

West Virginia University

**Carruth Center for Psychological and
Psychiatric Services**

**Doctoral Internship
In
Health Service Psychology**

**Intern Training Handbook
2020-2021**

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TRAINING PHILOSOPHY

The Carruth Center for Psychological and Psychiatric Services (CCPPS) doctoral internship program in health service psychology aims to provide interns with the capstone practitioner experience at the doctoral level and prepare them for future practice as generalists in a University Counseling Center setting. The training program itself can be characterized as warm and professionally informal. Training activities are designed to be developmentally appropriate, closely supervised, sequential, and experiential.

CCPPS has historically placed a great value in its doctoral internship program. Psychology interns are considered the lifeblood of the center—they help staff keep current and energized. We understand the work at a counseling center can be quite demanding at times, and that can be particularly so for interns. Because of this, CCPPS staff members strive to model self-care and work-life balance, and we encourage interns do so as well.

Overall, we aspire to create a training environment in which interns feel supported in their efforts to grow both personally and professionally. During the internship year we encourage interns to further develop and integrate their scientific and professional knowledge, as well as practitioner skills, and to apply them to the internship practice setting. We also seek to increase their knowledge and skills through formal seminars, individual supervision, and consultation.

CCPPS and its doctoral internship program value and foster an appreciation of diversity. Training activities are designed in such a way that psychology interns are encouraged to question and develop their beliefs, attitudes, knowledge, and skills in order to increase their multicultural competence. CCPPS has a broad view of diversity, including but not limited to race, class, ethnicity, gender, sexual orientation, veteran status, socioeconomic status, religious affiliation, physical and mental abilities, and age. Additionally, we recognize and appreciate the rich cultural history of our Appalachian roots, and value the resilience that is often found within individuals who have grown up in underprivileged settings.

AGENCY OVERVIEW

CCPPS is a dynamic and integrated multidisciplinary agency which serves as the primary mental health service on campus.

CCPPS is staffed by a team of psychologists, psychiatrists, clinical social workers, and licensed professional counselors. Doctoral interns are afforded the opportunity to interact and collaborate with mental health professionals from a variety of disciplines, providing them with rich and diverse experiences.



CCPPS is housed in a relatively new facility –the Health and Education Building (HEB), built in 2014— conveniently located next to our state-of-the-art [Student Recreation Center](#), two floors above [WVU Healthcare/Student Health](#), and one floor above the [Office of Wellness and Health Promotion \(OWHP\)](#). This new building further increases opportunities for collaboration and integration of students’ healthcare and mental health needs.

West Virginia University



West Virginia University has an enrollment of slightly about 30,000 students and offers 170 bachelors, masters, doctoral, and professional degree programs. Students come from throughout the Mid-Atlantic region as well as West Virginia, attracted in part by the area's natural beauty and outdoor activities. About half of WVU students come from out of state, and there is a strong international student community as well.

The University is made up of three separate campuses: Downtown, Evansdale, and Health Sciences. Each campus is linked by the [PRT \(Personal Rapid Transit\)](#), an elevated monorail with cabs driven by an automated system, as well as a bus system (Mountain Line Transit Authority).

[Morgantown](#) is a community of 30,000 residents and is located in the beautiful mountain country of north central West Virginia. "Mo'town" is approximately 75 miles from Pittsburgh, Pennsylvania, and 220 miles from Washington, D.C.

One of the primary advantages of the Morgantown area is its proximity to [many state and national parks in the Appalachian mountain range](#). [The variety of outdoor activities](#) includes everything from backpacking to whitewater rafting.

There are numerous outdoor events scheduled throughout the year, including The Wine and Jazz Festival and the Arts on the River Festival. West Virginians have a well-earned

reputation for being “neighborly”, and we think you’ll find Morgantown to be warm and friendly, with a relaxing pace of life and a surprising number of things to do!

A Diverse Community

The Carruth Center for Psychological and Psychiatric Services (CCPPS) is dedicated to fostering a supportive and inclusive environment for all members of the WVU community. We are grateful for the diversity of our Mountaineer family, which can span age, appearance, ethnicity and race, financial means, gender, language, military experience, nationality, citizenship status, physical and mental abilities, politics, religion and spirituality, region, body size, and sexual orientation.

We believe that acknowledging the cultural wealth of everyone helps us to recognize, at once, the uniqueness and the universality of the human experience. This recognition of our similarities and differences can make us mindful of how we define ourselves and treat other members of our Blue and Gold community. Join us as we encourage all members to engage in open and ongoing dialogue about the attitudes, values, and beliefs that shape us, individually and collectively, in this global age.

As a center, we are [committed to diversity](#).

PROGRAM OVERVIEW

As part of their experience at CCPPS, incoming interns get direct service experience in individual and group therapy, triages and intakes, crisis intervention, LD/ADHD assessments, the provision of supervision, and consultation and outreach to the WVU community. The internship program seeks to help develop nine profession wide competencies as part of an intern's preparation for practice as a health service psychologist (HSP). These nine profession wide competencies are:

1. Evaluation and dissemination of research
2. Ethical and legal standards,
3. Individual and cultural diversity,
4. Professional values and attitudes,
5. Communication and interpersonal skills,
6. Assessment,
7. Intervention,
8. Supervision,
9. Consultation and interprofessional/interdisciplinary skills.

Training in and evaluation of competency in each of these areas occurs in the context of a range of supervisory and educational activities including:

- Three hours of individual supervision per week (two hours with a primary supervisor and one hour with a secondary supervisor)
- A weekly Supervision of Assessment seminar
- A weekly Supervision of Supervision seminar
- An Intern Seminar, about once every other week, on a variety of clinical topics facilitated by experienced in-house and community professionals.
- A Multicultural Seminar three times per month
- An Outreach Seminar one time per month
- A Professional Development Seminar three times per semester, usually beginning half-way through the fall semester to help transition to professional life after internship

- A Group Therapy Seminar three times per semester
- Work in an area of emphasis (optional)

Direct Service Experiences

Individual Therapy: Interns at CCPPS conduct individual therapy approximately 12 hours per week with diverse students who are experiencing a wide range of presenting problems. These presenting problems cross the spectrum from academic and developmental issues (e.g., selecting a major, independence from family) to severe mental illness (e.g., bipolar disorder, PTSD). Most treatment is provided within a brief-therapy model. Each intern can also provide long-term therapy to a limited number of clients.

