

# The South Florida Consortium Internship Program Handbook

2022-2023

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## INTRODUCTION

The South Florida Consortium Internship Program (SFCIP) was developed by the College of Psychology (COP) of Nova Southeastern University (NSU) in 1997. It is a collaborative effort of Nova Southeastern University and cooperating agencies whose mission is to offer a full-time 12-month (2000-hour) doctoral internship for qualified psychology doctoral students at NSU. The SFCIP is exclusively affiliated with the NSU College of Psychology (COP) doctoral programs, meaning it only accepts applications from student enrolled in the NSU COP doctoral psychology programs.

Nova Southeastern University's South Florida Consortium Internship Program (SFCIP) is accredited by the Commission on Accreditation of the American Psychological Association. Questions related to the program's accredited status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation  
American Psychological Association  
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Phone: (202) 336-5979/ E-mail: [apaaccred@apa.org](mailto:apaaccred@apa.org)  
Web: [www.apa.org/ed/accreditation](http://www.apa.org/ed/accreditation)

## ORGANIZATION AND STRUCTURE

Nova Southeastern University (NSU) is located in Fort Lauderdale, Florida. NSU is a private, not-for-profit research institution accredited by the Southern Association of Colleges and Schools Commission on Colleges. Classified by the Carnegie Foundation for the Advancement of Teaching as a research university with “high research activity,” NSU is one of only 50 universities nationwide to also be awarded Carnegie’s Community Engagement Classification. NSU is also the largest private, not-for-profit institution in the United States that meets the U.S. Department of Education’s criteria as a Hispanic-Serving Institution. For more than 50 years, NSU has been fostering groundbreaking research and a commitment to community. The university awards associate’s, bachelor’s, master’s, specialist, doctoral, and first-professional degrees in a wide range of fields, including the humanities, biological and environmental science, business, counseling, computing and engineering sciences, conflict resolution, education, family therapy, medicine, dentistry, various health professions, law, marine sciences, performing and visual arts, psychology, and other social sciences. NSU has campuses in Fort Lauderdale, Fort Myers, Jacksonville, Miami, Miramar, Orlando, Palm Beach, and Tampa, Florida, as well as San Juan, Puerto Rico, while maintaining a global presence online. The institution also has an excellent reputation for its programs for families offered through the Mailman Segal Center for Human Development and the NSU University School. These include innovative parenting, preschool, primary, and secondary education programs, as well as an internationally recognized, model program for children with autism spectrum disorders.

The College of Psychology (COP) is committed to providing the highest quality educational experience to current and future psychologists and mental health and counseling professionals.

This training experience provides students with a sophisticated understanding of psychological research and the delivery of superior mental health care. COP is located on the main campus of Nova Southeastern University. The COP has 42 full-time faculty and offers two APA-accredited doctoral programs in clinical psychology (Ph.D. and Psy.D.), as well as an APA-accredited doctoral program in school psychology. Master's programs in counseling (online), general psychology, mental health counseling, and school counseling, and a specialist program in school psychology are also offered. COP offers a Continuing Education program series approved by APA, the National Association of School Psychologists, and the Florida Boards of Licensed Clinical Social Workers, Marriage and Family Therapy, and Mental Health Counseling. COP is also approved to offer continuing education by the State of Florida Board of Medical Therapies/Psychology, Office of School Psychology and is an NBCC-Approved Continuing Education Provider (ACEPT™).

The SFCIP is governed through an Executive Board (EB) which is chaired by the Director of Internship Training and its members include the Dean of the College of Psychology (COP), the SFCIP Chief Psychologist, and a member-at-large (a supervisor from one of the partner sites). The EB has the authority and responsibility for maintaining SFCIP compliance with the standards of accreditation of the American Psychological Association (APA) and the membership guidelines of the Association of Psychology Postdoctoral and Internship Centers (APPIC). The Executive Board maintains SFCIP resources, evaluates prospective partner sites for new or continued participation in the SFCIP, and ensures the quality of the clinical supervision within the internship. The Executive Board also has supervision, control and direction over the property, business and affairs of the SFCIP and determines its standards, policies, and procedures, and any changes to these. An Operations Board also chaired by the Director of Internship Training and is comprised of at least one representative from each member site (usually a primary supervisor), the SFCIP Chief Psychologist, as well as an intern representative serves as the management arm of the Executive Board. This committee has the authority and responsibility for ensuring the quality of the SFCIP training program. The Operations Board meets at least quarterly to assist the Director of Internship Training with intern selection, intern training and evaluation, and program monitoring, evaluation, and improvement.

## **PROGRAM AIM AND COMPETENCIES**

The SFCIP follows the Practitioner Informed by Science Model of training, which adheres to a philosophy of training geared toward preparing interns to enter careers as health service psychologists concerned primarily with direct service delivery informed by the research base. The SFCIP encourages the acquisition of “generalist” skills rather than narrowly defined specialties with an understanding that health service psychology competencies may be attained in specialized settings. The program is designed to provide experiential training and supervision focused on attainment of profession-wide competencies. These are balanced with formal instruction and mentoring in a broad base of clinical knowledge and skills during supervision and weekly training activities throughout the internship year. The SFCIP seeks to develop strong mentoring relationships between supervisors and interns. These relationships enhance the intern's personal and professional growth by fostering the development of profession-wide competencies.

The SFCIP is a post-practicum, post-coursework, intensive clinical training program designed as the capstone experience for doctoral psychology students as they move toward greater autonomy in practicing health service psychology. The aim of the SFCIP is to prepare interns for entry level independent practice and licensure as Health Service Psychologists. To this end, all SFCIP interns will develop proficiency in all areas of profession-wide competency including:

- I. Research:** Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.
- II. Ethical and Legal Standards:** Knowledgeable of and acts in accordance with: APA Ethical Principles of Psychologists and Code of Conduct; Relevant laws, regulations, rules, and policies governing health service psychology, as well as relevant professional standards and guidelines (including agency policies and procedures); Recognizes ethical dilemmas and applies ethical decision-making processes; Conducts self in an ethical manner in all professional activities.
- III. Individual and Cultural Diversity:** Demonstrates understanding of how own personal/cultural history may affect how one interacts with people different from themselves; evidence knowledge of the current theoretical and empirical knowledge base as it relates to diversity; Ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles; Independently apply knowledge in working effectively with the range of diverse individuals and groups.
- IV. Professional Values, Attitudes and Behaviors:** Behaves in ways that reflect the values and attitudes of psychology. Engages in self-reflection. Demonstrates openness and responsiveness to feedback and supervision. Responds professionally in increasingly complex situations with a greater degree of independence.
- V. Communication and Interpersonal Skills:** Develop and maintain effective relationships with a wide range of individuals; Produce and comprehend oral, nonverbal, and written communications; Demonstrate effective interpersonal skills.
- VI. Assessment:** Select and apply assessment methods that draw from empirical literature; collect relevant data using multiple sources and methods; Interpret assessment results to inform case conceptualization, classification, and recommendations; Communicate findings in an accurate and effective manner.
- VII. Intervention:** Establish and maintain effective relationships with the recipients of psychological services; Develop evidence-based intervention plans; Implement interventions informed by the current scientific literature; Apply the relevant research literature to clinical decision making; Modify and adapt evidence-based approaches; Evaluate intervention effectiveness.

**VIII. Supervision:** Demonstrate knowledge of supervision models and practices; Apply this knowledge in direct or simulated practice with psychology trainees, or other health professionals.

**IX. Consultation and Interprofessional/ Interdisciplinary Skills:** Demonstrate knowledge and respect for the roles and perspectives of other professions.

## **PROGRAM DESCRIPTION**

The South Florida Consortium Internship Program (SFCIP) is a collaborative effort of Nova Southeastern University and cooperating agencies whose mission is to offer a full-time 12-month (2000-hour) doctoral internship for qualified doctoral students in clinical psychology. The goal of the SFCIP is to train and educate interns to competently practice health service psychology. Interns are prepared to be lifelong consumers of research who provide direct services with an understanding that science informs sound practice. Upon completion of the internship, the intern will have acquired the knowledge, skills and professionalism to move to the postdoctoral resident level and work as health service psychologists at the entry level.

SFCIP members are committed to providing interns with the opportunity to acquire “generalist” skills through the provision of instruction, supervision, and experience in a wide spectrum of functions engaged in by a health service psychologist. Therefore, at all training sites, each intern is provided with supervised training experiences in the direct provision of assessment/evaluation and intervention services to clinical populations, as well as with consultation and supervision activities. Training in a breadth of clinical issues and ethical and legal professional standards is incorporated into supervision and seminars (Appendix A) to further prepare interns for generalist practice and the highest standards of professional conduct.

The SFCIP’s primary training method is experiential. Interns spend 40 hours per week in training of which a minimum of 25% (ten hours) to a maximum of 24 hours of the intern's time is dedicated to direct clinical services. At times, because of special circumstances, the maximum number of hours may be increased with the written approval of the Director of Training. Interns are responsible for documenting their direct and indirect services monthly by completing the Intern Activity Log (Appendix B), obtaining supervisor’s signature, and submitting the log to the Director of Internship Training monthly.

The community-based training sites that form the SFCIP provide an array of clinically and culturally diverse populations that offer our interns supervised clinical training and experience during a one-year placement at one of the consortium partner sites, supplemented by weekly training activities at NSU. Nevertheless, all SFCIP interns are expected to develop proficiency in the execution of a broad range of intervention, assessment, consultation, program evaluation, and supervision skills within community settings (i.e., Consortium partner sites). While some sites serve special populations (e.g., clients with primary diagnoses of eating disorders or medical conditions) allowing the interns exposure to specialist skills, the SFCIP program as a whole is organized to provide generalist training through (a) experiential training, (b) supervision, and (c)

training seminars; therefore, all SFCIP interns are required to gain experience in the following areas:

1. **Assessment:** Interns generally complete clinical interviews and or screening regularly to provide a means of refining diagnostic and treatment planning skills. All interns complete a minimum of 6 psychological evaluations during the year under the supervision of a licensed psychologist. Interns will document each completed evaluation by entering the date of the evaluation and obtaining their supervisor's signature of the Documentation of Completed Reports form (Appendix C). While the evaluation type, instruments, and report length may vary across sites, all SFCIP interns' evaluations must include, at minimum, the following: history, direct observation, formal assessment instruments and integration of all individual components to yield diagnostic impressions and recommendations. Also, there are opportunities for consultation with multiple supervisors regarding assessment and report writing and exposure to a broad range of assessment instruments and report writing skills from weekly seminars.
2. **Intervention:** All SFCIP interns are assigned a diverse client case load and work in a variety of modalities (e.g., individual, marital, family, and group therapy, etc.). Cases are representative of diverse socioeconomic backgrounds, ethnic/racial and gender identities, sexual orientations, religions, disabilities, and presenting problems. During individual and group supervision and weekly seminars, interns are exposed to a broad base of knowledge and skills including a variety of intervention models and techniques, service delivery approaches, and culturally competent interventions.
3. **Consultation:** Interns participate in supervised consultation activities with other professionals. This may include staff in-service training and/or consultation within interprofessional teams and/or settings.
4. **Supervision:** Interns have the opportunity to provide individual and group supervision to practicum students, who are in turn, supervised by the psychology training staff. At sites where there are no practicum students, interns provide supervision/mentoring and/or training to other staff at their sites.
5. **Research:** Consortium-wide, interns participate in program evaluation didactics and a Logic Model group project to enhance their knowledge and skills in this area (see Appendix D). Interns must include a critical review of the research literature in their intern presentations (see Appendix F). Supervision includes discussions about the empirical support for an array of assessment and intervention approaches used with clients and interns will be exposed to a broad array of clinical/scientific knowledge during weekly training activities (e.g., PD, Grand Rounds and intern presentations).

## **A. Consortium Partner Sites:**

### **Broward Health Medical Center (BHMC) – Yanique Levy-Brown, Psy.D.**

A respected leader in healthcare since its founding in 1938, Broward Health Medical Center's mission has remained constant over the decades: to provide quality healthcare to the people we serve and support the needs of all physicians and employees. BHMC continues to deliver on that promise through its commitment to physician excellence, technological advancement, and academic affiliation. Caring for our community goes far beyond the walls of the medical center. Each year, BHMC admits approximately 24,000 patients, delivers 4,000 babies and handles more than 75,000 emergencies. BHMC is a Level I Trauma Center and is an accredited hospital by the Joint Commission.

This internship offers training in the areas of Clinical and Health Psychology and prepares interns for careers as practitioners in medical or applied practice settings. Interns will gain knowledge regarding organ systems, disease processes, laboratory results, medications, and the interplay between physical and mental health. Interns will also have a variety of clinical experiences in trauma services, pediatrics, behavioral health, emergency medicine, family medicine, oncology, organ transplantation, palliative care, and cardiac & pulmonary rehabilitation programs. Additionally, Interns will complete a minimum of 6 psychological batteries as a part of the pre-transplant evaluation process. Interns are required to be on-call 24/7 at least 1 week/weekend a month via call coverage. Interns provide services to patients who are medically compromised, experiencing end of life issues, and undergoing invasive medical procedures. Depending on availability, interns may be able to view a liver transplant or other surgeries.

Interns will also have opportunities to participate in community related mental health support activities, research, grant writing, programmatic development, and the training of medical students and residents. Interns will be trained in the supervision of practicum students and utilize a variety of supervision strategies including direct shadowing of psychology consults, review of audio recordings of psychotherapy sessions, providing ongoing feedback, conducting in-service trainings, and participating in their formal evaluation process.

The patient population is richly diverse with respect to age, race, ethnicity, cultural background, sexual orientation, socioeconomic status, medical conditions, and psychopathology. Interns will work with a variety of multidisciplinary teams throughout the medical center and across programs, and will rotate with their intern peers in attending weekly medical team rounds.

All interns will rotate through a three-month pediatric psychology placement as part of the internship program. This placement is supervised by Jessica M. Valenzuela, Ph.D. and will include participation in multidisciplinary outpatient clinics in pediatric endocrinology with a focus on youth with diabetes as well as youth with obesity and related complications. Opportunities in pediatric gastroenterology may also be possible. Interns will work alongside physician specialists and allied health professionals to provide integrated services. They will conduct brief assessment, consultation, intervention, and make necessary referrals during clinic. Interns may also conduct short-term outpatient psychotherapy for issues related to the patient's medical diagnosis (e.g.,



adherence, coping, lifestyle change) and have opportunities for youth and/or parent group therapy. Interns will consult directly with the medical team. Live supervision will be provided.

BHMC offers weekly lectures, presentations, and Grand Rounds, which Interns are encouraged to attend. Interns will also attend a weekly one-hour group supervision meeting, attend two-hours of weekly individual supervision by a licensed psychologist, and provide leadership in the coordination and smooth operation of the psychology service delivered by the NSU Psychology Team at BHMC.

Accommodations include an assigned desk, storage space, computer with internet access, and a telephone. The interns' supervisors are on-site and in an adjacent office so that access and support can occur seamlessly. When not on-site, the supervisor is readily available via phone to assist with more challenging situations. Prior to beginning the internship, Intern's will be sent information about suggestions (e.g., various readings related to health psychology and an invitation to shadow outgoing Interns related to administrative duties) and requirements (e.g., vita, background check, drug screening, proof of immunization, and proof of health insurance coverage).

#### Intern Applicant Requirements:

Previous health related experience is a necessity; this experience can be practicum, work, shadowing, or volunteer in nature. These experiences should be clearly noted in your application cover letter/vita. Preference will be given to those in the health concentration or that have health/medical related coursework.

Those seeking primarily psychiatric in-patient experiences or who are not highly motivated to work in a medical setting should not apply.

All interns will be required to complete a 10 Panel Drug Test and Level II Background Check prior to starting. Please note, Broward Health is a federally funded, drug free workplace and CANNOT permit a positive THC result with a physician prescription. A positive drug test result is an automatic rejection for placement at Broward Health. Please be aware the use of CBD oils (50/15 ng/dl) can result in a positive drug test result and will lead to rejection for placement at Broward Health. All interns will also be required to have Flu and COVID Vaccinations. In the event of an exemption for the Flu vaccine, the intern will be required to wear a mask during Flu Season while at the hospital.

