

# ADPTC

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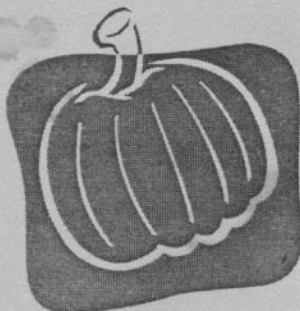
## Special points of interest:

- Mark your calendars:

The ADPTC midwinter meeting is February 27-28 in Miami, FL

- Check out the clinic spotlight: Temple University
- Welcome New Members!!

Look to see who's new to ADPTC!



## PRESIDENT'S COLUMN

ADPTC has always been an organization built on relationships, where people jump in to help and advise one another. It's in our Mission Statement, it's seen in the helpful responses on our listserv ("Attached is a copy of our Informed Consent"), and in people volunteering to serve the organization. In reviewing what we've accomplished over the past year, you can see how that spirit of generosity shines through. Here's what we've done:

We have a new brochure, thanks to Colleen Byrne. (Colleen is one of those new members who attended a meeting and found herself in charge of a committee.) We have an active listserv and rich, informative website, with searchable archives, thanks to Karen Saules. Mary Alice Conroy and Vic Pantescio are actively searching for a publisher for ADPTC's book (NYU and Guilford are both interested), and Nicole Taylor (another relatively new member) jumped in to take charge of the newsletter. Training and resources for new clinic directors are underway, (thank you Eric Saurer), with some special events for new directors planned for our midyear meeting. Jean Spruill did the leg work to see about APA approval for CE credit for our meetings (way too expensive).

Midyear and annual meetings have been key to information exchange and our growth as professionals. Mary Alice Conroy has provided outstanding programming for our meetings, and this February she will be working with Rob Heffer, president-elect, Brian Lewis and Kim Fuller to set up the midyear meeting in Miami February 27-28. (Miami in the winter, now *that* was a good idea.)

Lastly, under the leadership of Lee Cooper (past president) and Bob Hatcher (president emeritus), we have grown exponentially in our interface with APA. We participate in the Education Leadership Conference (Lee Cooper), the CCTC conference (me), and Bob Hatcher is chairing a CCTC practicum workgroup to recommend competencies for the practicum. (He's also managing the Practice Research Network.)

In summation, we have a dedicated, talented (and very nice!) group of people that is actively moving ADPTC forward. I hope you'll plan to join us in Miami so you can meet the people you hear about and talk to on the listserv.

*Phyllis Terry Friedman*

**ADPTC  
Welcomes New  
President-  
Phyllis Terry  
Friedman!**

## Minutes from Toronto *Minutes of ADPTC's annual meeting at APA*

Lee Cooper introduced the meeting as his last act as President.

Lee introduced the new list of elected executive officers.

A list of attendees was circulated: 23 members participated in this year's program.

Phyllis Terry Friedman took over the meeting as the in-coming President.

Phyllis welcomed new attendees and encouraged them to participate on committees.

A gift certificate and thanks were presented to Lee as outgoing president in recognition of his accomplishments/contributions.

Phyllis then proceeded with the meeting's agenda:

### **Budget report** (Tony Cellucci, Treasurer, absent)

- Expenses for past year totaled \$8400.; took in \$7300. in dues and interest; existing balance now \$9500.
- Expenses included: mid winter meeting expenditures, executive travel expenses, particularly with APA executive Leadership Conference, APPICs Competencies conference, website development, and supplies
- Phyllis asked for any additions to be included in the budget
- The issue of whether to charge a fee for the mid-winter meeting to offset expenses or raise the dues for everyone was discussed. It was decided that, in order to enhance attendance at the mid-winter meeting, a fee would not be charged
- Question of whether we can obtain CEUs for ADPTC meetings was addressed: the process is expensive and labor intensive, making it not financially feasible. Instead, it was recommended that the program and supporting materials be presented for credit, as some states may accept it.
- The question of who pays for clinic membership was raised. Answers included departments, clinics, and individuals (three were present)

Arguments in support of increasing the dues included "you get what you pay for," increasing dues increase credibility. A vote was held - Susan Neufeldt moved to increase dues by \$10 per year; Mary Alice Conroy seconded. Attendees voted unanimously to increase dues.

