

ORIENTATION MANUAL

**La Sierra University
School Psychology & Counseling Department**

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Introduction

This manual is intended to provide not only an introduction, but also an overview of the various school psychology and counseling programs offered at La Sierra University. It is also a guide to the steps that you will need to complete throughout your individual programs whether it is for a master's degree, a specialization in education degree, or a doctoral degree.

Please review the information carefully in this orientation manual, and pay particular close attention to the deadline dates for the various application processes. Also in this manual you will find information that can assist you with becoming a nationally certified school psychologist or a licensed educational psychologist if these are objectives that you want to achieve after you complete your program with us.

Mission Statement

The Department of School Psychology and Counseling seeks to provide competencies for numerous careers in educational and psychological helping services. School counselors and school psychologists develop specialized knowledge and skills for the identification and correction of learning disabilities and for the facilitation of academic, personal, and social development in children, adolescents, and adults at all levels of education.

Counseling

The master of arts degree in counseling is generally a 45-unit program. If a student is wanting to obtain a PPS credential in School Psychology and/or is pursuing the Ed.S. in School Psychology in conjunction with the PPS credential, he or she must take the following prerequisite:

EDPC 460/560 *The Exceptional Child*

The Master of Arts degree at La Sierra University, on its own, does not lead to state certification in *School Counseling*. However, if a student is interested in obtaining both a master's degree as well as state certification in *School Counseling*, a recent collaborative agreement between our university and the University of California at Riverside (UCR) has been established and can offer this "combined" emphasis. In that UCR does not offer a master's degree for their school counseling students and our university does not offer enough courses to provide *School Counseling* state certification, we have recently joined forces to offer both options to any student interested in receiving this combined package. If a student is interested in a master's degree with a state certification in *School Counseling*, he or she must make sure that the courses taken at both UCR and LSU are coordinated successfully towards this end.

School Psychology

La Sierra University offers a Specialist in Education degree in *School Psychology* as well as a Doctoral Degree in *School Psychology and Measurement*.

The Specialist in Education degree for *School Psychology* leads to state certification in *School Psychology*. That is, this degree provides for all of the requirements specified by the state of California for the Pupil Personnel Services (P.P.S.) credential (with authorization in school psychology). It is this credential that entitles an individual to work in the state of California as a school psychologist. School psychologists work primarily in school settings and are considered essential in determining the special educational needs of the students that they serve.

In the state of California, in order to be eligible for a P.P.S. credential (with an authorization in school psychology), an individual must complete two years of graduate coursework (post-BA), to include 450 hours of practicum or field practice experience, as well as complete a 1200-hour internship. Normally, the internship is initiated after a student has actually received his or her Ed.S. degree in *School Psychology*.* Once the internship is completed, a student can then apply for a P.P.S. credential.

A doctoral degree in School Psychology and Measurement may give a person greater opportunities in terms of university teaching and/or research-related positions. Some benefits in terms of pay scale as a working school psychologist may also be noted in that many school districts offer doctoral stipends.

*Periodically students come into our programs wanting to work on only a P.P.S. credential, not an Ed.S. degree in addition to a P.P.S. credential. For example, they may have other graduate degrees in similar fields such as a master's degree in social work or a doctoral degree in clinical psychology. Keep in mind that an Ed.S. degree is not necessarily required for employment as a school psychologist. It is not the degree that is as important as the number of graduate units completed, a 450-hour practicum, and a 1200-hour internship. However, for an individual coming to LSU with only a bachelor's degree, obtaining both a M.A. and Ed.S. degree would certainly make you the most marketable for employment as a school psychologist.

Educational Psychology

The Specialist in Education degree in *Educational Psychology* is a non-credential elective program. Educational psychologists are interested in finding ways to make the learning process more productive overall. That is, educational psychologists often work to discover the most effective ways to enhance attention, concentration, memory-related processes, and learning in general. They may work in school settings, but they can also work in other settings such as industry and government. Oftentimes, educational psychologists work as theorists and researchers whereas school psychologists are more likely to be seen as practitioners in school settings.

Again, please note that a doctoral degree is often required in university teaching positions and also may be helpful in obtaining research-related jobs.

National Certification as a School Psychologist

A person after completing his or her internship, and after receiving his or her P.P.S. credential, can also apply to become a nationally certified school psychologist (NCPS).

The National Association of School Psychologists (NASP) has created a National School Psychology Certification System (NSPCS) to help credentialed school psychologists achieve a nationally recognized standard. This certification process is under the direction of the National School Psychology Certification Board (NSPCB).

It is recognized that in many professional programs a broad range of credentialing standards exist between states. This has brought about the need to develop a nationally recognized standard. Although this process can make reciprocity between states perhaps easier to obtain, it does not guarantee that this will always occur. In fact, even the NSPCB states that "It is not the intent of the NSPCB to certify school psychologists for employment nor to impose personnel requirements on agencies and organizations. Rather, the intent is to provide a national standard that can be used as a measure of professionalism by interested agencies, groups and individuals" (NASP, 2006). This particular NASP statement can be found at the following website: http://www.nasponline.org/certification/ncsp_system.html

Currently, 26 states use NCSP as part of their standards for state certification. California is currently not one of them. The states that currently use NCSP as part of their state certification process are: Alabama, Alaska, Colorado, Delaware, Florida, Georgia, Indiana, Iowa, Louisiana, Maine, Maryland, Massachusetts, Montana, Nevada, New Hampshire, New Jersey, New Mexico, Oklahoma, Oregon, South Dakota, Texas, Utah, Vermont, Virginia, Washington, and Wyoming. For more information here, consult the following website: <http://www.nasponline.org/certification/statencsp.html>

In general, a summary of the certification requirements for national certification is provided below. For more information regarding this process, please consult the following website: www.nasponline.org/certification/ncsp_system.html

1. *Program.* Completion of 60 graduate semester/90 quarter hours of study through an organized program of study that is officially titled "School Psychology." *At least 54 graduate semester/81 graduate quarter hours must have been exclusive of credit for the supervised internship experience.*
2. *Internship:* Successful completion of a 1200-hour internship in school psychology, of which at least 600 hours must be in a school setting. The department requires 800 hours, however. *The internship must be recognized through institutional (transcript) documentation. Until December 31, 1994, internships with institutional documentation are accepted. Individuals who graduate prior to December 31, 1994 from a training program that does not offer a 1200-hour internship may complete a Field-Based Internship.*

3. *Examination.* Applicants must achieve a passing score (165) on the National School Psychology Examination administered by the Educational Testing Service. *Test scores remain valid for five (5) years after the test. Test scores older than five (5) years are considered expired and would require the re-taking of the examination.*
4. *Non-NASP Approved Programs.* If you attended a school psychology program that was not NASP-approved at the time of your graduation, you are required to submit four complete copies of your entire application and portfolio. *This includes all supporting documentation (e.g., syllabi, course descriptions, transcripts).*

Licensed Educational Psychologist

An individual who desires such a license must possess a minimum of a master's degree in "psychology, educational psychology, school psychology, or counseling and guidance, or a degree deemed equivalent" by the Board of Behavioral Sciences through the state of California (Board of Behavioral Sciences [BBS], 2006).

The individual must "furnish proof of three years of full-time experience as a credentialed school psychologist in the public schools or experience which the board deems equivalent" (BBS, 2006). However, if an individual has worked as a school psychology intern for one year in a public school system—in an accredited internship, this time can be allotted towards this three-year requirement. The individual must have at least one year of "supervision" in an accredited school psychology program. Our university internship will fulfill this supervisory requirement.

Once the above criteria are met, an individual is eligible to sit for his/her licensing (LEP) exam. The LEP examination covers five content areas: assessment, intervention, consultation, law, and ethics.

For more information on the licensing process, please consult the following website: <http://www.bbs.ca.gov/law-reg.htm> or contact the Board of Behavioral Sciences directly: (916) 574-7830. Their address is as follows: Board of Behavioral Sciences, 1625 North Market Blvd., Suite S-200, Sacramento, CA 95834.

Length of Programs

A number of students completing the Master of Arts degree in *Counseling* are primarily interested in completing the Ed.S. degree in *School Psychology*. In such cases, the master's degree is awarded after the first year of coursework is completed (which includes a few summer courses). The Ed.S. degree is completed in the second year (again, summer courses will be taken as well). The third year is reserved for the actual internship itself.

The department strongly advises students to focus on courses applicable to the master's degree first. This will allow students to obtain their master's degree as quickly as possible. This could be helpful for employment purposes. After the master's degree is awarded, students can then focus on their second year courses, which are applicable to the Ed.S. degrees. Please

understand that the first-year courses tend to focus on many theory and foundational learning courses whereas the second-year courses tend to focus on more practical, hands-on courses. If you take courses out of sequence, you may not fully understand some of the learning experiences intended.

Please note that students who are interested in an Ed.S. degree in *School Psychology* as well as a P.P.S. credential, who also already possess an intact master's degree in school counseling or another relevant counseling field from another institution, if all requirements are met, may only need to complete the second year of coursework for the Ed.S. program at La Sierra University. If an individual is only interested in a P.P.S. credential (and not the Ed.S. degree in addition to the credential), the number of courses required may even be reduced further.

A doctoral degree is another 42 units (12 of these units are for the dissertation) after the completion of an Ed.S. degree or 90-unit program. The 42 units for the doctoral degree normally takes 1-2 years for a student to complete depending on the speed of the dissertation process.

Application to Programs

The application fee is waived if you apply on-line. Go to the following website: www.lasierra.edu. Under the link section, select "Apply for Admission" and then make sure you choose the graduate application section.

Regular vs. Provisional Acceptance

The School Psychology and Counseling Department at La Sierra University examines several areas in order to determine whether or not a student will be admitted to one of its programs. Of most importance are your undergraduate and previous graduate GPA's for the Ed.S. degree.

The graduate bulletin states that regular status is given to a student who meets all admission requirements and is registered for a curriculum leading to a degree or credential. Provisional status is given to a student whose grade point average does not reach the level for regular standing but who otherwise fully meets admission requirements at the time of the Admissions Committee action. Provisional status is reviewed on a quarter-by-quarter basis up to three quarters or 12-quarter units. To change classification to regular standing, a student's file must be completed and/or the required grade point average must be achieved and maintained.

Dismissal Policy

The graduate bulletin outlines the School of Education's dismissal policy as also noted here. Believing that our primary responsibility is the protection and support of students in the K-12 system, the School of Education expects all students to exhibit a high level of professional ethics. The faculty in the School of Education has voted the following policy: *The department faculty reserves the right to use its collective professional judgment in the evaluation of a student's professional readiness to enter an educational profession. If in its professional judgment the faculty decides that a student is unqualified for that profession, the student will be asked to withdraw from the program. The decision will be based on professional ethical codes applicable for various counseling and professional psychology-related careers.*

In every profession, there are signs that someone is performing at an inappropriate level. An occasional infraction is not generally a cause for concern. However, if there is a long-term pattern, appropriate steps may be taken.

Causes for automatic dismissal include but are not limited to violence, sexual harassment, drug abuse, academic dishonesty, and other criminal activity. Causes which cumulatively will be cause for dismissal include but are not limited to poor grooming or slovenliness, poor use of time, tardiness, excessive absences, lack of initiative or interest in work, inability to get along with (or poor communication) with other professionals (including fellow student peers), failure to respond to suggestions, excessive fear or shyness, inappropriate confrontational behavior or expressions of anger, unrealistically high or low expectations of the students you are working with (or inappropriate causal assumptions), tendency to gossip about students or other professionals, inaccurate record keeping, ineffective classroom control, breach of confidentiality, and/or dishonesty.

If, during the student's course of study, the Department of School Psychology and Counseling observes academic limitations, documented behaviors, and/or personality/characterological limitations that are inconsistent with the professional expectations for a graduate of the program, it will be necessary for the student to withdraw from the program. More specifically, students are rated in the four following areas every quarter: general academic ability, personality traits/social skills consistent with practicing counseling/psychology, in-class behavior and maturity, and ethics and professionalism.

Application for Program Advancement

Please keep in mind that acceptance into the M.A. in Counseling does not ensure that you will be automatically advanced to the Ed.S. in School Psychology. New students will now need to formally apply for program advancement. The department will examine a number of variables to ensure that you will be able to successfully meet the challenges as a school psychologist to include grade point average, critical thinking and organizational skills, writing ability, as well as other professionally-related variables (e.g., the ability to work well with others, adaptive conflict resolution skills, a well developed internal locus of control, a strong ethical foundation, and a life-long willingness to learn and grow both professionally and personally—which includes a positive stance on constructive/critical feedback and the ability to profit from experience, etc.).

