

The Chicago School Community Internship Consortium

CIC

Intern Training Manual 2017-2018

Training Manual Confirmation

The Chicago School Community Internship Consortium

I have read and understand The Chicago School Community Internship Consortium Training Manual. I confirm that I have read and understand the program policies and procedures, including the policies around Grievance and Due Process. I agree to abide by the policies and procedures outlined in the Training Manual.

Intern Printed Name

Intern Signature

Date

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The Chicago School Community Internship Consortium (CIC)

Mission and Goals:

The mission of the CIC is to prepare and retain psychologists to provide culturally competent, community-based, psychological services to underserved populations in the Chicago metro area.

The Chicago School Community Internship Consortium (CIC) consists of three clinical training sites and is partially affiliated with the Chicago School of Professional Psychology (TCS), which serves as a non-experiential training site. The CIC follows a practitioner-scholar model, nested within a developmental approach, which encourages students to apply scholarship to practice, and to learn through sequential and gradual development of the clinical and professional skills necessary to become well rounded professionals. Interns are primarily placed at one of the clinical training sites for the duration of the Internship year, and engage in shared didactic training activities together on a weekly basis. Shared training activities are provided by all three clinical training sites as well as by TCS, on a rotating basis. The three clinical training agencies are Pillars, Lawrence Hall, and the Chicago School of Professional Psychology Forensic Center. These agencies work collectively and collaboratively with one another and with TCS to realize the following program goals, which are aligned with the APA's newly-approved Profession Wide Competencies:

Interns will develop skills appropriate to their level of professional development in the areas of:

1. Evidence Based Practice in Intervention
2. Evidence Based Practice in Assessment
3. Consultation and Interprofessional/Interdisciplinary Skills
4. Supervision
5. Cultural and Individual Diversity
6. Research
7. Ethical and Legal Standards
8. Professional Values and Attitudes
9. Communication and Interpersonal Skills

Accreditation Status

The Chicago School Community Internship Consortium (CIC) was awarded accreditation on contingency effective March 17, 2017 by the APA's Office of Program Consultation and Accreditation.

APA ACCREDITED PROGRAM

(Accredited on Contingency, March 17, 2017)
American Psychological Association
Office of Program Consultation and Accreditation
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Washington, DC 20002-4242

(T) 202- 336-5979 (F) 202-336-5978
www.apa.org/ed/accreditation
Email: apaaccred@apa.org

APPIC Membership Status

The CIC is a participating member of APPIC.

Program Structure:

The CIC program is a full-time, 12-month, 2000-hour program, **beginning on Monday, August 21st 2017 and ending on Friday, August 17th, 2018.** Each Intern will participate in a major clinical rotation at a single consortium setting. Within that setting, all Interns will receive training in Intervention, Assessment, and Consultation, and will be provided with the opportunity to supervise practicum students. The specific training activities at each clinical site will vary based upon the service provision and client population of the site. More information about the specific clinical training sites is provided below. Each Intern will spend four days per week at his/her clinical training site and one day (Mondays) involved in consortium-wide training activities with the full Intern cohort. The Monday training day will rotate to each training site on a weekly basis, with a training day falling at The Chicago School, The Forensic Center, Pillars, or Lawrence Hall one time per month. The cohort learning experiences include: 1) a didactic series that features guest speakers, workshops, and case presentations, 2) group supervision, and 3) supervision of supervision which will focus on the development of the clinical supervisor skills of the Interns.

In addition to group supervision and the supervision of supervision provided to the full Intern cohort on Mondays, each Intern will participate in at least two hours per week of individual supervision with a licensed clinical psychologist at their clinical training site.

Interns will additionally participate in didactics, trainings, case conferences, and staffings at their clinical sites as deemed appropriate by their clinical supervisors. The Intern will also complete an Intern Project by the end of the training year (See Appendix I).

At the outset of the training year, each Intern will complete a Training Agreement with his/her primary supervisor outlining the goals, requirements, and activities within the training experience. The Training Agreement will also detail the Intern's weekly schedule.

Didactic Series

Didactic presentations offered to Interns throughout the course of the training year reflect their developmental levels. At the start of the training year, Interns are provided didactic presentations that are more skills based, such as suicide assessment and mandated reporting. As the training year progresses, attention is shifted to include Intern professional development issue and to more advanced clinical topics. An updated copy of the didactic training series will be emailed to all Interns. It is the Interns' responsibility to come prepared to participate in the didactic program scheduled for that day.

Clinical Case Presentations

Twice during the year, Interns are required to construct and present a clinical case conceptualization presentation on a client of their choosing. These case presentations are evaluated by their peers and supervisors on the more advanced skills of professionalism and leadership in presenting scholarly and clinical information. Interns will be given 90 minutes to present and answer questions, followed by a 30-minute feedback conference with supervisors. Interns will send powerpoint to peers and supervisors one week before date of presentation. It is expected that the presentation will include ethical and diversity issues in the relevant areas of the presentation. Interns are expected to follow the following format:

- Demographic Information
- Presenting Problems
- Background Information
- Diagnosis
- Theoretical Orientation with Rationale for Choosing Orientation
- Case Conceptualization
- Treatment Goals and Major Issues
- Treatment Progress
 - Modality
 - Length of treatment
- Significant Interpretations
- Significant Turning Points in Therapy
- Issues Remaining
- Client strengths
- Self-Evaluation
 - Countertransference Issues
 - Role of Supervisor(s)/Use of supervision
 - Problems/Strengths/Areas for Improvement
- Why did you choose this case?
- References

Time Commitment and Hours Requirement:

The CIC entails a 2000 total hour Internship experience with 600 direct client contact hours. Each agency involved in CIC training is highly committed to training and the Internship experience is designed to place primary emphasis on training and development of quality professionals in early career psychology. If the Intern does not meet the hour requirement, then the Intern will not successfully complete the Internship. Direct client contact is defined as time completing intake assessments, individual, family or group therapy, testing administration and feedback sessions as well as providing supervision to trainees. Additionally, case management services may also be categorized under direct client hours when involving activities such as aiding the client in accessing services, researching services relevant to a client and/or connecting client with external services. Consulting with either Internal or external staff is also classified as direct client hours when these services are related to achieving continuity of care, collaboration in treatment planning and intervention or to obtain collateral information regarding a client.

The Intern should not work more than 45 hours per week. The Intern will submit monthly hour logs to the postdoctoral fellows. All Interns are allotted 10 workdays of release time for vacation, illness, and/or personal days. Interns are not permitted to take time off during the last week of Internship, with the exception being religious observance. The last week should be dedicated to completing all paperwork, reviewing evaluations, and exiting from the clinical site.

In addition to the 10 workdays of release time, the Interns are allotted one (1) workday for attending their graduation ceremony and two (2) work days for professional development training opportunities. These two days are reserved for conference participation and dissertation maintenance. The professional development training opportunities must be pre-approved by the Training Director (TD). The conference brochures and/or registration will need to be submitted to the TD prior to attendance. Additionally, it is expected that the Intern will share learned knowledge with their training cohort following their return from the conference, which can occur via group supervision. Should an Intern plan to utilize some of their release time towards completion of dissertation requirements, Interns should consult with their primary supervisors in order to include scholarly goals and activities in their Training Agreement. **(Appendix III)**

Please note: Monday training seminars are a particularly important aspect of the training year, and encompass much of the formal training developed for the Internship. As such, supervisors are expected to protect that time on behalf of their Interns, and it is vital that Interns work to minimize any personal disruptions to attendance for the Monday training day. Given the academic schedule of TCS, several Mondays throughout the year are already designated days off for federal holidays. Interns are not permitted more than two (2) absences from Monday training seminars.

It is expected that Interns will have regular attendance and punctuality at their clinical training sites. Unauthorized or excessive tardiness or absences have a negative impact on the overall effectiveness of the Intern. Additionally, all Interns need to provide proactive communication regarding planned absences and time off. Interns should plan their vacation ahead of time with their supervisor to identify and discuss any clinical implications. Interns are required to complete vacation release forms **(Appendix IV)** and submit to the TD two weeks prior to the start of vacation.

The hourly requirements are designed to meet the demands of licensure requirements in Illinois specifically, and be broad enough to fit requirements across most states. The schedule for each Intern is full time, 5 days per week. These hours are designed to provide valuable training experiences, and require significant focus and dedication. As such, additional employment outside the clinical and administrative duties in the Internship is strongly discouraged. In light of this recommendation, other departments within The Chicago School have also been advised to refrain from hiring students who are pursuing internships concurrently with the employment being sought.

Supervision Requirements

Supervision within the CIC is tailored to meet the developmental needs of the Intern. In the beginning of the training year, individual supervision consists of a more detailed review of audio tapes in an effort to assess for areas of growth for each Intern and to offer more specific interventions to address the needs of the client. As the year progresses, the focus of supervision shifts, with Interns given more autonomy to conceptualize and provide interventions independently, while being provided guidance and feedback from supervisors.

In addition to the goals, objectives and expected competencies of the Internship, Interns are actively encouraged to develop personalized training goals for the Internship year. These goals are developed at the start of the year, when the Intern and clinical supervisors develop the training contract. Interns are later evaluated on progress toward their stated, personalized goals at mid-year and final formal evaluation periods.

Individual Supervision

Each Intern is assigned a primary and secondary supervisor who are responsible for the Intern's supervision throughout the year. Please see Appendix XII for the primary and secondary supervisor form. This form is intended to identify the intern's primary and secondary supervisor assignments. It is intended to create a clear and transparent understanding of supervisor and trainees' roles throughout the training year. This form will be completed at the start of the training year and at any time changes in supervisor assignments occur.

This form should be signed at orientation by the Intern and the primary and secondary supervisors. If the primary or secondary supervisor is not available at orientation, it is the Intern's responsibility to have this form signed and returned to the Postdoctoral Fellow within one week of receipt. If there happens to be a change in supervision throughout the year, it is the Intern's responsibility to get the form signed by the supervisor(s).

Individual supervision will often consist of discussing client concerns, treatment planning, reviewing Intern goals, reviewing paperwork, or other items as determined by the Intern and their supervisor. Each Intern will be assigned both a primary and a secondary individual clinical supervisor. The primary supervisor is an employee of the consortium site, and will be primarily responsible for the Intern's weekly activities on-site, including all case management and clinical case responsibility. The secondary supervisor may be an employee of the consortium site or may be a hired consultant of the consortium site. Interns will participate in two hours of individual supervision each week, one hour each with the primary and secondary supervisor. Interns with an off-site secondary supervisor may meet with that supervisor at TCSPP's campus or at another location.

