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ABOUT THIS HANDBOOK

This handbook provides an overview of the philosophy, aims, structure, and practicum requirements of the Clinical Psychology programs. For more detailed information about the School of Psychology, the Clinical Program, and Staff, see: http://www.uow.edu.au/health/psych/index.html.

- Emergency Procedures – Northfields Psychology Clinic
- Clinic Handbook – Northfields Psychology Clinic
- Clinical Placement and Supervision Guidelines: S:\Northfields Psychology Clinic\Supervision on the share drive

We live in an age of accelerated development and rapid transition and the same applies to clinical psychology. In the requirements of professional training, components of the program may be replaced or repackaged. It is therefore advisable for students, especially part-time students to retain this handbook until they have completed their degrees so as to ensure that their enrolments in each session are in order and that they accrue the required number of credit points to be awarded the degree. The handbook also includes useful and vital information about a wide range of issues including mutual responsibilities, grievance mechanisms, facilities available, and the accreditation guidelines. Whilst every care has been taken in completing this handbook, there may be inaccuracies, and students are advised to check with staff for the most current information.

PHILOSOPHY OF THE WOLLONGONG CLINICAL PROGRAM

Mission Statement: “To deliver a high quality, research intensive, and clinically-focused professional training program that utilises a unique way of teaching. We encourage our students to reach their full potential as compassionate and expert clinicians, with a life-long commitment to improving the well-being of individuals and their communities. We continually work towards a balance between a supportive and challenging learning environment, and integrity between the values that we teach and what we model to our students.”
FREESTONE CLINICAL PSYCHOLOGY AWARD

John Freestone was instrumental building the reputation of clinical psychology training at the University from its early years and contributed over 20 years of service as a clinical staff member. For many years he was a Director of Northfields Clinic, the University's clinical psychology training clinic. He was also one of the most experienced and respected clinical psychologists in the Illawarra region, where he also served in the area mental health service and as a private practitioner. He was also a long time member of the Illawarra Branch of the Australian Psychological Society, and was Branch Chair for a number of years. He passed away in December 2005 and in recognition of his contribution to Clinical Psychology in the Illawarra the Clinical Program at the University of Wollongong awards one Certificate of Merit a year. The award is made to the top Clinical Psychology student in recognition of being 'an outstanding clinical practitioner during Clinical Psychology Training at the University of Wollongong'. The Australian Psychological Society, Illawarra Branch, sponsors the prize with a book voucher.

Conditions of the award:
The Clinical Advisory Committee of the School of Psychology, University of Wollongong comprising Clinical Psychology Staff, Head of School, and Field Supervisor representatives will nominate one recipient per year at the end of year examination committee meeting. The Clinical Student representatives on the committee will be excluded from all deliberations regarding the award.

The Award will be made at a meeting of the Australian Psychological Society Illawarra at one of its meetings (usually the AGM). If this is not possible, it will be made at the University. All students enrolled in the University of Wollongong Clinical Psychology Program (MPsyc, DPsyc, PhD Clin Psyc) in the current year will be eligible and are automatically considered for the award. No clinical student may win the award more than once.

The Clinical Advisory committee reserves the right to choose the award winner. The principles for determining the award will be based on merit, namely, excellence in coursework and practica. Once the committee determines the winner no further correspondence will be entered into. The committee chairperson will provide data relevant to determining the award (e.g., aggregate data on academic grades, practica field reports, other clinical achievements). Final determination will be by majority vote; if the vote is tied, the Director of Clinical Training will cast a final vote.

Past winners:
2006 Rachael Murrihy
2007 Samantha Clarke
2008 Jane Middleby-Clements
2009 Fiona Davies
2010 Virginia Williams
2011 Christen Elks
2012 Lainie Berry
2013 Brie Turner
2014 Bronwyn Hegarty

APS COLLEGE OF CLINICAL PSYCHOLOGISTS STUDENT PRIZE

The APS College of Clinical Psychologists student prize is intended “to acknowledge PG clinical psychology students who demonstrate high levels of clinical skill, combined with the ability to design and conduct clinically relevant research.” Students in Masters, DPsyc and PhD are eligible. The Clinical Advisory Committee reserves the right to choose the award winner. The principles for determining the award will be based on merit, namely, excellence in coursework, practica and research. Unlike the Freestone Clinical Psychology Award, expertise in research is considered. Once the committee determines the winner, no further correspondence will be entered into. The committee chairperson will provide data relevant to determining the award (e.g., aggregate data on academic grades, practica field reports, research project evaluations and publications). Final determination will be by majority vote; if the vote is tied, the Head of School will cast a final vote. The successful nominee from each university will
receive a certificate, be acknowledged on the APS Clinical College website, and be invited to submit an abstract of their research thesis to be published in the journal, *Clinical Psychologist*.

Past winners:
2009  Danielle Ciaglia  
2010  Benjamin Wilkes  
2011  Phoebe Carter  
2012  Not awarded  
2013  Geoff Lyons  
2014  Rachael Bailey

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**Part A**

**Structure, Management & Facilities**

**STRUCTURE OF THE CLINICAL PROGRAMS**

The School of Psychology offers the following postgraduate programs in clinical psychology:

- Master of Psychology (Clinical): 2 years full-time  
- Doctor of Psychology (Clinical): 3.5 years full-time (discontinued intake 2016)  
- Doctor of Philosophy (Clinical Psychology): 4 years full-time

The Masters program is designed for those seeking training to become a clinical psychologist. The Doctor of Psychology and Philosophy are research degrees which require the completion of an original clinical research thesis. The Doctor of Psychology (DPsyc) degree is for those seeking to become a specialised or senior clinical psychologist with skills in research. The PhD degree is suited to those seeking an academic or research-based clinical psychology career.

The MPsych (Clinical) requires the completion of 96 credit points: 48 credit points of clinical training and 48 credit points of clinical research. The DPsyc (Clinical) requires the completion of 168 credit points. The requirements for the DPsyc include the completion of 56 credit points of clinical training, and 112 credit points of research in the form of a thesis. The PhD (Clinical Psychology) requires completion of 196 credit points: 48 credit points of clinical training and 148 credit points undertaking a research thesis.

Each of the programs consists of three components: theoretical coursework, supervised practica, and a research thesis. However, the weight given to these components varies among the programs with increasing weight given to research in the doctoral programs.

