Clinical Competency Examination

All Psy.D. candidates are required to sit for and pass a clinical competency examination. The examination evaluates the student's knowledge and skills in assessment, diagnosis, case conceptualization and treatment formulation, treatment delivery, and evaluation of treatment efficacy. As part of the determination of a student’s preparedness for the predoctoral internship, it is a prerequisite to internship eligibility. In the event of failure, the examination may be retaken up to three times. A fourth failure results in automatic dismissal from the Psy.D. program.

General Description

The Clinical Competency Examination (CCE) is designed to assure that students have achieved the level of clinical knowledge, clinical skills, and ethical knowledge expected of a student ready to begin internship. The CCE requires the student to prepare a written and an oral case presentation by which he/she demonstrates competence in assessing, treating, and evaluating the outcome of an intervention case. All students in the Psy.D. program are required to demonstrate competence in specified clinical knowledge and skills through the CCE as a component of establishing internship eligibility. It is the student's responsibility to identify a case from his/her practicum training for the CCE.

Eligibility

The CCE evaluation criteria are designed to assess clinical competence at a level appropriate to students who have completed required course work and practica, and are presenting as ready for internship. To be eligible to sit for the CCE, students must have successfully completed the assessment and therapy course sequences, six (6) credits of intervention electives, and four (4) 4-month semesters of Clinical Practicum and Intensive Supervision. This training sequence is delineated in the Psy.D. Program in Clinical Psychology Handbook. At the discretion of the Director of Clinical Training, the eligibility requirement of six credits of intervention electives may be waived for students in the Clinical Neuropsychology and Forensic concentrations. Students in these concentrations may therefore petition the Director of Clinical Training for waiver of this requirement. In addition, the student must be in good standing (i.e., not on academic or other probation, leave of absence). In exceptional circumstances, however, students who have completed all matriculation requirements excluding the predoctoral internship may request permission to sit for the CCE while on a leave of absence.
Psy.D.
CCE ELIGIBILITY CHECKLIST
(ENTRY YEAR 2013 or later)

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
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<tbody>
<tr>
<td>Psy 1401</td>
<td>History and Systems</td>
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<tr>
<td>Psy 1403</td>
<td>Adult Psychopathology</td>
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<tr>
<td>Psy 1405</td>
<td>Developmental: Child &amp; Adolescent</td>
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<td>Psy 1407</td>
<td>Developmental: Adult &amp; Older Adult</td>
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<tr>
<td>Psy 1408</td>
<td>Child &amp; Adolescent Psychopathology</td>
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<tr>
<td>Psy 1409</td>
<td>Professional Issues &amp; Ethics</td>
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<tr>
<td>Psy 1502</td>
<td>Assessment: Interviewing</td>
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<tr>
<td>Psy 1503</td>
<td>Assessment of Child and Adolescent Intelligence w/Lab</td>
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<td>Psy 1505</td>
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<td>Psy 1610</td>
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<td>Psy 2511</td>
<td>Projective Personality Assessment</td>
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<td>Psy 2603</td>
<td>Systems/Family Therapy I</td>
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<tr>
<td>Psy 2604</td>
<td>Child and Adolescent Intervention</td>
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<tr>
<td>Psy 2606</td>
<td>Case Conceptualization</td>
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6 **CREDITS** - Intervention Electives* (list each course) **SEE NOTES BELOW**

<table>
<thead>
<tr>
<th>Course Code</th>
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<tbody>
<tr>
<td>Psy 46</td>
<td>Intervention Elective____________________________</td>
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<tr>
<td>Psy 46</td>
<td>Intervention Elective____________________________</td>
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*After 4 semesters of completed practicum, one intervention elective must be completed and you must be enrolled in the second during the semester you sit for the CCE.
If you have completed 6 semesters of practicum, you must have completed both intervention electives prior to sitting for the CCE.

*Waived for Forensic and Neuropsychology Students for CCE only. But, must be completed for internship eligibility.

