

Initial Training in Professional Psychology: The Practicum Competencies Outline

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The practicum is the first practice-based step toward independent professional competence in psychology. As the practicum becomes a focus of interest in psychology education, there is a strong need to identify the domains and levels of competence that should be the focus of practicum training. To address this need, the current report introduces the Practicum Competencies Outline, a summary of competency domains and expected levels of competence that may be attained during practicum. The relationship between the Outline and other recent work on competencies in psychology is discussed, and its potential uses in education and training are reviewed.

Keywords: competencies, practicum, training goals

The practicum is the first step on the path of professional development toward independent professional competence in psychology. The practicum comprises supervised training experiences, often called practicum or clerkships, which introduce students to the core competencies of the discipline, bringing classroom education to life in practice settings, and laying groundwork for further training in internship and beyond. Although the general importance of the practicum has been recognized for years (e.g., Belar & Perry, 1992; Korman, 1976), there has been increased interest in the practicum more recently (Nelson, P. D., personal communication, August, 2003). Out of this interest has grown the need to identify the domains and levels of competence that should be

the focus of practicum training. The current report introduces the Practicum Competencies Outline, a document intended to address this need.

Several related developments in the field have led to heightened interest in the practicum. Heavy competition for internship placements has fueled dramatic increases in the number of practicum hours students seek, currently approaching 2000, equal to the number of hours required for internships (Rodolfa, 2007). The shortage of internships, along with changes in the market for psychologists entering practice and other issues, led to the formation of the 2000 American Psychological Association (APA) Commission on Education and Training Leading to Licensure in Psychology. The Commission's report (APA Commission on Education and Training Leading to Licensure in Psychology, 2001) was the basis of the revised model licensing act policy adopted by the APA Council of Representatives at its February 2006 meeting. This policy changed the supervised training requirement for licensure to the equivalent of two years of full-time supervised practice and stated: "For applicants prepared for practice in the health services domain of psychology, one of those two years of supervised professional experience shall be a predoctoral internship" (APA Council of Representatives, 2006). Because the most common path toward licensure is practicum training followed by internship training, this sequence has become the

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APA Council's de facto recommended minimum requirement for licensure. At the time the Commission was established in 2001, it was recognized that relatively little attention had been given to how the practicum actually was implemented in graduate programs, and a survey of practicum programs was initiated (Kaslow, Pate, & Thorn, 2005; Lewis, Hatcher, & Pate, 2005). In this context, the need to think in more depth about what the practicum experience could offer became more urgent.

The increased attention to the practicum has been part of a broader recognition of the need for better understanding of the entire sequence of education in professional psychology. The effort to gain this understanding has taken shape through an emerging focus on defining and specifying professional competencies (Kaslow, 2004). Colleagues in other health fields have led the way in defining educational outcomes in terms of expected competencies necessary for professional practice, notably in medicine (Beresin & Mellman, 2002; Epstein & Hundert, 2002), dentistry (American Dental Association, 2002), and nursing (Benner, 1984; Quad Council of Public Health Nursing Organizations, 2004). Accrediting bodies for these professions have given strong impetus to this work on the basis of the fundamental principle that accreditation is anchored in defined and measurable outcomes for graduates of accredited programs (e.g., American Council for Graduate Medical Education, 1999). Moreover, these professions have embraced the competencies approach strongly as a matter of professional and public accountability and as a reflection of their commitment to evidence-based practice. Competency-based curricula and outcomes assessment are actively being developed (e.g., Stern, 2006).

Interest in identifying professional competencies in psychology began in the 1990s (e.g., Stratford, 1994) and gathered momentum at the first Education Leadership Conference (ELC) held in 2001, entitled "Re-Thinking Education in Psychology and Psychology in Education" (Belar & Nelson, 2002). The ELC was sponsored by the APA through its Board on Educational Affairs (BEA) to begin to address the need for a "coherent framework of learning objectives from one level of education to another" (APA, 2001; Belar & Nelson, 2002, para. 2). Among the seven workgroups at the ELC focusing on various aspects of education in psy-

chology was the practicum group, whose charge was to consider the question, "What are the goals of preinternship supervised practice training for doctoral students in professional psychology, and in what order should they be accomplished?"

(Belar & Nelson, 2002, Conference description, item 5). The discussion group's report (Kaslow et al., 2001) affirmed the APA Committee on Accreditation (APA, 2005) principle of broad, generalist training that integrates classroom and field experience in a developmentally appropriate sequence. The report identified fundamental goals of training and a set of core competency domains, drawing from the National Council of Schools and Programs of Professional Psychology model of core professional competencies (Peterson, Peterson, Abrams, & Stricker, 1997). The discussion group concluded that defining expected levels of achievement for these competencies would be an important task for the field.

