

# Real Hope Real Help Mental Health Center Intern Manual

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## Introduction

### Purpose of the Training Manual

This manual presents the policies and procedures of the Psychology Internship Program at Real Hope Real Help Mental Health Center. It is designed to facilitate training by providing guidelines on program goals and objectives, administrative procedures, training structure/resources, and evaluation and grievance procedures. Unforeseen circumstances may call for exceptions to or changes in guidelines.

### Overview of the Program

The internship is a generalist program designed to train clinical, school, behavioral, neuropsychology and counseling psychologists for competent and responsible professional work in the postdoctoral year or in entry-level internship positions. It is our expectation that interns will utilize their internship year to broaden and extend their practice of psychology, rather than narrow their focus. While interns have the opportunity to refine skills already developed in graduate school, we also strongly encourage interns to try new approaches, new techniques, and new perspectives, in pursuit of a well-rounded education. The basic requirement of the training program is satisfactory performance in applied clinical work in a minimum of three of the following clinical areas: Outpatient Psychological and/or Neuropsychological Testing, Counseling individual, families and groups, School Psychology and/or Clinical experience and training in behavioral psychology by working in the applied behavior analysis program. Real Hope Real Help will provide educational offerings including a didactic series from several sources.

Clinical experience is gained during one calendar year of full-time practice. The schedule is typically 8:00 AM to 5:00 PM, but exceptions can be made for a personalized schedule. Prior to beginning clinical work, interns receive current information about the experiences available in the clinic, and are aided in reviewing their own individual goals and prior experience. Each intern or post-doc fellow will develop an individualized set of goals that he/she expects to meet as part of their training experience over the calendar year.

### Program Goals, Objectives and Competencies

Internship provides a year of intensive, supervised clinical training, intended as a bridge between graduate school and entry into the profession of psychology. Training at the sites of Real Hope Real Help MHC and Lake Dallas Independent School District is designed to accomplish a number of important training goals (see below) as a foundation for independent professional practice. Interns should demonstrate competence in the areas listed below by the completion of the internship year. Many of these goals, objectives and expected competencies will build upon knowledge and skills already well developed during doctoral training. All of the internship placements will provide opportunities for further development of these 'cross cutting' competencies, though placements might emphasize some competencies more than others. Additionally, other program components (including didactics and clinical research) will provide added challenge and the opportunity for integration. When viewed in context of the entire sequence of training that begins with the first year of doctoral education, the internship year is

a capstone experience that will provide interns opportunity to develop these intermediate to advanced competencies. The total number of hours of this internship are a minimum of 2,080 hours with at least 25% of the hours being direct service. If an intern is needing to meet the criteria for working in a public school, he/she needs to complete at least 600 hours during the internship year in a public or private school. This internship experience satisfies the criteria set forth by the Texas State Board of Examiners of Psychologists to become a fully licensed psychologist in the state of Texas.

**Goal #1: *AT THE END OF TRAINING, INTERNS WILL DEMONSTRATE INTERMEDIATE TO ADVANCED COMPETENCY IN ASSESSMENT AND EVALUATION OF INDIVIDUALS WITH A VARIETY OF DIAGNOSES***

Objective(s): Interns will develop competence in psychological evaluation and assessment of children, teens and adults with a variety of diagnoses and psychosocial needs. Emphasis is placed on developing competence in diagnostic interviewing and the administration, scoring and interpretation of psychometrically-validated assessment and screening instruments.

Expected Competencies:

1. Ability to appropriately assess, evaluate, and conceptualize diagnoses for a broad range of diverse patients, including those with complex clinical presentations and complicated co-morbidities incorporating a thorough understanding of current diagnostic criteria and incorporation of pertinent collateral data.
2. Ability to select and properly administer psychometrically sound assessment instruments and/or evaluation methods appropriate to address the referral question and the clinical needs of the patient.
3. Awareness and understanding of biopsychosocial factors affecting psychological functioning and adherence to treatment recommendations.
4. Intern consistently develops a case formulation based on a well-established theoretical orientation appropriate to the diagnosis and assessment results incorporating individual differences and diversity issues.
5. Ability to produce a concise and thorough clinical report summarizing test results, significant findings, diagnostic impressions and clinical recommendations.
6. Provides useful and accurate feedback to patients, referral sources and/or treatment teams.
7. Ability to identify and respond to suicidal or homicidal ideation, intent, or plan, including performing suicide risk assessment and safety plans.
8. Ability to conduct assessments with an awareness and appreciation of current ethical and professional standards.

**Goal #2: AT THE END OF TRAINING, INTERNS WILL DEMONSTRATE INTERMEDIATE TO ADVANCED SKILLS IN THE PROVISION OF PSYCHOLOGICAL INTERVENTIONS INCLUDING EMPIRICALLY BASED/ SUPPORTED TREATMENTS**

Objective(s): Interns are expected to further develop their competency in general psychotherapy skills by providing psychotherapy implementing a number of empirically based/supported therapeutic interventions, techniques and approaches that are appropriate for work with a diverse clinical population.

