

University of Florida
College of Public Health & Health Professions Syllabus
Course Number CLP 7934: Pediatric Psychology (3 credit hours)
Fall: 2015
Delivery Format: On-Campus

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Preferred Course Communications: E-mail or office phone

Prerequisites

Second year or higher graduate student in Clinical and Health Psychology

PURPOSE AND OUTCOME

Course Overview

The learning objectives for this class include: (1) Increasing students' knowledge in a broad range of pediatric/child health psychology topics; (2) Delineating the types of psychological services provided by pediatric psychologists; (3) Promoting a critical understanding of the pediatric psychology literature; and, (4) Fostering an awareness of the critical issues (both research and clinical) in the field of pediatric psychology.

Relation to Program Outcomes

This course fulfills requirements for additional child/pediatric area of concentration courses (Department of Clinical and Health Psychology PhD program).

Course Objectives and/or Goals

Upon successful completion of the course, students will be able to:

- Enhance working knowledge and awareness in a broad range of pediatric/child health psychology topics.
- Delineating the types of psychological services provided by pediatric psychologists
- Promoting a critical understanding of the pediatric psychology literature
- Fostering an awareness of the critical issues (both research and clinical) in the field of pediatric psychology.

Instructional Methods

The course format will include didactics, class discussion, and student class presentations. Additional readings may be assigned throughout the semester. Students should come to each class prepared and ready to contribute to class discussion, as this class will focus heavily on interactive participation. Therefore, advanced preparation (reading articles, writing questions) and class participation of students is expected and essential. Attendance and active participation in class sessions is required.

DESCRIPTION OF COURSE CONTENT – WEEKLY TOPICS & READINGS

<p>Week 1 –</p> <p>Monday, Aug 24th</p>	<p>History of Pediatric Psychology</p> <ul style="list-style-type: none"> •HPP 4th Edition – Chapter 1: Aylward, Bender, Graves & Roberts (2009). Historical Developments and Trends in Pediatrics Psychology. (pp. 3-18). •Lavigne, J.V. (2013). Commentary for Pioneers in Pediatric Psychology: Thirty-Seven Years of Research, Training, and Clinical Practice in Pediatric Psychology. <i>Journal of Pediatric Psychology</i>, 38, 135-140.
<p>Wed, Aug 26th</p>	<p>Professional Roles in Pediatric Psychology</p> <ul style="list-style-type: none"> •Drotar et al. (2003). Professional roles and practice patterns. In M. Roberts (Ed.), <i>Handbook of Pediatric Psychology</i> (pp 50-68). New York: The Guilford Press. •Opipari-Arrigan, L., Stark, L., & Drotar, D. (2006). Benchmarks for work performance of pediatric psychologists. <i>Journal of Pediatric Psychology</i>, 31, 630-642.
<p>Week 2 – Monday, August 31st</p>	<p>Models of Illness, Health Promotion & Behavior Change</p> <ul style="list-style-type: none"> • HPP 4th Edition - Chapter 40. Wilson & Lawman (2009). Health Promotion in Children and Adolescents: An Integration of the Biopsychosocial Model and Ecological Approaches to Behavior Change (pp. 603-617). •Rosenstock, I. M.; Strecher, V. J., Becker, M. H. (1 January 1988). "Social Learning Theory and the Health Belief Model". <i>Health Education & Behavior</i> 15 (2): 175–183. •Modi et al (2012). Pediatric Self-management: A Framework for Research, Practice and Policy. <i>Pediatrics</i>, 129, e473-e485. •OPTIONAL: •Ryan et al (2008). Facilitating health behaviour change and its maintenance: Interventions based on Self-Determination Theory. <i>The European Health Psychologist</i>, 10, 2-5. •Prochaska, DiClemente & Norcross (1992). In Search of How People Change: Applications to Addictive Behavior. <i>American Psychologist</i>, 47, 1102-1114.
<p>Wed, Sept 2nd</p>	<p>NO CLASS – FAC</p>
<p>Week 3 – Mon, Sept 7th</p>	<p>NO CLASS – LABOR DAY</p>
<p>Wed, Sept 9th</p>	<p>Adjustment, Coping and Quality of Life</p> <ul style="list-style-type: none"> •Wallander, J.L., et al (2003). Psychosocial adjustment of children with chronic physical conditions. In M. Roberts (Ed.), <i>Handbook of Pediatric Psychology</i> (pp 141-148). •Compas et al (2012). Coping with Chronic Illness in Childhood and Adolescence. <i>Annual Review of Clinical Psychology</i>, 8, 455-480. •OPTIONAL: HPP 4th Edition – Chapter 51: Baraket, Pulgaron, & Daniel (2009).