On successful completion of the Clinical Program students become eligible to gain full registration with the Psychology Board of Australia (PBA). Each of the Clinical Programs are also fully accredited as 5th and 6th year programs of study for membership of the Australian Psychological Society, and approved for the purpose of Associate Membership to the APS College of Clinical Psychologists. Full Membership of the College can be achieved after two years of supervised practice following the completion of the degree.

In order to enhance the educative value of the programs, the subjects within the clinical programs are sequenced and time-tabled in a pre-determined way. As a consequence, students may not choose any combination of subjects, but have to follow a fairly fixed schedule during their course. Any variation of enrolment must be

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1 Part-time programs of study require double the enrolment time and a minimum of 24 credit points accrued per annum
discussed and approved by the Director or Deputy Director of Clinical Psychology Training. For the same reasons, only full- and half-time options are available to students. Those who plan to complete their Masters degree in three years have only the following options to choose from: full time in year 1, part time in years 2 and 3 OR, part-time in years 1 and 2, full time in year 3.

In general, students who enrol in the PhD or DPsyc degree enrol as full-time rather than part-time students, and any variation of this needs to be approved by the Director or Deputy Director of Clinical Psychology Training.
ADMISSION REQUIREMENTS AND COURSE RULES

Entry into the Clinical Programs is highly competitive. In addition to academic performance, the selection process involves the appraisal of other criteria including: referees reports, past clinical experience, research accomplishments, and performance at a recruitment interview.

Master of Psychology (Clinical)
The Master of Psychology (Clinical) is a fully accredited professional 5th and 6th year of study for the purpose of membership of the Australian Psychological Society, and Associate Membership of the College of Clinical Psychologists. Entry to the Master of Psychology program will be from an Honours degree in Psychology at a minimum standard of Class II, Division 1 or its equivalent (e.g., Graduate Diploma). Places in this course are limited and will be based on academic merit and personal suitability. The program will involve four sessions of full-time study or their equivalent part-time. Student fees for this program comprise a combination of the Commonwealth Grant Scheme and the students HECS contribution.

Doctor of Philosophy (Clinical Psychology)
This is available to exceptional students, and is particularly suitable for students with PhD scholarships. To qualify for entry candidates must have an Honours Bachelor Degree of at least Class II, Division 1 standard or its equivalent in Psychology. Applicants must submit two referee's reports, a PhD research proposal, and attend a selection interview. Candidates will have to choose research topics that are consistent with key research interests of the School of Psychology or the Illawarra Institute of Mental Health. Candidates enrolled in the Master of Psychology (Clinical) degree may transfer to this degree following a distinction average performance in Year 1, and the approval of their PhD research proposal by the Department Research Committee. The program will normally involve eight academic sessions of full-time study. **It is not possible to downgrade from a DPsych or PhD program to a Masters degree.** The research program will be written up as a thesis and constitutes three-quarters of the course program. Coursework will be graded in the same manner as coursework completed by candidates for the degree of Master of Psychology. The awarding of the degree of Doctor of Philosophy is governed by the University Rules for the award of Doctoral degrees as described elsewhere. The PhD (Clinical Psychology) requires completion of 196 credit points: 48 credit points of clinical training and 148 credit points undertaking a research thesis.

Leave of Absence and re-entry to Training
When personal or other serious circumstances require a break in enrolment, students must apply for a leave of absence. Failure to do so is likely to result in a ‘lapsed’ enrolment status. Previous clinical students whose enrolment has lapsed will need to formally re-apply for clinical training and be re-interviewed using the established selection procedures and will be ranked alongside all other applicants presenting for entry that year. Applicants whose previous incomplete clinical training commenced over 5 years ago will generally be considered for entry into year 1, semester 1. Applicants whose previous incomplete clinical training is more recent may have some advanced standing granted on a case by case basis depending on recency of enrolment and evidence of on-going supervised practical experience in psychology. Students who commenced their training over 5 years ago and who have been granted leave of absence may be required to do additional coursework or practicum to ensure that their training is current and that they satisfy current requirements for the degree.

COURSE SEQUENCE

This sequence is fixed. However, the sequencing and content of subjects may vary from year to year, and up to date details are on the web under timetable/enrolments. This sequence is for Full-Time students. Part-Time Students should contact the Director of Clinical Training to discuss their options. Year 1 of the course must be completed before enrolling in Year 2. Clinical practice requirements are subsumed under the requirements for each subject shell.

All students are expected to attend Case Conference, and students in the PhD (Clinical) should also attend the advertised Departmental Research Colloquia (Wednesday’s 3:00-4:30pm, 41.104).
All students receive 1.5 hours of weekly small group clinical supervision provided by university clinical staff throughout their clinical training. Specialist individual supervision is available to students throughout their candidature in addition to standard individual supervision provided on practica.

NOTE: Due to changes in course codes and subject definitions, there are MULTIPLE sequences for enrolling. ALL STUDENTS WHO COMMENCED 2014 OR EARLIER should consult with the Clinical Director regarding their enrolment. ALL STUDENTS WHO COMMENCED IN 2015 should follow Sequence 2.

SEQUENCE 1

Masters of Psychology (Clinical)

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Note: Details with respect to Neurodevelopment Across the Lifespan will be made available prior to Spring Session
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*Note: Details with respect to Neurodevelopment Across the Lifespan will be made available prior to Spring Session. Further changes to credit point weightings for research may occur within Autumn session and students will be advised by the Director of Clinical Training should they need to vary their enrolment.*
### SEQUENCE 2

#### Masters of Psychology: MPsych (Clin)

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#### Doctor of Psychology: (DPsych – Discontinued: no new enrolments from 2016)

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This research degree requires successful completion of a total of 168 credit points (56 credit points of coursework subjects; 112 credit points of independent but supervised research)

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Total degree = 196 credit points
Clinical training = 48 cp (four semesters comprising six 8cp coursework-practicum subjects)
Research training = 148 (six semesters of 16cp thesis subjects and two semesters of 24cp thesis subjects)
Group supervision and case conference: Case Conference, for all clinical students and staff, is from 12:45pm – 1:45pm on Thursdays in 41.104. Group Supervision for students is held on Thursdays; for Year 1 at 2:00 – 3:30pm; for Year 2 at 3:30 – 5:00pm, location to TBA. Part-time students must attend Case conference and Group supervision for 4 sessions (terms) during their candidature (e.g., 4 sessions in 4 years for PGs with a half-time commitment).