Group Therapy: CCPPS has a vibrant and growing group therapy program, and interns will gain experience as group therapists. Group topics are based on student needs and intern interests. Examples of past groups include an interpersonal process groups, sexual assault survivor group, international student group, men's group, mindfulness group, women's group, social anxiety group, LGBTQ+ group, etc. Interns typically co-lead a group in the fall with a more experienced staff member who supervises the intern's work and have the opportunity of pairing up with another intern or with a practicum student in the spring semester.

Triage/Intake: CCPPS has daily drop-in hours which allows interns the opportunity to conduct triage assessments with clients, form and document clinical impressions, and then to route clients to the appropriate services (e.g., individual therapy, community referral, psychiatric consultation, etc.). Interns provide 4 hours of drop-in coverage per week. More detailed intake interviews and reports are conducted during the client's first session after being assigned an ongoing therapist.

Crisis Intervention: In addition to experience managing crises which may be encountered while staffing the drop-in hours and with their ongoing clients, interns will also serve as the on-call counselor for the 24-hour crisis line five weeks total during the year. Interns are provided with close support and supervision throughout all crises and receive didactic training on crisis management at the beginning of their year at CCPPS and through Intern Seminar.

LD/ADHD Assessment: Interns administer learning disability/ADHD assessments throughout the internship year. Assessments are scheduled across two days, totaling approximately 7 hours bi-weekly, with every other week reserved for report writing. Interns receive 20 hours of initial training for assessment and attend a weekly Assessment Group Supervision seminar where they receive didactic training and supervision as a group.

Providing Supervision: Each intern is assigned a student to supervise during the fall semester, and then is assigned a different student to supervise during the spring semester. Interns meet with their supervisees weekly, reviewing their sessions and clinical notes and providing them with clinical supervision.

Consultation & Outreach: Interns are expected to conduct an average of half an hour per week of consultation and outreach. These activities may involve developing and presenting [workshops](#) or presentations for various WVU units, forming liaison relationships with residence halls, or representing CCPPS at tabling events across campus.

Training Activities

Individual Supervision: Interns receive three hours of individual supervision per week. Two hours are spent with the primary supervisor and one hour is spent with the secondary supervisor. Interns rank their preferences for individual and secondary supervisors and are assigned to supervisors based on training needs, clinical interests, availability, and goodness-of-fit. Interns select a new set of supervisors half-way through their internship year (or approximately mid-January).

Group Supervision of Assessment: Interns participate in an hour-long, weekly group supervision of their assessment activities. During the Intern Orientation, the primary focus is on didactic training, article reviews, practice administering assessments, and scoring and interpretation of results. Interns are expected to complete 7 hours of face to face LD/ADHD assessment once every two weeks. During group supervision, interns review their assessment cases and receive feedback. Interns also discuss pertinent articles and review their feedback sessions with testing clients. Interns also receive didactic training in topics such as psychological testing with the MMPI, and pharmaceutical and non-pharmaceutical treatments for ADHD.

Group Supervision of Supervision: Interns participate in a weekly 1.5-hour Group Supervision of Supervision seminar. In this seminar interns will learn various models of providing clinical supervision and how those models apply to their own work with supervisees. The seminar utilizes didactic material, review of intern supervision tapes, case presentations (one per intern per semester) and consultation on challenges experienced in supervision during the internship year.

Intern Training Seminar: Interns participate in a 1.5-hour biweekly Intern Training Seminar. Intern Training Seminars typically focus on basic aspects of service provision earlier in internship while more specialized topics are covered later in internship. For example, seminars on ethical issues in treatment, boundaries in therapy, and crisis intervention may be offered earlier in internship, while seminars such as psychopharmacology, advocacy, and spiritual issues in therapy may be offered later. Seminars are presented by senior staff and invited guest speakers.

Multicultural Seminar: Interns participate in a 1.5-hour Multicultural Seminar, three times a month. In this seminar interns will reflect on their own cultural identity and multicultural competence, identify cultural influences on student development, examine guidelines relating to multicultural competence, and plan and enact cultural programming initiatives. Seminar facilitators utilize didactic material, discussion, activities to encourage self-awareness, current, local, and national news events and a wide range of audiovisual materials to enhance the learning experience.

Professional Development Seminar: Interns participate in a 1.5-hour Professional Development seminar about three times per semester. Discussion topics include special readings in professional development issues, job search/application/interview process, early career psychologist issues, dissertation defense, research activities, licensing, credentialing, self-care, etc. During this seminar, interns will have an opportunity to discuss with the training director their progress, concerns, and provide ongoing feedback about their internship experience.

Outreach Seminar: Interns participate in a 1.5-hour Outreach Seminar about three times per semester. This seminar involves didactic training and orientation to theories and models of outreach, as well as providing a space and time to discuss past, current and upcoming outreach activities of the center.

Group Therapy Seminar: Interns participate in a 1.5-hour Group Therapy Seminar about three times a semester. This seminar is facilitated by the Group Coordinator and involves a combination of group discussion and didactic training regarding various group therapy-related topics. In addition, this seminar provides a space to participate in informal group case conference attended by the interns and the Group Coordinator. During group case conference, interns informally discuss ongoing group therapy sessions for consultation and support.

Case Conference: Interns participate in an hour-long weekly case conference, which is attended by all CCPPS clinical staff. Clinical staff and interns present ongoing and complex cases for consultation and support. Interns make two formal case presentations during the year.

Additional Trainings

Staff Meetings. Interns attend a weekly, 30-minute staff meeting. These meetings involve updates on CCPPS policies, briefings on current happenings at CCPPS, and professional development topics.