#### COVID-19 Updates:

The Psychology Service at BHMC is following all CDC and DOH guidelines for healthcare workers including use of surgical masks. The use of eye protection is also used in patient facing areas. These modifications are subject to change based on then current CDC and DOH guidelines.

## **Broward Sheriff's Office (BSO) - Timothy Ludwig, Ph.D.**

### About Broward Sheriff's Office:

The Broward Sheriff's Office Department of Detention operates the twelfth largest local jail system in the nation, with four facilities fully accredited by the American Correctional Association and the National Commission on Correctional Health Care. The average daily population exceeds 3500 inmates, of which approximately 45% are receiving some form of mental health services. One facility, the North Broward Detention Center, operates a 340-bed Mental Health Unit for inmates experiencing acute symptoms of their mental illness and who may require specialized housing and treatment services. The In-Custody Behavioral Services Division (ICBSD) is responsible for providing psychological services to the inmates housed on the Mental Health Unit.

### About the In-Custody Behavioral Services Division:

#### *Philosophy/Mission*

The Broward Sheriff's Office In-Custody Behavioral Service Division believes that all inmates should be treated as individuals and with dignity, respect, and understanding. As such, the ICBSD's mental health services focus on assessing the needs of the individual based on their current level of functioning while seeking to maximize opportunities for success in the completion of their identified treatment goals.

It is the mission of the In-Custody Behavioral Service Division to provide a safe and secure environment that will enable special needs inmates, who have emotional and behavioral difficulties and/or co-occurring disorders, an opportunity to successfully adjust within the correctional setting. In addition, these special needs inmates are afforded the supports and services necessary for recovery and successful community integration.

### Psychology Internship with BSO's ICBSD:

#### *Objectives and Philosophy*

The primary objective of BSO's Psychology Internship program is to provide an integrated, flexible, and diverse learning experience necessary for the emergence of a competent professional psychologist. The ICBSD provides a comprehensive learning experience in a multidisciplinary institutional setting emphasizing correctional and forensic work. Interns will have an opportunity to practice and enhance previously acquired skills, develop new skills, and develop competence in psychological assessment, intervention, and consultation.

In addition, interns will have an opportunity to conduct individual and group therapy, psycho-educational programs, and crisis-intervention. The interns will work with a broad range of disorders and challenging behavior management issues. Outside of their clinical work, interns will have the opportunity to engage in curriculum development and program evaluation activities. Additionally, interns will have the opportunity to provide mental health education and training for Department of Detention and Community Program staff.

### *Internship Training Environment*

Interns are expected to work a 40-hour work week, Monday through Thursday from 8:00am to 4:30pm. There are no expectations for after-hours or on-call. Each intern is provided their own workstation and computer at the North Broward Detention Center. The interns become a valued member of the treatment team, which is comprised of two psychologists, nine master's and bachelor level mental health specialists and on occasion, two advanced practicum students. On Friday's the interns will be at NSU for weekly Professional Development (PD) seminars, Group Supervision, and/ or Supervision with a Postdoctoral Student.

### *Supervision and Training*

Each week the interns will receive two hours of individual supervision by a licensed psychologist, two hours of group supervision and training, and 15 to 20 hours of direct clinical service. Interns are also afforded the opportunity to consult and/or supervise non-clinical program staff and, when available, practicum students throughout their internship year. This opportunity provides them with the experience of supervising students with curriculum development, behavior management and treatment planning, and involves co-facilitation of mental health programming.

### *Assessment*

Each intern will complete a minimum of 6 psychological assessments. These psychological assessments typically include assessments of intelligence, personality, and malingering in order to help clarify diagnostic questions or to help guide treatment recommendations. Additional instruments may be utilized throughout the course of the training year to assess and monitor client treatment progress.

### *Treatment*

Similar to a community mental health center, this internship provides exposure to a full spectrum of diagnoses, symptom presentations and severity, cultural backgrounds, and presenting problems. Each intern will maintain a minimum individual therapy caseload of 5-10 clients. Given the transitory nature of the jail population, individual therapy may be provided on a brief or longer-term basis. Interns will be responsible for daily treatment services provided to the mental health housing units. Primary services include, but are not limited to psychoeducational/psychosocial programs, individual therapy, assessment, and case management.

The mental health housing units are comprised of two levels of residential housing, based largely on the inmate's overall level of clinical functioning and other jail classification criteria. The first is Residential Housing-1 (RH1). For these units the interns will be providing supportive and rehabilitative experiences that assist inmates in developing the behaviors and skills needed for transition from segregated housing to less restrictive housing alternatives. These programs are offered on a daily basis and focus on development of effective coping skills in the areas of socialization, communication, conflict resolution, anger management, stress management, as well as any other mental health or substance abuse concerns.

The second level of housing is Residential Housing-2 (RH2). For these units, the interns will be providing psychoeducational groups in a classroom setting. Group size will be maintained to allow for social distancing and to meet other CDC guidelines when COVID precautions are in place. Participation in these groups is completely voluntary on the part of the inmate. Some of the topic

areas include: Understanding Mental Illness, Mood Management/Emotional Awareness, Self-Esteem, Feelings, Anger Management, Stress Management, Substance Abuse, Harm Reduction/Coping Skills, Thinking Errors, Communication Skills, Medication Management, Trauma Resolution, Life Skills, Relapse Prevention, Peer-Support, Discharge Planning, and Video Therapy. In addition to the weekly group programming, interns will provide supportive individual counseling and case management to the inmates on their assigned units.

#### *Program Development*

Interns will participate in on-going curriculum development for daily group programs offered to the inmates housed on the mental health units. Typical curriculum topics include understanding mental illness, substance abuse, relapse prevention, criminal and addictive thinking, trauma, domestic violence, stress management, anger management, and additional topics of interest to the inmate population.

#### *Training*

During the course of the year, the interns will have the opportunity to assist in the development and implementation of a training curriculum related to Crisis Intervention Team training for the Department of Detention Deputies. Opportunities also exist to provide support and training to the ICBSD staff.

#### *Professional Development*

In accordance with South Florida Consortium Internship Program requirements, each intern will attend weekly professional development seminars offered by Nova Southeastern University. Additionally, interns will further their knowledge on issues related to forensic and correctional psychology by reading books and articles provided by the training site supervisor. Seminars and monthly meetings focusing on clinical, ethical, and forensic issues will also be provided to afford the intern an opportunity for networking and development of professional contacts.

#### *Research*

The value of research is recognized as an important professional developmental tool. Participation in research is encouraged at BSO and numerous opportunities and resources are available for interns interested in pursuing these interests.

#### *Leave Policy*

While interns are considered employees of Nova Southeastern University and follow the specified guidelines allotted to the university's employees, there is a pre-hiring clearance process that each prospective intern must successfully complete with the Broward Sheriff's Office. This clearance/background process typically will be initiated in April or May to ensure the prospective intern may begin internship on September 1<sup>st</sup>. In accordance with Nova Southeastern University policies interns receive three weeks of vacation and a total of eleven days sick time. Holiday leave follows the holiday schedule of the training site.

#### *COVID-19 Updates*

As of April 2022, the Department of Detention (DOD) has resumed normal operations; however, still maintains several COVID related precautions such as mask wearing, temperature checks,

and the encouragement of enhanced cleaning and hygiene practices. In the past, during periods of high COVID transmission rates, a number of preventative procedures had been implemented by DOD that have since ended. These precautions may be reinstated based on the COVID trends at the time. Some of these procedures include:

- **EDUCATIONAL MATERIAL ON COVID-19 since onset.** The Department of Detention continues to provide ongoing training bulletins regarding COVID-19 to all inmates and staff.
- **NO JAIL VENDORS OR VISITORS:** For the health safety of the volunteers, staff and the inmates, no vendors or volunteers were allowed inside any of our facilities.
- **MANDATORY SCREENINGS AND PROTECTIVE MASKS:** In order to protect the health, safety, and well-being of staff, contractors, and the inmates the Department of Detention (DOD) may implement the following protective measures:
  - **Assessments include:**
    - Medical screening
    - Temperature checks upon entry into any DOD facility. Temperature checks may be conducted during the middle of the shift to ensure staff members are not becoming feverish while working, and that they are still feeling well.
    - Vitals taken
    - Personal Protective Equipment (PPE)
    - Social distancing on all housing units for inmate safety
    - Social distancing for all staff; including in office areas
    - Limited movement once assigned to housing units for safety of inmates and staff
  - **Personal Protective Equipment:**
    - The Department of Detention shall ensure a safe working environment for staff by providing preventative measures for those who have the potential to become exposed to infectious subjects/situations.
    - All staff and interns should be aware that personal protective equipment is available in all DOD facilities.
    - Personal Protection Kits (PPK) contain special clothing and items worn to provide protection from infectious diseases caused by blood or body fluid spills, splatters, or other contacts.
    - PPE will be worn by all inmates, staff, medical personnel, and interns to enter and while in any DOD facility/ area.
    - Staff will receive either a N95 or surgical mask. All inmates are provided surgical masks; higher risk individuals are provided KN-95 masks.
    - Safe work practices and frequent hand washing decrease the chance of accidental exposure to infectious diseases and contaminants.
    - Individual vulnerabilities: including those who are medically vulnerable or higher risk for severe illness will be identified and addressed.
- **COVID-19 Symptom Management:**
  - All staff and interns entering the facility will be screened for COVID-19 symptoms by temperature checks conducted by the scanner deputy.

- Any individual experiencing COVID-19 like symptoms will be denied entry into the facility.
  - Inmates who develop symptoms or result in a positive COVID-19 test are medically isolated on a separate designated unit and are monitored daily for symptoms and provided repeat testing. The initial unit will be quarantined, and all individuals tested.
  - If exposure is believed to occur, then all potentially infected individuals (staff and interns) will be notified and will be mandated to self-isolate.
- **Environmental Factors:**
- All staff and interns will be allowed to carry personal hand sanitizers and masks while in all DOD facility/areas.
  - Social distancing of physical office space. Interns and staff will have their own designated work spaces.
  - **SANITARY PROCEDURES:** The Department of Detention continues to ensure safe and sanitary procedures are adhered to as the battle against COVID-19 persists. Common protocols throughout DOD are:
    - Regular cleaning/sanitizing of staff and inmate common areas
    - Usage of QC-57 Peroxide Multi-Surface Cleaner and Disinfectant
    - Sanitizing of frequently touched surfaces
    - Utilization of outside cleaning/sanitizing companies as needed
    - Electrostatic Spraying
  - ICBSD staff may conduct programs/services in smaller group size with limited movement between housing units.

### **Child Provider Specialists – Nicole Cordero, Psy.D.**

Child Provider Specialists (CPS) offers comprehensive psychological and related services to children and adolescents in Miami-Dade, Broward, Palm Beach, and Collier Counties. While CPS' main office is in Weston, they have satellite offices across four counties, allowing them to provide conveniently located services to as many families as possible. Although in its inception CPS was primarily a provider of psychological services, including testing and therapy, their belief has always been that an integrated approach is the best way to treat a child and his/her family. Consequently, CPS has developed close relationships over the years with specialists in related fields, such as neurology, developmental and behavioral pediatrics, behavior modification, speech-language therapy, occupational and physical therapies, and educational interventions. Over time, CPS has joined forces with many of these specialists, who will come in as contractors to provide services within the Weston office. Furthermore, CPS has developed very strong relationships with many private schools across four counties.

Interns at CPS will enjoy a rich experience, working hand-in-hand with highly experienced psychologists to develop their skill base in neuropsychological assessment, consultation, parent and professional education, and psychotherapeutic techniques (e.g., social skills groups and individual psychotherapy). CPS' strength lies in helping children with learning disorders, developmental delays, and/or social-emotional-behavioral challenges. Common diagnoses include everything from Attention-Deficit/Hyperactivity Disorder (ADHD) and Specific Learning

Disorders, to more severe challenges such as Autism Spectrum Disorders, Intellectual Disorders, Language Disorders, etc. Here is a list of the main opportunities/obligations while an intern at CPS:

- Interns will be expected to report to the main office in Weston, Monday through Thursday, unless otherwise specified. As an intern, the daily schedule will be from approximately 8:30am to 4:30pm; however, this is subject to change depending on caseloads, the time of year, and what office the intern is working in. During CPS' "peak season" (i.e., when caseloads are heaviest), interns may be expected to work past 4:30pm on select days. This peak season typically occurs during the months of January to July. Furthermore, interns must check with supervisors before taking vacation during busy months.
- Although Weston is the main location that interns will report to, they may also have the opportunity to report to different offices and schools for testing and feedback sessions. These opportunities will help interns to build a network and reputation within the community.
- Testing, scoring, and report writing will be a large majority of an intern's workload. CPS works from a developmental supervision format: Interns will initially shadow Licensed Psychologists while they test. Interns will then slowly progress to administering some tests while supervised, to administering a full battery while supervised, to finally testing without a supervisor in the room. Once interns are testing on their own, they will always report back to supervisors to review cases, score assessments, plan for parent/school feedback meetings, and develop appropriate treatment plans and recommendations.
- Parent/school feedback sessions also follow a developmental supervision format: Interns will initially shadow supervisors, and eventually provide parent/school feedbacks sessions on their own.
- Interns may also assist senior psychologists in scoring assessments. This serves the purpose of ensuring that senior psychologists will have help keeping up with heavy workloads, and more importantly, helps to familiarize interns with scoring various tests.
- Interns will also have the opportunity to work in homeschool and summer camp programs with children diagnosed with ADHD, Specific Learning Disorders, Autism (mild/level 1), behavioral challenges, etc. Interns may also provide individual and small group therapy, social skills training, behavioral treatment planning, and motivational coaching to homeschool students and summer campers.
- Computerized Cognitive Remediation: Interns may be trained in technology programs such as Cogmed Working Memory Training, Fast ForWord, C8 Sciences Activate, etc. This will help interns to better understand why these programs are recommended and utilized for remedial purposes. They may also be trained to use these programs to track

- client progress, understand results, and interpret such results to parents and professionals involved in a child's care.
- Additionally, because CPS offers integrated services, interns will be exposed to and work in conjunction with prescriptive reading interventionists, occupational therapists, neurologists and pediatricians, speech-language pathologists, and other remedial/rehabilitative specialists.

Psychology interns will work under the direct supervision of Nicole Cordero, Psy.D. In addition, there will also be opportunities for supervision provided by senior psychologists within the practice (Michael Rizzo, Ph.D.) Sheri Silverman, Psy.D. will also play a role in supervising interns from a School Psychology perspective. Lastly, our Postdoctoral Resident will assist in supervisory relations and meetings. Support will be available at all times, in that CPS encourages a collegial team environment, with an "open door" policy, and at least one licensed professional available to interns and overseeing their work at all times.

Supervision will occur almost daily. Interns are always expected to report back on their testing cases in order to determine what to do next and/or to prepare for feedback sessions/treatment planning. Interns will be provided with at least 6 to 8 hours of direct supervision per week; in both individual and group formats. It is anticipated that as the skills of the interns increase, they will be provided more flexibility to handle more complex cases and work closely with related professionals in an integrated team format.

Supervisors and Contact Information:

Nicole Cordero, Psy.D. [ncordero@childproviderspecialists.org](mailto:ncordero@childproviderspecialists.org)  
Michael Rizzo, Ph.D. [mrizzo@childproviderspecialists.org](mailto:mrizzo@childproviderspecialists.org)  
Tara DiBattisto, Psy.D. [tdibattisto@childproviderspecialists.org](mailto:tdibattisto@childproviderspecialists.org)  
Sheri Silverman, Psy.D. [ssilverman@childproviderspecialists.org](mailto:ssilverman@childproviderspecialists.org)  
Main Office Number: 954-577-3396

**Memorial Regional Hospital – Marcy G. Smith, Psy.D.**

Memorial Health Care system is the fifth largest public healthcare system in the nation. Its largest hospital, Memorial Regional Hospital is a 713-bed facility and is frequently recognized by national associations and local publications for its unsurpassed commitment for providing high-quality healthcare to the South Florida community. In addition, Joe DiMaggio's Children's Hospital provides a wide scope of comprehensive inpatient and outpatient pediatric services as well as community education and child safety programs. Both Memorial Regional and Joe DiMaggio's Children's hospitals practice the patient & family centered care in that both the needs of the patients as well of their families are addressed at each visit.