Autumn (Session 1)
Clinical Training Year 1
2016 is the first year of combined MPP/Clinical tutorials for PSYP911 and PSYP912. You will be allocated a tutorial group (A or B) prior to orientation. Please note carefully which tutorial you must attend.

*PSYP911 (or GHMC951) Child and Adult Assessment and Psychopathology (6cp)
  Tutorial Group A: Tuesdays 9am – 12.30pm, 41.103
  Tutorial Group B: Tuesdays 1:30pm – 5pm, 41.103

*PSYP912 (or GHMC952) Principles of Psychotherapy (8cp)
  Tutorial Group A: Tuesdays 1:30pm – 5pm, 41.104
  Tutorial Group B: Tuesdays 9am – 12:30pm, 41.104

PSYP901 Research Project A Part 1 (8cps) Week 1 to Week 6, Thursday 4:00pm to 5:30pm, 41.103

Clinical Training Year 2

*GHMC955 Health and Wellbeing (8cp) Thursday 9am – 12:30pm 41.107

*PSYP903 Research Project B (16cp). Week 1 to Week 6, Thursday 2:30pm to 3:30pm, 41.103

Spring (Session 2)
Clinical training Year 1
GHMC953 Neuropsychology and Neuropsychiatric Disorders (8cp) Thursdays 9am – 12.30pm, 41.104

*GHMC954 Cognitive Behavioural therapies (8cp) Tuesday 9am - 5pm, 41.104

*PSYP902 Research Project A, Part 2 (8cp), Alternate Thursdays 4:00pm to 5:30pm from Week 1, 41.103

Clinical Training Year 2

*GHMC956 Special Groups and Methods (8cp) Thursdays 9am - 12:30pm, 41.107

*PSYP904 Research Project B, Part 2 (16cp), Alternate Thursdays 2:30pm to 3:30pm from Week 1, 41.103

Subjects marked with a hash (#) accord students the flexibility of single or double-session enrolment options. As most subjects have coursework AND practicum requirements attached to their completion, a double-session option facilitates completion of the subject in a timely fashion. Failure to complete a subject on time may lead to your having to re-enrol and pay additional fees. Double-session options are available for the following subjects:

- GHMC954, Spring 2013 –Autumn 2014. [This option is recommended for all Year I students]
- GHMC956, Spring 2013 –Autumn 2014 (double session). [This option is recommended for Year 2 students who are unable/unlikely to complete coursework or practicum requirements by Dec 2013].
- PSYP902, Spring 2013- Autumn 2014 (double session).
- PSYP904, Autumn 2013 - Spring 2013 (double session).
- PSYP904, Spring 2013- Autumn 2014 (double session).
CASE CONFERENCE

All Clinical Students enrolled in coursework are required to attend case conference. Case Conference occurs on Thursdays at 12.45pm all year during semester. Students should expect to present at case conference at least once during their second year of training. It is also possible, but not expected, for students in their first year of training to present.

Aims
Case conferences are common in teaching hospitals and similar healthcare settings and exposure to this process is an important aspect of clinical training. The typical aim is to provide a forum for peer review, support, and education. The focus is on cases that might be particularly challenging and/or interesting. The presenter’s performance will not be graded in any manner. The case conference should be an educative and supportive experience for all participants. Combining the work associated with the Case Conference presentation and required Case Study is an efficient and recommended strategy.

Procedure
One presenter will be allocated per week and the session will be chaired by Dr Rebecca Sng or a substitute member of the clinical faculty. Presentations will be provided by clinical students and staff. Those who are planning to present in a particular session should attend the first case conference of each session where expectations and tips for presentations will be described in detail.

Student presenters should:
1. Discuss their case in individual supervision beforehand.
2. They should then identify and approach a university staff member who can act as the consultant on the case.
3. The case should be discussed with the staff member in advance of the presentation to ensure adequate preparation.
4. The oral presentation of the case should last no more than 20 minutes (to ensure that 25 minutes is available for discussion). The chairperson will interrupt presentations that exceed this limit.
5. A summary of highly relevant information can be provided to all attending but this is not compulsory. Presenters are encouraged to prepare a PowerPoint presentation and use video clips relevant to the case. The privacy of the patient should be respected and their identity should be obscured, where possible, by the use of pseudonyms etc.

Following the presentation, the student should:
1. Identify a staff member who can provide advice on the implementation of feedback arising from the case conference (this can be the same person as originally consulted on the case).
2. The recommendations should be implemented and the student should prepare a brief update on the outcome of the case for presentation later in the session.

The scientist-practitioner approach should be adhered to in presenting cases, including hypothesis formulation and testing. Clinical observations are best understood within a model, and evidence to support observations and the approach taken are encouraged where appropriate. Examples of evidence include psychometric test results, behavioural observations, and self-report data (e.g., actual patient statements).

The case presented at case conference can be used to meet the case study submission requirements of training (see following section). This written version of the case should be submitted to Chris Allan before the end of week 13 in the session that the case conference presentation occurs in. This case will be ungraded but must be completed to a satisfactory standard to meet practicum requirements. Other case studies submitted as part of the assessment requirements of specific subjects may be graded (see subject descriptions for details).

Articulation with Practica and Course Requirements
All clinical program staff and students are expected to attend and students must attend a satisfactory number of case conferences (80%) as part of their practicum requirements.

Students should record case conference attendance within their clinical logs. Those doing the 'old' practicum subjects will require case conference participation in order to pass practica 1A, 1B, 2A, 2B. When submitting FPNBs be sure to include documentation of attendance at case conference.
CLINICAL CASE STUDIES

All students are required to submit four clinical case studies (> 2000 words) during their training. Questions about this process should be directed to Associate Prof Lynne Magor-Blatch. This is a mandatory accreditation requirement of the APS College of Clinical Psychologists. You can prepare and count up to three cases as part of the assessment requirements of the course subjects (e.g., GHMC953, GHMC955, GHMC956).

The remaining case should be prepared as part of your practicum experience. The case that you present at case conference in the second year of training can also be submitted as your fourth clinical case study. Your case study should include evidence that you have searched the empirical and theoretical literature relevant to the problem that your patient presents with. You should present a case that involves treatment (not just assessment) and you should pay particular attention to measuring the effects of any intervention provided. Specifically, you will be required to report on the clinically meaningful change using strategies such as reliable and clinically significant change indices. The assessment of reliable and clinically significant change will be covered in the research subjects and will help with your preparation. The journal “Clinical Case Studies” provides excellent examples of how you should prepare and format your case study (see http://ccs.sagepub.com/). You should use similar section headings as outlined in that journal and listed below. Check examples from the journal to get further clarity about what should be covered in each section.