Group Supervision

In addition to individual supervision, all Interns participate in 1.5 hours of weekly group supervision held at the site where training is scheduled that week. The group supervision focuses on professional development issues, as well as creating an opportunity for knowledge sharing across consortium sites and will be co-led by one postdoctoral fellow and one licensed clinical psychologist. Group supervision will also include informal case presentations, journal club, a diversity seminar, and a focus on providing group therapy. Group supervision is also the venue to discuss any supplies needed on site, such as art therapy supplies for individual or

group therapy. Supply purchasing needs to be approved by the DOT. Individual sites may have additional group supervision requirements.

Supervision of Supervision

Interns will also participate in 1.5 hours of supervision of supervision with one postdoctoral fellow and one licensed clinical psychologist. This experience will focus on their provision of clinical supervision to psychology trainees. The trajectory of this supervisory experience will begin with an overview of clinical styles and approaches to supervision, individual and group review of relevant literature, and will include audio tape review of supervision sessions as well as supervision case presentations. The goal of supervision of supervision is to promote Interns' growth in the Consultation and Supervision competency.

Training Leadership & Program Governance:

The CIC is governed by the Internship Training Committee (ITC), which is comprised of leaders from each of the core consortium sites. Site representatives to the ITC also serve as clinical supervisors in the training program. The ITC is responsible for overseeing the recruitment process, determining program structure and policies, managing grievances and due process, and making decisions about consortium site participation.

The ITC meets on a monthly basis to discuss Intern progress, administrative needs within the consortium, and supervisory needs and goals. Discussion points from supervisors will include, but are not limited to, supervision notes created by the supervisor, concerns raised by a particular Intern, concerns raised by the supervisor or any other another staff member or client at the site, and any other noteworthy points. Note that this aspect of training and sharing of knowledge among team members is important for growth and development of each Intern. The discussions of each Intern's progress will include the Intern's identified training contract goals as well as the achievement in each of the competency areas of the Internship program. Primary supervisors and postdoctoral fellows will communicate feedback from these meetings to Interns as necessary, in either verbal or email format.

Training Committee Members include:

Dina Glaser, Psy.D.

Chicago Campus Director of Applied Professional Practice/Director of Training at TCS Consortium and Internship Training Committee

Leslie Crea-Kammerer, Psy.D.

Director of Training/Psychological Assessment Services, Pillars Community Services
Pillars Internship Director, Pillars Primary Supervisor and Internship Training Committee

Mitchell Sandy, Psy.D.

Vice President of Support Services, Lawrence Hall Youth Services (LHYS)
LHYS Internship Director, LHYS Primary Supervisor and Internship Training Committee

Ashley Newlove, Psy.D.

Clinical Supervisor
LHYS Secondary Supervisor and Internship Training Committee

Darlene Perry, Ph.D.
Executive Director, The Forensic Center
The Forensic Center Internship Training Director and Internship Training Committee

Steve Kulb, Psy.D.
Program Faculty in the Forensic Department at TCS
Primary Supervisor and Internship Training Committee

Laura Benton, Psy.D.
Program Faculty in the Forensic Department at TCS
Primary Supervisor for Psychological Assessment and Internship Training Committee

Uma Shanmugham, Psy.D.
Post-Doctoral Fellow, Pillars and TCS
Internship Training Committee

Brent Venters, Psy.D.
Post-Doctoral Fellow, Pillars and TCS
Internship Training Committee

Consortium Sites:

The CIC includes three clinical training sites. They are: Pillars, Lawrence Hall, and TCSPF Forensic Center. Below are descriptions of each of the sites and their training positions.

Pillars Community Services

Mission: Pillars aspires to build healthier communities by making connections and changing lives.

Pillars is a nonprofit, community mental health center that serves over 10,000 individuals and families in 38 communities annually. Pillars utilizes a “wraparound” approach, which involves an integrated, diverse, broad and comprehensive suite of programs and interventions. The agency is committed to respecting diversity, promoting and advocating for social justice, offering innovative and quality services, and acting as a responsible and involved member of the communities it serves. Services include psychiatric treatment, mental health counseling, addictions, mental illness/substance abuse, child and family services, sexual assault, domestic violence, homeless and employment services. Through the Child and Family Development Center, Pillars also provides Head Start and Infant and Toddler services. Three Intern positions are currently available at Pillars. All Interns work across the lifespan. Over the course of the year, Interns are expected to carry a caseload of approximately 10-15 clients, complete 4-6 psychological assessments, and have the opportunity to develop and run an outpatient therapy group.

One Intern can choose to be placed at Community Nurse Health Association (CNHA) for two days of their training week. Pillars partners with CNHA, a nonprofit, reduced-cost integrated care medical clinic for adults and children, to provide integrated primary and behavioral health

care to the underserved and under- or uninsured individuals in the La Grange area. Responsibilities at this minor rotation may include individual, couples, group and family therapy delivered in a short-term, evidence-based treatment model, as well as consultation with medical professionals, case management, and outreach to medical patients and community members. Preference will be given to bilingual (Spanish) applicants as well as applicants who have experience providing treatment in a primary health care system. During the interview process, applicants are asked about their interest in any rotations or experiences if they were to be matched to Pillars. Following the match and prior to their start date, the newly accepted interns are emailed to ask if they are interested in doing the rotation at Community Nurse as the rotation is currently designed to accommodate one intern. If more than one intern is interested in doing the rotation, preference is given to an intern 1) who, in either application materials or the interview process, expressed a particular interest in the rotation or integrated care, 2) who has prior training or experience in integrated care, or 3) who has expressed plans to pursue a career in integrated care. If more than one intern request the rotation and are equally qualified based on that criteria, then efforts may be made to modify the rotation to accommodate more than one intern or provide all interested interns in activities associated with the rotation.

Lawrence Hall

Mission: Lawrence Hall is a not-for-profit child welfare agency established to assist at-risk youth and their families through a seamless delivery of services designed to develop self-worth, knowledge, and skills they need to lead independent and productive lives.

Lawrence Hall, established in 1865, is one of the oldest child welfare agencies in Illinois that annually serves over 600 children and adolescents. Lawrence Hall offers a wide range of services and programs for youth, including foster care, a therapeutic day school, residential treatment, and supervised independent living programs. Recognized in 2005 by United Way with the inaugural Outstanding Leadership in Continuous Improvement Award, Lawrence Hall is dedicated to forming partnerships and linkages with area organizations and academic institutions in order to conduct critical research and evaluation for program and service improvement.

Lawrence Hall's Residential Treatment Centers (RTC's) and Therapeutic Day School programs are designed to effectively address problematic behaviors and emotional issues, often related to clients' histories of severe traumas and significant experiences of loss and separation. Lawrence Hall's RTC's are the most restrictive and intense of its programs. The treatment milieu within an RTC is a highly structured, nurturing environment. Residents in Lawrence Hall's group homes are in less restrictive settings and have greater access and participation in community based activities and programs. The Therapeutic Day School serves some that are in the Residential Program and others who are living with their families in the community.

Clients at Lawrence Hall range in age from 0 to 21 years of age with the majority, 81%, falling within the 10 to 21 age range. Approximately 72% of the agency clients are African-American, 12% are Latino, 12% are Caucasian and the remaining identify as more than one race. All of

the clients in the Child and Family Treatment Center, are male. However, female clients account for 32% of the total agency's client population.

Interns placed at Lawrence Hall maintain an individual caseload of approximately 4 to 5 youth, and have opportunities to lead therapy and milieu groups. Additionally, Interns are required to complete at least 8 assessment batteries within our on-grounds therapeutic day school. Interns also serve as members of a multidisciplinary treatment team that includes psychologists, social workers, practicum students, a psychiatrist, therapeutic recreation staff, music and art therapists, nurses, and case managers.

TCS Forensic Center

Mission: The Forensic Center functions as a training and treatment facility within The Chicago School of Professional Psychology. As the practice arm of the Department of Forensic Psychology, The TCS Forensic Center specializes in, but is not limited to, providing a wide range of mental health services and interventions to children, families, and adults who have contact with the legal sector.

The Chicago School Forensic Center started in 2007 and has been committed to providing high-quality forensic psychological services and programming to improve the health and well-being of individuals within diverse communities since its inception. The Center provides individual, group, and family therapies as well as a wide range of specialized mental health services. The Center supports systems that work with individuals involved in the legal sector including courts, child welfare agencies, schools, parole/probation, and law enforcement.

Over the course of the training year, Interns are required to complete a minimum of eight psychological evaluations. Cases include general evaluations to assess overall functioning as well as more specialized assessments such as parent capacity, child custody, and risk assessments. Interns are trained to use an evidence-based approach to assessments as well as to consider issues of marginalization, diversity and comorbidity. With regard to treatment, interns are expected to maintain a caseload of 8 to 10 clients comprised of individual, family and group work during their training year. A typical caseload is comprised of complex clinical and forensic-oriented cases involving matters such as chronic mental illness, victim related trauma, substance abuse, law breaking behavior, high conflict family matters, and violence.

Additionally, Interns participate in a community engagement initiative through which they assist in the coordination, oversight, and delivery of services to clients as well as assist with the supervision and didactic instruction of students who are assigned to the community engagement project. Interns are assigned to either the school based initiative aimed at reducing youth violence (Save Our School Children-S.O.S) or the initiative aimed at reducing recidivism among court involved adults or adults returning to the community from correctional facilities. Interns also participate in an alternative to detention community initiative in which they facilitate psychoeducation groups with court involved youth with partnering agencies and institutions including Cook County Juvenile Probation. Lastly, interns serve as mental health consultants for a partnering agency in which they provide a series of professional development trainings to help staff increase their understanding of mental illness and apply the information to the work with their clientele.

The Chicago School of Professional Psychology

Mission: Integrating theory, professional practice, and innovation, The Chicago School of Professional Psychology provides an excellent education for careers in psychology and related behavioral and health sciences. The school is committed to service and embraces the diverse communities of our society.

The Chicago School educates professionals whose practices exemplify a commitment to understand and respect individual and cultural differences. The application of humane professional judgment is achieved through the integration of psychological theory, scientific research, and professional practice. The curriculum and training opportunities prepare graduates to deliver outstanding professional services, emphasizing the need to understand diversity and the importance of working with underserved populations. From this statement of purpose, we derive our institutional goals, which are attained through individual programs of study. Our consistent focus on student learning ensures that the institution provides excellent career education. Each program regularly identifies the learning expectations, determines the outcomes of these student-learning expectations across academic programs, and uses assessment results to improve student learning. Our institutional learning goals for students completing our degree programs are: scholarship, diversity, professional behavior, and professional practice.