**Practicum & Supervision**

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<tr>
<th>Course Code</th>
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<tr>
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<tr>
<td>Psy 2701</td>
<td>Practicum I</td>
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<tr>
<td>Psy 2703</td>
<td>Supervision I</td>
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<td>Psy 2702</td>
<td>Practicum II</td>
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<tr>
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<td>Supervision II</td>
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<td>Summer Clinical Practicum</td>
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<td>Summer Clinical Supervision</td>
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<tr>
<td>Psy 3701</td>
<td>Practicum III</td>
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<td>Psy 3703</td>
<td>Supervision III</td>
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<tr>
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<td>Practicum IV</td>
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<td>Psy 3704</td>
<td>Supervision IV</td>
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<td>Psy 370A</td>
<td>Summer Clinical Practicum</td>
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<tr>
<td>Psy 370B</td>
<td>Summer Clinical Practicum</td>
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Psy.D.
CCE ELIGIBILITY CHECKLIST
(ENTRY YEAR 2006-2012)

Psy 1401  History and Systems
Psy 1403  Adult Psychopathology
Psy 1405  Developmental: Child & Adolescent
Psy 1407  Developmental: Adult & Older Adult
Psy 1408  Child & Adolescent Psychopathology
Psy 1409  Professional Issues & Ethics
Psy 1501  Assessment: Intelligence Testing
Psy 1502  Assessment: Interviewing
Psy 1605  Diversity in Assessment and Intervention
Psy 1610  Adult Intervention I
Psy 2507  Objective Personality Assessment
Psy 2509  Behavioral Assessment
Psy 2511  Projective Personality Assessment
Psy 2603  Systems/Family Therapy I
Psy 2604  Child and Adolescent Intervention
Psy 2606  Case Conceptualization

6 CREDITS - Intervention Electives* (list each course) SEE NOTES BELOW

Psy 46  Intervention Elective
Psy 46  Intervention Elective

* After 4 semesters of completed practicum, one intervention elective must be completed and you must be enrolled in the second during the semester you sit for the CCE.
If you have completed 6 semesters of practicum, you must have completed both intervention electives prior to sitting for the CCE.

*Waived for Forensic and Neuropsychology Students for CCE only. But, must be completed for internship eligibility.

Practicum & Supervision

Psy 1703  Pre-Practicum
Psy 2701  Practicum I
Psy 2703  Supervision I
Psy 2702  Practicum II
Psy 2704  Supervision II
Psy 270A  Summer Clinical Practicum
Psy 270B  Summer Clinical Supervision
Psy 3701  Practicum III
Psy 3703  Supervision III
Psy 3702  Practicum IV
Psy 3704  Supervision IV
Psy 370A  Summer Clinical Practicum
Psy 370B  Summer Clinical Practicum
Psy.D

CCE ELIGIBILITY CHECKLIST
(ENTRY YEAR 2005 or Earlier)

Psy 1403 Adult Psychopathology
Psy 1405 Developmental: Child & Adolescent
Psy 1408 Child & Adolescent Psychopathology
Psy 1409 Professional Issues & Ethics
Psy 1411 Conceptual Foundations
Psy 1501 Assessment: Intelligence Testing
Psy 1502 Assessment: Interviewing
Psy 1605 Diversity in Assessment and Interviewing
Psy 1610 Adult Intervention I  (OR 2603 AND 2604)
Psy 2507 Objective Personality Assessment
Psy 2509 Behavioral Assessment
Psy 2511 Projective Personality Assessment
Psy 2603 Systems/Family Therapy I
Psy 2604 Child and Adolescent Intervention
Psy 2606 Case Conceptualization

6 CREDITS - Intervention Electives*  (list each course) SEE NOTES BELOW

Psy 46  Intervention Elective
Psy 46  Intervention Elective

* After 4 semesters of completed practicum, one intervention must be completed and you must be enrolled in the second one during the semester you sit for the CCE.
If you have completed 6 semesters of practicum, you must have completed both intervention electives prior to sitting for the CCE.

*Waived for Forensic and Neuropsychology Students for CCE only. But, must be completed for internship eligibility.

<table>
<thead>
<tr>
<th>Semester/Year</th>
<th>Practicum &amp; Supervision</th>
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<tr>
<td>Psy 1703</td>
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In addition, students have found it helpful to prepare themselves further by (1) attending the CCEs of classmates in order to familiarize themselves with the process and (2) reviewing the sample written CCE documents available in the Clinical Training Office and in the Library Research and Information Technology Center. All CCE candidates are encouraged to take advantage of these opportunities.

Timing

For 2013-2014 applicants (planning to complete an internship during 2014-2015), the LAST DAY to SIT for the CCE can be no later than 10 (TEN) working days prior to the LAST day of the FALL 2013 semester. The examination must be conducted while classes are in session, and not during intersessions or breaks. Examinations may be scheduled in the summer session if the committee members are available (generally 12 month faculty) and agree to the arrangement. It is each candidate’s responsibility to adhere to the deadlines noted herein.