Training/Workshops. CCPPS, in collaboration with other departments on campus, will sometimes organize training workshops that are relevant to mental health clinicians in the area. The interns are encouraged to attend these trainings.

Committee Work. Interns have an opportunity to participate in various committees at the Carruth Center. Interns participate in the intern selection committee every year. In the past, interns have also served as members of the diversity committee, clinical services committee, outreach committee, and the training committee.

Areas of Special Emphasis

Interns may devote three hours per week to develop and/or be exposed to an area of special emphasis, based on their training interests. These activities may fall under two broad areas: clinical activities and non-clinical activities. Clinical activities are defined as providing direct services to clients (such as, but not limited to, working with trauma clients, couples, veterans, eating disorder clients, etc.).

Non-clinical activities include program development and evaluation, participation in counseling center research, and counseling center administration. Interns who choose non-clinical activities as part of their specialized training experience may be asked to do their specialization during the low clinical demand times of winter break and the summer months, so that they are able to accrue the necessary clinical direct service hours toward completion of their internship.

Developing an area of special emphasis is not a required activity of this internship program. For interns who choose not to develop an area of special emphasis, their three hours per week will be converted to seeing additional clients at the center.

Listed below are some examples of areas of special emphasis that have been available to our past interns. CCPPS strives to be as accommodating as possible to an intern's specific training needs, and this is especially true regarding areas of special emphasis. At the beginning of the internship year, interns will meet with the Training Director and discuss their interest in developing an area of special emphasis and to identify a supervisor who can mentor them in these activities.

Administration. Interns interested in the duties involved in administration of counseling center/clinical operations/training may opt to pursue an opportunity to work with the respective directors. This area of special emphasis may include discussion of administrative issues and functions with the respective director, committee work, working on ongoing projects and/or developing and completing a new administrative project.

LGBTQ+ Students. Interns interested in working with the LGBTQ+ community at WVU may opt to pursue this area of special emphasis that focuses on both outreach and clinical activities. Interns may serve on the LGBTQ+ Commission, help coordinate and co-facilitate Safe Zone trainings across campus, support LGBTQ+ student groups, partner with the LGBTQ+ center, co-lead an LGBTQ+ support group, and develop competency working with LGBTQ+ clients in individual or group therapy.

Outreach. This area of specialization would provide interns with the opportunity to engage in both clinical and non-clinical activities surrounding outreach intervention and

advocacy. Domains of activity might include acting as a liaison between the Carruth Center and the Office of Health and Wellness promotion to plan collaborative outreach campaigns, engaging in direct outreach with the campus community, and initiating connection with multiple campus offices and/or student groups to assess campus need and then planning outreach programs.

Cognitive Training. Cognitive Training (CT) is an innovative, non-pharmacological intervention for the treatment of ADHD. This specialization involves learning and applying the Cognitive Training protocol with students who have been identified with ADD/ADHD. Activities may include screening students for an array of learning-related issues, providing CT, and/or program development and outcome evaluation.



Multicultural Competency. The multicultural area of special emphasis provides opportunities to foster cultural competency with diverse student populations. Domains of activity can include: clinical work (e.g., co-facilitating a support group for LGBTQ+ students or international students), outreach (e.g. social marketing for international students), research (e.g. utilization data of various groups on campus), developing trainings (e.g. for staff, interns, graduate assistants, and practicum students) and administrative (e.g. helping facilitate the diversity committee).

Research & Evaluation. CCPPS recognizes the importance of measuring the impact of our services on those we serve. This area of special emphasis involves learning about the unique opportunities and challenges of performing research and evaluation in a university counseling center. Domains of activity may involve discussing research issues, assisting in ongoing data collection and analysis, and conducting a research project within CCPPS.

Intern Weekly Schedule

The schedule listed below summarizes an intern's typical weekly activities. It should be noted that interns' weekly schedules are arranged to include working one evening per week from 5:00 – 8:00 p.m. It should also be noted that the expectation for scheduling five weeks during the year for After Hours Crisis duty is not listed here. Interns may also be required to present/participate in outreach/consultation activities during evening hours and/or on weekends.

Training/Supervision

Individual Supervision	3 hours per week
Group Supervision of Assessment	1 hour per week
Group Supervision of Supervision	1.5 hours per week
Intern/Professional Development/Group Seminar	1.5 hours per week
Multicultural/Outreach Seminar	1.5 hours per week
Case Conference/Staff Development	1 hour
Staff Meeting	0.5 hours

Direct Service Delivery

Individual/group/couples counseling	12 hours per week
LD/ADHD testing/scoring/report writing	7 hours per week
Drop-in Crisis Clinic/Triage	4 hours per week
Consultation/Outreach	0.5 hour* per week
Practicum Student Supervision	1 hour per week
Area of Special Emphasis Activities	3 hours** per week

Documentation/Other

Notes/tape review/supervision prep	5 hours
Outside Readings	1.5 hours
Average Total Number of Hours:	44**

*Consultation/outreach activities *average* .5 hours a week (e.g., you may do approximately two hour-long outreaches in a month)

**Averaging more than 40 hours a week is necessary because interns receive 5 weeks of vacation and are required by APA to accrue a total of 2000 hours in order to complete internship.

Interns meet with the Training Director prior to each semester to discuss training goals and scheduling for the upcoming semester. In addition to constructing the ongoing training goals, the Training Director assists interns in monitoring their progress toward meeting the requirement of 2,000 hours of on-site activities, including 500 hours of clinical direct services, for successful completion of the internship.

INTERN EVALUATION

Evaluation of Intern Performance Definitions

N/A - No Basis for rating.

Generally, interns are expected to achieve an intermediate to advanced level of competency in almost all competencies specified in this evaluation. It will be very rare that a rating of “N/A” is assigned due to not having enough information.

5 - Advanced/Skills comparable to autonomous practice at the licensure level

This rating signifies performance that is well above what would be expected for an intern who was successfully completing internship. This may be a significant strength area of expertise for this intern, or a skill that is far above what would be ordinarily be seen. Interns would not receive this rating on many competencies particularly during the mid-year evaluations as they are most likely to benefit from continued supervision and professional development during the second half of the internship year.