Following on the 2001 ELC, a major step was taken in 2002 to identify competencies in professional psychology at a national conference held in Scottsdale, Arizona, titled "Competencies Conference: Future Directions in Education and Credentialing in Professional Psychology" (Kaslow, Borden, & Collins, 2004). The conference was sponsored by the Association of Professional Psychology Internship Centers (APPIC) and cosponsored by most of the major stakeholder organizations in professional psychology, training, credentialing, and practice. The main goal of the conference was to gain better agreement about the domains and levels of competence to be achieved during the course of training in professional psychology. The conference organizers intended that it would "serve as a catalyst for continued collaborative efforts related to the identification, training, and evaluation of competencies; foster links between a broad array of constituency groups to better train the next generation of psychologists; enhance the competence of professional psychologists; and better serve and protect the public" (APPIC, 2001, para. 1).

Several reports resulted from the Competencies Conference, including summaries from each of the workgroups representing eight professional competency domains (the reader is referred to special issues of the *Journal of Clinical Psychology*, 2004, volume 60, and *Profes-*

sional Psychology: Research and Practice, 2005, volume 36). In addition to workgroup summaries within competency domains, participants of the Competency Conference identified several common themes across domains (Kaslow et al., 2004). These included the need to identify subcompetencies within domains and the recognition that there are cross-cutting competencies relevant to all levels of professional development, notably individual and cultural diversity, ethical practice, relationship skills, critical thinking, and knowledge of self. Widely emphasized were the value of developmentally informed and sequenced education and training and the importance of evidence-based and informed practice. The Cube Model for Competency Development (Rodolfa et al., 2005) was developed to summarize and integrate the findings of the conference in an overarching model for professional competence across the psychologist's professional career, spanning five stages of professional development, from doctoral education to continuing competency postlicensure. The Competency Conference summaries and the Cube Model espouse a developmental sequence of competency acquisition and a concept of foundational or baseline competencies that are core to professional psychology. They endorse the additive nature of competencies, that is, that foundational or baseline competencies are the basis of functional or competency domains; and finally, they assert that the competency domains cover the breadth of activities and/or services engaged in or provided by a fully competent psychologist.

The Practicum Competencies Outline shares these key organizing concepts and complements and extends the Competency Conference and Cube Model reports. The Outline offers detailed, operational descriptions of the key competencies addressed by training at the predoctoral practicum-level training and proposes levels of competence that may be expected at the conclusion of practicum sufficient to make effective use of the internship that follows. In addition, the Outline emphasizes the need at the outset of professional training for evidence of various personality characteristics and intellectual and personal skills, as the absence of these skills would put the student's fitness for the profession in question and possibly preclude the student from proceeding with training.

In summary, the efforts of the ELC practicum group, the National Council of Schools and Programs of Professional Psychology model of core professional competencies, and the Competencies Conference workgroups, resulted in identified goals for training, including the practicum. This work set the stage for the agenda of the Practicum Competencies Outline: articulating subcompetencies within domains and the achieved level of competence in the various skill domains that would characterize a student well-prepared to make effective use of the internship phase of professional training.

Evolution of the Practicum Competencies Outline

The Practicum Competencies Outline had its beginnings in a workgroup formed by the Association of Directors of Psychology Training Clinics (ADPTC) after the 2001 ELC. The workgroup approached competencies from a developmental and training-centered perspective, utilizing the extensive experience in professional training possessed by psychology training clinic directors. The major goals were to (a) define and describe the knowledge, skills, and attitudes required to begin practicum training, (b) summarize the competency domains of professional psychology, and (c) specify the level of competence that can reasonably be expected as a result of practicum training. The Outline was further refined after the 2002 Competencies Conference to address or include competency features articulated there. In August 2003, the Council of Chairs of Training Councils (CCTC), an APA-sponsored group of major education and training organizations for professional psychology (<http://www.apa.org/ed/graduate/cctc.html>; <http://www.psychtrainingcouncils.org>) formed a practicum competencies workgroup that took the Association of Directors of Psychology Training Clinics Outline as the basis of its work. Extensive input from CCTC member organizations was incorporated into the document, and the revised Outline was reviewed with approval at the April 2005 meeting of the CCTC.

The completed document has attracted wide interest in the education and training community, including the APA BEA and the Committee on Accreditation; APA Divisions 17, Society of Counseling Psychology, and 29, Psychotherapy; and various training organizations,

including the Council of University Directors of Clinical Psychology and APPIC. The Outline is featured in the report of the BEA's Workgroup on Assessment of Competence in Professional Psychology (Kaslow et al., 2006).

