



INNOVATION

Behavioral Health Solutions, LLC

The Offices of Dr. Sandra Leon-Villa, Ph.D.

Innovation Behavior Health Solutions

Psychology Internship Training Program Manual

2022-2023

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ACCREDITATION/MEMBERSHIP STATUS

Innovation Behavior Health Solutions' (IBHS) LLC Doctoral Health Service Psychology Internship program is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC).

INTRODUCTION

IBHS, LLC has been providing services to Clark County since 2008 and we take pride in our services and training tailored to the patient and/or family's needs, values, culture, and strengths. IBHS, LLC uses psychological measures considered Gold Standard in the psychological community using the latest technology.

MISSION STATEMENT

Our Mission at IBHS LLC is to create access to mental healthcare through equity, which means ensuring everyone has equal access to well-being regardless of socioeconomic status or other barriers. In order to do so, we strive to eliminate mental health stigma through community outreach, specifically to Black Indigenous, People of Color (BIPOC) communities, providing psychoeducation, and ensuring diversity and inclusion not only in the community we serve, but also in our team of clinical and administrative staff.

TRAINING PHILOSOPHY

IBHS is dedicated to educating and training upcoming practitioners in psychology. The IBHS internship training approach is based on the practitioner-scholar model, which places emphasis on evidenced-based and scholarly informed practice. Interns at IBHS, LLC will focus largely on assessment (i.e., approximately 75% of clinical work will be focused on assessment). While there are opportunities for individual, group, family, and couple's therapy, we understand that there is a need for more BIPOC testing psychologists and those able to conduct bilingual assessment. Currently, only 5% and 4% of all psychologists are Latinx or Black, respectively (Lin, Stamm, Christidis, 2018). Of the 5% of Latinx psychologists, only 5.5% of these can provide bilingual services (Smith, 2018)). This results in the misdiagnosis and over pathologizing of BIPOC populations due to lack of culturally responsive and trauma informed assessment, in addition to implicit bias and the historical criminalization of mental health among BIPOC populations.

Profession-Wide Competencies:

Internship training focuses primarily on meeting the profession wide competencies laid out by the APA Standards of Accreditation (SoA). Competencies cover the intern performance in the following areas: direct patient services, ethical practice, utilization of research, interpersonal and professional presentation, provision and receipt of supervision, and interprofessional functioning within a wide population and a variety of clinical presentations. At the outset of clinical rotations, interns and supervisors meet to discuss and develop objectives for training based on individualized needs and interests, in relation to the SoA competencies. The nine specific competencies consist of:

- Research
- Ethical and legal standards
- Individual and cultural diversity
- Professional values, attitudes, and behaviors

- Communication and interpersonal skills
- Assessment
- Intervention
- Supervision
- Consultation and interprofessional/interdisciplinary skills

More information regarding the APA's Implementing Regulations relating to the Standards of Accreditation can be found at: (<http://www.apa.org/ed/accreditation/section-c-soa.pdf>).

IBHS Training Goals and Objectives

In addition to the foundation of clinical proficiency structured by the SoA, an important part of internship training involves program or organization specific competencies, which includes goals of leadership and organizational navigation, and patient advocacy and empowerment. Our training program has identified the following goals and objectives to be achieved over the course of the internship:

Goals	Objectives
1- Competence in culturally responsive and trauma informed methods of assessment and diagnosis.	<ul style="list-style-type: none"> • Apply knowledge of clinical interviewing and assessment methods. • Gain skills integrating data from a variety of sources to conceptualize diagnoses. • Consider environmental contributions to observed symptoms in the context of differential diagnoses.
2- Develop competence with culturally responsive and trauma informed therapeutic interventions.	<ul style="list-style-type: none"> • Develop evidence-based treatment goals. • Successfully implement interventions. • Acquire skills monitoring progress. • Learn to recognize when adjustments are needed.
3- Cultural responsiveness and understanding of diversity, equity, and systemic oppression and racism which impact mental health.	<ul style="list-style-type: none"> • Develop sensitivity to BIPOC client populations • Recognize cultural differences which may be impacting observed or reported behaviors. • Enhance the ability to modify/apply appropriate assessments and treatments with BIPOC populations.
4- Achieve competence in understanding the client's needs and perspective from a trauma informed and culturally responsive perspective.	<ul style="list-style-type: none"> • Facilitate skills of adjusting approaches to needs and perspectives. • Develop the ability to discuss diagnoses and treatments with the clients and their families.

5- Implement Ethical practices and culturally responsive ethical decision making.	<ul style="list-style-type: none"> • Learn to identify ethical challenges. • Conduct him/herself according to APA ethical guidelines. • Apply ethical principles to practice.
6- Participate as a member of a multidisciplinary team.	<ul style="list-style-type: none"> • Enhance consultation skills with other professionals. • Improve ability for accurate and comprehensive documentation of services and approaches.
7- Apply evidence-based knowledge to practice.	<ul style="list-style-type: none"> • Enhance intern’s ability to evaluate the research literature relating to evidence-based practice. • Support intern’s ability to apply evidence-based knowledge to clinical practice.
8- Learn models of supervision, roles and responsibilities.	<ul style="list-style-type: none"> • Increase intern’s knowledge of the principles of behavioral assessment and treatment. • Develop intern’s skills in applying behavioral treatments. • Develop intern’s skills in methods of documenting, evaluating and interpreting behavioral data.

IBHS PSYCHOLOGY INTERNSHIP PROGRAM STRUCTURE

Currently, IBHS has two (2) open positions for a 12-month (2000 hour) internship. The goal of internship is to produce ethical clinicians who are committed to providing anti-racist and culturally responsive services through quality assessment that integrates evidence-based, as well as decolonial, and trauma-informed interventions for the assessment and treatment of BIPOC populations. In order to meet APPIC membership criteria stating, “At least 25% of trainees' time is in face-to-face psychological services to patients/clients,” Psychology Interns are expected to engage in a minimum of 10 hours per week of face-to-face psychological services contact with patients. A total of 2000 hours completed during twelve consecutive months is required to complete the internship.

Training Experiences

Interns receive extensive training in a number of areas of psychological assessment: Cognitive, personality, neuropsychological, behavioral, violence risk, and suicide risk assessment. Interns are taught critical thinking and case conceptualization methods to assess clinical situations. Interns are expected to use empirically validated treatment methods and are trained to understand, interpret, and apply empirically based, culturally responsive assessment and treatment interventions.

