faculty members and students. The Program recognizes the rights of students and faculty to be treated with courtesy, respect, and collegiality in all circumstances. Student rights and grievance procedures are located in a number of paper and electronic documents. The Program Handbook contained in Appendix C provides Program philosophy related to student-faculty relations (p. 131) and procedures for conflict resolution and grievance (pp. 138-140). Table A (Appendix A, p. 81) contains a list of program-level policy documents, including specific location for these items within the self-study, as well as web addresses for specific department and university policies that are available in electronic form. UNLV Academic Policies and Forms can be located at [http://www.unlv.edu/advising/policies-forms](http://www.unlv.edu/advising/policies-forms) while the UNLV Student Code of Conduct sets forth standards of conduct expected of students and can be accessed here: [http://studentconduct.unlv.edu/conduct/pdf/Student-Conduct-Code.pdf](http://studentconduct.unlv.edu/conduct/pdf/Student-Conduct-Code.pdf). GA Guidelines and Regulations are located at: [http://www.unlv.edu/sites/default/files/page_files/3/GA-Guidelines-Regs-2014.pdf](http://www.unlv.edu/sites/default/files/page_files/3/GA-Guidelines-Regs-2014.pdf)

**E2 and 3: Faculty Accessibility and Guidance**

We have dedicated clinical faculty members who serve as scholars, teachers, clinical supervisors, mentors, and models of the best characteristics of the scientist-practitioner clinical psychologist. Clinical faculty members schedule office hours and many also schedule regular “lab” meetings to discuss research with graduate students. Faculty members have regular individual meetings with students they are advising and we intentionally try to admit cohorts of 6-8 each year (optimal student body of 40-45) to ensure faculty availability for mentoring. The DCT meets periodically with members of the Clinical Student Committee to discuss issues of student concern and makes changes to the Program that includes student feedback. Important changes in recent years include a revision of the Program’s competencies, measurement of competencies, policy regarding problems in competency development, optional neuropsychology emphasis, approved breadth courses, and enhanced practicum opportunities, among other issues.
The DCT also meets regularly with individual students and diverse students to address more specific concerns they may have. The PRATICE Director Dr. Paul, and Assistant Director, Dr. Lefforge, also have an open door policy to meet with students regarding practicum questions or concerns. A clinical student representative also attends Department faculty meetings.

E4: Performance Expectations and Student Evaluations

The Program Handbook, Timeline and APA Code of Ethics is given to all students when they interview for the Program and again during Program orientation when they matriculate (see Appendix C, pp. 126-151, for a copy of Program Handbook and Appendix M, p. 528 for a copy of Program Timeline). The Program Handbook outlines Program requirements, pp. 135-137

Students are formally evaluated annually in five general areas: (1) academic performance, (2) scholarly research activity, (3) clinical knowledge and skill, (4) ethical knowledge and functioning, and (5) assistantship performance, if applicable. The evaluation process involves collecting statements from students, advisors and the ADCT who provides feedback on practicum performance, which is summarized on the Student Annual Evaluation Form (Appendix H, pp. 465-475). This information is reviewed at a Program meeting and distilled into a written letter presented to the student and placed in the student’s file. Mentors and students meet after this process and implement a remediation plan if applicable. The Program Handbook provides more detailed information about this process (Appendix C, pp. 141-144). De-identified sample evaluation and probation letters are included in Appendix U, pp. 757-763.

Students are placed on academic probation if they receive a grade lower than a B- in any course, if they fail to defend their thesis proposal by November 15 of Year Three, if they fail to defend their thesis by November 15 of Year Four, or if they fail to defend their dissertation proposal by November 15 of Year Six. Students may petition for extensions when special circumstances exist. Of those students matriculating in the Program over the past 7 years, 9 were placed on formal probation for failing to propose or defend their thesis in a timely manner (6), for receiving a grade lower than B- (2), or for both (1). Two of these students resigned from the program for personal reasons (complicated divorce; death of partner), four were removed from probation for completing probation requirements, and three others are currently completing probation requirements. These numbers are somewhat better than those from our last three year accreditation period (2006-2008) when 5 students were on probation.

As the example letters in Appendix U demonstrate, students are given written warning well in advance of being placed on probation for lack of adequate progress. Students placed on academic probation are informed in writing what they must do to be removed from such probation and the period during which they must complete required activities, such as retake a course or finish a thesis. Students failing to meet the terms of probation may be separated from the Program.

E5: Student Complaints and Grievances

Since the inception of the Program, no formal complaints or grievances have been filed by students. Student concerns have occasionally been raised and addressed through informal conflict resolutions mechanisms described in the Program Handbook. The Clinical Student Committee is helpful in bringing student concerns to the DCT and ADCT and Program faculty members have been receptive to these concerns. Procedures for filing a formal grievance are specified in the Program Handbook (Appendix C, pp. 138-140). In the event that a formal complaint were to be received, paper copies of the complaint and related materials would be stored in a locked filing cabinet in the department Chair’s office (Dr. Kearney).