Organizing Principles of the Outline

The Practicum Competencies Outline was conceptualized through several organizing perspectives, the first and most fundamental being the developmental perspective. At the start of practicum training, students are at the beginning of their development as professional psychologists. Students bring to the practicum their personal knowledge, experience, attitudes, and talents, which are enhanced by their education in the graduate program's classroom. During practicum, their knowledge and skill in the various domains of professional competency grow and develop. There is wide variation in the rate and scope of growth across individual students, dependent in part upon the range and quality of their practicum training experiences. Furthermore, some areas of professional competence, such as interprofessional consultation or implementation of complex intervention techniques, require previous mastery of more foundational skills, such as basic interviewing methods or team collaboration. Thus, some competency areas will be strong growth areas during practicum, whereas others will develop later during internship or in postdegree professional life, when achievement of the full range of expertise is possible.

The nature of expertise and its development have received considerable attention in educational research, with a strong emerging consensus on its basic features (Alexander, 2003, 2004; Alexander, Sperl, Buehl, Fives, & Chiu, 2004; Bransford, Brown, & Cocking, 2000). These features include: (a) deep, extensive, and highly integrated bodies of domain knowledge, (b) recognition of features and meaningful patterns of information not noticed by novices, including identifying underlying problem structures, (c) the ability to select appropriate solution strategies for domain-specific problems, and (d) the ability to retrieve pertinent content knowledge with minimal cognitive effort (Alexander et al., 2004; Bransford, Brown, & Cocking, 2000). Studies of the development of expertise, as opposed to the nature of expertise

itself, trace the trajectory from limited knowledge content and integration, surface level strategic processing of problem situations, and situation-specific interest to the state of expertise described above (Alexander, 2004; Dreyfus & Dreyfus, 1986). Dreyfus and Dreyfus have developed a set of stepwise descriptors for the development of expertise that has been used in competencies assessments (e.g., Benner, 1984). These descriptors, modified in light of contemporary work, are utilized in the Practicum Competencies Outline to identify the level of competence expected for each competency at the conclusion of practicum:

1. Novice (N): Novices have limited knowledge and understanding of (a) how to analyze problems and (b) intervention skills and the processes and techniques of implementing them. Novices do not yet recognize patterns and do not differentiate well between important and unimportant details; they do not have filled-in cognitive maps of how, for example, a given client may move from where he or she is to a place of better functioning.
2. Intermediate (I): Psychology students at the intermediate level of competence have gained enough experience through practice, supervision, and instruction to be able recognize some important recurring domain features and to select appropriate strategies to address the issue at hand. Surface-level analyses of the Novice stage are less prominent, but generalization of diagnostic and intervention skills to new situations and clients is limited, and support is needed to guide performance.
3. Advanced (A): At this level, the student has gained deeper, more integrated knowledge of the competency domain in question, including appropriate knowledge of the scholarly/research literature as needed. The student is considerably more fluent in his or her ability to recognize important recurring domain features and to select appropriate strategies to address the issue at hand. In relation to clinical work, recognition of overall patterns, of a set of possible diagnoses, and/or treatment processes and outcomes for a given case are

taking shape. Overall plans, based on the more integrated knowledge base and identification of domain features are clearer and more influential in guiding action. At this level, the student is less flexible in these areas than the proficient psychologist [the next level of competence] but does have a feeling of mastery and the ability to cope with and manage many contingencies of clinical work.

Dreyfus and Dreyfus (1986) and others after them (e.g., Alexander, 2004) have defined two additional competence levels, labeled proficient and expert, which describe postdegree levels of mastery that are not the focus of the current work.

The second organizing principle for the Outline is composed of metaknowledge and meta-competency (Weinert, 2001). A broadly drawn definition characterizes metaknowledge as knowledge about knowledge, as knowing what you know and what you don't know. Metaknowledge includes being aware of the range and limits of what you know; knowing your own intellectual strengths and weaknesses, how to use available skills and knowledge to solve a variety of tasks, how to acquire new or missing skills, or being able to judge that a task cannot be completed with current knowledge. Meta-competencies similarly refer to the ability to judge the availability, use, and learnability of personal competencies. The development of metaknowledge and meta-competencies depends on self-awareness, self-reflection, and self-assessment (Weinert, 2001). The development and/or extension of metaknowledge and meta-competencies related to practical work in professional psychology, we argue, should begin in the practicum. This competency domain is given a specific place in the Outline and suffuses all domains, particularly as they relate to the ability to maximize learning opportunities such as supervision. We believe that the ability to use supervision constructively to develop knowledge and skills, and to enhance reflective practice, is a critical aspect of competence during the period of intense training in professional psychology and remains an important skill and value throughout professional life. The concepts and importance of metaknowledge and meta-competency have been discussed under other titles, including "educating for capability" (Fraser & Greenhalgh, 2001) and "adaptive ex-

pertise" (Bransford, Brown, & Cocking, 2000). Here, the ability to recognize the limits of what one knows, and to be flexible, creative, and open to new ways of thinking is highlighted as a principal goal for professional training.