Procedure

A checklist of procedures for the student and each committee member is presented below. Accompanying this checklist is a detailed explanation of these procedures.

Procedure Checklist for Students

1. _____Review CCE Guidelines

2. _____Obtain, complete, and submit CCE committee request form

3. _____Prepare written case material (3 copies). Select sample intervention session on CD or DVD to accompany written material (one copy for each committee member).

4. _____Arrange oral examination date with assigned Committee members.

5. _____Contact the Clinical Training Office to arrange for room reservation space and public posting at least four (4) weeks in advance of the examination date. At the same time, present verification of the client's CONSENT TO record and use for educational purposes (e.g., written and signed verification from practicum supervisor for the case) to the Clinical Training Office.

6. _____Three (3) weeks before the scheduled examination date, provide the examination committee members with copies of the written and recorded materials. Provide the Clinical Training Office with a copy of the written materials only.

7. _____Arrange for audio recording of the oral examination. Allow for up to 2 hours of recording (1½ to 2 hours is typical).

8. _____Obtain a sign-off form from the Clinical Training Office to present to the CCE Committee chair at the time of the oral examination.
Procedure Checklist for the Committee Chairperson

1. Review written and recorded materials before the exam.

2. Conduct the oral examination and direct the evaluation of the candidate.

3. Complete the CCE Rating Scale, and render an independent pass or remediate decision immediately after the examination.

4. Inform the student immediately afterward of the Committee's decision (Pass, Remediate, or Split Decision). If the committee elects to remediate, the committee chairperson will refer the candidate to the Director of Clinical Training who will appoint a remediation committee. Submit the completed CCE Rating Scale and the sign-off form to the Director of Clinical Training immediately (on the day of the examination).

5. Return to the student his/her copy of the CCE document and the session recording. Ensure that a recording of the oral examination is submitted to the Clinical Training Office on the day of the examination.

Procedure Checklist for Committee Member(s)

1. Review written and recorded material before the examination.

2. Complete the CCE Rating Scale, and render an independent pass or remediate decision immediately after the examination.

3. Submit the completed CCE Rating Scale to the Director of Clinical Training immediately (on the day of the examination).

A. Composition of the Examination Committee

The examination committee is comprised of two core faculty members identified as eligible to serve by the Director of Clinical Training. Supervisors of the case to be presented are excluded from serving as committee members. Other faculty members excluded from serving include concentration faculty members for students in (same) concentrations, and PSC faculty specialty program directors who employ or have employed the student as a program coordinator. Additionally, possible CCE committee assignments will be distributed to the faculty before committee memberships are finalized in order that those with relationships too close or conflictual to render objective decisions may recuse themselves from membership.

The Committee members serve ONLY as examiners, NOT as advisors to the project. The student should not consult with committee members about the content or structure of the examination other than about the format and timing of the oral examination.
B. Committee Selection and Exam Scheduling

1. In the winter semester of their third year, all students who anticipate taking the CCE during the following academic year will complete a CCE request form which:

   a. Identifies the intervention method(s) of the case intended for presentation.
   b. Lists the names of five (5) faculty members from among whom the Chair of his/her examination committee will be selected.

2. The Director of Clinical Training will select the student's Chair from the list of five names submitted, and will assign a second member of the eligible faculty to serve on the examination committee, exclusive of previous supervisors or others who are excluded (see Section A regarding eligibility). Both faculty and student will be informed of the assignment by the end of the Winter semester.

3. The candidate confers with committee members to determine an examination date. Before agreeing to the date so identified, the Director of Clinical Training checks the student's transcript to be certain that all prerequisites have been, or will be, successfully completed by the scheduled date.

4. Students intending to take the CCE in a given semester must schedule the exam a minimum of four (4) weeks in advance of the exam date. An examination room will be reserved at the time of this scheduling.

5. Three (3) copies of the written presentation are required: one for the Clinical Training Office and one for each of the committee members. Students are responsible for submitting their CCE materials NO LATER than three (3) weeks before the examination date.

6. The student makes arrangements to audio record the entire oral examination and is responsible for ensuring adequate listening quality of the recording. Deliberation by the committee following the oral examination and subsequent feedback to the student shall not be recorded. These recordings become the property of the Center for Psychological Studies.

7. The student presents his/her case material orally during the examination. The presentation is open to all faculty and registered students who wish to attend. (Students who wish to attend another student's CCE need only be registered for classes during the regular academic year; they do not need to be registered for summer classes, even if the CCE is scheduled during the summer session.) Due to the confidential and clinical nature of the material, examinations are open only to faculty and currently enrolled students.

