

PSYC*7994, Course Outline: Fall 2021, Winter 2022

General Information

Course Title: PSYC*7994 Cognitive Behaviour Therapy Practicum

Class Schedule: Wednesdays 8:30am – 11:20am

Location: Mackinnon 306

Course Description:

This course is intended to foster clinical psychology graduate student training in cognitive behaviour therapy (CBT) and will include didactic and experiential components. Students will gain competency with the theory and practice of CBT for child and adolescent mental health challenges, gain facility with treatment manuals and undertake at least two ongoing therapy cases with a CBT approach.

Credit Weight: 1.0

Academic Department (or campus): Psychology

Semester Offering: Fall 2021, Winter 2022

Instructor Information

Instructor Name: Beverly Walpole, Ph.D., C.Psych.

Instructor Email: bwalpole@uoguelph.ca

Office location and office hours: office hours by appointment only

GTA Information

Soeun Lee: soeun@uoguelph.ca

Sarah Boyle: sboyle02@uoguelph.ca

Course Content

Specific Learning Outcomes:

Upon successful completion of the course, students will be able to:

1. Explain cognitive and behavioural conceptual models pertinent to children and adolescents and the research that supports them.
2. Explain commonly used techniques and procedures of CBT.
3. Develop case formulations concerning child and adolescent clients using a cognitive-behavioural framework.

4. Demonstrate proficiency in the implementation of behavioral techniques such as behavioral activation, activity scheduling, graded task assignment, graded exposure, and relaxation training.
5. Demonstrate proficiency in the implementation of cognitive techniques such as thought records and other means to challenge distorted thinking.
6. Demonstrate novice competency in the treatment of child and adolescent clients using cognitive-behaviour therapy by working with 1-2 clients over the academic year. This includes: collaborative empiricism, psychoeducation, session structuring, challenging negative thinking, self-instruction, Socratic method, homework assignment and therapeutic alliance in video-recorded sessions.
7. Demonstrate competency in assessing and monitoring treatment process and progress.
8. Demonstrate skill in effective written and verbal communication.
9. Identify key ethical considerations in implementing cognitive-behaviour therapy and psychotherapy more generally with children and adolescents.
10. Demonstrate professional and ethical behavior when working with children and adolescents in a therapeutic context.
11. Engage in ways to prepare for and benefit most from clinical supervision (both individual and group supervision).
12. Self-reflect on own professional development (e.g., clinical goal setting and monitoring, exploration of strengths and areas for further development, self-awareness).

The above learning outcomes align with CCAP competencies as outlined below.

| CCAP Competencies & Facets | Level* | Specific LO |
|--|--|---|
| Professionalism & Interpersonal Relationships <ol style="list-style-type: none"> 1. Demonstrates knowledge of self (e.g., motivation, culture, resources, values, personal biases, factors that may influence the professional relationship such as limits) 2. Demonstrates knowledge of others, including the macro- (e.g., work, national norms, etc.) and micro-environments (e.g., personal differences, family, culture, gender differences, etc.) in which people function 3. Engages in a professional level and style of conduct and deportment (e.g., organization, timeliness, dress and hygiene, practicing within one's competence) 4. Establishes and maintains trust and respect in the professional relationship (e.g., follows-through on commitments, proactively seeks out supervision when necessary) 5. Establishes and maintains professional relationships with clients from all populations served and appropriate interdisciplinary relationships with colleagues and learners 6. Engages in reflective practice and adjusts personal approach, as needed, in professional contexts (e.g., self-care, communicating with colleagues, seeking supervision or feedback) | <p>Basic</p> <p>Basic</p> <p>Advanced</p> <p>Advanced</p> <p>Advanced</p> <p>Basic</p> | <p>10,11,12</p> <p>3,6,10,11,12</p> <p>10,12</p> <p>11,12</p> <p>10,11,12</p> <p>10,11,12</p> |