Items to be addressed from prior site visit or in subsequent correspondence with APA

No issues were noted for Domain E at our last site visit or since that time to be specifically
addressed in the Program’s next self-study or in narrative form.

Domain F: Program Self-Assessment and Quality Enhancement

F1: Self-assessment

Self-assessment has been an ongoing process within the Program since its inception in 1999. The Program began with a framework and goals conforming to the Guidelines and Principles for Accreditation of Programs in Professional Psychology. As the Program developed each year, we engaged in regular reflection on all aspects of training, policies, and procedures to build a high-quality program and culture that embodies our values. Our self-assessment process most regularly occurs via clinical faculty meetings. We have functioned largely as a committee of the whole because of the precedent-setting nature of many of our decisions. We currently have approximately 4 formal meetings per academic year. During these meetings, we perform or review various required tasks such as admissions, student evaluations, practicum assignments or concerns, student probation and petition determinations, and funding priorities. These tasks often serve as a springboard for complex discussion of Program issues and goals, or the DCT and ADCT will raise special issues following national annual training meetings (e.g. CDCUP or APTC), or consultation with Program or associated faculty members, Clinical Student Committee members, practicum supervisors, Graduate College, or other relevant personnel.

Clinical faculty meetings are also designed to discuss the development and state of the Program more broadly. Examples of important programmatic issues reviewed during meetings include faculty and student diversity, course coverage of diversity and history, practicum competencies, procedures for student evaluations, regularity of student-faculty communication, types of projects and length suitable for theses and dissertations, changes to the Interview Day activities, and schedule and material regarding our 2015 accreditation review. As mentioned earlier (see A3, p.2), a Clinical Program Subcommittee (CPS) of the DCT and 3 core faculty members is specifically entrusted to handle credit transfer/waiver requests from incoming students, and review student petitions for extra employment, waiver or alteration of a Program requirement, or other routine matters. Oftentimes, special issues arise from this process that are brought to the full clinical faculty for discussion and resolution. The Program also collects student ratings of course/instructor quality and adequacy of supervisors and practicum sites to assess these critical Program components, which are considered in greater detail in section F1.c.

F1.a-b. Effectiveness in Achieving Programs Goals and Objectives

Our expected outcomes and competencies are described in detail in Domain B and Table B2 (Appendix B, pp. 84-119). We judge effectiveness in meeting these proximal outcomes using our minimal levels of achievement described in section B3.a-e (pp. 12-15) and so gather outcome data from several sources including: (1) Course grades, (2) Comprehensive Examination (3) theses, dissertations, and other research, (4) Progress in the Program, (5) Engagement in mentoring, (6) Clinical practica, and (7) Completion of internship. The Program also monitors distal outcomes by surveying our graduates every other year. Review of this outcome data clearly demonstrates that overall the Program is achieving expected outcomes consistent with our goal of training scientist practitioners, although outcomes for several objectives are lower than desired and resulted in modification to the Program over the past seven years.

Outcomes for Proximal objectives

1. Course Grades. Many of our objectives are met in full or in part through exposure to information and completion of assignments in courses. Our courses are rigorous and student achievement is generally high. Minimal level of achievement for coursework is a grade of B- or better and Table V1, Appendix V, pp. 765-766, provides summary data by cohort for our
students, noting those who did not achieve the minimal standard, the relevant course, and the current status. As the Table indicates, 3 of 46 students received grades less than B-. Two are retaking the courses and should receive passing grades by the end of this semester (spring 2015). The other student was separated from the Program for personal reasons. Thus, our admission procedures ensure that the large majority of students enter the program with the preparation and abilities to do well in courses and those who fall short are able to remediate. No students have been separated from the Program for failing this minimal level of achievement.

2. Comprehensive Examination (CE). The CE serves as a useful method to evaluate student progress across a number of our program objectives for students who have completed the Master’s degree and are entering doctoral studies in preparation for internship (Appendix F, pp. 403-442). Over the accreditation period, 48 students completed the CE. Thirteen of these students were required to revise one or two questions, consistent with our CE policy, and two of these failed to adequately revise questions. These two students did successfully pass the exam on their second attempt and have since graduated from the Program. For students who were admitted to the program over the last 7 years, outcome data is presented in Table V1, pp. 765-766. All student who were eligible to take the CE passed, with one passing on the second attempt. No students have exited the Program because of failing the CE, suggesting that Program training adequately prepares students to meet this minimal level of achievement.

3 and 4. Theses, Dissertations, and Other Research; Progress in Program. Proposal and defense of the thesis and dissertation are important Program milestones where students hone research skills under the guidance of a research mentor. Timely completion of these milestones is also an important indicator of adequate progress through the Program because students who fall behind on these milestones typically take longer to graduate. Table V2, pp. 767-768, presents aggregate data for each cohort of matriculated students for the past 7 years. All students who have proposed or defended thesis and dissertation have done so successfully. However, five students were placed on academic probation for failing to propose or defend their thesis in accordance with timelines specified in our Program Timeline (Appendix M, p. 518). Four of these students successfully proposed or defended their thesis and were removed from probation. We anticipate the fifth student will defend his thesis this summer and be removed from probation at that time. No students admitted in 2013 have completed their thesis proposals at this time but we anticipate they will complete this requirement by the fall of 2016, in accordance with our Program Timeline. Similarly, a number of students admitted in 2011 have not completed the dissertation proposal, but two are close to proposing and four others are anticipated to propose by fall of 2015, thus meeting program requirements.

