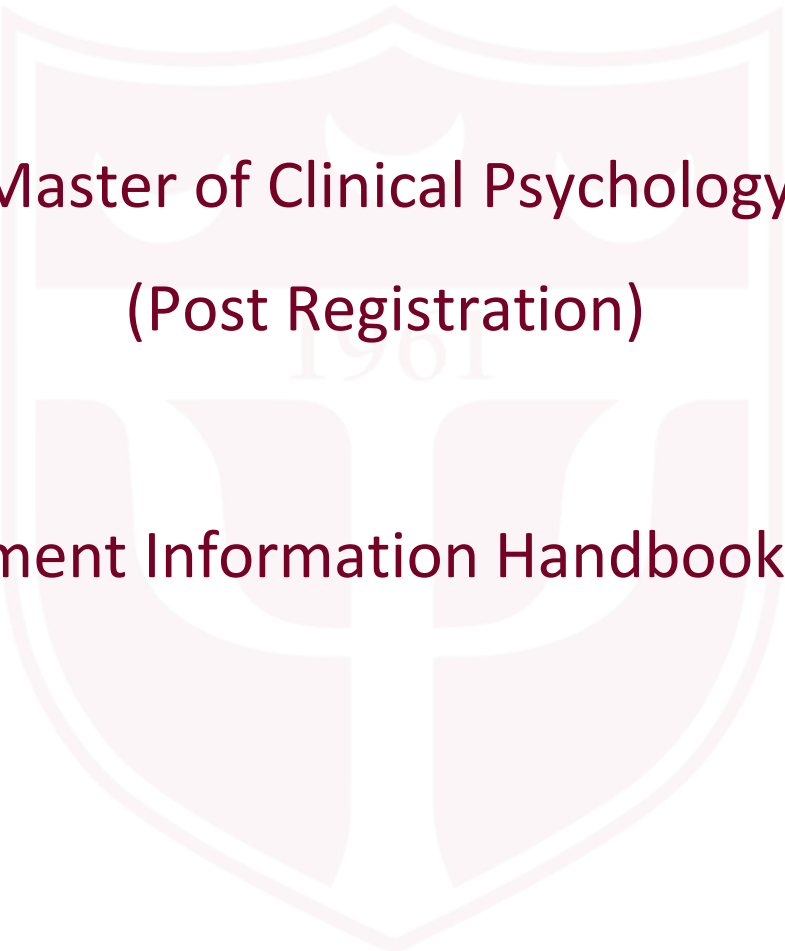




Master of Clinical Psychology (Post Registration)

Placement Information Handbook 2026

Version control

This version replaces the previous 2025 Placement Information Handbook, circulated in January 2025.

Summary of changes in Version 2026.1:

Summary of change	Location	Date effective
Supervisors do not need to attend placement contract meetings – see also information here https://cairnmillar.instructure.com/courses/1095/discussion_topics/17586	Pg 18	10.2.25
All coursework units must be passed to commence placement units	Pg 6	01.01.2026
For workplace placements, all placement clients must be <i>new</i> to the student	Pg 15	01.01.2026
Maximum logged asynchronous supervision hours reduced to 10% of minimum individual supervision hours	Pg 39	01.01.2026
Decision-making framework for placement proposals introduced to assist students in designing viable placement roles	Pg 9, Pg 40	01.01.2026

TABLE OF CONTENTS

Master of Clinical Psychology (Post Registration)-----	1
Placement Information Handbook 2025-----	1
TABLE OF CONTENTS -----	3
COURSE OVERVIEW-----	6
Course Structure	6
Sonia, Canvas, and myCMI	7
Pre-Placement Actions	7
PLACEMENT PROGRAM OVERVIEW-----	9
Diversity of Placement Experiences	9
PREPARING FOR PLACEMENTS -----	14
Sourcing placements	14
PLACEMENT MILESTONES-----	17
Pre-Placement Requirements	17
PLACEMENT ASSESSMENTS -----	19
Mid-Placement Review & Portfolio	19
End-of-Placement Review & Portfolio	20
Obtaining Supervisor Signatures	21
PLACEMENT PROGRAM POLICIES-----	22
AHPRA and PsyBA Registration Standards, Guidelines and Policies	22
Roles & Responsibilities	22
Changes to Placement	23
Confidentiality, Informed Consent and Record Keeping	24
Risk and Incident Management and Reporting	26
Grievance Policy	28

Version 2026.2

FREQUENTLY ASKED QUESTIONS	29
Placement Arrangements.....	29
Logbook/Timesheet	31
Supervision	32
Placement Requirements (e.g. Case Reports, MSE/Formulations, Observations)	33
GLOSSARY	35



Welcome to the Master of Clinical Psychology (Post Registration) program at Cairnmillar Institute, where we have offered professional psychology training for more than 60 years. This degree will provide you with the opportunity to develop high-level skills in clinical psychology by studying in a rich clinical context, at an Institute with a distinguished professional history of clinical excellence.

Clinical Psychology at the Cairnmillar Institute

The postgraduate clinical psychology programs at the Cairnmillar Institute are designed so that students acquire a diverse range of knowledge, skills, and experience in clinical psychology. This course is offered as a two-year part-time program and is designed for psychologists who hold general registration with the [Psychology Board of Australia \(PsyBA\)](#) and who are strongly motivated and committed to further training in clinical psychology.

Accreditation and graduate outcomes

This course is an [Australian Psychology Accreditation Council \(APAC\)](#) accredited program. Upon successful completion of this course, graduates will be eligible to commence the PsyBA registrar program, an approved supervision program to gain an area of practice endorsement (AoPE) in clinical psychology. Consult the PsyBA website for further information about the [registrar program](#) and the [Guidelines on area of practice endorsements](#) about AoPE competencies.

About this handbook

The course has three integrated components: coursework, research, and the supervised placement program. This handbook focuses on detailed aspects of the placement program that can't be described in the Unit Outlines. For details about coursework components, please see the Course Information Handbook.

Placement Contacts

Placement Coordination Team Email: pc-postreg@cairnmillar.edu.au

Placement Administration Team Email: placements@cairnmillar.edu.au Phone: (03) 9813 3400

We hope that you enjoy the supportive and collegial environment at the Cairnmillar Institute and that professional training in clinical psychology with us is challenging, rewarding and enjoyable.



Professor Jon Mason

Course Coordinator



Professor Linda Byrne

Dean, Faculty of Psychology, Counselling & Psychotherapy

COURSE OVERVIEW

Course Structure

To meet the requirements of both APAC and the PsyBA for the stand-alone Master of Clinical Psychology (Post Registration) professional training, the total time spent on placements must be at least 750 hours for the course completed across two placement units.

The Master of Clinical Psychology (Post Registration) course is designed to be completed on a part-time basis over 24 months (see table 1).

Table 1: Overview of Course

Unit Code	Unit title	Credit Points
Year 1, Semester 1		
CLP601	Clinical Psychology: Theory and Practice (Ethical, Professional, Assessment & Intervention Competencies)*	12.50
CLP604	Psychopathology and Intervention for Adults	12.50
Year 1, Semester 2		
CLP602	Advanced Assessment for Clinical Psychologists	12.50
CLP603	Psychopathology and Intervention for Children and Youth	12.50
Year 2, Semester 1		
CLP664	Supervised Clinical Placement A*	18.75
CLP651	Evidence Based Project A**	6.25
Year 2, Semester 2		
CLP665	Supervised Clinical Placement B*	18.75
CLP652	Evidence Based Project B**	6.25
	COURSE TOTAL	100.00

***Prerequisite 1:** All coursework units (CLP601, CLP602, CLP603, CLP604) must be passed before undertaking placement units CLP664 and CLP665.

Prerequisite 2: CLP664 (Placement A) must be completed before CLP665 (Placement B).

** **Corequisite 1:** CLP651 (Research Project A) must be completed concurrently with CLP664 (Placement A).

Version 2026.2

Corequisite 2: CLP652 (Research Project B) must be completed concurrently with CLP665 (Placement B).

SONIA, Canvas, and myCMI

There are three main platforms that student use while undertaking a placement:

SONIA Online is the placement management system in which students will undertake all placement tasks such as submitting forms, logbooks (called timesheets in SONIA), and book placement contracts and review meetings, etc.

Canvas will be used by placement coordinators to provide information about the unit requirements through announcements engagement with students on discussion boards.

myCMI (student website) is CMI's student website where you can find broad information about all aspects of your course and CMI. Throughout placement you will find links to further information held on myCMI within both Canvas and SONIA.

Pre-Placement Actions

Email: All correspondence will be sent to students' individual Cairnmillar email address, so please ensure this is checked regularly. Email, including essential Canvas notifications, is the primary method used by Cairnmillar to communicate with students. [Click here for more information on myCMI about accessing and configuring your email.](#)

Pre-Placement Documents: You will need to upload a copy of the following documents to SONIA for each placement unit. These must be uploaded and approved by the placement coordinator before you can start your placement. To allow for processing time for these checks, students will need to ensure timely commencement of obtaining these documents to avoid potential placement delays. These must also be kept valid throughout your placement, so any renewals must also be uploaded as required. Failure to submit these assessment documents may jeopardise your placement and your opportunity to see clients.

