

PSYCHOLOGY 694A

Clinical Assessment Practicum

Fall 2018

Instructor:	John Allen, Ph.D.
Teaching assistant:	Samantha Reznik, M.A.
T.A. office:	Rm. 409
T.A. office hours:	Wednesday 3-4 PM, Thursday 4-5 PM and by appointment
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Overview

The focus of the assessment practicum is on learning to administer and interpret four clinical assessment tools: the Minnesota Multiphasic Personality Inventory-2-Revised Format (MMPI-2-RF), the Structured Clinical Interview for DSM-5 (SCID), the Wechsler Adult Intelligence Scale-IV (WAIS-IV), and the Wechsler Memory Scale-IV (WMS-IV). Report writing is an important part of learning to convey interpretations to others in a clear and concise way; you will be asked to prepare reports on the assessments that you do. In addition, some time will be spent discussing the development and validation of these instruments in order to increase your awareness of the strengths and weaknesses of these tools.

Requirements

- Attendance at the ten class meetings (one being a clinic tour) and completion of assigned readings.
- Completion of a total of 8 assessments: 2 SCIDs, 2 MMPI-2-RFs, 2 WAIS-IVs, and 2 WMS-IVs.
 - You are expected to familiarize yourself with each assessment through practice prior to conducting it with a subject.
- Completion of the training in the ethical treatment of research subjects: Simply log onto the system at www.citiprogram.org, and register with a user name and a password of your choosing. You can then log on as many times as needed to review all of the required modules and take the quizzes. You will be taking the Social and Behavioral Sciences (SBS) program. You do not need to complete the Bio-Med program. Plan to complete the training prior to the September 5 meeting, and bring a copy of your verification to give to Sam at that meeting (or send PDF by email). The verification will be the certificate that you receive upon successful completion of all modules in the SBS program.
- Completion of 4 supervision sessions: one for the WAIS-IV, one for the WMS-IV, and two for the SCIDs. (*Sam will observe the first WAIS-IV and the first WMS-IV administrations and then provide feedback. Dr. Allen and Sam will each listen to a different SCID interview on audiotape and then give feedback.*)
- Completion of 8 clinical reports based on the results of 2 SCIDs, 2 MMPI-2-RFs, 2 WAIS-IVs, and 2 WMS-IVs. (*The format of these reports will be discussed in class.*)

Scheduling Assessments

We will be recruiting introductory Psychology students to serve as your subjects. For most of the assessments, you will be free to schedule the appointment at your convenience. However, for one of the WAIS-IV and one of the WMS-IV administrations, you will be asked to coordinate with Sam's schedule (preferably a Wednesday or Thursday) to allow for observation and feedback. Details will be provided in class.

You will schedule your assessments in room 210B. You will need to through the clinic google calendar, which we will discuss further in class. If you run into scheduling difficulties, please let Sam know and she will coordinate alternative arrangements with Susan.

Class Schedule		Where	What
Wed., August 22	4 – 6:30pm	250	Introduction to course & clinic tour
Wed. August 29	4 – 6:30pm	250	Suicide assessment
Wed., September 5	4 – 6:30pm	250	MMPI-2-RF & other tests
Wed., September 12	4 – 6:30pm	250	MMPI-2-RF Review & other tests
Wed., September 19	4 – 6:30pm	250	SCID
Wed., October 10	4 – 6:30pm	250	WAIS-IV
Wed., October 17	4 – 6:30pm	250	WAIS-IV Review
Wed., October 31	4 – 6:30pm	250	WMS-IV
Wed. November 7	4 – 6:30pm	250	WMS-IV Review
Wed. December 5	4-6:30pm	250	Review & final meeting

Due Dates

***De-identified reports need to be emailed to Sam by Tuesdays at midnight. Any accompanying hard copy score reports need to be placed in Sam’s clinic mailbox by midnight as well.**

Tues., September 4	CITI Human Subjects Protection Program training
Tues., September 18	MMPI-2-RF report #1
Tue., September 25	MMPI-2-RF report #2
Tue., October 9	SCID report #1, 1 st supervision (Sam or John)
Tue., October 16	SCID report #2, 2 nd supervision (Sam or John)
Tue., October 30	WAIS-IV report #1, 1 st supervision (Sam)
Tue., November 6	WAIS-IV report #2
Tue., November 27	WMS-IV report #1, 1 st supervision (Sam)
Tue., December 4	WMS-IV report #2

TA Bio

I am fifth year clinical psychology student working with Dr. John Allen. I am passionate about clinical work, and I am excited to TA for this class because, for many students, it serves as first introduction to clinical assessment. I hope to help students develop assessment skills as well as build my own skills as a supervisor. I will ask for feedback both formally and informally throughout the semester. I value honesty and compassion in supervision. As a peer supervisor, I will do my best to ethically and appropriately navigate multiple relationships.