All CIC Interns will receive a portion of their non-clinical training from TCS. Specifically, didactic seminars and group supervision will be held at TCS and provided by TCS faculty members on a regular basis. Additionally, TCS houses the CIC's Training Director, Dr. Dina Glazer, and serves as the administrative and fiscal agent for the consortium. TCS is the employer of the Interns.

Intern Project

Each Intern is required to complete an Intern project with their partner agency throughout the Internship year. The Intern Project should be constructed to be broad enough in scope to reflect the level of training of the Intern and to comprehensively address a defined need in the agency. In other words, the Intern Project should go beyond the complexity of the day to day expectations of the Internship program. The Intern Project is designed to evaluate the Intern's skills in program development, consultation, research, and program evaluation. For instance, a suitable project might entail working with the agency to define a clinical or administrative need, presenting a plan for a project to meet that need, working with the agency to secure funding or organizational support for the program, developing and implementing the program, and conducting a program evaluation. Past Intern Projects have included the development and implementation of a DBT treatment program in an agency, researching, constructing and implementing a manual for psychological testing, and researching and implementing strategies to increase integration between behavioral health and medical staff.

The trajectory of completing the Intern project (**Appendices I and II**) is graded in complexity, beginning first with establishing a relationship with the community of the agency and reviewing possible needs, to researching, developing, and eventually sharing the project with the agency or implementing the project. A copy of the Intern project also is provided to the Training

Director of the Internship program. Each Intern will identify their topic by January and submit a timeline for completion. The due date for the initial draft is included in the training calendar. The final submission will consist of a formal presentation of the project to the site. Group Intern projects are not permitted. The training director will serve as the chair of the Intern project and will be responsible for evaluating the Intern project. A content expert may also be identified by the Intern to assist in the development and evaluation of the Intern project.

Malpractice Insurance:

Prior to starting the training program, all Interns must provide proof that they have secured malpractice insurance of at least \$3M annual aggregate and \$1M per incident. The Intern's academic program may provide student malpractice insurance. If the insurance provided by the Intern's academic program does not meet this level of coverage the Intern must obtain supplemental malpractice insurance to ensure this level of coverage. Inexpensive student malpractice insurance is available through the American Psychological Association Insurance Trust (APAIT). Interns who need assistance in locating supplemental malpractice should contact the Director of Training as soon as possible.

Orientation:

Interns will participate in several orientations at the start of their training year. A consortium-wide orientation will be completed by the TD and most training team members the first day of the Internship. At this orientation, Interns will receive a copy of this manual and will learn more about each of the sites, what rotations they will participate in, who will be their selected supervisors, etc. During this training, Interns will have the opportunity to ask general and administrative questions about the program as well as have an opportunity to meet individually with their supervisor for further Q&A.

Additional formal orientations will also occur at the Intern's clinical site. These orientations will cover site specific requirements, training on paperwork and site procedures and policies, acclimation to the site, and harassment and discrimination training. Each trainee will be required to fill out forms documenting their understanding of various policies and procedures at their sites.

Appendix I: Intern Project Description

The Chicago School Community Internship Consortium

Each Intern is required to complete an Intern project with their partner agency throughout the Internship year. The Intern project should reflect the level of training of the Intern while comprehensively addressing a defined need of the agency. In other words, the Intern project should go beyond the complexity of the day-to-day expectations of the Internship program. The Intern project is designed to evaluate the Intern's skills in program development, consultation, and research. For instance, a suitable project might entail working with the agency to define a clinical or administrative need, presenting a plan for a project to meet that need, working with the agency to secure funding or organizational support for the program, and subsequently developing and implementing the program. This example illustrates a well-developed project that is beyond the task of simply creating a group curriculum from found materials. Past Intern projects have included the development and implementation of a DBT treatment program in an agency; researching, constructing and implementing a manual for psychological testing; and researching and implementing strategies to increase integration between behavioral health and medical staff.

Lawrence Hall and Pillars Interns are encouraged to consult with agency staff to determine which staff member will be able to provide the most appropriate consultation and supervision for the project. The Forensic Center Interns will be assigned an advisor to assist them in completing their projects.

INTERN PROJECT SCHEDULE OF DELIVERABLES
The Chicago School Community Internship Consortium

Deliverable Due Date	Deliverable	Deliverable Details
September – October	Solidify area of interest based on a need in the community and mission of your site.	Start completing the Intern Project Planning Form (attached) Consult with agency staff, determine who will advise you on this project (Lawrence Hall and Pillars), or who will be assigned to you (Forensic Center).
November 6, 2017	Submit Signed Intern Project Planning Form to DoT	Have advisor and supervisors sign form.
Ongoing	Planning and Implementation	Provide your supervisor and/or advisor weekly updates on planning and implementation of project. Discuss and implement plans of action to address barriers, pitfalls, or limitations (e.g. on the part of the staff, participants, liabilities, etc.) that emerge as a result of the proposed project.
Feb 5, 2018	Project Evaluation Draft 1 Due to DoT and Supervisors	Follow Project Evaluation Report Template (attached)
April 9, 2018	Final Project Evaluation Due to DoT and Supervisors; Presentation is scheduled	Schedule presentation of Intern Project with DoT, site supervisors, and relevant key stakeholders at site.
June 29, 2018	Intern Project presentations completed	

INTERN PROJECT PLANNING FORM
The Chicago School Community Internship Consortium

Name:

Date:

Area of Interest:

Leadership and professional skills that you bring to the project and hope to further develop through experience:

Statement of Problem (include a min. of three relevant peer-reviewed journal articles that support the basis of the stated problem or need):

Description of Project:

Target audience (clients, staff, general public, etc., include the number of individuals who will be served and any community organizations involved):

Goals:

Objectives:

Location of the Project:

Key Issues that the Project Addresses:

Special conditions, culture, and/or ethical issues unique to the setting or clients:

Projected Outcomes:

Benefits to the community, community organization or agency:

Risk and Benefits of Project:

Supports and Resources necessary from agency to implement project:

Alternative course of action should the initial plan not work out:

PROJECT EVALUATION REPORT

The Chicago School Community Internship Consortium

Name

Date

Project Name

Overview of Project

Intern Role in the Project

Goals and Objectives

Areas Assessed

Procedure Used to Evaluate Project (methods, persons involved, materials used, etc.)

Limitation of the Evaluation Procedures (if any)

Project Outcome/impact (consider if goals and objectives were met and any barriers that undermined goal attainment)

Implications of Findings

Recommendations for Future Consideration

Appendix II: Intern Project Evaluation Form

The Chicago School Community Internship Consortium

Intern: _____ Date of Review: _____

Reviewer: _____ Department: _____

	<i>Item</i>	<i>Outstanding</i>	<i>Exceeds Expectations</i>	<i>Meets Expectations</i>	<i>Needs Improvement</i>	<i>Unsatisfactory</i>
1.	Met all Intern project due dates (e.g., reviewed with and obtained signature from agency supervisor)	5	4	3	2	1
2.	Assessed for and clearly identified agency need	5	4	3	2	1
3.	Thoroughly described project	5	4	3	2	1
4.	Clearly delineated goals and objectives of project	5	4	3	2	1
5.	Acquired appropriate resources (time, materials, etc.) for project	5	4	3	2	1
6.	Reviewed and incorporated related research	5	4	3	2	1
7.	Use of consultation/outreach/evaluation/feedback	5	4	3	2	1
8.	Adhered to projected timeline	5	4	3	2	1
9.	Strategy and success of implementation of project	5	4	3	2	1
10.	Comprehensive, clear and concise Project Evaluation Report	5	4	3	2	1

Additional Comments:

Appendix III: Training Agreement

The Chicago School Community Internship Consortium

This agreement is entered into by _____ (Intern) and _____ (Clinical Supervisor) for the Clinical Placement at _____ (Site) within the Internship for Community for 2017-2018.

The agreement is effective from _____, _____ to _____, _____.

Intern agrees to commit _____ hours per week to working at the site.

Clinical Placement Training Plan:

Primary training objectives: **Please use the Intern Self-Assessment & Internship Goals form to complete the below.**

Supervisor and Intern jointly determine up to five primary training objectives for the training year. Please list each of these below, as well as activities that will demonstrate the achievement of each objective.

Objective	Activities
1.	
2.	
3.	

4.	
5.	

Assignments:

Indicate the average number of hours weekly the Intern will engage in the following:

- Intervention (Individual, Couples, Group Therapy) _____
- Assessment (Intake, Formal Testing) _____
- Case Management _____
- Supervising Trainees _____
- Research/Program Evaluation _____
- Program Development/Design _____
- Providing Training/Presentations _____
- Consultation _____
- Community Engagement _____
- Participating in Didactic Training _____
- Outreach/Programming _____
- Administrative/Management _____
- Supervision of Intern _____

Please list any other activities in which the Intern will participate and the determined time commitment.

Activity:

Time:

Special projects:

Evaluation Plan:

Intern and Supervisor will meet after six months to formally assess the Intern's progress toward meeting his/her objectives. At that time, the Intern and Supervisor may adjust planned activities to ensure that the Intern achieves his/her goals. Intern and Supervisor agree to abide by the Grievance and Due Process policies and procedures outlined in the Internship Program Manual.

Intern Signature

Date

Clinical Supervisor Signature

Date

Training Director Signature

Date

Appendix IV: Release Time Form

The Chicago School Community Internship Consortium

Name: _____

Date: _____

Type of Release:

- Personal Time Off
- Professional Training Opportunity
- Graduation
- Other _____

From: ___/___/___

To: ___/___/___

Planned Unplanned

Total days off: _____

*** Note that you have a total of 10 workdays of release time for personal time off (vacation, personal days, and illness), plus 2 days for professional training opportunities (dissertation, postdoctoral interviews, conferences, etc.) and 1 additional day for graduation. ***

You must submit this request two weeks prior to start of planned time off. You must submit request including conference brochure and registration prior to attending.