	<p>Positive Psychology in Pediatric Psychology. (pp. 763-773).</p> <p>• OPTIONAL: Maloney & Gross (2004). Coping with chronic health conditions. In D. Clay (ed) <i>Helping Schoolchildren with Chronic Health Conditions</i> (pp. 81-98, plus handouts to p.142). New York: The Guilford Press</p>
<p>Week 4 –</p> <p>Monday, Sept 14th</p>	<p>Adherence</p> <p>•HPP 4th Edition – Chapter 9: La Greca, A. M., & Mackey, E.R. (2009). Adherence in Pediatric Treatment Regimens (pp. 130-152).</p> <p>•Wu, Y., et al (2013). Pediatric Psychologist use of adherence assessments and interventions. <i>Journal of Pediatric Psychology</i>, 38, 595-604.</p> <p>•Pai AL, McGrady M. (2014). Systematic review and meta-analysis of psychological interventions to promote treatment adherence in children, adolescents & young adults with chronic illness. <i>J Pediatr Psychol</i>, 39, 918-31</p> <p>•OPTIONAL: Pai, AL & Drotar, D. (2010). Treatment adherence impact: the systematic assessment and quantification of the impact of treatment adherence on pediatric medical & psychological outcomes. <i>J Pediatr Psych</i>, 35, 383-93.</p>
<p>Wed, Sept 16th</p>	<p>Training and Competencies in Pediatric Psychology</p> <p>•Palermo, T., Janicke, D, McQuaid, E., Mullins, L., Robins, P., & Wu, Y (2014). Recommendations for training in pediatric psychology: Defining core competencies across training levels. <i>Journal of Ped Psych</i>, 39, 965-984.</p> <p>•Steele et al (2014). Commentary: Finding the Middle Bowl: Goldilocks' Lessons on Professional Competencies in Pediatric Psychology. <i>Journal of Pediatric Psych</i>, 39, 988-997.</p> <p>•Cohen (2014). Commentary: Competencies in Pediatric Psychology: Polishing Pandora's Box <i>Journal of Pediatric Psych</i>, 39, 985-987.</p> <p>•OPTIONAL: Spirito, A., Brown, R.T., D'Angelo, E., Delamater, A., Rodrigue, J., & Segal, L. (2003). Society of Pediatric Psychology Task Force Report: Recommendations for the training of pediatric psychologists. <i>Journal of Pediatric Psychology</i>, 28, 85-98.</p>
<p>Week 5 –</p> <p>Monday, Sept 21st</p>	<p>Inpatient Consultation & Liaison</p> <p>•HPP 4th Edition – Chapter 8: Carter, B.D., Kronenberger, W.G., Scott, E, & Ernst, M.E. (2009). Inpatient Pediatric Consultation – Liaison (pp. 114-129).</p> <p>•Drotar D. (2000). Consultation and collaboration in pediatric inpatient settings. In D. Drotar (ed), <i>Consultation with Pediatricians: Psychological Perspectives</i>. pp 49-63. Plenum Press, New York.</p>