Weekly Training Hours

Interns are required to work 40 hours per week (Monday-Friday). Weekly hours will be allotted as follows:

- 20-24 hours Clinical (*assessments, case conceptualization, assessment scoring, report writing, therapy, clinical interviews, group work*)
- 6-10 hours Administration and Research (treatment plans, patient case file, discharge notes, referrals, follow up, research, program development)

- 4 hours Supervision (2 hrs. individual, 2 hrs. group)
- 2 hours of Didactic Training

Assessment Training Experiences

Specialized training will focus on trauma informed, bilingual, and culturally responsive neuropsychological assessment and evidenced based treatment, with a focus on liberation psychology and decolonizing mental health practices. Interns will learn to develop culturally responsive interviewing and diagnostic skills, as well as testing batteries to assess for various neurodevelopmental and neuropsychological conditions. Interns will additionally be exposed to a wide range of assessments including immigration, presurgical, international adoption, vocational rehabilitation, disability, psychoeducational, and court ordered evaluations.

Full Year Training Rotation

Outpatient Psychotherapy

Throughout the entire training year, interns are expected to carry eight outpatient therapy cases (i.e., 4 cases two days per week) provided in-office or via telehealth. Interns receive training in Trauma Focused Cognitive Behavioral Therapy (TF-CBT), Brain Spotting, and there are opportunities for Eye Movement Desensitization and Reprocessing Therapy (EMDR). Interns are supervised in the practice of therapeutic interventions, including the implementation of Liberation Psychology & psychodynamic approaches, trauma informed assessment, treatment (e.g., TF-CBT, Brain Spotting, & EMDR upon training), and evidence-based practices, as well as culturally responsive interventions. There may additionally be opportunities for group therapy although the main focus of outpatient psychotherapy will include individual, family and couples' psychotherapy interventions. There is a focus on decolonial approaches to psychological interventions which are overseen by both primary and secondary supervisors. Interns have the flexibility to select cases based on clinical interests. However, interns are encouraged to take on a diverse caseload in order to maximize training and clinical experience. Cases typical of this site include first generation BIPOC issues, BIPOC mental health, depression, anxiety, trauma, and working with neurodivergent populations. Interns may also work with foster care involved youth and families and receive training on mandated reporting, child abuse, and neglect.

Semester Rotations

Psychological & Assessment

During their first semester, interns spend two days weekly conducting psychological assessments. Interns begin their first semester conducting brief assessments (i.e., 1–3-hour evaluations). Testing cases include the evaluation of foster youth, disability evaluations, immigration evaluations, and court ordered and/or contracted brief psychological assessments. Interns are responsible for conducting the initial diagnostic clinical interview, develop testing batteries, administer psychological tests, score, interpret scores through case conceptualization, and complete a psychological assessment report. Interns will also provide meaningful recommendations and complete feedback sessions with families/individuals. Interns will present cases in supervision and develop skills to accurately interpret results through a culturally and trauma informed lens in order to minimize misdiagnosis and mental health disparities. During Semester II, interns have the opportunity to choose the assessments they would like to complete (e.g., only disability evaluations or only brief psychological assessments or a combination of assessments).

Neuropsychological Assessment

Interns will begin to develop testing batteries for neuropsychological assessment cases including neurodevelopmental assessments (i.e., autism, ADHD, TBI and other neurocognitive disorders). Interns will work on cases with children beginning at the age of 30 months to late adulthood. During the first semester, interns will receive training on neurodevelopmental conditions, trauma informed and culturally responsive neuropsychological assessment. They will additionally receive training on neurodevelopmental conditions including autism and ADHD in order to fully understand the assessment process (i.e., obtaining neurodevelopmental histories, appropriate assessment of children and adults on the spectrum, and differential diagnosis of trauma, ADHD, anxiety, and autism. Interns will complete a minimum of two (2) comprehensive evaluations during the first semester including conducting the initial diagnostic clinical interview, develop testing batteries, administer neuropsychological tests, score, interpret scores through case conceptualization, and complete a comprehensive neuropsychological assessment report. Interns are expected to complete a minimum of three (3) comprehensive neuropsychological assessments during Semester II.

Sample Rotation Weekly Schedule

- Outpatient Psychotherapy (8 patients per week): 12 months/2 days weekly
- Brief Psychological Assessment 2 Brief Assessments Testing Days Per week: 8-10 hours per week (including professional assessment services such as scoring, interpretation and report writing)
- Neuropsychological Assessment (minimum of 3 comprehensive assessments in Semester II): 1 per month = 16 hours per month

Didactics and Group Training Experiences

Through didactic training and supervised practice, the intern will increase his/her/their knowledge and proficiency in the application of general psychological principles and will have an opportunity to work with a culturally diverse population. All didactic seminars are facilitated by doctoral level psychologists, Dr. Sandra Leon-Villa, PhD and/or Dr. Claudia Mejia, PsyD and are provided in a wide range of topics emphasizing diversity, equity, and inclusion in each one. They cover the theories which guide treatment methodologies, provide strategies for active implementation, as well as facilitating differential diagnoses. Didactic training will be provided two (2) hours weekly (i.e., 8 hours monthly) and additionally include full day (6 hour) quarterly training.

Example didactic topics include:

Mandated Reporting

Child Abuse

Cultural Humility & Responsiveness

Culturally Responsive Ethical Decision Making

Decolonizing Mental Health

Neuropsychological Impact of Trauma

Developing a Culturally Responsive & Trauma Informed Assessment Approach

Developmental Milestones & Neurodevelopmental Disorders

Challenging Behaviors, Sensory Processing, and Underlying Causes

ADHD Assessment and Treatment

Autism in High Masking & the Female Phenotype

ADOS-2 Training

Autism

EMDR & Brain Spotting as Evidence Based Trauma Treatments

Enhancing the Therapeutic Process through Liberation Psychology Approaches

Mindfulness & Somatic Healing Practices

Culturally Responsive & Trauma Informed Neuropsychological Assessment

Advocacy, Social Justice Issues, and Mental Health

Trauma-Informed Therapy

Suicidal Prevention & Risk Assessment

Human Sexuality, Trauma Informed Approaches with the LGBTQ+ Community

Person-Centered Planning

Program Evaluation

Psychopharmacology

Speech and Language Disorders

Learning Disorders & Psychoeducational Assessment

The internship training program takes a multidisciplinary approach to treatment to provide evidence based and decolonial interventions using best practice methods.