Psychology registration: All students are required to maintain general registration as a psychologist with AHPRA for the duration of their enrollment and will be asked to provide a copy of their registration certificate prior to commencement on the course, prior to commencing a placement, and/or each time that their registration is renewed during enrollment. You must report any new notifications made about you to AHPRA and any changes to the nature of your professional registration as a psychologist (including any changes relating to conditions, undertakings, and reprimands) to the Course Coordinator within 7 days.

Working with children's check (WWC): You may be required to obtain and maintain a current WWC while completing placements. Applications are state/territory based. [Click here for more information about obtaining and maintaining a valid WWC.](#)

National Police Checks. For placements, you will be required to obtain and maintain a current National Police Check on an annual basis while you are completing placements. [Click here for more information about obtaining a valid police check.](#)

Insurance

You will be covered by the Cairnmillar Institute's Professional Indemnity Insurance for approved educational activity (e.g., placements) only if you are an enrolled student. Students must not let their enrolment lapse while on placement and must maintain their own appropriate level of insurance (if required) for all work outside of placement.

It is important that students work on the specified placement days outlined in the placement agreement. Students who are undertaking placements in their workplace need to be clear about which days are designated placement days, so they are covered by the appropriate insurance policy on those days.

Although Workcover cannot cover students, they are covered to the extent permitted by legislation, under the Cairnmillar Institute's Personal Accident and Travel Policy.

Immunisations

In addition to the COVID-19 vaccination guidelines, there are certain placement settings that require students to have specific immunisation or coverage for certain diseases (such as hospitals). Where required, students will liaise with and provide evidence of vaccinations directly with the placement agency.

PLACEMENT PROGRAM OVERVIEW

Diversity of Placement Experiences

Students require placement opportunities that support the acquisition of core clinical psychology skills. Students will gain diverse experience across the lifespan, settings, client presentations, culture and experience using a variety of clinical psychology skills (assessment, treatment, and professional). Diverse placement experiences offer the opportunity for students to develop core clinical psychology competencies such as therapeutic relationship skills, psychological assessment, risk management, formulation, diagnostics, intervention design, delivery and evaluation, with a range of client presentations across the life span.

Each placement should be different in clinical focus and have a different primary supervisor, so that students have opportunities to develop competencies, as assessed by varied supervisors and evidenced through placement documents and clinical assessments (e.g., supervisor observation, case reports, MSE's and formulations). Typically, placement opportunities in hospital settings are limited. Equally valuable experiences with a diversity of presentations and learning opportunities are available in other settings (e.g., community mental health services, university clinics, schools, forensic settings).

Students are not necessarily required to engage in placements with specific client groups (e.g., child and family, older adult, severe and enduring mental health problems etc), though this option is available to them if they wish. Rather, students must ensure they acquire a minimum level of experience across the lifespan, clinical setting, and clinical activities over the combination of their two supervised placements. These must also be recorded in your timesheet, which will be used by the Unit Coordinators to verify that they have occurred. The required minimum diversity requirements are:

- A minimum of 25% (75 hours) of Direct Client Hours must be accrued working with children and families (see glossary).
- A minimum of 25% (75 hours) of Direct Client Hours must be accrued with adults (see glossary).
- A minimum of 25% of the total hours accrued across all age groups and settings (75 hours) must be with clients who your supervisor has deemed to fall into the complex presentation category (see glossary).

In assessing proposed placement as suitable for the student, Placement Coordinators will utilize the decision-making framework (p 40), which considers a range of factors including the capacity of the agency to support a clinical psychology placement, the diversity of placement experience provided by the role and the degree of new learning opportunities for the student relative to their existing/prior expertise. Where the proposal does not demonstrate viability in one of the domains, the placement coordinator will either request resubmission of the proposal with modifications, where possible, or alternatively, require the student to propose an alternate placement.

Version 2026.2

Students must also have the diversity required to facilitate meeting the graduate competencies for completing the course. The following provides further information about four placement diversity principles and requirements for this course:

Diversity across the lifespan

Diversity across the lifespan refers to students gaining experience working with children, adolescents, adults, and older adults across the placement units in the course. In assessing the suitability of the proposed placements, Placement Coordinators will evaluate the overall placement plan to ensure that sufficient diversity of experience is likely to be included and will seek to determine whether sufficient opportunities exist for the student to meet the diversity requirements listed in 2.1.4, given the nature of their proposed placements over the course of the year and any pre-existing placement activities undertaken.

Diversity across settings

There are many settings in which clinical psychologists operate. It is an APAC requirement that the quality and quantity of professional practice education is sufficient to produce graduates competent to practice across a range of settings. This requires students to undertake two sufficiently distinct settings to ensure they have opportunities to develop a broad range of graduate competencies. For example, if the first placement is completed in a private practice, the second placement will need to occur in an alternate setting. There are occasionally rare exceptions to this, mostly occurring in hospital settings, whereby the size of the agency is such that a student moving from one department to another may experience an entirely different setting (e.g., different team, client presentation, model of service etc.).

CMI will consider the diversity of placement settings across both placements when deciding the suitability of individual placements. Below is a brief outline of psychological settings for students to consider when determining their learning and development needs:

Private or Public Hospitals (Inpatient/Outpatient Services) These settings involve the provision of psychological assessment and intervention to both admitted patients and those in outpatient services. These settings often involve working as part of a multi-disciplinary team within inpatient mental health units, medical, specialty and subspecialty units, as well as outpatient services. The role of a psychologist in a hospital can vary greatly, ranging from supporting patient care and working with patients who present with high acuity, and severe, multiple, and complex mental health presentations to supporting patients to manage psychological aspects of ill health, and chronic mental health conditions.

Community, non-government organisations (NGO's), and crisis: Publicly accessible services for individuals with severe or chronic mental health issues based in the community. Examples include child and adolescent, adult, and older adult community mental health services, residential and day program rehabilitation services, and mental health and recovery programs. Community mental health services usually operate in multi-disciplinary teams and provide general and/or targeted mental health services.

Version 2026.2

School settings: Psychological service delivery within schools varies and can include applying psychological and educational expertise to support students, teachers and the school community to achieve academic success, psychological health and social and emotional wellbeing. The integration of psychological services provided within school settings varies greatly. Some schools have integrated mental health services, including secure case note storage, employed mental health clinicians and established service delivery models while others don't and psychological services are in-reach but external to the school environment (e.g., no case note storage system, little to no established policies to support the delivery of mental health services etc.).

Forensic Settings: Forensic settings are settings where psychologists provide assessment and treatment for people with a mental disorder who pose (or have posed) a risk of harm to others, and where this risk of harm is related to the mental disorder. These services can vary greatly depending on the setting and role of the psychologist in these settings, for example conducting risk of offending assessments, undertaking clinical psychology interventions to reduce risk of offending, and diagnostic assessments.

Private practice: Private practice generally refers to settings that typically operate out of a clinic and where clients can claim government funding to supplement the cost of services (e.g., Medicare, NDIS, Veteran Affairs etc.). Private practice settings and service delivery models vary greatly depending upon the structure of the business, the range of services offered including the types of health practitioners and how they operate to provide services. These settings can range from a single sole practitioner psychologist to large integrated GP clinics operating a multidisciplinary practice. Generally speaking, only placements in private practices that have been established for a minimum of 12 months and have the appropriate level of on-site support will be approved.

Diversity across client presentations

The presentation of mental health problems or disorders vary greatly in terms of emotional, psychological, and behavioural functioning and impacts. CMI will consider the client presentations when deciding placement suitability for students. Client mental health presentations can generally be defined as:

Acute mental illness: Acute mental illness is characterised by significant and distressing symptoms of a mental illness requiring immediate treatment. This includes people experiencing a mental health crisis where the person's actions, feelings or behaviours pose a risk of harm to self or others and/or put them at risk of being unable to care for themselves or function in the community in a healthy manner.

Severe mental illness: Severe mental illness is often defined by its length of duration and the disability it produces. These illnesses include disorders that produce psychotic symptoms, such as schizophrenia and schizoaffective disorder, and severe forms of other disorders, such as major depression and bipolar disorder.

Chronic mental illness: Chronic mental illness refers to conditions with persistently debilitating psychiatric symptoms and severely impaired function. Individuals with chronic mental illness suffer from symptoms

Version 2026.2

that may interfere with their ability to perform activities of daily living and to participate in work, school, and interpersonal relationships. At times in their lives, these individuals often require significant care from family and mental health care providers. In contrast to acute and severe mental illness, chronic mental illness disabling and often unremitting across the long term.

Complex mental health needs: Complex mental health needs are where a person is experiencing significant, multiple, rare or persistent mental health challenges that impact their functioning in most areas such as in the home, work/education and in the community. These needs, often in combination with one another, are complex as it is difficult to address all presenting issues at the same time. People with complex mental health needs often have comorbid physical or mental health problems.

