

**PRE 865: Psychoeducational Clinic 2:
Assessment, Consultation, Intervention**
Monday 9:30-12:00, 622 JRP

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Course Objectives

1. To understand and identify individual differences in educational and psychological functioning using a wide range of formal and informal assessment tools;
2. To diagnose individual differences according to major taxonomies including IDEA and DSM-IV-TR;
3. To convey the results of assessments and diagnoses to parents, children, adolescents, adults, school staff, and other professionals, both orally and in written reports;
4. To formulate appropriate recommendations and to locate resources for assisting students with individual differences and their families, at home and at school;
5. To provide consultation to parents for the implementation of instructional and behavioral recommendations and to foster advocacy skills for parents, children, adolescents and adults;
6. To utilize technology such as audio and videotaping, email, the internet, Blackboard, test scoring software, and computer office software for communication, research, assessment, diagnosis, intervention planning, and evaluation.

Kansas School Psychology Licensing Standards Met Through PRE 865

- 1. Assessment:** The school psychologist uses varied models and methods of assessment as part of a systematic process to collect data and other information, translate assessment results into empirically based decisions about service delivery, and evaluate the outcomes of services.
- 2. Consultation:** The school psychologist has knowledge of behavioral, mental health, collaborative, and/or other consultation models and methods and of the application to particular situations. The school psychologist collaborates and consults effectively with others in planning and decision-making processes at the individual, group, and system levels.

3. Intervention (cognitive & academic): The school psychologist, in collaboration with others, develops appropriate cognitive and academic goals for students with different abilities, disabilities, strengths, and needs, implements intervention to achieve those goals, and evaluates the effectiveness of intervention.

4. Intervention (behavior, personality, adaptive & social): The school psychologist, in collaboration with others, develops appropriate behavioral, affective, adaptive, and social goals for students of varying abilities, disabilities, strengths, and needs, implements interventions to achieve those goals, and evaluates the effectiveness of intervention.

5. Diversity: The school psychologist demonstrates the sensitivity and skills needed to work with individuals of diverse characteristics and to implement strategies selected based on individual characteristics, strengths, and needs.

6. School Knowledge: The school psychologist has knowledge of general education, special education, and other educational and related services and understands schools and other settings as systems. The school psychologist works with individuals and groups to facilitate policies and practices that create and maintain safe, supportive, and effective learning environments for children and others

7. Prevention: The school psychologist provides or contributes to prevention and intervention programs that promote the mental health and physical well-being of students.

8. Parents, Families & Community: The school psychologist works effectively with families, educators, and others in the community to promote and provide comprehensive services to children and families.

11. Information Management: The school psychologist accesses, evaluates, and utilizes information sources and technology in ways that safeguard or enhance the quality of services.

Text and Required Materials

1. American Psychiatric Association. (2000). Desk Reference to the Diagnostic Criteria from DSM-IV-TR. Washington, D.C.: Author.
2. Additional readings will be placed on electronic reserves.
3. 3 to 4 VHS videotapes for taping your own clinic sessions

Academic Misconduct

Please refer to the following website for the University's policy on academic misconduct:

<http://www.ku.edu/~unigov/usrr.html#art2sect6>

Students with Disabilities

Any student in this course who has a disability that prevents the fullest expression of his/her abilities should contact the professor personally as soon as possible so we can discuss the procedures for making appropriate accommodations necessary to complete the course requirements. In such cases the student and professor follow the procedures established by the Student Assistance Center (22 Strong Hall, 864-4064).

General Course Policies

Course documents and announcements will all be posted on Blackboard, which you will be expected to check regularly. You must be available for 6-8 hours of direct client contact each week in addition to class meeting times. Direct client contact should consist of approximately 3-4 hours of face-to-face client work. The additional 3-4 hours per week are to be used for test scoring, report writing, parent and teacher consultation, research, classroom observation, and attendance at school meetings. A minimum of 100 hours is expected for the spring semester. Accruing fewer than the minimum hours may result in a grade reduction of one third of a grade.

This is a mastery-oriented practicum course. You are expected to attend all class meetings and your scheduled clinic hours. Your grade will depend on both class and clinic participation. If you must miss a class, be sure to notify the instructor or GTA *before* the missed class in order to arrange to make up missed material and assignments. If you must miss a clinic session, please notify the instructor, GTA or student office assistant as soon as possible so that arrangements can be made to contact your clients or provide substitute tutoring.

You will be required to turn in several videotaped sessions for review during the semester. Each videotape you turn in must be accompanied by a self-critique of your performance. In-class tape reviews will be held periodically. You are expected to routinely videotape your sessions for your own review, for supervision, and so that you will be able to select the sessions you would like to share in class.

General Clinic and Client Guidelines are posted on Blackboard.

Grading

Class attendance, preparation, participation, and assignments	25%
Clinical requirements	75%
a. Client assessments, including psychoeducational reports;	
b. Performance in any aspect of client work, including observations and audio or video tapes;	
c. Maintenance of complete, accurate and timely client files according to legal and ethical standards, including instructional and treatment plans, progress notes, client correspondence, and any required documentation.	

Performance in each area will be rated on a 1-5 scale. Consideration will be given for extraordinary performance, special client issues, ethical problems, number of clinic hours, etc.

Grades will be assigned as follows:

- A = 90 – 100% of total points, average rating of 4.5 and above
- A- = 85 – 89% of total points, average rating of 4.25 – 4.49
- B+ = 80 – 84% of total points, average rating of 4.00 – 4.24
- B = 75 – 79% of total points, average rating of 3.75 – 3.99
- B- = 70 – 74% of total points, average rating of 3.5 – 3.74
- C = < 70% of total points, average rating below 3.5

Attendance and participation: Class participation will be rated for each class based on preparation and participation in class discussion and activities. Weekly logs are due each Friday. Unexcused absences or coming late will reduce your grade.

Assignments: Reading assignments are to be completed each week before class. Additional homework, including practice tests, may be assigned in class. Weekly logs are due each Friday.

Test protocols: You may be required to hand in scored test protocols or data collection forms for the tests and assessment methods taught in class. These will be announced in class.

Late assignments: One point will be deducted from the 5-point quality rating for each day that an assignment is late. Assignments turned in more than 4 days after the due date will earn a 0.

Clinical requirements: The three parts of the clinical requirements are weighted equally. Assessments are graded on the basis of selection of instruments for the referral question; accurate, standardized administration; and quality and comprehensiveness of reports. The first draft of each report is graded. Performance is based on observations and tape reviews rated by the instructor and/or the GTA. File audits include documentation, progress notes, assessment protocols, treatment plans, treatment reviews, and instructional plans. Files are audited at least monthly and more often if necessary. The file checklist should be used to help maintain complete and accurate files.