Psychotherapy areas we specialize in include:

- Sexual Abuse and Assault
- Trauma, including intergenerational, community violence, poverty, and colonization trauma.
- First Generation Related Issues
- BIPOC Mental Health
- Depression
- Anxiety
- Grief/Loss
- EMDR (Eye Movement Desensitization and Reprocessing)

PROGRAM MATERIALS

Program materials are made available to students upon acceptance to the program via the company Google Drive and is provided immediately upon provided a HIPAA compliant email.

INDIVIDUAL SUPERVISION AND MENTORING

Each intern's primary supervisor is a licensed psychologist on IBHS staff. Interns will have two supervisors, a primary (Dr. Sandra Leon-Villa, PhD) and secondary supervisor (Dr. Claudia Mejia, PsyD). Primary supervisors assume ultimate responsibility for the clinical services provided by psychology interns. They assist interns in case conceptualization and in matching clinical services with patient needs, taking into account diagnoses, acuity, and evidence-based culturally responsive research/practices. Supervisors ensure that treatment adheres to appropriate IBHS practice guidelines, and they are responsible for electronic client record documentation and / or co-signing all client records.

TRAINING RESOURCES AND FACILITIES

Interns will be provided with access to all of the assessment materials, scoring materials, computers and forms needed to provide comprehensive clinical evaluations and related reports. Some measures can be implemented via iPads which are available for use when clinically indicated. Services are provided at Innovations Behavioral Health Services (IBHS).

EXPECTATIONS FOR SUCCESSFUL COMPLETION

Successful completion of IBHS internship would indicate satisfactory evaluations in the following areas:

- Interns develop skills in psychotherapy and evaluation that are empirically supported and culturally relevant to the client.
- Interns develop skills in generating case conceptualizations that reflect theoretical orientation, cultural and trauma-informed intervention strategies, and outcome evaluations.
- Interns develop an understanding of the roles and expertise the psychologists provide to BIPOC communities.
- Interns develop an awareness and knowledge of how one's own cultural diversity, beliefs, biases, and values influence the delivery of competent services.
- Interns acquire knowledge and skill to perform consultation services. Interns will demonstrate clinical decision-making and conduct consistent with the ethical and legal standards of professional psychology.

INTERN SELECTION CRITERIA

IBHS Psychology Intern Program follows the standard APPIC guidelines. This internship site agrees to abide by the APPIC policy that no person at the training facility will solicit, accept, or use any ranking-related information from any intern applicant.

Applicants should provide information, including graduate school transcript, curriculum vitae, a (redacted) psychological evaluation and three letters of recommendation via the AAPI. Acceptance to the program after the match is conditional upon successful completion of background and FBI fingerprint checks. Any criminal convictions may render a candidate unsuitable to work with children and adults with disabilities.

IBHS does not require proof of COVID-19 Vaccination. However, we conduct regular and ongoing health screenings for both patients and staff/interns.

Members of the Training Committee review all applications submitted. Preference is given to applications which show that the candidate possesses a strong interest in working with BIPOC individuals with Developmental Disabilities and Mental Health. Applications by candidates coming from Clinical, Counseling, School, Developmental, Neuropsychology and Health Psychology programs (Ph.D. and PsyD) may be accepted. Preference is given to applicants from APA and CPA accredited programs. Applicants from minority backgrounds or who are fluent in another language are strongly encouraged to apply.

Qualified applicants are contacted by email or phone for interviews. All applicants invited to interview are also invited to a virtual open house to meet the multidisciplinary staff and current trainees to learn more about the Internship Program. Interviews typically last between 60 and 75 minutes. During the interview, applicants are to respond to general questions related to their prior experience, training, assessment and therapy. In addition, applicants are asked to respond to a selection of questions after reviewing two vignettes. Following the interview process, applicants are rated based on their demonstration of clinical knowledge, experience, self-awareness, organization skills, professionalism and expressed interest in learning and mastering new skills.

Candidates must have completed all academic coursework and comprehensive examinations leading to a doctoral degree, from a degree granting program in professional psychology e.g., clinical, counseling, school, prior to the start of the internship. A minimum of 500 hours of supervised practicum experience in child or adult settings is a preliminary requirement. We prefer applicants who have completed at least ten integrated psychological, psychoeducational or neuropsychological reports.

Questions regarding the program or application procedure may be addressed to:

Dr. Sandra León-Villa, PhD

Dr.Leon-Villa@InnovationBHS.com

Dr. Claudia Mejía, PsyD

Dr.Mejia@InnovationBHS.com

Office: 702-900-2784

STIPEND & INTERN BENEFITS

We do, however, offer competitive benefits:

- 12-month full-time internship
- 50% of cost for Medical & Dental Benefits
- Paid Time Off (PTO; 1 hour accrued every 30 hours)
- 9 Paid Holidays + 2 floater/personal days
- Short Term Disability
- Life Insurance

- \$40,000/year stipend
- Quarterly Self-Care & Team Building Activities

POLICIES & PROCEDURES

IBHS Internship Program Policies and Procedures are appended to this Handbook (Appendices 1-7). The Agency's Policy and Procedure Manual is given to interns during orientation. Key policies and procedures are reviewed with interns. Policies and procedures are available for internship applicants upon request. To ensure the intern is well informed, all policies are reviewed, and any resulting questions of the intern are addressed at the initiation of their internship.

PERFORMANCE EVALUATION OF INTERNS

The format for all evaluations is provided at the outset of the training year, during orientation. Evaluations of psychology interns are ongoing throughout the training year. Brief, informal evaluations are completed by the intern's direct supervisor at the midpoint of each semester and a formal, structured evaluation is completed at the end of every completed rotation, and the close of each semester. The results of the written evaluation are shared with the intern's Director of Clinical Training (DCT). This is an important process of the internship to provide feedback, guidance and evaluations to interns to inform their practice.

- a. The evaluation will include written summary information of intern's performance in all major competence areas that are a focus of internship training.
- b. Interns have the opportunity to review their written evaluation with supervisors to ensure the fullest possible communication between supervisors and interns.
- c. Evaluation procedures provide written feedback that validates trainees' achievements by noting areas of unusual strength and excellence and facilitate trainees' further growth by identifying areas that would benefit from additional training.
- d. The program provides the DCT with a copy of interns' written evaluation concerning their progress in the Internship Program.