Comorbidity: Comorbidity refers to where a person is experiencing more than one health disorder. While this is common, for the purpose of placements this refers to working with people who have a mental and/or another mental or physical disorder that interacts and impacts on functioning or treatment planning.

High prevalence: High prevalence disorders are typically defined as disorders that are common and where the incidence in the previous 12 months is more than ~3%.

Low Prevalence: Low prevalence disorders are typically defined as disorders that are not common or rare and where the incidence in the previous 12 months is ~3% or less.

Neurodivergent Presentations: Neurodiversity is an umbrella term that refers to a range of conditions that emerge during the developmental period, characterised by differences in how individuals grow, learn, and interact with the world. These differences can shape personal, social, academic, or occupational experiences and often lead to unique support needs. Neurodiverse presentations may include intellectual and developmental differences, autism spectrum differences, attention-related differences (e.g., ADHD), speech and language differences, learning differences, and tic-related differences, among others. Diversity in clinical psychology skills and experience

Students are required to gain experience in clinical psychology using a variety of clinical skills. Engaging with different supervisors across placement can facilitate acquiring clinical psychology skills. Students should gain experience across the following domains:

Assessment

- Evaluate a range of psychological disorders with reference to relevant international taxonomies of classification, including disorders of moderate to severe level and complexity.
- Use assessment tools and processes related to a wide range of psychological disorders, including psychometric tests, structured or semi-structured interviews, behavioural observations, measures of functionality and processes that enable collection of collateral information from multiple sources, including groups and systems relevant to the client.
- Integrate, interpret, and synthesise clinical psychological assessment data with the knowledge of psychopathology to inform case formulation, diagnosis and intervention.

Version 2026.2

- Evaluate symptom reduction, therapeutic outcomes, the therapeutic alliance, and client progress throughout therapy.

Intervention/Treatment

- Select, tailor and implement appropriate evidence-based interventions on the basis of an initial case formulation, whether individuals, dyads or carers/dependents.
- Monitor outcomes and make modifications based on evolving case formulation and intra- and interpersonal processes, with care given to the appropriateness of interventions for the client or clients within their wider context.
- Consult and collaborate with other professionals regarding clinical planning and referrals, particularly in the context of complex case presentations.
- Engage in evidence-based practice to understanding and managing psychological disorders, including across the age range and across modalities such as e-health approaches.

Demonstrate respect for the skills and contribution of other professionals.

- Work effectively with a range of professional and support staff in the workplace and communicate and collaborate effectively, within the bounds of ethical and legal requirements.
- Operate within the boundaries of their professional competence, consult with peers or other relevant sources where appropriate, and refer to relevant other practitioners where appropriate.
- Rigorously apply professional practice policies and procedures, including as they relate to referral management and record-keeping, across a range of workplace settings and with recognition of different organisational cultures and practices.

Professional skills

- Engage in self-reflective professional practice, taking account of the impact of their own values and beliefs, and taking appropriate actions as a result.
- Evaluate the effectiveness of their professional practice, identifying areas for improvement and implementing changes, where needed.
- Critically evaluate contemporary scientific literature to inform practice.

Providing supervision to others

If you supervise others as part of your placement and you intend to record this in your timesheet, it must first be specifically articulated as a placement goal in your placement proposal, and approved by the Placement Coordinator and the agency representative as a suitable part of your placement role. The relationship between the clinical activity (you supervising others) and your development as a clinical psychologist (as expressed in the placement learning goals) must be explicit. The specific number of hours (or maximum) that you will record in your timesheet for this activity must be agreed with your Placement Coordinator and supervisor and also indicated in your placement proposal. Supervision that you provide should be recorded as Client Related Activity, rather than Direct Client Contact.

PREPARING FOR PLACEMENTS

Sourcing placements

At CMI, students are proactive in sourcing a suitable placement, driven by their own areas of interest and learning needs, their existing professional networks, and their preferred geographical location. The placement agency must be able to provide opportunities for the student to acquire clinical psychology competencies and placement diversity experiences outlined above. To facilitate the student's discussion with their prospective placement agency about their placement needs, we strongly encourage students to provide agency contacts with CMI's [Introduction Letter](#) to placement agency to facilitate their understanding of the course and placement requirements.

While students are responsible for sourcing their own placements, CMI also has a small number of placements (largely within Victoria) that we can assist students to access, which will be advertised via an EOI process usually once a year. Placements in several states such as South Australia and Western Australia are managed through consortiums. If you wish to undertake a placement in these locations, please email the Placement Coordinator team in good time (i.e., October for Semester 1 placements and April for Semester 2 placements) so that the appropriate processes can be triggered.

After students have sourced a placement and discussed their placement needs with their prospective placement agency, you will then submit a Placement Proposal Form in SONIA Online for review by the placement coordination team. Placement Coordinators will assess the placement proposal against the required unit learning outcomes and the student's individual learning needs (e.g., diversity of placement experiences) to ensure viability of the proposed placement. Please note that where the placement agency contact and/or supervisors are previously known to the student or if the placement is a paid/workplace placement, then you will need to upload a [conflict of interest form](#) with your proposal in SONIA.

Placement start/end dates will vary slightly between students, often depending on agency requirements. However, the earliest students may commence a placement is two weeks prior to the Semester Start date as outlined in the [CMI Academic Calendar](#).

Workplace Placements

Students may be approved to undertake a placement in an existing workplace if the role meets the usual placement requirements necessary for all placements. Specifically, a proposed workplace placement must be able to satisfy the following criteria:

- The scope of the proposed role is consistent with clinical psychology

Version 2026.2

- The psychological activities comprising the proposed role are sufficiently distinct from the student's usual workplace role on a range of dimensions (e.g., in a separate department, working with a different age cohort and clinical presentations), and
- The role provides sufficient new learning opportunities distinct from the student's existing skill set and prior experience
- All placement clients are *new* clients
- The workplace will facilitate all placement requirements and adjust the student's work role as required

It is expected that students undertaking a workplace placement will be engaged in novel learning on their contracted placement days and that they will carry a smaller case load than they might ordinarily do whilst undertaking paid work (e.g., maximum 4 client hours daily) to allow for development opportunities, reflection, and planning within the placement context.

To clearly delineate psychological practice undertaken within the bounds of placement from that undertaken as an employee, all placement clients must be *new* (rather than existing clients) and seen on contracted placement days only. Accordingly, if psychological practice continues beyond the contracted placement with a placement client, students must advise clients when the placement has concluded and reestablish a new episode of care with a new Informed Consent Form.

Students must establish a clear and mutual understanding with the workplace about what needs to be learned and how collegial/ managerial/ supervisory boundary issues will be negotiated.

Paid Placements

We understand that many students are seeking paid placements; if this is the case it is very important you discuss this with the agency of interest at the earliest opportunity. In our experience, it is more common for private practice placements to offer students a paid placement, whereas hospital-based or community-based agencies do so less often. However, it will be at the agency's discretion as to whether they offer a paid position to students. Please bear in mind that Cairnmillar has no influence over remuneration agreements made between students and external agencies, and responsibility for negotiating and organising these rests with the student.

Supervision

Cairnmillar is responsible for organising placement for your supervision. Students will receive a mixture of individual and group supervision which they must attend at the required frequency for the placement (as per the Unit Outline). Prior to commencing your placement, you will be provided with contact details for your Cairnmillar supervisor, and an introductory email will be sent from the Placement team that includes both you and your supervisor. In rare exceptions, CMI may authorise that supervision be provided by a suitably qualified onsite supervisor, but only where the agency requires this for clinical safety purposes, such as when the placement is highly specialised (e.g., public health settings).

Placement Sequence

Students can only be enrolled in one placement per semester as placement units are designed to develop student competencies sequentially. At times, due to agency requirements – and provided no progress issues have been identified by the supervisor or placement coordinator - a student may commence a new placement within the final few weeks of the preceding placement. In these exceptional circumstances, students will only be permitted to commence a new placement if they have satisfactorily completed their mid and end of placement review, their supervisor indicates that there are no progress issues, and the placement coordinator determines that they have completed all of the required placement paperwork and assessments.

Passing a Placement

It is the placement supervisor's role to regularly provide constructive feedback to the student throughout the placement regarding clinical competency. This feedback is formally provided at the Mid and End-Placement Review (see Unit Outline for further details). In cases where students are not making the gains expected on placement, a Supported Learning Plan will be developed at the Mid Placement Review to support the student's placement progression and the placement coordinator will again attend the end of placement review. At the conclusion of the placement, the placement supervisor will make a recommendation to the Placement Coordinator as part of the End of Placement Review. Supervisors will indicate that student progress has been "Satisfactory" or "Not Satisfactory". When a supervisor's final report has been received by the Placement Coordinator, they will consider the supervisor's report, alongside the student's other submitted paperwork and assessment material (logbooks, placement forms, case reports, client notes, feedback on supervisor observations of client work, MSEs and formulation etc.), and any other feedback received by any party during the placement, and a result will be recorded. The two possible results are Pass or Fail. If necessary, a referral to the [CMI Academic Integrity and Progress Committee](#) will be made by the Course Coordinator.