**PLEASE NOTE: APPLICANTS WILL ONLY BE CONSIDERED FROM THE NSU CLINICAL PSYCHOLOGY PROGRAMS (PSY.D & PH.D.).**

*Two internship positions are available at this site:*



### The Neuropsychology position at the Neuropsychology Service:

The focus of this service is to provide neuropsychology screenings, psychotherapy and psycho-education to the adult patient population in the Neurosurgery, Trauma, Transplant and/or other medical departments. Patient population may have psychiatric or co-occurring disorders co-morbidities. Supportive therapy and psych-education are also provided to patients' families/support system using the Patient & Family Centered Care model.

The following are the expectations of the intern:

1. Consult & Liaison (C & L) which consists of completion of bio-psychosocial evaluations & completion of neuropsychological screenings with patients
2. Conducting support & education groups to ICU patients' families.
3. Conducting patient & family psycho-education and psychotherapy.
4. Assisting in the Coordination of the Neuropsychology service.
5. Conducting seminars for staff, Medical Residents & students' education.
6. Provision of evidence-based treatment.
7. Psychological evaluations on patients who present with psychiatric or co-occurring disorders co-morbidities.
8. Attending multi-disciplinary rounds for Neurosurgery, Trauma as well as Kidney & Heart Transplant Selection Committee meetings.
9. Supervision of students

### **Clinical Team:**

Marcy G. Smith, Psy.D.: Clinical Neuropsychologist & Director of Psychological Service

Ivy Rouder, Psy.D.: Clinical Psychologist

Amina Rivero-Barba, Psy.D.: Clinical Neuropsychologist

### **Programs Involved:**

Neurosurgery

Trauma/ICU

Cardiac & Kidney Transplant

Medical

Psychiatry

### The Psychology position at Inpatient Behavioral Health:

The intern in this position will work primarily with both adult and adolescents who have psychiatric or co-occurring disorders. Treatment involves evidence-based modalities which includes: group, family and individual therapy. Each patient is provided with individualized aftercare planning to ensure quality and safe discharges back to the community.

The Inpatient Behavioral Health Department is comprised of the following:

1. The Mood Disorder Unit: 20 bed unit with adult patients who have primarily Mood Disorders but can also have co-occurring disorders.

2. The Thought Disorder Unit: 20 bed unit with adult patients who have primarily thought disorders but can also have co-occurring disorders.
3. Co-Occurring Disorder Unit: 11 bed unit with adult patients who have primarily co-occurring disorders. This includes patients involved in the Medication Assisted Treatment (MAT) Program and the Mothers in Recovery Program (MIR).
4. Child & Adolescent Unit: 12 bed unit with children and adolescents who present with psychiatric, psychological, behavioral and/or substance abuse issues.

Expectations from Interns at the Inpatient Behavioral Health Department:

1. Completion of comprehensive psychosocial evaluations
2. Participate in multi-disciplinary treatment team meetings that includes psychiatry, nursing, pharmacy, and clinical staff.
3. Group and individual therapy as well as family sessions.
4. Develop patient treatment plans with attainable goals, objectives, and interventions.
5. Work with multi-disciplinary treatment teams.
6. Provide milieu management support; assure that patients are following structure/policy/procedure, and manage crises.
7. Provision of evidence-based treatment
8. Conducting seminars for staff, Medical Residents & students' education
9. Supervision of students

**Clinical Team:**

Marcy G. Smith, Psy.D., Clinical Neuropsychologist & Director of Psychological Services  
Lisa Wasserman, Psy.D., Clinical & Art Therapist  
Ivy Rouder, Psy.D., Clinical Psychologist  
Amina Rivero-Barba, Psy.D., Clinical Neuropsychologist

**Medical Staff:**

Jorge Sotelo, MD, Medical Director/Adults  
Celine Hamilton, MD., Medical Director/CATS Unit

**The Renfrew Center, Coconut Creek, Florida**

The Renfrew Center has been the pioneer in the treatment of eating disorders since 1985. As the nation's first residential eating disorder facility, now with 19 locations throughout the country, Renfrew has helped more than 85,000 adolescent girls, women, transgender, and non-binary individuals with eating disorders and other behavioral health issues move towards recovery. And, our original founder still runs the company! Renfrew's doctoral internship offers you a specialized and comprehensive year of learning and growth that incorporates the following opportunities:

- Gain valuable, real-world work experience in Renfrew's complete continuum of services, which includes RTC (residential), PHP (partial hospitalization), and IOP (Intensive Outpatient Program) levels of care.

- Learn Renfrew’s Unified Treatment Model for Eating Disorders, which integrates an emphasis on the healing potential of empathic relational connection with evidence based, emotion-focused treatment interventions.
- Join our team of multi-disciplinary professionals, including psychiatrists, psychologists, round the clock nurses, registered dieticians, post-doctoral residents, and practicum students.
- Treat patients in Renfrew’s home-like, healing environment in a variety of therapeutic settings, including group therapy, individual therapy, family therapy, meal support therapy, and therapeutic milieu.
- Provide therapeutic interventions across a wide array of disorders, including Feeding and Eating Disorders, Autism Spectrum Disorders, Depressive Disorders, Anxiety Disorders, Bipolar and Related Disorders, Trauma and Stressor-Related Disorders, Dissociative Disorders, Gender Dysphoria, Substance-Related and Addictive Disorders, Personality Disorders, and Obsessive-Compulsive and Related Disorders.
- Co-facilitate structured group supervision of practicum students.
- Grow your clinical skillset in weekly individual and group supervision with Licensed Psychologists.
- Work on our Residential campus over 4, 8-hour workdays, which potentially includes evening, weekend, and holiday hours.
- Make a difference by assisting Renfrew with keeping the clinical programming running by supporting hurricane relief efforts after a storm.
- The Renfrew Center is following CDC and DOH guidelines in response to COVID-19. This includes wearing PPE when in direct contact with patients or other staff members. The Renfrew Center is currently providing both in person and virtual services.

**Supervisors: Heather Maio, Psy.D., Alissa Baum, Psy.D., Dana Friend, Psy.D., and Irina Gelman, Psy.D.**

## **B. Supervision:**

The SFCIP seeks to develop strong mentoring relationships between SFCIP supervisors and interns, which will serve as one of the primary methods for achieving training goals and objectives. These relationships enhance the intern's personal and professional growth by fostering the development of competencies in scientific thinking, ethical decision making, and professional practice. All SFCIP interns receive at least four hours of face-to-face supervision, and are exposure to at least two licensed psychologists during the training year. Interns meet with at least one licensed psychologist at their sites for a total of three hours of supervision onsite, including two hours of individual supervision and an additional hour of either individual or group supervision, depending on the site. In addition, all SFCIP interns meet with the Director of Internship Training weekly for one hour of group supervision on Friday afternoons. All SFCIP interns also receive one hour of biweekly group supervision with a psychology postdoctoral resident at NSU.

Individual supervision is provided to SFCIP interns by licensed psychologists who take responsibility for the psychological services rendered by interns. Hence, individual supervision is focused on reviews of case assessment, conceptualization, treatment planning and interventions, client progress, recommendations, collaborations with other professionals in serving clients, supervision of intern supervision provided to practicum students or other staff, and general professional development issues. Supervision may also include live supervision, reviews of audio or video recordings, documentation reviews, intensive electronic reviews of de-identified psychological evaluations, and assigned readings. Supervisors provide formative feedback based on their observations of interns' provision of direct services (e.g. intervention, assessment, or consultation) no less than quarterly. Weekly group supervision with the SFCIP Director of Internship Training and focuses on case discussions, supervision of supervision provided to practicum students and others, enhancing self-reflection and self-care, negotiating conflict, and professional development, including postdoctoral training and licensure. The interns also utilize this time to discuss their experience of the program and their individual progress, and evaluate how successfully the program is addressing their needs. In addition, it provides interns access to the Director of Internship Training and additional time to interact with interns from other sites since groups are made up of interns from 3-4 different sites. All SFCIP interns are also assigned to an NSU postdoctoral resident at the outset of the training year and meet with their assigned resident biweekly or more frequently if schedules permit. While postdoctoral residents are not licensed, they provide the interns with additional mentoring and exposure to alternative supervisory styles.

All SFCIP supervisors follow a developmental approach to supervision and training. This approach is based on the philosophy that interns will require more guidance and direction in the beginning of the internship year while progressing towards more professional autonomy as the year progresses. At the outset of the training year, the intern meets with his/her supervisors and they collaboratively develop a personalized training plan, the SFCIP Intern Training Agreement (see Appendix E), based on the following: the intern's present level of competence, theoretical orientation, personality and background, and the sites' requirements/client populations. While the plan allows for individual customization of intern clinical experiences and supervision, it is structured around the SFCIP training aim and profession-wide competencies (see above) that all

SFCIP intern will be expected to meet by the end of internship year, providing the intern and supervisor with clear benchmarks for basing subsequent, quarterly intern performance evaluations. It also establishes the methods by which the SFCIP training goals and objectives will be met for the intern both at the consortium partner site and consortium wide, highlighting the importance of prioritizing attendance at all training activities and establishing clear expectations for interns and supervisors as partners in training.

### **C. Weekly Seminars:**

All SFCIP interns are provided with at minimum two hours of formal instruction weekly to supplement their “on-the-job” experiential and supervision training experiences. In addition, these Consortium-wide seminars provide interns with an opportunity for weekly peer interaction.

Intern attendance is mandatory at all weekly seminars. Each intern is responsible for signing the attendance sheet for these trainings as records of attendance/absence are kept on file. Interns may be excused from two seminars per quarter for illness or with advanced approval from the Director of Internship Training. If more than 2 training activities are missed in any quarter, the intern must make up the absence by one of the following means: (a) presenting an additional didactic to fellow interns or (b) providing proper documentation of attendance at an outside workshop relevant to professional psychology during the same quarter. If four (4) or more training activities within the same quarter are missed, the intern must present an additional didactic to make up for the excessive absence and the intern’s poor attendance will be reflected on that quarter’s performance evaluation. No more than eight (8) missed training activities per year will be acceptable unless under very serious circumstances. Please note that making up missed didactics by attending outside presentations is considered to make up for missed learning, but does not excuse interns from the maximum absences listed above.

Interns spend at minimum 2-3 hours per week in one of three types of weekly seminar training activities that all SFCIP interns are required to participate in (see Appendix A for schedule):

1. Professional Development Seminars: Interns attend a series of formal three-hour didactic seminars at Nova Southeastern University (NSU) conducted by College of Psychology (COP) faculty, SFCIP partner site supervisors, community clinical psychologists, psychiatrists, or other guest presenters. The Professional Development series covers broad areas including: ethics and professional behavior, assessment approaches, psychopathology and treatment interventions for adults and youth, cultural & individual differences, psychopharmacology, and professional development. The Professional Development seminar series is scheduled in collaboration with the NSU COP Continuing Education program, broadening the score of presenters to include nationally and internationally known professionals who will expose all SFCIP interns to a broad base of knowledge and skills.
2. Grand Rounds: Each consortium partner site and the NSU clinics host all the SFCIP interns once a year for two-hour presentations including didactic and case discussions. Didactic material and cases presented are usually representative of the theoretical models, assessment and intervention approaches, and clients served at the host site. Thus,

attending grand rounds exposes all SFCIP interns to a broad base of knowledge and skills.

3. **Intern Presentations:** Each SFCIP intern facilitates at least one didactic presentation per year on a topic of clinical interest developed from reviews of the research literature. Interns provide the presentation title, learning objectives, and at minimum 2 peer-reviewed journal articles referenced in the presentation to the Director of Internship Training prior to presenting. In keeping with the SFCIP's "practitioner informed by science" model of training, interns are required to incorporate discussion of the empirical support for the clinical information presented. Interns typically cover a range of clinical topics including assessments, theoretical models/approaches, and child and adult psychopathology and interventions; thus, exposing fellow interns to a broad base of knowledge and skills. Interns are provided with feedback about their presentation skills and ability to critically discuss the literature supporting their presentation using the Intern Presentation Ratings form (see Appendix F) and a summary of their fellow intern's ratings of their presentation using the Professional Development Evaluation Survey (see Appendix G). These ratings are also shared with the intern's site supervisors.

Intern feedback is crucial to ensuring the quality of SFCIP training activities. Interns are asked to complete Professional Development Evaluation Survey (see Appendix G) forms after each Professional and intern didactic presentation. This information is used to make improvements to training activities yearly. For instance, intern feedback about the quality of presentations is taken into account when considering which presenters to invite back for the next training years' Professional Development seminars. It is also used to provide formative feedback to fellow interns regarding their professional presentation skills as detailed in the section above. At mid-year and again at the end of the training year, interns are asked to provide feedback about the training program (see Appendix H) and supervisor performance (see Appendix I). The Director of Internship Training summarizes this information as group data and presents it to the site supervisors during quarterly meetings. Care is taken to protect the anonymity of the interns providing the feedback. The aim of sharing this information with site supervisors is twofold: first, to increase awareness of program strengths and areas in need of improvement and second, to inform the development of plans to improve the quality of the training program.

## **PERFORMANCE EVALUATIONS**

Site supervisors are responsible for providing interns with quarterly written feedback using the Intern Performance Evaluation (see Appendix J) regarding their progress toward achieving all competencies. Following a developmental model, all ratings are made relative to the level of performance expected given the point of the year at which the evaluation is conducted. Specifically, it is expected that at the three-month evaluation, most interns demonstrate minimal to basic knowledge, skills, and abilities (corresponding to ratings of 1- minimal knowledge, skills, and abilities or 2 - basic knowledge, skills, and abilities). As the year progresses, interns' knowledge, skills, and abilities are expected to increase, so that by the end of the training year, they are expected to demonstrate intermediate to advanced levels of performance (corresponding to ratings of 3 - intermediate knowledge, skills, and abilities or 4 - advanced knowledge, skills, and abilities).

At the six-month evaluation, each intern must receive a rating of “2 - basic knowledge, skills, and abilities” or higher (e.g., 3 - intermediate knowledge, skills, and abilities or 4 - advanced knowledge, skills, and abilities) in all competency areas. Any rating of “1- minimal knowledge, skills, and abilities” will require the generation of a performance improvement plan to assist the intern in improving the particular issue. The standards are raised as the intern progresses toward completion of the internship year. At the nine-month evaluation, each intern must receive a rating of “3 - intermediate knowledge, skills” and abilities” or “4 - advanced knowledge, skills, and abilities”. Any rating of “2 - basic knowledge, skills, and abilities” or “1- minimal knowledge, skills, and abilities” will be addressed via a performance improvement plan. At 12 months, during the final evaluation, each intern is required to receive minimum ratings of “3 - intermediate knowledge, skills” and abilities” or higher (i.e., “4 - advanced knowledge, skills, and abilities”) in all areas assessed in order to successfully complete the training program. At the end of the training year, all interns who display competency in all areas will be deemed as attaining the program’s aim of readiness for entry level independent practice and licensure as a Health Service Psychologist.

## **RECORD RETENTION POLICIES**

Intern training records are stored in locked file cabinets. The records for the more recent training years are stored within the internship Director of Training’s office. Older records are stored within locked file cabinets within locked COP file rooms. In the event of a formal complaint, these would be maintained within the intern’s file. Access to all training records is limited to the internship Director of Training and their graduate assistants for filing.

## **DUE PROCESS AND GRIEVANCE PROCEDURES**

It is the policy of the South Florida Consortium Internship Program (SFCIP) that interns are assured due process regarding concerns which might arise over their performance and functioning. The policy is guided by principles to ensure that interns receive ongoing constructive feedback about their performance, opportunities and support for remediation if needed, and advisement of intern rights and responsibilities and processes to address concerns or grievances. This policy is enacted with respect for intern diversity in areas of professional functioning; therefore, SFCIP supervisors are expected to adapt the supervisory style, focus, and expectations for each intern based on the intern's professional developmental level, theoretical orientation, personality and cultural background. The SFCIP Intern Training Agreement (Appendix E), developed with the interns at the outset of training, should establish individually customized training plan for the intern, as well as training objectives and methods within the specified SFCIP training goal areas forming the basis for evaluation of the intern's performance.