Requester Name

Requester Signature

___/___/___
Date

Supervisor Name

Supervisor Signature

___/___/___
Date

Director of Training Name

Dot Signature

___/___/___
Date

Appendix V: Formal Intern Evaluation

To be completed by primary supervisor(s)

Intern: _____ Supervisor: _____

Dates of Evaluation: _____ to _____

Scoring Criteria:

1 Significantly below expectations --Significant improvement in functioning is needed to meet expectations
3 Below expectations - Some improvement in functioning is needed to meet expectations
5 Meets Expectations --Functions adequately for level of training
7 Exceeds Expectations --Functions above average for level of training
10 Significantly Exceeds Expectations --Functions exceptionally for level of training
N/A --Not Applicable/Not Observed/Cannot Say

NOTE: As described in the internship policies, any score below a "5" on any competency item will trigger formal Due Process Procedures.

Evidence Based Practice in Intervention

Develops evidence-based treatment 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.

Establishes and maintains effective therapeutic relationships

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

AVERAGE SCORE FOR BROAD GOAL AREA

#DIV/0
!

Comments:

Evidence Based Practice in Assessment

Selects and applies assessment methods that draw from the best available 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 client

Interprets assessment results within current research and professional standards and guidelines

Uses interpretations to inform case conceptualization, classification, and recommendations

Guards against decision-making biases by distinguishing subjective from objective aspects of the assessment

Communicates assessment results orally in an accurate and effective manner sensitive to a range of audiences

Communicates assessment results in writing in an accurate and effective manner sensitive to a range of audiences

AVERAGE SCORE FOR BROAD GOAL AREA

#DIV/0!
!

Comments:

Consultation / Interprofessional / Interdisciplinary

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

Demonstrates knowledge of consultation models and practices.

Applies knowledge about consultation in direct or simulated consultation with individuals and their families, other healthcare professionals, interprofessionals groups, or systems related to health and behavior

Applies knowledge about consultation in direct or simulated consultation with other healthcare professions and interprofessional groups.

AVERAGE SCORE FOR BROAD GOAL AREA

#DIV/0!
!

Comments:

Supervision

Demonstrates knowledge of supervision models and practices

Applies knowledge of supervision direct or simulated practice with psychology trainees or other health professionals.

Identifies how their personal and professional identity impacts their work with supervisees

Uses supervision as a space where they are able to gain perspective on their own identity and its impact on their work with colleagues and clients

AVERAGE SCORE FOR BROAD GOAL AREA	#DIV/0! !
-----------------------------------	--------------

Comments:

Cultural and Individual Diversity

Demonstrates an understanding of how one's own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves	
Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision/consultation, and service.	
Integrates knowledge of individual and cultural differences in the conduct of professional roles (e.g., research, services, and other professional activities).	
Demonstrate the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during internship.	
Can apply a framework for working effectively with areas of individual and cultural diversity not previously encountered over the course of their careers.	
Demonstrates the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews may create conflict with their own.	

AVERAGE SCORE FOR BROAD GOAL AREA	#DIV/0! !
-----------------------------------	--------------

Comments:

Research

Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities via professional publication or presentation at the local, regional or national level.	
Demonstrates knowledge of theories and methods of program evaluation	

AVERAGE SCORE FOR BROAD GOAL AREA	#DIV/0! !
-----------------------------------	--------------

Comments:

Ethical and Legal Standards

Demonstrates knowledge of and acts in accordance with the APA Ethical Principles and Code of Conduct

Demonstrates knowledge of and acts in accordance with all organizational, local, state, and federal laws, regulation, rules and policies relevant to health service psychologists

Demonstrates knowledge of and acts in accordance with all professional standards and guidelines.

Recognizes ethical dilemmas as they arise and applies ethical decision-making processes in order to resolve them.

Conducts self in an ethical manner in all professional activities.

AVERAGE SCORE FOR BROAD GOAL AREA

#DIV/0!
!

Comments:

Professional Values and Attitudes

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

Actively seeks and demonstrates openness to feedback.

Engages in self-reflection regarding personal and professional functioning.

Engages in activities to maintain and improve performance, well-being, and professional effectiveness.

Responds professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.

AVERAGE SCORE FOR BROAD GOAL AREA

#DIV/0!
!

Comments:

Communication & Interpersonal Skills

Develop and maintain effective relationships with a wide range of individuals, including colleagues, organizations, professions, communities, and those receiving professional services.

Possesses effective interpersonal skills.

Is able to produce and comprehend oral, nonverbal, and written communications that are informative and well-integrated

Demonstrates a thorough grasp of professional language and concepts.

Manages difficult communication.

AVERAGE SCORE FOR BROAD GOAL AREA

#DIV/0!
!

Comments:

OVERALL RATING (average of broad goal area scores)

#REF!

Comments on Intern's overall performance:

I acknowledge that my supervisor has reviewed this evaluation with me.

Intern Signature

Date

Primary Supervisor's Signature

Date

Secondary Supervisor's Signature

Date

Appendix VI: Informal Performance Evaluation



The Chicago School Community Internship Consortium

Intern Name: _____ Date of Review: _____

Name of Reviewer: _____ Site: _____

Feedback for period ____ 1st Quarter ____ 3rd Quarter
Total Hours to Date: Direct: _____ Indirect: _____

List of Strengths:

- 1.
- 2.
- 3.
- 4.

Comments (expand upon the strengths listed):

List of Areas of Growth:

- 1.
- 2.
- 3.
- 4.

Comments (expand upon the areas of growth listed):

Review of goals from previous quarter:

1. _____

2. _____

3. _____

Intern goal(s) for the following quarter:

1.

2.

3.

Additional Notes Regarding Development Plan:

Intern Signature

Date

Primary Supervisor Signature

Date

Secondary Supervisor Signature

Date

Competencies to guide Informal Review Process

Table B2

Goal 1		
Evidence Based Practice in Intervention		
<u>Objective(s):</u>	1a 1b 1c	Case conceptualization and treatment planning Implementation of therapeutic interventions Evaluation of interventions
<u>Competencies Expected:</u>	1a 1b 1c	Develops evidence-based treatment 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. Establishes and maintains effective therapeutic relationships 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
<u>Minimum Thresholds for Achievement of Expected Competencies:</u>	Minimal score of 5 ('meets expectations') on all competency items	
Goal 2		
Evidence Based Practice in Assessment		
<u>Objective(s):</u>	2a 2b 2c	Instrument selection and administration Test Interpretation Communicating Results
<u>Competencies Expected:</u>	2a 2b 2c	Selects and applies assessment methods that draw from the best available 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 client Interprets assessment results within current research and professional standards and guidelines Uses interpretations to inform case conceptualization, classification, and recommendations Guards against decision-making biases by distinguishing subjective from objective aspects of the assessment Communicates assessment results orally in an accurate and effective manner sensitive to a range of audiences Communicates assessment results in writing in an accurate and effective manner sensitive to a range of audiences
<u>Minimum Thresholds for Achievement of Expected Competencies:</u>	Minimal score of 5 ('meets expectations') on all competency items	
Goal 3		
Consultation and Interprofessional / Interdisciplinary Skills		
<u>Objective(s):</u>	3a 3b	Theories and Methods of Consultation Multidisciplinary collaboration
<u>Competencies Expected:</u>	3a 3b	Demonstrates knowledge and respect for the roles and perspectives of other professions. Demonstrates knowledge of consultation models and practices. Applies knowledge about consultation in direct or simulated consultation with individuals and their families, other healthcare professionals, interprofessionals groups, or systems related to health and behavior Applies knowledge about consultation in direct or simulated consultation with other healthcare professions and interprofessional groups.
<u>Minimum Thresholds for Achievement of Expected Competencies:</u>	Minimal score of 5 ('meets expectations') on all competency items	

Goal 4		Supervision
<u>Objective(s):</u>	4a 4b	Theories and Methods of Supervision Effective provision of supervision
<u>Competencies Expected:</u>	4a 4b	Demonstrates knowledge of supervision models and practices Applies knowledge of supervision in direct or simulated practice with psychology trainees or other health professionals. Identifies how their personal and professional identity impacts their work with supervisees Uses supervision as a space where they are able to gain perspective on their own identity and its impact on their work with colleagues and clients
<u>Minimum Thresholds for Achievement of Expected Competencies:</u>		Minimal score of 5 ('meets expectations') on all competency items
Goal 5		Cultural and Individual Diversity
<u>Objective(s):</u>	5a 5b 5c	Cultural awareness Evidence-informed approach to diversity considerations Effective clinical approaches
<u>Competencies Expected:</u>	5a 5b 5c 5b 5c	Demonstrates an understanding of how one's own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision/consultation, and service. Integrates knowledge of individual and cultural differences in the conduct of professional roles (e.g., research, services, and other professional activities). Demonstrate the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during internship. Can apply a framework for working effectively with areas of individual and cultural diversity not previously encountered over the course of their careers. Demonstrates the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews may create conflict with their own.
<u>Minimum Thresholds for Achievement of Expected Competencies:</u>		Minimal score of 5 ('meets expectations') on all competency items
Goal 6		Research
<u>Objective(s):</u>	6a 6b	Application of scientific knowledge to practice Program Evaluation
<u>Competencies Expected:</u>	6a 6b	Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities via professional publication or presentation at the local, regional or national level. Demonstrates knowledge of theories and methods of program evaluation
<u>Minimum Thresholds for Achievement of Expected Competencies:</u>		Minimal score of 5 ('meets expectations') on all competency items
Goal 7		Ethical and Legal Standards
<u>Objective(s):</u>	7a 7b	Knowledge of and adherence to ethical, legal, and professional standards Ethical decision-making and conduct
<u>Competencies Expected:</u>	7a 7b	Demonstrates knowledge of and acts in accordance with the APA Ethical Principles and Code of Conduct Demonstrates knowledge of and acts in accordance with all organizational, local, state, and federal laws, regulation, rules and policies relevant to health service psychologists Demonstrates knowledge of and acts in accordance with all professional standards and guidelines. Recognizes ethical dilemmas as they arise and applies ethical decision-making processes in order to resolve them. Conducts self in an ethical manner in all professional activities.
<u>Minimum Thresholds for Achievement of Expected Competencies:</u>		Minimal score of 5 ('meets expectations') on all competency items

Goal 8 Professional Values and Attitudes		
<u>Objective(s):</u>	8a 8b	Self awareness and Professional Behavior Professional awareness
<u>Competencies Expected:</u>	8a 8b	Behaves in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others. Actively seeks and demonstrates openness to feedback. Engages in self-reflection regarding personal and professional functioning. Engages in activities to maintain and improve performance, well-being, and professional effectiveness. Responds professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.
<u>Minimum Thresholds for Achievement of Expected Competencies:</u>		Minimal score of 5 ('meets expectations') on all competency items
Goal 9 Communication & Interpersonal Skills		
<u>Objective(s):</u>	9a 9b	Interpersonal Skills Effective Communication
<u>Competencies Expected:</u>	9a 9b	Develop and maintain effective relationships with a wide range of individuals, including colleagues, organizations, professions, communities, and those receiving professional services. Possesses effective interpersonal skills. Is able to produce and comprehend oral, nonverbal, and written communications that are informative and well-integrated Demonstrates a thorough grasp of professional language and concepts. Manages difficult communication.
<u>Minimum Thresholds for Achievement of Expected Competencies:</u>		Minimal score of 5 ('meets expectations') on all competency items