1. Theoretical and Research Basis for Treatment
2. Case Introduction
3. Presenting Complaints
4. History
5. Assessment
6. Case Conceptualization (this is where the clinician’s thinking and treatment selection come to the forefront)
7. Course of Treatment and Assessment of Progress
8. Complicating Factors (including medical management)
9. Access and Barriers to Care (if any)
10. Follow-Up (how and how long)
11. Treatment Implications of the Case
12. Recommendations

Maximum length (including all pages, tables, and figures) should be no longer than 35 double-spaced pages total. The following examples and references can be used as a starting point:


SELF CARE AND STUDENT WELFARE

It is important that clinical students begin in their training the habits that nurture their own mental health if they are to have long and productive careers. The program takes this very seriously and is keen to nurture the well-being of students, as well as their academic performance.

Clinical work is by its nature stressful, and the University recognises that students may need special consideration in progressing through their program. It is important to seek the advice of the Clinical Programs Director in these cases. Dr Nadia Crittenden is an associate staff member who has made herself available for a voluntary self-care group to encourage management of stress. You are free to contact Nadia via nadiac@uow.edu.au for individual discussions with a non-teaching staff members. You are also welcome to speak to your individual supervisor or the Deputy Director of Clinical Training. It is important to consult on these issues early as they are extremely common and wide variety of resources and supports are available.

Students should be aware that free student counselling services are available on campus. There also exists a mentoring service for new psychologists, contact Mark Donovan for details via mdonovan@uow.edu.au

WHO TO SEE FOR QUERIES ABOUT THE CLINICAL PROGRAM

During the years you are completing your program you will have a range of questions regarding the various components of your course. In order to spread the administrative load you should endeavour to contact the following people in the following order:

- Concerns about a specific subject: Subject Coordinator -> Deputy Director -> Director
- Concerns about research: Thesis supervisor -> Coordinator of Research Subjects -> Director (Masters Projects)/PG Coordinator (DPsyc and PhD theses)
- Concerns about practica: Field supervisor -> Director of Northfields Clinic -> Director
- General administrative concerns: Deputy Director -> Director

The Director of Clinical Psychology Training is Dr Mitch Byrne
The Deputy Director is Dr Rebecca Sng
The Director of Northfields Clinic is Mark Donovan
The Coordinator of Research Dr Leonie Miller
The Postgraduate Coordinator for research aspects of the DPsyc and PhD (e.g., funding, presentations, thesis requirements) - Professor Frank Deane
RESPONSIBILITIES AND GRIEVANCE MECHANISMS

1. Mutual respect and politeness is expected of all academic staff, clinical supervisors and students, together with no discrimination on the basis of factors such as age, gender, race, religion, sexual orientation and other such characteristics.

2. A professional standard of time keeping, that is adhering to agreed teaching, supervision and client session appointment times, is required. No research meetings are to be scheduled during class time.

3. All professional staff and students involved in the clinical programs are expected to adhere strictly to the standards of ethical behaviour published by the respective Boards and Professional groups to which they belong. This should apply to professional-client and staff-student interactions as well as to interactions between professionals both on campus and during placements. Unethical conduct is treated with the seriousness it deserves, and if the breaches are grave, students may be reported to the Registration Board or other appropriate bodies for further action. Students may also be asked to repeat subjects/placements or to defer or discontinue the course if these violations are serious enough to merit such action. Copies of the codes of conduct published by the Australian Psychological Society and the Registration Board are available at the Northfields Clinic.

4. All assessment requirements for clinical training need to be completed to a satisfactory level of competence (a minimum of a pass grade or better – consult the relevant subject description for details on the required standard for each assessment task). Failure to pass a required assessment task may result in failure of the entire subject or the withholding of the subject grade until the required level of competence, skill, or knowledge is demonstrated. The need to complete additional assessment tasks will be determined by the subject coordinator in the first instance. Any disputes about the completion of additional assessment should be referred to the Director of Clinical Psychology training as soon as possible. If a student fails a subject and there are no grounds for special consideration or the completion of negotiated additional tasks, they may repeat the subject once. Failing a required component of the training twice in the absence of exceptional circumstances that explain the poor level of performance will result in exclusion from the clinical training programs and termination of the student’s candidature.

5. The department has developed guidelines for authorship with regard to publication of research conducted under supervision. Staff and students are expected to follow these guidelines when publishing research work. As a general rule, research conducted by students and prepared for publication within six months of course completion is published with the student as the first author and the research supervisor as the second author.

6. Students with a grievance have recourse to a chain of appeal that begins with the person(s) directly involved, and progresses to the subject Coordinator, the Clinical Director, and the Head of School. Students should also refer to the Faculty of Health and Behavioural Sciences Grievance policy for further guidance:


7. Attendance at scheduled classes, supervision and practica is compulsory. Absences need to be documented in writing with supporting evidence (e.g., medical certificate) and brought to the attention of the lecturer or supervisor concerned. Non-attendance at class for more than two weeks in any subject should be brought to the attention of the Director of Clinical Training. Non-attendance at scheduled classes will typically require the completion of alternative academic work to ensure that acquisition of the relevant competencies is achieved. Attendance is compulsory at all case conferences across the academic year and records will be kept in order to credit supervision hours for this time. PhD students not involved in clinical placements or coursework in a particular year may be excused from case conference.

8. Students with a grievance about the mark assigned to them should speak first to the marker responsible and, if the issue remains unresolved, to the subject coordinator. If appropriate, differences may be resolved by appointing a second marker to re-assess the piece of work.
9. Students should be aware that poor performance or unsatisfactory progress on practica (fail or borderline grade) may necessitate the repetition of the practica. This will entail the withholding of the subject grade for the subject for which the practicum is a component. If the student fails the practicum after repeating it, or obtains unsatisfactory grades (borderline or fail grades) for two practica placements, the student's enrolment may be terminated.

10. Students should be aware that the University imposes time limits on obtaining academic qualifications. If a student does not complete their degree within the recommended time frame they may be asked to show cause as to why they should be allowed to continue. It is possible for a student's enrolment to be terminated.
FACILITIES

The following is a brief guide only, to orient you to some of the main facilities available.

UNIVERSITY COMPUTING FACILITIES
The University has a large number of open computer labs for student use in the IT Resource Centre. Upon enrolment, all students will obtain a UoW student user account to give them access to electronic email and www access.