Expected Competencies:

1. Intern routinely informs patients of issues of confidentiality and obtains appropriate consent as needed (e.g. recording of sessions) prior to initiation of treatment.
2. Intern provides warm and supportive therapy environment and identifies and attends to process issues.
3. Intern collaboratively develops a treatment plan with the patient and documents progress toward treatment goal(s) on an ongoing basis.
4. Intern considers and incorporates current literature, including research and theory, in developing treatment plans.
5. Intern incorporates issues of culture, individual differences, and/or diversity into the selection of interventions.
6. Intern maintains an awareness and appreciation of current ethical and professional standards pertinent to psychotherapy
7. Intern recognizes and responds appropriately to patient crises.
8. Interns will demonstrate skill in delivering at least one evidence-based psychotherapy (e.g. CBT-Insomnia, Systems Theory for Family Therapy, systematic desensitization for phobi) appropriate for a clinical population served.

**Goal #3: AT THE END OF TRAINING, INTERNS WILL DEMONSTRATE INTERMEDIATE TO ADVANCED SKILLS IN SCHOLARLY INQUIRY AND THE INTEGRATION OF CURRENT SCIENCE AND CLINICAL PRACTICE.**

Objective: Interns will independently consider and incorporate current science and research findings into all aspects of patient care and professional activities.

Expected Competencies:

1. Demonstrates knowledge of and incorporation of current literature, research, and theory in clinical practice by routinely referencing the literature in presentations, during case conferences, and during individual/group supervision.
2. Readily identifies knowledge deficits and are proactive in seeking means to obtain requisite knowledge via review of the literature, professional consultation, and/or other means of study (e.g. seminars, workshops, and/or conference presentations).

3. Demonstrates critical thinking skills in case formulations, supervision, and clinical care.
<b>Goal #4: AT THE END OF TRAINING, INTERNS WILL DEMONSTRATE INTERMEDIATE TO ADVANCED KNOWLEDGE, SKILLS, AND ATTITUDES CONSISTENT WITH AN APPRECIATION OF INDIVIDUAL AND CULTURAL DIVERSITY</b>
<u>Objective(s):</u> Interns maintain awareness of and sensitivity to diversity issues in terms of gender, age, sexual orientation, disability, religion/spirituality, culture, ethnicity, race and other pertinent individual differences. Interns assess and consider issues of individual differences and cultural diversity in all patient interactions, assessments, and interventions, and maintain awareness of their own cultural biases.
<u>Expected Competencies:</u> <ol style="list-style-type: none"> <li>1. Interns consider their own culture, ethnic background, and personal biases in regards to how they may impact their interactions with diverse patients, staff, and colleagues.</li> <li>2. Interns demonstrate the ability to effectively and respectfully work with diverse populations, and provide appropriate assessments and interventions in response to a range of presenting problems and treatment concerns.</li> <li>3. Interns demonstrate knowledge and understanding of unique issues related to the individual patients that are treated.</li> <li>4. Interns readily identify personal knowledge deficits in the area of individual/cultural diversity, proactively recognize when additional knowledge is needed, and discusses in individual and/or group supervision.</li> <li>5. Interns develop awareness of the effects of cultural/diversity issues and individual differences on response to illness and/or response to treatment, and are knowledgeable about disparities in access to care and treatment outcomes.</li> <li>6. Interns demonstrate skill in applying and/or adapting evidence-based interventions with special populations.</li> </ol>
<b>Goal #5: AT THE END OF TRAINING, INTERNS WILL DEMONSTRATE INTERMEDIATE TO ADVANCED SKILLS IN PROFESSIONAL CONSULTATION, SUPERVISION AND EVALUATION</b>
<u>Objective 1:</u> Interns will obtain intermediate to advanced knowledge, skills, and attitudes related to consultation allowing them to function as effective members of a healthcare team.
<u>Expected Competencies:</u> <ol style="list-style-type: none"> <li>1. Demonstrates understanding of professional roles within a healthcare setting.</li> <li>2. Routinely selects the correct assessment/intervention technique to effectively respond to the consultation and the referral question.</li> </ol>

<ol style="list-style-type: none"> <li>3. Ability to collaborate with interdisciplinary providers</li> <li>4. Ability to present cases to other professionals in a standardized manner incorporating biopsychosocial issues and provide clinical recommendations with minimal supervision.</li> <li>5. Tailors feedback to the audience.</li> <li>6. Documents patient contacts, assessment, and intervention in a timely and organized manner with minimal supervision and communicates findings to referral source.</li> </ol>
<p><u>Objective 2:</u> Interns will obtain intermediate to advanced knowledge of effective supervision techniques</p>
<p><u>Expected Competencies:</u></p> <ol style="list-style-type: none"> <li>1. Demonstrates knowledge and understanding of accepted theories and practice of supervision.</li> <li>2. Responsive to individual and group supervision, comes prepared, utilizes feedback well.</li> <li>3. Maintains confidentiality and safe environment during individual and group supervision.</li> <li>4. Provides feedback to others in a mature and constructive manner.</li> <li>5. Considers culture and individual differences when providing and/or receiving supervision.</li> </ol>
<p><u>Objective 3:</u> interns will obtain intermediate to advanced knowledge of evaluation, including program evaluation and evaluation of patient progress.</p>
<p><u>Expected Competencies:</u></p> <ol style="list-style-type: none"> <li>1. Demonstrates knowledge and understanding of program and patient evaluation.</li> <li>2. Documents ongoing patient evaluation and makes necessary changes to the treatment plan as needed.</li> <li>3. Provides formal and informal feedback to the Training Committee that facilitates program improvements and/or changes as needed.</li> <li>4. Considers culture and individual differences relevant to patient and program evaluation.</li> </ol>
<p><b>Goal #6: AT THE END OF TRAINING, INTERN WILL DEMONSTRATE INTERMEDIATE TO ADVANCED SKILLS IN PROFESSIONAL CONDUCT, ETHICS AND LEGAL ISSUES</b></p>
<p><u>Objective:</u> Intern will demonstrate professional knowledge and behavior consistent with local and national professional standards, the APA ethical guidelines, and pertinent federal policies.</p>