Since the SFCIP accepts only NSU COP doctoral students as interns, all student grievance and due process policies outlined in the relevant College of Psychology Doctoral Program Handbooks may also apply.

### **Intern Performance**

Interns are evaluated and provided with both formative and summative feedback on an ongoing basis through weekly individual supervision and formal quarterly intern performance evaluations (see Appendix J).

If at any time there are deficiencies in an intern's performance or professionalism, the intern's site supervisor will provide constructive verbal feedback to the intern and document in writing any discussions related to the problem area(s). While it is difficult to operationally define all characteristics associated with quality professionalism, broad areas include: (a) adherence to the APA Ethical Code of Conduct for Psychologists, institution policies and procedures, and applicable state of Florida laws, clinical competence (as defined above under performance evaluations); (b) professional comportment, including: dependability; accepting responsibility for own work; professional grooming, attire, and demeanor; and demonstrating maturity, discretion, sound professional judgment and a respectful/non-hostile attitude, and developing self-assessment skills; and (c) a positive attitude toward others, including: cooperating and respecting others, giving, accepting, and utilizing constructive feedback, and developing and maintaining positive working relationships with peers, supervisors, and others.

**Step 1:** If the intern continues to struggle with the problem areas, and/or the intern's performance competencies are rated below satisfactory levels during quarterly evaluations, a performance improvement plan will be developed using the NSU Performance Planning Worksheet (Appendix K) to remediate any deficient areas. The performance improvement plan must be signed by the intern and primary supervisor, and a copy forwarded to the Internship Director of Training. The Performance improvement plan will focus on improving minimum competencies and/or professionalism within a clearly defined timeframe. Remediation strategies



may include increased supervision, additional readings, increased opportunities to practice, additional coursework, etc.

**Step 2:** If the site supervisor and intern cannot reach an agreement about the performance improvement plan, the Director of Internship Training would mediate the situation.

**Step 3:** If the Director of Internship Training was unable to resolve the situation, consultation would be requested from the COP doctoral programs Director of Clinical Training to aid with the resolution of the problem, and development of performance improvement plan. Decisions regarding problem resolution are individual and specific to the facts related to each intern.

**Step 4:** If minimum competencies are not attained within the established timeframe of the performance improvement plan, disciplinary action (including dismissal from the internship program) in keeping with rules and regulations covering disciplinary actions outlined by NSU's Office of Human Resources may be warranted. NSU's Office of Human Resources will be consulted via the COP representative for approval prior to administering disciplinary action beyond a verbal warning.

The Director of Internship Training (DIT) investigates any behaviors that may warrant disciplinary action and is consulted prior to the recommendation of any disciplinary action. An intern may be terminated from their site due to violations of ethics, law, and/or agency policy, but they remain SFCIP interns until the matter is reviewed by the DIT and/or SFCIP Executive Board (EB). The intern would meet with the DIT and/or members of the SFCIP Executive Board, and a representative from the university community of his/her choosing if desired. The Director of Internship Training would present the results of the investigation and make a recommendation to the Dean of the COP and a decision would be made regarding any further action, which may include termination from the internship program.

The Director of Clinical Training for the COP doctoral programs would be kept apprised of the progress. The SFCIP site supervisor(s) would be informed about any decisions or actions taken by the university. The intern could appeal any disciplinary action affecting employment to the NSU Office of Human Resources or to the Dean of COP for disciplinary actions affecting academic standing.

### **Appeals**

Interns wishing to contest disciplinary decisions with the NSU Office of Human Resources must follow NSU's Formal Grievance Hearing Policy: <https://www.nova.edu/hr/policies/formal-grievance-hearing.html>.

Interns who wish to contest disciplinary decisions affecting academic standing must submit a written appeal with the Dean of COP within 30 working days of the decision. Additional steps to be taken by the Dean are outlined in the COP Doctoral Handbook.

## **Intern Grievances**

The COP, SFCIP Executive Board, and supervisors value professionalism, honesty, and ethical conduct in the handling of intern concerns. At all times, matters are handled in the spirit of education and development. The purpose of the intern grievance and appeals process is to allow for the orderly resolution of intern grievances. At all times, the respect and protection of interns is of utmost concern. In keeping with the policy of NSU's Office of Human Resources, interns who file a grievance will not be retaliated against through any adverse action by their supervisor or any NSU representative. If an intern has a grievance about his/her training, the following steps should be taken:

**Step 1:** The intern should work with his/her supervisor to resolve the issue.

**Step 2:** If a resolution is not achieved, the intern should advise the Director of Internship Training, who would attempt to mediate or resolve the concern. Should the issue involve the Director of Internship Training, the intern would advise the SFCIP Chief Psychologist who would attempt to mediate or resolve the situation.

**Step 3:** If the intern believes that the informal process above is unsuccessful in resolving the issue, the intern may file a written grievance with the Director of Internship Training (or Chief Psychologist, if grievance involves the Director of Internship Training), including a concise statement of the particular manner of harm, along with all relevant facts and compelling supporting evidence.

- a) The Director of Internship Training (or Chief Psychologist, if grievance involves the Director of Internship Training) will review the written document to determine if the complaint warrants further review. If the no further review is warranted, the formal grievance will be terminated and the intern will be provided with a brief written explanation. If further review is warranted, the grievance will be forwarded to the SFCIP Executive Board (EB).
- b) The EB will conduct a substantive review of all facts it deems pertinent to the grievance and, at its discretion, may interview the intern or any other pertinent person that it judges has the information relevant to the review.
- c) The EB will file a written recommendation, with justification, to the Dean of the COP. Recommendations of the EB will also be forwarded to the appropriate site supervisor(s)/administrator(s) for review and response. The decision of the EB is final.

It is the responsibility of the Director of Internship Training to follow-up on the response to these recommendations by ensuring that site supervisors or others implicated in the intern grievance submit responses to the EB and that all EB decisions are implemented by the training sites or the program.

## **APPLICATION PROCESS**

The South Florida Consortium Internship Program is fully affiliated with the NSU College of Psychology (COP) psychology doctoral programs. Applicants must be enrolled in one of the College of Psychology APA-accredited doctoral programs at Nova Southeastern University. In addition, they must have completed a minimum of three years of residential doctoral-level training, including at least 600 hours of supervised clinical practicum experience. Approval of a dissertation proposal or final research project by the time of acceptance of an internship is preferred.

The SFCIP participates in the APPIC Match. Internship offers are made in compliance with APPIC guidelines. This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

Application materials should be submitted to the APPIC online application system (Please, **do not** forward any materials directly to the program), and the following is required:

1. Cover letter – must identify SFCIP sites of interest
2. A completed APPI form.
3. A curriculum vitae.
4. Official transcripts of all graduate work.
5. Three (3) letters of recommendation from faculty and supervisors.

The deadline for receipt of all application materials is **November 1** of each year.

Any questions regarding applying to the SFCIP should be directed to:

Maria Fimiani, Psy.D.  
Director of Internship Training, SFCIP  
Nova Southeastern University  
College of Psychology  
3301 College Avenue, Ft. Lauderdale, FL 33314  
954-262-5689  
E-mail: mf245@nova.edu

## **Selection Priorities**

The SFCIP is fully affiliated with the NSU COP clinical and school psychology doctoral programs and will only accept applications from students at Nova Southeastern University.

## **Site Assignment**

Applicant's cover letters should identify those SFCIP site(s) for which they are most interested in being considered. The quality of each applicant's candidacy is assessed on the basis of review of the completed application materials and a personal interview by three or more evaluators. All applicants invited for interviews must attend Interview Day (usually scheduled for all day on the second or third Friday in January) in order to be considered for an internship position.

Applicants invited for interviews should make every effort to attend interview day in January where they will be provided the opportunity to meet with the site representatives, current interns, the site supervising psychologists and the Director of Internship Training. Additional interviews at SFCIP partner sites may also be arranged and some are required.

Each SFCIP Member site has their own match number, giving the applicant the opportunity to match with their preferred site. There is no limit to the number of SFCIP sites applicants may rank. However, an applicant's candidacy will be improved if their experiences and interests match those of the sites to which they have applied.

Prior to beginning internship and depending on the internship site's requirements, interns may be subject to criminal background check, drug screening, and/or health screening. The offer for intern placement is contingent upon passing one or all of these screenings. Should an intern match with SFCIP and not pass any of the required screenings, the guarantee of an internship position may no longer be binding.

## **STIPEND/BENEFITS**

The stipend for all SFCIP interns is \$24,000 for a 12-month period. The university libraries, computer labs, and fitness centers are available to all SFCIP interns.

Interns who match to the Broward Health Medical Center, the Broward Sheriff's Office, Child Provider Specialists, Memorial Regional Hospital, and Renfrew Center will be employees of NSU-COP. These interns will receive all benefits accorded to NSU-COP employees, including medical and dental insurance options, 15 days paid vacation, 11 sick days, 3 personal days, and all university holidays. Tuition reimbursement is also available after 6 months of employment.

## **RESOURCES**

Interns receive administrative support from the internship program Graduate Assistants. Interns also have access to all of the COP and University resources which include a fully stocked psychological testing library on the second floor of the Maltz Psychology Building, campus-wide computer labs, and state-of-the art University libraries:

<http://www.nova.edu/community/libraries.html>, including the extensive full-text electronic journal holdings at the Alvin Sherman Library: <http://www.nova.edu/library/main/>. Interns also have exclusive access to the internship program's test holdings, which are available upon request from the Director of Internship Training.

## **THE REGION**

The Nova Southeastern University's College of Psychology is located in Fort Lauderdale, Florida. The area is noted for its rich cultural diversity, year-round mild climate, beaches, resorts, and outdoor recreational activities. With easy accessibility to downtown Fort Lauderdale and Miami, there are many cultural resources including libraries and philharmonics, ballet, and theatrical companies.

There are several universities and colleges in the Dade, Broward, and Palm Beach County area. Lectures and workshops by visiting scholars from a wide range of fields are frequent. Living expenses are relatively reasonable, and one can choose from living situations ranging from rural to suburban to beachfront. All of this makes for an excellent environment within which to spend a year of training.

## **ETHICAL PRINCIPLES OF PSYCHOLOGISTS AND CODE OF CONDUCT**

Interns are expected to adhere scrupulously to the Ethical Principles of Psychologists and code of conduct, which can be accessed at <http://www.apa.org/ethics/code/> .

## **NSU CAMPUS-WIDE POLICIES:**

### **NSU NONDISCRIMINATION STATEMENT**

Consistent with all federal and state laws, rules, regulations, and/or local ordinances (e.g., Title VII, Title VI, Title III, Title II, Rehab Act, ADA, Title IX, and the Florida Civil Rights Act), it is the policy of Nova Southeastern University not to engage in discrimination or harassment against any persons because of race, color, religion or creed, sex, pregnancy status, national or ethnic origin, nondisqualifying disability, age, ancestry, marital status, sexual orientation, gender, gender identity, military service, veteran status, political beliefs or affiliations, and to comply with all federal and state nondiscrimination, equal opportunity and affirmative action laws, orders, and regulations. Any such acts are unacceptable and strictly prohibited by the university.

In addition, the law prohibits retaliation against an individual for opposing any practices forbidden under this policy, for bringing a complaint of discrimination or harassment, for assisting someone with such a complaint, for attempting to stop such discrimination or harassment, or for participating in any manner in any investigation or resolution of a complaint

of discrimination or harassment. This nondiscrimination policy applies to admissions, enrollment, scholarships, loan programs, athletics, employment, and access to, participation in, and treatment in all university centers, programs, and activities. NSU admits students of any race, color, religion or creed, sex, pregnancy status, national or ethnic origin, nondisqualifying disability, age, ancestry, marital status, sexual orientation, gender, gender identity, military service, veteran status, political beliefs or affiliations, and activities generally accorded or made available to students at NSU and does not discriminate in the administration of its educational policies, admission policies, scholarship and loan programs, and athletic and other school administered programs.

***The Drug-Free Schools and Communities Act and the Education Department General Administrative Regulations (EDGAR) Part 86***, requires Nova Southeastern University to distribute the University's policy on alcohol and controlled substances to all students. ***This policy applies to all school, campus and field-based programs.***

**Drug-Free Schools and Campuses Policy:** The unlawful manufacture, distribution, dispensation, possession, or use of illicit drugs\* and alcohol are prohibited in and on Nova Southeastern University owned or controlled property and as a part of any of its activities. No Nova Southeastern University student shall report to school while under the influence of any illicit drug or alcohol. The possession of paraphernalia for unlawful drug use is also prohibited.

The term "illicit drugs" refers to all illegal drugs, and to legal drugs obtained or used without a physician's order. This policy does not prohibit the use of prescribed medication under the direction of a physician. However, in accordance with Federal law, NSU does not permit the possession or use of marijuana on NSU property or during NSU-sponsored activities for any purpose. As such, the possession or use of medical marijuana, even if authorized under state law, is prohibited on NSU property and during NSU-sponsored activities.

Any Nova Southeastern University Student determined to have violated this policy will be subject to referral for prosecution by the appropriate authorities. Other sanctions include evaluation/treatment for drug use disorder (which may include mandatory completion of a drug/alcohol abuse rehabilitation program) or other university sanctioning, up to and including expulsion.

When you use or deal in drugs or abuse alcohol, you also risk incarceration and/or fines. The Federal Sentencing Guidelines outline Federal penalties for trafficking in drugs and are detailed in the DEA Guide, *Drugs of Abuse – 2017 Edition, pp. 30-31*. In addition to the Federal Sanctions, Florida State Statutes provides sanctions in regard to the use, possession, and/or sale of illicit drugs and the abuse of alcohol. For further information, please refer to Chapters 316 and 893 of the Florida Statutes, or consult with a legal representative of your choosing.

There are serious health risks associated with the abuse of drugs and alcohol. If you, or a fellow student, has a problem with abuse of drugs and/or alcohol, help can be provided at the following locations:

Henderson Student Counseling Center  
For an appointment, call (954) 424-6911 or (954) 262-7050  
3440 South University Drive (in University Park Plaza)  
Davie, FL 33328

Healthy Lifestyles Guided Self-Change Program  
For an appointment, call (954) 262-5968 or email: [gsc@nova.edu](mailto:gsc@nova.edu)  
3301 College Avenue  
Fort Lauderdale, FL 33314

## **Drug- And Alcohol-Free Workplace Policies:**

Issue Date: September 15, 2010

### Overview

NSU maintains a work and educational environment that is safe for its employees and conducive to high work standards. Additionally, NSU complies with all appropriate federal, state and local regulations regarding substance use in the workplace.

### Policy Statement

Any individual who conducts business for NSU, is applying for a position or is conducting business on NSU property is covered by our drug and alcohol free workplace policy. This policy includes, but is not limited to, full-time employees, part-time employees, off-site employees, contractors, volunteers and interns.

The workplace is presumed to include all NSU premises where the activities of NSU are conducted.

The following conduct is prohibited by all employees:

- the use, possession, manufacture, distribution, dispensation, sale, attempt to sell, or being under the influence of illegal controlled substances on campus or off campus;
- the illegal or unauthorized use of prescription drugs;
- the possession, distribution, sale, or attempt to sell alcoholic beverages on duty, other than as part of assigned job duties;
- the unauthorized use, or being under the influence, of alcoholic beverages on duty;
- the use of alcohol off duty that adversely affects the employee's work performance, his or her own or other's personal safety, or NSU's reputation in the community

Failure to comply with the NSU alcohol and substance abuse policies may result in appropriate corrective action, up to and including criminal prosecution as well as immediate termination. For individuals who are not NSU employees but who perform work at NSU for its benefit (i.e. independent contractors, temporary employees provided by agencies, volunteers, and so forth) failure to comply with the NSU alcohol and substance abuse policies may result in refusal or disallowance from further work for and at NSU.

### Policy Application

NSU exercises the right to establish drug and/or alcohol search and screening procedures consistent with applicable local, state, and federal laws and where deemed necessary. An employee may be required to submit to an alcohol and/or drug test if reasonable suspicion exists. Supervisors must contact the OHR immediately when there is reasonable suspicion that an employee is under the influence of alcohol or illegal drugs or otherwise impaired in their performance due to the use of prescription drugs. Employees who are directed to submit to such tests and refuse or fail to do so when asked will be subject to immediate termination for insubordination. The alcohol and/or drug test must be completed within two hours; transportation will be provided.