8. Under the Chair's direction, the Committee conducts an examination regarding the case and relevant issues. Comments or questions from other attendees may be entertained at the Chair's discretion. At the close of the examination, the candidate and
any observers are dismissed while the Committee deliberates and evaluates the written materials, the recorded session provided beforehand by the candidate, and the oral presentation and defense.

C. Duties of Committee Members

To equitably distribute the workload, the number of examination committees on which faculty members serve will be limited. The limit will be adjusted each year according to the number of students requesting examinations and the number of eligible faculty members available to serve.

It is the responsibility of the Committee members to review the student's written and recorded materials prior to the examination date, to query the student in a manner relevant to the case, to evaluate the student's written and oral presentation using the standard evaluation form, to render an independent pass or remediate decision, and to provide recommendations for remediation where warranted. Immediately after the examination, the Chair informs the student and the Director of Clinical Training of the student's pass, remediate, or split decision status.

Within 10 working days of the examination date, the individual committee members are responsible for submitting in writing to the Director of Clinical Training his/her CCE Rating Scale.

D. Role of the Case Supervisor

The case supervisor, or any other professional person included within the case’s limits of confidentiality, may provide consultation and supervision with regard to any aspect of management of the case. However, the student has sole responsibility for organizing, conceptualizing, and communicating the case presented. There should be no input from supervisors or others into the preparation of the written examination documents. The supervising clinician may not serve as an examination committee member, nor may he/she attend or participate in the examination process. Faculty members may advise students about the CCE cases, but must do so in a manner consistent with the principle that it is the students’ work. Faculty members may discuss with the student the case he/she would like to present for the CCE, but may NOT read or comment directly on the document. Faculty members may listen to and give feedback on the recorded session.

Case Presentation Content Guidelines

A. General Content Description and Case Selection

The student should select a case for presentation that permits an adequate sampling of his/her knowledge and skill competencies for the intervention method(s) employed. The student must have served as the sole or primary service provider.

The case should demonstrate adequate pre-treatment assessment, diagnosis, case
conceptualization and treatment formulation, intervention, treatment efficacy evaluation, and case termination or transfer. Students are not limited in their choice of client characteristics or clinical problems, choice of empirically supported or evidence-based intervention(s), treatment setting, or duration of treatment. Treatment duration, however, must be consistent with the empirically supported treatment literature.

For example, the student may choose a case that is an interactive, empirically supported or evidence-based intervention, but cannot be limited to relaxation therapy, play therapy, a lecture, or a psychoeducational intervention. Any questions regarding the appropriateness of a particular case may be posed to the Director of Clinical Training.

B. Specific Content of the Presentation

The following categories should be addressed in structuring both the written and oral portions of the examination as well as in choosing an appropriate recorded treatment session. The Committee members will utilize them in evaluating the student's performance. Adaptations of the content within the categories may be made depending on the particulars of the case. A written transcript of the therapy tape IS required unless the committee members agree that it will not be necessary.

1. Pre-treatment Evaluation and Assessment. The case should demonstrate the student's competence in pre-intervention assessment, whether the assessment involved an intake interview including a history, formal testing, collateral interviews, behavioral assessment, or analysis of material gathered by previous caseworkers. Appropriate documentation of the evaluation should be presented. In addition, the student should be prepared to defend decisions made regarding the assessment method(s) used.

2. Case conceptualization and treatment formulation. The student should not only describe the conceptual formulation that guided him/her in the initial treatment of the case, but should also explain how the assessment data were employed to inform the case conceptualization and treatment formulation. The treatment plan, including goals and appropriate intervention methods should be described fully. The student should be able to justify the treatment plan based on the conceptualization of the case, the theoretical modality selected, and all pertinent literature from the knowledge base regarding treatment efficacy.

3. Integration. This section outlines the student's case management in his/her handling of the case from the initial intervention(s) to termination. Specifically, emphasis should be placed on describing how assessment data were integrated with conceptual formulation(s) and supportive empirical findings to identify intervention methods. Focus should also be placed on what progress indicators were obtained and how they were used to inform the course of treatment, as well as how any changes in case conceptualization or efficacy data led to changes in treatment.

4. Termination. A description of the intervention outcome data and other applicable factors involved in the decision to terminate, the issues relevant to this
particular case, and the process of termination should be presented. Termination may be complete, in progress, planned, or premature.