Appendix 1 Intern Selection and Academic Preparation Requirements Policy

Application Process

Innovation Behavior Health Solutions (IBHS) Psychology Doctoral Internship Program offers two (2) full-time internship positions. The number of available internship positions each year is a function of supervisor availability and postdoctoral interns accepted. Interns interested in applying for the IBHS Internship Program should submit an online application through the APPIC website (www.appic.org) using the APPIC Application for Psychology Internships (AAPI).

A complete application consists of the following materials:

1. A completed online AAPI
2. Cover letter (as part of AAPI)
3. A current Curriculum Vitae (as part of AAPI)
4. Three Standard Reference Forms, two of which must be from persons who have directly supervised your clinical work (as part of AAPI).
5. A sample de-identified Assessment Report
6. Official transcripts of all graduate coursework

All application materials must be received by November 1st in order to be considered.

Application Screening and Interview Processes

IBHS will base its selection process on the entire application package noted above; however, applicants who have met the following qualifications prior to beginning internship will be considered preferred:

1. A minimum of 500 intervention hours;
2. A minimum of 10 comprehensive assessments;
3. Bilingual and multicultural background;
4. Dissertation proposal defended;
5. Experience or interest working with individuals with intellectual/developmental disabilities;
6. Experience and interest in working with BIPOC populations across the lifespan;
7. Current enrollment and good standing in an APA- or CPA-accredited doctoral program.

All applications will be reviewed by IBHS's Training Committee using a standard Applicant Rating Scale and evaluated for potential goodness of fit with the IBHS. The Training Committee meets to determine which applicants to invite for interviews based upon the results of this review process. Applicants are notified whether they are invited to interview by email on or before December 15. Interviews are scheduled on a first come, first served basis and will occur in person or via Google Meets with representatives of the Training Committee. Interviews are conducted using a standard interview protocol, although members of

the Training Committee may ask additional interview questions of applicants, as they deem appropriate, based on the applicant's specific materials

Participation in the APPIC Match

The Training Committee holds a meeting within two working weeks of the completion of interviews to determine applicant rankings. The full application package and information gleaned from the interview process are utilized to determine applicant rankings. As a member of APPIC, IBHS participates in the national internship matching process by submitting its applicant rankings to the National Matching Service. IBHS abides by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

Questions regarding any part of the selection process or IBHS's academic preparation requirements may be directed to Dr. Sandra Leon-Villa, Training Director.

All interns who match to IBHS must provide proof of citizenship or legal residency and must successfully pass a fingerprint-based background check before beginning employment. Based on the requirements of IBHS's policies, the history of felonies or misdemeanors involving child abuse/neglect may prevent the intern from working at IBHS. This information is also covered in the internship Handbook which is available via link on IBHS website as well as in the APPIC Directory. It is available upon request from any applicant via email to the Training Director.

Appendix 2 Diversity and Non-Discrimination Policy

The IBHS Psychology Doctoral Internship Program, like all IBHS programs, actively supports diverse applicants. Diversity is respected and celebrated across IBHS. Interns and all staff function within a safe, anti-racist, neurodiversity affirming, learning environment which is inclusive and geared to enriching the field of psychology. It is IBHS' belief that ensuring a diverse environment promotes personal growth, strengthens the workplace and communities. Staff and interns are supported to feel comfortable and respected in a climate where success is achievable. Interns are supported to gain fluency and competency with a diverse population as this is a cornerstone of the programs and services IBHS provides.

IBHS is located in Las Vegas, which is rapidly becoming more diverse, with 53% of the city's population being BIPOC. Providing multilingual and multicultural services for underserved populations is a hallmark of IBHS programs, enabling IBHS to include competency in diversity. IBHS serves children and adults with intellectual/developmental disabilities, medical conditions and/or emotional needs. Since its inception, IBHS has always sought staff for recruitment who reflect the many cultures of the families served. Providing support to families by clinicians from their ethnic, racial and linguistic background has been documented to result in enhanced client comfort, better treatment compliance and fewer hospital readmissions.

As IBHS' clients are diverse, it is essential to facilitate a diverse training environment. This benefits interns from diverse backgrounds and ensures that they are supported throughout their training. IBHS believes that a diverse environment contributes to the overall quality of the training provided and enriches opportunity for all participants. Interns are expected to acquire the skills, perspective, knowledge and awareness needed to provide competent services to all who seek services. Competency is expected across linguistic and cultural parameters. Interns' acquisition of such competencies is evaluated both at the midpoint and in their summative assessments.

IBHS does not discriminate based on an applicant's race, color, religion, gender, sexual orientation, age or disabilities unless such factor represents a barrier to successfully treating our clients. Applicants are evaluated based on their experiences, the quality of their training and practicum and their perceived fit within the IBHS Internship Program

Appendix 3 Stipend, Benefits, and Resources Policy

The annual stipend for all interns at IBHS Psychology Doctoral Internship Program is \$40,000. As employees of IBHS, interns receive 50% of cost for medical & dental benefits, short term disability, life insurance, Paid Time Off (PTO; 1 hour accrued every 30 hours), and nine (9) paid holidays and two (2) floaters annually. Please note that medical insurance and other benefit costs vary by age and other factors used by insurance companies to determine rates. Questions regarding specific benefits packages can be directed to IBHS' training director. Interns should submit requests for time off to their primary supervisor at least two weeks in advance of the anticipated leave date, in particular during holiday periods, such as year-end, to ensure coverage of patients on their caseload. Interns are responsible for communicating anticipated absences to all supervisors for whom work will be missed. Sick leave must be communicated to the intern's primary supervisor as soon as the intern is physically able to do so. Supervisors are available for any questions related to time off or release time. In the event an intern experiences a personal or family emergency which renders them unable to complete their internship on schedule, IBHS will use its best efforts to extend such internship and training to afford the intern the opportunity to complete their internship. Please note that these circumstances are managed on an individual basis with HR.

IBHS has access to numerous resources. All interns are provided with individual desk space, access to a computer (not for personal use), office phone, voicemail, wi-fi, printers, scanner, software, and basic office supplies. Therapeutic toys, intervention manuals, assessment materials, other training materials and access to the DSM 5 and ICD-10 are provided by IBHS. Additional materials that may be needed may be requested. However, additional purchases require supervisory and or Training Committee approval and should be deemed beneficial to the program as a whole. Each intern additionally has access to administrative and IT support and receives training and support on the program's EHR, as well as client and scheduling support. Interns are expected to be on site at all times when providing direct clinical services (i.e., including telehealth appointments). Interns should additionally be on site when completing administrative tasks, research, and program development unless otherwise approved by the primary supervisor.