Please also understand that the department will solicit feedback from regular faculty as well as adjunct faculty in making any final decision regarding program advancement. The application form is available from the department secretary.

Ethical Principles and Code of Conduct

Ethical guidelines are a two-way street. Not only do we expect our students to work as ethically and responsibly as possible when working with others, but faculty must also model the same high standards of behavior.

American Psychological Association. The current *Ethical Principles of Psychologists and Code of Conduct* for the American Psychological Association (APA), as it relates to education and training programs, is listed below. Each faculty member in this department takes these principles seriously and presents them for your review. For more information on the complete Code of Ethics for the APA, please consult the following website: www.apa.org/ethics/code2002.html

Design of Education and Training Programs

Psychologists responsible for education and training programs take reasonable steps to ensure that the programs are designed to provide the appropriate knowledge and proper experiences, and to meet the requirements for licensure, certification, or other goals for which claims are made by the program.

Descriptions of Education and Training Programs

Psychologists responsible for education and training programs take reasonable steps to ensure that there is a current and accurate description of the program content (including participation in required course- or program-related counseling, psychotherapy, experiential groups, consulting projects, or community service), training goals and objectives, stipends and benefits, and requirements that must be met for satisfactory completion of the program. This information must be made readily available to all interested parties.

Accuracy in Teaching

(a) Psychologists take reasonable steps to ensure that course syllabi are accurate regarding the subject matter to be covered, bases for evaluating progress, and the nature of course experiences. This standard does not preclude an instructor from modifying course content or requirements when the instructor considers it pedagogically necessary or desirable, so long as students are made aware of these modifications in a manner that enables them to fulfill course requirements.

(b) When engaged in teaching or training, psychologists present psychological information accurately.

Student Disclosure of Personal Information

Psychologists do not require students or supervisees to disclose personal information in course- or program-related activities, either orally or in writing, regarding sexual history, history of abuse and neglect, psychological treatment, and relationships with parents, peers, and spouses or significant others except if (1) the program or training facility has clearly identified this requirement in its admissions and program materials or (2) the information is necessary to evaluate or obtain assistance for students whose personal problems could reasonably be judged to be preventing them from performing their training- or professionally related activities in a competent manner or posing a threat to the students or others.

Mandatory Individual or Group Therapy

(a) When individual or group therapy is a program or course requirement, psychologists responsible for that program allow students in undergraduate and graduate programs the option of selecting such therapy from practitioners unaffiliated with the program.

(b) Faculty who are, or are likely to be, responsible for evaluating students' academic performance do not themselves provide that therapy.

Assessing Student and Supervisee Performance

(a) In academic and supervisory relationships, psychologists establish a timely and specific process for providing feedback to students and supervisees. Information regarding the process is provided to the student at the beginning of supervision.

(b) Psychologists evaluate students and supervisees on the basis of their actual performance on relevant and established program requirements.

Sexual Relationships With Students and Supervisees

Psychologists do not engage in sexual relationships with students or supervisees who are in their department, agency, or training center or over whom psychologists have or are likely to have evaluative authority.

American Counseling Association. Regarding the Code of Ethics for the American Counseling Association (ACA), as it relates to education and training programs, the criteria are listed below:

Sexual Relationships With Students or Supervisees

Counselors must not engage in sexual relationships with their students and supervisees.

Credit for Contributions to Research

Counselors must give credit to students or supervisees for their contributions to research and scholarly projects.

Supervision Preparation

Counselors who offer clinical supervision services must be trained and prepared in supervision methods and techniques.

Evaluation Information

Counselors must clearly state to students and supervisees in advance of training the levels of competency expected, appraisal methods, and timing of evaluations. Counselors must provide students and supervisees with periodic performance appraisal and evaluation feedback throughout the training program.

Peer Relationships in Training

Counselors must make every effort to ensure that the rights of peers are not violated when students and supervisees are assigned to lead counseling groups or provide clinical supervision.

Limitations of Students and Supervisees

Counselors must assist students and supervisees in securing remedial assistance, when needed, and must dismiss from the training program students and supervisees who are unable to provide competent service due to academic or personal limitations.

Self-Growth Experiences

Counselors who conduct experiences for students or supervisees that include self-growth or self-disclosure must inform participants of counselors + ethical obligations to the profession and must not grade participants based on their nonacademic performance. (See F.3.b.)

Standards for Students and Supervisees

Students and supervisees preparing to become counselors must adhere to the Code of Ethics and the Standards of Practice of counselors.

For more information on the complete Code of Ethics for the American Counseling Association, please consult the following website: www.cacd.org/codeofethics.html#sf

Experiential Classroom Activities

The School Psychology & Counseling Department feels that counselors should be able to recognize that human development and psychological growth is a lifelong process and that no individual can ever come to a point where there is nothing left to learn in life especially as it relates to understanding oneself or others.

Successful counselors often nurture the following attributes: self-awareness or self-knowledge, self-growth, an internal locus of control, psychological and physical health (understanding the connection between the two), trustworthiness, honesty, strength, warmth, active responsiveness, patience, sensitivity, tolerance, holistic awareness, and professional advancement in terms of various skills and competency levels.

Counselors will be able to teach only what they themselves have learned. Their self-understanding therefore must be rich and multidimensional. Thus, counselors should always work to become comfortable with their own self-development process. Countertransference issues should always be examined and addressed in healthy ways.

Please understand that as a student counselor in training, you will be encouraged to examine your own countertransference issues as they emerge in the classroom as well as take risks in terms of various psychological growth processes. The process overall may feel quite uncomfortable at first, but it is only through honest self-examination that an individual can fully mature as a counselor. It is hoped that you will thoughtfully use these opportunities to challenge yourself to grow as a counselor.

Please also understand that this program will ask you to participate in experiential growth processes whether it is co-facilitating a group process with your peers, testing a student or young adult, taking an assessment inventory, counseling an adolescent or adult, or as noted above, asking you to become aware of your own countertransference issues in a classroom setting or in individual supervision.

Having stated the above, however, it is possible that a particular student may feel especially vulnerable self-revealing in an experiential group process with his or her peers. The professor of the course should always give all of his/her students the opportunity to role-play clients with presenting problems versus actual presenting their own personal issues. In such situations, students will be asked to make the role-play as real as possible so as to invoke the greatest amount of learning possible.

Please also keep in mind that you will be exposed to a variety of clinical experiences in your program. In your counseling and assessment courses especially, different therapeutic modalities, interpretational styles, as well as different writing formats will be presented. The important thing to take from these experiences is that there are many “right” ways of doing things. Our department will expose you to a variety of styles, however, keep in mind that some unified school districts will dictate certain standards, such as what elements are required in a psychoeducational report. Regardless, in the end, you must be able to justify your rationale for using the styles or approaches that you ultimately choose to use.

California Basic Educational Skills Test (CBEST)

In order for students to collect field practice and/or internship hours towards a PPS credential in School Psychology, a passing score on the CBEST must be obtained by the 2nd year of coursework when field practice experiences are scheduled to begin. Periodically, a student may have difficulties passing the CBEST. It is best to bring this to the attention of your advisor so that any needed assistance can be provided regarding studying for the CBEST. The CBEST is an exam that covers three general areas: reading, mathematics, and writing. The test authors note that a total score of 123 among these three subtests is required in order to pass the CBEST.

A passing score for each separate subtest is 41. If a person fails to achieve a combined passing score of 123 on the CBEST, but he or she is able to pass a subtest or two, then only the failed subtests have to be re-taken. However, it may be wise to re-take the test in its entirety in that it is the combined score of 123 that is ultimately required for passing. For more information on the actual test itself, consult the following website: www.cbest.nesinc.com.

Field Practice

Certificate of clearance. A student should apply for a “Certificate of Clearance” from the California Commission of Teacher Credentialing (CCTC) early in his/her program (sometime during the first year of coursework in the M.A. in Counseling program). Applying for this clearance early in the program will ensure that the student is ready for his/her field practice.

The forms for the “Certificate of Clearance” can be obtained from the School of Education’s credential analyst, Sylvia Gallegos. These are the items you must submit:

- Application for Character and Identification Clearance Form [41-CIC]
- Request for Live Scan Service Form [41-LS]
- Current Processing Fee

Field practice application. In order to be cleared for field practice, you will have to first apply for field practice through our departmental secretary. Towards this end, you will need the following documentation:

- CCTC Certificate of Clearance
- Passing Score on the CBEST
- TB Health Clearance

Please fill out your *Application for Field Practice* to the department at least ***one quarter*** in advance to the department.

International students. If a field practice is going to take place off campus, you must submit the appropriate paperwork to International Student Services office. Please keep in mind that you CANNOT work off campus until your request to do so is cleared by this office. Your point of contact is the International Office. Here are the steps involved:

1. The department must provide a letter regarding your situation.
2. The placement site must provide a letter of your placement. It should discuss your responsibilities with that school, the address where the hours will be collected, and the start/end dates of the placement.
3. The form “Academic Adviser Recommendation for Curricular Practical Training” must be filled out by the department and submitted to the office of International Student Services.
4. You must fill out the form called, “Request for Academic Load Validation.” This form must be filled out EVERY quarter. Please note that even though this form states that you should turn the form in to the registrar’s office, you must actually turn it in to Natan Vigna. You must register for at least three units each quarter.
5. On one of the forms it will be noted that 3 units will be considered full-time status for you.
6. International Student Services will then fill out a new I-20 and within 24-48 hours the placement can occur. You should NOT start work until this office has the new I-20 in their hands.

Field practice manual. Make sure that you obtain a *Field Practice in Counseling Manual* (first-year, master level students) or a *Field Practice in School Psychology Manual* (second-year, Ed.S. level students) before actually beginning your field practice.

It is extremely important that you do ***not*** collect field practice hours before registering for at least one unit of field practice. Even after registering for at least one unit of field practice (EDPC 568 or EDPC 675), do ***not*** collect field practice hours until you sit down with the program director to go over your specific field practice manual in detail.

Candidacy Process

An application to candidacy should be filled out and submitted after completing 27-30 units of each program sought. The *Application to Candidacy* can be obtained from our departmental secretary. The purpose of the application for advancement to candidacy is for the department to review the student’s eligibility and progress for completing the program.

Graduation Application

According to the graduate bulletin, a student should apply for graduation about two quarters prior to the June graduation or to the completion of the program. Thus, the application

should be submitted sometime early in the winter quarter at the latest. The *Application for Graduation* form can also be obtained from our departmental secretary.

Departmental Exit Exam

The departmental exit exam for the Master of Arts degree in *Counseling* is the *School Guidance and Counseling* exam in the Praxis series (test code 0420). The exam is two hours in length and examines four content categories: counseling and guidance, consulting, coordinating, and professional issues.

The exit exam for the Ed.S. degree in *School Psychology* is the *School Psychologist* exam in the Praxis series (test code 0400). The exam is also two hours in length and examines five content categories: diagnosis and fact finding, prevention and intervention, applied psychological foundations, applied educational foundations, and ethical and legal considerations.

The Praxis test authors have set a minimum passing rate of 165 on both of these exams. Please note that in order to be eligible for the national certification in school psychology, a minimum score of 165 must be earned on this exam. That is, for the *School Psychologist* exam, the National Association of School Psychologists (NASP) requires a minimum passing score of 165 as well. National certification as a school psychologist can make a career move to another state much easier to achieve. If you will recall, 26 states use NCSP as part of their standards for state certification. Our departmental passing rate for the exit exam is 165 as a result.

For the Ed.S. in Educational Psychology, students have the option of taking either the Praxis *School Psychologist* exam or a departmental written comprehensive exam.

For the doctoral comprehensive exams, departmental written exams are created and given to students. The comprehensive exams are scored independently by at least two faculty members within the department. Students are required to re-submit responses if previous responses are found to be unsatisfactory on any level.

Please note that a student must obtain a passing score on the exit exam in order to eventually obtain his/her diploma for any degrees sought at La Sierra University.

Portfolio Requirement

Some unified school districts now require portfolio submissions when applying for a field practice or an internship, especially paid internships. As a result, each student earning a degree in the School Psychology and Counseling Department at LSU must submit a portfolio to the department. The portfolio should be submitted at the department exit interview in the Spring. If a student is planning to work on both a master's and specialist in education degree at LSU, he or she need only submit one cumulative portfolio.