4 - High Intermediate/Occasional Supervision needed

Ratings at this level indicate that the intern is performing quite well and is surpassing expectations.

3 - Intermediate; typical through internship, occasional supervision needed

Interns must be performing at this level or above on all competency elements in their final evaluation to successfully complete internship. This rating indicates that the intern is performing at the level of an intern who is meeting expectations and on track to complete internship. Most interns would be expected to receive many 3 ratings.

2 - Beginner; intensive supervision needed

Many interns may receive a couple of 2 ratings, signifying an area in which the intern requires some additional work during the mid-year evaluations. This should indicate an area for further experience or more focused work in supervision during the second half of internship.

1 - Remediation needed

Interns receiving this score should know that in this area, they are performing significantly below expectations for interns and are likely to require formal remediation in this area.

Primary Supervisor Evaluation Form

EVALUATION OF INTERN PERFORMANCE: INDIVIDUAL SUPERVISOR (PRIMARY)

Intern: _____	Eval Period:	Mid Year	<input type="checkbox"/>	Final	<input type="checkbox"/>
Supervisor: _____		Primary	<input type="checkbox"/>	Secondary	<input type="checkbox"/>

Competency	1	2	3	4	5	N/A
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I. Research

Demonstrates during supervision the substantially independent ability to critically evaluate research related to psychotherapy.						
Demonstrates during case presentation the substantially independent ability to disseminate research related to psychotherapy.						

II. Ethical and Legal Standards

Demonstrates knowledge of, and acts in accordance with: the current version of the APA Ethical Principles of Psychologists and Code of Conduct.						
Demonstrates knowledge of, and acts in accordance with: relevant laws, regulations, rules and policies governing health service psychology at the organizational, local, state, regional, and federal levels.						
Demonstrates knowledge of, and acts in accordance with: relevant professional standards and guidelines.						
Recognizes ethical dilemmas as they arise, applies ethical decision making processes, and engages in appropriate consultation, in order to resolve the dilemmas.						
Conducts self in an ethical manner in all professional activities supervised over this evaluation period.						

III. Individual and Cultural Diversity

Demonstrates an understanding of how his/her/their own personal/cultural history and attitudes and biases affect his/her/their clinical work.						
Demonstrates an understanding of how their client's personal/cultural history and intersectional identities impact counseling.						

EVALUATION OF INTERN PERFORMANCE: INDIVIDUAL SUPERVISOR (PRIMARY)

Competency	1	2	3	4	5	0
Demonstrates an understanding of how the social, historical and cultural context in which counseling occurs impacts clients and counseling.						
Demonstrates knowledge of current theory and evidence based practice related to addressing diversity in counseling.						
Demonstrates the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered.						
Demonstrates the ability to work effectively with individuals whose diversity variables create conflict with their own.						
Independently applies the knowledge, awareness, and skills described above to address any skill deficits and effectively work with diverse clients.						

IV. Professional Values and Attitudes

Behaves in ways that reflect core values the values of psychology, including integrity, accountability, lifelong learning and concern for the welfare of others.						
Engages in self-reflection regarding personal and professional functioning.						
Demonstrates the ability to accurately assess and monitor their professional functioning.						
Actively seeks and demonstrates openness and responsiveness to feedback and supervision.						
Responds professionally in increasingly complex situations with a greater degree of independence.						

V. Communication and Interpersonal Skills

Develops and maintains effective relationships with colleagues, faculty and support staff.						
Demonstrates effective interpersonal skills.						

EVALUATION OF INTERN PERFORMANCE: INDIVIDUAL SUPERVISOR (PRIMARY)

Competency	1	2	3	4	5	N/A
Produces verbal, nonverbal and written communications that are informative, well-integrated, and demonstrate a thorough grasp of professional language and concepts.						
Comprehends verbal, nonverbal, and written communications.						

VI. Assessment (Psychodiagnostic)

Establishes and initial interpersonal climate that promotes client disclosure useful for clinical assessment purposes.						
Elicits and clarifies with the client the purpose of the interview (e.g. triage, crisis intervention, consultation).						
Gathers adequate information for the purpose of initial assessment, intervention, and case disposition.						
Communicates appropriately with the client regarding assessment outcomes and recommended interventions.						
Demonstrates understanding of the DSM-V diagnostic system.						
Integrates all available information into appropriate DSM-V diagnoses.						
Assesses for risk to self, others, and consults appropriately with senior staff, as needed.						
Makes appropriate recommendations, when indicated, for additional assessment, including psychometric/psychiatric evaluations and long term counseling.						
Makes appropriate recommendations for auxiliary services for clients (e.g. Student Assistance Program, Learning Center, etc.) as needed.						

EVALUATION OF INTERN PERFORMANCE: INDIVIDUAL SUPERVISOR (PRIMARY)

Competency	1	2	3	4	5	N/A
Completes the required documentation for triage/intake interviews and crisis interventions appropriately.						
Communicates verbally in an effective and timely manner with others in the interest of client welfare (e.g. crisis consultation, case disposition).						
Makes appropriate recommendations regarding case assignment.						

VII. Intervention: Individual Psychotherapy/Counseling

Establishes and maintains rapport with clients.						
Demonstrates knowledge of theory relevant to the provision of individual psychotherapy/counseling.						
Conceptualizes cases based on theory, research, assessment data, diversity factors, contextual variables and any other relevant data.						
Designs and implements effective treatment plans based on case conceptualization and evidence based standards of practice.						
Accurately assesses treatment effectiveness and efficiency, modifies treatment plans as necessary, and submits continuation of service requests as needed.						
Modifies evidence based approaches effectively when a clear evidence base in the literature is lacking.						
Works effectively utilizing time-limited approaches to psychotherapy.						
Works effectively with longer-term psychotherapy cases.						
Seeks appropriate consultation from supervisors, senior staff, and colleagues as necessary.						
Refers clients to a variety of resources both on and off campus, as appropriate.						

