

The South Florida Consortium Internship Program (SFCIP) Handbook

2026-2027

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INTRODUCTION

The South Florida Consortium Internship Program (SFCIP) was established by the College of Psychology (COP) of Nova Southeastern University (NSU) in 1997. It is a collaborative effort between Nova Southeastern University and cooperating agencies whose mission is to provide a full-time 12-month (2,000-hour) doctoral internship for qualified NSU psychology doctoral students. The South Florida Consortium Internship Program (SFCIP) is fully affiliated with the Clinical Psychology (Ph.D. and Psy.D.) and School Psychology (Psy.D.) doctoral programs within Nova Southeastern University's College of Psychology (COP). During Phase I of the APPIC Match, the program accepts applications exclusively from NSU students.

NSU Students are expected to familiarize themselves with all university and college policies outlined in the publications listed below, as these policies establish the standards, expectations, and procedures that apply throughout their academic experience:

[copadcal-2025-2026.pdf](#)

[25-26-student-handbook.pdf](#)

In previous years, SFCIP has relaxed this affiliation during Phase II, opening the applicant pool to candidates nationwide. The decision to expand eligibility for Phase II is made annually following Phase I and is subject to change each year.

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 accreditation status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE
Washington, DC 20002
Phone: (202) 336-5979
Email: apaaccred@apa.org
Web: accreditation.apa.org or <https://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 (SACSCOC). NSU is the largest private research university in Florida, recognized by the Carnegie Foundation as an R1 institution for the highest level of research activity. NSU is also honored with the Carnegie Community Engagement Classification and designated as an Opportunity College and University - national distinctions that reflect our

mission to make a meaningful impact. 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 fostered groundbreaking research and a commitment engagement. 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 approximately 80 full-time faculty and offers two APA-accredited doctoral programs in clinical psychology (PhD and PsyD), as well as an APA-accredited doctoral program in school psychology (PsyD). Master's programs in Counseling, General Psychology, Mental Health Counseling, and School Counseling, as well as a specialist program in School Psychology (Psy.S.). COP offers a Continuing Education 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 (ACEP™).

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, is composed of at least one representative from each member site (usually a primary supervisor), the SFCIP Chief Psychologist, as well as an intern representative who serves as the management arm of the

Operations 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 training model, which is designed to prepare interns for entry-level practice as health service psychologists who provide evidence-based services informed by scientific knowledge and research. The SFCIP emphasizes the development of broad, generalist competencies in health service psychology while recognizing that profession-wide competencies may be achieved within specialized service settings. The program is designed to provide experiential training and supervision focused on attainment of profession-wide competencies. These are balanced with formal didactic instruction, supervision, and mentoring designed to support the development of clinical knowledge, professional identity, and profession-wide competencies 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 practice and eventual licensure through the development of competence in all APA profession-wide competency domains. To achieve this aim, all interns are expected to demonstrate competency at the level expected of an entry-level health service psychologist in each profession-wide competency domain, including:

- I. **Research:** Demonstrates the substantially independent ability to critically evaluate, apply, and disseminate research or other scholarly activities (e.g., case conference, presentation, publications, program evaluation activities) at the local (including the host institution), regional, or national level.
- II. **Ethical and Legal Standards:** Demonstrates knowledge 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 an understanding of how one's own personal and cultural history may affect interactions with individuals who are different from oneself; evidences knowledge of the current theoretical and empirical literature related to diversity; integrates awareness and knowledge of individual and cultural

differences into professional practice; and independently applies this knowledge when working effectively with 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:** Develops and maintains effective relationships with a wide range of individuals; Produce and comprehend oral, nonverbal, and written communications; Demonstrate effective interpersonal skills.
- VI. Assessment:** Selects, administers, scores, and interprets assessment methods grounded in empirical literature; integrates data from multiple sources; develops case conceptualizations and recommendations; and communicates findings effectively through written and oral feedback.
- VII. Intervention:** Establishes and maintains effective therapeutic relationships; develops evidence-based intervention plans; implements interventions informed by current scientific literature; applies research findings to clinical decision-making; adapts interventions to meet individual needs; and evaluates intervention outcomes.
- VIII. Supervision:** Demonstrates knowledge of supervision theories, models, and practices and applies this knowledge in the supervision of trainees or other professionals through direct, simulated, or observational experiences, as appropriate.
- IX. Consultation and Interprofessional/Interdisciplinary Skills:** Demonstrates knowledge of and respect for the roles, perspectives, and contributions of professionals from other disciplines and applies this understanding effectively in collaborative consultation and interdisciplinary service delivery.

PROGRAM DESCRIPTION

The South Florida Consortium Internship Program (SFCIP) is a collaborative effort between Nova Southeastern University (NSU) and cooperating agencies whose mission is to provide a full-time, 12-month (2,000-hour) doctoral internship for qualified doctoral students in 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 and critical evaluators of scientific research who provide direct services with the understanding that science informs sound practice. Upon completion of the internship, interns will have acquired the knowledge, skills, and professional competencies necessary to progress to postdoctoral training and practice as entry-level health service psychologists.

SFCIP members are committed to providing interns with opportunities to acquire generalist competencies through instruction, supervision, and experience in a broad spectrum of functions performed by health service psychologists. 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 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% (10 hours) and a maximum of 24 hours are devoted to direct clinical service activities. Under exceptional circumstances, the maximum number of direct service hours may be increased with the written approval of the Director of Internship Training. Interns are responsible for documenting their direct and indirect services monthly by completing the Intern Activity Log (Appendix B), obtaining the site supervisor's signature, and submitting the completed log to the Director of Internship Training each month.