A third organizing principle, related to meta-competency, is the capacity to work collaboratively with others to address challenges. Important in training and throughout one's professional career is the ability to recognize the need for assistance or collaboration with others to solve problems and the ability to seek out and engage others to this end. This general principle is related to the ability to form good relationships, and particularly to form effective working alliances with clients, but it extends to all working relationships, including those with supervisors and instructors, other staff members, support staff, and colleagues from other agencies. Of interest is the fact that widely used methods for assessing professional competence (e.g., the Examination for the Professional Practice of Psychology) do not permit or assess for collaborative problem solving. Instead, they involve what Bransford and Schwartz (1999) call "sequestered problem solving," where test-takers are cut off from consulting resources. The awareness of relevant resources (information or personnel) and the ability to access and utilize them appropriately is a process we would consider reflective of competent practice and as a result, worthy of assessment.

Structure of the Outline

The Practicum Competencies Outline is divided into two primary sections (see Appendix A for a summary; Appendix A1 for a detailed excerpt of the Outline). The first of these, identified as Baseline Competencies (Section A), includes skills, attitudes, and knowledge that students should possess at an acceptable level before beginning their first practicum training experience. This skill set is further divided into two areas: (a) personality characteristics and intellectual and personal skills that students bring with them to professional training, and (b) the basic theoretical and research knowledge that students acquire from prepracticum coursework. Such coursework typically includes clinical interviewing and assessment, intervention, ethical principles and their application, the legal

aspects of professional psychology, and individual and cultural differences.

Of particular interest and concern are the baseline personality characteristics, intellectual and personal skills that represent core competencies of the professional psychologist. We argue that it is inappropriate to undertake formal clinical professional training with students who have not acquired or do not possess these critical skills at an acceptable level, because the work of subsequent clinical training is to shape and refine these baseline skills into professional skills. This skill set includes seven areas, namely interpersonal skills, cognitive and affective skills, personality and attitudes, expressive and reflective skills, and personal skills. Given the central role of these core competencies to successful professional training, programs are encouraged to pay particular attention to their assessment during the first year of training, as issues relevant to gatekeeping the profession are likely to be present at this stage. Continual assessment of competencies will detect deficiencies whenever they manifest during training, and programs should have an action plan for intervention or remediation.

The second of the two primary sections within the Outline (Section B) provides a comprehensive account of competency domains and associated skills that are the focus of professional training during the practicum experience. Specifically, Section B consists of 11 competency domains, including relationship/interpersonal skills; skills in the application of research; psychological assessment skills; intervention skills; consultation skills/interprofessional collaborations; diversity, inclusive of individual and cultural difference; ethics; development of leadership skills; supervision skills; professional development; and metaknowledge/ metacompetencies.

It is not the intent of this article to suggest or imply that every practicum program should teach all of the competencies described. Instead, we envision that individual psychology programs will select a subset of these competencies that reflects the program's educational model and goals.

Applications of the Practicum Competencies Outline

Our aim in producing the Outline was to assemble and organize descriptions of currently

identified core competencies for the professional psychologist and to characterize the level of competence that may be expected by the end of practicum training before beginning internship. Based on educational theory and research, the Outline embodies a commitment to maximizing students' potential for achievement, life-long learning, and professional development.

We anticipate several applications for the Outline. The Outline can assist in matching the graduate program's philosophy and objectives of training to the design, organization, and implementation of the practicum program that is intended to help realize these objectives through acquisition of specific competencies linked to the objectives. The Outline can assist in evaluating existing practicum programs, providing a template of competencies to which the practicum can be matched. For example, graduate programs may find that the range of competencies taught in their practicum programs emphasizes some competencies too strongly, while perhaps underemphasizing others that are important to the programs' training objectives. This application of the Outline can assist in articulating how the practicum program meets and conforms to the graduate program's educational goals, as required by APA's (2005) Guidelines and Principles for Accreditation of Programs in Professional Psychology for Domain B. It is important to stress that the Outline is not intended to dictate the competencies that should be addressed by every program. The Outline is intended to inform a program's effort to develop and implement its own training model. The Guidelines and Principles for Accreditation state, "The accreditation process involves judging the degree to which a program has achieved the goals and objectives of its stated training model. That is, an accreditation body should not explicitly prescribe a program's educational goals or the processes by which they should be reached. . ." (APA, 2005, Section II.a.).