Appendix 4 Evaluation, Retention, and Termination Policy

All interns are expected to complete 2,000 hours of training during their internship year. It is essential for interns to meet the hour requirement and obtain sufficient ratings on all evaluations (i.e., a 4 or higher on every rating element) in order to demonstrate that they have progressed satisfactorily through and completed the IBHS Internship Program. Intern evaluations, certificates of completion and a copy of the program handbook are maintained by the Training Director in a secure digital file, indefinitely. Intern evaluations and any other relevant feedback is provided to the intern and to their Director of Clinical Training (DCT) at a minimum of twice annually, once at the midpoint and at the end of the internship year. Doctoral programs are contacted within one month following the end of the internship year and informed that the intern has successfully completed the program.

Interns are required to demonstrate minimum levels of achievement across all competencies and training elements. Interns are formally evaluated by their supervisors twice annually, at the midpoint and at the end of the internship year. Evaluations are conducted using a standard rating form, which includes specific written feedback regarding the interns' performance and progress. The evaluation form includes information about the interns' performance regarding all of their expected training competencies and the related training elements. The Training Director along with the supervisors are expected to review these evaluations with the interns and provide an opportunity for discussion at each time point.

At the midpoint, a minimum level of achievement on each evaluation is defined as an average rating of 4 for each competency, with no element rated less than a 3. Successful completion of the internship year is contingent upon achievement of a minimum competency of 4, with no element rated less than a 4. The rating scale for each evaluation is a 5-point scale, with the following rating values: *1 = Remedial, 2 = Beginning/Developing Competence, 3 = Intermediate Competence, 4 = Proficient Competence, 5 = Advanced Competence*. If an intern receives a score less than 3 on any training element at the mid-year evaluation, or if supervisors have reason to be concerned about the student's performance or progress, the program's Due Process procedures will be initiated.

If an intern enters into the formal review step of the Due Process procedures due to concern by a supervisor or Training Committee member, or an inadequate rating on an evaluation during their internship year, their DCT will be notified. If successful completion of the program comes into question at any point during the internship year the DCT will be contacted. This ensures that their doctoral program DCT, who has a vested interest in the intern's progress, is kept engaged and collaborates with IBHS to support an intern who may be experiencing difficulties during the internship year. Additionally, the DCT is notified of any further action that may be taken as a result of the Due Process procedures, up to and including termination from the program.

In addition to the evaluations described above, interns complete a written evaluation of their supervisor and a written program evaluation at the midpoint and at the end of the training year. Feedback from these evaluations is used to inform changes or improvements to the training program.

Appendix 5 Due Process and Grievance Procedures Policy

This document includes an overview of the identification and management of Doctoral Health Service Psychology Intern problems and concerns, a listing of possible outcomes, an explicit discussion of the due process procedures, and important considerations in the remediation of problems. While concerns and problems that may arise in the Doctoral Health Service Psychology Internship training program are a normal part of the training process, we encourage supervisors and Doctoral Health Service Psychology Interns to discuss and resolve problems and/or conflicts informally, however if this cannot occur, this document provides a formal process for Innovation Behavioral Health Solution's (IBHS) to respond to issues of concern. The IBHS Doctoral Health Service Psychology Internship training program will also provide all Doctoral Health Service Psychology Interns with information relevant to professional standards, legal and ethical regulations and guidelines, and offer opportunities to discuss the implementation of these standards.

Due Process: Definition and General Guidelines

Due process is to inform and to provide a framework to respond, act or dispute. Due process ensures that decisions about Doctoral Health Service Psychology Interns are not arbitrary or personally based. Specific evaluative procedures apply to all Doctoral Health Service Psychology Interns, and appeal procedures are available for Doctoral Health Service Psychology Interns who wish to appeal the program's actions. All steps need to be appropriately documented and implemented.

General guidelines are as follows:

1. During the orientation period, Doctoral Health Service Psychology Interns will receive the training program's expectations related to professional functioning in writing and is discussed in group settings and with individual supervisors.
2. The procedures for evaluation, including when and how evaluations will be conducted will be described to the Doctoral Health Service Psychology Interns. Evaluation is a mutual process (with Doctoral Health Service Psychology Intern evaluating supervisor and supervisor evaluating Doctoral Health Service Psychology Intern) and meant to be a learning experience for both parties.
3. Problematic behavior or concerns are clearly defined in writing (email correspondence) and opportunities for discussion and clarification are provided if necessary.
4. Doctoral Health Service Psychology Interns are informed of due process procedures and written policies for appealing actions of the program.
5. The training program will institute a remediation plan for identified inadequacies, including a time frame for expected remediation. Consequences of not rectifying the inadequacies will be clearly stated in writing via email. Interns who successfully remediate performance issues will receive an email within the time frame for expected remediation.
6. The training program ensures that Doctoral Health Service Psychology Interns have sufficient time to respond to any action taken by the training program.
7. The training program considers multiple professional sources when making decisions or recommendations regarding a Doctoral Health Service Psychology Intern's inadequate performance.

8. The training program documents the action taken by the program and its rationale and provides this documentation to all relevant parties (email correspondence).