Wed, Sept 23 rd	<p>Clinical Practice in Pediatric Psychology & Health Insurance</p> <ul style="list-style-type: none"> •HPP 4th Edition – Chapter 5: Tynan, Stehl, & Pendley (2009). Health Insurance and Pediatric Psychology (pp. 71-88). •Lines, M.A. et al. (2012). Commentary: The Use of Health and Behavior Codes in Pediatric Psychology: Where Are We Now? <i>JPP</i>, 37, 486-490.
<p>Week 6 –</p> <p>Monday, Sept 28th</p>	<p>Affordable Care Act & the Future of Ped Psychology</p> <ul style="list-style-type: none"> •Rozensky, R.H., & Janicke, D.M. (2012). Health care reform and psychology's workforce: Preparing for the future of pediatric psychology. <i>Journal of Pediatric Psychology</i>, 37, 359-368. •Asarnow, J.R., et al (2015).Integrated Medical-Behavioral Care Compared With Usual Primary Care for Child and Adolescent Behavioral Health: A Meta-analysis. <i>JAMA Pediatrics</i>. •Roberts, M. C., Canter, K. S., & Odar, C. C. (2012). Commentary: A call to action to secure the future of pediatric psychology—Resonating to the points of Rozensky & Janicke (2012). <i>Journal of Pediatric Psychology</i>, 37, 369–375. •HPP 4th Edition – Chapter 42: Stancin, Perrin, & Ramiez (2009). Pediatric Psychology and Primary Care (pp. 630-648). New York.
Wed, Sept 30 th	<p>Asthma (Fedele Guest Lecture)</p> <ul style="list-style-type: none"> •McQuaid, E. L., & Abramson, N.W. (2009). Pediatric asthma (Chapter 17). In M. C. Roberts & R.G. Steele (eds.), <i>Handbook of Pediatric Psychology</i> (4th Ed.) (pp. 254-270). New York: Guilford Press. •Collins JE, et al (2008). Mental, emotional, and social problems among school children with asthma. <i>J of Asthma</i>, 45, 489-93.
<p>Week 7 –</p> <p>Monday, Oct 5th</p>	<p>Systems and Family Systems</p> <ul style="list-style-type: none"> •HPP 4th Edition – Chapter 44: Kazak, Rourke, & Navsaria (2009). Families and Other System in Pediatric Psychology (pp. 656-671). •Alderfer, M.A., et al. (2008). Evidence-based Assessment in Pediatric Psychology: Family Measures. <i>Journal of Pediatric Psychology</i>, 33, 1046-1061. •OPTIONAL - HPP 4th Edition – Chapter 43: Steele & Alyward. (2009). An Overview of Systems in Pediatric Psychology Research & Practice(pp. 649-655). • OPTIONAL - HPP 4th Edition – Chapter 47: Seid, Opiipari-Arrigan & Sobo (2009). Families' Interactions with the Health Care System: Implications for Pediatric Practice (pp. 703-720)
Wed, Oct 7 th	NO CLASS – FAC

<p>Week 8 –</p> <p>Monday, Oct 12th</p>	<p>Behavioral Pediatrics (Feeding Aversion & Encopresis/Enuresis)</p> <ul style="list-style-type: none"> •HPP 4th Edition – Chapter 29: Silverman, A.H., & Tarbell, S. (2009). Feeding and vomiting problems in pediatric populations (pp. 429-445). •HPP 4th Edition – Chapter 32: Campbell, Cox, & Borowitz (2009). Elimination Disorders: Enuresis & Encopresis (Chapter 32).(pp. 481-490). •Ritterband, L. M., Cox, D. J., Walker, L. S., Kovatchev, B., McKnight, L., Patel, K., Borowitz, S., . . . Sutphen, J. (2003). An internet intervention as adjunctive therapy for pediatric encopresis. <i>Journal of Consulting and Clinical Psychology</i>, 71(5), 910-917.
<p>Wed, Oct 14th</p>	<p>Peds Traumatic Brain Injury (Guest Lecture – Shelley Heaton)</p> <p><i>*Readings to be Determined</i></p>
<p>Week 9 –</p> <p>Monday, Oct 19th</p>	<p>Pain Management (Acute & Chronic)</p> <ul style="list-style-type: none"> •HPP 4th Edition – Chapter 10; Dahlquist & Switkin-Nagel (2009). Chronic and Recurrent Pain (pp. 153-170). •HPP 4th Edition – Chapter 11: Blount et al (2009). Management of Pediatric Pain and Distress Due to Medical Procedures (pp. 171-188). • HPP 4th Edition – Chapter 28: Tarnowski & Brown (2009). <i>Pediatric Burns</i>. (pp. 420-428).
<p>Wed, Oct 21st</p>	<p>Transition from Child to Adult Care in Chronic Illness Populations</p> <ul style="list-style-type: none"> •American Academy of Pediatrics (2002). Consensus Statement on Health Care Transitions for Young Adults with Special Health Care Needs. <i>Pediatrics</i>, 110, 1304-1306. •Reiss J & Gibson R. (2002). Health care transition: Destinations unknown. <i>Pediatrics</i>, 110, 1307-1314. •Bowen, Henske, & Potter (2010). Health Care Transition in Adolescents and Young Adults With Diabetes. <i>Clinical Diabetes</i>, 28, 99-106. •OPTIONAL: Pai, A.H., & Schwartz, L. (2011). Introduction to the Special Section: Health Care Transitions of Adolescents and Young Adults with Pediatric Chronic Conditions. <i>Journal of Pediatric Psychology</i>, 36,129-133.
<p>Week 10</p> <p>Mon, Oct 26th</p>	<p>End-of-Life Issues (Death, Palliative Care, and Bereavement)</p> <ul style="list-style-type: none"> • HPP 4th Edition – Chapter 14: Gerhardt et al. (2009). Palliative Care, End of Life, and Bereavement (pp. 216-226). •Mauk, G. W., & Sharpnak, J. D. (1997). Grief. In G. G. Bear, K. M. Minke, & A. Thomas (Eds.), <i>Children's needs II: Development, problems, and alternatives</i> (pp. 375-385). Bethesda, MD: National Association of School Psychologists.

