The Capstone Course

In the Spring semester of students' second year in the program, all students will be enrolled in a section of PSY 8382 that has been designated as a Capstone Course. The purpose of the Capstone Course is for students to demonstrate that they have developed the skills and competencies in assessment, treatment planning, and treatment needed to advance to PSY 8382. It also serves as the equivalent of the Comprehensive Exam required by the university for masters students. The course will involve doing clinical therapy and assessment work under supervision at an assigned site. It will also involve selecting one therapy case and one assessment case on which to do concentrated work. At the end of the course, students will be required to present their selected cases to a panel of faculty members.

The oral presentation should be approximately 90 minutes in length and devote approximately equal time to discussing the therapy and assessment cases. A five-minute audio/video excerpt from each case demonstrating a key skill or intervention must be included in the presentation. Presentation time is slotted in 2-hour blocks to allow time for questioning. Presentations will be judged on the comprehensive consideration of all the relevant factors in the case, (1.) the proper weighting of those factors in case formulation, (2.) the support of the relative weightings using the available empirical and theoretical literature, and (3.) the choice of interventions or recommendations that follow. Students will be expected to integrate contextual factors and symptom presentation and derive a diagnostic impression and/or treatment plan that follows logically from the available data. Special consideration should be given to documenting empirical support for a given diagnosis, recommendation, or intervention.

Students will only be allowed to advance to doctoral practicum in the Fall of their 3rd year if the panel determines that the student has demonstrated a level of clinical skill that is appropriate for second year practicum students. If either of the cases is deemed unacceptable, a specific remediation plan will be developed by the faculty. For students entering the program without a master's degree in psychology, the Capstone Course will take the place of the more traditional master's level comprehensive examination.

Suggestions for Capstone Presentation – Therapy Case

The following is a list of basic questions to be addressed in your presentation. It is meant to be used as guide and is not exhaustive. Be sure to include supporting information from relevant literature when formulating your responses.

1. What is your prognosis for this client? What information is that based on? What recommendations would you make for a therapist receiving this client on their caseload?
2. What major theoretical approaches informed treatment? Why? What specific intervention methods were chosen for this client and why? What are some other approaches that could have been used? How might those interventions changed therapy with your client? In hindsight, what changes would you make in treating this client?
3. What rule-out diagnoses were considered? What information was used in arriving at those rule-out diagnoses and what information was used to rule out those diagnoses?
4. Were there any unusual ethical concerns and how were those addressed?
5. How were the more common ethical concerns found in almost all therapy environments addressed?
6. How did rapport affect therapy? Were there difficulties establishing rapport, and, if so, how were those overcome (or were they)? Were multicultural concerns a factor?
7. What diagnosis (or diagnoses) was rendered and why? What information was used in rendering each diagnosis? Were there sources of information you considered but did not use? Were there any sources you wanted to have access to but did not?

Suggestions for Preparing Capstone Presentation – Assessment Case

The following is a list of basic questions to be addressed in your presentation. It is meant to be used as guide and is not exhaustive. Be sure to include supporting information from relevant literature when formulating your responses.

1. What major theoretical approaches informed your recommendations? Why? What specific recommendations were chosen for this client and why? What are some other recommendations that could have been made? How might those recommendations change

the interventions strategies for your client?

2. What is your prognosis for this client? What information is that based on? What recommendations would you make for a therapist receiving this client on their caseload?
3. What rule-out diagnoses were considered? What information was used in arriving at those rule-out diagnoses and what information was used to rule out those diagnoses?
4. Were there any unusual ethical concerns and how were those addressed?
5. How were the more common ethical concerns found in almost all psychological assessments addressed?
6. How did rapport affect the assessment? Were there difficulties establishing rapport, and, if so, how were those overcome (or were they)? Were multicultural concerns a factor?
7. What diagnosis (or diagnoses) was rendered and why? What information was used in rendering each diagnosis? Were there sources of information you considered but did not use? Were there any sources you wanted to have access to but did not?
8. What assessment instruments were chosen and why? What information was anticipated from each instrument? How did the information from each instrument factor into the broader assessment picture? How appropriate was each instrument for your specific client? What instruments or assessment methods could have been used instead?
9. In hindsight, what changes (if any) would you make in assessing this client?