At times, students may find the transition from practicing as a psychologist, often with extensive experience, to a student role, a challenge. Successful completion of a placement may require changes in existing practice and the acquisition of new knowledge and skills. The Course Coordinator and Placement Coordinator invite students to discuss any concerns or difficulties balancing existing practices with the development of new knowledge and skills.

PLACEMENT MILESTONES

Placements include assessments that demonstrate both clinical and professional skills. There are pre-placement compliance checks, placement set-up documents, and clinical assessments that students need to ensure they have submitted and had approved as completed by the placement coordinator.

Placement Proposal Form

Students are required to submit a placement proposal to SONIA Online no later than eight to ten weeks prior to the proposed placement start date.

The purpose of these proposals is to:

- Support students arrange a suitable placement opportunity that meets their learning needs.
- Provide Placement Coordinators with sufficient information to assess placement suitability and compliance with APAC Standards.
- Inform the placement provider and supervisors about the support needs for students on placement.

Placement Coordinators will either approve the placement, request further information from the student or agency to assess the placement as suitable, or decline the placement. If the placement is declined, this will be done in collaboration with the Course Coordinator, and students will be given the opportunity to discuss the rationale for the decline with the PC team.

Placement Contract & Learning Plan

The placement contract sets out the parameters for ensuring all parties are aware of their obligations and responsibilities throughout the placement and is signed by the student, supervisors and the placement contact/agency representative (where this is not the same as the supervisor).

This placement contract contains the following details:

- Agreement between Cairnmillar, student and the placement provider
- Placement requirements
- Supervision agreement
- Induction requirements
- The student's learning goals
- Declaration of each party involved in the placement regarding their designated role & responsibilities

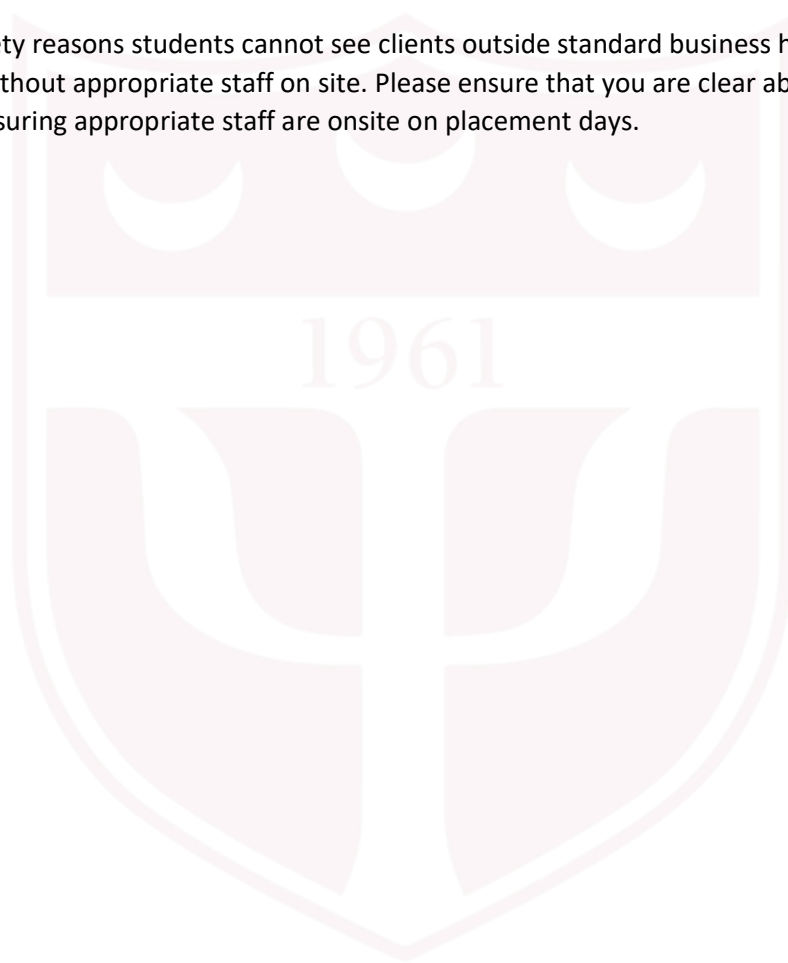
All students are required to organise a Placement Contract meeting with the nominated agency representative and the placement coordinator either before or no later than two weeks after placement

Version 2026.2

commencement. Placement Contract meetings are booked in SONIA and available times will be offered and communicated to students before the start of semester.

Within the first two weeks of placement, students, in collaboration with their individual supervisor, will establish well-defined learning goals and document them in the Placement Contract. This information enables the placement coordinator to ensure that placement goals meet the overall student learning needs. These learning goals should meaningfully reflect the student's overall developmental needs in relation to both the core competency areas and the context and opportunities relevant to each placement.

Please note: For safety reasons students cannot see clients outside standard business hours (e.g., after hours, weekends) without appropriate staff on site. Please ensure that you are clear about after-hours and requirements for ensuring appropriate staff are onsite on placement days.



PLACEMENT ASSESSMENTS

In addition to the pre-placement requirements, students must submit placement documents and clinical assessment for each placement in SONIA Online. You can find a summary of these in the Unit Outline including due dates for each requirement.

Students whose placement documentation is not completed correctly and/or received outside the required timeframe outlined in the unit outline may jeopardise their progression to subsequent units.

The Cairnmillar Institute is required by APAC and PsyBA to archive students' placement documents for a period of 10 years.

The following sections outline the required placement documents for each placement in this course.

Mid-Placement Review & Portfolio

A mid-placement review is required for all placements in this course and is designed to assess the student's progress towards graduate competencies and make any required adjustments to facilitate the student's learning and development. Students will also submit several pieces of assessment work (the portfolio) prior to the Mid Placement Review to ensure their supervisor has directly observed their clinical work to support their evaluation (see Unit Outline).

There are three aspects to the mid-placement review:

Mid-placement review form

Supervisors are required to complete the mid-placement review form and discuss this assessment and the student's progress with the student prior to the mid-placement review meeting. The completed form should be verified by the student and supervisor in SONIA Online and will then be approved by the PC.

Mid Placement assessment portfolio

By the mid placement review, students are required to have completed assessment tasks graded by their supervisor no later than one day prior to the mid-placement review meeting. A complete list of portfolio documentation required is outlined in the Unit Outline.

If students do not submit the required information prior to the MPR, they must complete an additional review meeting with their Placement Coordinator and individual supervisor within four weeks.

Mid-placement review meeting

Version 2026.2

A mid-placement review meeting is required to take place between the student, their clinical supervisor, the placement coordinator, and, at times, the placement agency representative. This meeting needs to occur within two weeks of the mid-point of the placement (after approximately 25 days). It is the student's responsibility to arrange and book a Mid Placement Review meeting in SONIA and available times will be offered and communicated to students by the Placement Coordinators during semester.

During the meeting, the student, clinical supervisor, and placement coordinator will discuss the student's progress and decide on an outcome, and any action that needs to occur to help the student progress and meet their learning goals.

End-of-Placement Review & Portfolio

An end-of-placement review is required for all placements to assess the student's progress towards graduate competencies and provide feedback about areas for further development in the next placement.

Within the last two weeks of a placement, students will arrange and attend a meeting with the supervisor, and where indicated, also the placement coordinator (see below), to review the progress of the placement. The completed form should be verified by the student and supervisor in SONIA and will then be approved by the placement coordinator. There are three aspects to the end-of-placement review:

End-of-placement review form

Supervisors are required to complete the end-of-placement review form and discuss this assessment and the student's progress with the student prior to or in collaboration with the student during the end-of-placement meeting.

Prior to commencing the second placement, students must share a copy of their Mid and End of Placement Review with their new supervisor. This will assist the new supervisor to support the student's progression of competencies to the next stage and help identify relevant learning goals for Placement B.

End of Placement assessment portfolio

No later than one day prior to the EPR meeting, students must have submitted their assessment portfolio documents to SONIA (as specified in the Unit Outline) and had them approved by their Supervisor (with the exception of the logbook, which is to be submitted within 7 days of this meeting).

End-of-placement review meeting

Students are responsible for arranging an end-of-placement review meeting with themselves and their supervisor within two weeks prior to the end date of placement. In instances where progress concerns were identified during the placement, the Placement Coordinator may also attend the end of placement review, and students will be advised if this is needed.

Version 2026.2

During the meeting, the student and clinical supervisor (and the agency representative and placement coordinator, where relevant) will discuss the contents of the end-of-placement review form and the competencies. Students and supervisors should discuss any areas for improvement, and the student should seek the supervisor's feedback on how to further develop their clinical competencies.

SONIA Timesheets

Students are required to log their placement activity daily throughout their placement and ensure that their timesheet is reviewed by their supervisor in SONIA on a fortnightly basis. All supervisors that have provided supervision in that fortnight are required to endorse, in SONIA, that the timesheet is a true reflection of all placement activity. Further information on preparing your logbook can be found on SONIA and Canvas.

