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Education Standards of Clinical Psychology in Hong Kong

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(Distribution list: This Policy shall be read by all staff and members of HKICP, Professional Council and its committees, and the general public.)

1. Objectives

- 1.1 This policy prescribes the education standards necessary for the practice of clinical psychology in Hong Kong to ensure that all registrants of HKICP have acquired the academic knowledge and clinical skills necessary for reliable service provision.
- 1.2 The education standards set by HKICP aim at protecting the public and maintaining public confidence in the profession.
- 1.3 The education standards are set with due consideration of the following:
 - 1.3.1 Risks to service users and the public,
 - 1.3.2 Knowledge, skills and experience required to provide good quality care,
 - 1.3.3 Development and advancement of the profession,
 - 1.3.4 Maintenance of public confidence,
 - 1.3.5 Stakeholder consultation.

2. Scope

- 2.1 HKICP requires all its registrants to meet these education standards, and will ensure that only those who fulfil these requirements are admitted to the Register.
- 2.2 These education standards cover the following areas:
 - 2.2.1 Recognition and interpretation of clinical signs of impairment.
 - 2.2.2 Alertness to, and recognition of underlying pathologies which may be masked by presenting problems.
 - 2.2.3 Recognition of the need to refer to another health profession (e.g. psychiatrist or other medical practitioners) based on knowledge of psychiatric and psychological disorders, human diseases, and social determinants of health.

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- 2.2.4 Recognition of unwanted effects of therapies.
- 2.2.5 Infection control practices e.g. wearing mask, hand hygiene including provision of handwashing facilities and/or alcohol rub, and adherence to the guidelines set by Centre of Health Protection (CHP). Registrants should refer to CHP guidelines for details of infection control practices in case of infectious disease alert.
- 2.2.6 Prevention of harm and accident, including self-harm and violence of patients.

3. Definitions

- 3.1 HKICP upholds the education standards of the clinical psychology profession via an Accreditation Scheme of local clinical psychology training programmes and placement settings.
- 3.2 The minimum education standards necessary for the practice of clinical psychology in Hong Kong are presented as the criteria for accreditation in the following sections.
- 3.3 The procedures for the Accreditation of Clinical Psychology Training Programme and Accreditation of Clinical Placement Setting for Clinical Psychology Training are presented in separate documents of HKICP (HKICP- CPD-PD-003-R0 & HKICP- CPD-PD-004-R0).

4. Criteria for Accreditation of Clinical Psychology Training Programme

4.1 Scope of accreditation

- 4.1.1 Local postgraduate training programme in clinical psychology¹, which should be a full-time master's degree programme with at least two-year duration or a full-time doctoral degree programme with at least three-year duration or their equivalent. The programme should be under the governance of an **academic unit or a department** of the university in

¹ Completion of a local clinical psychology programme leads to a degree conferred by a university in Hong Kong S.A.R.

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terms of standards, qualifications and quality assurance and has a residence period requirement of at least 18 months for master's degree programme or 24 months for doctoral degree programme ².

4.1.2 Local **post-qualification advanced training programme** in clinical psychology for clinical psychologists, full-time or part-time, that leads to a doctoral degree in clinical psychology (PsyD/ DPsy/ PhD) can be endorsed by HKICP if the entry qualification of the programme satisfies the eligibility of entry qualification for full registration under the long-term arrangement of HKICP. The requirements specified in the rest of this section which are for training programmes that lead to a minimum qualification to become register do not apply to these post-qualification advanced training programmes.

4.2 Selection and entry

4.2.1 The minimum requirement for admission of a student is a first degree conferred by a recognized institution for which psychology has been taken as a main subject in the department of psychology or equivalent, and which covers the fundamental areas as stipulated by the Membership Committee of the Hong Kong Psychological Society (HKPS).

4.2.2 The trainees should have met the basic requirements of graduate membership of the HKPS.

4.3 Staffing

4.3.1 Training programme must have adequate staffing to provide effective training and carry out the required tasks, including management, teaching, co-ordinating and monitoring clinical placements, research supervision, assessment and monitoring of trainees. The ratio of full time staff who are registrants of HKICP to students for the clinical psychology programme should not be less than 1:10.

4.3.2 Where staff external to the core team contribute to the programme, the nature and level of their involvement should be clearly stated. This refers both to other academic staff and contributors from external organisations. The nature and level of involvement of staff who are part-time or visiting should also be clearly specified.

² "residence" requires the student to be present in Hong Kong and attending courses as prescribed by the programme on a regular basis

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4.3.3 The programme must have access to sufficient administrative, clerical, technical or other learning support staff to support its effective delivery.