The Outline can play a useful role in determining which competencies listed in the Outline are not covered by the program, and in raising the question of whether it would be valuable to incorporate these competencies in light of the program's training goals. For example, Stedman, Hatch, and Schoenfeld (2001) found that only 25% of graduate students met internship directors' expectations for report-

writing experience with frequently used assessment tools. Identifying the core components of the psychological assessment competency can aid training programs in evaluating their assessment sequences and experiences and in considering whether it is important to the program to meet internship directors' expectations in this domain.

Similarly, the Supervision Workgroup (Falender et al., 2004) of the Competencies Conference noted the disparity between the amount of clinical supervision provided by professional psychologists and the proportion of psychologists who have received didactic and supervised training in this competence domain. The authors point out that the APA's Ethical Principles require psychologists to practice only within their individual spheres of competence, where competence is established through education, training, and supervised experience, yet the majority of graduate programs do not offer courses in supervision and of those that do, few provide a practicum training component focused on supervision of supervision. Reflecting its focus on practicum training, the supervisory skills domain of the Outline is restricted to that subset of supervisory capabilities that can be achieved by the end of graduate training, namely coursework and supervision of supervision. The Outline can provide programs with a menu of subcompetencies within domains from which they can determine the critical content areas when proposing new courses or infusing new material into existing offerings.

The Outline, or the sections of the Outline congruent with the program's training model, may be shared with applicants to the program as an informed consent document that alerts them to the fact that their personal and emotional functioning are subject to evaluation during professional training (i.e., Baseline Competencies, Section A). When students enter the program, the Outline may serve as an orientation to the expectations of the program, providing an organizing framework for clinical training, and reducing students' anxiety by presenting them with a finite and specified sphere of abilities to master.

A natural extension of the Outline, and a critically important application, is the development of competency assessments for practicum trainees. Once the skills and abilities students are expected to master have been identified, a

plan for assessment is needed. Kaslow et al. noted that "no single assessment model can evaluate all competencies" (2006) and that competencies must be defined in clear and measurable terms to make them amenable to valid and reliable assessment. The Outline may be used as a comprehensive tool for instructors and supervisors to evaluate student trainees and track their progress (see Appendix B for an example). Competency evaluations may be completed after each training experience, making periodic systematic reviews easier to conduct: Evaluations may be compiled periodically to determine student progress, areas of strength to be optimized, and areas of relative weakness to be addressed or remediated. The Outline may (a) provide a structure for professional development discussions between students and faculty mentors, permitting more precise and timely feedback on skill levels; (b) facilitate multi-informant input into the evaluation process (Kaslow et al., 2006); and (c) serve as a tool to support gatekeeping through tracking improved students and providing a history for students whose difficulties emerge later. Such documentation is particularly helpful in facilitating remediation or dismissal of an insufficiently competent student from training.

A related application is the clinical portfolio. "A portfolio is a purposeful collection of evidence gathered by individuals in their roles as learners, recording and reflecting on a learner's progress and achievement in selected domains" (Stern, 2006, p. 214). Originally suggested to us by Paul Nelson of the APA Education Directorate (personal communication, December 17, 2004), the portfolio concept includes use of the Outline as a tool for discussing and planning professional development; reflection on what the student has learned and what remains to be accomplished; and relevant materials, such as evaluations, statements of their clinical philosophy, work samples, and reprints of articles. Programs might choose to establish a procedure where students and their faculty mentors meet periodically during the academic year specifically to review the portfolio, plan future training opportunities, and encourage articulation of the student's own training goals. When the student is considering the internship placement process, the portfolio could be submitted to the program's internal internship committee for review and recommendation as to the student's readi-

ness to proceed. Ultimately, the portfolio could be submitted to internship sites along with application materials.

A second tier of evaluation then becomes possible, as the Outline may provide a basis for evaluating outcomes for practicum training programs. Programs may determine which practicum sites yield the best outcomes in terms of providing experiences that assist students in achieving competence across required domains. It is likely that some sites provide an experience that covers a broad array of competence domains, whereas others offer a narrower, more in-depth training opportunity. Although most professionals involved in practicum training have a sense of this information from their experience in their respective communities, the Outline can provide a framework for collecting objective data that can in turn be used to place students in settings that best meet their training needs.