Obtaining Supervisor Signatures

All forms will be signed electronically via SONIA.

Managing recordings of client work

Please ensure that you properly obtain informed consent for all session recordings and placement requirements and that you complete the Informed Consent declaration in each SONIA form. The recording should be deleted from your Onedrive as soon as your supervisor has indicated that they have viewed it and have completed their feedback.

PLACEMENT PROGRAM POLICIES

AHPRA and PsyBA Registration Standards, Guidelines and Policies

Students in this course hold general registration with the Psychology Board of Australia and are required under [National and State specific Health Practitioner Regulation Laws](#) to abide by registration standards to maintain their registration. CMI requires that students are familiar with and act in accordance with AHPRA and the [PsyBA Registration standards and guidelines](#). You must report any new notifications made about you to AHPRA and any confirmed changes to the nature of your professional registration as a psychologist (including conditions, undertakings, and reprimands) to the Course Coordinator within 7 days.

Please note that there are times when the student may be required to make disclosures, such as to meet mandatory reporting obligations. If you have a concern about needing to make a mandatory report, please discuss this with your supervisor if this is appropriate. Alternatively, if this is not possible (e.g., the concern relates to the supervisor), please consult directly with the Placement Coordinator, Course Coordinator, or Head of School.

Roles & Responsibilities

Agency Representative

When there is no on-site clinical supervisor at the placement agency, the Agency Representative is responsible for:

- Orienting students to the organisation (e.g., relevant staff members, equipment, physical environment, organisational policy and procedure, etc.)
- Clearly establishing the student's role within the organisation, including details of the work expected.
- Facilitating the student's placement and ensure that the student receives the appropriate type and number of client referrals to meet their placement learning and assessment requirements (including facilitation of direct observations of their practice by their supervisor)
- Providing opportunities for the student to attend meetings, including clinical reviews, groups
- Developing a relationship with the student that facilitates open discussion of difficulties and potential problems.
- Alerting the Placement Coordinator of any concerns regarding the student's performance at the placement agency.

Clinical Supervisor

Version 2026.2

The clinical supervisor is responsible for:

- working with the student to establish well-defined learning goals
- developing a relationship with the student that facilitates open discussion of difficulties and potential problems
- Where possible, liaising with Agency Representative periodically in regard to a student's performance at the placement agency. The Placement Coordinator will also liaise with the Agency Representative periodically in regard to a student's performance.
- Sighting student's case notes on at least two occasions.
- Sighting and approving the student's placement activity logbook at each supervision session and at least fortnightly.
- Providing specific and detailed feedback on all aspects of the student's performance, including direct observation of the student on at least two occasions (via e.g., video or audio recording, co-therapy, sitting in, etc.) using the appropriate observation form (see Canvas for details).
- Alerting the Placement Coordinator of any concerns regarding the student's performance at the placement agency.

Changes to Placement

Student Absences

Any absence of days from the placement must be reported to the agency contact in the first instance and via email to your supervisor and the placement coordinator.

Upon return to the placement, the student should discuss with the supervisor how any missed placement days will be made up. The outcome should be advised via email to the Placement Coordinator. Students who need to change their end date of placement due to absences need to follow the placement extension instructions below.

Placement Extensions

Placements can only be extended under exceptional circumstances. All placements should have a clear start and end date as recorded on the original placement contract. Students who need to extend placement need to discuss the potential extension with their supervisor and seek approval from their placement coordinator. Please refer to my.CMI for the full [placement extension application process](#).

Supervision absences, difficulties and changes

It is expected that both students and supervisors observe common professional courtesies when changing or cancelling a supervision session. CMI requires that at least 24 hours' notice is provided by the student or

Version 2026.2

supervisor to reschedule or cancel a supervision session. Exceptions apply where there are extenuating circumstances, such as emergencies.

Students with an external supervisor are required to discuss potential cancellations of session when entering a supervision arrangement as students may become liable for a supervision fee directly billed to the students by the supervisor.

Supervisors should discuss any planned absences and make suitable arrangements to ensure continuity of supervision. Please note that students must not continue placement without clinical supervision for more than 2 weeks. It is important that students and supervisors have a clear understanding of who they can seek urgent advice from whilst on placement if the supervisor is not available. If an agency cannot provide alternative supervision by a Board-approved clinical supervisor, the student should alert their placement coordinator and request interim supervision.

Once students obtain or are allocated a supervisor(s), they are required to continue these supervision arrangements for the duration of the placement. However, on rare occasions difficulties do develop, and steps need to be taken to address them. If you are not able to resolve the difficulties through negotiation and discussion with your supervisor, contact your placement coordinator who will assist you.

Termination of a placement

Students and placement agencies are encouraged to raise concerns with one another and the placement coordinator in the first instance, with the objective of providing both parties an opportunity to remedy these concerns. If concerns relate to student performance, this may result in changes to the placement arrangements such as the agency limiting the scope of tasks performed by the student or providing additional supervision support. Under these circumstances, a placement agency may terminate a placement if they reasonably believe the student is not competent to perform allotted tasks or practice in a safe and professional manner.

Significant student concerns about a placement should also first be discussed with the supervisor, agency, and placement coordinator, with the view to addressing concerns and supporting the student's placement. Where attempts to remedy the student's concerns have not been successful, students are required to provide at least two weeks' notice of their intention to withdraw from the placement and ensure client care is at the forefront of their closure process.

Confidentiality, Informed Consent and Record Keeping

You can access some general placement forms [here](#).

Confidentiality

Version 2026.2

Students are reminded that client information is confidential and should always be discussed in a sensitive and respectful manner and only with appropriate people. Students are reminded that discussion of client information in open and/or public areas with staff or other students at their placement is inappropriate.

Informed Consent

A client must provide informed consent before a psychological service can commence. A person gives informed consent if they:

- have capacity to give informed consent to the treatment or medical treatment proposed
- have been given adequate information to enable the person to make an informed decision
- have been given a reasonable opportunity to make the decision
- have given consent freely without undue pressure or coercion by any other person
- can freely communicate their decision in some form
- have not withdrawn consent or indicated any intention to withdraw consent.

The process of obtaining consent and any queries relating to the individual's capacity to consent should be discussed within supervision and clearly documented within client case notes. Psychologists are required to obtain written informed consent from a guardian or parent prior to providing psychological services to a child. Where a client may be assessed as a mature minor, this should be discussed in supervision to ensure appropriate informed consent processes are undertaken.

Students should use the agency's informed consent process; however, where there is no informed consent form, students can use the [CMI informed consent form](#). Students are reminded that informed consent is required not only for the provision of psychological services but also for using deidentified client details for any coursework assignments and/or research.

Secure storage of client case notes and record keeping

Client case notes created by students on placement must be stored in accordance with relevant state and national legislation. Prior to commencing placement, students, in liaison with the placement agency contact and their supervisor, must determine whether case notes can be stored with the placement agency. Where this is not possible, students must store their case notes with the Cairnmillar Institute using their practice management software PracSuite. You can find more information about how to arrange access to PracSuite on my.CMI [here](#).

School Placements

School placement can pose some challenges in relation to sharing confidential information, and this can pose problems with continuity of care and access to client notes for the child. Students will need to liaise with their supervisor, the school principal and placement coordinator about specific confidentiality

Version 2026.2

requirements within a school setting and make appropriate and approved arrangements about continuity of care and information sharing.

Risk and Incident Management and Reporting

Risk Management

Students on placement are required to ensure they are aware of and follow the placement agency processes and procedures for managing clients who pose a risk of harm to self or others, and in accordance with their professional, ethical and legal obligations as a registered health professional. The following provides guidance about risk management processes and further support for students who encounter situations where risk management is required.

Step 1: Conduct a risk assessment to self-and/or risk of harm to others. Take appropriate further action and document your risk management approach/plan.

Step 2: Contact your supervisor to discuss the risk assessment and management of the client. If your supervisor is unavailable then contact appropriate agency staff (i.e., clinic director, placement contact if a psychologist) for assistance and support to manage the risk. If the appropriate agency staff are unavailable to support students on placement or take crises counselling, then contact the Cairnmillar Institute in the following sequence.

Step 3 (where applicable): Call CMI reception on (03) 9813 3400 and make it clear to the receptionist that the matter is an urgent risk matter; the receptionist will triage your call to an appropriately qualified Cairnmillar staff member.

Out of hours or reception is unavailable, contact individual staff members in sequence as follows:

Course Coordinator: Jon Mason 0409 656 835

Dean, Faculty of Psychology, Counselling and Psychotherapy: Linda Byrne 0416 166 277.

Executive Director: Kathryn von Treuer 0409 562 311

To ensure student safety on placement, students who escalate a risk management situation to the Cairnmillar Institute for support (Step 3) are required to make a critical incident report within 24 hours of the incident. You can find more information about critical incidents below, including a link to the report form.

