

Keywords: *competency-based assessment, clinical psychology training*

### **Toward effective supervision in clinical psychology training**

O'DONOVAN, A. (Griffith University; The University of Queensland), HALFORD, K. (Griffith University; The University of Queensland)

There is a strong professional consensus that clinical supervision is a critical element of training in clinical psychology. However, there are significant limitations in the evidence of its effectiveness in promoting supervisee competence or positive client outcomes. This study reviews what aspects of clinical supervision influence supervisee and client outcomes, and assesses the extent to which such characteristics are represented in clinical psychology training in Australia. An extensive literature search identified 56 empirical papers on supervision, among which only 12 assessed whether clinical supervision was related to client outcomes from therapy. Postgraduate trainee experience of clinical supervision was assessed in a survey sent to all first year clinical psychology students enrolled in a clinical psychology program in Australia. One hundred and ninety students (approximately 55% return rate) returned the survey. The literature review suggested supervision has three main functions: formative (the development of supervisee skill and competency), normative (the maintenance of professional standards) and restorative (support, emotional processing and personal development). The empirical literature establishes that specific forms of clinical supervision do enhance supervisees' clinical skill development, self-efficacy and professional resilience. The process and content of supervision predicts the client-therapist working alliance, client retention in therapy and possibly client outcomes. A substantial limitation of current methods of supervision is the reliance on unreliable sources of information, particularly the verbal reports of supervisees, to assess supervisees' clinical competence and clinical outcomes for clients. The survey of current Australian clinical psychology students shows that students regard supervision as the most effective teaching method for learning clinical psychology. However, students' self-report of

therapy process is the most widely used method of monitoring the student's therapeutic competence. In contrast direct observation of student therapy, participation in co-therapy and reviews of recording of therapy by supervisors is much less frequently used. The effectiveness of supervision within clinical psychology is likely to be enhanced by more frequent direct monitoring of supervisees' competence, and attention to the contingencies on supervisors for providing the normative function of quality control over therapy delivery.

Keywords: *supervision, clinical psychology training*

### **Training in clinical psychology in regional Australia**

HELMES, E. (James Cook University)

The Australian population is concentrated in capital cities, and clinical training programs at the large urban universities tend to be better resourced than those at smaller, regional universities. It is not known whether the quality of training differs between regional and urban universities and whether students differ in their experiences during clinical training. During semester 2, 2009, first-year postgraduate clinical psychology students were surveyed. Students from 20 of the 35 universities provided responses, with 29% of the 190 students being from regional universities. Survey questions covered ratings of the quality of training, teaching methods used, effectiveness of teaching methods, responsiveness to student needs, assessment methods used in the program and their effectiveness, monitoring of therapeutic work and therapy workloads, exposure to clinical research, clinical supervision, and overall workload and stress levels. Comparisons were made between urban and regional universities on the 55 items that were surveyed. As an exploratory study, two-tailed tests with  $\alpha = .05$  were used. Five items showed differences between urban and regional training programs. Students rated the effectiveness of lecturers using their own clinical cases as higher among urban training programs, and also the use of portfolios of client work as an assessment method. Students at urban universities were also monitored by video tape recordings more

frequently and exposed to clinical research of their teachers more frequently. Finally, students at urban universities were significantly less likely to consider a placement in a rural setting compared to those at regional universities. At best, students indicated a moderate interest in undertaking a placement in a rural setting. Overall, there were more similarities between urban and regional training programs than there were differences. Where there were differences, they tended to favor the urban universities in terms of training that was illuminated by both clinical work and clinical research of the teaching staff. Such differences are also associated with the other resources available in larger universities. Nonetheless, the lack of differences in perceived quality of training and the majority of other aspects suggest that training across Australian universities is largely comparable in both urban and regional environments.

*Keywords: urban, regional, training, clinical*

### **Online provision of psychological services by trainee clinical psychologists: A model, initial experiences and implications for defining competence in electronic service provision**

MURRAY, G. (Swinburne University), KYRIOS, M. (Swinburne University)

E-therapy is a federally-supported modality of psychological service provision, as exemplified by Anxiety Online ([www.anxietyonline.org.au](http://www.anxietyonline.org.au)), based at Swinburne University of Technology and launched in November 2009. E-therapy raises many issues for the training of clinical psychologists, particularly in relation to defining competencies for electronic modalities of service delivery. In this context, the present paper aims to introduce and critically discuss Anxiety Online as a placement for clinical psychology trainees. Literature on the evidence base for e-therapies is reviewed, with a focus on data showing that therapist-assisted online CBT treatments may be superior to self-help versions. The Anxiety Online model will be introduced in detail, and the steps taken to roll out Anxiety Online through clinical psychology programs discussed. Data from the first 6 months of

operation of the service will be presented. There is strong evidence for the efficacy of online CBT for anxiety and other emotional disorders, especially when the client/patient has access to an online therapist to assist their progress through treatment. Similarly, there are strong a priori grounds for arguing that a range of clinical competencies can be developed through trainees' participation as therapists in such programs. The federal Department of Health and Ageing has recognized this service provision/training synergy in the large-scale funding of Anxiety Online. However, the relevant accrediting bodies (e.g. APAC, the APS College of Clinical Psychologists) do not have fully formed positions on electronic service provision. Clinical placements with Anxiety Online are currently recognized as client contact hours by the Counselling College, but as "other placement hours" by the Clinical College. Guidelines for describing competencies that are (and are not) developed by online therapy provision are urgently required. One challenge facing Clinical Psychology training in Australia over the next decade is to engage with the reality of online service provision. Fortunately, there is momentum around this issue nationally. The scrutiny of Anxiety Online from various perspectives (government, the profession, the university sector, and the public) provides a unique opportunity to open up and rapidly progress debate on the clinical psychology competencies that are demanded by, and trained through, online therapy.

*Keywords: online therapy, competencies, training, e-therapy*

### **Can Problem Based Learning integrate the junkyard curriculum in clinical psychology?**

BAILLIE, A. (Macquarie University, University of New South Wales), PROUDFOOT, H. (Macquarie University, University of New South Wales)

Problem Based Learning (PBL) is a constructivist educational method that originated in the undergraduate medical program at McMaster University and has become popular in medical education. The key features of the method are that teaching takes place in small groups focused on realistic