<p>Wed. Oct 28th</p>	<p>Translation and Disseminations</p> <ul style="list-style-type: none"> •Glasgow, R.E., Klesges, L.M., Dzewalkowski, D.A., Bull, S.S., & Estabrooks, P. (2004). The future of health behavior change research: What is needed to improve translation of research into health promotion practice? <i>Annals of Behavioral Medicine</i>, 27, 3-12. •Estabrooks & Allen (2012).Updating, Employing, and Adapting: A Commentary on What Does It Mean to “Employ” The RE-AIM Model. <i>Evaluation and the Health Professions</i>, 36, 67-72 •Glasgow et al (2002). The RE-AIM framework for evaluating interventions: what can it tell us about approaches to chronic illness management? <i>Patient Education and Counseling</i>, 44, 119-127.
<p>Week 11 Monday, Nov 2nd</p>	<p>eHealth & mHealth Applications in Pediatric Psychology</p> <ul style="list-style-type: none"> •Wu, et al (2014). Commentary: Pediatric eHealth Interventions: Common Challenges During Development, Implementation, and Dissemination. <i>J of Pediatric Psychology</i>, 39, 612-623. •Cushing & Steele (2010). A Meta-Analytic Review of eHealth Interventions for Pediatric Health Promoting and Maintaining Behaviors. <i>J of Pediatric Psychology</i>, 35, 937-949. •Brannon & Cushing (2015). A Systematic Review: Is There an App for That? Translational Science of Pediatric Behavior Change for Physical Activity and Dietary Interventions. <i>J of Pediatric Psychology</i>, 40, 373-384.
<p>Wed, Nov 4th</p>	<p>Economic, Racial & Ethnic Health Disparities (Fedele Guest Lecture)</p> <ul style="list-style-type: none"> •HPP 4th Edition – Chapter 6: Clay, D. L. (2009). Cultural and Diversity Issues in Research and Practice. (pp. 89-98). •Brach, C., & Fraserirector, I. (2000). Can cultural competency reduce racial and ethnic health disparities? A review and conceptual model. <i>Medical Care Research and Review</i>, 57, 181-217.
<p>Week 12 Mon, Nov 9th</p>	<p>Quality Improvement and Cost Effectiveness</p> <ul style="list-style-type: none"> •McGrady, M.E. (2014). Commentary: demonstrating cost-effectiveness in pediatric psychology. <i>Journal of Pediatric Psychology</i>, 39, 602-611.\ •Muennig, P. (2008). Defining and explaining cost-effectiveness (Chapter 1) in <i>Cost-effectiveness analysis in health: A practical approach</i>. San Francisco, CA: Jossey-Bass.
<p>Wed, Nov 11th</p>	<p>NO CLASS - - VETERAN'S DAY</p>
<p>Week 13 Mon, Nov 16th</p>	<p>Ethical Issues in Pediatric Psychology</p> <ul style="list-style-type: none"> •HPP 4th Edition – Chapter 2: Rae, Brunnuell & Sullivan (2009). Ethical and Legal Issues in Pediatric Psychology (pp. 19-34).