EVALUATION OF INTERN PERFORMANCE: INDIVIDUAL SUPERVISOR (PRIMARY)

Competency	1	2	3	4	5	N/A
Accurately assesses client readiness for termination and terminates therapy appropriately.						

IX. Consultation and Interprofessional/Interdisciplinary Skills

Demonstrates knowledge and respect for the roles and perspectives of other professions.						
Applies this knowledge in direct consultation with individuals and their families, other health care professionals, and faculty and staff.						
Receives a rating of "pass" on the clinical case presentation.	YES		NO		N/A	
Fulfilled all afterhour requirements for this evaluation period.	YES		NO		N/A	
Fulfilled group therapy responsibilities	YES		NO		N/A	

Strengths exhibited over evaluation period.

--

Areas of growth over evaluation period.

--

EVALUATION OF INTERN PERFORMANCE: INDIVIDUAL SUPERVISOR (PRIMARY)

Methods of Evaluation

Client File Review

--

Video Review

--

Co-Counseling

--

Case Discussion

--

Case Presentation

--

Crisis Case Consultation

--

Client Outcome Data

--

Direct Observation

--

Signature (Intern):

Signature (Primary Supervisor):

Secondary Supervisor Evaluation Form

EVALUATION OF INTERN PERFORMANCE: INDIVIDUAL SUPERVISOR (SECONDARY)

Intern: _____	Eval Period:	Mid Year	<input type="text"/>	Final	<input type="text"/>
Supervisor: _____		Primary	<input type="text"/>	Secondary	<input type="text"/>

Competency	1	2	3	4	5	N/A
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I. Research

Demonstrates during supervision the substantially independent ability to critically evaluate research related to psychotherapy.						
Demonstrates during case presentation the substantially independent ability to disseminate research related to psychotherapy.						

II. Ethical and Legal Standards

Demonstrates knowledge of, and acts in accordance with: the current version of the APA Ethical Principles of Psychologists and Code of Conduct.						
Demonstrates knowledge of, and acts in accordance with: relevant laws, regulations, rules and policies governing health service psychology at the organizational, local, state, regional, and federal levels.						
Demonstrates knowledge of, and acts in accordance with: relevant professional standards and guidelines.						
Recognizes ethical dilemmas as they arise, applies ethical decision making processes, and engages in appropriate consultation, in order to resolve the dilemmas.						
Conducts self in an ethical manner in all professional activities supervised over this evaluation period.						

III. Individual and Cultural Diversity

Demonstrates an understanding of how his/her/their own personal/cultural history and attitudes and biases affect his/her/their clinical work.						
Demonstrates an understanding of how their client's personal/cultural history and intersectional identities impact counseling.						

EVALUATION OF INTERN PERFORMANCE: INDIVIDUAL SUPERVISOR (SECONDARY)

Competency	1	2	3	4	5	N/A
Demonstrates an understanding of how the social, historical and cultural context in which counseling occurs impacts clients and counseling.						
Demonstrates knowledge of current theory and evidence based practice related to addressing diversity in counseling.						
Demonstrates the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered.						
Demonstrates the ability to work effectively with individuals whose diversity variables create conflict with their own.						
Independently applies the knowledge, awareness, and skills described above to address any skill deficits and effectively work with diverse clients.						

IV. Professional Values and Attitudes

Behaves in ways that reflect core values the values of psychology, including integrity, accountability, lifelong learning and concern for the welfare of others.						
Engages in self-reflection regarding personal and professional functioning.						
Demonstrates the ability to accurately assess and monitor their professional functioning.						
Actively seeks and demonstrates openness and responsiveness to feedback and supervision.						
Responds professionally in increasingly complex situations with a greater degree of independence.						

V. Communication and Interpersonal Skills

Develops and maintains effective relationships with colleagues, faculty and support staff.						
Demonstrates effective interpersonal skills.						

EVALUATION OF INTERN PERFORMANCE: INDIVIDUAL SUPERVISOR (SECONDARY)

Competency	1	2	3	4	5	N/A
Produces verbal, nonverbal and written communications that are informative, well-integrated, and demonstrate a thorough grasp of professional language and concepts.						
Comprehends verbal, nonverbal, and written communications.						

VI. Assessment (Psychodiagnostic)

Establishes and initial interpersonal climate that promotes client disclosure useful for clinical assessment purposes.						
Elicits and clarifies with the client the purpose of the interview (e.g. triage, crisis intervention, consultation).						
Gathers adequate information for the purpose of initial assessment, intervention, and case disposition.						
Communicates appropriately with the client regarding assessment outcomes and recommended interventions.						
Demonstrates understanding of the DSM-V diagnostic system.						
Integrates all available information into appropriate DSM-V diagnoses.						
Assesses for risk to self, others, and consults appropriately with senior staff, as needed.						
Makes appropriate recommendations, when indicated, for additional assessment, including psychometric/psychiatric evaluations and long term counseling.						
Makes appropriate recommendations for auxiliary services for clients (e.g. Student Assistance Program, Learning Center, etc.) as needed.						

EVALUATION OF INTERN PERFORMANCE: INDIVIDUAL SUPERVISOR (SECONDARY)

Competency	1	2	3	4	5	N/A
Completes the required documentation for triage/intake interviews and crisis interventions appropriately.						
Communicates verbally in an effective and timely manner with others in the interest of client welfare (e.g. crisis consultation, case disposition).						
Makes appropriate recommendations regarding case assignment.						

VII. Intervention: Individual Psychotherapy/Counseling

Establishes and maintains rapport with clients.						
Demonstrates knowledge of theory relevant to the provision of individual psychotherapy/counseling.						
Conceptualizes cases based on theory, research, assessment data, diversity factors, contextual variables and any other relevant data.						
Designs and implements effective treatment plans based on case conceptualization and evidence based standards of practice.						
Accurately assesses treatment effectiveness and efficiency, modifies treatment plans as necessary, and submits continuation of service requests as needed.						
Modifies evidence based approaches effectively when a clear evidence base in the literature is lacking.						
Works effectively utilizing time-limited approaches to psychotherapy.						
Works effectively with longer-term psychotherapy cases.						
Seeks appropriate consultation from supervisors, senior staff, and colleagues as necessary.						
Refers clients to a variety of resources both on and off campus, as appropriate.						