Depending on the nature of the position, employees who test positive for alcohol or illegal drugs may be referred to NSU's Employee Assistance Program (EAP) for professional assistance or may result in appropriate corrective action, up to and including criminal prosecution as well as immediate termination. In such cases where the employee is offered an opportunity to participate in rehabilitation, the employee must sign and abide by the terms set forth in a Return-to-Work Agreement as a condition of continued employment. Employees who refuse such assistance or who fail to follow the treatment outlined for their recovery are subject to termination. Further, an employee who has successfully completed his or her defined treatment plan but who later tests positive for alcohol or illegal drugs will be subject to corrective action up to and including immediate termination of employment.

Positions deemed safety-sensitive are subject to random alcohol and/or drug testing. Random testing must be completed within two hours of request.

Safety-sensitive positions include, but are not limited to the following classes of jobs:

- Positions requiring employees, students, or anyone who provides transportation to athletes, students, clients, patients, etc., as a requirement of their position comprising 25% or more of their work load regardless of whether they are operating and NSU owned or leased vehicle, personal vehicle, shuttle bus or other commercial vehicle.
- Positions requiring employees, students, or anyone who provides transportation of equipment or services as a requirement of their position comprising 25% or more of their work load regardless of whether they are operating an NSU owned or leased vehicle, personal vehicle, shuttle bus or other commercial vehicle;
- Public Safety Officers;
- Individuals operating any vehicle for company purposed requiring a commercial driver's license (CDL); or
- Any position held by an employee so designated by an authorized representative from the NSU Office of Human Resources to ensure continued compliance with Federal, State, or local regulation or law.

NSU reserves the right to modify the list of identified "safety sensitive positions" to ensure continued vitality of a comprehensive drug and alcohol program.



All drug-testing information will be maintained in separate confidential records.

Responsibilities

NSU recognizes that drug addiction is an illness that requires professional assistance or treatment. Assistance for recovery from such illnesses is available through the EAP or NSU health plan. Please contact OHR to discuss in confidence any issues that fall within the provisions of this policy.

Employees must notify OHR of any criminal conviction related to drug activity in the workplace within five days after such conviction. If the individual is supported by a federal grant or contract, NSU must notify the appropriate government agency within 10 days after receiving such notice as required by the provisions of the federal Drug-Free Workplace Act of 1988.

Nova Southeastern University is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools (1866 Southern Lane, Decatur, Georgia 30033-4097: Telephone number 404-679-4501) to award bachelors, masters educational specialist, and doctoral degrees. The University is chartered by the State of Florida.

Appendix A  
 Nova Southeastern University  
 South Florida Consortium Internship Program

2022-2023

**TENTATIVE SCHEDULE OF DIDACTIC TRAINING SEMINARS & ACTIVITIES**

Date and Location	Title	Presenter(s)
9/1/22 9:00am – 11:00am	PSC Orientation	PSC Director of Internship Training Jennifer Davidtz, PhD
9/2/22 Maltz 2052 9:00am – 11:00am	SFCIP Orientation	SFCIP Director of Internship Training Maria Fimiani, PsyD
9/2/22 Maltz 2052 11:00am – 12:00pm	Intern Presentation Workshop	Jennifer Davidtz, PhD
9/9/22 9:00am – 12:00pm	The Intersubjective Nature of Countertransference and Patient Difficulty: Implications for Clinical Training and Supervision	Jennifer Davidtz, PhD
9/16/22 9:00am – 12:00pm	Never Eat Shredded Wheat: Using a Wellness Compass Program to Prevent Burnout	Maria Fimiani, PsyD
9/23/22 9:00am – 12:00pm	Postdoc Presentations 1. 2. 3.	
9/30/22 9:00am – 12:00pm	TBD	Bady Quintar, PhD

10/7/22 9:00am – 12:00pm	Lions and Tigers and Postdocs, oh my!	Maria Fimiani, PsyD
10/14/22 9:00am – 12:00pm	Program Evaluation Part I	Angela Yehl, PsyD
10/21/22 Maltz 2045 10:00am – 12:00pm	Grand Rounds: Broward Health Medical Center	
10/28/22 10:00am – 12:00pm	CE: DSM V-TR Update	Camellia Westwell, PsyD
11/4/22 Maltz 2045 9:00am – 12:00pm	Grief and Loss: Assessment and Therapeutic Intervention	Cassandra Feldman, PsyD & Julia Iannucci, MS
11/11/22 Maltz 2045 9:00am-12:00pm		
11/18/22 Maltz 2045 9:00am – 12:00pm	Intern Presentations – Cultural and Individual Difference Series: 1. 2. 3.	
<b>11/25/22</b>	<b>Thanksgiving Break</b>	<b>Thanksgiving Break</b>
12/2/22 Maltz 2045 9:00am-12:00pm		
12/9/22 Maltz 2045 9:00am – 12:00pm	Intern Presentations – Ethics Series: 1.	

	2. 3.	
12/16/22 9:00am – 12:00pm		
<b>12/23/22</b>	<b>Winter Closure – No Seminar</b>	
<b>12/30/22</b>	<b>Winter Closure - No Seminar</b>	<b>HAPPY NEW YEAR!</b>
1/6/23 TBD	Qualified Supervisor Training	Tara Jungersen, PhD & Shannon Karl, PhD
1/13/23	<b>SFCIP Internship Interview Day</b>	
1/20/23 1. 9:00am – 11:00am 2. 12:00pm-2:00pm 3. 2:30pm-5:30pm	CE: 1. Ethics and Boundary Issues 2. Medical Errors 3. Domestic Violence	1. Larry Rubin, PhD 2. David Shapiro, PhD 3. Lenore Walker, EdD
1/27/23 9:00am – 12:00pm		
2/3/23 9:00am – 12:00pm	Intern Presentations – Assessment Approaches Across the Lifespan Series: 1. 2. 3.	
2/10/23 9:00am-12:00pm		

2/17/23 10:00am – 12:00pm	Grand Rounds: Memorial Regional Hospital	
2/24/23 9:00am – 12:00pm	Building a Private Practice: Practical Basics and Relational Considerations	Cassandra Feldman, PsyD & Morgan Levy, PhD
3/3/23 9:00am – 12:00pm		
3/10/23 9:00am – 12:00pm	Intern Presentations – Assessment Approaches Across the Lifespan Series: 1. 2. 3.	
3/17/23 10:00am – 12:00pm	Grand Rounds: Psychology Services Center	PSC Interns
3/24/23 9:00am – 12:00pm	Rehabilitation Psychology: It's NOT What You Think	Barry Nierenberg, PhD, ABPP
3/31/23 9:00am – 12:00pm	Clinical Applications of Solution Focused Brief Therapy	Arlene Gordon, PhD, LMFT
4/7/23 9:00am – 12:00pm	Intern Presentations – Psychopathology and Treatment Interventions for Adults and Youth Series: 1. 2. 3.	

4/14/23 9:00am – 12:00pm		
4/21/23 10:00am – 12:00pm	Grand Rounds: Broward Sheriff's Office	
4/28/23 9:00am – 12:00pm		
5/5/23 10:00am – 12:00pm	CE: Diversity	Diana Formoso, PhD
5/12/23	COP Graduation Ceremony	
5/19/23 10:00am – 12:00pm	Prolonged Grief Disorder	Christopher Layne, PhD
5/26/23 TBD	Update Psychopharmacology	Jose Rey, PharmD
6/2/23 9:00am – 12:00pm	Sex Offender Evaluation and Treatment Considerations	Sarah Cooper, PsyD
6/9/23 9:00am – 12:00pm	Providing Trauma-Informed Affirmative Care to Affectional and Gender Minorities	Amy Ellis, PhD
6/16/23 10:00am – 12:00pm		
6/23/23 9:00am – 12:00pm	The Diagnosis and Treatment of OCD and OC-Spectrum Disorders: A Brief Overview	Lori Merling, PhD
6/30/23		

9:00am – 12:00pm		
7/7/23 9:00am – 12:00pm		
7/14/23 9:00am – 12:00pm	Program Evaluation Part II	Angela Yehl, PsyD
7/21/23 9:00am – 12:00pm		
7/28/23 9:00am – 12:00pm		
8/4/23 9:00am – 12:00pm	Training Supervisory Competence in the Delivery of Competency-based Supervision	Barbara Garcia-Lavin, Ph.D.
8/11/23 9:00am – 12:00pm		
8/18/23 9:00am-12:00pm		
8/25/23	PD Make-Up Day	

Appendix B  
INTERN ACTIVITY LOG

Name: \_\_\_\_\_

SITE: \_\_\_\_\_

Supervisor SIG: \_\_\_\_\_

Month/Year \_\_\_\_\_

**Direct Services**

Activity	Hours	Activity	Hours
Individual Therapy		Family Therapy	
Group Therapy		Marital Therapy	
Assessments		Intakes	
Case Consultation (face to face)		Supervision of others (3 hrs./week max)	
Other (e.g., shadowing, work in therapeutic milieu, etc.)			
<b>Total Direct Services Hours:</b>			

**Indirect Services**

Activity	Hours	Activity	Hours
Charting (clinical documenting; chart reviews, etc.)	0	Case Consultation (non-face to face)	0
Assessment Scoring	0	Report Writing	0
Treatment Planning	0	Other	0
<b>Total Indirect Services Hours:</b>	<b>0</b>		

**Training Activities**

Activity	Hours	Activity	Hours
Professional Development Seminars	0	Grand Rounds	0
Supervision Received (IND)	0	Supervision of others (total time)	0
Supervision Received (GRP)	0	In-service Training (non-NSU)	0
Supervision Received (non-licensed)	0	Other	0
Multidisciplinary Teams	0	Literature Review/Research	0
<b>Total Training Activity Hours:</b>	<b>0</b>		
<b>Total Monthly Hours:</b>	<b>0</b>		

**Number of Clients**

African American:	0	Infant:	0	Heterosexual:	0
Hispanic:	0	Child:	0	Homosexual:	0
White:	0	Adolescent:	0	Bisexual:	0
Asian:	0	Adult:	0	Unknown:	0
Caribbean:	0	Older Adult:	0	Other:	0
Multiethnic/multiracial:	0				
Other:	0				
Male	0				
Female	0				
Transgender	0				
Other	0	<b>Total Number of Clients:</b>			<b>0</b>



Appendix C  
**South Florida Consortium Internship Program**  
**DOCUMENTATION OF COMPLETED REPORTS**

NAME: \_\_\_\_\_ TRAINING YEAR: \_\_\_\_\_

SITE: \_\_\_\_\_

<b>Date of Report</b>	<b>Supervisor Signature</b>
1.	
2.	
3.	
4.	
5.	
6.	

## Appendix D PROGRAM EVALUATION Curriculum

### **Description:**

This three-part training activity involves: 1) assessment of Intern knowledge of Program Evaluation both prior to (pre-test) and following (post-test) didactic instruction, 2) Two didactic training sessions focused on theories and methods of Program Evaluation, and 3) a Logic Model group activity carried by the interns. Interns will gain knowledge of theories and methods of Program Evaluation during two didactic sessions. After the first didactic, they will collaborate with their site supervisors on carrying out a program evaluation, applying the Logic Model method. During the second didactic, interns' group project will be reviewed and they will be trained on delivering program evaluation feedback to stakeholders. Over the summer, interns will present results and supervisor overseeing project will complete the Interns' Program Evaluation Project Observation Form.

### **Rationale:**

It is important that Psychology interns understand and are able to apply Program Evaluation theories and methods in their future work as Psychologists. Given that psychologists should demonstrate clear evidence of effectiveness in achieving desired goals, conducting formal program evaluations is one way to be rigorous in this endeavor. This three-part training activity will expose interns to various theories and methods of program evaluation and gauge learning with pre-and post-tests. In addition, interns will have the opportunity to apply these new skills through a small-group program evaluation project using a Logic Model.

### **Learning Objectives and Outcomes:**

Interns will demonstrate intermediate to advanced levels of competency in program evaluation knowledge and skills.

#### **Interns who successfully complete this training will be able to:**

- 1) Demonstrate knowledge of the theories and methods of Program Evaluation.
- 2) Demonstrate the ability to develop a logic model that is relevant to their current work.
- 3) List 1-2 ways in which a logic model may be helpful.

### **Activities:**

- Interns will complete the Program Evaluation Pre-test
- Interns will attend two Program Evaluation didactic presentations
- Interns will complete the Program Evaluation Post-test.
- Interns will plan and execute a small-group program evaluation, using a Logic Model.
- Interns will provide feedback to stakeholders about the outcome of their program evaluation group project.
- Interns' performance will be evaluated by supervisor using the Interns' Program Evaluation Project Observation Form.

### **Outcome Measures:**

- Pre and Post tests
- Evaluation of Intern competencies in program evaluation using the Program Evaluation Knowledge and Skills Rating Form
- Evaluation by the Intern's supervisors of Intern competencies in program evaluation using the Intern Quarterly Evaluation based on feedback from the Program Evaluation Knowledge and Skills Rating Form as well as any other available evidence from site-based program evaluation activities (e.g., Interns' Program Evaluation Project Observation Form).

### **Resources:**

Webinar on LOGIC model at: <https://lmcourse.ces.uwex.edu/> or

<https://fyi.extension.wisc.edu/programdevelopment/files/2016/03/lmcourseall.pdf>

Helpful Worksheets: <https://fyi.extension.wisc.edu/programdevelopment/logic-models/bibliography/>

Templates and Examples: <https://fyi.extension.wisc.edu/programdevelopment/logic-models/bibliography/>

**Interns' Program Evaluation Project  
Observation Form**

**Intern:** \_\_\_\_\_ **Observer:** \_\_\_\_\_

**Site/Rotation:** \_\_\_\_\_ **Date(s) of Observation:** \_\_\_\_\_

*Based on your observations, please use the scale below to rate the intern's program evaluation knowledge and skill.*

- 1- Deficient
- 2- Below Average
- 3- Average
- 4- Above Average
- 5- Excellent
- N/A- Not observed

\_\_\_\_\_ 1. During discussions about site-specific Program Evaluation Project, the intern was knowledgeable about Program Evaluation method proposed; that is, able to clearly describe the components of the Logic Model the intern co-developed, including Inputs, Outputs (activities and participation) and outcomes (short-term, mid-, and long-term impact).

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ 2. Intern was actively engaged in carrying out the Program Evaluation Project collaboratively with fellow interns.

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ 3. Intern provided stakeholders feedback (e.g., workshops, meetings, reports, etc.) and assessment on the effectiveness of the project.

Comments: \_\_\_\_\_

\_\_\_\_\_

\*\*\*\*\*

\_\_\_\_\_ Please provide a rating for the **overall helpfulness** of the Program Evaluation project with respect to informing the site about the targeted programming (e.g., effectiveness, recommendations for further evaluation/improvement, etc.), and offer suggestions for improvement below:

Comments: \_\_\_\_\_

\_\_\_\_\_

**Thank you! Please return your rating/feedback to Dr. Fimiani**

Appendix E  
Nova Southeastern University  
College of Psychology  
South Florida Consortium Internship Program

**Intern Training Agreement**

Name of Intern: \_\_\_\_\_

Site: \_\_\_\_\_

Site Supervisor: \_\_\_\_\_

Internship Year: \_\_\_\_\_ Date of Agreement: \_\_\_\_\_

**Instructions:**

At the beginning of the internship discuss and establish with the intern the major activities in which he/she is expected to engage and list them below. In addition, list and identify training expectations and methods within specified competency areas. These constitute a contract and should be considered to form part of the basis for evaluation of the intern's performance.

**A. Major Activities**

1) **Direct Clinical Contact** (specify # of hours [a minimum of 25% or 10 hours per week is required] and type of contact, e.g., individual, group, family psychotherapy, other intervention, testing, consultation, supervision of others, etc.)

- A minimum of 10 hours (25%) to a maximum of twenty-four (24) hours per week of direct, face-to-face, client/patient contact, to include the following approximate **minimum hours/week** for each type of intervention contact:

\_\_\_\_\_ hrs/wk      Individual Therapy

\_\_\_\_\_ hrs/wk      Group Therapy

\_\_\_\_\_ hrs/wk      Family Therapy

\_\_\_\_\_ hrs/wk      Other Therapy/Intervention, Please specify type:  
\_\_\_\_\_

\_\_\_\_\_ hrs/wk      Consultation with other professionals or others  
involved in client/patient care.

