Description and Services

As the teaching and research clinic of the University of Nebraska-Lincoln Clinical Psychology Training Program (CPTP), the Psychological Consultation Center (PCC) provides outpatient psychotherapy and assessment services for individuals, couples, and families across the lifespan. Services are provided by doctoral-level clinical psychology students, supervised by faculty members and clinicians practicing in the community who are Licensed Psychologists.

The mission of the PCC is threefold: 1) to provide state-of-the-art, evidence-based psychological assessment and intervention services for individuals and families in Lincoln and surrounding areas; 2) to provide excellent professional development and clinical practice training for CPTP doctoral students in a behavioral health outpatient clinic that serves the general population; and 3) to conduct assessment- and treatment-relevant research that contributes to knowledge and practice regarding psychopathology, clinical assessment, and treatment across the lifespan. The goal of all PCC services is to integrate the clinical, training, and research aspects of the PCC mission into exceptional services that are grounded in and contribute to state-of-the-art research. Such integrated experience is the standard for graduate student clinical training in the scientist-practitioner tradition. The PCC faculty, doctoral students, and staff are committed to providing services and conducting research in the scientist-practitioner tradition, with a strong emphasis on evidence-based practice and adherence to the ethical standards of psychology.

PCC Clients

Between July 1, 2014 and June 30, 2015, a total of 188 clients received services at the PCC. While the majority of clients received individual psychotherapy (91%), a significant portion received evaluations (8%), and clients also received group-, couple-, and family-based treatments. PCC clients were referred by a number of sources (see pie chart on right), though clients primarily obtained information about the PCC from other professionals or agencies (e.g., physicians, clinicians, lawyers) or by word of mouth (e.g., from prior PCC clients). A total of 108 new cases were opened during the year (compared to 110 during the 2013-2014 year). Among clients whose cases had been closed as of June 30, 2015 (n = 119), 37 were seen only for an intake. Including those, clients attended an average of 9.7 (SD = 10.1) sessions, with session attendance ranging from 1-49 sessions.

Regarding demographic characteristics (see pie charts below), the majority of clients seen were White (72%), male (50%), and between the ages of 19 and 35 (55%). The PCC served 32 UNL students and 154 non-students. Among clients paying for individual psychotherapy, more than one-third paid $25 per session (38%), while the majority paid reduced fees ranging from $5 to $20 per session.
Specialty Clinics

Substance Abuse Clinic (SAC): The SAC, directed by Dennis McChargue, Ph.D., is a specialty clinic that treats college students, community persons, and court-mandated individuals with primary substance use problems. SAC therapists incorporate empirically supported treatments for substance abuse within an evidenced-based practice framework. During the 2014-2015 year, 14 SAC clients were treated at the PCC.

Selected SAC Publications from 2014-2015:

Anxiety Disorders Clinic (ADC): The ADC, directed by Debra A. Hope, Ph.D., is a specialty service whose therapists assess and treat a wide variety of anxiety-related problems among adults. ADC therapists provide both individual and group-based treatments. During 2014-2015, 33 clients were served in the ADC.

Selected ADC Publication from 2014-2015:

Rainbow Clinic: The Rainbow Clinic, directed by Dr. Debra Hope, is an outreach to the gay, lesbian, bisexual, and transgender community that provides individual, couples, and family therapy. The clinic contributes to knowledge about diversity issues in clinical psychology, with a particular focus on psychological needs of the LGBTQ community. The Rainbow Clinic served seven clients during the 2014-2015 year.

Selected Rainbow Clinic Publications from 2014-2015:

Family Interaction Skills Clinic (FISC): FISC, co-directed by David J. Hansen, Ph.D. and Mary Fran Flood Ph.D., provides mental health consultation and psychological assessment and treatment for children, adolescents, and their families through collaborative partnerships with community agencies, primarily Community Action Partnership, Head Start and Early Head Start, and the Child Advocacy Center (Project SAFE).

Selected FISC Publications from 2014-2015:

Telehealth: The Telehealth Clinic is a service that allows us to expand our reach across Nebraska by providing services via secure videoconferencing into client’s homes. In 2014-2015, these services were provided via a contract with DHHS to individuals served by the Nebraska AIDS Project. We plan to expand our telehealth clinic to include individuals with a variety of presenting concerns, such as anxiety and depression. Telehealth offers a way to provide state-of-the-art services to people in rural, underserved areas.
Program Evaluation

Therapist Satisfaction: The PCC distributed surveys to student therapists during Spring 2015 asking them for their evaluation of clinic procedures, personnel, and facilities. The results of this survey indicated that those who responded (n=15) perceived the director, assistant director, administrative assistant, and student workers as respectful, interested in therapist input, knowledgeable about PCC operations, and responsive to the needs of student therapists. Therapists generally reported a high degree of satisfaction with clinic policies, procedures, and multiple elements related to the clinical experiences provided within the PCC. In response to concerns from therapists, a procedure has been developed to make sure therapy rooms are adequately equipped with needed materials, and additional laptop computers were purchased in order for therapist to easily access and complete client records. Eight of the 15 therapists reported less satisfaction with obtaining experiences in conducting evaluations, thus, the evaluation team continues to increase opportunities for student therapists and work at implementing evaluation experiences within the intake process. Approximately 85% of the therapists indicated dissatisfaction with the current PCC video recording equipment.