Wed, Nov 18th	Psychopharmacology <ul style="list-style-type: none"> •HPP 4th Edition – Chapter 12: Brown, Daly, Carpenter, & Cohen (2009). Pediatric Pharmacology and Psychopharmacology (pp. 189-204). •Brown R., et al (2006). Working Group on Psychotropic Medications for Children and Adolescents. Read “Preface and Executive Summary” (pages 11-19). Washington, D.C., American Psychological Association
Week 14 Mon, Nov 23rd	Genetics, Genetics Testing, and Epigenetics <ul style="list-style-type: none"> •Nugent, Goldberg, & Uddin. (2015). Topical Review: The Emerging Field of Epigenetics: Informing Models of Pediatric Trauma and Physical Health. <i>Journal of Pediatric Psychology, Advanced Access</i>. • HPP 4th Edition – Chapter 48: Tercyak, K.P. (2009). Genetics and Genetic Testing. (pp. 721-736).
Wed, Nov 25th	NO CLASS -- THANKSGIVING HOLIDAY
Week 15, Mon, Nov 30th	Student Presentations
Wed, Dec 2nd	Student Presentations
Week 16, Mon, Dec 7th	Student Presentations
Wed, Dec 9th	Student Presentations

Course Materials and Technology

Class readings will be available in PDF form on the student share drive. However, many of the readings will be taken from the following book. Thus, it is recommended that students who plan to build a career in pediatric psychology consider purchasing this text from on-line bookstores (e.g., Amazon.com). Of note, the 5th Edition of the Handbook is currently in development and is expected to be available for purchase in late 2016 or early 2017.

1. Roberts, M.C. & Steele, R.G. (2009). *Handbook of Pediatric Psychology (4th Edition)*. New York: The Guilford Press.

*All readings for the course are saved in pdf format on the student share drive:

“S:\ICP-Student\2015 – Ped Psych Class”

*Readings highlighted in gray in the syllabus are optional for the specific class period, but will also be included in the readings folders.

ACADEMIC REQUIREMENTS AND GRADING

Your grade will be based on submission of weekly discussion questions, overall class participation, and a class presentation that includes a toolkit. Details for each course requirement are provided below.

<u>Assignment</u>	<u>Points</u>
Class Participation	40
Discussion Question for Each Class	25
Presentation and Toolkit	35
TOTAL POINTS	100

Point system used.

Points earned	93-100	90-92	87-89	83-86	80-82	77-79	73-76	70-72	67-69	63-66	60-62	Below 60
Letter Grade	A	A-	B+	B	B-	C+	C	C-	D+	D	D-	E

Letter Grade	A	A-	B+	B	B-	C+	C	C-	D+	D	D-	E	WF	I	NG	S-U
Grade Points	4.0	3.67	3.33	3.0	2.67	2.33	2.0	1.67	1.33	1.0	0.67	0.0	0.0	0.0	0.0	0.0

For greater detail on the meaning of letter grades and university policies related to them, see the Registrar's Grade Policy regulations at:
<http://catalog.ufl.edu/ugrad/current/regulations/info/grades.aspx>

WEEKLY CONTENT QUESTIONS:

Prior to each class, students are expected to submit one thought-provoking content question based on the assigned readings to promote class discussion. Please submit your questions to Dr. Janicke by **6am the morning of class**. If we have a guest lecturer that day, please submit to Dr. Janicke and the guest lecturer. Content questions should be sent via e-mail (djanicke@php.ufl.edu). Guest lecturer e-mails will be provided as needed. Each question is worth 1 point. Points for each content question are assigned using the following scale:

- 1 Good, though provoking question; clear that material was read adequately
- 0.5 Superficial question; unclear whether material was read thoroughly
- 0 No questions submitted, irrelevant content, or clear lack of effort

There will be 26 classes to submit questions; this includes submitting a question on presentation days, as we will also be assigned one article to read for each presentation. I will drop your lowest score; alternatively, you can choose not to submit a question for one class period. Thus, 25 scores count toward your final course grade. This is worth up to 25 points of your total grade.

If you plan to be absent for an approved reason, you are still responsible for submitting a question.