Critical Incidents

Version 2026.2

Cairnmillar has a [critical incident policy](#) together with procedures that cover the action to be taken in the event of a critical incident, required follow-up to the incident, and records of the incident and action taken. The critical incident policies ensure the interests of students are managed appropriately. Such policies also ensure Cairnmillar is prepared for such incidents and has a clear protocol to follow in what can be distressing and upsetting circumstances.

A critical incident is a traumatic event, which may cause significant physical and/or emotional distress involving Cairnmillar staff and/or its students. A traumatic event could include:

- missing students
- any fatality or serious injury
- a serious traffic collision
- homicide or suicide
- verbal or psychological aggression
- serious clinical incident
- fire
- explosion or bomb threat
- an attempted robbery
- serious threats of violence.

If a critical incident occurs, students must report the critical incident to the appropriate agency and CMI placement staff immediately and if located outside the agency (e.g., clinic, school) then you must advise the agency as soon as reasonably practicable that an incident has occurred. Following a critical incident, students must complete and submit the critical incident report form to hr@cairnmillar.org.au and the course coordinator (jon.mason@cairnmillar.edu.au) within 24 hours of the incident.

Follow-up

Following a critical incident or a stressful or adverse clinical event, students should take measures to discuss the incident with their supervisor or other appropriate placement agency staff. Students who do not have the opportunity to do this due to unavailability of agency staff can contact CMI staff as per the sequence of contacts listed under the risk management section above.

CMI Support Services

The following services are available to students:

Counselling & Support for Students: Please refer to [‘Counselling for Students’](#) on my.CMI

Academic & Writing Support for Students: Please refer to [‘APA Support and Study Skills’](#) on my.CMI

Other Support Services: A searchable list of other support services can be found on my.CMI. See: [Support for Students](#)

Grievance Policy

Please refer to the [Student Grievance Policy and Procedure](#) in addition to the following information. Should students have a concern or grievance regarding any aspect of their placement, they should communicate this to their CMI placement supervisor or the placement coordinator where the supervisor is external to CMI in the first instance. The supervisor or coordinator will discuss the student's concerns and will collaborate with the student to determine the most appropriate course of action.

If the student's concern or grievance is not resolved to the student's satisfaction, or if the student is unable to discuss the matter with their supervisor or placement coordinator, the student should contact the Course Coordinator. At this point, the student will be asked to complete and submit a formal grievance which will be responded to in writing.

Course Coordinator: Prof Jon Mason | Phone (03) 9813-3400 or email jon.mason@cairnmillar.edu.au

Placement Coordinator (post-reg): Phone (03) 9813-3400 or email pc-postreg@cairnmillar.edu.au

If the student's concern or grievance is still not resolved to the student's satisfaction, or if the student is unable to discuss the matter with a Course Coordinator, the student should then contact the Dean of the Faculty.

Dean: Prof Linda Byrne | Phone (03) 9813-3400 or email dean@cairnmillar.edu.au

If the student's concern or grievance is not resolved to the student's satisfaction, the student may then take their concerns to an external body. The appropriate body will be determined by the nature of the complaint. Students can access further information by first visiting:

<https://www.studyassist.gov.au/support-while-you-study/higher-education-student-complaints>

FREQUENTLY ASKED QUESTIONS

Placement Arrangements

Who attends the Placement Contract Meeting?

The Placement Contract meeting is usually attended by the student, their placement agency representative, and the placement coordinator. The agency representative is usually the person from the agency who will have the most oversight of you across your placement (clinic director, psychology discipline senior etc.). Please liaise with the placement agency to get their feedback as to the best contact person (sometimes this is not the same contact person who is responsible for the MoU/SPA).

If you are completing placement in a solo private practice, your supervisor is required to attend the meeting in lieu of an agency representative.

Will my placement coordinator communicate with my supervisor and placement agency?

It is an APAC requirement that education providers ensure that agencies providing direct client contact for students have robust and compliant policies and processes in place and that an active relationship is maintained with supervisors. Therefore, placement coordinators will liaise with your agency representative and supervisor as part of your placement. This will occur at the very least at the Placement Contract meeting and as part of the Mid-placement Review, but also at other times as required. It is important to remember that information shared by students regarding the placement agency is not deemed confidential in nature.

Can I book extra client appointments in my diary in case of cancellations/non-attendance?

Students should not log more than 4 direct client contact hours per day. This is to allow time on each placement day for a mix of both direct client contact and client-related activities to support your learning. A total of 150 hours of direct client contact is required across the 50-day placement (which averages approximately 3 hours per day, noting that you will start off with a smaller caseload and build up to 4). Therefore, allocating a maximum of 4 clients each day should allow extra hours to moderate the impact of any unexpected cancellations or non-attendance.

It is understood that very occasionally extra hours might arise (e.g., an assessment session running over the expected time). However, students should be aware that if their caseload is regularly too high to allow for

Version 2026.2

adequate client-related activity, the hours above 4 DCC per day will not be counted towards total placement hours.

Case load should be regularly discussed with your supervisor to ensure that you have adequate time for client-related activities such as case reports, reading, supervision, and other activities relevant to your placement learning. Any difficulties getting suitable referrals/hours should be reported to the placement coordinators promptly for their assistance.

Can I see placement clients on non-placement days?

Students must only schedule placement clients on their contracted placement days as stipulated in your individual Placement Contract. If it is identified that students are logging placement activities (e.g. seeing clients or completing reports) on non-placement days, these hours will not be counted towards total placement hours. The exception to this is Supervision, which may sometimes fall on a non-placement day due to scheduling conflicts, in which case the placement day may be adjusted (ie shortened) to account for these hours. Students should make every effort to schedule supervision during a nominated placement day.

Can I count Professional Development towards my placement hours?

As part of placement, some of your client-related activities will include a range of everyday learning activities to support your practice with placement clients (e.g. reading manuals or peer-reviewed articles, watching therapy videos, etc.). In contrast, students may additionally include some limited *formal professional development* (e.g. an external workshop on the intervention modality you are seeking to focus on in placement). For the latter type of learning activity, students may count a maximum of 15 hours/2 days as professional development in their timesheet, where the activity is directly related to their placement learning goals. This cap avoids excess PD hours being included and allows for client-related hours to constitute a broad range of learning activities. If students feel there is a sound reason to count more than a couple of days, they will need to discuss this with their supervisor and the Placement Coordinator.

If I do more hours in Placement A, can these carry over to Placement B?

The hours requirements are separate for each placement unit, and students are expected to complete 375 hours in each of Placement A and Placement B, making up a total of 750 placement hours across the course. Therefore, students are not permitted to carry over hours between placements.

In exceptional circumstances (eg unanticipated difficulty accessing sufficient referrals by end of placement), a student may seek approval to have a limited number of 'excess' direct client hours from Placement A to be credited to Placement B. However, this would need the Course Coordinator's approval and the student's supervisor would need to affirm that competency has been sufficiently demonstrated throughout the placement. In such a situation, the student is still required to complete the 50 days of placement. A

Version 2026.2

more common solution to such a problem is for the placement to be extended to provide the student with the opportunity to meet the placement requirements.

Can I do a placement made up of only group therapy or assessment?

During placement, your supervisor will assess you across a wide range of clinical competencies. While group work and assessment are a valuable learning experience, on their own, they are unlikely to provide sufficient opportunities to demonstrate the full range of competencies or to complete the required case reports and MSEs/Formulations. While there's no set minimum number of hours for individual or therapy work, it's important that your placement includes opportunities to work with at least a few clients in a 1:1 capacity. These experiences will give you a more well-rounded placement, helping you develop skills in both assessment and intervention, and tailor your work to each client's individual formulation.

Logbook/Timesheet

Who do I speak to if I don't know how to log a particular activity on placement?

Students can review the Placement Handbook glossary for information on what constitutes certain activities, such as direct client contact, client-related activity, and complex presentations. If there are still concerns regarding the activity type, students can speak with their supervisor as to how best to categorise the activity as it is the supervisor's responsibility to sign off all activity in the logbook. PCs will provide advice to students at the start of each semester regarding tips for logging activity on placement. Students can also refer to their Sonia Student User Guide.

Can I log any research/thesis activity as part of my placement?

No. Work for Research A or B cannot be counted towards your placement hours. Even though it relates to a client seen on placement, the research work is not part of your placement hours and therefore cannot be logged as client related activity.

Can I log placement hours on a public holiday?

No, students are not permitted to log placement hours on a day when their placement agency/service is not open. Therefore, most students should not be logging any placement activity on a public holiday. Only students who are on placement in a setting that remains open on public holidays, such as an inpatient hospital setting, can continue to log placement hours if it falls on their contracted placement day. If students wish to work an alternate day in lieu of a public holiday, they may contact their Placement Coordinator to request approval of this.

Supervision

Is supervision counted as client-related activity?

Yes, APAC distinguishes direct client contact from client-related activity and includes supervision as an example of client-related activity. As each placement day is defined as 7.5 hours, provided students are acquiring an average of 3 direct client contact hours a day, the client-related activity will naturally make up the remainder of your day (and include supervision hours)

Can I attend supervision if it's scheduled on a non-placement day?