| | | |
|--|--|---|
| <p>Assessment & Evaluation</p> <ol style="list-style-type: none"> 1. Demonstrates knowledge of human populations served and human development 2. Demonstrates knowledge of and selects appropriate psychological assessment methods, based on psychometric properties and evidence base, across referral and practice areas (e.g., cognitive, personality, diagnostic, strengths) 3. Appropriately applies assessment methods (standardized measures and clinical interviewing), consistent with case formulation, and scores and interprets assessment data 4. Demonstrates knowledge of diagnostic systems including DSM-5 and others (e.g., ICD-10) and effective skills in making a diagnosis when appropriate 5. Demonstrates knowledge of and ability to conceptualize cases with consideration to intra-, inter-personal, and systemic contexts, along with strengths 6. Demonstrates skill in effective written and verbal communication (e.g., results from assessment, diagnostic feedback) 7. Demonstrates skill in developing recommendations and action plan based on assessment findings | <p>Intermediate</p> <p>Intermediate</p> <p>Intermediate</p> <p>Intermediate</p> <p>Basic</p> <p>Basic</p> <p>Basic</p> | <p>3,6,10</p> <p>7</p> <p>7</p> <p>3</p> <p>3</p> <p>8</p> <p>3</p> |
| <p>Intervention & Consultation</p> <ol style="list-style-type: none"> 1. Demonstrates knowledge of major evidenced-based intervention theories and approaches with individuals and systems (e.g., children, families, groups, organizations). This includes demonstrating respect for the positive aspects of all major intervention approaches, with an openness to varied viewpoints and approaches 2. Demonstrates knowledge of the relation between assessment and intervention 3. Effectively selects, plans, implements, evaluates, and modifies interventions; this includes awareness of when to refer and/or terminate the intervention and the use of evidence-based measures 4. Demonstrates skills in documentation, and both written and verbal communication, regarding intervention process, progress, and termination 5. Assesses and evaluates intervention progress and modifies the intervention as indicated including but not limited to use of evidence-based measures | <p>Intermediate</p> <p>Intermediate</p> <p>Basic</p> <p>Intermediate</p> <p>Intermediate</p> | <p>1,2</p> <p>7</p> <p>4,5,6,7</p> <p>8</p> <p>7</p> |
| <p>Ethics & Standards</p> <ol style="list-style-type: none"> 1. Demonstrates knowledge of major ethical principles, issues, and dilemmas, and common professional issues relevant to the practice of psychology 2. Demonstrates knowledge of standards and codes of professional conduct | <p>Advanced</p> <p>Advanced</p> | <p>9,10</p> <p>9,10</p> |

| | | |
|---|--------------|-------|
| 3. Demonstrates knowledge of jurisprudence and legislation in relation to psychology | Intermediate | 9,10 |
| 4. Proactively Identifies and conceptualizes potential and actual ethical issues and dilemmas, using key ethical codes (i.e., CPA, TCPS), relevant jurisprudence and legislation, and CPA ethical decision-making process in resolving professional and ethical issues. | Intermediate | 9,10 |
| 5. Implements ethical concepts, codes of conduct, legislation, and consultation into professional practice. | Intermediate | 10 |
| Supervision | | |
| 1. Demonstrates knowledge of the multiple roles, responsibilities, and acquisition of competencies in supervision (i.e., of supervisor and supervisee) | Intermediate | 11 |
| 2. Demonstrates knowledge of models, theories, and techniques of supervision, including evaluation methods within and of the supervisory process | Basic | 11 |
| 3. Demonstrates knowledge of the ethical, legal, and contextual issues of supervision (including both supervisor and supervisee) | Basic | 11 |
| 4. Identifies supervision goals and learning objectives, and tracks progress in achieving these goals | Basic | 11,12 |
| 5. Engages effectively in the supervision process (individual, peer, and group supervision) as supervisee (e.g., prepared for supervision, openness to supervision, participation in collaborative supervision process, aware of limits, fosters open and participatory climate). | Intermediate | 11 |
| 6. Supervises learners effectively through individual, peer, and/or group supervision processes (e.g., openness to supervision, prepared, aware of limits, fosters open and participatory climate) | Basic | 11 |

*This is the level of competency expected by the end of the course.

Lecture Content:

The above learning outcomes will be met through the structure of the course. Specifically, students will meet weekly by videoconference for didactic components and group clinical supervision over the Fall and Winter semesters. Once oriented to CBT, students will meet individually with their clients. All sessions are to take place virtually through videoconference platform. Students will normally have approximately 1 hour a week (per client) of therapy delivery associated with the course.

Students will meet with their instructor and teaching assistant every week (alternating weeks) for individual supervision to discuss their video-taped therapy sessions and session notes and to plan for ongoing therapy.

Course Assignments and Tests:

| Assignment or Test | Due Date | Contribution to Final Mark (%) | Learning Outcomes Assessed |
|--|--|--------------------------------|----------------------------|
| Clinical competence | Weekly (informal) End of Fall, end of Winter (formal) | 30% | 1-6, 7-9 |
| Participation | Weekly | 20% | 1, 2, 7, 9 |
| Client documentation (eg, session/contact notes, initial treatment plan, final report) | Weekly | 20% | 3 |
| Tape viewing and supervision notes | Weekly | 15% | 9 |
| Clinical presentations | TBD | 15% | 1, 2, 4, 5 |

Additional Notes (if required):