As indicated in Table 8, pp. 67-71, dissertation topics of graduates are quite diverse, addressing relevant research questions across the lifespan from childhood through old age, and focusing on topics representing most major forms of psychopathology (anxiety, affective, psychotic, substance use, and eating disorders among others). Most employ quantitative analyses of group data, although single case designs and qualitative approaches are also used. Though not reflected in the Table, findings from most dissertations are presented at professional conferences and developed into manuscripts published in peer-reviewed journals, which is encouraged by Program faculty. Thesis and dissertation projects of current students are equally diverse and will also result in presentations and publications. We continue to monitor students closely through the thesis and dissertation processes to ensure all complete these requirements in a timely manner.

Our students are active in research in addition to theses and dissertations, and are members of professional organizations. Table V3, pp. 769-770, presents outcome data for the past seven
years, and indicates students hold memberships in national professional organizations such as the American Psychological Association and Association for Psychological Science, state and regional organizations, such as the Nevada Psychological Association and Western Psychological Association, as well as specialty organizations consistent with their interests and career goals including the National Academy of Neuropsychology, Association for Applied Sports Psychology, Anxiety Disorders Association of America, Academy for Eating Disorders, Hispanic Neuropsychological Society, and Society for Sex Therapy and Research, among others. Research productivity indicates a similar level of commitment with most students currently meeting our minimal goal of at least one professional publication during their tenure with us and we anticipate all will meet this goal by graduation. Many of our more advanced students well exceed this goal. As Table V3 indicates, number of scholarly presentations and publications increase with time in the Program, such that the 2014 student cohort has a total average of 1.3, the 2012 cohort has 7.1, the 2010 cohort has 11.0, and the 2008 cohort has 18.6. Information clarifying types of publications, research topics, and publication outlets is contained in Table V4, pp. 771-774, which lists publications for our 27 Department faculty in 2014, with student authorship highlighted. Of the 41 scholarly manuscripts published by clinical faculty, 18 different clinical students were co-authors on 22 different manuscripts. Successful completion of theses and dissertation, involvement in professional organizations, and scholarly publications and presentations, when considered together with students’ course grades in research methods and statistics, provide clear support we are achieving our central Program goal to train psychological scientist-practitioners, and meet program objectives and competencies relating to research.

5. Mentorship. Active engagement in the mentorship process is a unique aspect of doctoral training and one in which we expect full engagement of faculty and students. We do not formally evaluate this area with rating forms, and the type, frequency and settings of mentorship meetings varies across faculty making this area challenging to quantify. However, all faculty meet regularly with their students and we do receive summative narrative feedback from faculty each year as part of our annual evaluation process where this area is addressed if students are failing to actively engage in the mentoring process. Over the accreditation period, two students had difficulties fully engaging in mentorship. Both students had personal crises that interfered with this and other minimal levels of achievement. They ultimately resigned from the Program. Success in this area is also apparent from involvement of all students in professional organizations, conference attendance and presentations with their mentors, and research publications where students contribute or lead in the research and publication process.

6. Clinical Practica. Clinical skills are put into practice during 6 required semesters of practicum. Students receive detailed performance evaluations from practicum supervisors at the end of each fall and spring semester with the Student Competency Review Form (Appendix G, pp. 443-464), and are expected to have no ratings of “B” (below expectations) on any competency benchmarks. These evaluations, combined with practicum activity logs and case conference performance, are considered by the ADCT to determine practicum course grades in PSY 767. Students are given additional summative feedback regarding practicum performance in their annual evaluation letter.

During the accreditation period, seven students admitted to the program received ratings of B on Program objectives and aggregate data for all students is presented in Table V5, pp. 775-776. Summary data on the second page of Table V5 indicates that all students were rated above a B for objectives 4, 6, 8, 10, 11, 13, 14, 15, and 16. For Objective 1: Broad Knowledge, three students received a B for failing a program course (summarized in Table V1) with 94% of
students receiving higher ratings, as was the case for Objective 2: Professionalism, objective 3: Reflective Practice/Self Care, and Objective 5: Relationships. For Objective 7: Ethical Legal Standards and Objective 9: Assessment, 96% of students received ratings higher than B, and for Objective 12: Research Evaluation, 98% received ratings of B or higher. Regarding status of students in Table V5, one student in the 2014 cohort who received a B rating is expected to successfully remediate deficiencies, while a student in the 2012 cohort has decided to complete a Master’s degree in the Program and then resign. This student was diagnosed with a learning disability after entering the Program, which has significantly interfered with his progress despite assistance and accommodations from the department and UNLV’s Disability Resource Center. Of the three students in the 2010 cohort who received B ratings, two have resigned from the Program due to personal circumstances and the third is making good progress. The two students in the 2009 cohort who received Bs have similarly resigned from the Program because of poor Program fit. We acknowledge that although our selection procedures are successful in identifying students who are aptly qualified for doctoral level studies in our Program, not all students will complete for a variety of reasons. However, in an effort to ensure all students are successful, the Program faculty make substantial and individualized efforts to assist students who perform below expectations by, for example, providing additional intensive research mentorship and assessment and therapy supervision, extending program deadlines, reducing course loads and therapy caseloads, and making other accommodations as necessary.