### **Mid year meeting** 27-28 February 2004 in Miami, Florida

- We need program coordinators - Mary Alice Conroy and Rob Heffer; Kim Fuller, Brian Lewis as site chairs
- We will have a half day meeting on competencies. Request for program topics
- Reorganize business meeting & committees to allow for face to face time

Phyllis asked how many people are planning to attend APA in Hawaii: about 12. Participants noted that they could better lobby for funds to attend if the meeting was scheduled.

### **Update on Committees**

#### **1. Book publisher** - verbal response

Have two sample chapters to send out to publisher

NYU and Guilford both interested in publishing

Jean Spruill has international contacts as does Mary Alice Conroy; encountering interested parties internationally who are target audiences for our book

#### **2. Newsletter** - copies available here; pass along to interested parties

Looking for someone to pick this up; Phyllis enjoyed it

Jean Spruill advocating for putting newsletter on website (it is there now) and deleting paper copy

#### **3. Survey** - Rob Heffer

Question Pro (software for on-line questionnaires) - after mid year meeting Rob got more specific with them about our needs; then they started tacking on fees

Psych data is another web based company - developed by academicians - about \$350-\$400 for what Rob described to them.

Described procedures for on-line administration; means for copying out hard copy to work on sections at a time. Will look at responses when returns come in from APA and go from there

Minutes Cont. from page 2

Susan Neufeldt asked for details about questionnaire – Rob described as comprehensive of topics impacting clinics – administrative, job position, fees, etc

Karen Saules couldn't work with what was on link – Rob will investigate

4. **Public Relations** committee newly formed last year to get more information out about our organization. Colleen put brochure together. Lee put in publisher software

Will circulate to increase membership. Will circulate at APA, recommended exhibition hall and social hours as potential sites

Can print copies out yourself electronically or request copies from Colleen

5. **Web Site** – Karen Saules reported on the new web site format and structure (Resources Committee)

Can submit items to her for posting

Listserv discussions archived at Buffalo – will check into moving it. Search sometimes effective and sometimes not – email Karen directly if having problems

Bob Hatcher suggested instructions in the listserv regarding how to access archived material

Rob Heffer recommended having an unsubscribe automatically available

6. **New Directors** – Eric Sauer

Website meets many needs of new directors

Sent e-mail prior to this meeting regarding new directors offering

Listserv may not be best vehicle for identifying where new members are, what they need

Put something on brochure for new members

Breakfast for new directors useful

Plan for a training at Miami?

Steve Sobleman suggested a small group orientation would be useful

Rob Heffer – time for working committees; concurrent meeting for new directors; expose to our resources. Or use existing meeting time for all to contribute. Perhaps over breakfast in meeting room. Then their minds are clear to absorb new information throughout the day of programming

Use DCTs and program chairs to inform about ADPTC; encourage us to take information on ADPTC to other organizations we belong to. Add list of other organizations we belong to our mailing list

Mary Alice Conroy recommended using an informal evening meeting. Be clear that any director welcome, though purpose is to benefit new directors. Pilot in Miami at mid winter meeting

Individual contact to new directors is a personal touch that encourages attendance at meetings

Karen Saules and Melinda Henderson volunteered to place a call to new members as the ADPTC "welcome wagon"

134 clinic director members of ADPTC; max of another 40 that don't belong

Colleen requesting membership list, available on website

11 combined programs – should include them

**Membership committee** – have lost Bobbie Volmer

Integrate into New Director committee or keep it independent?

Another function – sending information about us to other organizations. Need follow-up regarding was something sent to other organization

So far have lists of only accredited programs. Could investigate those seeking accreditation. Book on graduate studies all-inclusive and published from APA.

This is outreach/PR function rather than membership

Colleen so far alone on this committee but needs assistance; Lee and Tony have both assisted her

Plan regarding new members: Tony alerts Eric to a new member and Eric sends a letter, Eric tells Karen and she places a call to the new director/member

**Competencies** – Bob Hatcher and Kim Lassiter

Kim reviewed Bob's documents and will revise; use this as next step

Will send this out with specific questions on the list

Jean – articles are coming out in Professional Psychology Research and Practice and Journal of Clinical Psychology that stem from the 2002 Competencies Conference

Minutes continued from page 3

**Practice Research Network (PRN) Committee – Bob Hatcher**

Jeff Gray – Carepaths – on-line

OQ-45 keep track over time; low fee of \$100.; can also do on-line assessments; is HIPAA compliant, secure internet connection