1. Video Evaluation of Clinical Competencies: All client sessions will be video-taped and evaluated for clinical competency and treatment adherence by the instructor or teaching assistant. Feedback will be provided on a regular basis during individual and group supervision. More formalized evaluations will occur at mid-term (December) and end of term (April).
2. Participation: Students are expected to come to class prepared by completing assigned readings for the discussion of CBT theory and practice (when applicable). Students are also expected to come prepared to supervision to discuss their case(s).
 - a) Presentations/Discussion: Presentations and discussions will be interspersed throughout the course and will cover a range of key topics related to evidence-based assessment, case conceptualization, and treatment. Additional topics such as cultural competence, ethics, and CPO guidelines will consistently be incorporated into our discussions.
 - b) Workshops: Workshops are hands-on activities on specific topics or therapy techniques. Workshops will involve discussion, modelling of skills, and practice role-plays. These are meant to prepare you for your therapy sessions with actual clients by offering an opportunity to familiarize yourself with the specific approaches you will be using.
3. Client Documentation: Students are expected to hone their skills writing concise, accurate and useful session notes to document their clinical work. Documentation will also include assessment, conceptualization, and treatment planning reports as well as final reports (when applicable).
4. Tape Viewing Log and Supervision Notes: Students are expected to come prepared to supervision to discuss their own growth and development as therapists with additional notes outlining their personal process with delivering CBT, reactions to clients, inferences about clients that do not belong in session notes and general

success and challenges as novice therapists. To accomplish this, students will regularly watch their session recordings and identify discussion points (e.g., areas of strength/challenge, questions, reactions).

5. Presentations: During the Fall and Winter semesters, students will present a cbt skill to the class and link the skill (e.g., building an exposure hierarchy) to the student's individual case. Students are expected to prepare this presentation with a thoughtful and unique lens (i.e., not just a start-to-finish recounting of the course of treatment).

Course Resources

Required Texts: None.

Recommended Texts:

Chorpita, B. F. (2006). *Modular Cognitive-Behavioral Therapy For Childhood Anxiety Disorders (Guides To Individualized Evidence-Based Treatment)*. PracticeWise.

Chorpita, B. F., & Weisz, J. R. (2009). *MATCH-ADTC: Modular approach to therapy for children with anxiety, depression, trauma, or conduct problems*. PracticeWise

Beck, J.S., & Beck, A.T. (2020). *Cognitive Behavior Therapy, Beyond the Basics. Third Edition*. Guilford Press: New York.

Graham, Philip (2006). *Cognitive Behaviour Therapy for Children and Families*. Cambridge University Press: UK.

Websites/resources:

[Anxiety Canada website](#)

Course Policies

Grading Policies

This course is not graded but rather a SAT/UNSAT grade will be assigned at the end of the Winter semester. Students will receive regular written and oral feedback about their performance in the course with respect to competencies that need to be demonstrated. All components of the course are to be completed with sufficient competency to earn a SAT or satisfactory rating.

[Graduate Grade interpretation](#)

University Policies

*******DISCLAIMER*******

Please note that the ongoing COVID-19 pandemic may necessitate a revision of the format of course offerings, changes in classroom protocols, and academic schedules. Any such changes will be announced via CourseLink and/or class email. This includes on-campus scheduling during the semester, mid-terms and final examination schedules. All University-wide decisions will be posted on the [COVID-19 website](#) and circulated by email.

Illness

Medical notes will not normally be required for singular instances of academic consideration, although students may be required to provide supporting documentation for multiple missed assessments or when involving a large part of a course (e.g.. final exam or major assignment).

For information on current safety protocols, follow these links:

[Return to Campuses - Preparing for Your Safe Return](#)

[Return to Campuses - Classroom Spaces](#)

Please note, these guidelines may be updated as required in response to evolving University, Public Health or government directives

Academic Consideration

When you find yourself unable to meet an in-course requirement because of illness or compassionate reasons, please advise the course instructor in writing, with your name, id#, and e-mail contact. See the academic calendar for information on regulations and procedures for

Academic Consideration:

[Grounds for Academic Consideration](#)

Academic Misconduct

The University of Guelph is committed to upholding the highest standards of academic integrity and it is the responsibility of all members of the University community, faculty, staff, and students to be aware of what constitutes academic misconduct and to do as much as possible to prevent academic offences from occurring.

University of Guelph students have the responsibility of abiding by the University's policy on

academic misconduct regardless of their location of study; faculty, staff and students have the responsibility of supporting an environment that discourages misconduct. Students need to remain aware that instructors have access to and the right to use electronic and other means of detection. Please note: Whether or not a student intended to commit academic misconduct is not relevant for a finding of guilt. Hurried or careless submission of assignments does not excuse students from responsibility for verifying the academic integrity of their work before submitting it. Students who are in any doubt as to whether an action on their part could be construed as an academic offence should consult with a faculty member or faculty advisor.

The Academic Misconduct Policy is detailed in the [Graduate Calendar](#)

Accessibility

The University of Guelph is committed to creating a barrier-free environment. Providing services for students is a shared responsibility among students, faculty and administrators. This relationship is based on respect of individual rights, the dignity of the individual and the University community's shared commitment to an open and supportive learning environment. Students requiring service or accommodation, whether due to an identified, ongoing disability or a short-term disability should contact [Student Accessibility Services](#) as soon as possible.

For more information, contact SAS at 519-824-4120 ext. 54335 or email accessibility@uoguelph.ca or the [Student Accessibility Services Website](#)

Course Evaluation Information

Please refer to the [Course and Instructor Evaluation Website](#)