\_\_\_\_\_ hrs/wk      Supervision of others.

- Minimum Six (6) psychological evaluations for the year; if require more than six/year, list minimum here \_\_\_\_\_.

2) **Supervision** (specify # of hours [at minimum four hours total required: **at least two hours of individual supervision from licensed psychologist required and one additional hour may be individual or group supervision with a licensed psychologist**]

**onsite]**, with whom (name of supervisor, postdoc, etc.), and type- group, individual, case conference, etc.)

a) Individual Supervision:

- 
- 

b) Group Supervision:

- One hour per week of group supervision with SFCIP Director of Internship Training.
- One hour biweekly of group supervision with NSU Postdoc under the supervision of Director of Postdoctoral Training Program and Director of Internship Training.

- 

c) Additional supervision (if any):

### **3) Training, Lecture Seminars & Educational Activities**

- 3 hours of Professional Development seminars bimonthly on Fridays 9am-12pm required; there will also be a few full-day trainings offered throughout the year per training calendar.
- 2 hours of Grand Rounds at local agencies and NSU clinics once a month
- 2 hours of Intern Presentations monthly
- 1.5 hours of Orientation with DOT once per year
- 
- 
- 

### **B. Schedule of Time Spent (Monthly):**

1) At Internship Site:

2) Grand Rounds: 2 hours of Grand Rounds at local agencies and NSU clinics once a month on specified Fridays 10am – 12pm. Interns will assist with coordinating and planning Grand Rounds when it is their site’s turn to host the event.

3) Professional Development: 3 hours of Professional Development seminars bimonthly on Fridays 9am-12pm required; there will also be some full day trainings offered throughout the year.

4) Other (specify: NSU supervision with training director or Postdoc, conferences, agency/community meetings, etc.):

- 2-3 hours of Intern Presentations monthly on specified Fridays 9am – 12pm
- 1 hour/week of group supervision with Director of Internship Training on Friday afternoons
- 1 hour of group supervision with NSU postdoc bimonthly
- 1 Program Evaluation group project at site
- Complete 2000 hours by August 31<sup>st</sup>
- 

### **C. Competency Training:**

Within each competency area, indicate specific training methods that will be used onsite (e.g., experiential learning, observation, supervision, in-service trainings, etc.) and at NSU (e.g., presenting at PD, Grand Rounds and other didactics on campus, group supervision, library research, etc.) for achieving these goals/objectives.

**I. Research:** Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.

**Methods:** Individual and group supervision will regularly include discussions about the empirical support for an array of assessment and intervention approaches used with clients, as well as the current scientific knowledge about specific psychiatric diagnoses encountered. Interns will attend internship training activities (e.g., PD, Grand Rounds and intern presentations) exposing them to a broad array of clinical/scientific knowledge from NSU faculty and other experts. During the training year, interns will present one 1-hour workshop, on a topic of interest, to fellow interns based on a review of the relevant empirical literature in the chosen area. Interns will receive didactic training in program evaluation and complete a program evaluation project. Additional site-specific methods include:

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### **II. Ethical and Legal Standards**

Knowledgeable of and acts in accordance with: APA Ethical Principles of Psychologists and Code of Conduct; Relevant laws, regulations, rules, and policies governing health service psychology, as well as relevant professional standards and guidelines (including agency policies and procedures); Recognizes ethical dilemmas and applies ethical decision-making processes; Conducts self in an ethical manner in all professional activities.

**Methods:** Interns will receive orientations to their site and to the SFCIP to acquaint them to all required documentation and other policies and procedures, including review of relevant ethical codes and laws (e.g., HIPPA, FERPA, etc.). Ethical issues will be discussed regularly during individual and group supervision with an emphasis on developing greater autonomy in appropriate management of ethical/legal matters as the year progresses. Interns will attend didactics focused on ethical and legal issues. Intern presentations will include coverage of relevant ethical/legal considerations, and interns will be provided with feedback about their coverage of this area. Additional site-specific methods include:

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### **III. Individual and Cultural Diversity**

Demonstrates understanding of how own personal/cultural history may affect how one interacts with people different from themselves; evidence knowledge of the current theoretical and empirical knowledge base as it relates to diversity; Ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles; Independently apply knowledge in working effectively with the range of diverse individuals and groups.

**Methods:** Interns will be assigned a diverse assessment and intervention case load. Individual and group supervision will regularly include discussions about cultural and individual factors relevant to assessment and about important cultural and individual considerations for establishing/maintaining rapport, conceptualizing cases, and treatment/intervention planning. In addition, interns will attend didactic trainings focused on cultural and individual differences. Intern presentations will include coverage of relevant individual and cultural diversity considerations, and interns will be provided with feedback about their coverage of this area. Additional site-specific methods include:

---

### **IV. Professional Values, Attitudes and Behaviors**

Behaves in ways that reflect the values and attitudes of psychology. Engages in self-reflection. Demonstrates openness and responsiveness to feedback and supervision. Responds professionally in increasingly complex situations with a greater degree of independence.

**Methods:** Interns will be oriented to SFCIP policies and procedures, including professional conduct and dress, as well as expectations for professional development, socialization to the profession, reflective practice and self-care. These topics will continue to be discussed during individual and group supervision throughout the training year. Interns will be provided with regularly scheduled weekly individual and group supervision and will be encouraged to be active participants by arriving to supervision prepared to discuss cases, review work, and actively engage in the learning process, as well as consistently following through on supervisor suggestions in a timely manner. Additional site-specific methods include:

---

## V. Communication and Interpersonal Skills

Develop and maintain effective relationships with a wide range of individuals; Produce and comprehend oral, nonverbal, and written communications; Demonstrate effective interpersonal skills.

**Methods:** Individual and group supervision will regularly include discussions about rapport and relationships with clients and others, including establishing and maintaining boundaries, examining transferences/counter-transferences when appropriate, appropriate use of self disclosures, and other relevant topics relevant to establishing a strong working alliance. Training regarding technical language and/or writing will also be provided in supervision, through onsite didactics, and using templates and/or feedback on report drafts. Interns will be provided with feedback about their communication skills based on their performance during their intern presentation. Interns will be observed interacting with peers, clients, and co-workers and provided with feedback about their interpersonal skills. Additional site-specific methods include:

---

## VI. Assessment

Select and apply assessment methods that draw from empirical literature; collect relevant data using multiple sources and methods; Interpret assessment results to inform case conceptualization, classification, and recommendations; Communicate findings in an accurate and effective manner.

**Methods:** Interns will be regularly assigned assessments, including intakes, admissions, and other initial assessments, as well as at least six comprehensive evaluations during the training year. Supervision will include direct observation of assessment, instrument selection, administration and interpretation, as well as reviews of written reports. Diagnostic issues, current scientific knowledge, and individual/cultural considerations relevant to assessment and cases will be discussed regularly during individual and group supervision. Interns will attend internship training activities (e.g., PD, Grand Rounds and intern presentations) exposing them to the current scientific knowledge and a variety of perspectives about specific psychiatric diagnoses. Interns will attend seminars focused on increasing assessment knowledge and competencies, and Grand Rounds at community agencies where they will learn about possible community referral resources to inform report recommendations. Opportunities to consult with NSU faculty regarding assessment/report writing issues will be made available throughout the year. Assessment instruments will be available from the COP academic program and internship program holdings as needed. Additional site-specific methods include:

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## VII. Intervention

Establish and maintain effective relationships with the recipients of psychological services; Develop evidence-based intervention plans; Implement interventions informed by the current scientific literature; Apply the relevant research literature to



clinical decision making; Modify and adapt evidence-based approaches; Evaluate intervention effectiveness.

**Methods:** Individual and group supervision will regularly include reviews of client/patient histories, case conceptualization, current scientific knowledge and individual/cultural considerations relevant to cases, treatment planning and client progress, and termination/transfer issues. Supervisors will observe interns providing interventions and offer performance feedback. Interns will attend didactic trainings focused on psychopathology and treatment interventions for adults and youth. Individual and group supervision will regularly include discussions about the empirical support for an array of intervention approaches used with clients. Interns will attend internship training activities (e.g., PD, Grand Rounds and intern presentations) exposing them to a broad array of clinical/scientific intervention knowledge from NSU faculty and other experts. Opportunities to consult with NSU faculty regarding specialized interventions will be made available throughout the year. Additional site-specific methods include:

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### **VIII. Supervision**

Demonstrate knowledge of supervision models and practices; Apply this knowledge in direct or simulated practice with psychology trainees, or other health professionals.

**Methods:** Weekly group supervision with the DOT will include supervision of the interns' supervision of practicum students and others, including reviews of supervision models and approaches, supervision session recordings, relevant readings, etc. Additional site-specific methods include:

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### **IX. Consultation and Interprofessional/ Interdisciplinary Skills**

Demonstrate knowledge and respect for the roles and perspectives of other professions.

**Methods:** Interns are considered staff and will regularly consult, in a professional manner, with other professionals. Consultation activities will be discussed during individual and group supervision with a focus on developing greater professional autonomy in this area as the year progresses. Supervisors will observe interns providing consultation services and will offer interns performance feedback. Additional methods include:

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**I have read and understand the above statements and agree that they accurately represent the agreement between the site supervisor and myself. I understand that the site supervisor and my site are legally responsible for all clinical work.**

**School agrees to comply with the applicable provisions of the Federal Privacy Rule promulgated by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) as contained in 45 CFR Parts 160 and 164 (“the HIPAA Privacy Rule”). School agrees not to use or further disclose any protected health information (“PHI”), as defined in 45 CFR 164.504, other than as permitted by this Agreement and the requirements of the HIPAA Privacy Rule. School will implement appropriate safeguards to prevent the use or disclosure of PHI other than as provided for by this Agreement. School will promptly report to Facility any use or disclosure of PHI not provided for by this Agreement or in violation of the HIPAA Privacy Rule of which School becomes aware. If School contracts with any agents to whom School provides PHI, School will include provisions in such agreement whereby School and agent agree to the same restrictions and conditions that apply to School with respect to uses and disclosures of PHI. School will make its internal practices, books, and records relating to the use and disclosure of PHI available to the Secretary of the Department of Health and Human Services to the extent required for compliance with the HIPAA Privacy Rule. The parties acknowledge that the PHI, including but not limited to medical records, laboratory tests and radiology films, may be utilized by School for educational purposes upon redaction of patient identifying information, in accordance with the HIPAA de-identification standards. To the extent that information has not been de-identified, School will either return or destroy the information. To the extent that it is not feasible to return or destroy the information, School will continue to safeguard the PHI beyond the termination of this contract and not use or disclose the PHI for purposes other than those which make the return to destruction infeasible. Notwithstanding the foregoing, no attorney-client, accountant-client, risk management, attorney work-product or other legal privilege shall be deemed waived by Faculty or NSU by virtue of this Section.**

**Signature of Intern: \_\_\_\_\_**

**Date: \_\_\_\_\_**

**Signature of Site Supervisor: \_\_\_\_\_**

**Date: \_\_\_\_\_**

**Signature of SFCIP Director of Training: \_\_\_\_\_**

**Date: \_\_\_\_\_**

Appendix F

<b>Intern Presentation Ratings</b>				
<b>Element</b>	<b>Criterion for “target” rating</b>	<b>Not Met</b>	<b>Met</b>	<b>Exceeded</b>
Expressive Skills	Communicates clearly using verbal skills (goes well beyond merely reading directly from slides); holds the attention of the audience (actively engaging the audience would be exceeding expectation); integrates verbal skills with other teaching methods (e.g., PowerPoint presentation, videos, role-plays, etc.)			
Expressive Skills	Responds to the audience by accurately and completely responding to questions <i>and/or</i> modifying presentation style to meet the needs of the participants, <i>and/or</i> introduces innovation/creativity into application of teaching method.			
Scholarly Inquiry	Clearly articulates support for presentation point(s) from the literature (referencing at least 2 peer-reviewed journal articles during presentation).			
Scholarly Inquiry	Demonstrates being a critical consumer of the research (e.g., presents both strengths and shortcoming of the literature reviewed for the presentation; discusses study design; describes how outcomes were measured, etc.).			
Scholarly Inquiry	Provides a thorough enumeration of all relevant points regarding the research literature base for presentation.			
Individual and Cultural Diversity (ICD) - Awareness	Includes a discussion of the effects of diversity in whatever form			
Individual and Cultural Diversity (ICD) - Awareness	Integrates knowledge of APA guidelines regarding working with culturally and linguistically diverse individuals, including recognition of cultural bias, into presentation.			
Ethics	Evaluates the ethical dimensions of the topic(s) discussed, and exhibits a well-developed ability to reason about ethical issues.			
Handouts	Provides any relevant materials (including Power Point handouts) which will help the participants understand and benefit from the presentation.			

Appendix G  
**NOVA SOUTHEASTERN UNIVERSITY**  
**PROFESSIONAL DEVELOPMENT**  
**Evaluation Survey**

Topic Title: \_\_\_\_\_

Date: \_\_\_\_\_

Presenter(s): \_\_\_\_\_

We appreciate your help in evaluating this program. Please indicate your rating of the presentation in the categories below by circling the appropriate number, using a scale of 1 (low) through 5 (high).

**OBJECTIVES**

This program met the stated objectives described: 1 2 3 4 5

**SPEAKERS**

- 1. Knowledgeable in content areas 1 2 3 4 5
- 2. Content consistent with objectives 1 2 3 4 5
- 3. Clarified content in response to questions 1 2 3 4 5
- 4. Prepared to present on topic 1 2 3 4 5
- 5. Able to answer questions 1 2 3 4 5

**CONTENT**

- 1. Appropriate for intended audience 1 2 3 4 5
- 2. Consistent with stated objectives 1 2 3 4 5

**TEACHING METHODS**

- 1. Visual aids, handouts, and oral presentations clarified content 1 2 3 4 5
- 2. Teaching methods were appropriate for subject matter 1 2 3 4 5

**RELEVANCY**

- 1. Information could be applied to practice 1 2 3 4 5
- 2. Your interest in the topic being presented 1 2 3 4 5
- 3. Information contributed to competencies:
  - Research 1 2 3 4 5
  - Ethical and legal standards 1 2 3 4 5
  - Individual and cultural diversity 1 2 3 4 5
  - Professional values, attitudes, and behaviors 1 2 3 4 5
  - Communication and interpersonal skills 1 2 3 4 5
  - Assessment 1 2 3 4 5
  - Intervention 1 2 3 4 5
  - Supervision 1 2 3 4 5
  - Consultation and interprofessional skills 1 2 3 4 5

→ **What is your *overall* rating of the presentation?** 1 2 3 4 5

**COMMENTS/PROGRAM IMPROVEMENTS:**

\_\_\_\_\_

Appendix H  
**South Florida Consortium Internship Program**

**Evaluation of Training Program**

Training Year \_\_\_\_\_ Mid Year \_\_\_\_\_ End of Year

Site: \_\_\_\_\_

**Use the five point scale below to rate the quality of each of the components of the training program listed, providing comments where relevant. Return the form to the Director of Training.**

Rating:

1 – Deficient	2 – Weak	3 – Adequate	4 – Strong	5 - Outstanding
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1) Quality and variety of direct service experiences available:

**1**                      **2**                      **3**                      **4**                      **5**

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2) Quality and usefulness of special topics seminars (e.g., PD and Grand Rounds):

**1**                      **2**                      **3**                      **4**                      **5**

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3) Quality and usefulness of other training experiences (e.g., intern presentations, postdoc supervision, etc.):

**1**                      **2**                      **3**                      **4**                      **5**

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4) Use the same **5-point scale** to rate the following aspects of the internship program:

\_\_\_\_\_ Acceptance by site staff

- \_\_\_\_\_ Expertise of Psychology Staff
- \_\_\_\_\_ Expertise of Supervision
- \_\_\_\_\_ Program evaluation/research opportunities
- \_\_\_\_\_ Assessment Experience
- \_\_\_\_\_ Intervention Experience
- \_\_\_\_\_ Training Opportunities
- \_\_\_\_\_ Orientation to SFCIP
- \_\_\_\_\_ Orientation to the Site
- \_\_\_\_\_ Individual and Cultural Diversity
- \_\_\_\_\_ Experience in Consultation
- \_\_\_\_\_ Experience in Supervision
- \_\_\_\_\_ Overall quality of internship training program

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5) What do you identify as strengths of this internship?