12 ADPTC members are already involved; 8 more interested

Individual contract between clinic and Carepaths

Have access only to information about your clinic; can download information about your cases in a variety of ways

In future, develop subgroup of clinics in a practice research network, looking at outcomes across different variables. Listserv set up specifically for PRN

Susan Neufeldt asked how to join? Two parts: using assessment tool – contact Jeff Gray and tell him you are with ADPTC, gets you a reduced fee. Then, possibility of joining PRN within ADPTC. There is a complication of copyright in terms of putting other assessment tools up on-line. TOP – Treatment Outcome Package is more expensive than PRN; the high reliability & validity of OQ and the excellent research base of OQ led ADPTC to endorse PRN. Some members expressed a concern about the risk of using a company outside that could go out of business and you lose your data. Another option, also from Jeff – software to run in house: that way you don't have to send data over the web.

Phyllis: add other members to the committee – they can get information on these questions and report back

Bob: will stay with OQ listserv. Bob warned that using the OQ on-line service through Jeff requires a business associate agreement under HIPAA.

**Liaisons Committee – Lee Coleman**

CCTC – we are part of their organization. They met in March, Lee attended, they paid

We are very welcomed there; they are interested in practicum competencies – they have their own work group and we're part of it. They are meeting at APA, Bob Hatcher will attend.

Lee met with Norm Anderson, new president of APA, shared with him about ADPTC

Education Leadership Conference (ELC) takes place in September. It's long, 4 days, intense. Subgroups – Lee on Grad Education.

Lee also doing Hill Visits. Together with other psychologists all day – networking.

Committee on Accreditation now has an Advisory Council. Talking about membership of the committee

Looking for input re: Council on Accreditation – public forum

Option 1 – write letter by September 1<sup>st</sup> focusing on issues of practicum training and issues we'd like them to be aware of. Lee prefers this option;

Option 2 – at ELC in Sept – promulgate our views.

Lee believes this degree of involvement is plenty and it's working. He was contacted by other organizations for assistance. We are recognized for what we have to offer

Lee will attend ELC as past president of ADPTC

Phyllis encouraged members to participate on committees; talk with the person who heads up the one you are interested in.

The Executive Board decided to split the roles of secretary and treasurer because it became too overwhelming for one person.

Asked the attendees for permission to revamp bylaws by executive committee and will be posted on listserv and then will vote

**Announcements:** tomorrow Social Hour outreach to other organizations, network in house; in the Niagra Room at the Crowne Plaza Hotel from 2 til 3. Invite other parties as appropriate. Our biggest selling point is our membership.

Executive Board will meet for breakfast at Crowne Plaza– elected people plus heads of Committees. Purpose is to refine our planning.

Meeting adjourned 2:25

Minutes submitted by Kim Lassiter, lassitek@ohio.edu

**ADPTC Welcomes the following new members:**

Randy Arnau  
University of Southern Mississippi  
Randolph.Arnau@usm.edu

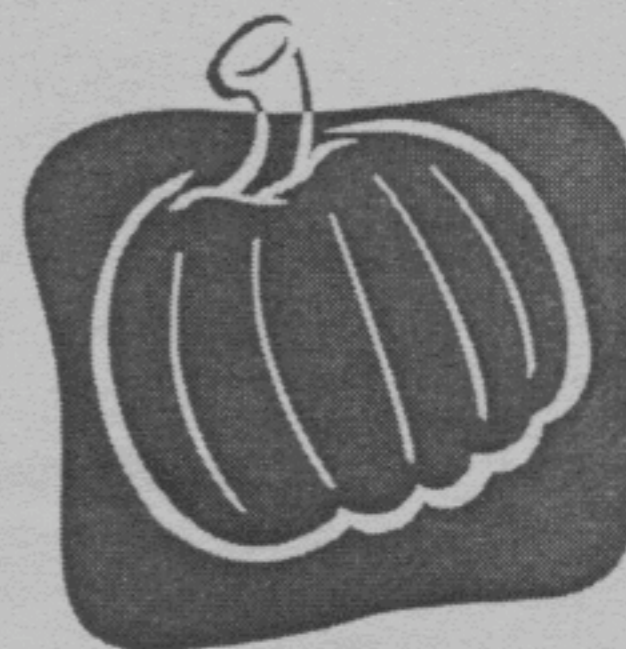
Kathleen Bieschke  
Pennsylvania  
State University  
kxb@psu.edu

Kimberly Husenits  
Indiana University  
of Pennsylvania  
husenits@iup.edu

Brenda Mobley  
Wright State University  
Brenda.mobley@wright.edu

Steve Sobelman  
Loyola College of Maryland  
Sobelman@loyola.edu

Joni Mihura  
University of Toledo  
Jlmihura@aol.com



*Board of Educational Affairs  
Advisory Council on Accreditation*

*The following is a response from the Association of Directors of Psychology Training Clinics (ADPTC) regarding CoA composition:*

What concerns do you have about the present structure or composition of the CoA?