The community-based training sites that comprise the SFCIP serve a diverse range of clinical populations and provide interns with supervised clinical training experiences during a one-year placement at a consortium partner site, supplemented by weekly training activities at NSU. All SFCIP interns are expected to demonstrate competency at the level expected of an entry-level health service psychologist in a broad range of intervention, assessment, consultation, program evaluation, and supervision competencies within community-based settings. While some sites serve specialized populations (e.g., clients with primary diagnoses of eating disorders or medical conditions), thereby providing exposure to specialized skills, the SFCIP as a whole is organized to provide generalist training through (a) experiential training, (b) supervision, and (c) training seminars. Interns are expected to integrate ethical principles, scientific knowledge, individual and cultural diversity considerations, and evidence-based practice across all areas of professional functioning.

Therefore, all SFCIP interns are required to gain experience in the following areas:

1. **Assessment:** Interns regularly conduct clinical interviews and screenings to refine diagnostic and treatment-planning skills. All interns complete a minimum of six psychological evaluations during the internship year under the supervision of a licensed psychologist. Interns document each completed evaluation by recording the evaluation date and obtaining their supervisor's signature on the Documentation of Completed Reports Form (Appendix C). While evaluation types, instruments, and report lengths may vary across sites, all SFCIP intern evaluations must include, at a minimum:
 - Relevant history
 - Direct observation
 - Formal assessment instruments

- Integration of all assessment data to yield diagnostic impressions and recommendations

In addition, interns have opportunities to consult with multiple supervisors regarding assessment and report writing and are exposed to a broad range of assessment instruments and report-writing approaches through weekly seminars.

Assessment activities are expected to reflect current empirical literature, culturally responsive practices, and the integration of data from multiple sources to inform case conceptualization, diagnosis, and treatment recommendations.

2. **Intervention:** All SFCIP interns are assigned a diverse client caseload and work in a variety of treatment modalities (e.g., individual, couples, family, and group therapy). Clients represent diverse socioeconomic backgrounds, racial and ethnic identities, gender identities, sexual orientations, religions, abilities, and presenting concerns. Through 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 responsive interventions. Interns are expected to develop, implement, and evaluate evidence-based interventions that are responsive to clients' developmental, cultural, and contextual needs.
3. **Consultation:** Interns participate in supervised consultation activities with other professionals. These activities may include staff in-service training, consultation within interprofessional teams, and consultation across a variety of service settings.

Consultation experiences are designed to promote effective interdisciplinary collaboration and enhance interns' understanding of the roles and contributions of professionals from other disciplines.

4. **Supervision:** Interns have opportunities to provide individual and group supervision to practicum students, who are themselves supervised by psychology training staff. At sites without practicum students, interns may provide supervision, mentoring, consultation, and/or training to other staff members as appropriate.

Supervision experiences are intended to foster knowledge of supervision models, ethical considerations in supervision, developmental approaches to supervision, and the provision of constructive feedback.

5. **Research:** Across the consortium, interns participate in program evaluation seminars and complete a Logic Model group project to enhance their knowledge and skills in this area (see Appendix D). Interns are required to include a critical review of the research literature in their intern presentations (see Appendix F). Supervision includes discussions regarding the empirical support for a variety of assessment and intervention approaches used with clients, and interns are exposed to a broad range of clinical and scientific

knowledge through weekly training activities (e.g., Professional Development seminars, Grand Rounds, and intern presentations).

These activities are designed to strengthen interns' ability to critically evaluate, apply, and communicate scientific knowledge in support of evidence-based psychological practice.

A. CONSORTIUM PARTNER SITES:

Broward Health Medical Center (BHMC) – Yanique Levy-Brown, PsyD

About BHMC:

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, Pediatric ER, behavioral health, emergency medicine, family medicine, oncology, bariatric surgical procedures, palliative care, and cardiac & pulmonary rehabilitation programs. Additionally, Interns will complete a minimum of 6 psychological batteries as a part of the pre-bariatric evaluation process. Interns are required to be on-call 24/7 at least one 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.

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, 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.

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' supervisor is 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 volunteering 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. Due to the conclusion of the Public Health Emergency on May 11, 2023, use of surgical masks is no longer mandatory, however, still recommended in this setting. These modifications are subject to change based on the current CDC and DOH guidelines.

Supervisor's Contact Information:

Yanique Levy-Brown, PsyD, yl176@nova.edu
Main Office Number: (954) 355-4401

Broward Sheriff's Office (BSO) - Timothy Ludwig, PhD

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 Residential Housing 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 Residential Housing 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 others 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 may 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 the 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 inmates will provide psychoeducational groups in a classroom setting. 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 residential housing 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 SFCIP requirements, each intern will attend weekly professional development seminars offered by NSU. 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 NSU 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 1st. In accordance with NSU 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

The Department of Detention (DOD) has resumed normal operations; however, still maintains several COVID related precautions such as testing of inmates that are symptomatic; placing units on quarantine when COVID positive inmates are identified, and encouragement of enhanced cleaning and hygiene practices. In the past, during periods of high COVID transmission rates, a number of preventative procedures have been implemented by DOD that have since ended. These precautions may be reinstituted based on the COVID trends at the time.

Supervisor's Contact Information:

Timothy E. Ludwig, Ph.D., CCHP, timothy_ludwig@sheriff.org
Main Office Number: (954) 831-5467

Child Provider Specialists – Mikaela Rizzo, PsyD

About Child Provider Specialists:

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, and parent and professional education. There are also opportunities for 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 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 feedback 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 may 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 will become familiar with 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.
- Additionally, because CPS offers integrated services, interns will be exposed to and have the opportunity to consult 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 Jenelly Pineda, Psy.D. In addition, there will also be opportunities for supervision provided by senior psychologists within the practice. 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 with more flexibility to handle more complex cases and work closely with related professionals in an integrated team format.

Supervisor’s Contact Information:

Jenelly Pineda, PsyD, jpineda@childproviderspecialists.org
Main Office Number: 954-577-3396

The Renfrew Center, Coconut Creek, Florida – Alissa Baum, PsyD

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 100,000 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 primarily RTC (residential), with a potential opportunity for 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 dietitians, 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 currently providing both in-person and virtual services.