SCHOOL OF PSYCHOLOGY COMPUTING
The School of Psychology is linked to a server and you will need to obtain a password from ITS (Building 17 Level 1) in order to use the computer facilities. The School supports SPSS, MS Word, Excel, PowerPoint, and web browser software. Other programs may be available on request. The main access points are:
- Building 17 level 1 open access lab, generally for undergraduates- computers and printers
- Northfields clinic - computers and printer for clinical students and researchers

Postgraduates requiring keys or pin numbers to the computer lab rooms will need to complete a key requisition form available from the School of Psychology Test Library support staff (Room 41.106). The form must be signed by the Head of School.

CLINICAL STUDENT EMAIL LIST
Email is the primary form of communication between staff and students. In order to facilitate communication between clinical students, we have established a clinical student email list. Your email address established by the University will automatically be used and you will be enrolled onto the email list. If you have an alternative email address, please see Information Technology Services (Building 17) to set up an alias. It is your responsibility to ensure this address is kept up to date, to continue receiving email messages throughout the year. If you are not enrolled in any clinical coursework subjects (e.g., research thesis only) you will not be on this email list so it will need to be manually entered.

For computer support please contact ITS support staff (contact x3000) or email its@uow.edu.au

SCHOOL OF PSYCHOLOGY WEB SITE
The School of Psychology has a web site which is regularly updated with announcements and information, for example, scholarship opportunities, timetable changes, workshop and conference announcements and social events. It is wise to check it on a regular basis: www.uow.edu.au/health/psyc/index.html.

Test Library
The Test Library is an essential resource for the staff and students of the School of Psychology. The Test Library contains psychological tests, books, student theses, DVDs. Borrowing times may vary depending on the nature of the materials. The test library catalogue is available through the School of Psychology website.

1. Communication: If you wish to email us, could you please send your email to psyc-testlibrary@uow.edu.au
2. Location and Opening Hours: The Test Library is located in Building 41, Room 106 and is open Monday to Friday from 10.30am – 12.30pm and 2.00pm – 3.30pm.
3. Borrowing Tests: Please ensure you book your kit with the Test Library, you can do this by sending us an email or popping in during opening hours. Borrowing time is generally 2 days. Before borrowing, please ensure you are going to be available to return your kit on its due date. Please do not leave markings of any sort in the manuals i.e., no pencil marks. Any post it notes are to be removed before you return your kit. Thank you.
4. Test Forms: Forms are always in the kit when you borrow it. We replace the forms when you return the kit.
5. Returning Kits: Test Library resources should be borrowed and returned during opening hours only.
6. Computer Usage: You may access the PC’s in the 4th Year Computer Lab (41.101) for very quick jobs whilst you are attending classes in Building 41. Please note, this is a quiet working area for the Faculty Honours students and all noise must be kept to a minimum. Please use the Northfields Clinic computers for your “everyday” work.
7. Photocopier: You may use the printer / photocopier in 41.101 and have been given an
allowance of 500 pages. Your Dept ID / Password is your student number. You will be prompted to enter this whenever you wish to print / photocopy.

NORTHFIELDS CLINIC
In addition to professional consulting rooms, the clinic has a number of other facilities. Frequently used tests are available as are audio and video facilities. A fully functioning kitchen, lounge and work area is available for clinical students. Clinical students have a dedicated computer room with a networked printer. Students are allowed a quota of copies per session. The clinic has designated office space, consisting of desks, bookshelves, lockers and limited shared filing cabinets for all clinical students. See the Professional Support Staff, Cassandra Farrar who will assist you. From time to time, students may take advantage of the facilities in the Early Start Building (Building 21).
Part B RESEARCH

Dr Leonie Miller is in charge of the research subjects for Masters of Clinical Psychology. General inquiries regarding research may be directed to her: leoniem@uow.edu.au. The current head of Higher Degree Research is Prof Frank Deane: fdeane@uow.edu.au

All clinical program students are required to complete a research thesis. The research topic should be relevant to the theory and/or practice of clinical psychology. Including study participants drawn from a clinical population is recommended but not mandatory and the final product should be of a standard that permits submission for publication to a scholarly journal.

Doctorate and PhD Research Subjects

Doctorate and PhD candidates undertake a research thesis. Enrolment is in THES916 or THES924 research subjects.

These subjects aim to equip students with high level research skills. The student is involved in all aspects of an independent research program including a comprehensive review and critique of the current literature, and the designing, conduction, and reporting of one or more empirical studies. The topic should be approved by the Head of Academic Unit. Together with other research components within the degree, this subject culminates in a thesis that constitutes a significant contribution to research or scholarship. Students work independently but under regular supervision. Depending on the level of progress, students may be required to attend lectures on topics associated with research methodology or analyses, submit a detailed research proposal, or to submit aspects of their work for review. Continuation of candidature will be conditional on satisfactory progress.

Guidelines for Clinical Research Projects

The research project component of the course MUST satisfy both the APAC and Clinical College standards with respect to the design and activity associated with the research project. These requirements are outlined below.

Assessments

For UOW, the research project takes the form of a literature review and an article suitable for submission to a peer-reviewed international scientific journal. The total project report will be approximately 13000 words (8000 word lit review and proposal and approx. 5000 word research article).

For students intending to upgrade to DPsych the research component must be of a high quality and reflect the fact that the student will be enrolling in a degree at the doctoral level. If you are considering upgrading to DPsych from a Masters degree at a later date, please flag this with your supervisor early to ensure your project is suitable for expansion.

As students have completed a major research project previously, they should be demonstrating a greater level of independence than at the fourth year level.

Research competencies

The research project should provide opportunities for the student to gain skills, and demonstrate competencies, in the review, integration, critical interpretation and evaluation of psychology. Specifically the project should be designed so that students can acquire the following skills:

- Analysis of scientific literature and critical appraisal
- Synthesis of literature into a framed argument
- Formulation of a research question
- Design of an appropriate rigorous scientific method for investigation of the question
- Collection and analysis of data, including data management
- Interpretation of findings
- Reporting of the project in the form of a high quality manuscript
Research scope and outcomes

The topic of research must be of direct relevance to clinical psychology. The following should be observed:

- The scientific merit of the research should typically be of a standard publishable in a peer-reviewed journal (or would be publishable with some additional work e.g., larger numbers within a clinical rather than an analogue group)

Research Design

Acceptable designs include:

- An independent empirical project
- Use of pooled data to source individual subjects
- Single-case studies **must have a true experimental design** (a case series can be subjected to repeated observations to demonstrate valid, statistically and clinically reliable effects)
- Feasibility studies with a sufficiently large sample size (e.g., N=20)

Research Data

In the case or archival or shared data, the research project must be structured and executed in a manner that ensures the above research competencies are satisfied for each student and that the research outcomes are commensurate with those prescribed for independent projects.

