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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.

2. Scope

- 2.1 HKICP upholds the education standards of the clinical psychology profession via an Accreditation Scheme of local clinical psychology training programmes and placement settings.
- 2.2 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. Education Requirement

- 3.1 **Accredited clinical psychologists who are trained in Hong Kong must:**
 - 3.1.1 Hold a Bachelor degree in Psychology or equivalent; and
 - 3.1.2 Hold a Master's or Doctoral degree in clinical psychology conferred by a local university (at least 2-year full-time for a Master degree, or at least 3-year full-time for a Doctoral degree). The programme must be accredited / recognized by HKICP; and
 - 3.1.3 The recognized CP programme must meet the body of knowledge and competency standards set by HKICP

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3.2 **Accredited clinical psychologists who are trained in other countries must:**


- 3.2.1 Hold a Bachelor degree in Psychology or equivalent; and
- 3.2.2 Hold a Master's or Doctoral degree in clinical psychology conferred by a university (at least 2-year full-time for a Master degree, or at least 3-year full-time for a Doctoral degree). The programme must be accredited in the country where the degree is conferred; and
- 3.2.3 The accredited clinical psychology programme must meet the body of knowledge and competency standards set by HKICP; and
- 3.2.4 Hold a license/ registration for practicing clinical psychologist issued by the regulation body in the country where they acquired clinical psychology qualification

(refer to the document on Membership Registration and Handling Policy, HKICP-RSD-PO-002-R0, for the list of accreditation bodies recognized by HKICP for post-graduate clinical psychology degrees conferred in Australia, Canada, UK, or USA).

4. **Body of Knowledge of Clinical Psychologists**

A Clinical Psychologist should possess professional knowledge and skills in areas including, but not limited to:

- 4.1 **Professional ethics and standards of competency**
- 4.2 **Broad base of foundational knowledge in psychology, including:**
 - 4.2.1 Biopsychology/ physiological psychology (Biological aspects of human behaviour),
 - 4.2.2 Developmental psychology (Human development across lifespan),
 - 4.2.3 Cognitive psychology (Cognitive aspects of human behaviour),
 - 4.2.4 Personality and individual differences,
 - 4.2.5 Social psychology (Social aspects of human behaviour),
 - 4.2.6 History of psychology/ contemporary issues in psychology.

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4.3 Knowledge in clinical psychological assessment, including:

- 4.3.1 Establishment of therapeutic alliance with service recipients,
- 4.3.2 Understanding of the theories and clinical presentations of psychopathology, dysfunctional behaviours and psychological problems, including, but not limited to, neurodevelopmental disorders, psychotic disorders, depressive disorders, anxiety disorders, trauma-related disorders, feeding and eating disorders, as well as personality disorders,
- 4.3.3 Collection of appropriate clinical information,
- 4.3.4 Generation of diagnostic formulation based on clinical information obtained,
- 4.3.5 Communication of assessment results professionally and ethically through various means.

4.4 Knowledge in Psychological Testing, including:


- 4.4.1 Understanding of the development, application and issues concerning the psychological testing,
- 4.4.2 Understanding of the psychometric properties of psychological tests / inventories commonly used in local contexts,
- 4.4.3 Administration, interpretation, and communication of results of psychological test/ inventories commonly used in local contexts,
- 4.4.4 Integration of psychological testing into clinical psychological assessment with purposes of generation of diagnostic formulation and treatment planning.

4.5 Knowledge in psychological interventions, including:

- 4.5.1 Acquisition of theoretical, empirical, and practical understanding of evidence-based psychological interventions,
- 4.5.2 Implementation of evidence-based psychological interventions.

4.6 Knowledge in research

- 4.6.1 Engagement in research using appropriate methods and statistical procedures,
- 4.6.2 Precise and concise communication of research findings.

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4.7 Knowledge in teaching and supervision

- 4.7.1 Integration of current research and literature in education,
- 4.7.2 Establishment and maintenance of ethical supervisory relationships,
- 4.7.3 Provision of supervision that takes into account the level of professional development of the supervisee,
- 4.7.4 Demonstration of an awareness of relevant legal policies as well as professional standards and guidelines relevant to supervision.

5. Coverage of a recognized programme in clinical psychology

5.1 Academic training


A recognized clinical psychology programme shall cover the core areas as follows:

- 5.1.1 Psychological assessment (such as intelligence, personality and psychopathology), interpretation of findings, formulation of problems and implications for future management;
- 5.1.2 Psychopathology and theories of psychological problems of major client groups, i.e. children, adolescents, adults and the elderly;
- 5.1.3 Psychological therapies of more than one orientation and approach, including the philosophical, theoretical, practical and empirical aspects;
- 5.1.4 Professional and ethical issues;
- 5.1.5 Research methodology;
- 5.1.6 Neuropsychology, or Health Psychology or Community Psychology or Community and Health Psychology.