4.4 Physical resources

Physical resources will normally include teaching, tutorial and laboratory space, learning resources (such as texts and journals, available in hard copy and/or electronically, computing facilities), psychological testing materials, specialist equipment supporting psychological research, software supporting data collection and analysis in psychology research, and other information technology facilities.

4.5 Assessment

4.5.1 Rules, regulations, methods and criteria for assessment and evaluation of trainees should be made available to trainees, staff, supervisors and external examiners.

4.5.2 There should be adequate procedures available to ensure that trainees who are incompetent or whose behaviour is unethical do not obtain a qualification in clinical psychology, and that such trainees should be identified as early as possible and are not allowed to continue if remedial action is ineffective.

4.6 Quality management

A quality management system should be in place to ensure that the programme continues to maintain its standards and reflect contemporary learning, research and practice in clinical psychology.

4.7 Core Components of the Training Programme

4.7.1 Coverage and Standard of academic course

4.7.1.1 The training programme should have an academic syllabus and a coherent plan of implementation. The programme should be taught on a face-to-face basis to the provision of underpinning body of knowledge, clinical skills and research. The programme's curriculum requires the equivalent of a minimum of two and three academic years of full-time graduate study for master-level and doctoral programmes, respectively.

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- 4.7.1.2 There should be a balanced coverage of a variety of client groups across the life span and a wide range of clinical methods and approaches irrespective of the orientation or emphases of the training programme.
- 4.7.1.3 Major academic teaching should be undertaken by qualified clinical psychologists, with supplementary input from other professionals where appropriate.
- 4.7.1.4 The academic training should adequately cover the following core subject areas:
- 4.7.1.4.1 Psychological assessment methods, interpretation of findings, formulation of problems and implications for future management.
- 4.7.1.4.2 Theories of psychological problems of main client groups of children/adolescents, adults and the elderly.
- 4.7.1.4.3 Psychological treatment with different orientations (at least 2 evidence-based models), each covering body of knowledge and clinical skills from philosophical, theoretical, practical and empirical aspects.
- 4.7.1.4.4 Professional and ethical issues.
- 4.7.1.4.5 Research methodology.
- 4.7.1.4.6 Neuropsychology.
- 4.7.1.4.7 Health psychology.
- 4.7.1.4.8 Community psychology.
- 4.7.1.5 The adequacy of coverage of a core subject area is judged not only on the time allocated for it in the syllabus, but also on the depth, quality and competency it is pursued.
- 4.7.1.6 Students should be equipped with basic interview skills before the start of clinical placements.
- 4.7.1.7 The training programme should have mechanism(s) to ensure that it is responsive to new developments and areas of concern within the profession. Mechanism(s) should also be in place to ensure that the training program should adjust its teaching content accordingly.
- 4.7.1.8 There should be mechanism(s) to ensure a sufficient integration of theory and practice between the academic teaching and clinical

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placement.

4.7.1.9 Clinical skills training should be included in the academic curriculum

4.7.2 Standard of clinical training requirement (placement / internship)

4.7.2.1 Coverage of training

4.7.2.1.1 Adequacy of clinical training is not merely counting specific lengths of time in particular placements, it should be competency-based and has an adequate balance allocated across services and client groups so that trainees must gain the range of experience across services, systems, clients, disciplines and life span.

4.7.2.1.2 Clinical training should cover the followings:

- 4.7.2.1.2.1 clients across the lifespan with the range of service users whose difficulties are representative of problems across all stages of development,
- 4.7.2.1.2.2 experience in working across a range of healthcare system and providers,
- 4.7.2.1.2.3 work within multi-disciplinary teams and specialist service.

4.7.2.2 Amount of training

4.7.2.2.1 As part of the program curriculum, the applicant has completed no less than 220 days or equivalent clinical training / placement under the direct supervision of clinical psychologist who is employed in such capacity by the same clinical practice setting to provide clinical psychology service AND is with professional qualification and experience acceptable to HKICP.

4.7.2.2.2 No less than 80% of the supervised clinical practice shall be conducted in HKICP accredited placement settings. Exemption might be granted to individual trainee who is unable to fulfill this 80% requirement due to special circumstances. An example of special circumstances include, but not limited to, the trainee is non-Chinese speaking and hence unable to perform clinical duties in some local settings. In any case, the number of exempted trainees shall not exceed 20% of the total intake for that batch, rounding up to the nearest number of person.

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4.7.2.2.3 The duration, the number of clients seen and the time spent with clients in each placement should be adequate for the trainee to gain experience in developing the skills in assessment, formulation, intervention, evaluation and reporting. At least 25% of the supervised clinical placement time is in providing direct face-to-face psychological services to patients / clients. The trainee should be given the opportunity to see a sufficient number of clients in a placement setting to enable the acquisition of competence to provide clinical service in that particular setting.

