

Fact sheet for 4 + 2 internship program

Preparation of progress reports: information for supervisors and provisional psychologists

Progress reports provide a means for the principal supervisor and provisional psychologist to formally review the provisional psychologist's progress towards achieving the core capabilities of the 4+2 internship program and set training goals for the next reporting period. Progress reports also enable the Board to monitor the provisional psychologist's progress during the internship program. The Board requires the principal supervisor to write the progress/transitional report, provide thoughtful feedback about the provisional psychologist's progress and ensure that each and every section of the report has been completed. The provisional psychologist is required to include in the progress report two case examples he/she has written on clients seen during the six month reporting period. One case example should be of an assessment and one of an intervention conducted by the provisional psychologist. The case examples should each be approximately 400 words in length and signed by the supervisor and provisional psychologist.

The progress report must be signed by both the principal supervisor and provisional psychologist with original signatures included on the submitted report. The supervisor's signature on the progress report verifies his/her approval of the case examples written by the provisional psychologist for submission to the Board.

Progress reports must be submitted within 14 days of the due date. If there are extenuating circumstances which might prevent the report being submitted on time, the supervisor must contact the Board in writing prior to the date on which the report is due. If the report is submitted more than 14 days after the end of the six month reporting period, that period of the internship program may not be recognised by the Board.

The Board will provide feedback regarding any concerns it has about the provisional psychologist's progress in his/her internship program based on its appraisal of the progress report. Concerns may relate, for example, to issues such as work role, frequency of supervision, standard of case examples etc.

Please refer to section 8 of the *Guidelines for 4+2 internship program* for further information about the Board's requirements for progress reports.

Case example requirements:

The information the provisional psychologist presents in his/her case examples of a brief account of an assessment and an intervention he/she has conducted must be presented in a logical, consistent, integrated manner demonstrating psychological knowledge and skill. Information presented in each section must be relevant and clearly linked.

The purpose of the **assessment case example** is for the provisional psychologist to demonstrate his/her general psychological assessment skills (which may include skills in test selection, administration and interpretation) and his/her ability to integrate all assessment information. The purpose of the **intervention case example** is for the provisional psychologist to demonstrate his/her skill in defining a specific target problem(s) relevant to the client's needs/presenting issues and developing a treatment plan directly linked to these issues.

The case example should follow the format set out in the progress report form and address the following headings:

Assessment case example

Reason for referral and client presentation

The reason for referral is provided in brief: e.g. referred by whom? referred for? context? relevant demographic information? A brief assessment of presenting issues as described by the client/relevant others is provided. The provisional psychologist demonstrates that he/she does not simply act on the referral question without doing his/her own thinking and identifies and clearly states the purpose of the assessment according to his/her own hypothesis generation.

Assessment of symptoms including effect on client's functioning

A brief assessment is provided of relevant aspects of the client's mental state, behaviour or organisational issues such as: onset, course, severity of symptoms/problem situation and associated impairment of functioning. Assessment of risk and risk factors is undertaken if indicated.

Relevant history of presenting problem

Relevant information is provided in brief: e.g. psychosocial/ educational/occupational; medical/psychiatric; alcohol/drug; offending; organisational; and previous interventions. The provisional psychologist integrates relevant historical information with his/her assessment of symptoms/presenting issues.

Test Selection and interpretation (if used)

There is a brief rationale for the test selected and brief interpretation of results using correct terminology. The test results are considered with respect to the provisional psychologist's assessment of the client's symptoms/presenting issues.

Diagnosis and justification or rationale for why a formal diagnosis was not appropriate

A diagnosis is given based on the provisional psychologist's integration of all assessment information and with reference to a standard diagnostic system relevant to area of practice. If a diagnosis is not appropriate then the provisional psychologist is asked to provide a brief formulation of the presenting issues. The reader must reach the diagnosis section ready to concur with the diagnosis/formulation presented – there should be no surprises! Differential diagnoses may be mentioned and a brief rationale provided for exclusion.

Intervention Case Example

Client presentation and target problem for intervention

A brief description of client's presenting issues is provided. The specific target problem(s) selected for intervention is **clearly identified**. The provisional psychologist does not simply act on the referral question without doing his/her own thinking and guides the intervention planning and delivery according to his/her own identification of the target problem.

Rationale for selected intervention

A clear link is provided between the client's presentation and target problem(s) and the rationale for the proposed intervention. Reference is made to an appropriate evidence based intervention for the specific target problem(s).

Brief outline of intervention plan

Plan must be realistic given the complexity of issues, experience of the provisional psychologist and number of therapeutic sessions planned. Specific intervention strategies to address the target problem(s) is identified and an outline of how the plan will be achieved is provided (the “what” and “how” of the plan).

Brief description of application of intervention

Application must be consistent with plan. The summary should be succinct. Examples of how the intervention was implemented would help to demonstrate skill.

Evaluation of effectiveness of intervention

There is a description of how the intervention was subjectively and/or objectively evaluated with information about specific change(s) in presenting symptoms, behaviour or organisational systems. This may include the client’s own report, that of significant others and/or changes on objective psychological measures.