Practicum training outcomes are also evaluated via cumulative adequacy of hours, experiences, and competencies. Table V6, pp. 777-778, provides aggregate data for practicum hours obtained by students currently enrolled in the Program, including those who are currently on internship. The mean number of direct hours, other hours, and supervision hours increases for each cohort, starting with 0 hours for those in the 2014 cohort (they have not completed any practicum training) to 717 direct hours, 635 other hours, and 238 supervision hours for those students in the 2011 cohort. Students who entered before 2011 have accrued even more hours, with those five students currently on internship having an average of 1603 direct, 1309 other, and 497 supervision hours. This is well above the Program requirement of 300 direct and 600 supervision/other hours, and above the national mean of 915 assessment/intervention and 434 supervision hours for students applying to internship (2010 CDCUP Membership Survey). Also, the ratio of supervision to direct hours is .35 across all students (Table V6) suggesting they are receiving ample supervision. The ratio is consistent with the CUDCP Expectations for Internship Readiness adopted in January 2011. Moreover, consistent with CUDCP’s expectations, practicum students’ supervision is conducted by clinical psychologists who routinely employ individual and/or group supervision models and intensive supervision methods including direct observation, co-therapy, and videotape review.

Moreover, students also gained experience with diverse populations. Table V7, pp. 777-778, provides client diversity information 7,276 total clients seen by a sample of 30 Program students who applied to internship since the fall of 2004. Student logs indicated that students gained experience with diverse populations: racial/ethnic diversity was represented in 48% of clients and known sexual orientation difference was represented in 5% of clients. Students also worked with individuals with a wide variety of disabilities and mental disorders (60% of clients). Gender diversity is represented with 47% of clients being male, 52% being female and less than 1% being transgender. These practicum experiences meet program objectives and competencies as judged by our students’ ratings on our competency evaluation form, their competitiveness for internship placement and completion rates, as well as their transitions to careers providing
professional psychological services (see following sections on Internship and Distal Outcomes).

7. Internship. We rely on internship match rates and internship site feedback as a final measure of success in meeting proximal objectives and competencies. During the accreditation period, our match rate was 95.0% (38 obtained internships/40 applied) with 90.0% of students matching to APA accredited sites and 92.5% obtaining paid internships. These match rates represent an increase in match rate from our last self-study (88.5%) and compare quite favorably to 2015 national rates where 64.0% of students who registered for the match obtained APA accredited internships, 20.1% matched to non-accredited sites, and 16.0% did not match or withdrew. Also, all program graduates who were accepted to internships during this accreditation period successfully completed them. One student was identified as performing below expectations on internship but remediated short-comings to successfully complete. Internship supervisors generally consider our students to be well-qualified and functioning at a high level for their stage of training (see example internship completion letters in Appendix W, pp. 802-808).

Internship sites varied in terms of setting, clientele, and clinical services with most students placed at VA medical centers, university health science centers, or private hospital clinics, although others were at university counseling centers, consortiums or community based organizations (see Table 8, pp. 67-71). We did achieve our aspiration of placing all students at APA accredited internship sites as 5 students obtained non-APA accredited internships. Three of these entered our program before we were initially accredited in 2005. Of these, two were geographically bound attending local internships designed to meet Nevada Licensure requirements with training closely aligned with APA’s G&P. Two other students who were admitted in 2005 and 2007 completed internships at the Nevada Psychological Association Training consortium, which was designed to conform with NV licensing laws, APPIC membership requirements, and APA accreditation guidelines and principles. Internship information for program graduates gathered from our alumni indicate comparable internship statistics (see Table V8, pp. 67-71). We view these outcomes as indicating our program is meeting its training objectives since our initial accreditation in 2005. Given our track record, we anticipate that in coming years the Program will place all students at APA accredited sites as knowledge about and reputation of the Program continue to grow in professional psychology communities and the Program continues to develop and improve.

Outcomes for Distal goals and objectives

To assess distal goals and outcomes, we rely on feedback from Program graduates collected using a comprehensive alumni survey. Additional information about program graduates is provided in Tables 8 and 9, pp. 67-78, and program graduation and retention rates are provided in Table 10, p. 79. Results of the recent alumni survey suggest we are achieving our distal goals and objectives. We believe these results reflect current outcomes, as the survey response rate was 93.4% (57/61 responded) and responses were collected from April through August of 2014.