5.2 Clinical training

To ensure a registrant with adequate clinical competence, the registrant shall have clinical experience gained from working in different settings and systems and with client populations across life span and of wide range of psychological problems.

- 5.2.1 All registrants should have obtained core experience from clinical placements which have included coverage of not less than 220 days in total. There must be at least 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:
 - 5.2.1.1 Adults with psychological problems (which should include a substantial

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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),


- 5.2.1.2 Children or adolescents with psychological problems,
 - 5.2.1.3 Individuals with medical or mental condition(s) requiring multidisciplinary rehabilitation services.
- 5.2.2 Clinical placements must be provided via on-site supervision by qualified clinical psychologists who have at least 3-year full-time post-qualification experience, and who work in the placement setting.
- 5.2.3 All registrants should have demonstrated competence in administration, interpretation, and communication of results of psychological tests / inventories, including those locally validated and commonly used in the local contexts.

5.3 Research training

To ensure a registrant with adequate training in research, the registrant shall have completed a dissertation or thesis of empirical orientation comprising either data collection and manipulation or re-analysis of existing data sets.

6. Competence

- 6.1 The Core Competences in Professional Psychology as stated in the International Declaration on Core Competences in Professional Psychology (2016) are also applied to the requirements for Clinical Psychologists (Appendix). CPs are expected to build up these Competences through training and continuing education.
- 6.2 The profession of clinical psychology also emphasizes continued development. Psychological theories and intervention techniques are subject to review and refinement with the ever-emerging scientific evidence. Evolvement of mental health service model and delivery would also bring about changes in the service settings where clinical psychologists practice. Accredited CPs are required to keep up on their knowledge and skills in both professional practice and service delivery through continuing professional education (refer to HKICP Guideline on Continuing Professional Development in CP, HKICP-CPD-GL-008).

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7. Standards for Accreditation of Clinical Psychology Training Programme

7.1 Scope of accreditation

- 7.1.1 Local postgraduate training programme in clinical psychology ¹ 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 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.
- 7.1.2 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 registered do not apply to these post-qualification advanced training programmes.
- 7.1.3 Local Top-up Training Programme in clinical psychology for applicants eligible for Alternative Qualifying Assessment as a transitional arrangement (refer to Section 6.3.2 of Membership Registration and Handling Policy, HKICP-RSD-PO-002), or any other training programmes that intends to lead to the qualification of clinical psychology acceptable to the Accredited Register will need to be accredited by HKICP. They may include but not restricted to, structured training programmes that enable students who have had a certain amount of training in Clinical Psychology and yet still fallen short of significant portion of a proper training as judged from the educational standard set in this document. The programmes would be appraised in accordance with the minimum standard specified herewith, which is pivotal for students to demonstrate competency in Hong Kong ethical, legal and professional matters and working with diverse

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

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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groups of people in Hong Kong context. These skills and knowledge are essential for safe and effective practice in the Hong Kong context.

7.2 Core Requirements of Clinical Psychology Training Programme

7.2.1 Standards of academic course requirement

- 7.2.1.1 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.
- 7.2.1.2 Major academic teaching should be undertaken by qualified clinical psychologists, with supplementary input from other professionals where appropriate.
- 7.2.1.3 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.
- 7.2.1.4 There should be mechanism(s) to ensure a sufficient integration of theory and practice between the academic teaching and clinical placement.
- 7.2.1.5 Clinical skills training should be included in the academic curriculum
- 7.2.1.6 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.
- 7.2.1.7 The emphasis on personal growth should be made alongside the academic teaching.

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7.2.2 Coverage of academic course requirement

7.2.2.1 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.

7.2.2.2 The academic training should adequately cover the following **6** core subject areas:

- a) Psychological assessment methods, interpretation of findings, formulation of problems and implications for future management.
- b) Theories of psychological problems of main client groups of children/adolescents, adults and the elderly.
- c) 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.
- d) Professional and ethical issues.
- e) Research methodology.
- f) Neuropsychology/ Health psychology/ Community psychology.


7.2.2.3 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.

7.2.3 Standards of clinical training requirement (placement / internship)

7.2.3.1 Students should be equipped with basic interview skills before the start of clinical placements.

7.2.3.2 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.

7.2.3.3 As part of the programme 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

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psychology service AND is with professional qualification and experience acceptable to HKICP.

7.2.3.4 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. Special circumstances include, but not limited to, the situation where the trainee is non-Cantonese 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.