The portfolio must be submitted electronically or on a DVD.

If a student is planning on obtaining only a master's degree from our department, the following portfolio submissions are required: 1) a resume/vitae, 2) a complete case study, 3) research or theoretical paper, and 4) a prevention/intervention strategy in an at-risk area (e.g., school violence or teenage pregnancy). If a student is planning on obtaining both a M.A. and Ed.S. degree from the department, in addition to the above, the following portfolio submissions are required: 1) a "complete" psychoeducational report (minus identifying data), and 2) a functional assessment analysis (FAA) and resulting behavioral intervention plan (BIP) (again, minus identifying data). It is exceptionally important to remove all identifying data that might betray the confidentiality of the youth being assessed. Also, please turn in *corrected* copies from your courses not your *original* submission. These assessment pieces should display your "best work" in the field. This is a "showcase" portfolio, and it should again identify your best work at the master's and educational specialty level.

Please, yet again, note that the portfolio should be a reflection of the graduate student's *best* work in his/her specific graduate program.

A student must turn in an acceptable portfolio in order to receive his/her diploma. Each portfolio is examined by at least the Program Director after the course instructor has provided instructional feedback. A written evaluation of the portfolio is given to each student submitting a portfolio and whether or not adjustments in the submission need to take place.

Departmental Exit Interview and Survey

The department has two exit assessment protocols. One is a departmental interview and the other an anonymous exit survey. Students are asked anonymously to fill out an exit survey after they have completed their programs. The information examines strengths and weaknesses of the program and allows data to be collected for annual program reviews. The program director or an assigned faculty member also conducts departmental exit interviews individually with graduating students in order to determine the strengths and weaknesses of the program as well. This process allows for more specific follow-up questions if program weaknesses are identified. Remember that your portfolio is due at this interview.

Internship

When a student completes his/her coursework for both the M.A. in Counseling and the Ed.S. in School Psychology, he or she can begin a search for an internship. At the completion of an internship the student is eligible to apply for his/her PPS credential in School Psychology and is thus eligible to become a school psychologist.

The 1200-hour internship requires that a school psychology intern, in conjunction with his/her assigned university intern supervisor as well as field supervisor (on-site school supervisor), create an *Intern Personal Program Plan*. This plan is considered a contract between all parties concerned (the intern, the university supervisor, and the field supervisor) and specifically outlines the duties that the school psychology intern will perform at his/her

internship site. At least two of three settings are required (elementary, middle, or high school) for a minimum of 800 of the 1200 hours required.

In the school district where the internship is sought, the school district must agree to provide regular supervision to the school psychology intern. Regular supervision is defined as a minimum of *two hours of direct, face-to-face* contact a week. In addition, please note that only a credentialed school psychologist, one who has at least two years of experience as a credentialed school psychologist, can provide this supervision.

The university must also provide a minimum of *three hours of individual and group supervisory/training sessions* on campus at least once quarterly—the standard is no less than 12 hours for the entire internship regardless of whether the university is on a quarter or semester system.

When an internship is agreed upon between a student and a unified school district, a student will then need to apply for a university intern credential through CCTC. This is especially important for a paid internship. The application process is initiated through the university's credential analyst—Sylvia Gallegos. A student needs the unified school district's assigned school code in order to apply for a university intern credential. Please note that if, for any reason another internship site is eventually pursued by the student, a new university intern credential must be sought in that the university intern credential is school-site specific.

For more information on the internship process, please consult the *School Psychology Internship Manual*. This manual is available on-line on the School Psychology and Counseling main website.

Paid Internships

A number of paid internships are available in the surrounding area. The Riverside Unified School District offers one paid internship at and the Los Angeles Unified School District (LAUSD) normally offers between five and eight paid internships. The LAUSD, by far, offers the highest paid internships. A number of internships are available in a number of other unified school districts ranging from \$20,000 to \$40,000. Please note that paid internships are exceptionally competitive. However, at least one-third of our students over a two-year period have been able to secure paid internships. This is especially significant in that only a fraction of our students actually apply for paid internships—for a variety of reasons. For example, our Loma Linda students (students who are working on clinical psychology at Loma Linda University and working on school psychology credentials at LSU) have pre-arranged non-paid internship sites in San Bernardino.

Additional Experiences

Despite the completion of an internship, please note that the department reserves the right, in consultation with your field supervisor and your university supervisor, to require additional internship hours and/or appropriate remedial work should you fail to develop the necessary skills required to become a successful school psychologist. Consult the Internship Manual for more specifics here.

Employment Postings

In California, paid internships as well as school counselor and school psychologist job listings are posted on-line at Edjoin. The official website is: www.edjoin.org. Please consult this website from time to time to get a sense of the job opportunities out there as well as pay scales offered.

Professional Resume

A professional resume/vitae should be included in your portfolio. Please consult the Appendix A and Appendix B for appropriate resumes (internship and subsequent school psychologist resumes).

APPENDIX A
[Internship Resume Example]

Your Name Here
Street Address
Riverside, CA 92515
Phone Number: (951) 555-5555
E-mail: yournamehere@yahoo.com

OBJECTIVE

Professional Goal: Position as a Credentialed School Psychologist
Current Objective: School Psychology Internship (in order to complete a P.P.S. credential)

EDUCATION

La Sierra University (Riverside, CA)

- **Specialist in Education/School Psychology** (*June, 2006*)
- **Master of Arts/Counseling** (*June, 2005*)

Andrews University (Berrien Springs, MI)

- **Bachelor of Science/Psychology** (*June, 2004*)

EDUCATIONAL HONORS

Andrews University, B.S. in Psychology

- **Summa Cum Laude, Academic Distinction with Honors** (*June, 2004*)

PROFESSIONAL EXPERIENCE

- School Psychology Practicum/Field Practice (450-hours)
- Riverside Unified School District (Kennedy Elementary & Sierra Middle Schools)

Assessment

- ✓ Conducted comprehensive initial and triennial evaluations, which involved the administration and interpretation of various ability, achievement, processing, psychosocial, and behavioral tests.
- ✓ Performed several functional assessment analyses as well as developed a number of subsequent behavioral intervention plans.
- ✓ Facilitated several student study team (SST) and individualized educational plan (IEP) meetings.

Consultation

- ✓ Provided behavioral consultation to both regular education and special education teachers.

Classroom Presentations

- ✓ Conducted several classroom presentations on study skills, social skills, and conflict resolution management.

Prevention/Intervention Projects

- ✓ Presented an in-service on school violence to Sierra Middle School teachers. In this presentation, the primary focus was on: 1) identifying at-risk youth, and 2) promoting the use of effective research-based prevention/intervention models.

Counseling

- ✓ Participated in a number of student crisis interventions in both the elementary and middle school settings.
- ✓ Provided individual as well as group counseling services to identified at-risk youth representing a diverse range of ethnic groups.

PROFESSIONAL DEVELOPMENT

- Attended the California Association of School Psychologists (CASP) convention (*Monterey, CA—Feb, 2006*).
- Attended the National Association of School Psychologists (NASP) convention (*Anaheim, CA—Mar, 2006*).
- Received a Certificate of Completion for an on-line course entitled, “*Bipolar Spectrum Disorders: Diagnosis and Pharmacologic Treatment*” by John Preston, Psy.D., ABPP for 3 credit hours (*Mar, 2006*).

PROFESSIONAL MEMBERSHIPS

- American Psychological Association (APA)
- American Counseling Association (ACA)
- California Association of School Psychologists (CASP)
- National Association of School Psychologists (NASP)

REFERENCES

- References will be supplied upon request.

APPENDIX B
[School Psychologist Resume Example]

Your Name Here
Street Address
Riverside, CA 92515
Phone Number: (951) 555-5555
E-mail: yournamehere@yahoo.com

OBJECTIVE

Professional Goal: Licensed Educational Psychologist

Current Objective: Employment as a School Psychologist in the Moreno Valley Unified School District

EDUCATION

La Sierra University (Riverside, CA)

- **Pupil Personnel Services Credential** (*June, 2006*)
- **Specialist in Education/School Psychology** (*June, 2005*)
- **Master of Arts/Counseling** (*June, 2004*)

Andrews University (Berrien Springs, MI)

- **Bachelor of Science/Psychology** (*June, 2003*)

EDUCATIONAL HONORS

Andrews University, B.S. in Psychology

- **Summa Cum Laude, Academic Distinction with Honors** (*June, 2003*)

PROFESSIONAL EXPERIENCE

- School Psychology Internship (1200-hours); Riverside Unified School District—Lincoln High School (*Sept, 2005 - June, 2006*)
- School Psychology Practicum/Field Practice (450-hours); Riverside Unified School District—Kennedy Elementary & Sierra Middle Schools (*June, 2005 - Sept, 2005*)

Assessment

- ✓ Conducted comprehensive initial and triennial evaluations, which involved the administration and interpretation of various ability, achievement, processing, psychosocial, and behavioral tests.
- ✓ Performed several functional assessment analyses as well as developed a number of subsequent behavioral intervention plans.
- ✓ Facilitated several student study team (SST) and individualized educational plan (IEP) meetings.

Consultation

- ✓ Provided behavioral consultation to both regular education and special education teachers.

Classroom Presentations

- ✓ Conducted several classroom presentations on study skills, social skills, and conflict resolution management.

Prevention/Intervention Projects

- ✓ Presented an in-service on school violence to Sierra Middle School teachers. In this presentation, the primary focus was on: 1) identifying at-risk youth, and 2) promoting the use of effective research-based prevention/intervention models.

Counseling

- ✓ Participated in a number of student crisis interventions in both the elementary and middle school settings.
- ✓ Provided individual as well as group counseling services to identified at-risk youth representing a diverse range of ethnic groups.

PROFESSIONAL DEVELOPMENT

- Attended the California Association of School Psychologists (CASP) convention (*Monterey, CA—Feb, 2006*).
- Attended the National Association of School Psychologists (NASP) convention (*Anaheim, CA—Mar, 2006*).
- Received a Certificate of Completion for an on-line course entitled, “*Bipolar Spectrum Disorders: Diagnosis and Pharmacologic Treatment*” by John Preston, Psy.D., ABPP for 3 credit hours (*Mar, 2006*).

PROFESSIONAL MEMBERSHIPS

- American Psychological Association (APA)
- American Counseling Association (ACA)
- California Association of School Psychologists (CASP)
- National Association of School Psychologists (NASP)

REFERENCES

- References will be supplied upon request.

APPENDIX C

[Portfolio Example]

RESUME

Your Name Here
Street Address
Riverside, CA 92515
Phone Number: (951) 555-5555
E-mail: yournamehere@yahoo.com

OBJECTIVE

Professional Goal: Position as a Credentialed School Psychologist
Current Objective: School Psychology Internship (in order to complete a P.P.S. credential)

EDUCATION

La Sierra University (Riverside, CA)

- **Specialist in Education/School Psychology** (*June, 2006*)
- **Master of Arts/Counseling** (*June, 2005*)

Andrews University (Berrien Springs, MI)

- **Bachelor of Science/Psychology** (*June, 2004*)

EDUCATIONAL HONORS

Andrews University, B.S. in Psychology

- **Summa Cum Laude, Academic Distinction with Honors** (*June, 2004*)

PROFESSIONAL EXPERIENCE

- School Psychology Practicum/Field Practice (450-hours)
- Riverside Unified School District (Kennedy Elementary & Sierra Middle Schools)

Assessment

- ✓ Conducted comprehensive initial and triennial evaluations, which involved the administration and interpretation of various ability, achievement, processing, psychosocial, and behavioral tests.
- ✓ Performed several functional assessment analyses as well as developed a number of subsequent behavioral intervention plans.
- ✓ Facilitated several student study team (SST) and individualized educational plan (IEP) meetings.

Consultation

- ✓ Provided behavioral consultation to both regular education and special education teachers.

Classroom Presentations

- ✓ Conducted several classroom presentations on study skills, social skills, and conflict resolution management.

Prevention/Intervention Projects

- ✓ Presented an in-service on school violence to Sierra Middle School teachers. In this presentation, the primary focus was on: 1) identifying at-risk youth, and 2) promoting the use of effective research-based prevention/intervention models.

Counseling

- ✓ Participated in a number of student crisis interventions in both the elementary and middle school settings.
- ✓ Provided individual as well as group counseling services to identified at-risk youth representing a diverse range of ethnic groups.