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**RESEARCH SUPERVISION**

All students should start to consider their research topics and potential supervisors in the first session of the clinical program. All academic staff of the School of Psychology can provide research supervision to clinical program students. Supervision by staff from other Schools within the Faculty of Health and Behavioural Sciences or external to the university will need to be reviewed and approved by the Director of Clinical Training. All supervisors are bound by the code of practice for research supervisors. Details are available online at: [www.uow.edu.au/handbook/codesofprac/cop_supervision.html](http://www.uow.edu.au/handbook/codesofprac/cop_supervision.html)

For Masters students there is usually one supervisor but a second co-supervisor may on occasion be involved. For Doctoral research students there is an expectation that you will have a primary supervisor and a co-supervisor. In practice, how these supervision arrangements function, varies from project to project with co-supervisors sometimes being very involved or minimally involved. Generally, co-supervisors will be sufficiently up to speed with your project that they can provide support in the absence of the primary supervisor. In all cases at least one supervisor must be an academic member of staff. For Doctoral students at least one supervisor should hold doctoral qualifications.

Supervision contact will usually average one hour per week across each session. Students are expected to meet with their supervisor at a minimum rate of once per fortnight during session. Students are required to report the specific number of meetings with supervisors at the end of each session, and if they fall below the minimum rate, the reasons for this will be investigated by the co-ordinator of the PSYP research subjects.

Completing the research requirements of the course can be stressful and conflicts and disagreements do occasionally arise in the supervision relationship. If a student has a problem with their supervision experience they should take the following steps:

1. Raise the issue directly with their supervisor and attempt to negotiate a solution.
2. If the problem remains unresolved approach either the Research Subjects Coordinator or the Director of Clinical programs for guidance.
3. If there is still no satisfactory resolution the matter should be referred to the Head of School.
RESEARCH WEEK POSTERS AND PRESENTATIONS

Research week presentations are expected of all postgraduates who are currently undertaking, or about to undertake research. All PhD students must present to the School of Psychology (usually during Research week) once per year. Applicants who apply to transfer from the Master of Clinical Psychology to the DPsyc present their initial proposal (see following page) before commencing. Once admitted, DPsyc students should make an oral presentation (typically in Session 2 of Year 3 of the program) at one of the Departmental forums (Colloquia or Research Week). Students admitted directly into the DPsyc are required to provide a research presentation every year of their enrolment. Presentations are monitored by the PG Coordinator and a candidate’s failure to present will prevent thesis submission.

Students undertaking research will be required to present a research poster during research week or at an alternative time negotiated with the director of post-graduate research and approved by the Head of School. Details will be provided within class and supervisors should be consulted about presentation issues. Presentation of your research is a requirement of the School. Repeated failure to report research findings will be noted on your record.

EXAMINATION OF DOCTORAL THESES

Examination of Doctoral Theses (PhD and DPsyc) is conducted through the University Postgraduate Office. The supervisor(s) will discuss potential examiners with the candidate, and will draw up a list of suitable examiners. Theses are sent to examiners external to the University. Any queries should be directed to The PG Coordinator or the Office of Research.

The procedures for examination are documented fully by the Office of Research, University of Wollongong. Please consult: http://www.uow.edu.au/research

EXAMINATION OF MASTER OF PSYCHOLOGY THESES

Master of Psychology Research Projects completed as part of PSYP904 will be submitted in Week 9 of Session 2 (see subject description for details of the submission requirements). They will be marked by two independent internal examiners (not the supervisor) nominated by the Research Coordinator. After reading the theses independently the examiners will then meet to agree on a mark. If substantial disagreement remains, a third examiner will be nominated, and the conflict resolved by consensus of opinion or by averaging the closest marks. The student receives feedback on the thesis in week 11 and has until week 13 to address the reviewers’ comments and re-submit it to their supervisor. The grade is not declared on the student record until the supervisor informs the subject coordinator that revisions have been made to their satisfaction. The thesis is required to meet a high minimum standard (usually the equivalent of a Distinction grade) in order to be passed. Failure to meet the required standard will usually require re-submission of the thesis following feedback from the independent markers and this can potentially extend the students training candidature. Full guidelines regarding the required standards and the marking process will be provided by the research coordinator at the commencement of each academic year.

TRANSFER FROM MASTERS TO PhD CLINICAL

Students in the Master of Psychology program are eligible to transfer to the 4 year PhD in Psychology (Clinical) program, although this is usually only available to students on scholarships and exceptional students. Transfers are considered toward the end of the first year of full-time study (or its part-time equivalent). Usually, transfers are made in the second year of full-time study (or its part-time equivalent) and come into effect session 1 of year 2. Students who transfer are given credit for completed coursework that is common to both programs of study, usually up to 72 credit points.

Students who have an interest in transferring should inform their supervisors of this in the early stages of project development. This is to allow a Masters project to be developed that has the potential to be expanded into a PhD
research project. This can happen in several ways, for example, through development of a Masters scope project which serves as an initial study in a multi-study proposal or, development of a large scope project which can be reduced to serve as a Masters project should the student not be successful in their application for transfer.

A successful transfer to the PhD involves a 2-step process:

**Step 1: Assessment by the Clinical Advisory Committee**
- Interested applicants should apply in writing to the Director of the Clinical programs by October 1st of the first year (or its part-time equivalent) of the Masters degree.
- Students wishing to transfer to a PhD program must have performed at a high level (an average grade of Distinction or above) in the Master of Clinical Psychology program. (Attach an academic transcript).
- The candidate should demonstrate potential for research at the doctoral level. As part of such an assessment, the student is required to submit a written proposal (2500 words plus references). Proposals that exceed the 2500 word limit will be ineligible for consideration. Students submit electronic copies of proposals to the nominated administrative support person (currently Monica Ferrari – mferrari@uow.edu.au – see table below for due dates).
- In accordance with APAC standards and Clinical College guidelines, the research should be directly relevant to clinical psychology.
- The applicant's suitability for the transfer will be assessed by a panel that includes UoW staff members on the Clinical Advisory Committee and primary research supervisors of the applicants. The panel will be chaired by the Director of Clinical Training.
- The panel will make the final recommendations. The chair will write to each student about outcomes and, when appropriate, make suggestions about how the proposal could be improved.