Distal Goal 1: Graduates pursue career paths consistent with our Program goal. Outcomes for this goal include Licensure, EPPP mean scores, Scholarship, Employment, and Professional service and organization involvement. Regarding licensure, survey data reported in Table V9, p. 783, indicate 51 of 57 graduates are currently licensed in 17 different states, with the largest number licensed in Nevada (n=25, 46.3%). For those who passed the EPPP, 46 graduates took the exam once, 3 took it twice, 1 took it 3 or more times, and 1 was not required to take the exam. Mean passing scores were 640.4 (range = 510-712) for those who reported this information (n=32). While it is the Program’s goal to provide all graduates with requisite knowledge and training to pass the EPPP in their initial attempt, there are unique factors that
influence examination performance causing some to not attain this standard. For more recent graduates in the 2013 and 2014 cohort, 2 of 15 are currently licensed, with the others completing postdoctoral studies or other supervised post-doctoral experiences (Table 9, pp. 72-78).

Graduates also remain involved in research as indicated in Table V10, p. 784. Of the 15 research/scholarship activities, the largest number of graduates report “Conducting informal program evaluation or outcome assessment” ($n=31$), followed by “Author/Coauthor of published articles in professional journals” ($n=29$), “Author/coauthor poster or paper presentation....” ($n=26$), and “Providing research supervision to undergraduate or graduate students” ($n=21$). Overall, they report presenting 25 papers, publishing 125 manuscripts, and receiving 14 grants since graduating. Other notable activities include authoring/coauthoring books and book chapters, conducting research with diverse samples, and grant submissions.

Regarding employment, alumni survey data presented in Table V11, pp. 785-786, indicate that of those licensed graduates who responded, 41 are employed as clinical psychologists or neuropsychologists in various settings that include intervention, assessment and administrative duties among others. Five identify primary academic settings for their current employment, and one is an Informatics Educator for the VA Central Office. Forty-six graduates are employed full time and six are employed part time. In describing their professional services, the largest percentage is in direct clinical services (41.7%) although graduates also indicate they provide indirect clinical services (13.4%), administration (12.1%) and supervision (9.3%), among other services (see Table V12, p. 787). Graduates also report that they provide services to a variety of clientele, with services provided to clients who are ethnically/culturally diverse, low SES, seriously mentally ill, and physically or developmentally disabled being the highest endorsed descriptors (see Table V13, p. 788). They also commonly utilize psychological tests, provide clinical supervision for graduate students, engage in consultation work, deliver professional and community presentations, and use empirically supported treatments (Table V13). Finally, graduates are involved in professional service and organizations. As Table V14 indicates, 54 are or have been members of professional organizations, 39 have attended regional or national conferences, 40 subscribe to professional journals, and 36 donate time to serve psychological needs of clients (pp. 789-790). Other notable activities include teaching undergraduate or graduate courses in psychology, professional advocacy, and membership on professional organization or licensing boards. These and other outcomes previously discussed suggest that Program graduates meet our competencies including our competency for life-long learning.

As previously stated, we do not expect that all graduates be licensed or meet all of our distal goals, as some will accept academic or other positions where licensure is unnecessary. However, taken together, we view these outcomes as supporting our objective that all graduates pursue career paths consistent with our overarching goal of training scientist-practitioners.

Distal Goal 2: Graduates value scientist-practitioner training and attest they received competent training in our 16 Foundational and Functional objectives. We asked graduates to rate on a 1-6 scale (Low quality – Very high quality) their perceptions that the Program provided high quality teaching and training opportunities consistent with its 16 Program objectives. We consider outcomes of 4 or higher as indicative of meeting our objectives. As Table V15, pp. 793-796 indicates, mean ratings across our 16 objectives ranged from 4.4 to 5.6 (grand mean = 5.2). Mean ratings for 12 objectives were 5 or above. Our two aspirational objectives, 15: Management/Administration and 16: Advocacy, had ratings of 4.6 and 4.4, while two Foundational Competencies, 3: Reflective Practice/Self-Assessment/Self-Care and 8: Interdisciplinary Systems, had ratings of 4.5 and 4.8. Although we consider these outcomes
acceptable, it is our goal to continually improve in preparing our students and we expect improvement in all objectives in coming years for a number of reasons. Generally speaking, given that our sixteen current objectives were implemented in 2010, we understand many program graduates were not fully exposed to programmatic changes geared toward meeting these objectives because they graduated before the objectives were fully implemented (17 graduates from 2008-2010). In fact, no students who have matriculated after 2010 have graduated from the Program. Specific changes implemented that we expect to improve outcomes in future cohorts are: (1) integration of self-care/self-assessment instruction as part of our Practicum I and II class and continued monitoring of this competency on the student competency form (Appendix G, pp. 443-464); and (2) exposure to interdisciplinary practice through practicum sites (e.g., DCFS Mobile Crisis, Desert Willow), participation in UNLV’s Interdisciplinary Practice Day, and at the UNLV PRACTICE clinic described in Section C, where students are exposed to interdisciplinary approaches to diagnosis, treatment planning, assessment and intervention. We also anticipate that as we continue to develop coursework and experiences that address our aspirational objectives, such as our continued development of advocacy topics in our PSY 750: Diversity in Professional Psychology course, improved outcomes will occur in coming years. Graduates also value the Program’s scientist-practitioner training model with regard to their professional identity, professional activities, research knowledge and skills to inform practice, and ability to see or implement research implications of practice (Table V15). Table V16, pp. 794-796, indicates graduates were satisfied with other aspects of training including Teaching, Research/Scholarship, Practica, Program Climate, and Resources. Finally, other information regarding our graduates’ post-doctoral training and subsequent first employment is contained in Tables V17 and V18, pp. 797-801.