PROFESSIONAL DEVELOPMENT

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- Received a Certificate of Completion for an on-line course entitled, “*Bipolar Spectrum Disorders: Diagnosis and Pharmacologic Treatment*” by John Preston, Psy.D., ABPP for 3 credit hours (*Mar, 2006*).

PROFESSIONAL MEMBERSHIPS

- American Psychological Association (APA)
- American Counseling Association (ACA)
- California Association of School Psychologists (CASP)
- National Association of School Psychologists (NASP)

REFERENCES

- References will be supplied upon request.

CASE STUDY

CASE STUDY

Identifying Data

- This is a seventeen-year old single, Caucasian female.

Referral Question

- This would most probably be a family-related referral not a self-referral.
- The father would likely ask, "What can I do to help her do better at school and at home?"

Presenting Problem

- "I'm having lots of problems at school with classes. I'm just not happy with life."
- The client admits to current problems with depression: depressed mood, low energy levels, poor concentration and impaired memory processes, restricted (lethargic) psychomotor behavior, sleep-onset insomnia, and poor self-worth.

History of Presenting Problem

- The client has experienced problems with depression since early adolescence.
- Her symptoms have been exacerbated since the start of the academic school year.
- There has been a significant deterioration of academic performance recently. In addition, she has had problems with her peer support system.
- There is also a history of recent stressful changes in her living situation (home environment).

Family of Origin History

- The client is an only child.
- She lived for some time in a foster family.
- She currently lives with her father.
- There is a family history of mental illness.
- There is no known history of abuse in terms of physical, emotional, or sexual abuse.

Other Histories

- This individual's developmental history is unremarkable. There were no labor and/or birth complications. In addition, all developmental milestones occurred as expected.
- There is no known history of sexual activity. The client reports that she has never dated.
- Her educational academic performance has been, for the most part, substandard.
- She is involved in only one extra-curricular activity—track.
- She is not employed and has never been employed. In addition, she has few responsibilities, if any, in the home.
- Recreationally, she watches television and likes “coloring in coloring books.”
- There is no history of any legal difficulties (difficulties with the law).
- Her medical history is unremarkable.
- There is no previous history of psychiatric problems other than depression. According to the client, she has never been treated for her depression.
- There is no history of substance use or abuse to include alcohol, illegal drugs, prescription drugs, and nicotine. She denies regular caffeine use.

Mental Status Exam

- The client was well groomed and casually dressed.
- She did answer questions posed although she was somewhat timid and guarded in her responses.
- Nothing remarkable was noted about her speech. Thus, speech was considered normal.
- Her facial expressions were blunted and at times even flat; she also appeared to be very tired and fatigued.
- Her eye contact was quite poor; she maintained little direct eye contact throughout the session.
- In terms of psychomotor/motor behavior, her movements were retarded and lethargic.
- Her attention and concentration were judged below average.
- Her memory processes also appeared below average.
- She was oriented to person, place, and time (OX3). She did not know the purpose of the assessment and thus was not oriented to her situation.
- In terms of thought processes, there was evidence of thought blocking, loose associations, and circumstantial thinking.
- In terms of thought content, hyperreligiosity was noted. She did deny a history of illusions, delusions, and hallucinations, however.
- Her thinking was judged fairly concrete with little abstract ability noted.
- Intelligence, insight, and judgment all appeared to be below average.
- Her mood was “depressed.” Her affect appeared congruent with her stated mood.
- Suicidal and/or homicidal ideations were denied.

Cognitive Functioning

- There is a history of poor academic performance. She displays poor problem-solving abilities, impaired insight and judgment, below average intelligence, and low mental curiosity. Borderline intellectual functioning as well as learning disabilities should be ruled out.
- Her thought processes reveal the following problems: thought blocking, loose associations, and circumstantial thinking.
- Her thought content is hyperreligious in focus.
- On a positive note, she was able to maintain good focus during the intake. ☹

Emotional Functioning

- This client admits to general problems with insecurity as well as overwhelming feelings of inferiority.
- She is easily emotionally drained by life stressors and has a tendency to avoid conflict and/or “shut-down” completely as a result.
- Infantile coping patterns are noted (e.g., coloring in coloring books).
- There is evidence of depression and learned helplessness.
- On a more positive note, she does not have problems with anger control and is slow to anger. ☹
- She also demonstrates good impulse control. ☹

Interpersonal Functioning

- In terms of interpersonal functioning, she is quite passive-dependent in her relationships.
- She also displays avoidant behaviors when interacting with others.
- She admits to feeling socially alienated from those around her.
- On a more positive note, she genuinely cares for others. ☹
- She is also quite altruistic and wants to help others in need whenever she can. ☹

Clinical Impressions

Axis I

Major Depressive Disorder, Recurrent, Severe without Psychotic Features, without Full Interepisode Recovery, Superimposed on Dysthymic Disorder, Early Onset (Provisional)

Axis II

r/o Dependent Personality Disorder with Avoidant Personality Traits
r/o Borderline Intellectual Functioning

Axis III

None

Summary

- Her academic functioning is impaired and her cognitive abilities appear well below average.
- She is currently living in a stressful home environment.
- There is evidence of major depression with possible psychotic undertones.
- There is a family history of mental illness.

Treatment Recommendations

- In this client's situation, a cognitive assessment would be considered important in that limited cognitive abilities would also likely restrict the number of therapeutic interventions that could be utilized successfully (i.e., a number of therapeutic approaches require a certain level of cognitive sophistication). Towards this end, borderline intellectual functioning as well as learning disabilities should be examined further and ruled out.
- The differential diagnoses should be teased out further through additional interviews and/or psychological testing. However, given the family history of mental illness and the severity of her current complaints, a long-term intervention is likely.
- The client has several areas to address in treatment to include: 1) increasing feelings of self-esteem and self-worth, 2) creating a greater internal locus of control, 3) developing a wider range as well as more effective coping skills, and 4) developing more appropriate social (verbal and non-verbal) skills.
- In terms of individual therapy, given the client's exceptional sensitivity to how those around her respond to her in various social situations and her difficulties in the cognitive domain, client-centered and behavioral modalities may be the least threatening interventions. In addition, given her interest in more child-like behaviors such as "coloring," expressive therapies may prove useful (i.e., they are more non-threatening ways to explore current needs and/or unresolved issues).
- Group therapy can assist with the development of more effective social and communication skills. However, group therapy should be postponed until the client can develop the ego strength to allow her to feel more comfortable (and not easily overwhelmed) in a group setting.
- In family therapy, the client, the father, and the father's fiancée can be made more aware of their psychological impact on each other and taught strategies to improve the home climate during the reorganization of the family unit.
- Given the severity of her current depression as well as the chronic history of depressive symptoms, medications may prove helpful. Thus, a psychopharmacological evaluation also appears warranted.

PSYCHOEDUCATIONAL REPORT

**CLARKE UNIFIED SCHOOL DISTRICT
PSYCHOEDUCATIONAL REPORT**

IDENTIFYING DATA: CONFIDENTIAL

Student Name	Stan Dahloan (Fake Name)	Primary Language	English
DOB	9/15/2000	Parents' Name	Susan and Ben Dahloan
Age	12	Parents' Address	27853 Isolated Valley Moreno Valley, CA 92555
Ethnicity	Caucasian	Phone	(951) 555-1212
Grade	6th	Testing Dates	10/10/2012
School	Clarke Middle School	Psychologist	Shirley Gregg, Ph.D.
Teacher	Jackie Burden	Sch Psych Intern	Your Name Here

REASON FOR REFERRAL

This student was referred for a psychoeducational evaluation as part of a required triennial reevaluation, as specified under Disabilities Education Act (IDEA 97). This evaluation addresses his cognitive potential, strengths and weaknesses, and the relationship they may have to the difficulties being experienced. It also evaluates the progress this student has made since he was last evaluated and aids in designing a new individualized program.

Primary language, racial, and ethnic background were considered prior to the selection and interpretation of all evaluation procedures. All assessment procedures measure limited sample of a person's total repertoire. The selected measures should only be interpreted within the limits of their measured validity.

BACKGROUND INFORMATION

This information was obtained through an interview as well as a review of files.

Stan is a 12-year old Caucasian boy currently in the 6th grade at Stockton Middle School.

Family: Stan lives with his parents and two younger sisters. His grandfather is also living with the family system (his grandmother died at the beginning of this school year). English is the primary language used in the home. There is no known history of learning problems in the family.

Medical: The psychoeducational records indicate that Stan's mother experienced an uncomplicated pregnancy with Stan, and he was delivered full-term. All developmental milestones occurred within normal limits. Stan does have problems with allergies. He also has asthma and uses an inhaler on an as-needed basis (Albuterol). As of October of 2012, his hearing and vision tests were passed. Vision was determined to be: 20/60 R and 20/30 L. Stan reports that he does not wear corrective glasses. Current hearing and vision screening tests were not available at the time this report was written. According to the nursing department, when these tests were scheduled, Stan was not in school.

Educational: Stan is currently enrolled in a general education 6th grade program at Stockton Middle School but is also receiving resource specialist program (RSP) services in both mathematics and language arts. He has been receiving RSP services for a specific learning disability (determined to be related to an auditory processing disorder) since 2007, according to his file. Attendance has not been a problem in the past for Stan. To date for 2012, Stan has one unexcused and two excused absences.

PREVIOUS ASSESSMENTS

Stan was last evaluated for a specific learning disability in October of 2009. Frera Jacha, a school psychologist for the Moreno Valley Unified School District, conducted the evaluation. The evaluation occurred at Orange Elementary School in Moreno Valley, California. At that time significant ability-achievement discrepancies were identified in the areas of written expression and math calculations. The evaluating school psychologist determined that these discrepancies were related to a sensory motor processing deficit. As a result, Stan qualified for support services through the resource specialist program.

See psychoeducational report dated 10/2009.

BEHAVIORAL OBSERVATIONS

Stan is a 12-year-old Caucasian male, of average height and weight.

At the time of testing, Stan was appropriately dressed and well groomed. He was fairly quiet and soft-spoken but was able to ask appropriate questions when needed. He was initially somewhat reserved and shy. However, Stan quickly warmed to the testing process and was cooperative and remained on task with various activities. In between test administrations, when small talk occurred, he smiled often and responded appropriately.

Rapport was established and easily maintained.

TESTS ADMINISTERED

- Wechsler Abbreviated Scale of Intelligence (WASI)
- Bender Gestalt II
- Motor-Free Visual Perception Test, Third Edition (MVPT-3)
- Test of Auditory Reasoning and Processing (TARPS)
- Comprehensive Receptive and Expressive Vocabulary Test, Second Edition (CREVT-2)
- Piers-Harris Children's Self-Concept Scale

by Resource Specialist

- Wechsler Individual Achievement Test 2nd Edition (WIAT-II)

COGNITIVE SKILLS

WECHSLER ABBREVIATED SCALE OF INTELLIGENCE (WASI)

The WASI is an abbreviated general measure of various cognitive abilities to include verbal as well as non-verbal intelligence. This instrument produces four subtest scores as well as one full-scale intelligence quotient. The four subtest scores include vocabulary, block design, similarities, and matrix reasoning.

STRENGTHS AND WEAKNESSES

Stan produced a full-scale intelligence quotient (FSIQ) of 83 on the WASI. This score places him in the *low average* range of cognitive functioning overall.

When examining the verbal and performance indexes separately, Stan received a standard score of 87 on his *Verbal Index* and a standard score of 81 on his *Performance Index*. The *Verbal Index* score places him in the *low average* range of functioning in terms of overall verbal skills (associative, expressive, and comprehension skills). His *Performance Index* score also places him in the *low average* range of functioning in terms of overall non-verbal skills (visual perceptual and visual-motor integration skills). These results suggest that Stan's verbal and non-verbal skills are fairly uniform.

ACADEMIC SKILLS

WECHSLER INDIVIDUAL ACHIEVEMENT TEST, 2ND EDITION (WIAT-II)

Stan was administered the WIAT-II which is a comprehensive achievement test which measures his current level of functioning in several academic areas (oral expression, listening comprehension, written expression, basic reading skill, reading comprehension, mathematics calculation, and mathematics reasoning). These basic concept areas assess the foundation knowledge upon which all learning is based.