EVALUATION OF INTERN PERFORMANCE: INDIVIDUAL SUPERVISOR (SECONDARY)

Competency	1	2	3	4	5	N/A
Accurately assesses client readiness for termination and terminates therapy appropriately.						

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

Demonstrates knowledge and respect for the roles and perspectives of other professions.						
Applies this knowledge in direct consultation with individuals and their families, other health care professionals, and faculty and staff.						
Receives a rating of "pass" on the clinical case presentation.	YES		NO		N/A	
Fulfilled all afterhour requirements for this evaluation period.	YES		NO		N/A	
Fulfilled group therapy responsibilities	YES		NO		N/A	

Strengths exhibited over evaluation period.

Areas of growth over evaluation period.

EVALUATION OF INTERN PERFORMANCE: INDIVIDUAL SUPERVISOR (SECONDARY)

Methods of Evaluation

Client File Review

Video Review

Co-Counseling

Case Discussion

Case Presentation

Crisis Case Consultation

Client Outcome Data

Direct Observation

Signature (Intern):

Signature (Primary Supervisor):

Supervision of Supervision Evaluation Form

EVALUATION OF INTERN PERFORMANCE: SUPERVISION OF SUPERVISION

Intern: _____ Eval Period: Mid Year Final
 Supervisor: _____

Competency	1	2	3	4	5	N/A
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I. Research

Demonstrates knowledge of theoretical models and research relevant to providing supervision.						
Demonstrates the substantially independent ability to critically evaluate and disseminate research related to supervision.						

II. Ethical and Legal Standards

Demonstrates knowledge of and acts in accordance with the current version of the APA Ethical Principles of Psychologists and Code of Conduct.						
Demonstrates knowledge and acts in accordance to the Guidelines for Clinical Supervision in Health Service Psychology.						
Recognizes ethical dilemmas as they arise and applies ethical decision making processes in order to resolve the dilemmas.						
Conducts self in an ethical manner in supervision.						

III. Individual and Cultural Diversity

Demonstrates an understanding of how his/her/their own personal/cultural history, attitudes and biases may impact his/her/their work with his/her/their supervisee.						
Demonstrates an understanding of how their supervisee's personal/cultural history and intersectional identities may impact supervision and the supervisee's clinical work.						
Demonstrates an understanding of how the social, historical and cultural context in which supervision occurs may impact supervision.						

EVALUATION OF INTERN PERFORMANCE: SUPERVISION OF SUPERVISION

Competency	1	2	3	4	5	N/A
Demonstrates knowledge of current theory and evidence based practice related to addressing diversity in supervision.						
Demonstrates the ability to integrate awareness of self and context, and knowledge of individual and cultural differences, in supervision.						
Demonstrates the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered.						
Demonstrates the ability to work effectively with supervisees whose diversity variables create conflict with their own.						
Independently applies the knowledge, awareness, and skills described above to effectively work with supervisees.						

IV. Professional Values and Attitudes

Behaves in ways that reflect core values of psychology, including integrity, accountability, lifelong learning and concern for the welfare of others.						
Engages in self-reflection regarding functioning in supervision.						
Actively seeks and demonstrates openness and responsiveness to feedback and supervision.						
Responds professionally in increasingly complex situations with a greater degree of independence.						
Participates actively by discussing supervisory sessions.						
Participates actively by bringing materials (e.g., audiotapes, videotapes, files, evaluations) relevant to supervisory sessions.						
Attends seminar on a regular basis.						

EVALUATION OF INTERN PERFORMANCE: SUPERVISION OF SUPERVISION

Competency	1	2	3	4	5	N/A
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V. Communication and Interpersonal Skills

Develops and maintains effective relationships with colleagues, faculty, and support staff.						
Produces verbal, nonverbal and written communications that are informative, well-integrated, and demonstrate a thorough grasp of professional language and concepts.						
Comprehends verbal, nonverbal, and written communications.						
Demonstrates effective interpersonal skills.						
Communicates trainee strengths.						
Communicates trainee weaknesses and recommendations for improvement.						

VIII. Supervision

Demonstrates the ability to conceptualize supervisory work based on knowledge of theories and research relevant to supervision.						
Draws from a variety of models of supervision when conceptualizing supervisory work.						
Demonstrates ability to facilitate supervisory relationships that promote both supervisee development and client welfare.						
Establishes and maintains rapport with trainees.						
Provides specific treatment alternatives, readings, and/or resources for trainee, as appropriate.						
Assesses issues and progress of clients on trainee caseload.						
Discusses issues relevant to trainee's professional identity development, as appropriate.						

EVALUATION OF INTERN PERFORMANCE: SUPERVISION OF SUPERVISION

Competency	1	2	3	4	5	N/A
Is available for emergency consultation with trainee or assists trainee with identifying appropriate consultation strategies within the agency.						
Demonstrates openness to receiving feedback from trainee.						

Receives a rating of "pass" on supervision case presentation.	YES	NO
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Strengths exhibited over evaluation period.

Areas of growth over evaluation period.

EVALUATION OF INTERN PERFORMANCE: SUPERVISION OF SUPERVISION

Methods of Evaluation

Video Review

Supervision Case Discussion

Supervision Case Presentation

Seminar Participation

Direct Observation

Signature (Intern):

Signature (Primary Supervisor):

Assessment Evaluation Form

EVALUATION OF INTERN PERFORMANCE: ASSESSMENT

Intern: _____ Eval Period: Mid Year Final
 Supervisor: _____

Competency	1	2	3	4	5	N/A
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I. Research

Demonstrates knowledge of research relevant to LD/ADHD.						
Demonstrates the substantially independent ability to critically evaluate and disseminate research related to assessment.						