We will continue to monitor these objectives to judge our success and implement program changes as necessary, but are however encouraged that graduates judge us as having met these competencies while they attended the Program, which likely reflects that many if not all competencies were addressed since our last accreditation. They also endorse the high quality of their preparation by providing high ratings of 5.4 and 5.4 when asked “Overall, if I had to do it again, I would apply to the UNLV clinical program” and “Overall, I would encourage others to apply to the UNLV clinical program”. All graduates indicated they were either Satisfied (n=6), Highly Satisfied (n=34), or Completely Satisfied (n=18) with the preparation they received in our Program. As our students continue to move further away from graduation, we will monitor their satisfaction with the Program, perceptions of the quality of the training they received, and employment and career paths.

**F1.c. Procedures to Maintain Current Achievements and Make Program Changes**

The procedures described in section F1 that occur as ongoing components of our self-evaluation process have resulted in a number of important Program changes. For example, after our last site visit, discussions were had regarding revisions to the Program objectives and competencies, which were later revised to their current form based on the outcome of these discussions. We also discussed and approved the development of a clinical neuropsychological emphasis based on student and faculty feedback, in order to provide training consistent with developing national standards and given the high demand for this training by our applicants (approximately 20-25% of applicants identify clinical neuropsychology as a primary or secondary interest, see Appendix X, pp. 809-824). Many other changes were made to the Program including admission application deadline and requirements, summer award funding policy, students problems in professional competence policy, and alumni survey development,
among others (see Appendix Y, pp. 825-831, for sample meeting minutes). The Psychology department also underwent a substantial self-evaluation process in 2012-2013 for the University to address Department strengths and areas for improvement. The final report of this two stage process demonstrates the integration of the Program within the Department, College and University, and recommends a number of additional hires for the Program, which contributed to our ability to recently hires new faculty (Appendix Y, pp. 832-869). We also evaluate the Program in other formal ways for which quantitative data is available, including evaluation of practicum sites and classroom teaching, which also resulted in important program changes.

Practicum site and supervisor evaluations. Students provide feedback regarding their practicum supervisor and site at the end of each semester using a standard form (Appendix J, pp. 486-495). Items are rated on a 1 - 5 point scale (1=Strongly Agree to 5=Strongly Disagree). Aggregate ratings completed during the accreditation period are provided in Appendix Z, pp. 871-872 (326 student ratings of 55 supervisors at 38 different sites). Our goal is that no practicum site receive a rating of 4 or 5 on any items, and we focus here on two summative items reflecting quality of the supervisor and training experience: Domain I Item 6 “Overall this is an excellent supervisor and I would recommend him/her to my peers”, and Domain II Item 12 “Overall, this is an excellent training experience and I would recommend it to my peers”. Mean ratings were strong for both items (1.34 and 1.38, respectively). In practice, because the ADCT (Dr. Paul) has frequent contact with practicum students enrolled in PSY 767 or by individual meetings, she is usually notified by students of any problems well before evaluation forms are completed, and initiates remediation plans as needed. Additionally, while scores of 3 are considered acceptable outcomes, the ADCT does initiate contact with students and supervisors when 3s are assigned to determine if remediation is warranted. In cases where concerns cannot be resolved to the satisfaction of the Program, practicum sites are discontinued. Based on this self-evaluation process, since the last APA accreditation, sites were temporarily or permanently dropped for the following reasons: 1 site, lack of appropriate training activities (too limited); and 7 sites, supervision issues including: low student ratings of supervision at two sites; inadequate time devoted to supervision/failure to communicate with Program at one site; and not having a psychologist to supervise students at 4 sites. Our practicum sites have substantially expanded since the last accreditation and we are fortunate to able to be highly selective in the sites at which our students are placed, having more requests for practicum students than we can accommodate. Our goal is to provide the highest quality training opportunities for our students and our self-evaluation process has been effective in ensuring that we meet this goal.