Stan's abilities on the WIAT-II ranged from *borderline* to *superior*. His weakest performance by far was in reading comprehension where his score fell in the *borderline* range of functioning overall. This result suggests that he has some difficulty interpreting or comprehending material that he reads. Stan possessed *low average* abilities in basic reading skills (word reading), mathematical reasoning, as well as listening comprehension. Thus, he may not only struggle with comprehending material that he reads, but he may also struggle somewhat with recognizing/reading basic words. In addition, his ability to interpret auditory information and/or problem solve more complex mathematical operations may be somewhat limited as well. He possessed *average* abilities in basic mathematical calculation (numerical operations) and written expression. His strongest performance, however, was in oral expression. His score here placed him in the *superior* range of performance overall indicating that his expressive verbal skills are well developed.

If this student's cognitive ability or raw potential (full scale intelligence quotient of 83) is compared to actual achievement scores, it is observed that significant ability-achievement discrepancies do not emerge.

See Resource Specialist report dated 9/15/2009 for further information.

PSYCHOMOTOR SKILLS/VISUAL PROCESSING

Visual-motor integration is the ability to relate visual stimuli to motor responses implying that the individual's perception of a stimulus is reflected in his or her ability to copy it manually. Visual-motor integration tests assess the extent to which individuals can integrate as well as coordinate their visual and motor abilities.

THE BENDER GESTALT, 2ND EDITION (BG-II)

The Bender Gestalt II is a visual perceptual as well as visual-motor integration test. In this test, a student attempts to draw/copy a number of designs that are presented one at a time, designs that become progressively more difficult to replicate. A student's overall score is based upon how accurate his/her designs are to the actual drawings displayed.

STRENGTHS AND WEAKNESSES

This student's reproduction of the designs on the BG-II indicated visual motor integration skills in the *high average* range. His BG-II score of 95 places him at the 36th percentile and suggests that he performs at or better than 36% of his norm-referenced peers in the area of visual-motor skill. Right hand dominance was indicated, with pencil grip evaluated as good. Stan's overall performance on the BG-II indicates intact motor speed without evidence of neurological difficulties.

Two supplemental tests were also administered, the motor test as well as the perception test. In that Stan's scores on these two instruments did not fall below the 25th percentile, no motor or perceptual difficulties are suspected.

Based upon this performance, Stan does not qualify for a sensory motor processing disorder.

THE MOTOR-FREE VISUAL PERCEPTION TEST, THIRD EDITION (MVPT-3)

The MVPT-3 is a motor-free visual perception test. Therefore, it seeks a more pure measure of visual-perceptual skill, skill which is not confounded by any visible motor-deficits. The MVPT-3 examines spatial relationships as well as visual discrimination, figure-ground, visual closure, and visual memory abilities. Performance in these areas provides a single score that represents the individual's general visual perceptual ability. It is important to keep in mind that this testing instrument is not designed to measure vision or sight per se, but whether or not there are deficits in the visual "interpretative" process. That is, a child may be able to physically see visual clues in front of him without problem, but may somehow "disconnect" when the information is being interpreted in the brain.

STRENGTHS AND WEAKNESSES

Stan produced a standard score of 82 on the MVPT-3. This score places him at the 11th percentile and suggests that he performs at or better than 11% of his norm-referenced peers. This score, therefore, places him in the *low average* range of performance in terms of visual-perceptual skill overall.

Based upon this performance, Stan does not qualify for a visual processing disorder.

AUDITORY PROCESSING

TEST OF AUDITORY REASONING AND PROCESSING SKILLS (TARPS)

The TARPS is an auditory reasoning and processing skills measure. It not only measures auditory reasoning and processing, but also other areas such as general information abilities, associative abilities, comprehension, analogical completions, and arithmetic reasoning to name a few. Thus, this instrument can provide some information regarding a child's ability to draw conclusions, to make inferences, and to apply judgment regarding auditory clues.

Auditory perception, while not measuring hearing (physical), does measure what a subject does with what is heard. Therefore, the term auditory perception in a broad sense is the ability of the brain to understand and interpret what the sensory organs, the ears, hear; and, based on the understanding and interpretation of this information, the ability to express the meaning, either verbally or motorically.

STRENGTHS AND WEAKNESSES

Stan's produced a standard score of 94 on the TARPS. This score places him at the 34th percentile and suggests that he performs at or better than 34% of his norm-referenced peers in the area of auditory reasoning and processing. This score places him in the *average* range of functioning overall.

Based upon this performance, Stan does not qualify for an auditory processing disorder.

SPEECH AND LANGUAGE SKILLS

COMPREHENSIVE RECEPTIVE AND EXPRESSIVE VOCABULARY TEST, 2ND ED (CREVT-2)

The CREVT-2 is a measure of both receptive and expressive oral vocabulary skill as well as general vocabulary skill. In this test, receptive skill refers to a person's ability to understand the meaning of individual words when spoken in isolation whereas expressive skill refers to a person's ability to define stimulus words precisely. The general vocabulary skill, which is a composite of both receptive and expressive skills, refers to an individual's verbal competency levels overall.

STRENGTHS AND WEAKNESSES

On the CREVT-2, Stan produced a standard score of 96 on expressive vocabulary and a standard score of 84 on receptive vocabulary. The expressive vocabulary score of 96 places him at the 39th percentile and suggests that he performs at or better than 39% of his norm-referenced peers. This score indicates that his level ability, overall, is in the *average* range of functioning in regards to expressive vocabulary skills. The receptive vocabulary score of 84 places him at the 14th percentile and suggests that he performs at or better than 14% of his norm-referenced peers. This score indicates that his level ability, overall, is in the *low average* range of functioning in regards to receptive vocabulary skills. These two results indicate that his expressive vocabulary skills are more developed than his receptive skills. The receptive vocabulary result appears consistent with his listening comprehension performance on the WIAT-II. However, the expressive vocabulary result (though stronger—in the average range) does not approximate Stan’s superior performance on the WIAT-II’s oral expression subtest. The difference may be related to what these two subtests focus on in the CREVT-2 versus the WIAT-II. The CREVT-2 expressive vocabulary section focuses on specific word definitions (i.e., a student is given a word which he/she has to define) whereas the WIAT-II oral expression subtest focuses on tasks that demand repeating sentences, describing visual scenes, and/or giving directions. The flexibility in scoring and/or the ease of these general tasks in the WIAT-II may explain the higher performance here.

SOCIAL AND EMOTIONAL BEHAVIOR

SENTENCE COMPLETION

Sentence completion blanks can sometimes give insight into various psychosocial issues. On this particular sentence completion inventory, Stan reports that he likes to play baseball. He describes his parents as “the best” and reports that his favorite person is his dad. He acknowledges that it is sometimes difficult to have two sisters. Finally, he does not like being bullied at school; he feels that he gets picked on at times.

THE PIERS-HARRIS CHILDREN’S SELF-CONCEPT SCALE (PIERS-HARRIS 2)

The Piers-Harris Children’s Self-Concept Scale is a self-report measure of general self-concept. A higher scores indicates a favorable self-concept (i.e., a high degree of self-esteem or self-regard), whereas a lower score is associated with a lower self-concept suggesting a more critical or negative self-evaluation. Individuals with lower scores tend to be easily discouraged, view themselves as having difficulty making friends, experience poor relationships with family and peers, and see themselves as being unpopular and socially isolated.

The total Piers-Harris score is derived from seven subscales:

- ☑ *Behavioral Adjustment (BEH)*
This scale measures admission or denial of problematic behaviors.
- ☑ *Intellectual and School Status (INT)*
This scale reflects assessment of personal abilities with respect to intellectual as well as academic tasks.
- ☑ *Physical Appearance and Attributes (PHY)*
This scale measures appraisal of physical appearance and other attributes (e.g., leadership and ability to express ideas).
- ☑ *Freedom From Anxiety (FRE)*
This scale reflects anxiety and dysphoric mood tapping into specific emotions including worry, nervousness, shyness, sadness, fear, and a general feeling of being left out of things.
- ☑ *Popularity (POP)*
This scale represents a child's evaluation of his social functioning, including perceived popularity, ability to make friends, and feelings of inclusion in activities such as games and sports.
- ☑ *Happiness and Satisfaction (HAP)*
This scale reflects feelings of happiness and satisfaction with life.

STRENGTHS AND WEAKNESSES

The validity on the Piers-Harris 2 appears intact. The student was consistent with his responses and did not demonstrate any visible response bias in his general pattern of responses. On the Piers-Harris 2, the only remarkable score occurred on the popularity scale. On this scale Stan reports that he is unhappy about his current social situation and may feel that he has no close friends at all. On a more positive note, he views himself as fairly well behaved. He feels comfortable with his physical appearance and other personal attributes. In addition, he reports mostly positive emotional states. He also sees himself as performing acceptably well in academic areas overall. Finally, he evaluates himself and his life circumstances, overall, as generally positive.

SUMMARY

The overall evaluation of Stan's social-emotional tests and interviews indicates that he is a fairly happy young man, who readily admits to some interpersonal difficulties.

PERFORMANCE SUMMARY

Deficient to Borderline	Low Average to Average	High Average to Superior
WIAT-II Reading Comprehension	WASI Full-Scale	WIAT-II Oral Comprehension
	BG-II	
	TARPS	
	CREVT-2 Expressive Vocabulary	
	CREVT-2 Receptive Vocabulary	
	WIAT-II Word Reading	
	WIAT-II Numerical Operations	
	WIAT-II Math Reasoning	
	WIAT-II Written Expression	
	WIAT-II Listening Comprehension	

ELIGIBILITY CONSIDERATIONS

Stan currently does not meet the eligibility criteria for Special Education (E.C. 56337) services as defined in the federal and state regulations under the category of Specific Learning Disability.

Based upon a comparative analysis of the assessed cognitive and academic scores, a severe discrepancy does not exist between ability and achievement. In addition, no significant impairments in the various psychological processes emerge.

SUMMARY AND RECOMMENDATIONS

Stan is a 12-year old Caucasian male in the 6th grade. He demonstrates *borderline* to *superior* cognitive ability as measured by the WASI. The only *borderline* performance occurred in reading comprehension suggesting some limited difficulties with the comprehension and/or interpretation of the material that he reads. However, the majority of his scores fell in the *low average* to *average* range, and one score, oral expression, fell in the *superior* range of functioning overall. When Stan's achievement scores are compared to his cognitive performance (i.e., raw cognitive potential), no significant discrepancies emerge. In addition, no processing disorders are indicated. It appears as if Stan has compensated for earlier deficiencies remarkably well and no longer requires special education services at this time.

Shirley McIntyre Gregg, Ph.D.
LEP 2339

Your Name Here
School Psychology Intern (*folks, please use this title here*)
Date: 10/10/2012

APPENDIX

Wechsler Abbreviated Scale of Intelligence (WASI)

	<u>Standard Score</u>	<u>Percentile</u>
Verbal	87	19
Nonverbal	81	10
Full-Scale	83	13

Test of Auditory Reasoning and Processing Skills (TARPS)

Standard Score: **94** Percentile: **34**

Motor-Free Visual Perception Test-Third Edition

Standard Score **82** Percentile **11** Age Equivalent **<11-0**

Bender Gestalt II

T-Score: **47** Percentile: **36**
Standard Score: **95**

Comprehensive Receptive and Expressive Vocabulary Test

	<u>Standard Score</u>	<u>Percentile</u>
Receptive Vocabulary	84	14
Expressive Vocabulary	96	39
General Vocabulary	88	21

Piers-Harris Children's Self-Concept Scale

Overall Self-Concept T-Score **49** Percentile **42**

Factors

Behavior	43	24
Intellectual/School Status	54	66
Physical Appearance/Attributes	48	42
Freedom From Anxiety	51	54
Popularity	36	8
Happiness & Satisfaction	59	82

Wechsler Individual Achievement Test 2nd Edition (WIAT-II)

Subtests

	<u>Standard Score</u>	<u>Percentile</u>
Word Reading	85	16
Reading Comprehension	74	4
Pseudoword Decoding	83	13
Reading Composite	78	7
Numerical Operations	91	27
Math Reasoning	83	13
Mathematics Composite	85	16
Spelling	82	12
Written Expression	103	58
Written Language Composite	91	27
Listening Comprehension	82	12
Oral Expression	123	94
Oral Language Composite	102	55

APA CRITICAL ANALYSIS PAPER

Running head: BIOFEEDBACK

Biofeedback

Dora D. Clarke-Pine

La Sierra University

Abstract

Biofeedback is still not a fully understood intervention within the medical community. The purpose of this article is to provide a working description of biofeedback as well as identify relevant areas of clinical application. The article concludes that although biofeedback is not a successful intervention with all medical or psychiatric conditions, it can produce a measure of treatment success in a number of areas. As a result of reading this article, it is hoped that the reader will not only learn to appreciate this intervention more fully, but will be motivated to learn more about the value of utilizing biofeedback applications in various clinical settings.