Supervisors:

Heather Maio, PsyD
Alissa Baum, PsyD
Janine Furdella, PhD

Supervisor's Contact Information:

Alissa Baum, PsyD, CEDS-C, abaum@renfrewcenter.com
Main Office Number: (954) 698-9222 ext. 2103

Northstar Behavioral Health/Palm Beach Behavioral Health and Wellness – Kelly Everson, PsyD

Northstar Behavioral Health/Palm Beach Behavioral Health and Wellness (PBBHW) is excited to announce the start of their psychology pre-doctoral internship program and a proud new member of the South Florida Consortium Internship Program. Northstar is accepting applications to fill two full-time internships to begin August 2027.

Interns will spend time training at Northstar's PHP/IOP level of care, Northstar Day, an intensive program for neurodivergent children ages 5-12 years old. The internship focuses on individual, group, and family therapy and psychological/psycho-educational assessment of personality, mood, intellectual and behavioral disorders, in addition to extensive experience with diagnosing neurodivergence, including Autism Spectrum Disorder and Attention-Deficit/Hyperactivity Disorder. PBBHW has a complete library of psychological testing materials for the interns and psychologists to use. In addition to psychological testing, interns will carry a case load of individual clients and participate and lead in a variety of group therapy sessions including CBT/DBT, executive functioning, process, and social skills group. Opportunities for family therapy will be available based on program needs. Interns are required to present case conceptualization/rounds presentations based on current cases throughout the year. Interns will work alongside other health professional in a true milieu environment, including Occupational Therapists, Speech and Language Pathologists, Special Education Teachers and Psychiatrist/Nurse Practitioners. There is a possibility for the intern to have mentorship and/or supervisory experience with practicum students. PBBHW also employs postdoctoral residents who are always available for collegial mentorship and assistance.

Interns will be required to complete a Level II Background check and fingerprinting prior to starting internship.

Supervisors Contact Information:

Kelly Everson, PsyD
drkelly@pbbhw.com
drkelly@northstarbhc.com
(561) 429-2397
Northstardayprogram.com
Pbbhw.com

Brandi Rials, PsyD
drbrandi@pbbhw.com
drbrandi@northstarbhc.com

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 exposed 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 monthly 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.

Consistent with APA Standards of Accreditation, supervisors regularly evaluate intern performance in the profession-wide competency domains and provide ongoing formative feedback to facilitate competency development.

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.

All SFCIP interns are also assigned to an NSU postdoctoral resident at the outset of the training year and meet with their assigned resident monthly 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 toward 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 two- to 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 maintained in secure, locked storage and/or password-protected electronic systems with access restricted to authorized training personnel. The records for recent training years are maintained by the Director of Internship Training. Archived records are stored in secure university facilities. Training records are retained in accordance with Nova Southeastern University policies and applicable legal and accreditation requirements. In the event of formal grievances, remediation plans, due process proceedings, or other training-related actions, documentation will be maintained within the intern’s training file.

DUE PROCESS AND GRIEVANCE PROCEDURES

It is the policy of the South Florida Consortium Internship Program (SFCIP) to provide interns due process regarding any concerns that may arise about their performance or functioning. This policy is guided by the principles of providing interns with ongoing, constructive feedback about their performance, offering opportunities and support for remediation when needed, and advising interns of their rights, responsibilities, and available processes for addressing concerns or grievances. This policy is enacted with respect for intern diversity in all areas of professional functioning. Accordingly, SFCIP supervisors work with each intern’s professional developmental level, theoretical orientation, personality, and cultural background. The SFCIP Intern Training Agreement (Appendix E), developed collaboratively with interns at the outset of training, establishes an individualized training plan as well as training objectives and methods within the specified SFCIP training goal areas, which together form the basis for evaluating intern performance.

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).

Informal Process

If at any time there are any concerns with 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 areas of concern. An electronic copy of written documentation shall be provided to the intern. The intern shall have the opportunity to submit a written response or clarification, which will be maintained with the documentation.

While it is difficult to operationally define every characteristic of professionalism, interns should familiarize themselves with the Intern Performance Evaluation (see Appendix J), which outlines the nine profession-wide competencies and associated performance expectations. Moreover, interns have targeted observable categories that are considered integral to professional functioning including responsible behavior, ethical behavior, intrapersonal and interpersonal functioning. Examples of these behaviors are listed below:

Responsible Behavior

- Responds constructively to feedback from supervisors.
- Demonstrates dependability in commitment (punctuality, submits work and meets with clients on time, accepts responsibility for own work).
- Successfully completes remediation plan and activities.
- Resolves issues or problems that interfere with the capacity to acquire knowledge, skills, and attitudes necessary to enter the profession, professional development, or other functioning in a satisfactory manner. Seeks appropriate guidance.
- Demonstrates professional comportment.
- Abides by the internship's policies and procedures.
- Reports immediately any change in status, including arrests, convictions, or incidents in school or field experiences when enrolled as a student.

Ethical Behavior

- Adherence to the APA Ethical Code of Conduct for Psychologists, institution policies and procedures, and applicable state of Florida laws, and adhere to clinical competency requirements (as defined above under performance evaluations).

Intrapersonal Behavior

- Displays usual and customary judgment, flexibility, discretion, self-awareness, self-reflection, and self-evaluation.
- Demonstrates the ability to function independently.
- Understands the content and potential impact of one's own beliefs and values on clients, peers, faculty, allied professionals, the public, and individuals from diverse backgrounds or histories.
- Participates in activities pursuant to professional development.

Interpersonal Behavior

- Demonstrates mature behavior.
- Presents a generally respectful, non-hostile, and cooperative attitude.
- Demonstrate social skills that facilitate interaction and communication with others; listens well, demonstrates empathy.

- Relates well to clients, peers, faulty, allied professionals, the public, and individuals from diverse backgrounds or histories.
- Is open to the process of supervision, including the provision of feedback on personal or interpersonal functioning.
- Is able to explore issues that may interfere with the appropriate provision of care or impede professional development or functioning.