**Expected Competencies:**

1. Demonstrates knowledge in ethical and legal issues related to all areas of functioning including patient care and interactions with peers and supervisors.
2. Adheres to the Ethical Guidelines of the American Psychological Association and with current professional standards.
3. Demonstrates awareness of professional boundaries and personal issues that might interfere with functioning.
4. Maintains professional deportment in dress, behavior, and interactions with other professionals and patients.
5. Across the course of the training year, assumes increasing professional responsibility for workload, patient care, consultation, and teaching activities.
6. Demonstrates consolidation of knowledge, skills and attitudes consistent with professional identity as a psychologist, including knowledge of current trends in the field, awareness of new and emerging clinical treatments, and appreciation of the evolving scientific basis of the discipline.
7. Demonstrates an appreciation for the need for ongoing professional development, identity, and knowledge base.

***The Program has four major components designed to accomplish these goals and objectives:***

1. Experiential Clinical Training
2. Didactic Training
3. Experiential training and scholarly inquiry
4. Supervision and Mentorship

**Administrative information**

**Financial Support**

The intern annual stipend is \$25,000 per year with salary paid on a monthly basis. You must arrange to have pay deposited directly to your banking account. Funds are automatically deposited every month. If an intern does not complete the year long internship for any reason, the stipend will cease to be paid at the conclusion of the intern's experience and presence at the training site.

**The Internship Calendar**

The internship is for one full year (2,080 hours), beginning at the first of September and ending on the thirty-first of August.

**Work Hours**

Like other Medical Center employees, interns work at least 40-hour week, with a standard work day (tour of duty) from 8:00 AM to 4:30 PM (with 30 minutes for lunch), resulting in an 8-hour day. Please plan to arrive and be present at your duty station ready to begin

work at 8:00 AM. However, each intern has the opportunity to set his or her individual schedules, with other schedules being allowed. The intern will have staff support between 8:00 AM until 6:30 PM, Monday through Friday. Once the intern decides upon a schedule, it must be presented to his/her supervisor in writing. Any deviations from the schedule, such as time off, or flex time must be communicated with the primary supervisor prior to time off if at all possible. Interns may choose to work additional hours during the week, but they are on salary so no overtime payments will be given to an intern.

## **Leave**

Once the intern decides upon a schedule, it must be presented to his/her supervisor in writing. Any deviations from the schedule, such as time off, or flex time must be communicated with the primary supervisor prior to time off / paid time off. Interns and post doc fellows are offered 7 paid holidays per calendar year as well as 7 days of paid time off/sick leave per calendar year. A form request must be completed for paid time off and signed by the intern's supervisor prior to taking leave. If an intern exceeds 7 days of paid time off and is ill or has a family circumstance that requires leave, that situation must be discussed with the intern's supervisor to develop a plan of action to address the need and help the intern complete all required hours for internship.

## **Leave Approval**

Interns are accountable for their time and are responsible for keeping track of leave and making sure all of clinical duties are covered using the same procedures followed by other clinical staff. Prior to making a leave request, annual leave should be planned with clinical supervisors in order to ensure that time away does not present problems or services to patients.

Sick leave should only be used for periods of illness or documented medical appointments. Flex time must be approved by the intern's immediate supervisor.

## **Administrative Support**

Administrative support is available on each of the training rotations at Real Hope Real Help Mental Health Center and Lake Dallas ISD. Check with your supervisor regarding what services clerks or other staff can provide for interns in those settings. Administrative support includes but is not limited to: office supplies, answering the phone and taking messages, ordering testing materials, providing E.H.R. and human resource issues. All interns will have a private office with furniture, a computer and a phone. All other supplies needed to complete assigned tasks will be provided by Real Hope Heal Help Mental Health Services.

## **Administrative Organization**

### **Training Director**

The Training Director is Dr. Christina Della Nebbia, who is also the Clinic Director. Dr. Della Nebbia is responsible for the overall functioning of the psychology training program and chairs the Training Committee. Dr. Della Nebbia can be reached at [Realhoperealhelpdr.d@outlook.com](mailto:Realhoperealhelpdr.d@outlook.com) or [lakeokabogee08@gmail.com](mailto:lakeokabogee08@gmail.com) or by leaving a confidential voice mail at 972-966-1079. In the case of absence of the Training Director, the Assistant Training Director, Dr. Virginia Neal will assume necessary duties. Dr. Gwen



Carter is available for all interns that are completing a school psychology rotation. She will provide supervision for those hours completed in the school setting at Lake Dallas ISD.

### **Training Committee**

The Training Committee formulates internship training policies and procedures. Its task is to ensure that interns receive appropriate training based on the overall program goals and individual training needs. The Training Committee also reviews intern progress and program issues, and makes changes to the program as needed based on input from supervisors and interns.