Introduction

Biofeedback is a physiologically-based intervention that assists in several domains to include pain-related complaints as well as anxiety-related complaints.

Biofeedback

Description of Therapeutic Approach

Biofeedback is a behavioral intervention that is often used to treat anxiety, chronic pain, and other physical conditions (Hatch, Fisher, & Rugh, 1987). In biofeedback, specialized instrumentation is used to measure physiological responses such as heart rate, muscle tension, blood pressure, and body temperature (Schwartz, 1987). Once individuals understand how their bodies are actually physiologically performing at any given moment, they can then use a variety of techniques that can help them change negative physiological responses into more appropriate ones (Everly & Rosenfeld, 1981; Hatch et al., 1987; Schwartz, 1987).

The physiological or “bio” feedback provided by the instrumentation used, whether the feedback is auditory and/or visual, is thus the vital ingredient in this intervention process. Such feedback gives a person “immediate information as to which techniques being utilized are actually achieving a measure of treatment success” (Clarke-Pine, 1995, p. 35).

Goals of the Approach

The goal of any biofeedback intervention is to help clients develop as well as maintain better measures of self-control over various physiological processes (Schwartz, 1987).

Therapeutic Techniques

Biofeedback modalities are often combined with other interventions such as hypnosis, meditation, and/or other commonly used relaxation techniques such as muscle tension-relaxation

exercises, autogenics, imagery or visualization techniques, as well as diaphragmatic breathing exercises (Clarke-Pine, 1995).

The three most common types of biofeedback are electromyographic or EMG biofeedback, electrodermal skin activity or EDA biofeedback (also known as electrodermal skin response/EDR, skin potential, or galvanic skin response), and temperature or thermal biofeedback (Everly & Rosenfeld, 1981).

Electromyographic (EMG) biofeedback attempts to measure the electrical impulses that exist between various nerve endings and muscle fibers. EMG helps to identify the state of contraction versus relaxation within a particular muscle group. Muscle tension, which, again, is usually reflected through auditory or visual feedback, can then be reduced by focusing on techniques that help relax the particular muscle group affected (Clarke-Pine, 1995). Excessive tension in the muscles can produce a number of unpleasant symptoms such as tension headaches, temporomandibular joint (TMJ) pain, and muscle spasms (Schwartz, 1987).

Electrodermal skin activity (EDA), electrodermal skin response (EDR), or galvanic skin response (GSR) biofeedback measures skin conductance or skin resistance (Schwartz, 1987). When an individual is under a state of arousal, more sweat is produced by the sweat glands, and conductivity increases or resistance decreases as a result (Schwartz, 1987). Relaxation techniques assist in reducing sweat gland activity (Clarke-Pine, 1995). This type of relaxation has been especially helpful with a number of anxiety-related as well as chronic pain-related complaints (Clarke-Pine, 1995; Hatch et al., 1987).

Temperature biofeedback makes use of a thermal probe that, when placed on a particular body part, reflects the skin temperature. Techniques can be learned to increase skin temperature.

Higher temperatures generally reflect more appropriate blood circulation states and thus improve such conditions as migraines or Raynaud's disease (Hatch et al., 1987).

Strengths and Weaknesses of the Approach

Treatment encourages patients to develop greater confidence in managing a presenting problem more effectively with the internal resources that they naturally possess (Schwartz, 1987). Such interventions should be used to complement standardized medical treatment protocols, not become a substitute for them. By focusing treatment on an internal locus of control, clients have more opportunities to move away from need-dependent states and medical interventions can often be more successful as a result (Clarke-Pine, 1995).

Biofeedback has been shown to have a measure of success in the treatment of conditions such as asthma, attention deficit hyperactivity disorder, headaches/migraines, Raynaud's disease, hypertension, low back pain, anxiety-related conditions, sleep-onset insomnia, gastrointestinal complaints, substance-abuse addictions, stroke, and spinal injury rehabilitation (Basmajian, 1989; Freedman, Ianni, & Wenig, 1985; Hatch et al., 1987; Logemann & Kahrilas, 1990; Morrow & Wolff, 1991; Peniston & Kulkosky, 1989; Rice, Blanchard, & Purcell, 1994; Schwartz, 1987; Sim, McClean, Lee, Naranjo, & Grant, 1990; Tansey, 1993).

Biofeedback interventions, however, are not successful with all populations. Certain variables can interfere with biofeedback treatment success and should be appropriately addressed such as low motivation to engage in treatment, secondary gains surrounding a presenting complaint, learned helplessness/low internal locus of control, major depression, unresolved litigation, and psychotic and/or severe personality disorders (Clarke-Pine, 1995).

Summary

Biofeedback interventions attempt to teach patients that they have the ability to develop more control over physiological processes than previously believed. The attainment of such skill is achieved through feedback instrumentation that is visual and/or auditory. Despite evidence of treatment success in a number of anxiety-related and/or pain-related complaints, not everyone can benefit from such interventions. Thus, clinicians should always address any intervening variables that are likely to interfere with successful biofeedback treatment outcomes.

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- Schwartz, M. S. (1987). *Biofeedback: A practitioner's guide*. New York: The Guilford Press.
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FAA AND BIP

FUNCTIONAL ANALYSIS ASSESSMENT (FAA)

This form was developed to incorporate the criteria needed for FAA under CCR 3052 (b).

Student Name Nowun I. No Date 09/30/2012

Date of Birth 03/21/1999 Age 13 Current Placement Regular Classroom

Disability Attention Deficit/Hyperactivity Disorder, Combined Type

Reason for referral (be as specific as possible).

The student continues to get out of his seat during class and interrupt the learning process of other students. He also often fails to complete assignments in class.

Summarize your review of all relevant records (be sure to specify developmental, cognitive, and communication abilities and list all records reviewed).

The student's cumulative file and school medical records were both reviewed. The student has been diagnosed with Attention-Deficit/Hyperactivity Disorder, Combined Type and is currently on Ritalin for this condition. He has had a history of acting-out behaviors throughout elementary school. However, school records indicate that the acting-out behaviors in the classroom apparently have improved while on medications.

Describe problematic behavior (specific, observable, measurable).

This student has had a history of exhibiting a number of acting-out behaviors in class according to several of his elementary school teachers. However, the only notable behavioral problem reported by his current sixth grade teacher is a tendency to get out of his seat without permission and interrupt the learning process of other students. In terms of academic output, he has trouble completing a number of in-class assignments.

Include baseline information—intensity, duration, and frequency whenever appropriate. How severe is the behavior? Generally how long does the behavior last when it is noted? How often does the behavior occur? At one time of the day does it typically occur? Include when the student was observed, by whom, and in what environments.

This student's current teacher has observed the problem behavior in her classroom since the beginning of the school year, about one month ago. In the last month, this student has averaged about five out-of-seat disruptions a day during class (i.e., he leaves his seat without the teacher's permission and interrupts other students who are trying to work on their individual assignments). The problem behavior has not only been observed by the teacher, but it has also been observed by the school psychologist. The behavior is not considered severe or of long duration; it does, however, occur frequently enough to be considered a problem (again, about five times a day). The student often returns quickly to his seat when asked to do so by his teacher. Academically, he often fails to complete his in-class assignments primarily in the mathematical arena. On average, there is one mathematical in-class assignment a day (five a week). He generally only completes about one such assignment a week.

Describe any observed antecedents (i.e., "What happens before the problem behavior occurs?").

These disruptions appear to occur much more frequently in the afternoon and are much more likely to take place during math-related tasks or assignments. Thus, the student's disruptive behaviors are likely to occur shortly after a math-related assignment is given.

Describe any resulting consequences (i.e., "What happens after the behavior occurs?").

The student is generally asked to return to his desk and re-focus on his in-class assignments. Typically, as noted above, the disruptions last for short periods of time (less than a minute), and the student will often quickly comply with requests by his teacher to return to his desk. However, if the student has difficulty re-focusing on his in-class assignments when he returns to his desk (which is most often the case), the teacher will go to his desk in an attempt to help him re-focus. He will often try to re-engage with the assignment but is easily frustrated and overwhelmed by such activities. He eventually disengages from the assignment but is less disruptive towards other students. He is fairly well liked by other students. As a result, his disruptive behavior does not appear to result in negative feedback from his classmates. In fact, students often seem to enjoy his attentions in class when they occur.

Communicative intent of the behavior. What may be driving the maladaptive behavior (e.g., a need for attention, a need for more interesting activities, a need to avoid or escape something—an unpleasant or difficult activity and/or performance-related anxiety, a need for something more tangible—wanting something to drink or eat or needing to go to the bathroom, etc.)?

The problem behavior often occurs later in the day, which may or may not be related to increased fatigue. In addition, although the student very much enjoys some classroom activities such as creative, art-related activities, he readily admits that he does not like math and has difficulty completing such assignments when assigned. Thus, other possible communicative behaviors may be to minimize anxiety and/or avoid difficult, unpleasant tasks. Finally, it is noted that his classmates tend to respond positively to his disruptive behaviors. Thus, he may also be motivated by a strong need for attention from his classmates.

Ecological analysis of behavior. At times, problem behaviors may occur because the environmental demands do not appropriately match a student’s personal needs. The following may apply in this situation: negative teacher/staff expectations, inadequate teaching materials/learning activities, mismatched instructional styles, stifling environmental constraints (or disruptive physical elements), poor teacher-student ratio, inadequate number of time-outs, frequent teacher absences, poor modeling, recent changes in environment or activities, poor reinforcement schedules, etc.

It is possible that this student experiences increased physical discomfort as he tires throughout the day. Making accommodations in the classroom to address this possibility may be helpful (e.g., stretching exercises, standing versus sitting at his desk, asking for time-outs when needed, etc.).

Summary of interventions.

Student conferences, parent conferences, in-school suspensions, environmental adjustments, and modifications of curriculum. The teacher has talked to the student and the student’s parents. The student is aware that his behavior has been disruptive to the class, but he states that he cannot help himself—that he gets restless and just can’t sit still. The parents are also aware of the problem behavior, and they have talked to their son as a result. This has not resulted in any visible, behavioral gains, however. The student has had several in-school suspensions as a result of his behavior. The teacher recently moved the student closer to her desk at the front of the classroom and has experimented with giving math-related assignments earlier in the day. The problem behavior diminished slightly at first but then returned to previous levels (i.e., he continues to leave his seat, on average, five times a day).

BEHAVIORAL INTERVENTION PLAN (BIP)

This form was developed to incorporate the criteria needed for the California Code of Regulations, Title 5, Section 3001(f).

Student Name Nowun I. No Date 09/30/2010

Behavior Intervention Case Manager Your Name Here Phone: (951) 785-2334

FUNCTIONAL ANALYSIS ASSESSMENT

Summarize the **FAA**. Also provide a brief history of the problem behavior and any relevant environmental factors observed when the problem behavior most often occurs.

The student has a history of leaving his desk (without permission) and interrupting students who are working on various in-class assignments. This problem behavior, noted by his sixth grade teacher, has been in effect since the beginning of the academic school year (about one month now). The student leaves his seat without permission from his teacher an average of five times a day. This problem behavior tends to occur more frequently in the afternoon and often emerges during math-related tasks or assignments. In addition, the student regularly fails to turn in "in-class" math-related assignments. On average, there is one mathematical in-class assignment a day (five days a week). He generally completes about one such assignment a week.

Behavior Number(s)	Expected Outcome(s)/Goal(s)	Interventions and Frequency of Interventions	Person Responsible	Goal/Intervention Review Notes
		G. The teacher will allow the student to stand at a taller desk when working on in-class afternoon assignments. He will have more freedom, as a result, to move around his desk and discharge excess energy.	Teacher	
		H. The teacher will allow all of her students, including this student, to engage in brief stretching and relaxation exercises once every half hour in the afternoon.	Teacher	
		I. The teacher will continue to attempt modifications of the curriculum and give the student more manageable (i.e., smaller) math-related assignments.	Teacher	

* Review Codes: GA = Goal Achieved | C = Continue | DC = Discontinue Expected Review Date: 11/30/2012

Signatures

Student: _____ Parent/Guardian: _____

Teacher: _____ Resource Teacher: _____

Administrator: _____

**AT-RISK PREVENTION/INTERVENTION
SLIDE PRESENTATION**

School Violence



The bad news is that you can't guarantee it won't happen at your school.