The Outline may be used to facilitate communication between practicum sites and graduate programs regarding training goals and priorities. Whereas other disciplines, most notably social work, (Council on Social Work Education Commission on Accreditation, 2001) make it a priority to integrate academic with field (practicum) training, psychology has not established this link to the same degree (Lewis, Hatcher, & Pate, 2005). In this context, the Outline can become a vehicle through which programs can impart programmatic and individual-level training objectives to practicum sites.

The Outline can also play a role with respect to "evaluative rigor" (Kaslow et al., 2006) by establishing a point of reference for describing student competence upon application for the internship. More specifically, a student can be described as "having consistently met or exceeded programmatic competency expectations as defined by the Practicum Competencies Outline." APPIC has endorsed the use of the Outline in letters of recommendation to allow internship sites to have a national standard against which to compare student applicants (APPIC Membership Conference, 2005).

Finally, given the organizing principle of developmental skill acquisition, the Outline serves to stimulate thinking concerning competency goals for other steps in the sequence of professional training in psychology, including initial coursework, internship, and postdoctoral train-

ing, as well as for independent licensure and beyond. The Outline contributed in this way to the Competencies Benchmarks Workgroup sponsored by the APA Board of Educational Affairs and the CCTC in September 2006. This meeting brought together 36 psychologists actively involved in competencies issues to articulate benchmarks for 12 core competency areas, derived from the Competencies Conference, at four stages of professional development, including readiness for practicum and readiness for internship.

Implications for Doctoral Training, Theory and Research

We believe that an important contribution of the Outline, and of the emerging emphasis on competencies of which it is a part, is to sharpen our field's interest in the goals of education and training, and in the links between these goals and the means we use to achieve them. This interest should support our field's ongoing efforts to produce well-educated and trained professionals and to maximize the use of our educational resources. As we move forward, it is important to keep our commitment to inquiry, research, and innovation in clear focus. Lists of competencies should be catalysts for further inquiry and innovation, not bureaucratic strictures.

Along these lines, a particular challenge is to support and strengthen the assessment of competencies, which is the current challenge facing those who educate, train, and provide continuing education to the discipline. Anticipating this task, the Competencies Conference established a workgroup "to focus on the assessment of competencies across domains and to generate an effective plan . . . by which to assess the attainment of overall competence" (Roberts, Borden, Christiansen, & Lopez, 2005, p. 356). In response to this charge, the workgroup advocated the acquisition and maintenance of competence as a primary objective in professional psychology, rather than an assessment process that terminates with licensure. Taking this position one step further, the workgroup proposed that competence be assessed "at all levels over time," (p. 356) leading to continual assessment across the professional life span.

The APA Task Force on the Assessment of Competence in Professional Psychology

(Kaslow et al., 2006) describes a range of positive outcomes from competency assessment, namely that it “fosters learning, evaluates progress, assists in determining the effectiveness of the curriculum and training program, advances the field, and protects the public” (p. 3). The Task Force provided a comprehensive overview of assessment methods utilized across the health professions, including the use of simulated patients and objective structured clinical examinations. Such performance-based assessments, while more authentic than multiple-choice examinations, are expensive and time-consuming to create and execute, and ultimately, they remain simulations: There is evidence that examinees behave differently in the context of these tasks than they would in real life (Swanson, Norman, & Linn, 1995). In addition to these pragmatic concerns, there is also the conceptual question of the suitability of such technologies for assessing psychological activities.

Given these concerns, we believe the current challenge is to enhance the quality and possibly the quantity of the supervision that is considered to be the cornerstone of clinical training: direct observation of one’s clinical activities by a trained and qualified supervisor. Suggestions for improving supervision in doctoral programs might include some of the following:

1. Psychologists who provide supervision in doctoral programs should be licensed to practice independently, thereby ensuring an investment in the profession and a threshold of clinical competence on their part;
2. Psychologists who provide supervision in doctoral programs should be competent to supervise, including formal coursework followed by supervision of their supervision, in accordance with APA’s guidelines for acquiring a new area of competence. Being independently licensed to practice psychology does not necessarily guarantee competence to supervise another’s clinical work;
3. Doctoral programs that provide clinical training should meet a minimal threshold of technology to enable the process of supervision, for example, observation

rooms and/or cameras to record and review clinical activities;

4. Doctoral programs that provide clinical training should value supervision and support its provision by providing the necessary resources for quality work, such as time and adequate reimbursement;
5. Those who assess the competence of clinical activities must be trained to do so effectively, for example, through competence in providing meaningful feedback in a timely and constructive manner;
6. The multiple roles of evaluators who are also teachers, mentors, or supervisors should be acknowledged (Krishnamurthy et al., 2004) and means of protecting the integrity of assessment under such conditions should be explored; and
7. Research to validate the assessments supervisors provide should be encouraged and supported.