We believe that it is important that the membership of an accrediting body for graduate psychology programs be as knowledgeable as possible about the full range of educational and training activities required for the development of clinical, counseling and school psychologists. We believe that overall the present composition of the CoA does this effectively because it includes professionals in education and training program leadership in academic and service settings, practitioners and the

public. What is notably lacking, however, is representation of predoctoral practicum training, a function that is critical to readying students for internship and, ultimately, to the development of effective and ethical psychologists.

Although education and training program professionals may be able to speak to aspects of predoctoral practicum training, these leaders are in fact concerned with the broad complex of training issues, devoting significant time and attention to the research and academic aspects of graduate psychology education. The result is that practicum training does not have the direct representation that matches its significant role in training psychologists. One indication of the under emphasis on practicum training is the fact that there are virtually no APA standards related to the operation or support of training clinics.

ADPTC representation would fill this gap by bringing to the CoA knowledge and expertise regarding the kinds of experiences training clinics are providing, difficulties in sequencing practicum experiences, evaluation of competencies, difficulties with supervisors and supervisee-supervisor conflict, and in developing standards and guidelines for clinic operations. (ADPTC has already developed an initial draft of such standards and guidelines.)

In order to include experts concerned with predoctoral practicum training in the CoA, we would recommend an adjustment to the current composition, either by adding a seat or by reapportionment of the four seats allocated to COGDOP, given COGDOP's relatively indirect role in the training and education of practicing psychologists.

**Note from the Treasurer**

*By Tony Cellucci*

First, I want to thank the members that voted to keep me on as treasurer for two more years.

I look forward to serving you and the organization. It is also great to have new ADPTC board & committee members so welcome to Kim, Doug, Eric and Nicole.

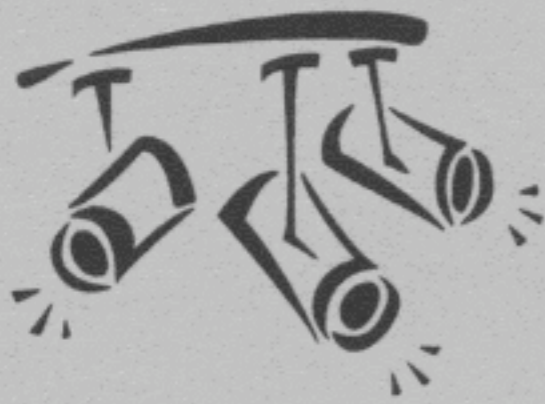
I thought is best to clarify a few items. Dues are not due until January and are payable for the training clinic in the name of the Director. The Board voted to increase dues to \$60; you will be billed in December. If your associate director or DTC wishes to have access to the ADPTC website or listserv, they should become associate members (\$15). Our FEI # is 35-1951326. Please forward the invoice (also available on the website) to your accounting staff. All too often we get a check from Mystery University with no name or explanation. Also, forward Clinic Director changes directly to me so we can keep our database current.

I am looking forward to seeing old friends and making new ones in Miami. See you there!

**Did you know?**

You can now search the ADPTC listserv archives through the website. Check it out on [www.adptc.org](http://www.adptc.org) and click on "server archives". Then select ADPTC.

Thanks Ryan!



## **Clinic Spotlight**

**Temple University**

**Michael Bridges, PhD, Director**

### **Tell us a little about your program**

The PSC is a full service clinic that offers a variety of psychological interventions. The multipurpose clinic provides individual, family, couple, and group therapy, as well as a number of cognitive and personality assessment batteries. The PSC supplies affordable clinical care while utilizing the expertise of a nationally recognized and respected faculty to provide supervision. The combination of an economical sliding scale fee schedule and the absence of medical insurance maximize the potential for consistent care and relatively long-term therapeutic interventions. This environment promotes important values of confidentiality and the best interests of the client. Quality student-clinicians and the convenience of location and scheduling present a valuable psychological resource for the community. Student-clinicians typically rotate through supervisory teams to ensure the experience of multiple intervention techniques. Student-clinicians currently participate in case conferences on a regular (monthly) basis. Speakers provide invaluable information that builds upon curriculum and supervision.