The good news is that severe school violence is on the decline overall.

Presenting Problems

Reflection of Society?

- [Theft and Extortion
- [Teasing, Taunting, Threats, Bullying
- [Physical Aggression and Fights
- [Hate-Related Acts
- [Suicide/Homicide

Every hour . . . someone commits a hate crime. Every week . . . a cross is burned.

Every day . . . at least 8 blacks, 3 whites, 3 gays, 3 Jews, and 1 Latino become hate crime victims.



Tolerance.org. A web project of the Southern Poverty Law Center.

U.S. Demographics

— [In the United States, more than 1 in 4 are juveniles.

— [The following percentage growths are projected between 1995 and 2015.

- 8% <age 18
- 22% ages 18-24
- 18% ages 25 to 64
- 36% ages 65 and older

— [The population of juvenile minorities will experience the most growth between 1995 and 2015.

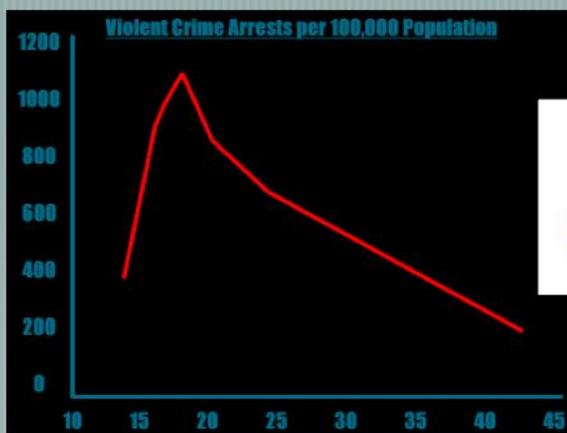


EXPECTED INCREASES

Whites	3%
Native Americans	17%
Blacks	19%
Hispanics	59%
Asians/Pacific Islanders	74%

Office of Juvenile Justice and Delinquency Prevention (1999). *Juvenile offenders and victims: 1999 national report*. Retrieved March 21, 2006, from www.ncjrs.gov/html/ojdp/nationalreport99/chapter1.pdf

What should worry us?



Office of Juvenile Justice and Delinquency Prevention (2005). *Juvenile population characteristics: Age-specific arrest rate trends*. Retrieved March 21, 2006, from http://ojdp.ncjrs.org/sjstatbb/crime_qa05301.asp?qaDate=20050531

Female Statistics

What is the percentage of females involved in juvenile crime overall?

- A. 04.4%
- B. 10.4%
- C. 14.4%
- D. 20.4%

Statistics

1992	1 in 8
1994	1 in 7
2003	1 in 5



National Criminal Justice Reference Service (2006). *Women and girls in the criminal justice system*. Washington, DC: U.S. Department of Justice. Retrieved March 21, 2006, from <http://www.ncjrs.gov/spotlight/wgjis/Summary.html>

U.S. Demographics

From 1994 to 1999, 253 school-violence related deaths (220 separate incidents).

Exactly 202 involved one death; 18 were multiples.

General statistics included:

- 172 homicides (average = 34 per year)
- 30 suicides (average = 6)
- 11 homicide-suicides (average = 2)
- 5 legal interventions (average = 1)
- 2 firearm "unintentionals" (average = <1)



Of the 279 known perpetrators . . .

36.9%	students
25.8%	community residents
17.9%	not associated with school/community
12.5%	school association unknown
2.5%	family members of students
1.8%	associated with school in other ways
0.7%	faculty or staff

Anderson, M. Kaufman, J., Simon, T.R., Barrios, L., Paulozzi, L., Ryan, G., Hammond, R., Modzeleski, W., Feucht, T., & Potter, L. (2001). School-associated violent deaths in the United States. *JAMA, 286*(21), 2695-2702.

U.S. Demographics

From 1992 to 2002, victimization rates decrease—both at and away from school.

In 1999-2000, 32 school-associated violent deaths are reported.

☑ 24 homicides

☑ 8 suicides

In 2002-2003, 22 school-associated violent deaths take place.

☑ 17 homicides

☑ 5 suicides



DeVoe, J.F., Peter, K., Kaufman, P., Miller, A., Noonan, M., Snyder, T.D., & Baum, K. (2004). *Indicators of School Crime and Safety: 2004*. Bureau of Justice Statistics. Washington, DC: U.S. Government Printing Office.

DeVoe, J.F., Peter, K., Noonan, M., Snyder, T.D., & Baum, K. (2005). *Indicators of school crime and safety: 2005*. U.S. Departments of Education and Justice. Washington, DC: U.S. Government Printing Office.

Non-Fatal Violent Crimes

In all survey years from 1993 to 2003, 7-9% of students reported being threatened or injured with a weapon (gun, knife, or club on school property).

In 2003, a youth is more likely to experience more serious violence away from than at school (50% more).

In a nationwide survey of high school students . . . (CDC, 2004)

☑ 33% reported being in one physical fight in last 12 months

☑ 17% reported carrying a weapon in the last month

☑ 6% carried a weapon to school



GAME: "Name that Weapon"

DeVoe, J. F., Peter, K., Kaufman, P., Miller, A., Noonan, M., Snyder, T.D., & Baum, K. (2004). *Indicators of School Crime and Safety: 2004*. Bureau of Justice Statistics. Washington, DC: U.S. Government Printing Office.

National Center for Injury Prevention and Control (2006). *Youth violence: Fact sheet*. Atlanta, GA: Authors.

School Environment

In 1999 to 2000, a number of schools reported racial tensions, bullying, verbal abuse of teachers, and widespread disorder in classrooms.

Which schools were most at risk for daily or weekly bullying (elementary, middle, or high schools)?

In 2003, 7% of students ages 12-18 reported that they had been bullied during previous six months. This was down from 8% in 2001 (Indicators of School Crime and Safety, 2003).

- public school students (7%)
- private school students (5%)



Middle	43%
Elementary	26%
High	25%

DeVoe, J.F., Peter, K., Noonan, M., Snyder, T.D., & Baum, K. (2005). *Indicators of school crime and safety: 2005*. U.S. Departments of Education and Justice. Washington, DC: U.S. Government Printing Office.

Effects of Bullying

Nearly 60% of boys classified as bullies in grades 6-9 were convicted of at least one crime by age 24.

Approximately 40% classified as bullies had three or more convictions by the age of 24.

Kids who are bullied are 5x more likely to be depressed.

Bullied boys are 4x more likely to be suicidal; bullied girls are 8x more likely to be suicidal.



Fox, J.A., Elliott, D.S., Kerlikowske, R.G., Newman, S.A., & Christeson, W. (2003). *Bullying prevention is crime prevention*. Washington, DC: A Report by Fight Crime: Invest in Kids.

General Etiologies for Violence

- exposure to violence/maltreatment—childhood abuse and neglect
- SES variables—poverty, single-parent families, large family systems
- educational or employment disadvantages
- delinquent peer groups
- drugs and alcohol
- media violence

Single Parent Homes 2003

Caucasians	22%
African-Americans	55%
Hispanics	30%

Poverty Rates 2003

Caucasians	9-15%
African-Americans	30-48%
Hispanics	28-42%



Black juveniles and Hispanic juveniles were more 3x more likely to live in poverty as non-Hispanic White juveniles.

Department of Health and Human Services (2003). Annual update of HHS poverty guidelines. Retrieved March 21, 2006, from <http://aspe.hhs.gov/poverty/03fedreg.htm>

National Center for Juvenile Justice (1999). Juvenile offenders and victims: 1999 national report. Retrieved March 21, 2006, from <http://www.ncjrs.gov/html/ojdp/nationalreport99/toc.html>

Office of Juvenile Justice and Delinquency Prevention (2005). Juvenile population characteristics: Living arrangements. Retrieved March 21, 2006, from <http://ojdp.ncjrs.org/ojstatbb/population/qa01202.asp?qaDate=20050531>

Office of Juvenile Justice and Delinquency Prevention (2005). Juvenile population characteristics: Poverty. Retrieved March 21, 2006 from <http://ojdp.ncjrs.org/ojstatbb/population/qa01401.asp?qaDate=20050531>

U.S. Department of Justice (2000). 1999 report to congress: Title V incentive grants for local delinquency prevention programs. Retrieved March 21, 2006, from http://www.ncjrs.gov/html/ojdp/ojdp99report_to_congress/

Etiologies



Modeling Effects (Aggression/Violence)

- parent to parent
- parent to child
- parent to other adult
- cartoons/video games
- societal modeling
 - ~ media
 - ~ sports
 - ~ United States (Abu Ghraib)



Etiologies

— [The average child spends 25 hours a week watching television. By the time the average child is 18 years old, he/she will witness . . .

☑ 200,000 acts of violence

☑ 40,000 murders

— [Of approximately 3500 studies examining the relationship between media violence and aggressive behavior in children, only 18 failed to show a positive relationship (AAP, 2001).



— [School size is positively correlated with the concentration of student violence and school crime.

☑ schools with more than 1000 students experience between 58% and 108% more incidents of violence

Commission on Business Efficiency of the Public Schools (2003). School size, violence, achievement and cost. Cited by the Department of Juvenile Justice and Delinquency Prevention. Retrieved March 21, 2006, from www.njleg.state.nj.us/legislativepub/reports/huseff_report.pdf

Committee on Public Education (2001). Media violence: American Academy of Pediatrics. *Pediatrics*, 108(5), 1222-1226.

Parents Television Council (2003). TV bloodbath: Violence on prime time broadcast TV: A PTC state of the television industry report. Cited by the Department of Juvenile Justice and Delinquency Prevention. Retrieved March 21, 2006, from <http://www.parentstv.org/ptc/publications/reports/stateindustryviolence/main.asp>

General Warning Signs

— [aggressive, acting out behaviors

— [social difficulties

— [few, if any, visible prosocial behaviors

— [inability to empathize with others

— [cruelty to kids and/or animals

— [little remorse for actions

— [projection of responsibility

— [high need for stimulation

— [poor school performance



Centers for Disease Control and Prevention (2002). The National Center for Injury Prevention and Control (NCIPC). *Injury Fact Book: 2001-2002*.

Risk Factors: Youth Violence

Individual

- as noted, antisocial tendencies (e.g., history of early aggression; anger management problems)
- poor self-esteem; inability to trust others
- low I.Q. or learning disorders
- involvement with drugs, alcohol, or tobacco
- intolerant, rigid, opinionated, inappropriate humor
- deficits in social cognitive or information-processing abilities
- poor impulse, behavioral control (attention deficits/hyperactivity)
- high emotional distress; past treatment for emotional problems
- fascination with violence-filled entertainment or sensational violence



Centers for Disease Control and Prevention (2002). The National Center for Injury Prevention and Control (NCIPC). *Injury Fact Book: 2001-2002*.

Elliot, D., Hatot N. J., Sirovatka, P., & Potter, B. B. (2001). *Executive Summary Youth Violence: A Report of the Surgeon General*. Retrieved March 21, 2006, from <http://www.surgeongeneral.gov/library/youthviolence/summary.htm>

National Center for Injury Prevention and Control (2006). *Youth violence: Fact sheet*. Retrieved March 21, 2006, from <http://www.cdc.gov/ncipc/factsheets/yvfacts.htm>

Risk Factors: Youth Violence

Family Risk Factors

- exposure to family conflict or violence
- parental substance abuse or criminality
- turbulent parent-child relationship
- harsh, lax, or inconsistent disciplinary practices
- low parental involvement or acceptance of pathological behavior
- lack of intimacy; low emotional attachment to parents or caregivers
- low parental education and income
- poor monitoring and supervision of children (kid "rules the roost"—no TV or internet limits . . . access to weapons)



Centers for Disease Control and Prevention (2002). The National Center for Injury Prevention and Control (NCIPC). *Injury Fact Book: 2001-2002*.