Formal Process

Step 1: If the intern does not resolve 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 by the site supervisor and the Director of Internship Training (DIT) using the NSU Performance Planning Worksheet (Appendix K) to remediate any deficient areas. The performance improvement plan will be reviewed with the intern and consequently signed by the intern and primary supervisor, and a copy forwarded to the Director of Internship Training (DIT) and the Director of Clinical Training (DCT). The Performance improvement plan will focus on improving minimum competencies and/or professionalism within a clearly defined timeframe. The performance improvement plan shall include measurable objectives, specific remediation activities, methods for evaluating progress, responsible parties, and a reasonable timeline for completion. Remediation strategies may include increased supervision, additional readings, increased opportunities to practice, additional coursework, etc.

Except in cases involving imminent risk to clients, ethical violations, or legal violations, remediation plans should generally provide a minimum of thirty (30) calendar days for improvement before additional action is considered, up to and involving disciplinary action.

Step 2: If the site supervisor and intern cannot reach an agreement about the performance improvement plan, the DIT would mediate the situation.

Step 3: If the DIT was unable to resolve the situation, consultation would be requested from the intern's doctoral program Director of Clinical Training (DCT) 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 College of Psychology (COP) representative for approval prior to administering disciplinary action beyond a verbal warning.

The Director of Internship Training (DIT) reviews any behaviors or conduct that may warrant 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 members of the SFCIP

EB, 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/or the DCT of the doctoral program that the student is affiliated with. Additionally, the DIT would consult with APPIC's Informal Problem Consultation resource prior to termination from the internship program. Taken together the aforementioned steps, 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 intern's doctoral program would be kept apprised of the progress. The SFCIP site supervisor(s) would be informed about any decisions or actions taken by the university. A NSU-specific student 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

NSU-specific student Interns can contact NSU OHR to explore options of any disciplinary actions affecting their employment.

NSU-specific student 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 Doctoral Handbook of their program.

Intern Grievances

The College of Psychology (COP), SFCIP Executive Board (EB), 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. A grievance procedure may be necessary if an intern has a complaint against the Internship training program. 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.

Informal Procedure

Step 1: Before initiating a formal appeal, the intern must first meet with the party or parties against whom the complaint is being made and present supporting information in an attempt to resolve the matter informally. The informal grievance should be presented to the appropriate party or parties within 30 working days of its occurrence, where informal resolution will continue. If these efforts successfully resolve the conflict, no further action is necessary. However, if all reasonable informal efforts fail, the intern may proceed to Step 2 of the process.

Step 2: If the complaint is not resolved, then the intern should advise the Director of Internship Training (DIT) who would attempt to facilitate the mediation or resolution of the concern. During

this meeting between the intern and DIT, the intern should provide all relevant details and a proposed resolution. This continuation of the informal process may include holding a meeting or having discussions with all involved parties related to the relevant details of the complaint. Should the issue involve the DIT, the intern would advise the SFCIP Chief Psychologist who would attempt to mediate or resolve the situation.

Formal Procedure

Step 3: If the intern believes that the informal process above is unsuccessful in resolving the issue, the intern may file a formal written grievance with the Director of Internship Training (DIT) (or Chief Psychologist, if grievance involves the DIT) within an appropriate time frame of the initial concern. The grievance must minimally provide the following:

- A concise, clear description of the concern,
- All relevant facts and compelling supporting evidence,
- The specific remedy or remedies requested, and
- A description of all informal resolution attempted

The Director of Internship Training (DIT) (or Chief Psychologist, if grievance involves the DIT) will review the written document to determine if the complaint warrants further review. If no further review is warranted, the formal grievance will be terminated, and the intern will be provided with a brief written explanation.

Step 4: If further consideration is warranted, the Director of Internship Training (DIT) will schedule a meeting with the SFCIP Executive Board (EB). Any Executive Board member with a personal, supervisory, professional, or administrative conflict of interest related to the grievance shall recuse themselves from all deliberations and decisions regarding that grievance. During this meeting, the SFCIP EB will conduct a substantive review of all facts it deems pertinent to the grievance, and a copy of the grievance document will be provided to the party or parties involved at the DIT's discretion.

Following the meeting, and, at the board's discretion, the SFCIP EB may interview the intern and/or any other pertinent person that it judges has the information relevant to the review. No person may have legal counsel accompany them or appear on their behalf.

The EB will file a written summary, with justification, to the Dean of the COP, including whether sufficient evidence exists to uphold or overturn the action being grieved. Recommendations of the EB will also be forwarded to the appropriate site supervisor(s)/administrator(s) for review and response. The DIT will notify the intern of a determination within thirty (30) working days of receipt of the formal grievance whenever feasible. If additional time is required, the intern shall be informed in writing regarding the reason for the delay and the anticipated timeline. following the filing of the appeal. Following a review of the committee's report, the decision of the EB is final.

It is the responsibility of the SFCIP Director of Internship Training to follow-up on the response to these recommendations by ensuring that the party or parties implicated in the intern grievance

submit responses to the SFCIP EB and that all SFCIP 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 during Phase I of the APPIC Match. 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 AAPI 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:

Nicole Jimenez, PsyD
Director of Internship Training, SFCIP
Nova Southeastern University
College of Psychology
3300 S. University Drive, Ft. Lauderdale, FL 33328
954-262-5785
E-mail: nm519@nova.edu

Selection Priorities

The South Florida Consortium Internship Program (SFCIP) is fully affiliated with the clinical and school psychology doctoral programs at Nova Southeastern University's College of Psychology (NSU COP). During Phase I of the APPIC Match, the program accepts applications exclusively from NSU students.

In previous years, SFCIP has relaxed this affiliation during Phase II, opening the applicant pool to candidates nationwide. The decision to expand eligibility for Phase II is made annually following Phase I and is subject to change each year.

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 \$31,000 for a 12-month period. The university libraries, computer labs, and fitness centers are available to all SFCIP interns.