4.7.2.3 Scope of training

4.7.2.3.1 All trainees should obtain core experience from at least 4 accredited placement settings (refer to section 5 for criteria of accredited clinical placement setting) which has included coverage of not less than 44 days for each of the following 3 major clinical populations served in a multidisciplinary setting, such as hospital, medical / mental health organization, or social / rehabilitation care organization:

4.7.2.3.1.1 Adults with psychological problems (which should include a substantial component of Diagnostic and Statistical Manual of Mental Disorders (DSM) or International Classification of Diseases (ICD) diagnosable mental disorders, such as common mental disorders and severe mental illness),

4.7.2.3.1.2 Children or adolescents with psychological problems,

4.7.2.3.1.3 Individuals with medical or mental condition(s) requiring multidisciplinary rehabilitation services.

4.7.2.3.2 For each of the placements, trainees should have adequate opportunity to experience a broad area of problem categories and treatment demands.

4.7.2.3.3 Trainees should have experience of direct individual and group service with clients, and co-operation with multi-disciplinary team and teaching.

4.7.2.4 Collaboration with supervisors

4.7.2.4.1 There should be written guidelines on clinical supervision. Other than the qualifications of the clinical supervisors, the guidelines should include the minimum contact hours, the mechanism of evaluation of trainees and that of feedback from trainees. The training programme should ensure that all clinical supervisors are fully aware of their

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responsibilities and be ready to fulfill the responsibility.

- 4.7.2.4.2 The training institute should have an adequate knowledge of the settings in which trainees are placed. There should be regular liaison between the clinical tutor (or equivalent post) of the training programme and the clinical placement supervisor in regard to the progress in the clinical training of the trainee. Visit to the placement by the clinical tutor should be made when necessary.
- 4.7.2.4.3 There should be a formal process whereby the clinical tutor (or equivalent post) can monitor the clinical experience of trainees and the supervision provided and helps to resolve any problems that may have arisen during the placement. The Clinical Director of the clinical psychology training programme, head of service of placement settings and supervisors should work out an audit process for the clinical placements and supervision.

4.7.3 Research

- 4.7.3.1 There should be a formal teaching course on research methods. There should be emphasis on the significance of research as a cornerstone for the profession of clinical psychology.
- 4.7.3.2 The completion of a dissertation in the form of an original and critical study should be the requirement for the completion of the training programme.
- 4.7.3.3 There should be adequate time for trainees to plan, organize and implement the research.
- 4.7.3.4 The dissertation should have an empirical orientation comprising either (a) data collection and manipulation; or (b) analysis of existing data sets. Dissertation in the form of a literature review will not be accepted.

4.7.4 Personal Growth

- 4.7.4.1 Course organizer and clinical placement supervisors should be alert to personal issues that bear on a trainee's professional performance and academic achievement. Provisions for the discussion of such matters should be available.
- 4.7.4.2 The emphasis on personal growth should be made alongside the academic teaching.

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5. Criteria for Accreditation of Clinical Placement Setting for Clinical Psychology Training

5.1 Aim of clinical placement

To ensure that clinical psychology trainees develop their body of knowledge, core skills and competency through supervised clinical practice and experiences with different client groups and have a full range of psychological work in various settings.

5.2 Scope of accreditation

Local placement settings with qualified supervisors providing supervised clinical practice for CP trainees that fulfill the criteria set out here.

5.3 Scope of clinical training

Scope of clinical training offered by placement settings should be specified. The scope may cover the following:

- 5.3.1 Adult psychological problems,
- 5.3.2 Child & Adolescent psychological problems,
- 5.3.3 Individuals with medical/ mental conditions or physical/ intellectual/ learning disabilities,
- 5.3.4 Criminal offending behaviours, or
- 5.3.5 Health and community psychology issues.

5.4 Qualifications of supervisors

- 5.4.1 The supervisor of a CP trainee shall be a qualified clinical psychologist, i.e. a registrant of HKICP, who has at least 3 years' full-time post-qualification relevant experience.
- 5.4.2 The supervisor should be employed as clinical psychologist in the setting and be able to provide on-site supervision in the unit in which the work is carried out.
- 5.4.3 When the supervisor provides supervision in a particular setting, he/she should normally have worked for at least one year in the placement

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setting.

