Child & Adolescent Treatment Practicum
Fall, Winter, Spring 2021-22

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Meeting Time: Tuesdays 10am – 12:50pm
Straub 188

Website: https://canvas.uoregon.edu/courses/188239/files

Practicum Structure and Expectations of Students:
The Child & Adolescent Treatment Practicum is a year-long training experience designed to teach best practices in treatment for common presenting problems among children and adolescents (ages 5-17), including anxiety, depression, trauma, and externalizing behavior problems. This practicum will adopt a common elements approach, utilizing the Managing and Adapting Practice (MAP) model of child and adolescent treatment. This flexible and efficient approach emphasizes the identification, selection, and practice of common elements that are utilized in evidence-based interventions. The MAP model has distilled the most common practice elements used in evidence-based interventions for child/adolescent mental health and allows clinicians to match relevant client characteristics and problem areas to evidence-based practices. The MAP framework allows students to address important clinical questions such as what practices to use, when to use them, how to know they are being done with integrity, and how to know whether they are achieving the desired outcomes.

Students will also have access to the Modular Approach to Treating Childhood Problems (MATCH) – a specific EBT. MATCH is a redesign of evidence-based treatment of common childhood problems. MATCH provides resources that can be adapted for a diverse array of children and problems, streamlining treatment to fit the child’s needs while fostering individualization to address comorbidity or therapeutic roadblocks.

Students are expected to attend and participate in weekly group training meetings, complete all assigned readings in advance of scheduled training meetings, complete any assigned exercises or assignments, attend scheduled individual supervision meetings, effectively prepare for sessions and supervision meetings, know and follow the APA ethics code, and know and follow all clinic policies and procedures outlined in the UO Psychology Clinic Policies and Procedures Manual.

Students are expected to register for a full load of practicum credits (4 credits per term), maintain enrollment for one academic year, and work up to carrying a caseload that provides an average of 4 hours per week of face-to-face client contact. Students will also meet individually with Dr. Ellingsen on a regular basis (typically weekly) to review work with clients, plan upcoming sessions, watch segments of session videos, and discuss other professional development and training issues.

During fall term, meetings will be primarily devoted to didactics. Once students have started with child/adolescent clients, part of the meeting time will be devoted to case conferences.
Case Conference Guidelines:

Expectations: These are professional presentations intended to give you practice that will build your professional skills in presenting and discussing your clinical work.

Content: Brief summary of the case, questions you would like to address with the group, video sample, and discussion

- Summary of case: 15-20 minutes in length, with power point slides
- Questions: Identify questions that reflect challenges or dilemmas with the case that will organize discussion. For example, you might identify questions related to diagnostic decisions, problems with alliance/collaboration, treatment interfering behaviors, non-response to treatment difficulties in treatment implementation, or ethical issues/dilemmas.
- Video: Select a 10-15 minute segment that informs the summary and questions for the discussion.
- Discussion: Solicit feedback and input on questions. The majority of the time should be spent in this section.

Required & Recommended Materials:

The required reading and reference materials are listed below. Additional readings may be posted on the Canvas site for Psychology 609.

Required Materials:

PracticeWise Full Access


Book chapters/articles posted on Canvas:


Recommended Materials:

Core Practicum Learning Goals & Objectives for Fall, Winter, Spring Terms:

**Knowledge:**

- Understand the general state of empirically supported psychosocial interventions for children
- Understand the origins and rationale for the common elements approach and how the common elements approach is related to evidence-based practice
- Learn treatment approaches most likely to be effective for common child/adolescent mental health disorders
- Develop awareness of diversity issues (e.g., child age, ethnicity, culture, religion, SES, gender identity, sexual orientation, family structure) that must be factored in and understood in offering services to children and their families
- Understand the APA code of ethics as it applies to work with youth and families
- Become familiar with special issues involved in working with youth and families, including developmental considerations and the incorporation of family and school systems into case conceptualization and treatment

**Assessment:**

- Ability to administer a structured diagnostic interview (i.e., K-SADS) with children and caregivers
- Ability to conduct behavioral observations both in clinic and outside (e.g., school) settings
- Ability to administer, score, and interpret relevant psychometric tests
- Ability to provide integrative feedback to youth and caregivers and collaborate in developing an appropriate treatment plan
- Ability to use standardized instruments and a clinical dashboard tool to monitor client progress and the application of practice elements

**Treatment:**

- Ability to match youth needs with practice elements and evidence-based interventions
- Ability to develop an effective therapeutic alliance and an appropriate professional stance
- Ability to implement evidence-based treatments and practices
• Ability to increase independence in treatment planning and intervention with increasing skill and experience in child evidence-based treatment and practices
• Ability to provide services in an ethical manner
• Ability to attend to and incorporate client diversity and cultural context into case formulation and intervention

Administrative/Documentation:

• Ability to integrate youth and caregiver interviews, behavioral observation of youth, and self- and caregiver-report material in an assessment report
• Ability to summarize weekly progress in a case note
• Ability to effectively summarize work with a client in a termination report

Supervision:

• Ability to conceptualize and summarize weekly sessions for supervision
• Ability to make effective use of supervision for personal development (e.g., openness to discussing difficult therapy experiences, awareness of self, willingness to try new approaches, openness to feedback, etc.)
• Ability to incorporate supervisory feedback into on-going clinical work
• Ability to integrate readings into supervision meetings and on-going work with clients
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<tr>
<th>Week</th>
<th>Topic</th>
<th>HW</th>
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<tr>
<td>1.</td>
<td>9/28 Introduction &amp; Overview</td>
<td>- PracticeWise Resource Courses</td>
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<td>- Individual Training Agreement</td>
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<td>2.</td>
<td>10/5 Initial Assessment, pt. 1: Child &amp; parent engagement K-SADS</td>
<td>- Sburlati et al. Ch. 6-10 (pp. 63-140) - Canvas</td>
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<td>10/12 Initial Assessment, pt. 2: CFI, C-SSRS Coordination with schools &amp; other providers</td>
<td>- Practice full K-SADS</td>
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<td>4.</td>
<td>10/19 CBT for Anxiety, pt. 1</td>
<td>- MATCH Anxiety Module (pp. 27-78)</td>
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<td>5.</td>
<td>10/26 CBT for Anxiety, pt. 2: School Refusal</td>
<td>- Lebowitz Ch. 1-4 (pp. 1-37) – Canvas</td>
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<td>6.</td>
<td>11/2 Exposure &amp; Response Prevention (ERP) for OCD</td>
<td>- Peris &amp; Piacentini Ch. 1-4 (pp. 1-29) - Canvas</td>
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<td>11/9 CBT for Depression</td>
<td>- MATCH Depression Module (pp. 69-141)</td>
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<td>8.</td>
<td>11/16 Trauma-Focused CBT</td>
<td>Optional: TF-CBT training</td>
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