Program course evaluations. Anonymous course evaluations completed by students are reviewed by the Department chair each semester. The course evaluation form is contained in Appendix P (p. 704) and includes 24 items rated on a 1 (Strongly Disagree) to 4 (Strongly Agree) scale. Students may also provide anonymous narrative comments. We focus on item 24 “Overall this is an excellent instructor” for evaluation purposes. Our goal is for all course ratings to be 3.0 or above. When they are not, relevant information such as course content, instruction style, etc., are examined to determine whether modifications are necessary. Aggregate data on item 24 for core courses taught over the accreditation period are provided in Appendix Z, p. 873. Mean data for courses by academic year indicate all courses fall above the 3.0 criteria except two, PSY 705: Developmental Psychology, and PSY 709: Statistics for Psychologists II. Examination of individual course by year indicates some periodically fall below the 3.0 criteria, e.g., PSY 708: Statistics for Psychologists I and PSY 705: Developmental Psychology.

The faculty made a number of changes to address these low ratings. For example, in spring
2012, PSY 705 was discontinued and replaced with PSY 721: Developmental Science, which provides course content more relevant to our students and covers development across the lifespan. Ratings for PSY 721 have consistently been above 3.0. The content of PSY 708 was also modified in fall 2010 to increase coverage of SPSS, adding topics of effect size and power for all the major statistics, and ensuring coverage of multi-factor ANOVA. Course ratings since that time are also consistently above 3.0. Our efforts have been less successful for PSY 709 although we continue to review this course to determine how it might be improved to better meet student needs. For other courses that periodically receive ratings below 3.0, the instructor has integrated feedback from students to make changes that resulted in improved ratings, or in some cases a new instructor has been assigned, e.g., PSY 716: Assessment of Adults.

**F2: Review of Appropriateness of Training Model**

As described in F1, we have engaged in ongoing discussions about the appropriateness of our training model and its fit with institutional, regional, and national standards. Regarding fit with institutional goals, faculty members from our Department have been active participants in campus-wide planning processes that develop and review goals (e.g., Appendix Y, pp. 832-839). These goals have then been incorporated into Department and Program policies. The Program was initiated in 1999 due in part to a shortage of clinical psychologists in southern Nevada. With the region experiencing rapid growth, there continues to be substantial unmet need for mental health services in the area, with Nevada recently ranked 47th among states in psychologists per capita. Our Program is helping to address that concern with many program graduates ultimately practicing in Nevada after graduation with 25 graduates (46.3%) currently licensed in Nevada.

We remain informed about national standards and trends in professional practice by joining CUDCP, making funding available for the DCT and ADCT to attend the annual CUDCP conference, and the ADCT to attend the APTC conference annually and the APPIC conference biannually. As an example, we substantively revised Program objectives and practicum evaluation process following several national training groups’ focus on competencies, not merely on number of client contact hours. Several graduate students also served as APAGS representatives (including a current student) as well as UNLV campus representatives to the Nevada Psychological Association.

Faculty members keep abreast of latest developments in their areas of expertise as part of the ongoing process of updating courses and scholarship. Consistent with this, faculty members belong to and have held offices in professional organizations since our last accreditation, including President, National Academy of Neuropsychology, and President, Society for Sex Therapy Research. Faculty regularly attends professional conferences and Continuing Education for psychologists. The current ADCT (Dr. Paul) has served several terms as president of the Nevada Psychological Association (NPA) and we maintain close contact with NPA in which a number of our graduates have or currently serve in leadership positions. Dr. Paul is also a governor-appointed current member of the Nevada Board of Psychological Examiners. Our Program is thus well-informed about national and state trends in professional psychology.

**Items to be addressed from prior site visit or in subsequent correspondence with APA**

Six items were noted in Domain F from our last self-study (see CoA letter dated 5/1/2009, pp.684-685). The Program was asked to: (1) provide “a narrative response...[with] additional information on its expectations regarding licensure and report on any data obtained regarding licensure”. The CoA understood we had limited data available at that time, given our program was new and had few graduates; (2) “reexamine their goals, objectives, and competencies to provide more concrete definitions of competencies that can be evaluated either through
quantitative or qualitative means” with a narrative response describing “a process to begin this examination of its competencies”; (3) “provide more specific information about these newly defined competencies that are linked to the program goals and provide...the measures (quantitative or qualitative) that it will use to assess student competency in each of those areas it has designated”; (4) “provide the minimal level of achievement for each of the program’s newly defined competencies”; (5) “review the minimum levels of achievement that it has set and discuss how these have been used in making program changes, as needed”; (6) provide “a more robust set of aggregate data” on current students and graduates in this self-study.

**Responses.** Our response letters dated July 7, 2008 (pp. 640ff) and July 23, 2010 (pp. 654ff) responded effectively to the CoA’s request for items 1, 2, 3, and 4 (see CoA letter on 1/5/11, p. 692). As requested by the CoA, we address items 5 and 6 in the current self-study Domains B and F, respectively. The CoA requested results from our new alumni survey (see CoA letter dated 12/15/09, p. 687) and our response on 7/23/10 (pp. 654ff) satisfied this request (see CoA letter dated 1/5/11, p. 692).