Students should make every effort to schedule supervision during a contracted placement day. However, where this is not possible and supervision can only occur on a non-placement day, this time should be accounted for by adjusting the placement hours on an ordinary placement day. For example, if a student attends a 1-hour supervision session on a non-placement day, they should undertake 1 hour less on the following scheduled placement day to account for the activity. This prevents students from doing excess placement hours and supports self-care. It is also expected that placement agencies will support students to participate in supervision on their contracted day or otherwise reduce their hours accordingly when attending on a non-placement day.

Can I find my own supervisor for my placement?

The CMI-Supervised model requires students to receive all clinical supervision from a CMI Supervisor. It is only in rare instances (e.g. hospital placements) where a placement agency requires the student to have specialist onsite supervision that alternate arrangements may be approved. If your proposed placement agency requires an alternate supervision arrangement, you will need to provide all relevant information about the agency, placement role and onsite supervision requirements in your Placement Proposal for the placement team to review.

Where can I find the CMI Supervisor's information required for the Placement Contract document?

The CMI Supervisors within the post-reg program will all have Clinical endorsement, and you will already have their email/location address (ie Cairnmillar). The other information you can either obtain directly from them or from the Psychology Board website (eg BAS expiry, registration number, date since first registration).

Placement Requirements (e.g. Case Reports, MSE/Formulations, Observations)

Do I have to complete a Cognitive Assessment?

Students must complete one case report per placement. At the end of both placement units, students must complete an assessment case report and a treatment/intervention case report. The assessment case report can be *either* a cognitive assessment or a personality testing-based case report. There is no requirement to complete both types of assessments on placements. Please see the [Case Report Guidelines](#) for further definitions of what constitutes a cognitive or personality assessment. Supervisors are responsible for determining whether the assessment meets the criteria for 'advanced clinical assessment', and students should speak with their supervisors about potentially suitable clients for assessment during their placement.

Can I use the same client for different requirements, such as the MSE/Formulation and Case Report?

No. The clients selected for the case report should not be the same client for whom the MSE/Formulation was prepared.

Can people age under 16 provide consent for a session being recording, or does the parent need to consent?

Usually parental/guardian consent is required for clients under 18, however, it is always best to direct these clinical questions to your placement supervisor as you will need to discuss issues of whether the client may be considered a mature minor who is competent to provide consent.

What do I do if my agency doesn't allow me to share recordings/notes of clients?

APAC Standards require that multiple assessment modes are employed to assess learning outcomes, including direct observation on placement. It is therefore important that placement agencies can support your placement learning needs by facilitating this, and this should be checked by the student *prior* to submitting your Placement Proposal. If, due to client needs, the placement agency will not allow this, you will need to contact your PC to discuss potential alternatives, one of which may be for an onsite Board-approved clinical psychologist to conduct the observations.

Do I need to upload the case notes that my supervisor reviews?

No. Confidential client material should not be uploaded to SONIA. Supervisors will record in the MPR form ('Portfolio Checklist') how many case notes have been sighted by the time of the Mid Placement Review. They will do the same at the time of the End of Placement Review, ensuring at least two deidentified case

Version 2026.2

notes have been sighted for the purpose of feedback on psychological writing. These notes are to be shared confidentially only with your supervisor.

Can I access psychology test materials from CMI?

Information about the Test Library and test borrowing process may be found on mycmi ([Test Library and Assessment – my.CMI](#)), including a link to the Power App, required to request all loans. For Melbourne-based students, students can borrow tests in person from the Hawthorn campus. For students who are unable to attend the Hawthorn campus in person, if you already have access to the Wechsler kits or Q-interactive, the test library can provide you with record forms and response booklets for the Wechsler assessments. If you have any specific queries regarding the test library, you can contact the test library via testlibrary@cairnmillar.edu.au.

Can I use the same client for all supervisor observations, and do I need to do one with an adult and one with a child?

Students are required to have their clinical work directly observed by a supervisor on at least two separate occasions during each placement as part of overall evaluation of the student's progress. It is preferred that the session observations are completed with three different placement clients at separate occasions, however two clients at different stages of treatment may also be considered by your supervisor if they feel this supports their evaluation of your clinical work and progress. Observations should tie to the student's learning goals for the placement, and the appropriate selection of these should ultimately be guided by your supervisor.

What if I am struggling to find a placement?

We understand that it can take time and persistence to source a suitable placement, which can be challenging. However, students are responsible to source their own placements using their professional networks as a registered psychologist. Students can use the Post Reg Master of Clinical Psychology [Introduction Letter](#) on My.CMI when approaching prospective placement agencies to assist in identifying suitable agencies. You can also contact your PC if during your placement explorations an agency states they require contact from the educational institution rather than the student. Placement opportunities with CMI placement partners will be advertised via an EOI process once per year (Late August for following year placements). Beyond this, PC's unfortunately have limited resourcing capacity to assist students in their sourcing of a placement.

GLOSSARY

Adults: Psychological work with adults aged from the age of 18. Individual supervisors are responsible for determining whether a client meets the criteria and verifies this by signing the logbook.

Children and families: Psychological work with children aged 0-17, and their parents or carers. This may take the form of direct work (for example, CBT for an anxiety disorder) or indirect work (parent skills training, or behavioural work with a family member or carer designed to benefit a child under the age of 18). Individual supervisors are responsible for determining whether a client meets the criteria for 'children and families' and verifies this by signing the logbook. When working with infants, their caregivers and psychological issues relating to pregnancy and the first year of life, you should also consult the entry below relating to perinatal work.

Client Related Activities: Client-related activities support students to acquire graduate competencies as relevant to the level of graduate competency and/or the area or areas of practice undertaken and are distinct from direct client contact (though supportive of it).

Client-related activities may include the following activities: phone calls, focus groups, and meetings in the service of data-gathering or case management in support of service provision to clients; file review; report writing; team reporting and meetings where the student reports to the team to advise of client progress; delivery of psychoeducational content to service providers/organisation; completing log books and assessment tasks for the placement; supervision; professional development activities (e.g., simulated activities, role plays, workshops); travel with regard to client sessions. Under some circumstances, the supervision of other psychologists may be included as a client-related activity if it is related to the placement learning goals, has been explicitly outlined in the placement proposal, is discussed in the Form A meeting, and an agreed limit set.

Travel, in regard to client care, should be limited to a maximum of 20% of client-related activity hours; this is particularly relevant for regional and remote students on placement (APAC, 2019a).

Please note: Simulations must be recorded as client-related hours only. Simulation is a valuable professional development activity that allows you to safely practice and develop skills with people other than those receiving a psychological service from you. Typically, psychologists undertake simulation activities with supervisors and other colleagues, and can include practicing skills such as specific therapeutic techniques, cognitive testing, providing difficult feedback etc. Please record these activities as client-related hours in your logbooks.

Examples of Client Related Activities include:

- Supervision
- Administrative phone calls or meetings
- Reading/writing case/file notes

Version 2026.2

- Organising future appointments
- Scoring test material
- Writing reports
- Preparing for client contact supervision
- Organisational project
- Observing clinical interviews by other professionals (whereby the client is not necessarily a client of the student), and the student does not participate in the interview and remains passive
- Engaging in educational, professional and skills development activities, such as watching online or recorded materials of therapeutic techniques, attending webinars, etc.
- Preparation of logbooks and placement forms
- Placement review meetings
- Presenting a client's case in a clinical review meeting where the student receives feedback from the team. When an appropriately qualified supervisor is present, the student may include this time as supervision where the supervisor agrees.

Cognitive testing/assessment: Cognitive testing is a valuable clinical activity that develops important skills that can aid assessment, formulation and treatment as well as clarify diagnostic issues. Students can log cognitive testing hours in their logbooks if they wish, and can also complete one case report that summarises the outcome of cognitive testing with a client (this can be completed in either placement A or placement B; please ensure you plan this accordingly so that you do not find yourself on placement B wishing to complete a cognitive testing case report and without access to testing materials or clients suitable for cognitive testing). Cognitive assessments should make use of high quality, clinician-administered standardised assessments of one or more core domains of cognitive functioning (intellectual functioning, memory, executive functioning, etc.). Complex neurodevelopmental assessments that make use of extended testing procedures (such as ADOS) are also appropriate. To remove doubt:

Client or informant-based self-report measures (such as the Connors, CBCL, BRIEF, etc.) are not sufficient unless they are used alongside other complex clinician-administered assessments.

Personality testing is not regarded as cognitive testing for the purposes of the logbook or case report requirements.

Complex presentations: Work with clients who's presenting issues include overlapping neurodevelopmental disorders, severe mental disorders such as schizophrenia, bipolar disorders or psychosis, clients at very high risk of suicide, clients under the care of statutory services or legislation, and clients at high risk of criminal conviction. Individual supervisors are responsible for determining whether a client meets the criteria for 'complex presentations' and verifies this by signing the logbook.