II. Ethical and Legal Standards

Demonstrates knowledge of and acts in accordance with the current version of the APA Ethical Principles of Psychologists and Code of Conduct.						
Demonstrates knowledge and acts in accordance to the Standards for Educational and Psychological Testing.						
Recognizes ethical dilemmas as they arise and applies ethical decision making processes in order to resolve the dilemmas.						
Conducts self in an ethical manner.						

III. Individual and Cultural Diversity

Demonstrates knowledge of current theory and evidence based practice related to addressing diversity in assessment.						
Demonstrates the ability to integrate awareness of self and context, and knowledge of individual and cultural differences to work effectively with clients in assessment.						

IV. Professional Values and Attitudes

Behaves in ways that reflect core values of psychology, including integrity, accountability, lifelong learning and concern for the welfare of others.						
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EVALUATION OF INTERN PERFORMANCE: ASSESSMENT

Competency	1	2	3	4	5	N/A
Engages in self-reflection regarding functioning in assessment.						
Actively seeks and demonstrates openness and responsiveness to feedback and supervision.						
Responds professionally in increasingly complex situations with a greater degree of independence.						
Participates actively by contributing to discussion of other intern's assessment materials.						
Participates actively by bringing own assessment materials to seminar for review by group.						
Submits written reports to Assessment Seminar facilitator(s) within specified time frames.						
Provides feedback to examinees within specified time frames.						

V. Communication and Interpersonal Skills

Provides accurate and specific feedback to examinees regarding test results.						
Produces verbal, nonverbal and written communications that are informative, well-integrated, and demonstrate a thorough grasp of professional language and concepts.						
Comprehends verbal, nonverbal, and written communications.						
Demonstrates effective interpersonal skills.						

VI. Assessment (LD/ADHD)

Demonstrates knowledge of LD/ADHD assessment instruments.						
Demonstrates knowledge of criteria for LD/ADHD.						
Demonstrates the ability to conceptualize assessment cases based on knowledge of instruments, criteria, and research relevant to LD/ADHD.						

EVALUATION OF INTERN PERFORMANCE: ASSESSMENT

Accurately scores and evaluates the tests in the LD/ADHD assessment batteries.						
Integrates data from the various tests to assess learning style and disabilities.						
Writes organized meaningful reports based on background information, behavioral observations, and test data.						
Establishes and maintains rapport with examinees.						
Administers the LD/ADHD assessment batteries in a standardized fashion.						

VIII. Consultation

Demonstrates knowledge and respect for the roles and perspectives of other professions.						
Applies this knowledge in direct consultation with individuals and their families, other health care professionals, and faculty and staff.						

Strengths exhibited over evaluation period.

EVALUATION OF INTERN PERFORMANCE: ASSESSMENT

Areas of growth over evaluation period.

Methods of Evaluation

- Assessment File (data, report, etc.) Review
- Video Review
- Case Discussion
- Seminar Participation
- Direct Observation

Signature (Intern):

Signature (Primary Supervisor):

Multicultural Seminar Evaluation Form

EVALUATION OF INTERN PERFORMANCE: MULTICULTURAL SEMINAR

Intern: _____ Eval Period: Mid Year Final
 Supervisor: _____

Competency	1	2	3	4	5	N/A
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I. Research

Demonstrates knowledge of theory and research relevant to individual and cultural diversity.						
Demonstrates the substantially independent ability to critically evaluate and disseminate theory and research related to individual and cultural diversity.						

II. Ethical and Legal Standards

Demonstrates knowledge of and acts in accordance with the current version of the APA Ethical Principles of Psychologists and Code of Conduct.						
Demonstrates knowledge and acts in accordance to the APA Guidelines on Multicultural Education, Training, Research, Practice and Organizational Change for Psychologists, and other relevant guidelines for working with diverse populations.						

III. Individual and Cultural Diversity

Demonstrates an understanding of how his/her/their own personal/cultural history, attitudes and biases may impact how he/she/they interact with people different from themselves.						
Demonstrates an understanding of how others' personal/cultural history and intersectional identities may impact their ideas, thoughts and perceptions about the world.						
Demonstrates an understanding of how the social, historical and cultural context in which individuals exist impact their life experiences.						
Demonstrates the ability to integrate awareness of self and context, and knowledge of individual and cultural differences in their clinical work.						

EVALUATION OF INTERN PERFORMANCE: MULTICULTURAL SEMINAR

Competency	1	2	3	4	5	N/A
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IV. Professional Values and Attitudes

Behaves in ways that reflect core values of psychology, including integrity, accountability, lifelong learning and concern for the welfare of others.						
Attends seminar on a regular basis.						
Participates actively by contributing to discussion and/or providing resources during multicultural seminar.						

V. Communication and Interpersonal Skills

Produces verbal, nonverbal and written communications that are informative, well-integrated, and demonstrate a thorough grasp of professional language and concepts.						
Comprehends verbal, nonverbal, and written communications.						
Demonstrates effective interpersonal skills						

Completes weekly reflections in a timely and thoughtful manner (Fall)	YES	NO
Presents on a multicultural topic (Spring)	YES	NO

Strengths exhibited over evaluation period.
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EVALUATION OF INTERN PERFORMANCE: MULTICULTURAL SEMINAR

Areas of growth over evaluation period.

Methods of Evaluation

Final Presentation

Weekly Reflections

Seminar Participation

Signature (Intern):

Signature (Primary Supervisor):

Outreach Evaluation Form

EVALUATION OF INTERN PERFORMANCE: OUTREACH

Intern: _____ Eval Period: Mid Year Final

Supervisor: _____

Competency	1	2	3	4	5	N/A
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II. Ethical and Legal Standards

Demonstrates knowledge of and acts in accordance with the current version of the APA Ethical Principles of Psychologists and Code of Conduct.						
Recognizes ethical dilemmas as they arise, applies ethical decision making processes and engages in appropriate consultation in order to resolve dilemmas encountered in the provision of outreach services and his/her/their activity as a leadWell trainer.						
Conducts self in an ethical manner in the provision of outreach services and his/her/their activity as a leadWell trainer over this evaluation period.						