WEEKLY PARTICIPATION IN CLASS DISCUSSIONS

In order to maximize your learning in this course, it will be essential that you not only read the assigned material, but also understand and apply it. Thus you will be graded on your participation in class discussions throughout the semester. This is worth up to 40 points toward your overall course grade.

PRESENTATION AND TOOLKIT

A large portion of your grade will be based on a presentation you will give in class focusing on an illness condition or other relevant topic in pediatric psychology. You will choose a topic/illness condition from a list of possibilities I have provided below. If you have an alternative idea outside the list provided, you can discuss with me. My strong hope is that you will choose a topic that is of interest to you and something that will extend your knowledge in an area, rather than choosing a topic that is based on the ease with which you can complete it. Your topic choices should be submitted to me during class on **Monday, Oct 12th**. However, the sooner you let me know, the better as it is “first come, first serve”, if you will.

Possible Topics Include:

Cancer, Cystic Fibrosis, Diabetes, Epilepsy, Inflammatory Bowel Disease
Pediatric Organ Transplantation, Sickle Cell Disease

Presentation: Your power point presentation should last between 30 and 35 minutes. There will be two presentations per class. Your presentation should cover the main pathology, risk factors, symptoms, course, and critical treatment components of the illness condition. You should also discuss the important psychosocial concerns, and the most frequent issues of involvement for pediatric psychologist working with youth with this condition.

In addition, you will present a toolkit for the illness that you will develop and distribute to your classmates.

Disease Topic Toolkits: A part of your presentation you will develop and present a “clinical toolkit” of materials (handouts, websites, CD, etc) that can be used for assessment and treatment related to your specific illness as well as other critical issues related to the illness. As noted previously, each topic pertains to a specific illness and a common psychosocial issue/problem related to that illness. Many of the possible assessment and treatment strategies, as well as critical “psychosocial issues/problems” may cut across illnesses. Therefore, feel free to pull in relevant information as it relates to other illness groups.

You will distribute this toolkit to your classmates. In general, the clinical toolkit should be “user friendly” in that your classmates will be able to utilize and apply the information to cases (perhaps with the same health concern or others) seen in their clinical work in the years ahead. Be creative and comprehensive, thinking of what kind of resources you would appreciate having at your disposal should you see a similar case (e.g., bibliotherapy suggestions for families, web site information, copies of non-copyrighted assessment measures, descriptive list of copyrighted and non-copyrighted rating scales, sample monitoring forms, audiotapes or scripts of treatment procedures, strategies for maximizing the effect of a treatment approach, worksheets, etc). It also must include an annotated bibliography for key references useful to a clinician.

**We can discuss as a class how to best distribute your toolkit materials to your classmates.

Style and clarity of presentation	10 points
Content of presentation	10 points
Toolkit	10 points
Ability to answer questions	5 points
Total	35 Points

Policy Related to Required Class Attendance

Attendance is expected as a part of the student’s professional training and will be recorded at the beginning of each class on a sign-in sheet. Students are expected to arrive for class on time and to remain for the full class period. Students needing to miss class or arrive late/leave early should make prior arrangements with the instructor via e-mail. If a student must miss more than one class, the student should work with the instructors to determine a make-up assignment.

Please note all faculty are bound by the UF policy for excused absences. For information regarding the UF Attendance Policy see the Registrar website for additional details:
<https://catalog.ufl.edu/ugrad/current/regulations/info/attendance.aspx>

STUDENT EXPECTATIONS, ROLES, AND OPPORTUNITIES FOR INPUT

Expectations Regarding Course Behavior

Please refrain from using I-pods, cell phones or any other electronic devices during class as it is distracting and inconsiderate of other students and the instructor. Please leave cell phones in carrying case or outside of class; we do not want students utilizing cell phones during class unless there is an urgent issue. Laptop use is acceptable for note taking or presenting; please do not use laptop to search the internet or respond to e-mails during class. No recording of the class will be allowed due to the confidential nature of information to be discussed in the course. It is expected that you will actively participate in discussion during class. Active class participation will enhance learning during the course and aid in meeting the course objective regarding learning how to provide constructive feedback to other students regarding their therapy cases.

Please do not arrive late to class or disrupt the class as it is distracting and inconsiderate of other students and the instructor.