Interns who match to the SFCIP partner sites 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

Nova Southeastern University (NSU) is committed to a work environment in which all individuals are treated with respect and dignity. Individuals have the right to work in a professional atmosphere that promotes equal employment opportunities and prohibits discriminatory practices, including harassment. All relationships among individuals in the workplace are to be business-like and free of bias, prejudice, and harassment.

These policies apply to all applicants and employees, and prohibit harassment, discrimination, and retaliation, whether engaged in by fellow employees, by supervisors, or by someone not directly connected to NSU (e.g., outside vendors, consultants, or customers).

Conduct prohibited by these policies is unacceptable regardless of venue.

Please find the link below that provides direct access to the source for the most updated version of the following: Equal Employment and Nondiscrimination Policies; Equal Employment

Opportunity (EEO); Sexual and Other Unlawful Harassment Policies and Procedures; Drug-Free Schools and Campuses Policy; and Drug- And Alcohol-Free Workplace Policies.

[Employee Policy Manual | Nova Southeastern University](#)

Appendix A
Nova Southeastern University
South Florida Consortium Internship Program

2025-2026
SAMPLE

SCHEDULE OF DIDACTIC TRAINING SEMINARS & ACTIVITIES

****This calendar is subject to change****

Any CEs you will need to register for to receive the Zoom link

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Date and Location	Title	Presenter(s)
9/2/25 Maltz 2041/2052 9:00am – 5:00pm	PSC Orientation	PSC Director of Internship Training Shannon Worton, PsyD
9/5/25 Maltz 2058 9:00am – 4:00pm	SFCIP/PSC Orientation	PSC Director of Internship Training Shannon Worton, PsyD SFCIP Director of Internship Training Nicole Jimenez, PsyD
9/12/25 Online 9:00am – 12:00pm	Improving Cultural Competency for Behavioral Health Professionals Courses 1 & 2	U.S. Department of Health and Human Services Overview - Behavioral Health
9/19/25 **Zoom** Webinar Need to register! 10:00am – 12:00pm	Clinical and Forensic Assessment Differences	David Shapiro, Ph.D.
9/26/25 Maltz 2058 10:00am – 12:00pm	Postdoc Presentations: 1. Action Research Project: Effectiveness of Parent Training 2. Racial Disparities in the Early Identification and Diagnosis of ASD	Dr. Chanya Earle Dr. Paris Walker

	and Considerations for Diagnosis of ASD in Adult Populations.	
10/03/25 Maltz 2058 10:00am – 12:00pm	Postdoc Presentations: 1. The Black, Indigenous, and People of Color (BIPOC) Experience in Systems of Care 2. Teaching Social Skills Across the Lifespan	Dr. Fernando Doreus Dr. Rebeca Evora
10/10/25 Zoom 9:00am – 12:00pm	Program Evaluation I	Angela Yehl, PsyD
10/17/25 Maltz 2058 9:00am – 11:50pm **Must end at 11:50am on this day**	Pursuing a Career in Private Practice: A Primer for Psychologists in Training	Leon Mandler, PsyD
10/24/25 Maltz 2061	Lions and Tigers and Post-Docs, Oh My!	Dr. Fimiani
10/31/25 Maltz 2061	Intern Presentations: 1. Not Heard: Deaf and Hard of Hearing individuals in the Criminal Justice System 2. Jurors Implicit Bias in Jurors	
11/07/25 Maltz 2061 9:30am – 12:00pm	Improving Cultural Competency for Behavioral Health Professionals Courses 3 & 4	U.S. Department of Health and Human Services Overview - Behavioral Health
11/14/25 ** Zoom ** Webinar	Use and Misuse of Psychological Testing in Court	David Shapiro, Ph.D.

Need to register! 10:00am – 12:00pm		
11/21/25 Maltz 2061 10:00am – 12:00pm	Fall Celebration 1. ASD Demystified: Criteria, Etiology, Comorbidities and Beyond	Dr. Amrita Singh Dr. Rebecca Evora Miro 10-11 AM
11/28/25	Thanksgiving Break	No Didactic!
12/05/25 10:00am – 12:00pm Zoom	Intern Presentations: 1. Relationships Through a Neurodiverse Lense – Examining Intimacy and Connection 2. Medical Child Abuse: Recognizing the Signs and Taking Action	
12/12/25 10:00am – 12:00pm	Grand Rounds: Renfrew	
12/19/25 Room 2061 10:00 am - 12:00 pm	Cookie Exchange + Self-Care Celebration! Guest Speaker, Dr. Orshan	
12/26/25	Winter Closure - No Seminar	HAPPY NEW YEAR!
01/02/26	No PD – Return from Winter Break	
01/09/26	SFCIP Internship Interview Day	
01/16/26 Online Training	PSC Internship Interview Day SFCIP Interns Can Complete NCTSN Training	
01/23/26 **Zoom** 10:00am – 12:00pm	Intern Presentations: 1. Pure Fantasy: Card 16 of the TAT (Melanie) 2. Exposure and Response Prevention (Allison)	
01/30/26 2044	Freuds Debts to Darwin, Breuer, & Theory of Repression	Dr. Quintar Seminar

10:00am – 12:00pm		
02/06/26 **Zoom** 10:00am – 11:50pm	Program Evaluation II	Dr. Yehl
02/13/26 Rm 2044 10:00am – 12:00pm	Intern Presentations: 1. Should terminally-ill adults be given the choice to end their own lives? 2. Treatment Recommendations for Gender and Sexual Minorities with Serious Mental Illness	
02/20/2026 Room 2044 10:00am – 12:00pm	Intern Presentations: 1. Title: The Unspoken Story: A Kleinian Approach to Play Therapy 2. Post-Traumatic Growth: Clinical Applications in Trauma Treatment	
02/27/26 Rm 2044 10-12 PM	Building a business in the field of psychology	
03/06/26 Location 2044 10:00am – 12:00pm	Grand Rounds: Memorial Regional Hospital	
03/13/26 ** Zoom ** 9:00am – 12:00pm	Ethics CE	David Shapiro, Ph.D.
03/20/26 RM 2044	Coping with Trauma and Grief: The Critical Role of Resilience	Dr. Cash
03/27/26 ** Zoom ** 10:00am – 12:00pm	Domestic Violence CE	Dr. Cash
04/03/26		