1. All supervisors are members of the Training Committee. The Psychology Service Chief and Training Director may appoint additional staff members, with an eye toward representing the interests of the internship program.
2. The Training Committee meets as a whole or in subcommittee at least monthly and more frequently as warranted. This meeting also includes Dr. Gwen Carter if there is an intern at the Lake Dallas Independent School District during that particular semester.
3. Any staff member or intern may submit agenda items. Such requests should be submitted in writing to the Training Director. The Director will inform the person of the date the issue will be considered. Staff members and trainees who propose agenda items are invited to attend meetings when their agenda items are to be discussed.
4. Decisions made by the Training Committee consider information obtained from staff, trainees, and/or other involved parties. Decisions that change the policies of the program will be written and distributed as additions or corrections to this manual and recorded in the minutes
5. Policy decisions will be made by the Training Committee as a whole when a quorum of voting members is present. Preferably, such decisions will reflect a consensus of the committee, but if this is not possible, a simple majority will prevail. Every attempt will be made to thoughtfully consider pertinent changes as requested.

### **Training Program Involvement**

Interns are active recipients of training, and as such, play a valuable role in the development and implementation of the training program through participation in a number of important activities.

- **Intern Interviews:** Interns are invited to be present during certain components of the intern interview process for the upcoming year. Interns will not be expected to evaluate internship applications nor make recommendations for selection. Their role is primarily to provide information to interviewees regarding rotations and overall intern experience.
- **Didactic Seminars:** Didactics are provided on topics pertinent to the overall



training goals of the program. The Training Director coordinates the scheduling of appropriate presenters and/or facilitators and requests for specific didactic training will be considered by the training committee.

- **Intern orientation:** With the input of staff and interns, the Training Director plans and schedules a week of orientation activities for incoming interns.
- **Program evaluation:** Interns are encouraged to provide input into the program by actively participating in Training Committee meetings and by completing periodic evaluations of clinical supervisors, training rotations, didactics, and the broader training program. Data obtained from these evaluations are used to make changes to the program as needed to ensure obtainment of training goals.

## Training Program Resources

### Supervisors

Supervisors are the internship program's most important training resource. They provide professional role modeling, instruction, and feedback regarding professional and clinical functioning. Supervisors facilitate interns' dealings with other personnel and ease transition into the role of healthcare professional. Because all supervisors have patient care responsibilities, interns are afforded the opportunity to develop skills and knowledge by working side-by-side with experienced staff members. Interns can expect intensive supervision during the early stage of training and the opportunity to take on more advanced and autonomous professional responsibility as their knowledge and skill increases. Styles of supervision and techniques utilized may vary from rotation to rotation. Licensed psychologists are eligible to be primary supervisors. Psychologists who are not yet licensed may provide adjunctive supervision; however, this supervision cannot be included in the required four hours per week.

- Supervisors meet with the interns at the beginning of the internship to describe the learning opportunities, to discuss intern learning needs, and to identify training targets specific to a particular clinical area.
- Supervisors schedule regular times for supervision and provide additional supervision as needed. **A minimum of two hours of individual supervision are provided each week for each intern.** A minimum of four hours of additional training and supervision is required. **Two hours of group supervision** is provided as well as **two hours of didactic training.** Interns should refer to the Didactic Calendar to ensure they are properly prepared for each training opportunity. Additional training may take place in the form of the following activities: observing and participating in a clinical service with a supervisor, attending professional meetings or conferences, additional supervision and PRN supervision.
- Supervisors co-sign all progress notes, treatment plans, assessment reports, correspondences and any other intern entries into the medical record. Each document should reflect the intern's supervisory status and that they are supervised by a named clinical supervisor. Each patient/parent should be advised that the services they provide are under supervision, name the supervisor and how

to get a hold of the supervisor if needed. Prior to clinical intervention, the parent or adult patient will sign a form indicating the information and that they agree to participate in services by the supervised intern.

- When the supervisor is away from the Center, he/she arranges for appropriate backup supervision.
- Midway through each rotation, the supervisor and intern informally review progress toward training goals making adjustments to training goals as needed. Working from the Individualized Training Plan, the supervisor shares his/her evaluation of the intern's progress and areas requiring further development with the intern and Training Committee
- At the end of the 6-month period, the supervisor prepares a written evaluation of the intern's experiences toward developing the expected competencies. The supervisor and intern discuss the evaluation and the supervisor provides the final evaluation to the Training Director prior to the end of the internship. This evaluation is signed by the supervisor, intern, and the Training Director, and is placed in the intern's file. A summary of progress is sent to the doctoral training director of the intern's graduate program. Additional information regarding evaluation policies and procedures is discussed below.

## **Learning Experiences**

### **Orientation**

During the first two weeks of training, interns are introduced to the structure, policies and procedures of Real Hope Real Help MHC and the Internship program, as well as important aspects of the Mental Health services. Learning opportunities are described to the entire intern group, and during individual appointments (on request) to interns specifically interested in a particular clinical experience. Each intern also meets individually with the Training Director to assess unique training needs and to plan how they will be addressed during the internship year. All interns are required to complete

### **Outpatient Mental Health Intervention (OPMH)**

**Setting: Outpatient Mental Health Clinic**

**Primary Supervisor: Christina Della Nebbia, PhD**

**Secondary Supervisor: Virginia Neal, PhD**

The outpatient mental health clinic provides opportunities for refinement of individual and group psychotherapy skills with emphasis on delivery of evidenced-based psychotherapies such as Acceptance & Commitment Therapy (ACT) and Cognitive Behavior Therapy (CBT) and Behavioral Psychology for depression, anxiety and other diagnoses. Interns also have an opportunity for treatment planning, crisis intervention or safety plans, and clinical conceptualization. Interns may be involved in treatment and assessment of referred juveniles from the Denton County Juvenile Probation Department. There are also opportunities to complete assessments and counseling cases referred from physicians in the community or through other agencies. Group counseling is also an area of training. The intern may be a co-therapist with a supervisor to further hone group therapy skills.