To the extent permitted by facility rules and restrictions, you may bring food and/or beverages to class as long as it does not interfere with your ability to work and/or participate in class and as long as it does not interfere with or your classmates' ability to work and participate in class. You will be expected to clean-up after yourself and dispose of all trash before leaving the classroom.

Communication Guidelines

It is expected that e-mail communications and behavior with course faculty and other students enrolled in the course will be professional and respectful. Per the Clinical and Health Psychology graduate student handbook, it is never appropriate to post information about patients or therapy sessions on the internet in any fashion, even if identifying information is not included. Likewise, it is not appropriate to post information from class discussion regarding patients or students in the course on the internet in any fashion. It is also not appropriate to make negative statements regarding a student's clinical skills to other students in the course or in the graduate program. Concerns about another student's clinical skills should be directed to one of the course faculty.

Academic Integrity

Students are expected to act in accordance with the University of Florida policy on academic integrity. As a student at the University of Florida, you have committed yourself to uphold the Honor Code, which includes the following pledge:

“We, the members of the University of Florida community, pledge to hold ourselves and our peers to the highest standards of honesty and integrity.”

You are expected to exhibit behavior consistent with this commitment to the UF academic community, and on all work submitted for credit at the University of Florida, the following pledge is either required or implied:

“On my honor, I have neither given nor received unauthorized aid in doing this assignment.”

It is your individual responsibility to know and comply with all university policies and procedures regarding academic integrity and the Student Honor Code. Violations of the Honor Code at the University of Florida will not be tolerated. Violations will be reported to the Dean of Students Office for consideration of disciplinary action. For additional information regarding Academic Integrity, please see Student Conduct and Honor Code or the Graduate Student Website for additional details:

<https://www.dso.ufl.edu/sccr/process/student-conduct-honor-code/>

<http://gradschool.ufl.edu/students/introduction.html>

Please remember cheating, lying, misrepresentation, or plagiarism in any form is unacceptable and inexcusable behavior.

Online Faculty Course Evaluation Process

Course evaluations will help to inform improvements and future modifications to the course, and are also used as part of faculty tenure and promotion packets (as such, they may have a direct influence on faculty tenure and promotion). Students are expected to provide feedback on the quality of instruction in this course by completing online evaluations at <https://evaluations.ufl.edu>. Evaluations are typically open during the last two or three weeks of the semester, but students will be given specific times when they are open. Summary results of these assessments are available to students at <https://evaluations.ufl.edu/results/>.

SUPPORT SERVICES

Accommodations for Students with Disabilities

If you require classroom accommodation because of a disability, you must register with the Dean of Students Office <http://www.dso.ufl.edu> within the first week of class. The Dean of Students Office will provide documentation of accommodations to you, which you must then give to me as the instructor of the course to receive accommodations. Please make sure you provide this letter to me by the end of the second week of the course. The College is committed to providing reasonable accommodations to assist students in their coursework.

Counseling and Student Health

Students sometimes experience stress from academic expectations and/or personal and interpersonal issues that may interfere with their academic performance. If you find yourself facing issues that have the potential to or are already negatively affecting your coursework, you are encouraged to talk with an instructor and/or seek help through University resources available to you.

- The Counseling and Wellness Center 352-392-1575 offers a variety of support services such as psychological assessment and intervention and assistance for math and test anxiety. Visit their web site for more information: <http://www.counseling.ufl.edu>. On line and in person assistance is available.
- You Matter We Care website: <http://www.umatter.ufl.edu/>. If you are feeling overwhelmed or stressed, you can reach out for help through the You Matter We Care website, which is staffed by Dean of Students and Counseling Center personnel.
- The Student Health Care Center at Shands is a satellite clinic of the main Student Health Care Center located on Fletcher Drive on campus. Student Health at Shands offers a variety of clinical services. The clinic is located on the second floor of the Dental Tower in the Health Science Center. For more information, contact the clinic at 392-0627 or check out the web site at: <https://shcc.ufl.edu/>
- Crisis intervention is always available 24/7 from:
Alachua County Crisis Center:
(352) 264-6789
<http://www.alachuacounty.us/DEPTS/CSS/CRISISCENTER/Pages/CrisisCenter.aspx>

Do not wait until you reach a crisis to come in and talk with us. We have helped many students through stressful situations impacting their academic performance. You are not alone so do not be afraid to ask for assistance.