**Domain G: Public Disclosure**

In accordance with IR C-20, substantial information about our Program is available to current and prospective students and to the public via our Department and Program websites (http://www.unlv.edu/psychology and http://www.unlv.edu/psychology/graduateprograms/phd-clinical). Information available to these parties includes current accreditation status, Program philosophy and goals/objectives, admission and graduation requirements, resources for students and faculty, administrative policies and procedures, Program Handbook, practicum experiences, and performance and outcome data. The address and telephone number of the APA Commission on Accreditation is also provided. Website information is provided in a way to allow potential applicants to make informed decisions about applying to and entering the Program. Current and prospective students are provided with updated copies of the Program Handbook during Interview Day, at time of matriculation, and/or following substantive changes to this living document. We ask faculty members to distribute Program brochures at conferences they attend and we participate in the APA Guide to Graduate Study in Psychology. The Program Handbook is in Appendix C, pp. 126-151. Department and Program web pages are noted above and locations of other required disclosures are contained in Appendix A, pp. 81-82.

**Items to be addressed from prior site visit or in subsequent correspondence with APA**

No issues were noted for Domain G at our last site visit, but we were instructed to update our website data tables on May 19, 2014 because they were out of compliance with IR C-20 (p. 699). Initial revisions were made. In follow-up correspondence on March 2, 2015, p. 701, additional revisions were requested and these were also made. No other issues were noted.

**Domain H: Relationship with Accrediting Body**

The former DCT (Dr. Kearney) maintained periodic contact with personnel in the APA Office of Accreditation and Consultation and members of the APA CoA. This includes telephone calls and emails to Drs. Zlotlow and Greenwood, Jacob Meyers, and Betsy Horrocks regarding ongoing accreditation issues, timing of the next self-study and site visit for the Program, and IR C-20 compliance. The former DCT also held discussions with Jeff Baker and Celiane Rey-Casserly at CUDCP seminars regarding site visitor training and self-study preparation. The Program is in good standing regarding fee payments associated with accreditation status.

**Items to be addressed from prior site visit or in subsequent correspondence with APA**

No issues were noted for Domain H to be addressed in narrative form or our next self-st
UNLV Site Visit Schedule

**Thursday, December 10**

Site Visit Team Meeting Room: Psychology Department Conference Room (CBC B 425B)

8:30 a.m.  
Daniel N. Allen, DCT (CBC B 425B)

9:30 a.m.  
Christopher Kearney, Department Chair (CBC B 425B)

10:30 a.m.  
Kathryn Hausbeck Korgan, Dean, UNLV Graduate College (FDH 304)

11:30 a.m.  
Meetings with Clinical Students

| Interviewer and Room | Arthur Cantos  
| CBC B 519F | John Klocek  
| CBC B 425B | Elisabeth Ploran  
| CBC B 425A |
| Student Cohort | Cohort 1 | Cohorts 2 & 3 | Cohorts 4 + |

12:30 p.m.  
Lunch and document review (Off site)

2:00 p.m.  
Carl Reiber, Senior Vice Provost, and Rainer Spencer, Vice Provost for Academic Affairs (FDH 703)

3:00 p.m.  
Michelle Paul, Associate DCT (Meet at FDH 703 and tour of UNLV PRACTICE)

4:00 p.m.  
Outside Practicum Supervisors (UNLV PRACTICE)

Materials available for review: Student Files, Practicum Files, Theses, Dissertations, Comprehensive Examinations
**Friday, December 11**

8:30 a.m. Daniel Allen and Michelle Paul, DCT and Associate DCT (CBC B 425B)

9:30 a.m. Christopher Hudgins, Dean of the College of Liberal Arts (CBC B 519)

10:30 a.m. Meetings with Clinical Program Faculty

| Interviewer and Room | Arthur Cantos  
| CBC B 425B | John Klocek  
| CBC B 324 | Elisabeth Ploran  
| CBC B 425A |
|---------------------|----------------|
| 10:30 a.m.          | Russ Hurlburt  
|                     | Stephen Benning  
|                     | Andrew Freeman  
| 11:00 a.m.          | Marta Meana  
|                     | Brad Donohue  
|                     | Noelle Lefforge  
| 11:30 a.m.          | Jason Holland  
|                     | Kristen Culbert  
|                     | Chris Heavey  

12:00 p.m. Lunch and document review (CBC B 425B)

1:00 p.m. Meetings with Associated Program Faculty: Mark Ashcraft, Kimberly Barchard, Andrew Cummings, Sam Chen, David Copeland, Andrew Cummings, Erin Hannon, Rochelle Hines, James Hyman, Jefferson Kinney, Janice McMurray, Murray Millar, Paul Nelson, Colleen Parks, Rachael Robnett, N. Clayton Silver, Joel Snyder (CBC B 425B)

2:00 Tour of Labs, Computer Facilities, & Library with Michelle Pitts and RyAnna Zenisek (Meet at CBC B 425B)

3:00 p.m. Draft Preparation Time

4:00 p.m. Feedback Meeting (CBC B 425B)

Materials available for review: Student Files, Practicum Files, Theses, Dissertations, Comprehensive Examinations