Appendix VII: Final Case Presentation Evaluation



The Chicago School Community Internship Consortium

Intern Name: _____

Date of Review: _____

Name of Reviewer: _____

Rating Guide:

- 5 Outstanding – Intern consistently demonstrates superior performance far exceeding the standards
- 4 Exceeds Expectations – Intern significantly exceeds the standards and at times goes above and beyond expectations
- 3 Meets Expectations – Intern meets the standards
- 2 Needs Improvement – Intern’s performance is below the standards and some effort is needed to improve and meet objectives
- 1 Unsatisfactory – Intern does not meet the minimum acceptable level

	<i>Item</i>	<i>Outstanding</i>	<i>Exceeds Expectations</i>	<i>Meets Expectations</i>	<i>Needs Improvement</i>	<i>Unsatisfactory</i>
1.	Includes two scholarly references	5	4	3	2	1
2.	Presenting Problems	5	4	3	2	1
3.	Background Information	5	4	3	2	1

4.	Theoretical Orientation with Rationale for Choosing Orientation	5	4	3	2	1
5.	Appreciates the use of self in the therapeutic relationship	5	4	3	2	1
6.	Conceptualization of Problem	5	4	3	2	1
7.	Treatment Goals and Major Issues	5	4	3	2	1
8.	Significant Interpretations	5	4	3	2	1
9.	Significant Turning Points in Therapy	5	4	3	2	1
10.	Issues Remaining	5	4	3	2	1
11.	Client strengths	5	4	3	2	1
12.	Self-Evaluation (Countertransference Issues, role of Supervisor(s), problems/Strengths/Areas for Improvement)	5	4	3	2	1
13.	Incorporation of Diversity/Cultural Factors	5	4	3	2	1
14.	Presentation Skills	5	4	3	2	1
15.	Why did you choose this case?	5	4	3	2	1
16.	Articles Chosen	5	4	3	2	1
17.	References	5	4	3	2	1

Additional comments:

Appendix VIII: Program Evaluation

To be completed by Intern

Your feedback about the internship experience is important to our continually improving the training program. We greatly appreciate your input. This input will be aggregated with all your fellow interns and presented to the supervisory team following the evaluation period. This input will be used to help us identify strengths and growth edges of the internship program, and allow us to make necessary changes and enhancements to the program. Please complete electronically and email to the DOT.

Intern: _____

Dates of Evaluation: _____ to _____

Scoring Criteria for this section:

1=Strongly Disagree; 2= Disagree; 3= Neutral or Undecided; 4= Agree; 5= Strongly Agree

Primary Clinical Site

My experience at my clinical site was smooth.

I am satisfied with the amount, quality, and nature of my supervision.

I understand what is expected of me at my site.

I have sufficient oversight on new tasks and experiences.

I am provided opportunities for independent work and leadership of projects/experiences.

I have sufficient opportunities to supervise trainees.

I am provided opportunities to examine my ethical decision making.

I have opportunities to engage in a multi-disciplinary system.

The supervisors and staff at my site are sensitive to issues of diversity and cultural differences.

My projects and assignments are relevant to my learning and professional goals.

I have sufficient resources available to me (e.g. technology, space, library, testing materials.)

Comments about primary clinical site:

Overall Internship Consortium

The training program is contributing to my professional identity, competence, and ability to function independently as a psychologist.	
The training program is professionally stimulating and challenging.	
The training program is well structured and organized.	
I am making progress towards my stated learning goals for the training year.	
I clearly understand the roles of faculty, supervisors, and the Training Director.	
I have adequate opportunities to provide feedback about the program and faculty.	
I feel the evaluation process is timely and useful in my professional development.	
The training program faculty are available and responsive when I need assistance.	
The Training Director is available and responsive to me when I need assistance.	
The training program faculty are qualified and serve as good professional role models.	
The training program faculty are sensitive to issues of diversity and cultural differences.	
Throughout my training, I have opportunity to reflect on my identity as a clinician including my clinical voice, my strengths, and my growth edges.	
I am effectively being prepared for leadership roles in community agencies or organizations.	
I am gaining the skill-sets necessary to effectively engage traditionally underserved persons and communities.	
I am satisfied with the overall quality of didactic lectures.	
I am satisfied with the relevance of lecture topics.	
I am satisfied with the Group Supervision experience.	
I am satisfied with the "Supervision of Supervision" experience.	
Comments about overall consortium:	

Scoring Criteria for this section:

1=Poor; 2= Fair; 3= Average; 4= Very Good; 5= Excellent

Development of Clinical Skills: In this section, please rate the quality of your training within each of the program's identified competency areas. Please consider your experience with didactic training and supervision as well as direct clinical experiences.

Evidence Based Practice in Intervention

Quality of Training

Comments:

Evidence Based Practice in Assessment

Quality of Training

Comments:

Consultation / Interprofessional / Interdisciplinary

Quality of Training

Comments:

Supervision

Quality of Training

Comments:

Cultural and Individual Diversity

Quality of Training

Comments:	
Research	
Quality of Training	
Comments:	
Ethical and Legal Standards	
Quality of Training	
Comments:	
Professional Values and Attitudes	
Quality of Training	
Comments:	
Communication & Interpersonal Skills	
Quality of Training	
Comments:	

Appendix IX: Evaluation of Supervisors

The Chicago School Community Internship Consortium

Supervisor Evaluation: *To be completed by Intern*

Intern: _____ Supervisor: _____

 Date: _____

Evaluation Interval (Please Circle): **Mid Year** **End of Year**

Scoring Criteria:

1 Significant Development Needed --Significant improvement is needed to meet expectations	
2 Development Needed -- Improvement is needed to meet expectations	
3 Meets Expectations	
4 Exceeds Expectations --Above average experience	
5 Significantly Exceeds Expectations --Exceptional experience	
N/A --Not Applicable/Not Observed/Cannot Say	

NOTE: Any score below a 3 on any item will result in corrective action as deemed appropriate by the Training Committee in order to improve the Intern's supervisory experience.

General Characteristics of Supervisor

Is accessible for discussion, questions, etc.	
Allotted sufficient time for supervision and scheduled supervision meetings appropriately	
Kept sufficiently informed of case(s)	
Was interested in and committed to supervision	
Set clear objectives and responsibilities throughout supervised experience	
Was up-to-date in understanding of clinical populations and issues	
Presented a positive role model	
Maintained appropriate interpersonal boundaries with patients and supervisees	
Provided constructive and timely feedback on supervisee's performance	

Encouraged appropriate degree of independence

Demonstrated concern for and interest in supervisee's progress, problems, and ideas

Communicated effectively with supervisee

Interacted respectfully with supervisee

Maintained clear and reasonable expectations for supervisee

Supported Intern completion of the program

Provided a level of case-based supervision appropriate to supervisee's training needs

Comments:

Development of Clinical Skills

Assisted in coherent conceptualization of clinical work

Assisted in translation of conceptualization into techniques and procedures

Was effective in providing training within the goal areas of the Internship program

Was effective in helping to develop short-term and long-range goals for clients

Promoted the acquisition of knowledge, skills, and competencies

Promoted clinical practices in accordance with ethical and legal standards

Comments:

Summary

Overall rating of supervision with this supervisor

#DIV
/0!

Describe how the supervisor contributed to your learning:

Describe how supervision or the training experience could be enhanced:

Any other suggestions/feedback for your supervisor?

Supervisor's Signature

Date

Intern's Signature

Date

Appendix X

Didactic Presentation Evaluation



Didactic Presentation Evaluation Chicago School Community Internship Consortium

Date of Presentation:

Speaker:

Topic of Presentation:

CIC Reviewer:

Please circle your rating for each of the following:

	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree	NA
The presentation was useful to interns.	1	2	3	4	5	X
The presentation was well organized.	1	2	3	4	5	X
The speaker was knowledgeable about the topic.	1	2	3	4	5	X
The presentation was interesting.	1	2	3	4	5	X
The speaker answered audience questions thoroughly and appropriately.	1	2	3	4	5	X
The speaker addressed multicultural and diversity issues <u>relevant</u> to the topic.	1	2	3	4	5	X
The speaker was engaging.	1	2	3	4	5	X
I would recommend this speaker.	1	2	3	4	5	X

Overall, what was best about the presentation and why?

What would you recommend to improve this presentation?