5. **Outcome Evaluation/Critique.** In addition to a goal-oriented summary of the intervention outcome, the student should analyze the case from the standpoint of strengths and weaknesses of the intervention strategies (especially with regard to relevant empirical findings), quality of the therapeutic relationship, and effectiveness of treatment.

6. **Ethical and Legal Considerations.** The student should review any ethical and/or legal issues he/she deems to be relevant to the case. If no ethical or legal issues were raised, a statement to that effect will suffice.

7. **Individual and Cultural Diversity Issues.** The student should briefly review any diversity issues relevant to the assessment, conceptualization, and treatment of his/her case. Examples of individual differences and diversity issues include race, ethnicity, culture, sexual preference, age, gender, able- bodiedness, and religious preference.

C. **Length of Written Presentation**

The written portion of the CCE may not exceed twenty-five (25) double-spaced printed pages. The font and margins must correspond to those of the current APA editorial style.

*********************************************************
In printing the document, no typeface smaller than Courier 12cpi or font smaller than Times New Roman 12pt can be used.

Examples of acceptable fonts are shown below:

This is an example of Times New Roman 12-point.

* The lengths of all documents MUST be checked and approved by the Clinical Training Office before distribution to committee members.

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The 25 page limit does NOT include title page, table of contents, lists of tables or figures, reference lists, transcript, or copies of progress notes, test protocols, copies of pertinent outcome studies, or other supporting documents. Such supporting documentation may not include extended reviews of literature or supplemental case analyses; pertinent literature review and case analysis, if presented, must be included within the 25 page limit. Students submitting CCE documents which exceed these page limits will not be permitted to conduct their examinations until their documents have been revised to conform to these guidelines. As a general rule, the written portion of the CCE should present in relatively concise form what the student intends to present in more extensive form in the oral presentation.
D. Recorded Session

An actual intervention session shall be presented in either CD or DVD format to the Committee at the same time as the written material (at least three weeks prior to the oral examination). Both members of the Committee should receive a copy of the intervention session in a format that permits audio review. Verification of the client’s written consent is to be presented to the Clinical Training Office, but not to the committee members. The consent must confirm that permission was given for the student to record sessions for educational and supervisory purposes.

The student is responsible for submitting a recording of adequate quality to enable the examiners to effectively hear the entire intervention session. A written transcript will not suffice as a substitute for an intervention recording of inadequate quality. Presentation of an inaudible recording may result in postponement of the CCE until such time as an adequate quality recording can be provided.

Students may complete the Clinical Competency Examination using intervention conducted in languages other than English. In such instances, the transcript must be provided in English as well as in the other language. If the sample intervention session is conducted in a language other than English, a certified transcript of the tape transcribed into English must be submitted authenticating the recording and its transcription. Even if neither committee member speaks the language in which the intervention session was conducted, the recording must be submitted as part of the CCE materials.

The manner in which the confidentiality of ALL materials used in the preparation and presentation of the Clinical Competency Examination must be in accord with the current version of the Ethical Principles of Psychologists promulgated by the American Psychological Association. The student accepts full responsibility for ensuring such confidentiality. Specifically, he/she must safeguard the confidentiality of clients' identifying information, life circumstances, place and/or name of the treatment facility or agency, clinical problems, and ALL audio recorded or video recorded records of any interactions.

Committee members will evaluate the intervention sample in terms of the students’ listening skills, ability to communicate empathy, question, conduct the intervention method(s) reliably, and adhere to the case formulation described in the document.

E. Oral Examination

1. Oral presentation. As the examiners will have read the written material and listened to the sample session before the examination, the oral presentation should build upon, but not repeat, the basic information conveyed in writing. The student should therefore be prepared to present and discuss an overview of his/her case. This presentation should not exceed twenty (20) minutes in length, and should
emphasize the following aspects:

a. **Case conceptualization and treatment formulation.** The student should be able to explain and support his/her case conceptualization, describe how it informed treatment formulation, and explain how such formulation informed the intervention method(s) employed. Changes, if any, in case conceptualization and choice of intervention method(s) during the course of treatment should be noted as well. **Students should be prepared to discuss in the oral examination one alternative, distinct theoretical approach or set of procedures that are relevant to their case. However, the committee will not necessarily examine the student on that model nor will the student be required to present this alternative model in his/her written document.**

b. **Intervention method(s) employed.** A discussion of intervention methods is central to the presentation. The student should demonstrate knowledge of all applicable literature, and should be able to discuss how assessment data, diagnostic determination(s), conceptual models, and empirically supported or evidence-based methods were selected to inform treatment planning. Specifically, the student should discuss treatment goals, choice of modality, specific intervention methods employed, and the efficacy of each.

c. **Critical evaluation of the case.** This portion of the oral examination should consist of an objective critique of the case. (For example, what "errors" in diagnostic determination, case conceptualization, treatment formulation, and intervention delivery were made? What other intervention methods might have proven more effective?)