One recent goal focuses on a push for more comprehensive services for clients struggling with symptoms of Attention Deficit Hyperactivity Disorder (ADHD). A new group works with adults identified with ADHD symptoms to better understand and adjust to related problems. We also are creating a Dialectical Behavior Therapy (DBT) group to work with clients challenged by problems with mood and emotional control. Typical interventions focus on issues such as mood, anxiety, adjustment disorders, marital/relationship difficulties, behavioral conduct problems, child-family conflicts, eating disorders, learning difficulties, occupational stressors and other Axis I diagnoses.

During my first year (2001-2002, sometime affectionately referred to as the "year from hell") the PSC brought in revenues of \$24,134. This year we brought in just under \$44,000. Not too shabby of an increase.

### **What makes the PSC at Temple an innovative training facility?**

The focus of the PSC on the integration of theory, research and practice within the clinic has led to the advancement of projects across the spectrum of PSC activities. Exciting new research projects, engaging case conferences with nationally recognized speakers, new therapy groups, and technological upgrades highlight the many advancements in planning for the new school year.

### **Does the PSC have a particular theoretical orientation?**

The theoretical background of the clinic is directed by supervisors who are well versed in the major models of psychological intervention. The current trend is towards a more integrated approach that combines aspects of cognitive behavioral, psychodynamic and emotion focused therapies.

### **Describe the physical elements of the PSC?**

One key to efficient, community services is attention to facility improvements. We have recently hired four new clinic assistants to help implement a reorganization of office space, networking of computer systems, and implementation of programs to track demographic and financial data. This is the largest staff the PSC has had in some time and it should add to speed of contact with prospective clients, streamlined paperwork and processes, and assistance with ongoing research ventures.

### **Do you conduct research?**

Research is a vital component to be infused into a Psychological Services Center. Upcoming projects include use of Emotion Focused therapy and a "Forgiveness" study. The PSC is working with the Temple University Academic Computer Services department on a computer program that will enable improved tracking of research data in its emotion-focused work.

### **What would you like to offer other directors about your experience?**

I'd like to share with my fellow ADPTC members the most effective methods that we have used to increase referrals and revenues and make this turn around possible, these include: 1) publicizing the PSC as the "community mental health center" for Temple faculty and staff, 2) developing a referral network with other departments and agencies on campus (e.g., student coun-

seling center, student disability services), 3) networking with other mental health professionals in the community, 4) creating new programs and sub clinics, 5) having PSC graduate assistants perform more fee for service activities as part of their routine clinic activities, 6) obtaining university research incentive funds to update the clinic facilities, and 7) being approved by the state of PA to perform psychological disability evaluations.

Previous mechanisms for marketing and client recruitment, such as advertising on the city bus lines and subways revealed that many were not appropriate for a training clinic (i.e., severe mental disorders, substance abuse problems, etc.) and the attrition and dropout rate for these clients was very high. Another area where we've had good results is publicizing the PSC to Mental Health Professionals in the Philadelphia Area via mailings to psychologists, psychiatrists, and physicians. With the advent of managed care and cutbacks on insurance reimbursements, many treating professionals are reluctant to accept patients who are involved with HMOs or who have limited insurance coverage. At the same time, most want to provide such individuals referrals to agencies that provide economical, quality mental health services and which do not carry the stigma often associated with community mental health centers. Publicizing the PSC to the professional community has also generated new referrals.