Appendix XI: Supervision Record Form



Supervisee(s):				Supervisor:					
Date:		Duration:		Site:	<input type="checkbox"/> LH	<input type="checkbox"/> TFC	<input type="checkbox"/> Pillars		
Type of Supervision	<input type="checkbox"/> Individual Supervision <input type="checkbox"/> Group Supervision								
Nature of Meeting:	<input type="checkbox"/> Scheduled Supervision <input type="checkbox"/> Performance Evaluation <input type="checkbox"/> Other _____								
Topics to be addressed:									
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> 1. Evidence Based Practice in Assessment/Diagnosis <input type="checkbox"/> 2. Evidence Based Practice in Treatment/Intervention <input type="checkbox"/> 3. Conceptualization <input type="checkbox"/> 4. Professional Development, Values & Attitudes <input type="checkbox"/> 5. Consultation and Interdisciplinary Skills <input type="checkbox"/> 6. Documentation <input type="checkbox"/> 7. Ethical and Legal Standards <input type="checkbox"/> 8. Areas for Improvement </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> 9. Cultural Competency <input type="checkbox"/> 10. Chart Audits <input type="checkbox"/> 11. Agency News/Concerns <input type="checkbox"/> 12. Community Resources <input type="checkbox"/> 13. Feedback <input type="checkbox"/> 14. Supervision <input type="checkbox"/> 15. Review of Audio/Visual Tape <input type="checkbox"/> 16. Other </td> </tr> </table>								<input type="checkbox"/> 1. Evidence Based Practice in Assessment/Diagnosis <input type="checkbox"/> 2. Evidence Based Practice in Treatment/Intervention <input type="checkbox"/> 3. Conceptualization <input type="checkbox"/> 4. Professional Development, Values & Attitudes <input type="checkbox"/> 5. Consultation and Interdisciplinary Skills <input type="checkbox"/> 6. Documentation <input type="checkbox"/> 7. Ethical and Legal Standards <input type="checkbox"/> 8. Areas for Improvement	<input type="checkbox"/> 9. Cultural Competency <input type="checkbox"/> 10. Chart Audits <input type="checkbox"/> 11. Agency News/Concerns <input type="checkbox"/> 12. Community Resources <input type="checkbox"/> 13. Feedback <input type="checkbox"/> 14. Supervision <input type="checkbox"/> 15. Review of Audio/Visual Tape <input type="checkbox"/> 16. Other
<input type="checkbox"/> 1. Evidence Based Practice in Assessment/Diagnosis <input type="checkbox"/> 2. Evidence Based Practice in Treatment/Intervention <input type="checkbox"/> 3. Conceptualization <input type="checkbox"/> 4. Professional Development, Values & Attitudes <input type="checkbox"/> 5. Consultation and Interdisciplinary Skills <input type="checkbox"/> 6. Documentation <input type="checkbox"/> 7. Ethical and Legal Standards <input type="checkbox"/> 8. Areas for Improvement	<input type="checkbox"/> 9. Cultural Competency <input type="checkbox"/> 10. Chart Audits <input type="checkbox"/> 11. Agency News/Concerns <input type="checkbox"/> 12. Community Resources <input type="checkbox"/> 13. Feedback <input type="checkbox"/> 14. Supervision <input type="checkbox"/> 15. Review of Audio/Visual Tape <input type="checkbox"/> 16. Other								
Topic Discussed:									
1.									
2.									
3.									
4.									

Summary/Recommendations/Directives:

Supervisor Signature/Date

Supervisee Signature/Date

Appendix XII: Trainee Development Plan
The Chicago School Community Internship Consortium

Date of Development Plan Meeting:

Name of Trainee:

Primary Supervisor/Advisor:

Names of All Persons Present at the Meeting:

All Additional Pertinent Supervisors/Faculty:

Date for Follow-up Meeting(s):

List all competency domains in which the trainee's performance does not meet the benchmark:

Description of the problem(s) in each competency domain listed above:

Date(s) the problem(s) was brought to the trainee's attention and by whom:

Steps already taken by the trainee to rectify the problem(s) that was identified:

Steps already taken by the supervisor(s)/faculty to address the problem(s):

Plan of action (include how the intern will demonstrate improvement, specific steps for the intern to achieve the desired outcome, and the time frame in which these steps must be completed):

I, _____, have reviewed the above development plan with my primary supervisor/advisor, any additional supervisors/faculty, and the director of training. My signature below indicates that I fully understand the above. I agree/disagree with the above decision (please circle one). My comments, if any, are below (*PLEASE NOTE: If trainee disagrees, comments, including a detailed description of the trainee’s rationale for disagreement, are REQUIRED*).

Trainee Name	Date	Training Director	Date
--------------	------	-------------------	------

Trainee’s comments (Feel free to use additional pages):

All supervisors/ faculty with responsibilities or actions described in the above development plan agree to participate in the plan as outlined above. Please sign and date below to indicate your agreement with the plan.

TRAINEE DEVELOPMENT PLAN
Continued

SUMMATIVE EVALUATION OF DEVELOPMENT PLAN

Follow-up Meeting(s):
Date (s):
In Attendance:

I, _____, have reviewed the above summative evaluation of my development plan with my primary supervisor(s)/faculty, any additional supervisors/faculty, and the director of training. My signature below indicates that I fully understand the above. I agree/disagree with the above outcome assessments and next steps (please circle one). My comments, if any, are below. *(PLEASE NOTE: If trainee disagrees with the outcomes and next steps, comments, including a detailed description of the trainee's rationale for disagreement, are REQUIRED).*

Trainee	Date	Training Director	Date
---------	------	-------------------	------

Trainee's comments (Feel free to use additional pages):

Appendix XIII: Supervisory Assignment

This form is intended to identify the intern's primary and secondary supervisor assignments. It is intended to create a clear and transparent understanding of supervisor and trainees' roles throughout the training year. This form will be completed at the start of the training year and at any time changes in supervisor assignments occur.

It is my, _____, understanding that Dr. _____ will serve as my primary supervisor and Dr. _____ will serve as my secondary supervisor. This arrangement will begin on ____ and end on _____. In their role as a primary supervisor, Dr. _____ will meet with me for ____ hour(s) weekly, evaluate my performance through in-formal, formal and in-person feedback throughout the supervisory relationship. In their role as a secondary supervisor, Dr. _____ will meet with me for ____ hour(s) weekly, provide in-person feedback and provide quantitative and qualitative feedback to the primary supervisor prior to the informal and formal evaluation completion. My primary supervisor will meet with me to discuss the cumulative feedback provided by all supervisors. This will occur in an in person meeting within one week of the informal or formal evaluation being completed.

Intern Name (printed): _____

Intern Signature: _____

Intern Site: _____

Primary Supervisor Name (printed): _____

Primary Supervisor Signature: _____

Secondary Supervisor Name (printed): _____

Secondary Supervisor Signature: _____

Appendix XIV: Intern Grievance and Due Process Policies

Intern Grievance Procedure

Interns are expected to demonstrate the ability to resolve and manage conflict in a professional manner, including self-evaluation, self-awareness, and integrating constructive feedback from others. The doctoral internship year is often a year of great transition and interns are encouraged to take steps to ensure personal well-being and effectiveness. In addition, interns are expected to be aware of and abide by the APA Ethical Principles of Psychologists and Code of Conduct and Health Insurance Portability and Accountability Act (HIPAA). These documents are provided to all interns during orientation, and interns are required to sign an acknowledgment form stating that they have received, reviewed, and understand them.

Grievances Procedures Initiated by an Intern

The following guidelines are provided to interns who may be experiencing a problem with the program, supervisor(s), staff person(s), and/or other interns that is inhibiting their training experience. Interns pursuing grievances should know that no negative repercussions from the members of the consortium will result when their claims are made in good faith. Interns are expected to follow these guidelines in addressing any grievance:

Informal Grievance Review

Most issues that arise during the training year can be resolved through face-to-face, informal communication between relevant parties. Interns are encouraged to discuss issues and conflicts directly with the individual who is the subject of the grievance. When conflicts arise between interns and supervisors, supervisors are expected to be open and receptive, to make efforts to resolve the conflict or problem, and to seek consultation when needed. The Training Agreement developed at the beginning of the training year outlines the expectations of both Intern and supervisor, and can be used as a guide to help resolve potential conflicts. An intern may request that the Director of Training or another leadership member provide informal consultation to assist in determining the appropriate course of action. Consultation may serve to resolve the conflict or may result in the matter being escalated to a more formalized intervention. An intern may also request that the Director of Training or another training team member provide informal mediation. If mediation is insufficient to resolve the conflict, the matter will be escalated to a more formalized intervention. If the grievance involves the policies of the training site or consortium, the intern is expected to talk personally with their Primary Supervisor or the Director of Training. Any instance of staff or supervisor misconduct, discrimination, or harassment should be brought immediately to the attention of the Director of Training. If the Director of Training is the subject of the grievance, the issue should be directed to the Dean of Academic Affairs.

Formal Grievance Review

If the intern's grievance cannot be resolved through an informal process, the intern may request a Formal Grievance Review. Formal grievances should be submitted to the Director of Training or to the Dean of Academic Affairs if the Director of Training is the source of the intern's grievance. Grievances should be submitted in writing using the internship's formal grievance form. Note that simply creating and sending an email is not an acceptable form of filing a grievance. The Director of Training or the Dean of Academic Affairs may take action on the grievance without consult within 5 business days, or may constitute a grievance committee within 5 business days, which will hear the case and deliberate the outcome. If the Director of Training or Dean of Academic Affairs takes action without consult, they may meet individually with the involved parties prior to taking action, provided that the outcome is still decided within 5 business days. If a grievance committee is assembled, it will consist of three training team members representing consortium sites and either the Director of Training or the Dean of Academic Affairs. In some circumstances, the committee may be limited to representation from the site within which the intern is placed. Individuals named in the grievance will not serve on the grievance committee in that matter. The grievance committee will conduct the following steps:

- a. The grievance committee will invite the subject of the grievance to submit a written response to the grievance. This response must be submitted within 10 business days of the grievance being filed.
- b. The grievance committee will meet with the parties involved, and may do so at one time or separately. All meetings will be conducted within 10 business days of the grievance being filed.
- c. Following all necessary meetings, the committee will meet to determine the necessary action. A majority vote of the committee is necessary to determine the outcome of the grievance. The grievance committee will provide a written summary of the outcome and may include recommendations to resolve the issue. The summary will be signed by all relevant parties, and shared with the intern and the individual who was the subject of the grievance within 14 business days of the grievance being filed.
- d. Both the intern and the subject of the grievance will report back to the Director of Training or the Dean of Academic Affairs within 10 business days of receipt of the summary document as to whether the problem is resolved or if progress is being made. If all involved parties agree that the progress being made is adequate and is likely to lead to resolution, the plan of action may be modified and/or continued for a specified length of time no longer than 10 additional business days and revisited by the grievance committee to determine whether resolution has been achieved.
- e. If the plan of action fails to result in adequate resolution of the problem, or if the intern is dissatisfied with the outcome of the Formal Grievance Review, the Director of Training will convene a review panel consisting of herself and at least one member of the agency administration at the intern's primary placement within 14 business days. The intern may also request a specific member of the ITC to serve on the review panel. The review panel will review all written materials and have an opportunity to interview the parties involved or any other individuals with relevant information. The review panel has final discretion regarding outcome. If the review panel determines that a grievance against a staff member has merit, then the issue will be turned over to the employer agency in order to initiate the due process procedures outlined in the employment contract.

If, at any point during the grievance process, there is reason to believe that the intern is being subject to unethical or potentially harmful treatment, the Director of Training may suspend the relationship between the involved parties until an investigation may be completed.

Intern Due Process Procedures

The Chicago School's Internship Consortium (CIC) offers evaluative and due process procedures for interns to ensure that decisions made by the Internship Training Committee (ITC) are clear, thoughtful, and fair, based on the facts and circumstances of the situation. The ITC, in consultation with Human Resources, has made a good faith effort to ensure this policy does not conflict with individual training site policies; however, if such a conflict exists, the ITC will convene to resolve the conflict.