**Step 2. Assessment of the student’s proposal by the Research Proposal Review Committee**
- Successful applicants at Step 1 will have to make an oral presentation and resubmit the research proposal for approval by the Research Proposal Review Committee.
- University and School guidelines governing the preparation and evaluation of Higher Degree Research proposals are established and will be followed (see: http://www.uow.edu.au/content/groups/public/@web/@raid/documents/doc/uow060982.pdf). Proposals are generally expected to be no more than 15 pages in length.
- The Director of Clinical training will select a date for presentations and direct students to relevant guidelines for the oral and written submissions.
- Written submissions must be in accordance with specified guidelines and be submitted in electronic form to the administrative support person (currently Monica Ferrari – mferrari@uow.edu.au) at least two weeks before the oral presentation (see table below for due dates).
- The written proposal will be evaluated by a committee determined by prevailing Faculty/ School guidelines and will usually include:
  - Head of School of Psychology (Chair)
  - Director Clinical Psychology Training, Postgraduate coordinator, Research supervisor(s), the thesis examination committee (TEC) representative
  - Other nominated members by the Chair (e.g., a statistical expert)
  - Observer: the postgraduate student representative.
- The PG Coordinator will provide students written feedback about the Committee’s determination, and, if appropriate, the student will be transferred to the PhD degree.
- For all research matters, PhD students will come under the purview of the Postgraduate Coordinator. The PG coordinator will arrange any subsequent formal talks that these students need to give to the School and will also allocate research funding support.
- Once a transfer has taken effect, a re-transfer back to the Masters program is permitted only in exceptional circumstances and can result in completion of additional course work, payment of fees for all courses required in the Masters program and delays in graduation.
Transfers Schedule for 2016

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<tr>
<th>Date*</th>
<th>Activity</th>
<th>Relevant Guidelines</th>
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<tr>
<td>October 3rd</td>
<td>First submission by PGs to Director of Clinical Psychology Training and admin support person (Monica Ferrari). Submissions should include e-copies of academic transcript and research proposal.</td>
<td>Clinical Handbook</td>
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<tr>
<td>October 10th</td>
<td>Evaluation of Submission 1 by Clinical Advisory Committee or designated representatives.</td>
<td>Clinical Handbook</td>
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<tr>
<td>October 14th</td>
<td>PGs receive feedback about outcome from Director of Clinical Psychology Training and qualitative feedback about proposals from their research supervisor.</td>
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<tr>
<td>October 28th</td>
<td>PGs successful at Step 1 submit e-copies of revised proposals (Submission 2) to PG Coordinator and admin support person (Monica Ferrari).</td>
<td>Web</td>
</tr>
<tr>
<td>Weeks of November 3rd through 14th</td>
<td>Oral presentations by PGs. Evaluation of Submission 2 by Thesis Proposal Review Committee</td>
<td>Web</td>
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<tr>
<td>Week of November 17th</td>
<td>PGs receive feedback from PG coordinator. Successful PGs are transferred to the DPsych with effect from Session 1.</td>
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* Dates approximate and relate to the nearest working day or commencing week

SOME GUIDELINES FOR DOCTORATE (DPsyc) RESEARCH THESIS

Please note that the D.Psych program has been discontinued and only students who have commenced in 2015 or earlier will be able to complete the DPsych program.

The research component of the DPsyc and PhD programs is managed by the Postgraduate Coordinator (Prof Frank Deane).

The Research Services Office (RSO) coordinates examination of doctoral theses and guidelines for candidates and examiners are available from the RSO (see www.uow.edu.au/research/rsc/index.html). All Doctorate students should ensure that they make themselves extremely familiar with the Higher Degree Research (HDR) rules and guidelines.

Key points to note include:

- Assessment is by two examiners, external to the University of Wollongong.
- The time taken for marking doctoral theses varies widely around a mean of about 4-5 months.
- The examiners are informed of the total workload that the thesis constitutes as a proportion of workload for the entire degree.
- Copies of scientific publications that have resulted from your doctoral research may be enclosed with your thesis for review by the examiners.
- In exceptional circumstances approval may be granted to a candidate to submit the thesis before completion of the normal duration of the degree (3-5 years full-time).
- The candidate must be enrolled when the thesis is submitted. Hence, full-time candidates should plan to submit before the end of session 1 in year 4. Occasionally, extensions of 2-3 months are granted so that candidates expected to complete by December/June are granted extensions until March 31st/September 30th of the following session. Extensions beyond this deadline are rarely entertained. Full-time candidates who are unsure of meeting these deadlines for submission must seriously consider downgrading to part-time involvement. Candidates do not have to be enrolled during the period spanning thesis marking or resubmission.

Other useful guidelines:

Bear in mind there are no firm rules about writing a thesis, however the examiners are asked if the thesis demonstrates an adequate understanding of the field of research, that the candidates has designed, undertaken
and reported on an investigation to a satisfactory level, that the thesis is presented in a manner and level appropriate for the field, and that the literary standard is adequate. The thesis must represent the outcome of work of a sufficiently high standard. Your thesis must demonstrate that you have gained a good knowledge of a research area, developed an appropriate research question from your reading, and designed and conducted an acceptable study to address that question. The structure and organisation of content within the thesis is determined on a case by case basis, with the above principles in mind. Ask your research supervisors for additional information. Most of these would fall in the range of 20,000 to 30,000 words in length. Variations from this range are possible and your research supervisor(s) will provide guidance on this.

FORMAT FOR THESIS WRITING

The American Psychological Association’s guidelines about thesis format for text and referencing will normally apply. Any variation from this should be discussed with your supervisor.

Oral Presentation: All doctoral candidates must make an oral presentation to the school Colloquia or during Research Week. Presentations are monitored by the PG Coordinator and a candidate's failure to present will prevent thesis submission.

References for further information:
2. Examiner's report for the degree of Doctor of Psychology (Clinical).  
3. Information for the Guidance of Examiners for the degree of Doctor of Psychology (Clinical).  