- a) \_\_\_\_\_
- b) \_\_\_\_\_
- c) \_\_\_\_\_
- d) \_\_\_\_\_

6) What do you identify as weaknesses of this internship?

- a) \_\_\_\_\_
- b) \_\_\_\_\_
- c) \_\_\_\_\_

d) \_\_\_\_\_

7) Please give any suggestions that could be used to help next year's interns and the internship program.

a) \_\_\_\_\_

b) \_\_\_\_\_

c) \_\_\_\_\_

d) \_\_\_\_\_

\_\_\_\_\_  
Intern Signature and Date

Appendix I  
**South Florida Consortium Internship Program  
Supervisor Evaluation Form**

**Circle one:**    **Mid-Year**      **End-of-Year**      **Other:**\_\_\_\_\_ **(date)**

Please rate your Supervisor on the following areas using the scale below:

- 1- Unsatisfactory
- 2- Below Average
- 3- Satisfactory
- 4- Above Average
- 5- Excellent
- N/A- Not a focus of supervision

\_\_\_\_\_ 1. Ability to create a supportive supervisory atmosphere promotive of self-care.

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ 2. Ability to assist you with developing reflective practice skills.

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ 3. Ability to enhance your assessment knowledge, abilities, and skills.

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ 4. Level of sensitivity displayed in reference to diversity issues, and ability to enhance your individual and cultural diversity knowledge, abilities, and skills.

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ 5. Ability to enhance your intervention knowledge, abilities, and skills.

Comments: \_\_\_\_\_

\_\_\_\_\_



\_\_\_\_\_ 6. Ability to increase your knowledge of legal and ethical issues.

Comments: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ 7. Ability to enhance your supervision knowledge, abilities, and skills.

Comments: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ 8. Ability to enhance your consultation knowledge, abilities, and skills.

Comments: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ 9. My supervisor was available for scheduled supervision and provided feedback based on direct observation of my work.

Comments: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ 10. The manner in which my supervisor gave me feedback was respectful and collegial.

Comments: \_\_\_\_\_  
\_\_\_\_\_

Any additional comments regarding any other areas of supervision not covered above:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Intern Name: \_\_\_\_\_ Date: \_\_\_\_\_

Intern Signature: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Site: \_\_\_\_\_

Appendix J  
South Florida Consortium Internship Program  
INTERN COMPETENCY EVALUATION FORM

Intern Name: \_\_\_\_\_ Date: \_\_\_\_\_

Site: \_\_\_\_\_ Year: \_\_\_\_\_

Clinical Supervisor: \_\_\_\_\_

Quarter: (select one)    First            Second            Third            Final

This evaluation is based on the following sources of information: (check all that apply)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Direct observation         | <input type="checkbox"/> Discussions in supervision | <input type="checkbox"/> Audio/video rec |
| <input type="checkbox"/> Feedback from others       | <input type="checkbox"/> Participation in meetings  | <input type="checkbox"/> Other: _____    |
| <input type="checkbox"/> Review of clinical records |   |  |

For each of the 9 profession-wide competency areas below, please assign a rating (1-4) that best describes the intern's level of competency at this point in the training year. A behaviorally anchored rating scale is provided for each of the 9 profession-wide competency areas. Space is provided for narrative description of the trainee's level of functioning, as well as for noting direct observations of intern competency. Please remember that all ratings should be made relative to the level of performance expected given the point of the year at which the evaluation is conducted. Specifically, it is expected that during the beginning of the training year, most interns demonstrate minimal to basic knowledge, skills, and abilities (corresponding to ratings of 1 or 2). As the year progresses, interns' knowledge, skills, and abilities are expected to increase, so that by the end of the training year, they are expected to demonstrate intermediate to advanced levels of competency (corresponding to ratings of 3 or 4) in each of the 9 profession-wide competencies.

**I. Research**

**4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES**

***Independently applies knowledge and understanding of scientific foundations independently applied to practice***

*Examples: Reviews scholarly literature related to clinical work and applies knowledge to case conceptualization; Independently applies EBP concepts in practice; Independently compares and contrasts EBP approaches with other theoretical perspectives and interventions in the context of case conceptualization and treatment planning*

***Generates knowledge***

*Examples: Engages in systematic efforts to increase the knowledge base of psychology through reviewing and/or implementing research; Uses methods appropriate to the research question, setting and/or community; Consults and partners with community stakeholders when conducting research in diverse communities*

***Applies scientific methods of evaluating practices, interventions, and programs***

*Examples: Evaluates practice activities using accepted techniques; Compiles and analyzes data on own clients (outcome measurement); Uses findings from outcome evaluation to alter intervention strategies as indicated; Participates in program evaluation*

### **3 - INTERMEDIATE KNOWLEDGE, SKILLS, AND ABILITIES**

#### **Demonstrates knowledge, understanding, and application of the concept of evidence-based practice**

*Examples: Applies EBP concepts in case conceptualization, treatment planning, and interventions in consultation with supervisor; Works with supervisor to compare and contrast EBP approaches with other theoretical perspectives and interventions in the context of case conceptualization and treatment*

#### **Demonstrates development of skills and habits in seeking, applying, and evaluating theoretical and research knowledge relevant to the practice of psychology**

*Examples: Demonstrates understanding of research methods and techniques of data analysis; Demonstrates research and scholarly activity, which may include presentations at conferences, participation in research teams, submission of manuscripts for publication; Demonstrates being a critical consumer of research*

#### **Demonstrates knowledge of application of scientific methods to evaluating practices, interventions, and programs**

*Examples: Describes how outcomes are measured in each practice activity; Demonstrates knowledge of program evaluation*

### **2 - BASIC KNOWLEDGE, SKILLS, AND ABILITIES**

#### **Understands the scientific foundation of professional practice**

*Examples: Understands the development of evidence-based practice in psychology (EBP) as defined by APA; Displays understanding of the scientific foundations of the competencies; Cites scientific literature to support an argument when appropriate; Evaluates scholarly literature on a practice-related topic as needed*

#### **Participates effectively in scientific endeavors when available**

*Examples: Demonstrates understanding that psychologists evaluate the effectiveness of their professional activities; Open to scrutiny of one's work by peers and faculty; Writes literature review; Assists faculty/supervisors with research projects*

### **1. MINIMAL KNOWLEDGE, SKILLS, AND ABILITIES**

#### **Competency Rating(s):**

\_\_\_\_ Demonstrates the substantially independent ability to critically evaluate research or other scholarly activities (e.g., case conference, presentation, publications).

\_\_\_\_ Disseminates research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.

#### **Comments (include dates of direct observation):**

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## **II. Ethical and Legal Standards**

### **4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES**

**Demonstrates advanced knowledge and application of the APA Ethical Principles and Code of Conduct and other relevant ethical, legal and professional standards and guidelines**

*Examples: Addresses complex ethical and legal issues; Articulates potential conflicts in complex ethical and legal issues; Seeks to prevent problems and unprofessional conduct; Demonstrates advanced knowledge of typical legal issues, including child and elder abuse reporting, HIPAA, confidentiality, and informed consent*

**Independently utilizes an ethical decision-making model in professional work**

*Examples: Applies applicable ethical principles and standards in professional writings and presentations; Applies applicable ethics concepts in research design and subject treatment; Applies ethics and professional concepts in teaching and training activities; Develops strategies to seek consultation regarding complex ethical and legal dilemmas; Takes appropriate steps when others behave unprofessionally; Identifies potential conflicts between personal belief systems, APA Ethics Code and legal issues in practice*

**Independently integrates ethical and legal standards with all competencies**

*Examples: Demonstrates adherence to ethical and legal standards in professional activities; Takes responsibility for continuing professional development*

### **3 - INTERMEDIATE KNOWLEDGE, SKILLS, AND ABILITIES**

**Demonstrates intermediate level knowledge and understanding of the APA Ethical Principles and Code of Conduct and other relevant ethical/professional codes, standards and guidelines, laws, statutes, rules, and regulations**

*Examples: Identifies ethical dilemmas effectively; Actively consults with supervisor to act upon ethical and legal aspects of practice; Addresses ethical and legal aspects within the case conceptualization; Discusses ethical implications of professional work; Recognizes and discusses limits of own ethical and legal knowledge; Demonstrates intermediate knowledge of typical legal issues, including child and elder abuse reporting, confidentiality, and informed consent*

**Demonstrates knowledge and application of an ethical decision-making model; applies relevant elements of ethical decision making to a dilemma**

*Examples: Uses an ethical decision-making model when discussing cases in supervision; Identifies ethical implications in cases and understands the ethical elements present in ethical dilemma or question; Discusses ethical dilemmas and decision making in supervision, staff meetings, presentations, practicum settings*

**Integrates own moral principles/ethical values in professional conduct**

*Examples: Is able to articulate knowledge of own moral principles and ethical values in discussions with supervisors and peers about ethical issues; Is able to spontaneously discuss intersection of personal and professional ethical and moral issues*

### **2 - BASIC KNOWLEDGE, SKILLS, AND ABILITIES**

**Demonstrates basic knowledge of the principles of the APA Ethical Principles and Code of Conduct [ethical practice and basic skills in ethical decision making]; demonstrates beginning level knowledge of legal and regulatory issues in the practice of psychology that apply to practice**

*Examples: Demonstrates beginning knowledge of typical legal issues, including child and elder abuse reporting, confidentiality, and informed consent; Identifies key documents/policies that guide the practice of psychology (e.g., APA Ethical Principles and Code of Conduct)*

**Demonstrates awareness of the importance of applying an ethical decision model to practice**

*Examples: Recognizes the importance of basic ethical concepts applicable in initial practice (e.g. child abuse reporting, informed consent, confidentiality, multiple relationships, and competence); Demonstrates awareness of an ethical decision-making model applied to case vignettes*

**Displays ethical attitudes and values**

*Examples: Evidences desire to help others; Shows honesty and integrity; values ethical behavior; Demonstrates personal courage consistent with ethical values of psychologists; Displays appropriate boundary management*

**1 - MINIMAL KNOWLEDGE, SKILLS, AND ABILITIES**

**Competency Rating(s):**

\_\_\_\_\_ Knowledgeable of and acts in accordance with each of the following: the current version of the APA Ethical Principles of Psychologists 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 as they arise, and applies ethical decision-making processes in order to resolve the dilemmas.

\_\_\_\_\_ Conducts self in an ethical manner in all professional activities.

**Comments (include dates of direct observation):**

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**III. Individual and Cultural Diversity**

**4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES**

***Independently monitors and applies knowledge of self as a cultural being in assessment, treatment, and consultation***

*Examples: Uses knowledge of self to monitor and improve effectiveness as a professional; Seeks consultation or supervision when uncertain about diversity issues*

***Independently monitors and applies knowledge of others as cultural beings in assessment, treatment, and consultation***

*Examples: Uses knowledge of others to monitor and improve effectiveness as a professional; Seeks consultation or supervision when uncertain about diversity issues with others*

**3 - INTERMEDIATE KNOWLEDGE, SKILLS, AND ABILITIES**

***Monitors and applies knowledge of self as a cultural being in assessment, treatment, and consultation***

*Examples: Uses knowledge of self to monitor effectiveness as a professional; Initiates supervision about diversity issues*

***Applies knowledge of others as cultural beings in assessment, treatment, and consultation***

*Examples: Demonstrates understanding that others may have multiple cultural identities; Initiates supervision about diversity issues with others*

**Applies knowledge of the role of culture in interactions in assessment, treatment, and consultation of diverse others**

*Examples: Understands the role that diversity may play in interactions with others; Initiates supervision about diversity issues in interactions with others*

**Applies knowledge, sensitivity, and understanding regarding individual and cultural difference (ICD) issues to work effectively with diverse others in assessment, treatment, and consultation**

*Examples: Demonstrates knowledge of ICD literature and APA policies, including guidelines for practice with diverse individuals, groups and communities; Works effectively with diverse others in professional activities; Demonstrates awareness of effects of oppression and privilege on self and others*

**2 - BASIC KNOWLEDGE, SKILLS, AND ABILITIES**

**Demonstrates knowledge, awareness, and understanding of one's own dimensions of diversity and attitudes towards diverse others**

*Examples: Articulates how ethnic group values influence who one is and how one relates to other people; Articulates dimensions of diversity (e.g., race, gender, sexual orientation, age, disability, SES, etc.)*

**Demonstrates knowledge, awareness, and understanding of other individuals as cultural beings**

*Examples: Demonstrates knowledge, awareness and understanding of the way culture and context shape the behavior of other individuals; Articulates beginning understanding of the way culture and context are a consideration in working with clients*

**Demonstrates knowledge, awareness, and understanding of interactions between self and diverse others**

*Examples: Demonstrates knowledge, awareness and understanding of the way culture and context shape interactions between and among individuals; Articulates beginning understanding of the way culture and context are a consideration in the therapeutic relationship*

**Demonstrates basic knowledge of and sensitivity to the scientific, theoretical, and contextual issues related to Individual and Cultural Differences (ICD) as they apply to professional psychology. Understands the need to consider ICD issues in all aspects of professional psychology work (e.g., assessment, treatment, research, relationships with colleagues)**

*Examples: Demonstrates basic knowledge of literatures on individual and cultural differences and engages in respectful interactions that reflect this knowledge; Seeks out literature on individual and cultural differences to inform interactions with diverse others*

**1 - MINIMAL KNOWLEDGE, SKILLS, AND ABILITIES**

**Competency Rating(s):**

\_\_\_\_\_ Demonstrates an understanding of how own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves.

\_\_\_\_\_ Evidences knowledge of the current theoretical and empirical knowledge base as it relates to diversity in all professional activities including research, training, supervision/consultation, and service.

\_\_\_\_ Demonstrates the ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles.

\_\_\_\_ Demonstrates the ability to apply a framework for working effectively with areas of individual and cultural diversity.

\_\_\_\_ Demonstrates the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own.