Evaluation Philosophy

Ongoing Feedback

The Internship Training Committee continually assesses each intern's performance. Feedback facilitates professional growth by acknowledging strengths and identifying areas needing improvement. Supervisors provide formal written evaluations two times during the training year and interns complete self-assessments at the beginning of the year.

The following due process procedure is used when there is reason for concern regarding an intern's professional competency or behavior in any of the following:

- Maintaining Professional Standards – Inability or unwillingness to integrate the requisite professional standards into professional behavior.
- Professional Skills Development – Inability to reach the necessary level of competency in counseling/clinical/professional skill development.
- Professional Behavior – Any behavior which may cause harm to the training site and/or its clients or disrupt professional functioning.
- Ethical Boundaries – Inability to maintain professional and/or ethical boundaries with clients and/or other professionals.
- Any behavior which violates state law or ethical guidelines.

Concerns that necessitate the use of the procedure include but are not limited to:

- the intern does not acknowledge, understand, or address the problem when it is identified,
- the problem is not merely a reflection of a skill deficit which can be rectified by academic or didactic training,
- the quality of services delivered by the intern is sufficiently negatively affected,
- the problem is not restricted to one area of professional functioning,
- a disproportionate amount of attention by training personnel is required,
- the trainee's behavior does not change as a function of feedback, remediation efforts, and/or time,
- the problematic behavior has potential for ethical or legal ramifications if not addressed,
- the intern's behavior negatively impacts the public view of the agency,
- the problematic behavior negatively impacts the intern class.

Due Process Procedure

Informal Review

When a supervisor believes that an intern is exhibiting problematic behavior or is making inadequate progress related to expected skill development, the supervisor will first discuss the issue directly with the intern as soon as feasible in an attempt to informally resolve the problem. The intern will be provided time to correct the problem(s), as deemed reasonable by the supervisor but not beyond the next informal or formal evaluation period. If the intern has not made sufficient progress in rectifying the behavior or in their skill development, the direct supervisor will initiate the formal review process. If the behavior includes gross misconduct or ethical and/or legal implications, the supervisor must forego the informal review and initiate the formal review process

immediately. The Director of Training may be involved as the final arbiter in determining the progression from informal to formal review. The informal review process must be documented in writing, but will not become a part of the intern's professional file.

Formal Review

The formal review process is initiated for the following reasons:

- An intern's problem persists following the informal review
- An intern receives a score below a "5" on any competency item during an evaluation
- An intern behaves in a way that represents gross misconduct or violates ethical guidelines or state law.

Formal Review Procedures

The supervisor will notify the Director of Training who will begin the Formal Review Proceedings. A Formal Review Committee will be convened by the Director of Training which will consist of the Director of Training, the intern's primary supervisor, and at least one other member of the ITC. A Formal Review meeting will be held within 5 business days. The intern will be notified and invited to participate in the meeting. Regardless of whether the intern chooses to attend, he/she will be invited to submit a written statement to the Director of Training in response to the problem prior to the formal review. During the formal review, the committee will review all written documentation and have a discussion regarding the issue(s) that warranted the formal review. Following the meeting, the Committee will meet together privately and will make one of the following determinations: 1) move for "No Cause," 2) issue a "Development Plan," or 3) immediate dismissal.

No Cause – The Formal Review Committee may make the determination that the intern's actions may not constitute a problem that requires intervention. The awareness of the concern may be sufficient to rectify the issue and may not warrant formal remediation at this time. In this case, the intern can choose to have a written statement identifying that a formal review was held and that the claim was dismissed due to "No Cause" and have the document placed in his/her file and a copy sent to the Director of Clinical training. The intern may also choose to have no documentation written or sent to his/her Director of Clinical Training.

Development Plan – The content of the development plan will be determined during the Formal Review meeting, and will formally outline the scope and nature of the problems observed. This will act as a formal written Notice by which the supervisor will present the areas for improvement for the intern. The plan will objectively state how the intern will demonstrate improvement, outline steps for the intern to achieve the desired outcome, and specify the time frame in which these steps must be completed. Steps may include a recommendation of personal therapy, changing workload or responsibilities, additional coursework, study, or formal training, and/or altering the format/style of supervision. A copy of the development plan will be sent to the Director of Clinical Training at the intern's home doctoral program and an additional copy will be kept in the intern's professional file.

Within 5 business days of the conclusion of the development plan period, the Formal Review Committee will reconvene. The intern will again be invited to attend and participate in this meeting, and the outcomes of the development plan will be discussed. This meeting will result in one of the following outcomes: 1) If it is determined by the Committee that the intern has met the requirements of development plan within the allotted time, a letter summarizing the outcomes will be placed in the intern's professional file and copies will be given to the intern and the Director of Clinical Training of his/her doctoral program; 2) the intern will be placed on a maintenance plan; 3) the intern will be placed on a revised development plan (probationary status); or 4) the Committee will recommend that the intern be dismissed from the program for not meeting the goals set forth in the plan.

Maintenance Plans- In the event that an intern is making progress toward the requirements set forth by the development plan but has not met them within the timeframe determined, the intern may then be placed on a time-limited (up to 3 months as determined by the ITC) maintenance period. During this time, the intern will continue to meet with the committee and follow the recommended goals for the new maintenance plan.

The Committee will reconvene within 5 business days of the end of the maintenance plan period to review the outcomes of the plan. The intern will be invited to attend and participate in this meeting. The meeting will result in one of the following outcomes: 1) If it is determined by the Committee that the intern has met the requirements of the maintenance plan within the allotted time, a letter summarizing the outcomes will be placed in the intern's professional file and copies will be given to the intern and the Director of Clinical Training of his/her doctoral program; 2) the intern will be placed on a revised development plan (probationary status); 3) the Committee will recommend that the intern be dismissed from the program for not meeting the goals set forth in the plan.

Revised Development Plan- if it is determined that an intern has not met the requirements of the development plan, but the Committee believes that a revised development plan may be successful, the Committee will have 5 business days to submit, in writing, a formal document that stipulates the following:

- The intern is officially on probation and that non-compliance could result in dismissal from the program.
- Identification of problem behavior(s) or skills deficit(s) in question.
- A revised development plan which will include:
 - Targeted changes in behavior or skill development
 - Specific intervention strategies (i.e., remediation plan) that will be used to help the intern make the necessary improvements (e.g., additional supervision, additional professional readings, change in format and/or focus of supervision, etc.)
 - Steps for monitoring improvement
 - Methods used to evaluate improvement
 - A timeframe for expected resolution to the problem or skills improvement

The Committee will reconvene within 5 business days of the end of the revised plan period to review the outcomes of the plan. The intern will be invited to attend and participate in this meeting. The meeting will result in one of the following outcomes: 1) If it is determined by the Committee that the intern has met the requirements of probation within the allotted time, a letter revoking the intern's probationary status will be placed in the intern's professional file and copies will be given to the intern and the Director of Clinical Training of his/her doctoral program; 2) the Committee will recommend that the intern be dismissed from the program for not meeting the goals set forth in the plan.

Dismissal- If the Formal Review Committee determines that the intern has not made sufficient progress and/or progress in this area is not likely with further intervention, the committee may move for dismissal from the training program. This dismissal may occur immediately after the initial formal review meeting or after a development plan is attempted and is unsuccessful. An immediate dismissal would only be considered in the case of severe ethical or legal misconduct involving potential harm. A dismissal from the internship program may be appropriate for the following reasons:

- The intern has not made sufficient progress during his/her development, maintenance, and/or probationary period, and the Formal Review Committee has determined that further intervention will not rectify the issue or that remediation is not possible within the allotted time of the internship program.
- The severity of the problem signifies gross misconduct or includes ethical and/or legal violations that have caused or have the potential to cause harm to the training site, and/or, its clients, and/or the Internship Consortium.

If one or both of the above criteria are met, the Formal Review Committee may move to terminate the intern's placement. The decision to terminate an intern's placement may only be made through consensus by the Training Committee, and would represent a discontinuation of participation by the intern within every aspect of the consortium. The Training Committee would make this determination during a meeting convened within 10 business days of the last meeting described in the above remediation process, or during the next regularly-scheduled monthly Training Committee meeting, whichever occurs first. The Director of Training may determine to suspend the intern's clinical activities during this period until the decision has been made. Prior to the meeting for dismissal, the Training Committee will review all documentation from the Formal Review process. The Training committee may also interview the intern, members of the Formal Review Committee, and other involved parties in order to inform the decision regarding dismissal. If the Training Committee decides to dismiss the intern from the training program, the Training Committee will issue a notice of dismissal to the trainee's employer, APPIC, the intern, and the Director of Clinical Training at his/her doctoral training program within 20 business days. This timeframe will include the completion of a mandatory Appeal process, described below. A copy of the documentation will also be placed in the intern's professional file.

Appeal

If the intern disagrees with any decision of the Formal Review process, he/she may appeal the decision by requesting a filing a formal Appeal.

An Appeal process is mandatory if the Formal Review process results in the decision to dismiss the intern from the internship program. To file an Appeal, the intern must submit notice in writing to the Director of Training within 5 business days of the Formal Review Committee's decision, or the Training Committee's decision if the intern is appealing dismissal from the internship program. The notice must include:

1. A specific statement of the decision that the intern wishes to appeal
2. The action the intern wishes the ITC to take.
3. All information the intern would like taken into consideration in evaluating his/her appeal
4. The intern's justification for the appeal

Within 10 business days of receipt of the Appeal, the Director of Training will appoint and convene an Appeal Panel. The Appeal Panel will include the Director of Training, the Dean of Academic Affairs, and at least 2 other supervisors or administrators at the consortium training sites. The intern will be provided an opportunity to meet with the Dean of Academic Affairs separately in advance of the Appeal Panel meeting, if he/she desires.

The Director of Training will make every effort to appoint members of the Appeal Panel who have not participated in previous steps of the review process. The intern may request a specific member of the training staff to serve on the Appeal panel, and the Director of Training will honor this request to the extent that it is reasonable and feasible. The Appeal Panel will review all documentation and may interview any involved parties. The Appeal Panel will make a determination to either uphold or modify the decision made through the Formal Review Process. The decision of the Appeal Panel is final. A letter will be sent to the Director of Clinical Training at the intern's doctoral training institution within 10 business days, informing him/her of the decision, and a copy of this documentation will be submitted to the intern and a copy will also be retained in the intern's professional file.