Direct Client Activities/Contact (DCC): Direct client activities provide opportunities for students to acquire graduate competencies as relevant to the level of graduate competency and/or the area or areas of practice undertaken, and may include the following activities directly in support of client- focused

Version 2026.2

assessment or intervention: phone calls with clients; face-to-face contact with clients (including e-health modes of delivery); and meetings where the student reports to the team/ organisation (e.g. in the context of a nursing home, an employee assistance program), if the team/organisation will enact interventions to the client or is in fact the focus of interventions; work with clients, their families, employers, supervisors, teachers, health providers or legal guardians with regard to client care.

Please note the following in relation to accruing direct client hours:

- There are many ways that direct client contact can be accrued, and students and supervisors should read the definition of direct client contact carefully and ensure they log these hours appropriately.
- Students are expected to closely monitor their placement requirements on a fortnightly basis in consultation with the primary supervisor, including the rate at which hours are being accrued across the various categories (e.g., direct client contact, client related contact, supervision etc.).
- Students will be required to identify and report their logbook hours to date to their placement coordinator during the mid-placement review. Where the rate of accrual for hours is lower than expected, students are required to discuss potential solutions with their supervisor and/or placement contact prior to the mid-placement review meeting.
- In exceptional circumstances, students who accrue more or less direct client hours during a single placement can apply to count hours across placements towards the overall minimum required in the course (750 total and 300 direct client contact). Applications (via email) must be made in advance and approved by the placement coordinator.

Examples of Direct Client Contact include:

- Face to face, telephone or telephone meeting, session or intake with a client or their careers, families, employers, supervisors, teachers, health providers or legal guardians with regard to client care (e.g., to collect information, providing feedback about an assessment, explaining interventions).
- Observational assessments that form part of a clinical task you undertake alongside other psychological services you are providing to one of your own clients (e.g., doing an on-site school observation of one of your child clients)
- Provision of psychoeducation regarding a client to other stakeholders involved in client care
- Active participation in stakeholder/case conference meetings whereby assessment and /or
- advocacy for the client was an integral component of the student's participation
- Meetings, such as clinical case review meetings, where the student reports to the team/ organisation, if the team/organisation will enact interventions to the client or is in fact the focus of interventions
- Joint sessions between the student and another professional or supervisor in which the student is an active participant in the clinical process of the session.
- Conducting assessment, testing or intervention sessions for individuals, couples, or families.
- Providing psychometric assessment feedback
- Co-facilitating assessment or treatment sessions with another therapist (co-therapy); need to have an active role, does NOT include passive observation.
- Facilitating group treatment sessions

Version 2026.2

- Delivering a formal presentation to placement entity's clients or other stakeholders
- regarding psychologically related material (e.g., sharing a conceptualisation).
- Consulting with other professionals (e.g., acute care team, psychiatrist, case worker, teacher, multidisciplinary team) about the management of a client or gathering clinically relevant information (e.g., ward rounds, clinical meetings, phone or in-person discussion of impressions/ diagnosis/ treatment/ follow-up); does NOT include supervision sessions.

Perinatal work: Perinatal placements are those that include working with psychological issues relating to conception, gestation, birth, and the first year of an infant's life. The work undertaken by a psychologist working in this relatively specialised area will often include working with mothers, fathers, caregivers, and the infants themselves. A key focus of psychological practice in perinatal mental health is the mother-child dyad, with the infant being a key 'beneficiary' of the work, whether they are in the room or not. Understanding how to enter your direct client work into your logbook can be challenging and should be discussed and agreed with your supervisor. Broadly speaking, however, hours should be logged in accordance with whether the primary focus of the assessment/intervention is directly related to the mother-child dyad or caregiver role. For example, where the perinatal work focuses primarily on the dyad relationship, adjustment to parenthood, or post-partum depression/anxiety, then the hours may be logged as child/family, as they are identified as a primary beneficiary of the intervention. In contrast, where the focus of the perinatal work is not significantly related to the caregiver role or the infant (e.g., birth trauma, intimate partner relationships, exacerbation of pre-existing mental health), then this should be logged as adult-only placement hours.

Personality assessment: Personality assessment is a valuable activity in its own right but can also be a useful adjunct to other psychological testing and psychological therapy. Students can undertake a case report based on a piece of personality assessment. The personality assessment should make use of a high quality, recognised personality assessment that allows the student to draw conclusions about personality functioning in line with a recognised model of personality structure. Examples include the PAI, the MMPI, the MCMI, the PID-5, and measures relating to the Big 5.

Placement completion: All required placement documents have been satisfactorily completed and uploaded to Canvas, including all preplacement documentation and all placement assessments.

Psychological Therapy: Evidence-based psychological interventions, based on a documented assessment, formulation and treatment plan of the client, and undertaken for the purpose of addressing the signs and symptoms of mental disorder. This will usually be aimed at individuals or groups, seen over the course of several sessions.

Supervision: Supervision is the process of guiding students in their acquisition of graduate competencies for a specialised area of practice. It can be undertaken either individually or in a group. Supervision may use a range of methodologies that allow for face-to-face communication either in person or electronically.

Requirements for supervision:

Version 2026.2

- Supervision in the Master of Clinical Psychology (Post Registration) course must be provided by a psychologist registered with the PsyBA and holds:
- An area of practice endorsement in clinical psychology, and
- Board approved supervisor status for providing supervision to postgraduate students (higher degree students).

Supervision is classified by APAC as a client-related activity (see above definition) and supervision hours are included in the total placement hours requirement for each placement

Supervision must be completed at the rate of one hour of supervision for every 7.5 placement hours for the initial 200 hours of a student's placement in a course after which supervision can be completed at the rate of one hour for every 15 placement hours.

To facilitate students' learning and development, students are not permitted to have the same primary individual supervisor for both placement units.

At minimum, students should undertake supervision regularly in accordance with the supervision rate required, as stated above. The time between supervision sessions should not exceed 2 weeks and students must notify their placement coordinator promptly if there has been a gap greater than this so appropriate support measures can be put into place

Where students complete more placement hours than the minimum, they will need to undertake more supervision hours to ensure the above ratio of supervision to placement activity is maintained.

A minimum of 50% supervision in any one placement must be in the form of individual supervision, with no more than 50% in the form of group supervision. Students are required to monitor this ratio to ensure they meet the minimum 50% individual supervision requirement in each placement.

For each placement, students should have a maximum of two CMI supervisors (e.g., one individual and one group supervisor). As best as possible, CMI will endeavour to match students with a supervisor with the appropriate expertise in the clinical focus of their placement.

Ten percent of the minimum individual supervision hours may be logged as asynchronous hours, equating to 4 hours in Placement A and 2.5 hours in Placement B (usually comprised of supervisor time spent reading notes, case reports, providing feedback etc.). Asynchronous supervision must only be logged following consultation with your supervisor.

Total Placement Hours: Total placement hours = direct client hours + client related hours (including supervision hours). Total placement hours include all appropriately logged hours for each of these activities (direct client, client related which includes supervision hours) in a CMI approved placement and under the CMI approved supervision for each placement.

Placement Decision-Making Framework

Criteria	Demonstrated	Not Demonstrated
Clinical Psychology Placement	The placement provides clear opportunities for the student to develop core clinical psychology competencies, including assessment, diagnosis, formulation, and evidence-based treatment of a range of mental health disorders. The agency is an established service that can provide sufficient referrals suitable for a clinical psychology role and can offer 100% new client case load for the purpose of placement	The placement proposal lacks relevant detail to demonstrate sufficient opportunities for core clinical psychology competencies. The role may fall outside the scope of clinical psychology practice or be situated within an agency that is not yet well established (i.e., has been in operation for less than 12 months) and lacks — or is at risk of lacking — the capacity to provide sufficient suitable referrals.
Diversity of Placement Experience	The proposal clearly demonstrates that the student will gain experience working across two distinct placement settings, with different service delivery models. Across the two settings there is a good opportunity to work with a broad range of client groups, showing diversity across presenting problems, age, gender, culture, and socioeconomic status.	The proposal shows limited or no distinction between the two placement settings and/or similar service delivery models (e.g., both placements in similar environments and/or with similar client groups). There is insufficient evidence that the student will gain exposure to a diverse range of client groups, with notable gaps in presenting issues or client demographics (e.g., limited age range, cultural diversity, or socioeconomic variation).
New Learning Opportunity	The placement offers substantial new learning across multiple dimensions (e.g., client type, modality) and is clearly distinct from the student's prior experience and skill set. Adaptations are made if the placement is within an existing workplace to provide sufficient opportunity for the student to focus on new learning.	The placement does not clearly demonstrate new learning opportunities for the student in the context of their prior experience/skill set. Where a work role is proposed, adaptations (if any) are minimal or unclear.
Agency Support of Placement	The agency provides a safe learning environment with sufficient onsite student support. The agency supports direct observation of the student's practice by the CMI Board-approved supervisor.	The agency does not adequately support the student's learning goals, offers limited onsite support, or cannot facilitate CMI's placement requirements.