Definition of Problematic Behavior

During the course of the internship, situations may arise in which the intern's level of performance, clinical competence, attitude, and willingness to perform duties or inability to control personal reactions may interfere with the intern's professional functioning and/or negatively impacts patients to a degree that rises to a level of a problem in the opinion of the intern's supervisor. Such behaviors may include but are not limited to:

- Failure to follow through on supervisor's recommendation(s) as identified in supervision
- A skill deficit (i.e., lack of competence directly impacting service delivery) that cannot be improved by intervention through supervision
- A rating below that which is expected for the time of year, as specified on the evaluation form which indicates a passing rating.
- Behavior(s) which require an inordinate amount of attention from the supervisory staff
- Behavior(s) that negatively impacts patient care
- Behavior(s) that negatively affects the intern's ability to function on a team
- Behavior(s) that violates agency standards

Procedures for Responding to Inadequate Performance by an Intern

If an intern receives a "remedial" (a rating of 1 – below expected competency) from any of their supervisors on the intern evaluation, or if a staff member has concerns about an intern's behavior (ethical or legal violations or professional incompetence) the following procedures will be initiated:

1. The staff member will consult with the DCT to determine how to proceed (for example, provide feedback and discuss with intern in supervision or write a remediation plan) and continue to assess behavior in question for improvement.
2. If the staff member who brings the concern to the DCT is not the intern's primary supervisor, the DCT and/or person with the concerns will discuss their concern with the intern's primary supervisor to determine how to proceed.
3. If the DCT and primary supervisor determine that the alleged behavior in the complaint, if proven, would constitute a serious ethical, legal, or clinical violation, the DCT will inform the staff member who initially brought the complaint of the violation.
4. The DCT will meet with the Training Committee to discuss the performance rating or the behavior concern and possible courses of action to be taken to address the issues.
5. The DCT, Training Committee, and primary supervisor may meet to discuss possible course of actions.

6. Whenever a decision has been made by the DCT about an intern's status at IBHS, the DCT will inform the intern in writing and will meet with the intern to review the decision. This meeting may include the primary supervisor.

7. The intern may choose to accept the conditions or may choose to appeal the action (Grievance Procedures).

8. The DCT or primary supervisor may consult with the intern's Director of Clinical Training from their doctoral program at any time.

Guidelines for Addressing Problematic Behaviors

It is important to have meaningful ways to address problematic behavior once it has been identified. In implementing remediation or sanction interventions, the training staff must be mindful and balance the needs of the intern, the clients involved, other interns, the training staff, and other IBHS staff. The following is a list of remediation and sanction alternatives to be considered in addressing problematic behaviors. One or more of any of the following actions may be taken, depending on the situation. The Doctoral Psychology Intern's Director of Clinical Training (DCT) from their doctoral program may be contacted at any time.

1. Verbal warning to the Doctoral Psychology Intern by the primary supervisor or DCT emphasizes the need to improve the rating or discontinue the behavior under discussion. No record of this action is kept.

2. Written acknowledgment to the intern formally acknowledges:

- a) that the DCT is aware of and concerned with the performance rating or behavior concern,
- b) that the concern has been brought to the attention of the intern,
- c) that the DCT will work with the intern to rectify the problem or skill deficits and
- d) that the behaviors associated with the rating(s) are not significant enough to warrant more serious action at the present time.

3. Written warning to the intern indicates the need to immediately work on improving the behavior resulting in the poor rating or to discontinue the concerning/problematic behavior. This letter will contain:

- a) a description of intern's unsatisfactory performance;
- b) actions needed by the intern to correct the unsatisfactory behavior;
- c) the timeline for correcting the problem;
- d) what action will be taken if the problem is not corrected; and
- e) notification that the intern has the right to request a review of this action.

A copy of this letter will be kept in the Doctoral Psychology Intern's file. Documentation should contain the position statements of the parties involved in the dispute.

4. Schedule modification is a time-limited, remediation-oriented, closely supervised period of training designed to return the Doctoral Psychology Intern to a more fully functioning state. Modifying a Doctoral Psychology Intern's schedule is an accommodation made to assist the intern in responding to personal reactions to environmental stress, with the full expectation that the Doctoral Psychology Intern will complete the Doctoral Psychology Internship. This period will include more closely scrutinized supervision

conducted by the primary supervisor in consultation with the DCT. Several possible and perhaps concurrent courses of action may be included in modifying a schedule. These include:

- a) increasing the amount of supervision, either with the same or other supervisors;
- b) change in the format, emphasis, and/or focus of supervision;
- c) recommending personal therapy and providing community referrals
- d) reducing the intern's clinical or other workload;
- e) requiring specific academic course work.

The DCT and the Training Committee will determine the length of a schedule modification period. The termination of the schedule modification period will be determined, after discussions with the Doctoral Psychology Intern, by the DCT in consultation with the primary supervisor.

5. Probation is also a time limited, remediation-oriented, more closely supervised training period. Its purpose is assessing the ability of the intern to complete the Doctoral Psychology Internship and to return the intern to a more fully functioning state. Probation defines a relationship that the DCT systematically monitors for a specific length of time the degree to which the intern addresses, changes and/or otherwise improves the behavior, possibly associated with the inadequate rating. The Doctoral Psychology Intern is informed of the probation in a written statement that includes:

- a) the specific behaviors associated with the unacceptable rating;
- b) the recommendations for rectifying the problem;
- c) the time frame for the probation during which the problem is expected to be improved, and
- d) the procedures to determine whether the problem has been appropriately rectified.

If the DCT determines that there has not been sufficient improvement in the Doctoral Psychology Intern's behavior to remove the probation or modified schedule, then the DCT will discuss with the primary supervisor and the Training Committee possible courses of action to be taken. The DCT will communicate in writing to the Doctoral Psychology Intern if the conditions for revoking the probation or modified schedule have not been met. This notice will include the course of action the DCT has decided to implement. These may include continuation of the remediation efforts for a specified time period, implementation of another alternative, or dismissal from the internship. The DCT may discuss with the IBHS Director if it appears that the Doctoral Psychology Intern will not successfully complete the Doctoral Psychology Internship.

6. Suspension of direct service activities requires a determination that the welfare of the Doctoral Psychology Intern's clients has been jeopardized. Therefore, direct service activities will be suspended for a specified period as determined by the DCT in consultation with the Training Committee. At the end of the suspension period, the Doctoral Psychology Intern's primary supervisor, in consultation with the DCT, will assess the Doctoral Psychology Intern's capacity for effective functioning and determine if and when direct service can be resumed.

7. Administrative leave involves the temporary withdrawal of all responsibilities and privileges at IBHS. If the probation period, suspension of direct service activities, or administrative leave interferes with the successful completion of the training hours needed for completion of the Doctoral Psychology Internship, this will be noted in the Doctoral Psychology Intern's file. The DCT, in consultation with Human Resources,

will inform the Doctoral Psychology Intern of the effects the administrative leave will have on the Doctoral Psychology Intern's stipend and benefits.