Appendix XV

CIC Diversity and Non-Discrimination Policy

The internship program takes great care to offer a safe environment for the interns. All members of the program are expected to uphold and advance the program's commitment to being culturally competent, nondiscriminatory in its practices and programs, and affirmative in valuing and celebrating the diversity of all members of the program, including staff, trainers, trainees, and clients. The Chicago School of Professional Psychology serves as the employer for the CIC interns, and an essential element of the agency's Equal Opportunity Policy is an environment free of workplace discrimination and one that fosters respect. It is against TCS's policy to discriminate on the basis of race, color, creed, religion, gender, sexual orientation, national origin, ancestry, marital status, political belief, age, physical or mental disability, pregnancy, military or veteran status, or any other basis prohibited by law. Any personnel involved in such conduct in the workplace or work-related settings will be subject to appropriate corrective and/or disciplinary action up to and including discharge. The hiring practices of all participating training sites also follow the spirit of this policy, and the participant sites do not discriminate in hiring staff based upon any factors not relevant to success in those positions.

In the event that an intern feels any sense of danger or threat or a feeling of discrimination against them, such issues should be raised immediately with an appropriate faculty member, according to the processes described in the Due Process and Grievance Procedures.

Appendix XVI

Stipend, Benefits, and Resources Policy

The annual stipend for CIC interns is \$24,500. As employees of The Chicago School of Professional Psychology (TCS), all interns are eligible for full employee benefits. These benefits include health insurance, annual vacation, professional, and sick leave.

Interns have access to numerous resources. Office space and therapy space is provided, as well as computers, phones, and basic office supplies. All interns have access to the TCS library materials on campus as well as electronic access to library resources. Assessment and other training materials are provided, and additional materials that may be needed can be purchased using consortium funding with Training Committee approval. Additionally, each intern has access to administrative and technical support through TCS as well as through their primary clinical training site.

Appendix XVII

Intern Selection and Academic Preparations Requirement Policy



Intern Selection and Academic Preparation Requirements Policy

Application Process

Students interested in applying for the Chicago School Community Internship Consortium (CIC) should submit an online application through the APPIC website (www.appic.org).

A complete application consists of the following materials:

1. A completed Online AAPI (APPIC's standard application)
2. Cover letter clearly stating your preferences for consortium sites/rotations. Applicants may choose to be considered for all three consortium sites, or any combination of sites.
3. A current Curriculum Vitae
4. Three letters of recommendation, two of which must be from persons who have directly supervised your clinical work. **Please submit no more than three letters**
5. Official transcripts of **all** graduate coursework
6. A sample assessment report. Please clearly deidentify or redact all confidential information.

All application materials must be received by the date noted in the current APPIC directory listing in order to be considered.

Application Screening and Interview Processes

Chicago School Community Internship Consortium (CIC) will base its selection process on the entire application package noted above; however, applicants who have met the following qualifications prior to beginning internship will be considered preferred:

1. A minimum of 400 intervention hours;
2. A minimum of 100 assessment hours;
3. Dissertation proposal defended and/or comprehensive exams completed;
4. Practicum experience in community mental health, forensics, and/or with children and adolescents;
5. Commitment to and experience with serving diverse populations and underserved communities;

6. Current enrollment and good standing in an APA-accredited doctoral program in clinical or counseling psychology.

All applications will be screened by CIC's Training Committee, using a standard Application Rating Scale, and evaluated for potential goodness of fit with the internship program. The Training Committee will hold a selection meeting to determine which applicants to invite for interviews based upon the results of this screening process. If applicants are invited to interview, they will be notified by email on or before December 15. Interviews will be scheduled in January and will occur in person with members of the Training Committee. Distance technology such as Skype may be utilized on a case by case basis, in situations where travel for in person interviews may create undue hardship on an applicant. Interviews will be conducted using a standard set of interview questions, although members of the Training Committee may ask additional interview questions of applicants as appropriate. A standard interview rating form will also be used to evaluate the applicant's participation in the interview process.

Participation in the Match

The Training Committee will hold a meeting within two weeks of the final interviews being completed, in order to determine applicant rankings. The full application package and information gleaned from the interview process will be utilized in determining applicant rankings. As a member of APPIC, CIC will participate in the national internship matching process by submitting its applicant rankings to the National Matching Service. Please note that this internship program 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.

Partial Affiliation

The Chicago School Community Internship Consortium is partially affiliated with the Chicago School of Professional Psychology. Applicants from the Chicago School will be given preference in the ranking process during Phase I of the national match, through the use of weighted scoring of the standard applicant rating form. Prospective interns from programs other than the Chicago School will be considered and are encouraged to apply.

Questions regarding any part of the selection process or CIC's academic preparation requirements may be directed to the Training Director.

Appendix XVIII

Internship Performance Evaluation/Feedback/Retention/Advisement Policies

Professional Skills and Competencies

Below are the goal areas in which Interns are evaluated, based upon the program training mission, goals, and objectives.

- A. Evidence Based Practice in Intervention
- B. Evidence Based Practice in Assessment
- C. Consultation and Interprofessional/ Interdisciplinary Skills
- D. Supervision
- E. Cultural and Individual Diversity
- F. Research
- G. Ethical and Legal Standards
- H. Professional Values and Attitudes
- I. Communication and Interpersonal Skills

The CIC training program utilizes a developmental approach in training of the interns, to encourage growth and development in the internship competencies over the course of the training year. In an effort to achieve this growth across the course of the training year in all required areas of competency, several methods are utilized. These methods include formal evaluation, informal evaluation, development and evaluation of personalized training goals, and intern evaluation of the internship program.

Interns are evaluated by their supervisors four times over the course of the training year. Two of these evaluations are formal and occur at the mid-point and end of the training year. The remaining two evaluations are informal and occur at three months and nine months into the training year. Both the formal and informal evaluation periods include a review of training goals and competencies and feedback regarding areas of strength and areas of growth perceived by clinical supervisors.

Formal Evaluation Procedures:

Interns are formally evaluated by Primary and Secondary Clinical Site Supervisors twice per year, at mid-year and end of year. The formal evaluation is conducted using a standard rating form, which includes a Likert-type scale for rating interns' performance on all required competencies as well as comment spaces where supervisors include specific written feedback about the interns' performance and progress. Supervisors are expected to review these evaluations with the interns and provide an opportunity for discussion if the intern has questions or concerns about the feedback. The discussion also serves as an opportunity to promote growth and development, by focusing on both the interns' achievements and specific training needs. The evaluation is intended to be a collaborative process, and interns are encouraged to provide feedback to supervisors regarding their own impressions of performance. A copy of the evaluation form is included in the manual.

The evaluation rating scale is included below. A minimum level of achievement on each evaluation is defined as a rating of "5" for each competency. The rating scale for each evaluation is a 10-point Likert scale, with the following rating anchors: 1=Significant Development Needed, 3=Development Needed, 5=Meets Expectations, 7=Exceeds Expectations, and 10=Significantly Exceeds Expectations. If an intern receives a score less than 5 on any competency item on the mid-point evaluation, or if a supervisor has reason to be concerned about the

student’s performance or progress, the program’s Due Process procedures will be initiated. Interns must receive a rating of 5 or above on all competencies to successfully complete the internship program.

Rating Anchors	Description
1. Significantly Below Expectations	Significant improvement in functioning is needed in order to meet expectations
3. Below Expectations	Some improvement in functioning is needed to meet expectations
5. Meets Expectations	Functions adequately for level of training
7. Exceeds Expectations	Functions above average for level of training
10. Significantly Exceeds Expectations	Functions exceptionally for level of training

Informal Evaluation Procedures:

Interns are informally evaluated in a variety of ways. First, interns and primary and secondary clinical supervisors complete an informal evaluation form at both the 1st and 3rd quarter of the training year. The informal evaluation is intended to provide formative feedback and is conducted using a standard form that includes space for supervisors to highlight areas of strength and areas of desired growth regarding the major activities of the internship. Numerical ratings are not utilized in the informal evaluation. In addition to the informal evaluation form, interns are informally evaluated by the Training Committee on an ongoing basis throughout the training year. The Training Committee meets on a monthly basis, and a portion of that meeting is dedicated to discussion about each intern’s progress to date, areas for improvement, and the overall improvement of the internship program. Verbal feedback from these meetings is provided to interns on an as-needed basis.

Development and Evaluation of Personalized Training Goals:

Interns begin the year by working with supervisors to construct a clinical training agreement, including personalized goals and competencies to be achieved throughout the year in addition to the standard program goals and competencies. During each informal evaluation period, the interns’ training agreements are reviewed to consider their progress toward personalized goals and areas for desired continued growth.

Intern Evaluation of the Internship:

Communication between the intern and the Training Committee is constant and feedback to the internship training team regarding the quality of the training experience is welcome and encouraged at any time. Interns may informally provide feedback about the internship in their weekly meetings with the director of training and site supervisors, as well as outside of those meetings via phone or email. Interns also formally provide feedback to the training team regarding the quality of the training program at the first quarter, the third quarter, and at end of year. Additionally, interns are encouraged to provide feedback regarding the quality of their supervision via supervisor rating forms utilized at the first quarter, the third quarter, and at end of year. Twice a year, at the first quarter and at the third quarter, the interns will be invited to attend Joint ITC training team meeting for the second half of the meeting to discuss their experience of the internship program and to share feedback. These meetings will be facilitated by the DOT and feedback received from the interns will not be utilized in a punitive manner in subsequent individual supervision sessions and/or evaluative time periods. If at any time, an individual intern does not wish to participate in the joint ITC training meetings, then they can recuse themselves without punitive consequences. Finally, each intern will meet individually with the director of training to complete an exit interview during the last week of the internship. The feedback from these interviews as well as the end of the year survey will be presented in aggregate form to the entire ITC training team following the completion of the internship. This will allow the ITC training team to incorporate feedback and identify needed changes.

Appendix XIX

Social Media Policy

Interns are expected to maintain professional and appropriate boundaries with regard to social media. Current or former clients should not be friended or followed on any social networking site (Facebook, LinkedIn, Twitter, etc.). Additionally, Interns are expected to respect client confidentiality with regard to content posted on the Interns' social media pages; it is unethical and inappropriate to publish content related to current or past clients on social media, even if you do not mention clients by name (e.g. "my 2pm client," "someone I saw today," etc.). Posting client information, or questionable comments related to clients generally, will result in a formal review and possible dismissal from the Internship. Due to HIPAA regulations, no communications or identifying information about clients progress should be communicated to or through unsecured communication methods (i.e.: personal email accounts, text messages, etc.). Please communicate with your supervisor if you have further questions about social media or the transmission of client information.