10:00am – 12:00pm Room 2044	Spring Celebration	
04/10/26 10:00am – 12:00pm Room 2044	Intern Presentations: 1. Breaking the Cycle: Intergenerational Trauma, Prenatal Stress, and Pathways to Healing 2. Caregiver Burnout: psychological and physical impacts in informal caregiving.	
04/17/26 Room TBD 10:00am – 12:00pm	Grand Rounds: HG Doctors	
04/24/26	SFCIP Team Building Event! 11 AM – Plantation, FL	
05/01/26 9 AM Room 2025/2025a 12-2 PM ONLINE ZOOM	Breakfast, Coffee, and Headshots (9am) Trauma Presentation (12pm) ONLINE ZOOM	Breakfast Dr. Nicole Jimenez
05/8/26 Room 2045	NSU Graduation	No PD
05/15/26 Online training	Recognizing & Repairing Ruptures in the Therapeutic Alliance https://nova.zoom.us/webinar/register/WN_ptqltKKIRly_vevlhxYgTA	Dr. Eubanks
05/22/26 Room 2045	Digital Media, Self-Harm, and Suicide	Juliette Hubbard, PsyD
05/29/26 Room 2045	Grands Rounds: Psychology Service Center	
06/05/26 10:00am – 12:00pm	Intern Presentations:	

Virtual	1. Mild Traumatic Brain Injury and Sports Concussion 2.	
06/12/26 Room 2045 10:00am – 12:00pm	Intern Presentations: 1. 2.	
06/19/26 Virtual	Collaborative Therapeutic Assessment	Dr. Caproni
06/26/26 Room 2045	Grand Rounds: Broward Sheriff's Office	
07/03/26	Independence Day (Observed)	University Closed
07/10/26 10:00-12:00 PM Virtual	Intern Presentations: 1. 2.	
07/17/26 Room 2045	The Role of the Clinical Psychologist in Forensic Evaluations: Acting as an Expert Witness	Dr. Sloan-Pena
07/24/26	Grand Rounds: Broward Health Medical Center	
07/31/26 Room 2045	TBD	
08/07/26 Room 2045	TBD	
08/14/26 Room 2045	SFCIP and PSC End of Year celebration!	
08/21/26	End-of-year Wrap-up No PD	
08/28/26	End-of-year Wrap-up No PD	

Appendix B

**The South Florida Consortium Internship Program
INTERN ACTIVITY
LOG**

Name: _____

Site: _____

Supervisor Signature: _____

Month/Year: _____

Direct

Services

Activity	Hours	Activity	Hours
Individual Therapy	0	Family Therapy	0
Group Therapy	0	Marital Therapy	0
Assessments	0	Intakes	0
Case Consultation (face to face)	0	Supervision of others (3 hrs./week max)	0
Other (e.g., shadowing, work in therapeutic milieu, etc.)	0		
Total Direct Services Hours:	0		

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
Total Indirect Services Hours:	0		

Training Activities

Activity	Hours	Activity	Hours
PD Seminars	0	Grand Rounds	0
Supervision Received (IND-Formal)	0	Supervision of Others (total time)	0
Supervision Received (IND- Informal)	0	In-service Training (non-NSU)	0
Supervision Received (GRP)	0	Other	0
Supervision Received (non-licensed)	0		
Multidisciplinary Teams	0	Literature Review/Research	0
Total Training Activity Hours:	0		

Total Monthly Hours:	0
----------------------	---

Number of Clients

Black:	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	Total Number of Clients:			
					0

Appendix C

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

NAME: _____ TRAINING YEAR: _____

SITE: _____

Date of Report	Supervisor Signature
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. *Each intern is expected to have a form completed.

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. Jimenez

Appendix E

**Nova Southeastern University
College of Psychology
South Florida Consortium Internship Program
Intern Training Agreement**

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 internship's start, 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 monthly 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 day of Orientation with DIT 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 monthly
- 1 Program Evaluation group project at site
- Complete 2000 hours by August 31st
-

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:

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:

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:

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:

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:

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:

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

Intern Presentation Ratings				
Element	Criterion for “target” rating	Not Met	Met	Exceeded
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 and/or modifying presentation style to meet the needs of the participants, and/or 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
---------------	----------	--------------	------------	-----------------

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:

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)

☐ Direct observation ☐ Discussions in supervision ☐ Audio/video rec
☐ Feedback from others ☐ Participation in meetings ☐ Other: _____
☐ 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

The intern demonstrates advanced skills that exceed entry-level practice.

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

The intern demonstrates the ability to independently function, generalize to new situations, and self-assess when to seek support, as defined by readiness for entry-level practice.

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

Emerging level of competence, close supervision required

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):

II. Ethical and Legal Standards

4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES

The intern demonstrates advanced skills that exceed entry-level practice.

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

The intern demonstrates the ability to independently function, generalize to new situations, and self-assess when to seek support, as defined by readiness for entry-level practice.

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

Emerging level of competence, close supervision required

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):

III. Individual and Cultural Diversity

4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES

The intern demonstrates advanced skills that exceed entry-level practice.

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

The intern demonstrates the ability to independently function, generalize to new situations, and self-assess when to seek support, as defined by readiness for entry-level practice.

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

Emerging level of competence, close supervision required

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):

IV. Professional Values, Attitudes and Behaviors

4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES

The intern demonstrates advanced skills that exceed entry-level practice.

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

The intern demonstrates the ability to independently function, generalize to new situations, and self-assess when to seek support, as defined by readiness for entry-level practice.

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

Emerging level of competence, close supervision required

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):

V.Communication and Interpersonal Skills

4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES

The intern demonstrates advanced skills that exceed entry-level practice.