8. Dismissal from the Doctoral Health Service Psychology Internship involves the permanent withdrawal of IBHS responsibilities and privileges. When specific interventions do not, after a reasonable time period, rectify the problematic behavior or concerns and the intern seems unable or unwilling to alter her/his behavior, the DCT will consult with the Director about the possibility of termination from the training program. **IBHS has the right to invoke either administrative leave or dismissal:**

- a) in cases of severe violations of the APA code of ethics
- b) when imminent physical or psychological harm to a client is a major factor
- c) major disruption to other people in the training program or IBHS staff
- d) even with reasonable accommodations, the intern is unable to carry out the internship job responsibilities due to physical, mental or emotional illness
- e) the Doctoral Health Service Psychology Intern does not meet minimum competency requirements and is not making adequate progress

Grievance Procedures

There are two situations in which grievance procedures can be initiated.

1. A Doctoral Health Service Psychology Intern can appeal an evaluation report of their supervisor or a complaint from another party or actions recommended by the DCT or Training Committee. They can elect to attempt to resolve this informally or formally. Both sets of procedures are outlined below.
2. A Doctoral Health Service Psychology Intern may have a complaint against a IBHS staff member.

These situations are described below.

Informal Doctoral Health Service Psychology Intern appeal:

If a Doctoral Health Service Psychology Intern is dissatisfied with a supervisor's evaluation report or disagrees with a complaint from another party, they may request a special meeting with the DCT and/or Training Committee. The review meeting will include the DCT and any staff involved in the dispute. The Doctoral Health Service Psychology Intern may invite up to two other staff members to assist, or to present additional information. Following this special review meeting, a recommendation will be forwarded to the DCT and the Training Committee for further action. Possible actions include but are not limited to:

- a) acceptance or modification of the supervisor's evaluation,
- b) specific changes in the remediation plan,
- c) no modification or change based on the information presented,
- d) change of supervisor, and/or
- e) addition of another supervisor.

If the Doctoral Health Service Psychology Intern remains dissatisfied, they can institute a formal appeal or ask for the Review Panel procedures (outlined below) to be instituted.

Formal Doctoral Health Service Psychology Intern appeal:

If the Doctoral Health Service Psychology Intern wishes to formally appeal any action taken by their supervisor or DCT, the Doctoral Health Service Psychology Intern must, within five (5) workdays of receipt of the DCT's decision, inform the DCT, in writing, of such an appeal. When an appeal is made, the Doctoral Health Service Psychology Intern must provide the DCT information supporting the Doctoral Health Service Psychology Intern's position or concern. Within three (3) workdays of receipt of this notification, the DCT will consult with the Director and will implement Review Panel procedures as described below.

When a Doctoral Health Service Psychology Intern has a complaint against a IBHS staff member:

The IBHS training program recognizes that unanticipated problems may occasionally arise among Doctoral Health Service Psychology Interns and other IBHS staff. The problem-solving procedures outlined below are intended to address these problems.

- 1) A Doctoral Health Service Psychology Intern who has a specific complaint and is willing to speak to a staff member about the complaint is encouraged to first address the complaint to the appropriate target (presumably another staff person).
- 2) If the Doctoral Health Service Psychology Intern makes an attempt to address the issue directly but is unable to resolve the issue, they will work with the primary supervisor or DCT to come up with a solution to the problem.
- 3) If no solution is identified, or if the identified solution is unsuccessful, the primary supervisor or DCT then informs the target of the complaint that this unresolved matter is being referred to the Director. If the situation is still not resolved to the satisfaction of the Doctoral Health Service Psychology Intern they can call for the Review Panel procedures (outlined below) to be instituted.

Review Panel and Process

1. When needed, the Director of IBHS will convene a Review Panel. The panel will consist of three staff members selected by the Director with recommendations from the DCT and the Doctoral Health Service Psychology Intern involved in the dispute. The Doctoral Health Service Psychology Intern has the right to hear all facts with the opportunity to dispute or explain the behavior of concern.
2. Within five (5) workdays, a hearing will be conducted in which the appeal is heard, and relevant material presented. Within three (3) workdays of the completion of the review, the Review Panel submits a written report to the Director, including any recommendations for further action. Recommendations made by the Review Panel will be made by majority vote.
3. Within three (3) workdays of receipt of the recommendation, the Director (in consultation with the DCT) will either accept or reject the Review Panel's recommendations. If the Director rejects the panel's recommendations, due to an incomplete or inadequate evaluation of the dispute, the Director may refer the matter back to the Review Panel for further deliberation and revised recommendations or may make a final decision.
4. If referred back to the Review Panel, the panel will report back to the Director within five (5) workdays of the receipt of the Director's request for further deliberation. The Director (in consultation with the DCT) then makes a final decision regarding what action is to be taken.

5. The DCT informs the Doctoral Health Service Psychology Intern and if necessary, the training program of the decisions made.

6. If the Doctoral Health Service Psychology Intern disputes the Director's final decision, the Doctoral Health Service Psychology Intern has the right to contact the agency's human resources department/director of operations (admin@innovationbhs.com) to discuss the situation. If there are extenuating circumstances that makes these timelines or procedures unattainable, the other involved parties will be notified in writing.

Appendix 6 Parental Leave Policy

Birth, adoption and parenting of children are common phenomena among psychology interns and postdoctoral trainees and may impact their training year. It is important to consider what is appropriate and reasonable for parents, what is practical and feasible for the site and how to ensure that the trainee receives the full benefit of the training experience.

The IBHS Internship Program would like to arrive at a mutually agreeable solution to accomplish the following:

- Allow appropriate parental leave for parents and their new children.
- Provide sufficient time for bonding with new children and postpartum recuperation (in the event of birth) for mothers, which may include physical healing, establishing breastfeeding (should a mother choose to do so) and managing with postpartum depression or anxiety.
- Ensure that trainees meet IBHS's aims, training goals, competencies and outcomes.
- Comply with state, federal and institutional standards regarding parental leave.

Considerations:

Issues may arise relating to the structure, content and process of the training experience for those individuals who miss some of their internship or postdoctoral fellowship for family reasons. These include but are not limited to, orientation to the site, consideration of responsibilities upon their return, the clinical needs of the population served, participation in didactics and cohort issues.

Internship applicants should remember the binding nature of the APPIC Match when submitting their rank order lists. Trainees and sites often ask about the possibility of deferment of the internship year. Pregnancy and adoption, in and of themselves, are not grounds for deferment.

It is important for trainees who request parental leave to understand that while IBHS will try to be as accommodating as possible, there are real considerations that may restrict the amount of leave that can be granted. For example, the training program must ensure that trainees have achieved the program's aims, training requirements, competencies and outcomes and have received a sufficient number of hours of training.