References

MMPI-2-RF

- Lima, E.N., Stanley, S., Kaboski, B., Reitzel, L.R., Ruchey, A., Castro, Y., et al. (2005). The incremental validity of the MMPI-2: When does therapist access not enhance treatment outcome? *Psychological Assessment, 17*, 462-468.
- Martin, P. K., Schroeder, R. W., Heinrichs, R. J., & Baade, L. E. (2015). Does True Neurocognitive Dysfunction Contribute to Minnesota Multiphasic Personality Inventory-2nd Edition-Restructured Form Cognitive Validity Scale Scores? *Archives of Clinical Neuropsychology, 30*(5), 377–386.
- Osberg, T.M., Haseley, E.N., & Kamas, M.M. (2008). The MMPI-2 Clinical Scales and Restructured Clinical (RC) Scales: Comparative psychometric properties and relative diagnostic efficiency in young adults. *Journal of Personality Assessment, 90*, 81-92.
- Sellbom, M., Ben-Porath, Y.S., Graham, J.R., Arbisi, P.A., & Bagby, R.M. (2005) Susceptibility of the MMPI-2 clinical, restructured clinical (RC) and content scales to overreporting and underreporting. *Assessment, 12*, 79-85.
- Tarescavage, A. M., Wygant, D. B., Boutacoff, L. I., & Ben-Porath, Y. S. (2013). Reliability, validity, and utility of the Minnesota Multiphasic Personality Inventory–2–Restructured Form (MMPI–2–RF) in assessments of bariatric surgery candidates. *Psychological Assessment, 25*(4), 1179–1194.
- Tellegen, A., Ben-Porath, Y.S., & Sellbom, M. (2009). Construct validity of the MMPI-2 Restructured Clinical (RC) Scales: Reply to Rouse, Greene, Butcher, Nichols, and Williams. *Journal of Personality Assessment, 91*, 211-221.

SCID

- First, M. B., Williams, J. B., Karg, R. S., & Spitzer, R. L. (2015). *User's guide to structured clinical interview for DSM-5 disorders (SCID-5-CV) clinical version*. Arlington, VA: American Psychiatric Publishing.

WAIS- IV

- Loring, D. W., & Bauer, R. M. (2010). Testing the limits: Cautions and concerns regarding the new Wechsler IQ and Memory scales. *Neurology, 74*(8), 685–690.
- Miller, D. I., Davidson, P. S. R., Schindler, D., & Messier, C. (2013). Confirmatory factor analysis of the WAIS-IV and WMS-IV in older adults. *Journal of Psychoeducational Assessment, 31*(4), 375–390.
- Nelson, J. M., Canivez, G. L., & Watkins, M. W. (2013). Structural and incremental validity of the Wechsler Adult Intelligence Scale–Fourth Edition with a clinical sample. *Psychological Assessment, 25*(2), 618–630.
- Tulsky, D.S., Saklofske, D.H., & Ricker, J. (2003). Historical overview of intelligence and memory: Factors influencing the Wechsler scales. In: D.S. Tulsky, D.H. Saklofske, R.K. Heaton, R. Bornstein, & M.F. Ledbetter (Eds.). *Clinical Interpretation of the WAIS-III and WMS-III*, pp. 7-41. Elsevier Science.

WMS-IV

- Carlozzi, N. E., Grech, J., & Tulsky, D. S. (2013). Memory functioning in individuals with traumatic brain injury: An examination of the Wechsler Memory Scale–Fourth Edition (WMS–IV). *Journal of Clinical and Experimental Neuropsychology, 35*(9), 906–914.

Loring, D. W., & Bauer, R. M. (2010). Testing the limits: Cautions and concerns regarding the new Wechsler IQ and Memory scales. *Neurology*, 74(8), 685–690.

Miller, D. I., Davidson, P. S. R., Schindler, D., & Messier, C. (2013). Confirmatory factor analysis of the WAIS-IV and WMS-IV in older adults. *Journal of Psychoeducational Assessment*, 31(4), 375–390.

Pauls, F., Petermann, F., & Lepach, A. C. (2013). Memory assessment and depression: Testing for factor structure and measurement invariance of the Wechsler Memory Scale–Fourth Edition across a clinical and matched control sample. *Journal of Clinical and Experimental Neuropsychology*, 35(7), 702–717.

***NOTE:** There will be numerous additional reference materials available in the Clinic to assist you with the understanding of the use of the instruments in this course. Many of them are essential in scoring the results and generating interpretations of your findings. **Please do not EVER take these materials out of the clinic.** This means that much of your scoring and interpretation will take place in one of the available clinic rooms. Thank you on behalf of the instructors and your fellow students.

Accessibility and Accommodations:

It is the University's goal that learning experiences be as accessible as possible. If you anticipate or experience physical or academic barriers based on disability or pregnancy, please let me know immediately so that we can discuss options. You are also welcome to contact Disability Resources (520-621-3268) to establish reasonable accommodations.

Academic Integrity

Violations of the UA Code of Academic Integrity are serious offenses at the University of Arizona. As your instructor, I will deal with alleged violations in a fair and honest manner. As students, you are expected to do your own work and follow class rules on all tests and assignments unless I indicate differently. Alleged violations of the UA Code of Academic Integrity will be reported to the Dean of Students Office and will result in a sanction(s) (i.e., loss of credit on assignment, failure in class, suspension, etc.) Students should review the UA Code of Academic Integrity which can be found at: <http://deanofstudents.arizona.edu/codeofacademicintegrity>

Comment on academic integrity

Consultation and collaboration are fundamental to the conduct of high quality research and ethical practice of clinical psychology. Collaboration in practicing and interpreting assessments is strongly encouraged, as is peer consultation regarding report writing. Reports should be written in their entirety by each student. The only exception is when describing particular scales or subtests of assessments, which may be difficult to reword and still maintain their meaning. In this case, a general statement at the start of the report may indicate that these descriptions are taken from the assessment manual.