### **Psychological Testing Services**

**Setting: Real Hope Real Help Mental Health Center**

**Primary Supervisor: Christina Della Nebbia, PhD**

**Secondary Supervisor: Virginia Neal, PhD**

Psychological testing provides detailed, expedient, clinically useful assessments for interns from a variety of sources and covering the full age span. The intern will be exposed to a variety of diagnostic categories and differential diagnosis cases. Typical referral questions relate to differential diagnosis for patients with complex psychological needs and assessment of cognition and adaptive functioning. Interns conduct (on average) 1-3 assessments per week which includes direct testing, scoring and writing the report. Guidance is given throughout the process.

### **Behavior Psychology**

**Setting: Real Hope Real Help Applied Behavior Analysis Clinic**

**Supervisor: Dr. Christina Della Nebbia, Board Certified Behavior Analyst**

**Offered: Elective Rotation**

The Behavior Psychology rotation provides training in assessment and interventions for children on the autism spectrum utilizing applied behavior analysis. Interns can provide direct ABA services such as discrete trial teaching, data collection, skills training, parent training and developing functional behavior assessments as well as VB-MAPP assessments. Interns may pursue registered behavior therapist or board certified behavior analyst certification if the proper classes are completed.

### **Cognitive Rehabilitation/Clinical Neuropsychology**

**Setting: Real Hope Real Help Mental Health Center**

**Supervisor: Christina Della Nebbia, PhD**

**Offered: Elective Rotation**

Training and intervention in the area of neuropsychology is offered for children and adults. Neuropsychological test batteries are flexible and modified according to referral questions. Interns will develop understanding of sequelae of head trauma and various treatment approaches. Skills developed include: clinical interviewing, completing comprehensive or briefer psychological/neuropsychological screening batteries, and developing and implementing treatment plans for cognitive rehabilitation. Interns will gain competence in clinical and consultation skills through participation in weekly supervision, didactic training, and clinical activities under supervision. Interns will also participate in cognitive rehabilitation treatment planning and intervention, cranial electrotherapy stimulation (using a CES unit Alpha-Stim), and biofeedback methods of intervention.

### **School Psychology**

**Setting: Lake Dallas ISD**

**Supervisor: Juanita “Gwen” Carter, Ph.D.**

**Offered: Elective Rotation**

Training focuses on the development of skills working as part of an educational interdisciplinary team serving students at Lake Dallas ISD. Individuals choosing this experience must have the appropriate training and courses to allow the required 600 hours to become a Licensed Specialist in School Psychology.

### **Didactics/Seminars**

The training derived through direct clinical experience is augmented by scheduled seminars and educational programs offered in community settings such as Denton Independent School District, Lake Dallas Independent School District, independent learning opportunities, group supervision, and grand rounds at area hospitals. Interns are released from their clinical duties during scheduled internship seminars.

### **Policy on Attendance at Didactics**

It is the policy of the Psychology Internship Program that interns are required to prepare for, attend, and actively participate in all scheduled didactic activities, including seminars and service specific teaching activities which includes watching a supervisor complete a clinical activity or listening to educational videos, watching didactic presentation, and group supervision.

### **Research**

While the internship year is intended primarily as an intensive clinical experience, interns are encouraged to participate in clinical research if they choose. Interns may choose to become involved with an ongoing research program with research staff, or they may work on their own research project such as developing their dissertation or theses into a poster or paper for publication. If either of these options is selected, interns are given two hours of protected research time per week.

### **Professional meetings**

Interns are encouraged to attend professional meetings and conventions of their choice, as a means of participating in the larger professional world, and to pursue individual professional interests. While there is no funding associated with professional travel, authorized absences may be approved by the Director of Training 30 days in advance of the meeting.

### **Assessing Training Needs**

During orientation week, interns are asked to reflect upon their strengths as well as areas needing additional development to discern internship training needs. In addition, each intern meets individually with supervisors to discuss his/her goals as well as strategies for accomplishing these during the year. Supervisors can be a valuable resource for identifying placements that will help the intern round out their training experiences.

At the beginning of each rotation, interns complete an Individualized Training Plan with their rotation supervisor. The original form is provided to the Training Director for placement in the intern's file. Every three months, interns and supervisors engage in a formative evaluation process which enables them to adjust training goals as needed. This evaluative process is measured with an eye toward the intern's stated goals, the standard

of practice in the clinical setting, and the expected competencies. Mid-term progress is reviewed by the training committee which may make recommendations to interns regarding future training experiences based on supervisor evaluations.

If an intern is identified as having a serious deficit in knowledge or skills in a fundamental area of knowledge and/or practice, the Training Director may recommend, or require particular training experiences of an intern. The Internship Director would make such a decision only after considering input from the supervisors and the intern.

### **Sources of Information about Training Experiences**

We intend that interns have as much information as possible before the development of an intern training plan. There are numerous sources of information available regarding the various activities: The Internship manual, the presentations during orientation week, optional individual appointments with supervisors, and advising by supervisors.

Interns often choose clinical experiences based on an interest in a particular content area. However, interns should keep in mind that all experiences provide training in fundamental and non-specific professional skills, provide exposure to overlapping patient populations and problems, and provide experience in approaches and interventions common in all psychological practice. Further, the internship training experience is geared toward broad and general training that provides a solid foundation for entry-level practice or post-doctoral training in a specialty area.