2. **Defense.** The majority of examination time is allotted to the critical evaluation of the student's ability to handle the Committee's in-depth exploration and probing of his/her work. The student is required to "think on his/her feet," to consider and evaluate other possible interventions consistent with his/her conceptualization, to contrast modalities, and to support using the knowledge base the intervention method used. The Committee also evaluates the professional manner in which the student conducts himself or herself during the oral portion of the examination.

In all cases, the Committee members are free to explore and test the student until they conclude they can render an accurate decision. **However, the student will not be examined or evaluated on any case conceptualizations or intervention methods other than the one employed and the alternative prepared in advance.**

**Examination outcome**

A. The Committee is to evaluate both the written and oral presentations. After deliberation and discussion, each member of the Committee is to render an independent decision (pass or remediate). In addition, each Committee member is to rate the student's strengths and weaknesses on the areas of competence listed the CCE Rating Scale. *(See attached rating scale at end of Guidelines).* The committee
members' decisions will result in one of the following outcomes.

1. If both members render decisions of Pass, then the student has successfully completed the CCE requirement.

2. If one member renders a decision of pass and the other member renders a decision of remediate, the outcome will be considered a split decision. The committee chairperson will inform the student and the DCT, who will appoint within three (3) working days a third committee member who will evaluate the student’s written work, the recorded session, and the recording of the oral examination. This member will then render an independent pass or remediate decision using the CCE Rating Scale. The third member will submit his/her decision within ten (10) working days to the DCT, who will consider the decision in the following manner:

   a. If both a member of the original committee and the third member render a decision of Pass, then the student has successfully completed the CCE requirement;

   b. If both an original member of the committee and the third member render a decision of Remediate, then the CCE is not passed, and the majority members will forward their recommendation to remediate to the DCT.

3. If both members render a decision of Remediate, the CCE is not passed, and internship eligibility is accordingly not established.

B. While the basis for each committee member's decision of Pass or Remediate depends on his/her judgment of the adequacy of the student's written and oral presentations as well as the sample taped session, the following guidelines are offered:

1. Pass indicates an appraisal that the student's overall clinical performance and presentation are fundamentally sound, and are acceptable as presented.

2. Remediate indicates an appraisal that the student's overall clinical performance is fundamentally unsound, that he or she requires additional training, and that he or she will need to be reexamined after a period of remediation, the components of which will be determined by a committee appointed by the DCT.

C. The Director of Clinical Training will place copies of the written summary and notification of the student’s pass/remediate status into his/her clinical training file. Copies of the documents may be obtained by the students from the Clinical Training office.

D. No student will be eligible to accept an internship placement until successfully
completing the CCE.

E. Not passing the CCE on the fourth attempt results in automatic dismissal from the program.

Remediation

Should the committee’s decision be that the student needs to remediate, the DCT will appoint within three (3) days of the remediation decision a committee of two core faculty members in addition to himself/herself who will meet with the student, review the findings of the CCE committee, and develop a written remediation plan that the student must complete to address unmet knowledge and/or skill competencies identified by the CCE committee. The remediation options include but are not limited to (1) completing additional practicum training with faculty supervision, and then presenting another case, and (2) retaking course(s) and/or pursuing other knowledge attainment methods, and then rewriting and representing the same case. Students should be aware that the second remediation method is recommended only in exceptional circumstances. Additionally, all candidates determined to be in need of remediation by their examining committees must sit for the oral examination again, the constitution of which will be different from the prior one. The committees will be appointed by the DCT.

If the CCE is not passed at the first sitting, the minimum remediation period before a second sitting is three (3) months. If the CCE is not passed at the second or third sitting, the minimum remediation period before sitting for the next examination is six (6) months.

Not passing the CCE on the fourth sitting results in dismissal from the program.

Disputing CCE Outcome.

Any student wishing to pursue an appeal of his/her Committee's decision should consult the *Psy.D. Program in Clinical Psychology Handbook*. 