Client Satisfaction: In Spring 2014, all active PCC clients were asked to complete an anonymous questionnaire. Clients rated the degree to which they were satisfied with clinic personnel, facilities, and procedures. Of the 74 clients who were seen at the PCC during the month that the satisfaction surveys were distributed, a total of 18 clients completed and returned these surveys (response rate of 24.3%). Overall, most clients reported a high level of satisfaction with the warmth and helpfulness of PCC reception staff. Clients also reported positive perceptions of their therapist as well as the quality of treatment they had received at the PCC. A total of 94.4% indicated that they were completely respected by their therapist, and 88.9% were completely satisfied with their progress in therapy. Most clients indicated that they were satisfied with the clinic’s physical environment as well as the clinic’s procedures and did not report issues related to parking or video recording of sessions. Clients indicated varying degrees of satisfaction with the Depression, Anxiety, Stress Scale (DASS) which is typically administered prior to each session. While 38.9% completely agreed that completing the DASS is helpful for treatment, 27.8% somewhat agreed and 22.3% either slightly agreed or did not at all agree. Lastly, 94.5% indicated that they would be likely or extremely likely to come back to the PCC in the future and to recommend the PCC to a friend.

Treatment Outcomes: Clients served at the PCC between July 2014 and June 2015 reported a wide range of presenting problems. The pie chart to the right indicates the primary diagnoses of PCC clients receiving a DSM-IV or DSM-5 diagnosis (n=109). Among those clients who attended 6 or more sessions, routinely completed the DASS, and were discharged from treatment prior to June 30, 2015 (n=55), depression, anxiety, and stress scale scores on the DASS decreased between intake and termination. Results of a within-groups ANOVA indicate that pre- and post-treatment mean differences were statistically significant for depression \( \text{[t(54)=4.2, p<.01]} \), anxiety \( \text{[t(54)=4.8, p<.01]} \), and stress \( \text{[t(54)=4.82, p<.01]} \).

Teaching and Training

Clinical Training: The PCC provides clinical training to the doctoral students of the CPTP. In addition to receiving live supervision during their second year of training, all PCC student-therapists video record therapy sessions for the purposes of supervision. Students give and receive feedback as part of group supervision and participate in didactic activities throughout the year. The clinical training provided through the
PCC allows students to gain experience in the provision of evidence-based practice and peer supervision as well as to develop case conceptualization and treatment planning skills.

**Talks and Workshops:** The PCC provided students with the opportunity to further develop their clinical knowledge and skills by hosting a number of noon talks and webinars between July 2014 and June 2015:

<table>
<thead>
<tr>
<th>Speaker</th>
<th>Title</th>
<th>Type</th>
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</thead>
<tbody>
<tr>
<td>Terry Keane, Ph.D.</td>
<td>Recent Advances in the Assessment and Treatment of PTSD</td>
<td>ABCT Webinar</td>
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<tr>
<td>Cheryl McNeil, Ph.D.</td>
<td>Parent-Child Interaction Therapy: Evidence-Based Treatment for Severe Behavior Problems</td>
<td>ABCT Webinar</td>
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<td>Stephen McCutcheon, Ph.D. Et al.</td>
<td>Applying for Internship</td>
<td>ABCT Webinar</td>
</tr>
<tr>
<td>Liz Roemer, Ph.D.</td>
<td>The Mindful Way through Anxiety: An Acceptance-Based Behavioral Therapy for GAD</td>
<td>ABCT Webinar</td>
</tr>
<tr>
<td>Jennifer Perry, Ph.D.</td>
<td>The Business Side of Psychological Practice</td>
<td>PCC Noon Talk</td>
</tr>
<tr>
<td>Jaqueline Persons, Ph.D.</td>
<td>Overcoming Treatment Failure: A Problem-Solving Exercise</td>
<td>ABCT Webinar</td>
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<tr>
<td>Eric Youngstrom, Ph.D.</td>
<td>Working Smarter, Not Harder: Evidence Based Assessment in Clinical Practice</td>
<td>ABCT Webinar</td>
</tr>
<tr>
<td>Steve Hayes, Ph.D.</td>
<td>Acceptance and Commitment Therapy</td>
<td>ABCT Webinar</td>
</tr>
<tr>
<td>2014-2015 CPTP Internship Class</td>
<td>The internship application and interviewing process</td>
<td>PCC Noon Talk</td>
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**Updates and Future Directions**

**PCC Director:** In June 2015, Mary Fran Flood, Ph.D. retired as Director of the PCC, a role she served in since 1999. Although her daily presence in the clinic is missed, she continues to be an active part of FISC and the CPTP. Corrie Davies, Ph.D., started as PCC Director in July 2015. She graduated from our Clinical program in 2005, and has previously taught graduate clinical courses and supervised Clinical Intervention in the PCC.

**Electronic Record Keeping:** The PCC successfully piloted our new electronic record system, Titanium Schedule, with a group of advanced PCC therapists in Spring of 2015 and expanded use to the rest of the clinic this summer. The PCC has also purchased a number of laptop computers capable of running Titanium wirelessly in order to allow flexibility for intervention classes and supervision.

**Updating Assessment Measures:** The PCC has catalogued the assessment instruments currently in the PCC and is currently in the process of updating outdated but useful instruments. The PCC Advisory Committee continues to evaluate alternative options to the Depression, Anxiety, Stress Scale 21+2 (DASS-21+2) in order to address clients’ mixed reports of satisfaction with the DASS-21+2 (as indicated on the most recent client satisfaction survey).

**Special Thanks**

Special thanks go to James Berg for his help in preparing the PCC annual report.

- Mary Fran Flood, Ph.D., Director, 1999-2015
- Corrie A. Davies, Ph.D., Director, 2015-2016
- Peter Meidlinger, M.A., Assistant Director, 2015-2016
- Annie Steel, M.A., Assistant Director, 2014-2015
- James Berg, Office Administrator