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

The intern demonstrates the ability to independently function, generalize to new situations, and self-assess when to seek support, as defined by readiness for entry-level practice.

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

Emerging level of competence, close supervision required

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):

VI.Assessment

4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES

The intern demonstrates advanced skills that exceed entry-level practice.

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

The intern demonstrates the ability to independently function, generalize to new situations, and self-assess when to seek support, as defined by readiness for entry-level practice.

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

Emerging level of competence, close supervision required

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):

VII.Intervention

4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES

The intern demonstrates advanced skills that exceed entry-level practice.

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

The intern demonstrates the ability to independently function, generalize to new situations, and self-assess when to seek support, as defined by readiness for entry-level practice.

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

Emerging level of competence, close supervision required

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):

VIII. Supervision

4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES

The intern demonstrates advanced skills that exceed entry-level practice.

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

The intern demonstrates the ability to independently function, generalize to new situations, and self-assess when to seek support, as defined by readiness for entry-level practice.

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

Emerging level of competence, close supervision required

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):

IX.Consultation and Interprofessional/ Interdisciplinary Skills

4 - ADVANCED KNOWLEDGE, SKILLS, AND ABILITIES

The intern demonstrates advanced skills that exceed entry-level practice.

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

The intern demonstrates the ability to independently function, generalize to new situations, and self-assess when to seek support, as defined by readiness for entry-level practice.

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

Emerging level of competence, close supervision required

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):

SUMMARY OF STRENGTHS:

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

INTERN COMMENTS:

I have reviewed and discussed this evaluation with my supervisor.

Intern Signature

Date

Supervisor Signature

Date

Appendix K

Performance Planning Worksheet



Employee's Name: _____

Department: _____

Supervisor's Name: _____

Title: _____

Date: _____

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
Work to be accomplished or competency to be developed			
Time-line			
Action Plan			
Resources needed			
Measures to be used			

Signature of Employee: _____ **Date:** _____

Signature of Supervisor: _____ **Date:** _____

PERF
PERF-Perf Rev

Appendix L

Commission on Accreditation Implementing Regulations C-15 I. Telesupervision

GUIDELINES FOR TELESUPERVISION

The Nova Southeastern University (NSU) South Florida Consortium Internship Program (SFCIP) must adhere to generally accepted best practices and ensure compliance with all Standards of Accreditation (**SoA**) of the American Psychological Association (APA) in the use of telesupervision. The following policy reflects the implementing regulations (IR's) and the current literature.

1. Supervision Time Breakdown

(Specify how many of the 4 hours of required supervision may be provided via telesupervision and via in-person supervision; Specify how many hours of individual and group supervision may be provided via telesupervision and via in-person supervision)

- Supervision will typically be delivered in person. Telesupervision will be utilized in the event of exceptional circumstances such as illness, scheduling conflicts, physical/financial barriers, and weather emergencies.

2. Rationale for Telesupervision Use

(An explicit rationale for using telesupervision)

- Telesupervision, shown to be as effective as in-person supervision, offers flexible, accessible, and collaborative oversight that integrates theory with practice while fostering competence, ethics, and professional growth.

3. Alignment with Program Aims and Outcomes

(How telesupervision is consistent with their overall aims and training outcomes)

- Telesupervision helps meet training outcomes by providing an alternative to in-person supervision to support the continuity of the supervisory relationship and ongoing clinical care. Consistent with in-person supervision, telesupervision provides an opportunity to discuss a wide range of issues, including but not limited to clinical cases, ethical concerns, professional development, and the intern's self-reflection and wellness.

4. Self-Assessment and Satisfaction

(How the program engages in self-assessment of trainee outcomes and satisfaction with use of telesupervision versus in-person supervision)

- Interns will regularly evaluate the effectiveness of supervision during weekly group supervision with the Director of Internship Training, including platform quality, supervision effectiveness, and any technological issues.
- Mid-year and end-of-year evaluations, along with informal check-ins with the Director of Internship Training, will assess trainee outcomes and satisfaction with supervision.

5. Evaluation of Telesupervision

(How the program engages in self-assessment of trainee outcomes and satisfaction with use of telesupervision versus in-person supervision)

- The intern and supervisor will evaluate the telesupervision process, including:
 - Supervision and feedback quality
 - Challenges and areas for improvement
- Feedback will guide adjustments to maintain effectiveness and align with professional development goals.

6. Clinical Training Integration

(How and when telesupervision is utilized in clinical training)

- Telesupervision should be integrated into clinical training similarly to in-person supervision, when continuity is required during exceptional circumstances.

7. Eligibility for Telesupervision

(How it is determined which trainees can participate in telesupervision)

- Telesupervision may begin once the supervisor-trainee relationship is established in person (i.e., at least the initial or one supervision occurs within the in-person format). All trainees are eligible once they demonstrate the minimum competencies, with discretion left to the supervisor's judgment.

8. Establishment of Supervisory Relationships

(How the program ensures that relationships between supervisors and trainees are established at the onset of the supervisory experience)

- Supervision must begin in person; telesupervision is permitted once the supervisor/internship relationship has been sufficiently established. Exceptions to this policy may be made in extraordinary circumstances.

9. Managing Supervision Ruptures

(How the supervision relationship is facilitated, maintained, and monitored for ruptures)

- If a rupture in the supervisory relationship is identified, the supervisor and trainee will meet in person to address the issue and establish a plan for resolution. Regular evaluations and informal check-ins throughout the year will monitor and maintain the relationship.

10. Professional Responsibility in Clinical Cases

(How an off-site supervisor maintains full professional responsibility for clinical cases)

- Supervisors retain full professional responsibility for clinical cases, whether supervision is in person or via telesupervision.

11. Crisis Coverage and Non-Scheduled Consultations

(How non-scheduled consultation and crisis coverage are managed)

- A licensed mental health professional must be available during any intern's clinical work to address crises.

- For non-scheduled consultation, interns may reach out to the designated licensed psychologist at their site or the Director of Internship Training for support.