Perhaps the most serious aspect of competency assessment at the practicum level has to do with gatekeeping decisions: “the power to examine is the power to destroy” (Flexner, 1910, p. 169). We must pursue valid and reliable means of making such determinations, consistent with our responsibility to protect the public through providing quality psychological services (Kaslow et al., 2006). Although we have experienced a lack of standardized evaluation instruments with solid psychometric properties, the Practicum Competencies Outline provides a response to the most labor-intensive aspect of the evaluation process: the identification of the core competencies essential to trainee learning. A related issue is the consideration of compensatory and noncompensatory models of competency assessment. More specifically, applying a noncompensatory evaluation strategy to certain skills identified as essential to professional practice (e.g., Baseline Competencies, Practicum Competency Outline Section A) would require the student to attain a threshold of competence in *each* of these skills to pass the assessment. For example, if a student demonstrated empathy at a level that was deemed unsatisfactory, the student would not

pass the assessment, regardless of relative strengths in other skills.

The Practicum Competencies Outline and other efforts to identify and define competencies in a developmental, educational framework have worked to make good use of available scientific evidence regarding learning, educational practice, and measurement. The fact remains, however, that competencies and their associated learning trajectories are largely identified based on the accumulated wisdom of educational and clinical practitioners. There is an ongoing and pervasive need to validate these judgments through empirical research, a need that starts with the question of what methods will best serve those we hope to help, and extends to how we best teach those we hope to train to help. If, for example, we identify a treatment that is substantially helpful, how do we best teach its practice to our students, and how do we best evaluate their mastery of this practice with the assurance that our evaluation accurately predicts our students' successful implementation of the method with their clients? Research is needed to answer these questions. We hope that our work will assist the field in these efforts.

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Appendix follows on next page

Appendix A

Practicum Competencies Outline: Overview

A. Baseline Competencies

1. Personality characteristics, intellectual and personal skills students bring to the graduate training experience:
 - a) interpersonal skills: encompass both verbal and nonverbal forms of communication, the ability to listen and be empathic and respectful of others, and the ability to be open to feedback.
 - b) cognitive skills: includes an attitude of intellectual curiosity and flexibility, and abilities in problem-solving, critical thinking, and organized reasoning.
 - c) affective skills: the ability to tolerate affect, to tolerate and understand interpersonal conflict, and to tolerate ambiguity and uncertainty.
 - d) personality/attitudes: the desire to help others, openness to new ideas, honesty and integrity and the valuing of ethical behavior, and personal courage.
 - e) expressive skills: the ability to communicate accurately one's ideas, feelings, and information in verbal, nonverbal, and written forms.
 - f) reflective skills: the ability to examine and consider one's own motives, attitudes and behaviors and one's effect on others.
 - g) personal skills: personal organization, hygiene, and appropriate dress.
2. Knowledge from graduate classroom experience prior to or concurrent with practicum:

a) assessment and clinical interviewing	c) ethical and legal standards
b) intervention	d) individual and cultural differences

B. Skills Developed During Practicum

1. Relationship/interpersonal skills
2. Application of research
3. Psychological assessment
4. Intervention
5. Consultation/interprofessional collaboration
6. Diversity: Individual and cultural differences
7. Ethics
8. Leadership
9. Supervisory skills
10. Professional Development: Building a foundation for life-long learning
 - a) practical skills to maintain effective clinical practice
 - b) professional development competencies
11. Metaknowledge/metacompetencies:

For a downloadable copy of the complete Practicum Competencies Outline, please visit the Association of Directors of Psychology Training Clinics website at <http://www.adptc.org> or the Council of Chairs of Training Councils website at <http://www.psychtrainingcouncils.org>