CLINICAL RESEARCH OPPORTUNITIES  
ILLAWARRA INSTITUTE FOR MENTAL HEALTH (iiMH)

The Illawarra Institute for Mental Health is a strategic alliance designed to facilitate research and training between the university and health service providers. Refer to www.uow.edu.au/health/iimh/ for a full description of the structure and function of iiMH. The iiMH has a range of ongoing research projects funded through national competitive grants and research consultancies. These often provide students with access to a wide range of public sector and non-government mental health and drug and alcohol treatment providers.

Broad interests of staff in the School of Psychology:
The following list highlights the interests of faculty affiliated with iiMH and the School of Psychology which relate broadly to the area of clinical psychology.

The research interests and activities of participating staff members follow:

Dr Mitch Byrne's research interests include various topics in the enhancement of treatment adherence, Autism Spectrum Disorders, enhancement of patient-nurse interactions, Psychological First Aid and interventions for trauma, and various topics within forensic psychology.

Associate Professor Peter Caputi's research program deals with managing information systems, in particular, examining the psychological factors that contribute to adoption and acceptance of information technology. He is also interested in psychological measurement and modelling of psychological data.

Dr Trevor Crowe has interests in the role of therapeutic alliance in therapy and group cohesion in group therapy. He has studied factors related to improving the effectiveness of training and coaching in the mental health and drug and alcohol workforce. This extends to the role of supervision in clinical practice and the importance of supervision alliance.

Associate Professor Brett Deacon: http://www.uw-anxietylab.com/major-research-areas.html
Professor Frank Deane has broad interests in applied clinical research aimed at evaluating and improving mental health and drug and alcohol services. He is interested in the concept of “recovery” from mental illness and overlaps with the construct in the treatment of substance use disorders. He has interests in the role of therapeutic homework in treatment and help-seeking for mental health problems.

Professor Brin Grenyer’s research program focuses on the treatment of chronic and complex psychological problems including personality disorders, chronic depression, aggression and violence, early attachment relationships, chronic lifestyle diseases, and substance dependence. Research methods include quantitative-clinical psychiatric and biomedical assessments, individual and group psychotherapy and structured training, and longitudinal population studies.

Dr Peter Kelly has primary interests in mental health and substance abuse assessment and treatment. In these treatment settings he has been targeting prevention of cancer, cardiovascular disease and diabetes. His research includes integration of evidence based approaches into routine care, outcome evaluation & benchmarking particularly in Non-government Organisations (NGOs).

Dr Lynne Magor-Blatch has a number of research interests, working in qualitative and quantitative design, and program evaluation. She has a long history in the substance use field, and is particularly interested in intergenerational issues of substance use and the effects on families; forensic populations; drug doping in sport; and alcohol use harms to others, including family violence.

Dr Leonie Miller’s main area of research is in cognitive experimental psychology, specifically short-term memory and language processes. She also publishes and supervises in the areas of foster care, personality, and organisational psychology.

Dr Rebecca Sng works mainly in the clinical field with children and families. Her research interests include trauma, attachment disruption and foster care in children as well as mindfulness based cognitive behaviour therapy with school students.

Professor Bob Barry’s research is focused on three inter-locking themes: clarification of arousal/activation (the energetic aspects of psychophysiology and behaviour), brain function (particularly EEG coherence measures) in normal and AD/HD populations, and basic understanding of the connections between EEG brain states and ERP markers of stimulus processing.

Dr Emma Barkus has interests related to cannabis, ecstasy (MDMA), risk factors for psychosis in the general population, experiences people have after using recreational drugs, effects of psychosis proneness and recreational cannabis use on cognitive function, schizophrenia and other psychoses, early psychosis, use of technology in research, health and well being of adolescents and children, neuropsychology, neuroscience, functional brain imaging.

Dr Amy Chan is primarily concerned with counterfactual thinking and its development. In particular, she is interested in how such thought may be related to children’s creative problem solving and adults’ decision to undergo cancer re-screening. Other ongoing research interests include: factors contributing to human concept learning, and the role of cognitive factors in the perceptual processing of visual information.

Associate Professor Adam Clarke seeks to understand the brain dysfunction of children with attention deficit hyperactivity disorder. This includes investigations of the underlying dysfunctions in different subtypes of the disorder, sex differences, tracking the developmental time-course, and evaluating medication effects.

Associate Professor Stuart Johnstone is interested in the development of inhibitory processes (i.e., suppressing actions; protecting your focus from interference) in healthy children and adults, and children and adults with Attention-deficit Hyperactivity Disorder (ADHD). Other interests include alternative treatments for ADHD, such as cognitive and neurocognitive training.

Dr Simone Favelle investigates the different kinds of visual information used in the perception and recognition of objects, faces and facial expressions. In particular she is interested in the roles of individual differences, eye gaze, motion and viewing angle on face and expression recognition. Other research interests include the spectrum of
face recognition performance (prosopagnosia through to super-recognisers) and recognising genuine vs posed expressions.

**Associate Professor Steve Palmisano**’s research program deals with issues involved in the perception and control of self-motion. More specifically, he is interested in visually induced illusions of self-motion, visually induced motion sickness, the accuracy of visual glideslope perception during aircraft landing, and the role of visual attention in railway signal detection.

**Associate Professor Steven Roodenrys** is interested in the mechanisms underlying verbal short-term memory and its relation to long-term memory and working memory, and their development in atypical groups (e.g., dyslexics, ADHD) as well as the effect of aging on these processes. He is also interested in the possible benefits of training cognitive processes such as memory and attention in groups showing impairment in these processes, and in unimpaired individuals.

**Associate Professor Nadia Solowij** focuses on investigating cognitive functioning, particularly memory and attention, in long term heavy cannabis users and people with schizophrenia using neuropsychological tests, electrophysiology and functional magnetic resonance imaging (fMRI) of the brain. Drug effects on brain structure and the acute effects of different cannabinoids are also of primary interest, as is the neuroscience and psychopharmacology of substance use and psychosis, and neurocognitive effects of alcohol and Ecstasy.

**Dr Peter Leeson** has broad interests in social psychology and has been involved in the longitudinal Wollongong Youth Study which has followed high school students over 5 years with a view to predicting their mental health and well-being.

**Professor Stuart Thomas** works closely with the police on areas relating to their encounters involving people experiencing mental illness, intellectual disability and with vulnerable youth. His current research focusses on the resolution of psychiatric crisis incidents, police use of force, procedural justice and social distance.

**CLINICAL STAFF PUBLICATIONS**

Full details of staff publications are available through the University Research Information System: https://ris.uow.edu.au/ris_public/WebObjects/RISPublic.woa/wa/Publications/publications?group=50