**Comments (include dates of direct observation):**

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#### **IV. Professional Values, Attitudes and Behaviors**

##### **4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES**

***Monitors and independently resolves situations that challenge professional values and integrity; Conducts self in a professional manner across settings and situations; Independently accepts personal responsibility across settings and contexts***

***Displays consolidation of professional identity as a psychologist; demonstrates knowledge about issues central to the field; integrates science and practice***

***Demonstrates reflectivity (self-examination) in context of professional practice (reflection-in-action or "thinking on your feet" in-the-moment about personal feelings and professional theories in use); acts skillfully upon reflection; uses self as a therapeutic tool***

***Accurately self-assesses competence in all competency domains; integrates self-assessment in practice; recognizes limits of knowledge/skills and acts to address them; has extended plan to enhance knowledge/skills***

***Self-monitors issues related to self-care and promptly intervenes when disruptions occur***

***Evaluates, negotiates, and implements feedback from others***

***Examples: engages supervisor in discussion of technique choice; raises questions and concerns about supervision and supervisor's approach as needed; acknowledges value of feedback even if incompatible with one's own views and discusses reasons for incompatibility non-defensively***

##### **3 - INTERMEDIATE KNOWLEDGE, SKILLS, AND ABILITIES**

***Adheres to professional values and infuses those values into work as psychologist-in-training; recognizes situations that challenge adherence to professional values; Communication and physical conduct (including attire) is professionally appropriate, across different settings; Accepts responsibility for own actions***

***Displays emerging professional identity as psychologist; uses resources (e.g., supervision, literature) for professional development***

***Displays broadened self-awareness; utilizes self-monitoring; displays reflectivity (self-examination) regarding professional practice; uses resources to enhance reflectivity; demonstrates elements of reflection-in-action (“thinking on your feet” in-the-moment about personal feelings and professional theories in use)***

***Demonstrates broad, accurate self-assessment of competence; consistently monitors and evaluates practice activities; works to recognize limits of knowledge/skills, and to seek means to enhance knowledge/skills***

***Monitors issues related to self-care with supervisor; understands the central role of self-care to effective practice***

***Accepts and implements feedback from others in a non-defensive manner***

*Examples: pursues understanding feedback and learning how to implement successfully rather than suggesting ways the feedback isn’t compatible with one’s stance or other reasons feedback won’t work; listens to suggestions from supervisor and adapts professional behavior in accord with supervisory feedback; welcomes feedback graciously*

***Provides feedback to others in an empathic, supportive, non-critical fashion***

*Examples: provides feedback to supervisor regarding supervisory process; provides thoughtful, helpful feedback to colleagues in case disposition meetings regarding case conceptualization and clinical technique; provides effective feedback to clients regarding outcome of assessment*

## **2 - BASIC KNOWLEDGE, SKILLS, AND ABILITIES**

***Understands professional values; Shows honesty and integrity; Values ethical behavior; Responsible;***

***Understands how to conduct oneself in a professional manner; Accountable and reliable***

*Examples: follows through on commitments; shows care in speaking about confidential client material; shows respect for whole client; does not label client pejoratively; is respectful and considerate in interactions with support staff*

***Demonstrates beginning understanding of self as professional; “thinking like a psychologist”***

***Displays basic self-awareness and basic reflectivity (self-examination) regarding professional practice***

***Demonstrates knowledge of profession-wide competencies; engages in initial self-assessment re: competencies***

***Understands the importance of self-care in effective practice; demonstrates knowledge of self-care methods; attends to self-care***

***Listens to and acknowledges feedback from others***

*Examples: acknowledges potential challenges and ways to overcome challenges; does not demonstrate non-verbal rejection such as changing subjects or giving a cursory acknowledgement; attentive to others’ ideas and perspectives on own ideas and work; open to feedback*

***Demonstrates willingness to admit errors***

*Examples: pursues correction of errors rather than shifting focus to errors of others; acknowledges mistakes forthrightly*

## **1 - MINIMAL KNOWLEDGE, SKILLS, AND ABILITIES**

**Competency Rating(s):**



\_\_\_\_ Behaves in ways that reflect the values and attitudes of psychology, including cultural humility, integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others

\_\_\_\_ Engages in self-reflection regarding one's personal and professional functioning; engage 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 they progress across levels of training

**Comments (include dates of direct observation):**

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## **V. Communication and Interpersonal Skills**

### **4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES**

***Demonstrates accurate empathy for feelings that are covertly expressed by others or are outside the awareness of others, as well as in complex, challenging and/or novel situations; Demonstrates compassion for others who are dissimilar from themselves, who express negative affect (e.g., hostility), and/or who seek care for proscribed behavior, such as violence, predation, or dangerousness***

***Demonstrates appropriate and effective boundary management in complex, challenging, and or novel situations with others***

*Examples: maintains professional demeanor with clients who test the limits; proactively understands multiple roles of self and others and the boundary implications*

***Effectively negotiates conflictual, difficult, and complex professional relationships including those with individuals and groups that differ significantly from themselves***

*Examples: actively seeks others' opinions; generates constructive solutions even when others are defensive; initiates resolution strategies across a variety of settings; modulates approach to context rather than using the same skills across situations; knows how to consult about the process of a problematic interaction as opposed to just the content of the interaction*

***Verbal, nonverbal, and written communications are informative, articulate, succinct, sophisticated, and well-integrated, and demonstrate thorough grasp of professional language and concepts***

*Examples: uses appropriate professional language when dialoguing with other healthcare providers; prepares sophisticated and compelling case reports; treatment summaries are concise, yet comprehensive*

### **3 - INTERMEDIATE KNOWLEDGE, SKILLS, AND ABILITIES**

***Demonstrates accurate empathy for feelings that are overtly expressed by others, in a manner that furthers the goals of professional activities***

*Examples: empathy promotes a positive therapeutic relationship; clients express feeling supported*

**Establishes and maintains appropriate professional boundaries**

*Examples: begins and ends treatment sessions on time; establishes expectations regarding fee payment and addresses nonpayment with clients; establishes clear role expectations for client; can identify and appropriately respond to questions from clients, including typical conversational questions and intrusive questions*

**Actively addresses problematic interpersonal situations using verbal and nonverbal skills**

*Examples: addresses and works with patients to resolve strains or ruptures in the therapeutic alliance; initiates discussion regarding disagreements with colleagues or supervisors and does so in a timely manner; efforts to resolve disagreements do not escalate negative affect among the parties involved; effectively articulates differences and possible options to resolve; seeks guidance from appropriate persons*

**Communicates clearly using verbal, nonverbal, and written skills in a professional context**

*Examples: communication is understandable, consistent across expressive modalities; prepares clearly written assessment reports; presents clinical process to supervisor in a succinct, organized, well-summarized way; provides verbal feedback to client regarding assessment and diagnosis using language the client can understand; presents clear, appropriately detailed clinical material*

**Demonstrates clear understanding and use of professional language**

*Examples: uses professional terms and concepts appropriately and clearly in discussions, case reports, etc.; understands terms and concepts used in professional texts and in others' case reports*

**2 - BASIC KNOWLEDGE, SKILLS, AND ABILITIES**

**Expresses desire to help others; Demonstrates compassion (awareness of suffering and the wish to relieve it) even for others who are dissimilar from themselves; Demonstrates empathic listening, behavior, and attitude**

*Examples: accurately reflects others' feelings*

**Demonstrates understanding of appropriate boundaries and displays general ability to manage boundaries**

*Examples: recognizes differences between personal and professional relationships; differentiates session content in the context of their own interests and the client's therapeutic interests*

**Addresses problematic interpersonal situations using verbal and nonverbal skills**

*Examples: verbally acknowledges and engages in discussion of disagreements with colleagues and instructors; does not deny or minimize problematic situations when raised; tolerates discussion of problematic situations without overly hostile or defensive stance; generates possible resolution strategies or ways to handle problematic encounters*

**Communicates ideas, feelings, and information clearly using verbal, nonverbal, and written skills**

*Examples: written work is organized, easy to understand, and conveys the main points; shares opinions with others using language that others can understand; non-verbal behavior is consistent with verbal communications*

**1 - MINIMAL KNOWLEDGE, SKILLS, AND ABILITIES**

**Competency Rating(s):**

\_\_\_\_\_ Develops and maintains effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services.

\_\_\_\_ Demonstrates a thorough grasp of professional language and concepts; produces, comprehends, and engages in communications that are informative and well-integrated.

\_\_\_\_ Demonstrates effective interpersonal skills and the ability to manage difficult communication well.

**Comments (include dates of direct observation):**

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## **VI. Assessment**

### **4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES**

*Independently selects and implements multiple methods and means of evaluation in ways that are responsive to and respectful of diverse individuals, couples, families, groups and context*

*Independently understands the strengths and limitations of diagnostic approaches and interpretation of results from multiple measures for diagnosis and treatment planning*

*Independently selects and administers a variety of assessment tools and integrates results to accurately evaluate referral questions appropriate to the practice site and broad area of practice*

*Utilizes case formulation and diagnosis for intervention planning in the context of stages of human development and diversity*

*Independently and accurately conceptualizes the multiple dimensions of the case based on the results of assessment*

*Communicates results in written and verbal form clearly, constructively, and accurately in a conceptually appropriate manner*

### **3 - INTERMEDIATE KNOWLEDGE, SKILLS, AND ABILITIES**

*Selects assessment measures with attention to issues of reliability and validity*

*Demonstrates awareness of the strengths and limitations of administration, scoring and interpretation of traditional assessment measures as well as related technological advances*

*Selects appropriate assessment measures to answer diagnostic questions*

*Applies concepts of normal/abnormal behavior to case formulation and diagnosis in the context of stages of human development and diversity*

*Utilizes systematic approaches of gathering data to inform clinical decision-making*

*Writes adequate assessment reports and progress notes and communicates assessment findings verbally to client*

### **2 - BASIC KNOWLEDGE, SKILLS, AND ABILITIES**

*Demonstrates basic knowledge of the scientific, theoretical, and contextual basis of test construction and interviewing*

*Demonstrates basic knowledge of administration and scoring of traditional assessment measures, models and techniques, including clinical interviewing and mental status exam*

*Demonstrates knowledge of measurement across domains of functioning and practice settings*

*Demonstrates basic knowledge regarding the range of normal and abnormal behavior in the context of stages of human development and diversity*

*Demonstrates basic knowledge of formulating diagnosis and case conceptualization*

*Demonstrates awareness of models of report writing and progress notes*

**1 - MINIMAL KNOWLEDGE, SKILLS, AND ABILITIES**

**Competency Rating(s):**

\_\_\_ Demonstrates current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology.

\_\_\_ Demonstrates understanding of human behavior within its context (e.g., family, social, societal and cultural).

\_\_\_ Demonstrates the ability to apply the knowledge of functional and dysfunctional behaviors, including context, to the assessment and/or diagnostic process.

\_\_\_ Selects and applies assessment methods that draw from the empirical literature and that reflect the science of measurement and psychometrics; 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, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective.

\_\_\_ Communicates the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.

**Comments (include dates of direct observation):**

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## VII. Intervention

### 4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES

*Independently plans interventions; case conceptualizations and intervention plans are specific to case and context*

*Displays clinical skills with a wide variety of clients and uses good judgment even in unexpected or difficult situations*

*Implements interventions with fidelity to empirical models and flexibility to adapt where appropriate; Independently applies knowledge of evidence-based practice, including intervention, and other psychological applications, clinical expertise, and client preferences*

*Independently evaluates treatment progress and modifies planning as indicated, even in the absence of established outcome measures*

### 3 - INTERMEDIATE KNOWLEDGE, SKILLS, AND ABILITIES

*Formulates and conceptualizes cases and plans interventions utilizing at least one consistent theoretical orientation*

*Displays clinical skills*

*Implements evidence-based interventions; Applies knowledge of evidence-based practice, including intervention, and other psychological applications, clinical expertise, and client preferences*

*Evaluates treatment progress and modifies treatment planning as indicated, utilizing established outcome measures*

### 2 - BASIC KNOWLEDGE, SKILLS, AND ABILITIES

*Displays basic understanding of the relationship between assessment and intervention*

*Displays basic helping skills*

*Demonstrates basic knowledge of intervention strategies*

*Demonstrates basic knowledge of scientific, theoretical, and contextual bases of intervention and other psychological applications; demonstrates basic knowledge of the value of evidence-based practice and its role in health service psychology*

*Demonstrates basic knowledge of the assessment of intervention progress and outcome*

### 1 - MINIMAL KNOWLEDGE, SKILLS, AND ABILITIES

#### **Competency Rating(s):**

\_\_\_\_\_ Establishes and maintains effective relationships with the recipients of psychological services.

\_\_\_ Develops evidence-based intervention plans specific to the service delivery goals.

\_\_\_ Implements interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.

\_\_\_ Demonstrates the ability to apply the relevant research literature to clinical decision making.

\_\_\_ Modifies and adapts evidence-based approaches effectively when a clear evidence-base is lacking.

\_\_\_ Evaluates intervention effectiveness, and adapts intervention goals and methods consistent with ongoing evaluation.

**Comments (include dates of direct observation):**

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## **VIII. Supervision**

### **4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES**

***Understands the ethical, legal, and contextual issues of the supervisor role***

***Demonstrates knowledge of supervision models and practices; demonstrates knowledge of and effectively addresses limits of competency to supervise***

***Engages in professional reflection about their clinical relationships with supervisees, as well as supervisees' relationships with their clients***

***Provides effective supervised supervision to less advanced students, peers, or other service providers in typical cases appropriate to the service setting***

### **3 - INTERMEDIATE KNOWLEDGE, SKILLS, AND ABILITIES**

***Demonstrates knowledge of, purpose for, and roles in supervision***

***Identifies and tracks progress achieving the goals and tasks of supervision; demonstrates basic knowledge of supervision models and practices***

***Demonstrates knowledge of the supervision literature and how clinicians develop to be skilled professionals***

***Provides helpful supervisory input in peer and group supervision***

### **2 - BASIC KNOWLEDGE, SKILLS, AND ABILITIES**

***Demonstrates basic knowledge of expectations for supervision***

***Displays interpersonal skills of communication and openness to feedback***

1 - MINIMAL KNOWLEDGE, SKILLS, AND ABILITIES

**Competency Rating(s):**

\_\_\_ Applies supervision knowledge in direct or simulated practice with psychology trainees, or other health professionals. Examples of direct or simulated practice examples of supervision include, but are not limited to, role-played supervision with others, and peer supervision with other trainees.

\_\_\_ Applies the supervisory skill of observing in direct or simulated practice.

\_\_\_ Applies the supervisory skill of evaluating in direct or simulated practice.

\_\_\_ Applies the supervisory skills of giving guidance and feedback in direct or simulated practice.

\_\_\_ Demonstrates the ability to independently apply their knowledge and approach to issues related to individual and cultural differences as they apply to the supervision process and relationships.

**Comments (include dates of direct observation):**

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**IX. Consultation and Interprofessional/ Interdisciplinary Skills**

4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES

*Demonstrates awareness of multiple and differing worldviews, roles, professional standards, and contributions across contexts and systems; demonstrates advanced knowledge of common and distinctive roles of other professionals*

*Demonstrates advanced knowledge of and ability to display the skills that support effective interdisciplinary team functioning*

*Participates in and initiates interdisciplinary collaboration/consultation directed toward shared goals*

*Develops and maintains collaborative relationships over time despite differences*

*Determines situations that require different role functions and shifts roles accordingly to meet referral needs; Demonstrates knowledge of and ability to select appropriate and contextually sensitive means of assessment/data gathering that answers consultation referral question; Applies knowledge to provide effective assessment feedback and to articulate appropriate recommendations; Applies literature to provide effective consultative services (assessment and intervention) in most routine and some complex cases*

3 - INTERMEDIATE KNOWLEDGE, SKILLS, AND ABILITIES

*Demonstrates knowledge of the viewpoints and contributions of other professions/professionals*

*Demonstrates knowledge of strategies that promote interdisciplinary collaboration vs. multidisciplinary functioning*

*Demonstrates knowledge of how participating in interdisciplinary collaboration/consultation can be directed toward shared goals*

*Develops and maintains collaborative relationships and respect for other professionals*

*Demonstrates knowledge of the consultant's role and its unique features as distinguished from other professional roles (such as therapist, supervisor, teacher); Identifies literature and knowledge about relevant consultation methods (assessment and intervention) within systems, clients, or settings and the process of informing consultee of assessment findings.*

**2 - BASIC KNOWLEDGE, SKILLS, AND ABILITIES**

*Cooperates with others*

*Demonstrates awareness of the benefits of forming collaborative relationships with other professionals*

**1 - MINIMAL KNOWLEDGE, SKILLS, AND ABILITIES**

**Competency Rating(s):**

\_\_\_ Demonstrates knowledge and respect for the roles and perspectives of other professions.

\_\_\_ Applies this knowledge of consultation models and practices in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior. Direct or simulated practice examples of consultation and interprofessional/interdisciplinary skills include but are not limited to: role-played consultation with others, peer consultation, provision of consultation to other trainees.

**Comments (include dates of direct observation):**

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**SUMMARY OF STRENGTHS:**

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**AREAS FOR ADDITIONAL DEVELOPMENT (OR REMEDIATION), INCLUDING RECOMMENDATIONS:**

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**INTERN COMMENTS:**

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I have reviewed and discussed this evaluation with my supervisor.

\_\_\_\_\_  
Intern Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

## Appendix K

### Performance Planning Worksheet



**Employee's Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Department:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Supervisor's Name:** \_\_\_\_\_

1. Review employee's job description. Identify any changes in duties and responsibilities. Update job description as necessary.
2. Discuss how the employee's position relates to university, center and department mission and goals. How can the employee's performance enhance these missions/goals? Make mission statements available to the employee.
5. Establish employee goals and objectives for the year and competencies to be developed. (Refer to the most recent performance evaluation form for stated goals)
6. Set a timeline for employee completion of major projects as appropriate. Discuss methods of measurement.

	GOAL 1	GOAL 2	GOAL 3
<b>Work to be accomplished or competency to be developed</b>			
<b>Time-line</b>			
<b>Action Plan</b>			
<b>Resources needed</b>			
<b>Measures to be used</b>			

**Signature of Employee:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Supervisor:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\*PERF\***  
PERF-Perf Rev