Appendix A1

Practicum Competencies Outline: Excerpt

<p><u>B. Description of Skills Leading to Competencies That Are Developed During the Practicum Experience</u> Competence Level expected by the completion of practicum is indicated in the column on the right. N = Novice; I = Intermediate; A = Advanced. See introduction for definition of these levels. These competencies are built upon fundamental personality characteristics, intellectual and personal skills (see Section A1).</p>	<p>Completed Practicum</p>
<p><u>1. Relationship/Interpersonal Skills</u> The ability to form and maintain productive relationships with others is a cornerstone of professional psychology. Productive relationships are respectful, supportive, professional, and ethical. Professional psychologists should possess these basic competencies when they first begin their clinical training. Although the ability to form such relationships is grounded in basic skills that most students will have developed over the course of their lives to date, helping the student hone and refine these abilities into professional competencies in the clinical setting is a key aim of the practicum. In particular, the practicum seeks to enhance students' skills in forming relationships:</p>	
<p>a) With patients/clients/families:</p>	
<p>i) Ability to take a respectful, helpful professional approach to patients/clients/families.</p>	A
<p>ii) Ability to form a working alliance.</p>	I
<p>iii) Ability to deal with conflict, negotiate differences.</p>	I
<p>iv) Ability to understand and maintain appropriate professional boundaries.</p>	I
<p>b) With colleagues:</p>	
<p>i) Ability to work collegially with fellow professionals.</p>	A
<p>ii) Ability to support others and their work and to gain support for one's own work.</p>	I
<p>iii) Ability to provide helpful feedback to peers and receive such feedback nondefensively from peers.</p>	I

Appendix continues

	Completed Practicum
<p>c) With supervisors, the ability to make effective use of supervision, including:</p> <p>i) Ability to work collaboratively with the supervisor. Collaboration means understanding, sharing, and working by a set of common goals for supervision. Many of these goals will change as the student gains professional competence, although a core goal, of working cooperatively to enhance the student's skills as a clinician, will remain constant. It is this aspect of collaboration that is expected to be at the "A" level by the end of practicum training. Competencies ii & iii below may be considered aspects of collaboration with the supervisor.</p>	A
<p>ii) Ability to prepare for supervision.</p>	A
<p>iii) Ability/willingness to accept supervisory input, including direction; ability to follow through on recommendations; ability to negotiate needs for autonomy from and dependency on supervisors.</p>	A
<p>iv) Ability to self-reflect and self-evaluate regarding clinical skills and use of supervision, including using good judgment as to when supervisory input is necessary.</p>	I
<p>d) With support staff:</p>	
<p>i) Ability to be respectful of support staff roles and persons.</p>	A
<p>e) With teams at clinic:</p>	
<p>i) Ability to participate fully in team's work.</p>	A
<p>ii) Ability to understand and observe team's operating procedures.</p>	I
<p>f) With community professionals:</p>	
<p>i) Ability to communicate professionally and work collaboratively with community professionals.</p>	I
<p>g) For the practicum site itself:</p>	
<p>i) Ability to understand and observe agency's operating procedures.</p>	A
<p>ii) Ability to participate in furthering the work and mission of the practicum site.</p>	A
<p>iii) Ability to contribute in ways that will enrich the site as a practicum experience for future students.</p>	A

Appendix B

Competency Review

Student: _____

Quarter and Date: _____

Year in Program: 1 2 3 4 5 +

The purpose of the Competency Review is to assess the student's current level of skill in each of the areas described. This evaluation is part of the ongoing graduate training process and is designed to pinpoint areas of strength and needed development, and to set and refine practicum goals.

There are four columns to the right of each competency. In the first column, Year Expected, the program designates the year at which that skill is expected to emerge. Alternatively, if the program does not train in that skill, the box may be marked with an X. The remaining columns, U, NI, and S, represent student status relative to that competency or skill. Because it is expected that students will continue to evolve their professional skills, attitudes, and behaviors as they progress through their training, what is considered competent for a first year student will be different than what is expected of a fourth year student who has completed all program requirements. Therefore, it is possible that a student would meet requirements in one year but fall short in another.

The rating is based on a standard comparison of other students at the same developmental level. Data to be considered in arriving at an assessment of the student's current skill level are the students' individual Competency Reviews (completed for each year of the program), performance in practicum, completion of coursework in identified areas, performance of graduate assistant (GA), research assistant (RA) and/or teaching duties, performance in research labs, defense of master's thesis, performance on comprehensive doctoral examinations, proposal and defense of the dissertation, and any other relevant activities engaged in by the student (i.e., participation and/or leadership in organizations). Student progress is described by the rating scale below. The evaluator will circle the appropriate letter beside each competency.

Student status is described as:

U = Unsatisfactory NI = Needs Improvement S = Successful

Unsatisfactory (U): the student is deficient in the competency or skill and there needs to be significant further training and a special effort made in order to bring it up to the Successful level. **Needs Improvement (NI):** the student has shown some evidence of the competency or skill, but performance is inconsistent or there may be examples of poor motivation or minor irresponsibility. It is anticipated that the rating will improve with some further training, supervision, and student effort. **Successful (S):** the student has shown basic mastery of the competency or skill.

Programs are encouraged to pay particular attention to the assessment of Baseline Competencies in section A, as the breadth and depth of these skills, attitudes and values establish the parameters from which professional skills are shaped and refined.

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