#### **What is your relationship with the Temple University Community?**

One group of potential referrals that was notably under-represented among our clients was the staff, faculty and students of Temple University itself. Although there had been efforts in the past to publicize the PSC to the Temple community, there has never been a concerted effort to portray the PSC to the campus community as what it had the potential to be, a community mental health center that provides convenient, confidential, quality psychological services. There had also never been a concerted effort to use the wealth of free publicity and media coverage provided by the Temple Office of Media Relations. I set up a series of meeting with the director and assistant director of Temple Media Relations and within about a four month period we had multiple articles on the PSC appear in the various employee and student newspapers and the "What's News" informational email. I also set a standard fee for Temple staff and faculty of only \$25.00 per therapy session (which was still about \$5 higher than our average fee but much less than our sliding fee scale which has some higher income folks paying more than \$65 per session. These articles that emphasized low-cost, convenience (you can come on your lunch hour), and confidentially (no insurance forms to file) resulted in a significant increase in the number of referrals (particularly therapy cases) to the point that total monthly client sessions increased 47% during this period. We also obtained, at no cost, mailing labels of over 8,000 Temple employees and faculty. We periodically send out several hundred newsletters, brochures, every couple of months to keep a steady flow of clients. Since these all go out as internal "campus mail" there is also no charges for postage. Our Human Resource department also provides one of our brochures to all new employees with their welcome packet.

We also with campus agencies like the student counseling center and student disability office. The PSC offers a comprehensive LD evaluation for approximately \$500.00 for Temple students. The Student Counseling Center has a limit of 8 sessions or less per student due to such high volume. For students who are interested in additional therapy, we have agreed to see them for only \$10.00 per session. In return, we are able to refer undergraduate and graduate students we are seeing to the counseling center psychiatrist for medication consultations.

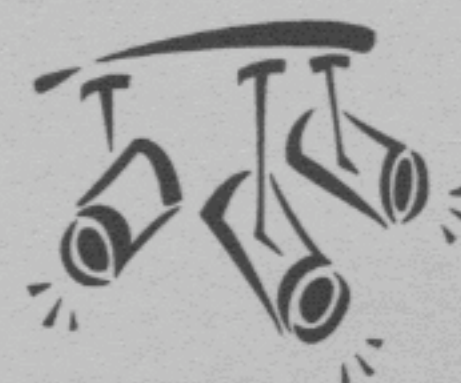
#### **What is your relationship with local media and press?**

In return for the "free press" we get from Temple media, I've tried to make myself available whenever possible for interviews with outside media. For example, since I have a background in forensic psychology, I was interviewed on TV and radio several times during the Washington sniper attacks in regards to such things as the scientific accuracy of offender profiling. Since I was also identified in these pieces as the director of the PSC, this also raised our visibility in the community.

#### **What are you looking forward to developing in the future?**

In addition to the highlight on ADHD treatment and evaluation, we focus on developing relationships to include performance of disability evaluations, and psychological evaluations for various professionals (lawyers and psychiatrists). Disability evaluations results as a collaboration between the PSC and Temple University Disability Resource center. Another future program will be a focus on program evaluation components with enhanced client satisfaction questionnaires and follow up evaluations to track the best methods for providing mental health services at the clinic.

*The combination of an economical sliding scale fee schedule and the absence of medical insurance maximize the potential for consistent care and relatively long-term therapeutic interventions.*



**Don't forget:**

**ADPTC Mid-winter  
meeting is  
February 27-28 in  
Miami, Florida**

**Thanks to Kim and  
Brian for hosting  
us this year!**

### ADPTC Executive Committee

President:	Phyllis Terry Friedman, PhD Saint Louis University email: Friedmpt@slu.edu
Past President:	Lee Cooper, PhD Virginia Tech email: dcooper@vt.edu
President Elect:	Rob Heffer, PhD Texas A&M University email: rwh@psyc.tamu.edu
President Emeritus:	Bob Hatcher, PhD University of Michigan email: robhatch@umich.edu
Secretary:	Kim Lassiter, PhD Ohio University email: lassitek@ohio.edu
Treasurer:	Tony Cellucci, PhD Idaho State University email: Cellanth@isu.edu
Other Executive Committee Members:	
Resource Ctte:	Karen Saules, PhD Eastern Michigan State University email: Ksaules@emich.edu
Newsletter:	Nicole M. Taylor, PhD University of Indianapolis email: Ntaylor@uindy.edu
Program:	Mary Alice Conroy, PhD Sam Houston State University email: psy_mac@shsu.edu Rob Heffer
At-Large:	Eric Sauer, PhD Western Michigan University email: eric.sauer@wmich.edu Doug Carpenter Forest Institute of Professional Psychology email: dcarpenter@forest.edu

**Association of Directors of  
Psychological Training Centers  
Psychological Services Center  
University of Indianapolis  
Good Hall 109  
1400 E. Hanna Avenue  
Indianapolis, IN 46227**