### **Approval of training plan**

Supervisors' input regarding expectations of interns, their supervisory workload, anticipated changes in the clinical activities, personal preferences, or other important factors are solicited and considered in conjunction with the many other variables key to an appropriate selection of activities appropriate for the internship year of training.

### **Evaluation of Intern Progress**

A variety of evaluation methods are used in the training program. Because feedback and instruction is most valuable when it is immediate and specific, supervisors and interns are expected to exchange feedback routinely as a normal part of the daily "apprenticeship". Additional evaluation procedures formalize this regular information exchange.

Interns are asked to evaluate themselves and their level of knowledge and competence on a number of important domains at the beginning of the training year. This information is reviewed by the Training Director, and the individual supervisors. Based on this information, an individual training plan is developed for each intern at the beginning of the internship. The original form is given to the Training Director for placement in the intern files.

Every six months, the intern and supervisor will review progress and make appropriate written comments and or adjustments to the training goals. Copies of these forms are placed in the intern's file.

Following the exchange of feedback described above, the training committee meets to review interns' progress in fulfilling their training goals. The primary purpose of this meeting is to ensure that any difficulties or special training needs are identified at an early point in the rotation, so that remedial recommendations or assistance can be offered in a

timely manner. Should the training committee develop any feedback for an intern as a result of the review, it is the responsibility of the intern's primary supervisor to discuss such feedback with the intern. The intern's preceptor and the Training Director may also be helpful in communicating the feedback.

## **Program Evaluation**

A variety of evaluation methods are used to elicit feedback from interns about the training program. Keeping in mind that feedback is most useful when it is immediate and specific; interns are encouraged to provide input and feedback as a routine part of the supervision process, and in their meetings with the Training Director. Additional program evaluation procedures are used to formalize this regular information exchange during the internship program as needed or at least mid-year.

## **Overall Program Evaluation**

At the end of the year, interns will also complete a written evaluation of the internship program as a whole, including the seminar offerings, rotations, and supervisors. The evaluation forms are structured to elicit specific feedback on the overall organization and functioning of the internship program, and to evaluate specific facets of the program. In addition, the Training Director may request interns to evaluate various aspects of the training program in response to specific questions or problems.

## **Informal Evaluation Procedures**

Informal evaluation procedures are provided via routine verbal exchange of feedback. These informal evaluations are expected to occur regularly, and are scheduled and structured during the internship year.

- The intern group meets monthly with the Training Director to discuss general issues, and to bring to the Director's attention any difficulties in the program.
- After completing the first month, each intern meets individually with the Training Director to discuss their adjustment to internship, as well as any concerns or problems.
- Each intern meets with the Training Director during the last week of the internship to review the internship year and to offer comments and suggestions for the training program.
- During the final weeks of the internship, the intern group meets with the Training Director to provide feedback on any aspect of the internship, including the performance of the Training Director.

## **Policy for Problem Identification and Resolution: Due process in Intern Evaluation and Grievance Procedures**

This policy sets forth guidelines for the management of interns' problematic performance or conduct and the program's grievance procedures. This policy emphasizes due process and assures fairness in the program's decisions about interns,



and provides avenues of appeal that allow interns to file grievances and dispute program decisions. The program uses the same procedures to evaluate all interns. These procedures are provided to all interns during Orientation at the start of the training year.

### **Due Process Guidelines**

1. Evaluation procedures are clearly stipulated in the training manual, including when and how evaluations will be conducted.
2. The procedures and actions for making decisions about problematic performance or conduct are outlined in the internship training manual.
3. Remediation plans are instituted for identified inadequacies, and include time frames for remediation and consequences for failure to rectify the inadequacies.
4. All interns receive a written description of procedures they may use to appeal the program's actions, and procedures they may use to file grievances. These procedures are outlined in the training manual.
5. Interns are given a specified time frame to respond to any action (i.e, addressing a deficiency or respond to an identified problem) taken by the program.
6. Decisions or recommendations regarding the intern's performance or conduct are based on input from multiple professional sources.
7. Program actions and rationale are documented in writing to all relevant parties including the intern, Training Director, and the intern's supervisor.
8. In all instances, performance or professional conduct issues will be discussed with the interns' Director of Training. The program will also be kept informed in an ongoing and timely manner of any significant intern problems, steps engaged to resolve problems, subsequent outcomes, and program decisions.
9. Interns are given an employee manual to review and sign to help understand the expectations of the intern during the internship year.

### **Definitions of Problematic Performance and/or Conduct**

Throughout the year, interns are expected to make adequate progress toward their training goals as outlined in their exit competencies. Adequate progress is indicated by ratings of "Average" (an average intern level or a 3 or higher rating out of 5) in each competency area on all general clinical competencies.

Problem behaviors are said to be present when supervisors determine that an intern's behaviors or attitude are disrupting the quality of his or her clinical services; his or her relationships with peers, supervisors, or other staff; or his or her ability to comply with appropriate standards of professional behavior including, but not limited to, violation of the ethical standards of psychologists, and violation of laws and regulations governing the practice of psychology. It is a matter of professional judgment of the Training Committee as to when an intern's problem behaviors are serious enough to fit the definitions of problematic performance or conduct, rather than merely being typical of problem behaviors often found among interns.