Range of Options:

The timing of leave being requested during the internship year will have a direct bearing on the options that may be considered. In some cases, it will be determined that the trainee may take a leave in the training year and extend the training year as necessary. As IBHS' training is sequential, a delayed start of more than 2-3 weeks will impact the intern's ability to benefit from the required training hours. Similarly, early termination of more than 2-3 weeks will create a gap in patient treatment. Each of these scenarios will require a written plan to determine how the trainee will complete the required number of hours of training and to achieve the program's requirements. Such a plan will involve the Director of Clinical Training from the trainee's doctoral program as well as the IBHS HR Department.

While APPIC does not endorse a standard amount of parental leave, it is strongly recommended that both parties be as flexible and creative as possible when establishing an agreement. Typically, standard time

off may include six weeks for vaginal delivery, or eight (8) weeks for cesarean section with a physician's note. It should additionally be noted that parental leave is covered by short term disability to ensure that interns continue to get reimbursed during this time. This may vary by plan.

Appendix 7 Intern Evaluation Form

IBHS Doctoral Internship Program – Intern Evaluation Form

Intern Evaluation: To be completed by the supervisors

Intern: _____ Supervisor: _____

Dates of Evaluation: _____ to _____ Training site: _____

Methods used in evaluating competency:

- Direct Observation
 Review of Audio/Video
 Case Presentation
 Documentation Review
 Supervision
 Comments/Scoring from other Staff/Faculty

1 -- Remedial Significant skill development required; remediation necessary	
2 -- Beginning/Developing Competence Expected level of competence pre-internship; close supervision required in most cases	
3 -- Intermediate Competence Expected level of competence for intern by mid-point of the training program; routine or minimal supervision required on most cases	
4 – Proficient Competence Expected level of competence for intern at completion training program; ready for entry-level practice	
5 – Advance Competence Rare rating for interns; able to function autonomously with a level of skill representing that expected beyond the conclusion of internship	
Competency 1 - Intern will achieve competence in the area of: Research	
<ul style="list-style-type: none"> • Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities via professional publication or presentation at the local, regional, or national level. • Utilizes scholarly literature and other resources to inform practice with diverse clients. • Demonstrates independent ability to collect, integrate and critically assess data from interventions to guide ongoing treatment and recommendations. 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	

Competency 2 - Intern will achieve competence in the area of: Ethical and Legal Standards	
<ul style="list-style-type: none"> ● Demonstrates knowledge of and acts in accordance with each of the following: <ul style="list-style-type: none"> ○ The current version of the APA Ethical Principles and Code of Conduct; ○ Relevant laws, regulations, rules and policies governing health service psychology at the organizational, local, state, regional, and federal levels; ○ Relevant professional standards and guidelines. ● Recognizes ethical dilemmas which may arise and applies ethical decision-making processes in order to resolve dilemmas which occur. ● Conducts self in an ethical manner in all professional activities. 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	
Competency 3 - Intern will achieve competence in the area of: Individual and Cultural Diversity	
<ul style="list-style-type: none"> ● Demonstrates an understanding of how his or her personal/cultural history, attitudes and biases may affect how an intern understands and interacts with people different from him or herself. ● Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity. ● Integrates awareness and knowledge of individual and cultural differences in the conduct of professional roles. ● Demonstrates the ability to independently apply his or her knowledge and approach in working effectively with the range of diverse individuals and groups encountered during the internship. ● Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity. 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	

Competency 4- Intern will achieve competence in the area of: Professional Values and Attitudes	
<ul style="list-style-type: none"> • Behaves in ways that reflect the values and attitudes of psychology. • Engages in self-reflection regarding personal and professional functioning. • Engages in activities to maintain and improve performance, well-being and professional effectiveness. • Actively seeks and demonstrates openness and responsiveness to feedback and supervision. • Responds professionally in increasingly complex situations with a greater degree of independence as he/she progresses across levels of training. 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	
Competency 5- Intern will achieve competence in the area of: Communication and Interpersonal Skills	
<ul style="list-style-type: none"> • Develops and maintains effective relationships with a wide range of individuals. • Produces and comprehends oral, nonverbal and written communications. • Demonstrates effective interpersonal skills and the ability to manage difficult communication well. 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	
Competency 6- Intern will achieve competence in the area of: Assessment	
<ul style="list-style-type: none"> • Demonstrates current knowledge of diagnostic classification systems, functional and dysfunctional behaviors. • Demonstrates an understanding of human behavior within its context (e.g., family, social, societal and cultural). • Applies knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process. • Selects and applies assessment methods that draw from the best available empirical literature. • Collects relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient. • Interprets assessment results to inform case conceptualization, classification and recommendations while guarding against decision-making biases. • Communicates orally and in written documents the findings and implications of comprehensive assessments in an accurate and effective manner. 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	
Competency 7- Intern will achieve competence in the area of: Intervention	
<ul style="list-style-type: none"> • Establishes and maintains effective relationships with recipients of psychological services. • Develops evidence-based intervention plans specific to the service delivery goals. • Implements interventions informed by the current scientific literature. • Demonstrates the ability to apply the relevant research literature to clinical decision making. • Modifies and adapts evidence-based approaches effectively. • Evaluates intervention effectiveness. 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	
Competency 8- Intern will achieve competence in the area of: Supervision	
<ul style="list-style-type: none"> • Demonstrates knowledge of supervision models and practices. • Applies knowledge of supervision in direct or simulated practice with psychology trainees or other health professionals. • Demonstrate the ability to reflect on the supervision process and assume a more consultative approach as he or she progresses across levels of training. • Provides psychology trainees or other health professionals with appropriate feedback during group supervision. 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	

Competency 9- Intern will achieve competence in the area of: Consultation and interprofessional/interdisciplinary skills	
<ul style="list-style-type: none"> • Demonstrates knowledge and respect for the roles and perspectives of other professions. • Applies knowledge about consultation in direct or simulated (e.g. role play) consultations. 	<input type="checkbox"/> <input type="checkbox"/>
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	
OVERALL RATING (average of broad competence area scores)	
Comments on Intern's overall performance:	

I acknowledge that my supervisors have reviewed this evaluation with me.

Intern Signature

Supervisor's Signature

Supervisor's Signature

Training Director's Signature