Elliot, D., Hatot N. J., Sirovatka, P., & Potter, B. B. (2001). *Executive Summary Youth Violence: A Report of the Surgeon General*. Retrieved March 21, 2006, from <http://www.surgeongeneral.gov/library/youthviolence/summary.htm>

National Center for Injury Prevention and Control (2006). *Youth violence: Fact sheet*. Retrieved March 21, 2006, from <http://www.cdc.gov/ncipc/factsheets/yvfacts.htm>

Risk Factors: Youth Violence

Peer and School Risk Factors

- social rejection by peers
- negative role models
- closed social group
- association with delinquent peers/gangs
- pecking order among students; code of silence
- lack of involvement in conventional activities
- poor academic performance or school failure; low commitment to school
- unsupervised computer access



Centers for Disease Control and Prevention (2002). The National Center for Injury Prevention and Control (NCIPC). Injury Fact Book: 2001-2002.

Critical Incident Response Group (1999). The school shooter: A threat assessment perspective. Quantico, VA: National Center for the Analysis of Violent Crime. Retrieved March 21, 2006, from <http://www.fbi.gov/filelink.html?file=/publications/school/school2.pdf>

Elliot, D., Hatot N. J., Sirovatka, P., & Potter, B. B. (2001). Executive Summary Youth Violence: A Report of the Surgeon General. Retrieved March 21, 2006, from <http://www.surgeongeneral.gov/library/youthviolence/summary.htm>

National Center for Injury Prevention and Control (2006). Youth violence: Fact sheet. Retrieved March 21, 2006, from <http://www.cdc.gov/ncipc/factsheets/yvfacts.htm>

Risk Factors: Youth Violence

Community Risk Factors

- diminished economic opportunities
- high concentrations of poor residents
- high level of transiency
- high level of family disruption
- low levels of community participation
- socially disorganized neighborhoods
- exposure to violence
- copycat effect



Centers for Disease Control and Prevention (2002). The National Center for Injury Prevention and Control (NCIPC). Injury Fact Book: 2001-2002.

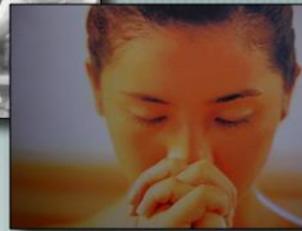
Elliot, D., Hatot N. J., Sirovatka, P., & Potter, B. B. (2001). Executive Summary Youth Violence: A Report of the Surgeon General. Retrieved March 21, 2006, from <http://www.surgeongeneral.gov/library/youthviolence/summary.htm>

National Center for Injury Prevention and Control (2006). Youth violence: Fact sheet. Retrieved March 21, 2006, from <http://www.cdc.gov/ncipc/factsheets/yvfacts.htm>

Protective Factors

Individual Protective Factors

- intolerant attitude toward deviance
- high I.Q. or grade point average
- female vs. male
- positive social orientation and involvement in social activities
- religiosity



Peer Group Protective Factors

- associating with friends who engage in conventional behaviors

Elliot, D., Hatot N. J., Sirovatka, P., & Potter, B. B. (2001). *Executive Summary Youth Violence: A Report of the Surgeon General*. Retrieved March 21, 2006, from <http://www.surgeongeneral.gov/library/youthviolence/summary.htm>

National Center for Injury Prevention and Control (2006). *Youth violence: Fact sheet*. Retrieved March 21, 2006, from <http://www.cdc.gov/nccipc/factsheets/yvfacts.htm>

Protective Factors

Family Protective Factors

- connectedness to family (e.g., shared activities, ability to discuss problems)
- perceived parental expectations about school performance are high



School Protective Factors

- commitment to school
- participation in extracurricular activities



Anderson, M. Kaufman, J., Simon, T.R., Barrios, L., Paulozzi, L., Ryan, G., Hammond, R., Modzeleski, W., Feucht, T., & Potter, L. (2001). *School-associated violent deaths in the United States*. *JAMA*, 286(21), 2695-2702.

Elliot, D., Hatot N. J., Sirovatka, P., & Potter, B. B. (2001). *Executive Summary Youth Violence: A Report of the Surgeon General*. Retrieved March 21, 2006, from <http://www.surgeongeneral.gov/library/youthviolence/summary.htm>

National Center for Injury Prevention and Control (2006). *Youth violence: Fact sheet*. Retrieved March 21, 2006, from <http://www.cdc.gov/nccipc/factsheets/yvfacts.htm>

Needs Assessment

Teachers

Students

Parents

What is it?

A close-up photograph of a hand holding a black pen and writing on a lined notebook. The notebook is open, and the pen is positioned over the lines. The background is slightly blurred, focusing on the hand and the pen.

Group Activity: Good questions to include?

Needs Assessment

Students

1. I often feel unsafe at school.
2. I have been physically threatened by another student at least once this past year.
3. I have been involved in a few fights on school grounds.
4. I know of friends who have been physically threatened by other students.
5. I know of or have heard of at least one student who has carried a weapon to school.
6. I have had recent thoughts of harming myself.
7. I have been bullied by other students at school.
8. I have typically been a loner in life.



Yes No

Prevention/Intervention

It is estimated that 50% of the most thoroughly evaluated strategies are ineffective. For effective programs, the earlier the intervention, the better.

Primary Prevention

- ✓ decrease likelihood of acting out behavior
- ✓ prevent movement towards risk behaviors

Intervention: Two Types

- ✓ reduce risk of violence for those who have one or more risk factors (*secondary prevention*)
- ✓ prevent further violence or escalation of violence for those who are already involved in violent behavior (*tertiary prevention*)



Elliot, D., Hatot N. J., Sirovatka, P., & Potter, B. B. (2001). *Executive Summary Youth Violence: A Report of the Surgeon General*. Retrieved March 21, 2006, from <http://www.surgeongeneral.gov/library/youthviolence/summary.htm>

Effective Strategies

Primary Prevention

- ✓ skills training
- ✓ behavior monitoring & reinforcement
- ✓ behavioral techniques for classroom management
- ✓ building school-related capacity skills (continuous progress programs)
- ✓ cooperative learning
- ✓ positive youth development programs



Elliot, D., Hatot N. J., Sirovatka, P., & Potter, B. B. (2001). *Executive Summary Youth Violence: A Report of the Surgeon General*. Retrieved March 21, 2006, from <http://www.surgeongeneral.gov/library/youthviolence/summary.htm>

Effective Strategies

Secondary Prevention

- parent training
- home visitation
- compensatory education
- moral reasoning
- social problem solving
- thinking skills



Elliot, D., Hatot N. J., Sirovatka, P., & Potter, B. B. (2001). *Executive Summary Youth Violence: A Report of the Surgeon General*. Retrieved March 21, 2006, from <http://www.surgeongeneral.gov/library/youthviolence/summary.htm>

Effective Strategies

Tertiary Prevention

- social perspective taking and role taking activities
- multimodal interventions
- behavioral interventions
- skills training
- marital/family therapy by clinical staff
- wraparound services (more intensive in-home counseling and community services for kids at risk for out of home and out of school placement)



Elliot, D., Hatot N. J., Sirovatka, P., & Potter, B. B. (2001). *Executive Summary Youth Violence: A Report of the Surgeon General*. Retrieved March 21, 2006, from <http://www.surgeongeneral.gov/library/youthviolence/summary.htm>

Model Prevention/Intervention Programs

Blueprints for Violence Prevention Overview

<http://www.colorado.edu/cspv/blueprints/>

Center for Effective Collaboration and Practice

http://cecp.air.org/school_violence.asp

Early Warning, Timely Response

<http://www.ed.gov/about/offices/list/osers/osep/gtss.html>

OJJDP Model Program Guide

http://www.dsgonline.com/mpg2.5/mpg_index.htm

Safe Schools Task Force (California)

<http://www.ag.ca.gov/publications/safeschool.pdf>

School Violence Prevention - Model Programs

<http://www.mentalhealth.samhsa.gov/schoolviolence/exhibit1.asp>

The School Shooter: A Threat Assessment Perspective

<http://www.fbi.gov/filelink.html?file=/publications/school/school2.pdf>

Youth Violence: A Report of the Surgeon General

<http://www.surgeongeneral.gov/library/youthviolence/report.html>

Crisis Intervention

Identify a crisis response team.

- crisis response coordinator
- crisis intervention coordinator
- media liaison
- security liaison
- community/medical liaison
- parent liaison
- crisis interveners
- resource person

Provide relevant and regular training to the team.



DEBRIEF

Crisis Response Team

- Describe Process
- Editorialize (tell story and fill in chapters)
- Bare/Share Thoughts
- Refocus and Reframe
- Injuries (share hurts and fears)
- Empowerment
- Finishing Touches



LOG SHEETS

EDPC 674 School Psychology Practicum

Activity Log

Name: _____ [Your Name Here] _____

Experience Category: Introductory Field Experiences (EDPC 664 Assessment of Individual Intelligence I)

Location: _____ La Sierra University _____

Activity Dates	Summary of Activities and Comments	Experience Time
Fall/2011	<p>In this course, each individual was required to test a minimum of five students. A variety of ages were required to include at least one student in elementary school, one in middle school, and one in high school. The last two individuals could be aged 18 or older. In my situation, I ended up testing a:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 7-year old African American male <input checked="" type="checkbox"/> 8-year old Caucasian female <input checked="" type="checkbox"/> 14-year old Caucasian male <input checked="" type="checkbox"/> 16-year old Hispanic male <input checked="" type="checkbox"/> 22-year old Caucasian female <p>The following tests were administered in the order listed above:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Cognitive Assessment System (CAS) <input checked="" type="checkbox"/> Wechsler Abbreviated Scale of Intelligence (WASI) <input checked="" type="checkbox"/> Wechsler Intelligence Scale for Children, 4th Edition (WISC-IV) <input checked="" type="checkbox"/> Wechsler Intelligence Scale for Children, 4th Edition (WISC-IV) <input checked="" type="checkbox"/> Wechsler Adult Intelligence Scale, 4th Edition (WAIS-IV) <p>A psychoeducational report was written for all five of these students.</p>	25.0 hours
TOTAL HOURS—THIS REPORT		25 hours

Field Supervisor's Name: _____ [Course Instructor Name Here] _____

Field Supervisor's Signature: _____

Date Signed: 12/20/2012

EDPC 675 FIELD PRACTICE IN SCHOOL PSYCHOLOGY

Activity Log

Name: _____ [Your Name Here]

Experience Category: High School Setting

Location: Dowagiac Union High School

Activity Dates	Summary of Activities and Comments	Experience Time
10/08/11	I met briefly with my on-site supervisor at the Dowagiac Union High School. She oriented me to the general tasks and responsibilities of school psychologists in the Cass County School District. I also sat in on two IEP meetings, one for a 15-year old Hispanic female who did not qualify for special education services and another for a 15-year Caucasian male who did qualify. For the male student, there a significant discrepancy between ability and achievement was noted in the area of written expression. In addition, an auditory processing disorder was identified.	8.0 hours
10/09/11	I co-facilitated an in-service with two school psychologists—one of the school psychologists was my on-site supervisor. The in-service was a district-wide in-service and involved primarily teachers and administrators. The content of the in-service focused on school violence and covered areas such as needs assessment, prevention, and intervention. In addition, I tested a 16-year old Caucasian female. The following tests listed below were administered and a psychoeducational report written. <input checked="" type="checkbox"/> Wechsler Intelligence Scale for Children, 4 th Edition (WISC-IV) <input checked="" type="checkbox"/> Wechsler Individual Achievement Test-II Abbreviated (WIAT-II) <input checked="" type="checkbox"/> Bender Gestalt II <input checked="" type="checkbox"/> Motor-Free Visual Perception Test, 3 rd Edition (MVPT-3) <input checked="" type="checkbox"/> Test of Auditory Reasoning and Processing (TARPS) <input checked="" type="checkbox"/> Comprehensive Receptive and Expressive Vocabulary Test, 2 nd Edition (CREVT-2) <input checked="" type="checkbox"/> Piers-Harris Children’s Self-Concept Scale <input checked="" type="checkbox"/> Sentence Completion Blank	8.0 hours
10/10/10	I administered a WISC-IV to a 17-year old female, Caucasian student. Although an achievement test was also scheduled for this same student later in the day, she reported that she did not feel well and the test was re-scheduled. I worked on organizing the testing room and inventoried supplies.	8.0 hours
TOTAL HOURS—THIS REPORT		24.0 hours

Field Supervisor’s Name: _____ [On-Site/Field Supervisor not University Supervisor Name Here]

Field Supervisor's Signature: _____

Date Signed: 10/10/2012