7.2.3.5 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.

7.2.4 Coverage of clinical training requirement (placement / internship)

7.2.4.1 All trainees should obtain core experience from at least 4 accredited placement settings (refer to section 7 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:

- a) 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),
- b) Children or adolescents with psychological problems,
- c) Individuals with medical or mental condition(s) requiring multidisciplinary rehabilitation services.

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

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demands.

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

7.2.5 Standards of research

7.2.5.1 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.

7.2.5.2 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.

7.2.5.3 There should be adequate time for trainees to plan, organize and implement the research.

7.2.5.4 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.

7.2.6 Standards of selection and entry


7.2.6.1 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 Hong Kong Psychological Society (HKPS).

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

7.2.7 Standards of staffing

7.2.7.1 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.

7.2.7.2 Where external staff contributing to the core team of the programme, the nature and level of their involvement should be clearly stated. This

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refers both to other academic staff and contributors from external organisations. The nature and level of involvement of the part-time or visiting staff should also be clearly specified.

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

7.2.8 Standards of 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.

7.2.9 Standards of 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.

7.2.10 Standards of collaboration with supervisors

- 7.2.10.1 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 responsibilities and be ready to fulfill the responsibility.

- 7.2.10.2 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.

- 7.2.10.3 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.

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8. Standards for Accreditation of Clinical Placement Setting for Clinical Psychology Training

8.1 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.

8.2 Scope of accreditation

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


8.3 Coverage of clinical training

The scope of clinical training offered by placement settings should be specified. The scope should be in line with the body of knowledge of clinical psychologists and may cover the following:

- 8.3.1 Adult psychological problems,
- 8.3.2 Child & Adolescent psychological problems,
- 8.3.3 Individuals with medical/ mental conditions or physical/ intellectual/ learning disabilities,
- 8.3.4 Health and community psychology issues.

8.4 Qualifications of supervisors

- 8.4.1 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.
- 8.4.2 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.
- 8.4.3 When the supervisor provides supervision in a particular setting, he/she

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should normally have worked for at least one year in the placement setting.

8.5 Standards of setting up the placement

- 8.5.1 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.
- 8.5.2 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.
- 8.5.3 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.

8.6 Standards of quantity and quality of clinical supervision


- 8.6.1 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.
- 8.6.2 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.
- 8.6.3 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, supervisors should try to make themselves available for informal discussion of matters that arise between formal supervision sessions.

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- 8.6.4 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).
- 8.6.5 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, HKICP-ECI-PO-001)
- 8.6.6 Adequate time for relevant reading and documentation must be made available to the trainee on placement.
- 8.6.7 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. 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.

8.7 Feedback and review


- 8.7.1 There must be a formal interim review of the trainee's progress and experience provided in the placement. The aims of this review are:
- 8.7.1.1 To review progress of the training according to the placement contract,
 - 8.7.1.2 To give feedback to the trainee on his/her clinical performance,
 - 8.7.1.3 To allow the trainee to comment on the adequacy of the placement,
 - 8.7.1.4 To set targets based upon the above for the remainder of the placement,
 - 8.7.1.5 To give feedback to the supervisor on his/her performance.

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- 8.7.2 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.
- 8.7.3 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.
- 8.7.4 Trainees must have the opportunity to provide feedback on the adequacy of placement and supervision.
- 8.7.5 The supervisory relationship, supervision and the clinical practice should be bound by Code of Ethics of HKICP, HKICP-ECI-PO-001.


9. Review

- 9.1 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.
- 9.2 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.


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10. Reference documents

- 10.1 American Psychological Association - Commission on Accreditation. 2016. Standards of Accreditation for Health Service Psychology. *Periodical* 2016.
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11. Appendix

Appendix: The Core Competences in Professional Psychology as stated in the International Declaration on Core Competences in Professional Psychology (2016)

Psychological Knowledge & Skills underpinning the Core Competences	<ul style="list-style-type: none"> ■ Possesses the necessary knowledge ■ Possesses the necessary skills
Professional Behaviour Competences	<ul style="list-style-type: none"> ■ Practices ethically ■ Acts professionally ■ Relates appropriately to clients and others ■ Works with diversity and demonstrates cultural competence ■ Operates as an evidence-based practitioner ■ Reflects on own work
Professional Activities Competences	<ul style="list-style-type: none"> ■ Sets relevant goals ■ Conducts psychological assessments and evaluations ■ Conducts psychological interventions ■ Communicates effectively and appropriately

The Department of Health announced on 31st October 2019 that HKICP was granted full accreditation status under the Pilot Accredited Registers Scheme for Healthcare Professions.