5.5 Setting up the placement

- 5.5.1 The supervisor and trainee must have an opportunity to meet either before, or at the very beginning of a placement to discuss the range of experience which is to be provided, and the expectations of each other. The general aims of the placement should be agreed and a placement contract should be written, with due consideration of the range of learning opportunities available in the placement, and the needs, interests and previous experience of the trainee.
- 5.5.2 The supervisor must plan an induction for the trainee, arrange for cover in the event of annual or other leave and should plan casework well in advance.
- 5.5.3 Trainees should have access to shared office space and facilities. Trainees must be given guidance on the facilities available, including clerical and IT support for placement work and access to psychological tests and instruments.

5.6 Quantity and quality of clinical supervision

- 5.6.1 There should be on average at least one hour of direct contact with the clinical supervisor for each full day of placement. Direct contact should include: i) face-to-face supervision, ii) observation of supervisor performing clinical work, and iii) observation of trainee performing clinical work. Each of these components should not be less than 20% of the direct contact hours.
- 5.6.2 Various forms of team supervision for groups of trainees are acceptable. But each trainee must have a named supervisor who is responsible for the co-ordination of his/her supervision and who formally assesses the trainee in consultation with other supervisor(s) involved (see section 5.6.3 for the requirement of individual supervision).
- 5.6.3 Where supervision comprises a mix of individual and small group formats, no less than 50% should be individual supervision. During individual supervision, trainees must be provided with opportunities to discuss issues related to professional development, overall workload and organizational difficulties as well as on-going case work. Longer supervision should be arranged whenever needed. In addition,

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supervisors should try to make themselves available for informal discussion of matters that arise between formal supervision sessions.

- 5.6.4 Supervisors should be prepared to discuss seriously and sympathetically any general issues of relationship with patients or staff that arise in clinical work. They should be sensitive to any issues between the trainee and the client and be prepared to discuss these in a supportive way when they are considered to affect the trainee's work. However, supervisors should not require or coerce trainees to disclose personal information unrelated to the training. Supervisors should respect the right of a trainee to retain reasonable personal privacy and to develop the trainee's individual orientation within the confines of the training programme. (Refer to the Code of Ethics of HKICP, HKICP-ECI-PO-001-R0).
- 5.6.5 Supervisors shall not engage their trainees in psychotherapy or any similar procedure except with the voluntary informed consent of the trainee and when such consent is given for the specific purpose of training in that procedure. (Refer to the Code of Ethics of HKICP)
- 5.6.6 Adequate time for relevant reading and documentation must be made available to the trainee on placement.
- 5.6.7 Supervisors have a crucial role in contributing to the integration of the academic and practical aspects of the clinical psychology programme. They should discuss literature relevant to the clinical work in hand and suggest suitable reading to the trainee. In general they should help trainees to develop a scholarly and critical approach to their clinical work.
- 5.6.8 Supervisors should keep abreast of theoretical, research and professional developments in their fields of work, and participate in continuing professional development, including workshops on supervisory skills organized by the clinical psychology training programmes.

5.7 Feedback and review

- 5.7.1 There must be a formal interim review of the trainee's progress and experience provided in the placement. The aims of this review are:
- 5.7.1.1 To review progress of the training according to the placement contract,
 - 5.7.1.2 To give feedback to the trainee on his/her clinical performance,
 - 5.7.1.3 To allow the trainee to comment on the adequacy of the placement,

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- 5.7.1.4 To set targets based upon the above for the remainder of the placement,
- 5.7.1.5 To give feedback to the supervisor on his/her performance.
- 5.7.2 Full evaluation and written feedback on the trainee's performance on the placement must be provided at the end of the placement. The trainee must have the opportunity to read and comment on the full report written by the supervisor.
- 5.7.3 Supervisors should be familiar with the continuous assessment requirements for trainees and the specific criteria for passing and failing in the assessment of clinical competence set by the clinical psychology programmes.
- 5.7.4 Trainees must have the opportunity to provide feedback on the adequacy of placement and supervision.
- 5.7.5 The supervisory relationship, supervision and the clinical practice should be bound by Code of Ethics of HKICP.

6. Review

- 6.1 The education standards for clinical psychology training programme and clinical placement setting outlined in this document are subject to review by the Registration Committee (RC) at least every 3 years in accordance with relevant research and evidence as well as development of the clinical psychology profession in Hong Kong, or any time as appropriate after stakeholder consultation.
- 6.2 Updates will be disseminated to registrants by e-mail within 6 weeks and made available on the HKICP website within 3 months of effective date.

7. Reference documents

- 7.1 American Psychological Association - Commission on Accreditation. 2016. Standards of Accreditation for Health Service Psychology. *Periodical* 2016.
- 7.2 Australian Psychological Society. 2013. College Course Approval Guidelines for Postgraduate Professional Courses. *Periodical* 2013.
- 7.3 Australian Psychology Accreditation Council. Rules for Accreditation and

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