12-13. Privacy and Confidentiality and Technology Requirements

(How privacy and confidentiality of the client and trainees are assured)

- All supervision will comply with the ethical guidelines set by Health Insurance Portability and Accountability Act (HIPAA) and American Psychological Association (APA) guidelines and relevant state laws. Supervisors and interns are responsible for maintaining confidentiality and professionalism during all telesupervision interactions. Supervisors and interns must take precautions to avoid breaches of confidentiality during virtual sessions.
- Supervisors and interns must ensure that telesupervision sessions take place in a private, secure environment. Interns and supervisors should ensure that no unauthorized persons are within hearing distance during telesupervision sessions. Both parties are responsible for ensuring that their devices are password-protected and free from unauthorized access.
- Telesupervision should occur on a HIPAA-compliant platform. If such a platform is unavailable, no protected health information (PHI) should be shared during the session.
- Supervisors and interns must demonstrate technical competency in using the platform, including setup, managing technical issues, and utilizing platform features.

14. Supervisor Competency

(How it ensures that supervisors are competent to provide telesupervision)

- All supervisors must maintain competency in the telesupervision utilization.
- Supervisors providing telesupervision must review the NSU Intern's Telesupervision Policies and sign an acknowledgment form. Through the mid- and end-of-year evaluations on telesupervision, it will be required that supervisors maintain the same level of supervision quality as in-person meetings.

15. Transition Between Telesupervision and In-Person Supervision

(What circumstances would lead to changing between telesupervision and in-person supervision)

- The change between telesupervision and supervision may occur due to illness, unexpected circumstances, scheduling conflicts, physical or financial barriers, or weather emergencies.
- A backup plan (e.g., phone call or rescheduling) must be in place in case of technical issues.

16. Diversity, Equity, Inclusion, and Accessibility

(How are diversity, equity, inclusion, and accessibility issues considered and addressed)

- Telesupervision can enhance training opportunities by allowing qualified supervisors to work with trainees who might otherwise be inaccessible due to geographic, physical, or financial barriers.
- The program must ensure that these opportunities are equitable and accessible.

Conclusion

Telesupervision is an essential tool in providing high-quality supervision within the psychology internship program, particularly during exceptional circumstances such as illness, scheduling conflicts, physical/financial barriers, and weather emergencies. This policy is designed to ensure that telesupervision is conducted in a secure, effective, and ethical manner. The program director will review this policy periodically to ensure it continues to meet the needs of both interns and supervisors while adhering to APA accreditation standards.

APA COA Telesupervision Guidelines

(Formerly C-28; Commission on Accreditation, July 2010;
Revised November 2015, July 2017, July 2023)

The Commission on Accreditation (CoA) acknowledges that accredited programs may incorporate telesupervision into their curricula. However, the CoA recognizes that in-person supervision provides unique benefits that are essential for professional development, ensuring quality, and protecting the public. These benefits include:

- Opportunities for professional socialization and trainee competence assessment
- Recognition and processing of subtle nonverbal and emotional cues, vital for effective supervision

Thus, the CoA has established guidelines and limitations on the use of telesupervision. These guidelines complement but do not override other requirements in the **Standards of Accreditation for Health Service Psychology (SoA)**. This regulation specifically clarifies the application of telesupervision at the internship level.

DEFINITIONS

- **Supervision:** An interactive educational experience between a trainee and supervisor, intended to enhance the professional functioning of the intern, monitor service quality, and serve as a gatekeeper for entry into the profession.
- **Telesupervision:** Supervision conducted via synchronous audio and video communication where the supervisor is not physically present with the trainee. Telesupervision may take the form of individual sessions, group supervision, case consultations, and/or didactic training.
- **In-person Supervision:** Supervision where the supervisor and trainee are physically present in the same location.

SUPERVISION STRUCTURE AND PROCESS

- **Pre-Supervision:** Before the first telesupervision session, both supervisor and intern will review and confirm the technology setup, privacy protocols, and communication expectations. Supervisors should review the intern's progress, goals, and any special considerations for their training.
- **Session Expectations:** Telesupervision sessions should begin and end on time, maintaining professionalism in both the environment and attire.

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(How telesupervision is consistent with their overall aims and training outcomes)

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(How the program engages in self-assessment of trainee outcomes and satisfaction with use of telesupervision versus in-person supervision)

5. Evaluation of Telesupervision

(How the program engages in self-assessment of trainee outcomes and satisfaction with use of telesupervision versus in-person supervision)

6. Clinical Training Integration

(How and when telesupervision is utilized in clinical training)

7. Eligibility for Telesupervision

(How it is determined which trainees can participate in telesupervision)

8. Establishment of Supervisory Relationships

(How the program ensures that relationships between supervisors and trainees are established at the onset of the supervisory experience)

9. Managing Supervision Ruptures

(How the supervision relationship is facilitated, maintained, and monitored for ruptures)

10. Professional Responsibility in Clinical Cases

(How an off-site supervisor maintains full professional responsibility for clinical cases)

11. Crisis Coverage and Non-Scheduled Consultations

(How non-scheduled consultation and crisis coverage are managed)

12. Privacy and Confidentiality

(How privacy and confidentiality of the client and trainees are assured)

13. Technology Requirements

(The technology and quality requirements and any education in the use of this technology that is required by either trainee or supervisor)

14. Supervisor Competency

(How it ensures that supervisors are competent to provide telesupervision)

15. Transition Between Telesupervision and In-Person Supervision

(What circumstances would lead to changing between telesupervision and in-person supervision)

16. Diversity, Equity, Inclusion, and Accessibility

(How are diversity, equity, inclusion, and accessibility issues considered and addressed)

References

Tarlow, K. R., McCord, C. E., Nelon, J. L., & Bernhard, P. A. (2020). Comparing in-person supervision and telesupervision: A multiple baseline single-case study. *Journal of Psychotherapy Integration*, 30(2), 383–393. <https://doi.org/10.1037/int0000210>