The program defines problematic performance and problematic conduct as follows: Problematic performance and/or problematic conduct are present when there is interference in professional functioning that renders the intern unable and/or unwilling to acquire and integrate professional standards into his/her repertoire of professional behavior; unable to acquire professional knowledge and/or skills that reach an acceptable level of competency relative to internship training goals; or unable to control personal stress that leads to dysfunctional emotional reactions or behaviors that disrupt professional functioning. More specifically, problem behaviors are identified as problematic performance and/or problematic conduct when they include one or more of the following characteristics:

- The intern does not acknowledge, understand, or address the problem when it is identified.
- The problem is not merely a reflection of a knowledge or skill deficit that can be rectified by academic or didactic training in the typical course of supervision.
- The quality of services delivered by the intern is significantly negatively affected.
- The problem is not restricted to one area of professional functioning.
- A disproportionate amount of attention by training personnel is required.
- The intern's behavior does not change as a function of feedback, remediation efforts, and/or time.

### **Intern Complaints or Grievance Process**

We believe that most problems are best resolved through face-to-face interaction between intern and supervisor, as part of the on-going working relationship. Supervisory staff and/ or interns are encouraged to seek informal redress of minor grievances or complaints directly with the other party. Interns are encouraged to first discuss any problems or concerns with their direct supervisor. In turn, supervisors are expected to be receptive to complaints, attempt to develop a solution with the intern, and to seek appropriate consultation. If intern discussions do not produce a satisfactory resolution of the concern, or if the intern is uncomfortable in directly addressing the issue with the supervisor, a number of additional steps are available and are described below.

#### **1. Informal mediation**

Either party may request the Training Director or another psychologist to act as a mediator, or to help in selecting a mediator who is agreeable to both the intern and the supervisor. Such mediation may facilitate a satisfactory resolution through continued discussion. Alternatively, mediation may result in recommended changes to the learning environment, or a recommendation that the intern change his/her schedule or clinical responsibilities in order to maximize their learning experience. Interns may also request a change in assignment, following the procedures described in a previous section. Changes in assignments must be reviewed and approved by the Training Committee.

## **2. Formal grievances**

In the event that informal avenues of resolution are not successful, or in the event of a serious grievance, the intern may initiate a formal grievance process by sending a written request for intervention to the Training Director.

- a. The Training Director will take the written grievance and call a meeting of the Training Committee to review the complaint. The intern and supervisor will be notified of the date that such a review is occurring, and given an opportunity to provide the Committee with any information regarding the grievance. The Director of Clinical Training at the intern's graduate school will be informed in writing of the grievance and kept apprised of the review process.
- b. Based upon a review of the grievance, and any relevant information, the Training Committee will determine the course of action that best promotes the intern's training experience. This may include recommended changes within the placement itself, a change in supervisory assignment, or a change in clinical assignments .
- c. The intern will be informed in writing of the Training Committee's decision, and asked to indicate whether they accept or dispute the decision. If the intern accepts the decision, the recommendations will be implemented and the intern's graduate program will be informed of the grievance outcome. If the intern disagrees with the decision, they may appeal to the Training Director, who will be familiar with the facts of the grievance review. The Training Director will render the appeal decision, which will be communicated to all involved parties, and to the Training Committee. The intern's graduate program will be informed of the appeal and appeal decision.
- d. In the event that the grievance involves any member of the Training Committee (including the Training Director), that member will recuse from discussions by the Training Committee that address the grievance issues. A grievance regarding the Training Director may be submitted to another psychologist on the training committee for review and resolution.
- e. Any findings resulting from a review of an intern grievance that involve unethical, inappropriate or unlawful staff behavior will be submitted to the Training Director for appropriate personnel action.
- f. All documents related to a formal grievance will be maintained in a separate, locked file cabinet in the Training Director's office.
- g. These procedures are not intended to prevent an intern from pursuing a grievance under any other mechanisms available to RHRH employees, or under the mechanisms of any relevant professional organization, including APA or APPIC. Interns are also advised that they may pursue any complaint regarding unethical or unlawful conduct on the part of psychologists by contacting the Texas State Board of Examiners of Psychology.

## **Probation, remediation strategies, and termination procedures**

### **1. Insufficient knowledge and/or competence**

The internship program aims to develop professional competence. Rarely, an intern is identified as lacking the competence for eventual independent practice due to a serious deficit in skill or knowledge, or due to problematic behaviors that significantly impact their professional functioning. In such cases, the internship program will help interns identify these areas, and provide remedial experiences or recommended resources, in an effort to improve the intern's performance to a satisfactory degree. Very rarely, the problem identified may be of sufficient seriousness that the intern would not get credit for the internship unless that problem was remedied.

Should this ever be a concern, the problem must be brought to the attention of the Training Director at the earliest opportunity, so as to allow the maximum time for remedial efforts. The Training Director will inform the intern of the concern and call a meeting of the Training Committee. The intern and involved supervisory staff will be invited to attend and encouraged to provide any information relevant to the concern. The Director of Clinical Training of the intern's graduate program will be notified in writing of the concern and consulted regarding his/her input about the problem and its remediation.

- a. An intern identified as having a serious deficit or problem will be placed on probationary status by the Training Committee, should the Training Committee determine that the deficit or problem is serious enough that it could prevent the intern from fulfilling the expected learning outcomes, and thereby, not receive credit for the internship.
- b. The Training Committee may require the intern to take a particular rotation, or may issue guidelines for the type of rotation the intern should choose, in order to remedy such a deficit.
- c. The intern, the intern's supervisor, the Training Director, and the Training Committee will produce a learning contract specifying the kinds of knowledge, skills and/or behavior that are necessary for the intern to develop in order to remedy the identified problem within a specified timeframe.
- d. Once an intern has been placed on probation, and a learning contract has been written and adopted, the intern may move to a new assignment if there is consensus that a new assignment will assist the intern's remediation. The new duties will be carefully chosen by the Training Committee and the intern to provide a setting that is conducive to working on the identified problems. Alternatively, the intern and supervisor may agree that it would be to the intern's benefit to remain in the current work assignment. If so, both may petition the Training Committee to maintain the current assignment.
- e. The intern and the supervisor will report to the Training Committee on a regular basis, as specified in the contract regarding the intern's progress.
- f. The Director of Clinical Training of the intern's graduate program will be notified of the intern's probationary status and will receive a copy of the learning contract. It is expected that the Internship Training Director will provide updated reports of the intern's progress to the program. All contacts with the program will be placed in the intern's file. The intern may request that a representative of the graduate program be invited to attend and participate as a non-voting

member in any meetings of the Training Committee that involve discussion of the intern and his/her status in the internship.

- g. The intern may be removed from probationary status by a vote of the Training Committee when the intern's progress in resolving the problem(s) specified in the contract is sufficient. Removal from probationary status indicates that the intern's performance is at the appropriate level to receive credit for the internship.
- h. If the intern is not making progress, or, if it becomes apparent that it will not be possible for the intern to receive credit for the internship, the Training Committee will so inform the intern and their Director of Clinical Training at the earliest opportunity.
- i. The decision for credit or no credit for an intern on probation is made by a majority vote of the Training Committee. The Training Committee vote will be based on all available data, with particular attention to the intern's fulfillment of the learning contract.
- j. An intern may appeal the Training Committee's decision to the Director of the Psychology Service. The Service Chief will render the appeal decision, which will be communicated to all involved parties, to the Training Committee, and to the DCT of the graduate program.

### **Procedures for Appeal by an Intern**

Interns who receive a Performance Notice or Probation Notice, or who otherwise wish to contest any actions or decisions regarding their status in the program, are entitled to challenge these actions and decisions by initiating a grievance procedure. Within 5 working days of receipt of the decision, the intern must inform the Training Director in writing that she or he is challenging the decision. The intern then has 5 additional working days to provide the Training Director with information as to why the intern believes the action is unwarranted. Failure to submit a written challenge within 10 days will be taken as assent to the supervisory actions and decisions. Once a written challenge is received, the following steps will occur:

1. The Training Director will convene a Review Panel consisting of the Training Director, and two additional psychologists.
2. In the event that the Training Director is the intern's supervisor, the problem should be brought directly to the attention of the secondary supervisor who will serve in the Training Director's role of guiding the appeal process further outlined below.
3. A review hearing will be conducted, chaired by the Training Director, in which evidence is heard from the supervisor. The intern retains the right to be present at the hearing, to hear all facts, and to dispute or explain his or her behavior.
4. Within 15 days of the completion of the review hearing, the Review Panel files a written report, including any recommendations for further action. Decisions

made by the Review Panel will be made by majority vote. The intern is informed of the recommendations by the Training Director and through receipt of a copy of the panel report.

5. If the Review Panel finds in favor of the intern, no further action against the intern is taken. The Training Director will consult with the supervisor concerning the decision.
6. If the Review Panel finds in favor of the supervisor, the original supervisory action is implemented.
7. The Review Panel may, at its discretion, find neither in favor of the supervisor nor the intern. It may instead modify the original supervisory action or issue and implement its own action. In this instance, the Training Director will consult with both the supervisor and the intern concerning the decision.
8. The training program will abide by the decision of the appeal process.

## **2. Illegal or unethical behavior**

At no time will illegal or unethical conduct be tolerated. Illegal or unethical conduct by an intern should be brought to the attention of the Training Director in writing. Any person who observes such behavior has the responsibility to report the incident.

- The Training Director, the supervisor, and the intern may address infractions of a minor nature. A written record of the complaint and appropriate action become a permanent part of the intern's file.
- Any significant infraction or repeated minor infractions must be documented in writing and submitted to the Training Director, who will notify the intern of the complaint. Per the procedures described above, the Training Director will call a meeting the supervisor and intern. All involved parties will be encouraged to submit any relevant information that bears on the issue, and invited to attend the meeting(s).
- In the case of illegal or unethical behavior in the performance of patient care duties, the Training Director may seek advisement from appropriate resources, including legal counsel.
- Following a careful review of the case, the Training Committee may recommend either probation or dismissal from the internship program. Recommendation of a probationary period or termination shall include the notice, hearing and appeal procedures described in the above section pertaining to insufficient competence. A violation of the probationary contract would necessitate the termination of the intern's appointment at Real Hope Real Help.

**Review and revision of the Training Manual** The Training Manual is reviewed and edited by the Training Director prior to the arrival of the incoming intern class. Current Interns and Supervisors are invited to recommend changes or revisions. Any revisions made at this time, or earlier during the year, are to be incorporated into the body of the manual in order to accurately reflect program policy. The revised manual is to be distributed to all Supervisors and incoming interns.

## ATTESTATION

I, \_\_\_\_\_ affirm that I have read all of the contents of the Real Hope Real Help Internship Training Manual, including the pertinent Policies and Procedures, and I agree to abide by the policies and procedures described herein.

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Intern Signature/Date

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Training Director Signature/Date