III. Individual and Cultural Diversity

Demonstrates the ability to integrate awareness of self, context, and knowledge of individual and cultural differences in the planning and implementation of outreach programs and his/her/their activity as leadWell trainer.						
Independently applies the knowledge, awareness, and skills described above to effectively deliver outreach programs and participate in the leadWell program.						

VII. Intervention

Demonstrates ability to plan, implement, and evaluate outreach programs tailored to the needs of the target audiences.						
Meets monthly with leadWell mentors.						
Demonstrates ability to incorporate feedback from leadWell mentors to improve delivery of the leadWell program.						

EVALUATION OF INTERN PERFORMANCE: OUTREACH

Competency	1	2	3	4	5	N/A
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**IX. Consultation and Interprofessional/
Interdisciplinary Skills**

Demonstrates knowledge and respect for the roles and perspectives of other professions.						
Applies this knowledge in direct consultation with WVU faculty and staff.						

IV. Professional Values and Attitudes

Behaves in ways that reflect core values of psychology, including integrity, accountability, lifelong learning and concern for the welfare of others in the planning and implementation of outreach programs and his/her/their activity as leadWell trainer.						
Responds professionally in increasingly complex situations with a greater degree of independence.						

V. Communication and Interpersonal Skills

Establishes effective working relationships with WVU students, faculty, and staff.						
Produces verbal, nonverbal and written communications that are informative, well-integrated, and demonstrate a thorough grasp of professional language and concepts.						
Comprehends verbal, nonverbal, and written communications.						
Demonstrates effective interpersonal skills						

Participates in at least 2 outreach programs over evaluation period.	YES	NO
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EVALUATION OF INTERN PERFORMANCE: OUTREACH

Strengths exhibited over evaluation period.

Areas of growth over evaluation period.

Methods of Evaluation

Video Review

Planning Discussion

De-briefing Discussion

Co-facilitation

Direct Observation

Signature (Intern):

Signature (Primary Supervisor):

Professional Wide Competency I: Research

PROFESSIONAL WIDE COMPETENCY I: RESEARCH

Primary	
Demonstrates during supervision the substantially independent ability to critically evaluate research related to psychotherapy.	#DIV/0!
Demonstrates during case presentation the substantially independent ability to disseminate research related to psychotherapy.	#DIV/0!
Secondary	
Demonstrates during supervision the substantially independent ability to critically evaluate research related to psychotherapy.	#DIV/0!
Demonstrates during case presentation the substantially independent ability to disseminate research related to psychotherapy.	#DIV/0!
Supervision	
Demonstrates knowledge of theoretical models and research relevant to providing supervision.	#DIV/0!
Demonstrates the substantially independent ability to critically evaluate and disseminate research related to supervision.	#DIV/0!
Assessment	
Demonstrates knowledge of research relevant to LD/ADHD.	#DIV/0!
Demonstrates the substantially independent ability to critically evaluate and disseminate research related to assessment.	#DIV/0!
Multicultural	
Demonstrates knowledge of theory and research relevant to individual and cultural diversity.	#DIV/0!
Demonstrates the substantially independent ability to critically evaluate and disseminate theory and research related to individual and cultural diversity.	#DIV/0!

Professional Wide Competency II: Ethical and Legal Standards

PROFESSIONAL WIDE COMPETENCY II: ETHICAL AND LEGAL STANDARDS

Primary	
Demonstrates knowledge of, and acts in accordance with: the current version of the APA Ethical Principles of Psychologists and Code of Conduct.	#DIV/0!
Demonstrates knowledge of, and acts in accordance with: relevant laws, regulations, rules and policies governing health service psychology at the organizational, local, state, regional, and federal levels.	#DIV/0!
Demonstrates knowledge of, and acts in accordance with: relevant professional standards and guidelines.	#DIV/0!
Recognizes ethical dilemmas as they arise, applies ethical decision making processes, and engages in appropriate consultation, in order to resolve the dilemmas.	#DIV/0!
Conducts self in an ethical manner in all professional activities supervised over this evaluation period.	#DIV/0!
Secondary	
Demonstrates knowledge of, and acts in accordance with: the current version of the APA Ethical Principles of Psychologists and Code of Conduct.	#DIV/0!
Demonstrates knowledge of, and acts in accordance with: relevant laws, regulations, rules and policies governing health service psychology at the organizational, local, state, regional, and federal levels.	#DIV/0!
Demonstrates knowledge of, and acts in accordance with: relevant professional standards and guidelines.	#DIV/0!
Recognizes ethical dilemmas as they arise, applies ethical decision making processes, and engages in appropriate consultation, in order to resolve the dilemmas.	#DIV/0!
Conducts self in an ethical manner in all professional activities supervised over this evaluation period.	#DIV/0!
Supervision	
Demonstrates knowledge of and acts in accordance with the current version of the APA Ethical Principles of Psychologists and Code of Conduct.	#DIV/0!

PROFESSIONAL WIDE COMPETENCY II: ETHICAL AND LEGAL STANDARDS

Demonstrates knowledge and acts in accordance to the Guidelines for Clinical Supervision in Health Service Psychology.	#DIV/0!
Recognizes ethical dilemmas as they arise and applies ethical decision making processes in order to resolve the dilemmas.	#DIV/0!
Conducts self in an ethical manner in supervision.	#DIV/0!
Assessment	
Demonstrates knowledge of and acts in accordance with the current version of the APA Ethical Principles of Psychologists and Code of Conduct.	#DIV/0!
Demonstrates knowledge and acts in accordance to the Standards for Educational and Psychological Testing.	#DIV/0!
Recognizes ethical dilemmas as they arise and applies ethical decision making processes in order to resolve the dilemmas.	#DIV/0!
Conducts self in an ethical manner.	#DIV/0!
Multicultural	
Demonstrates knowledge of and acts in accordance with the current version of the APA Ethical Principles of Psychologists and Code of Conduct.	#DIV/0!
Demonstrates knowledge and acts in accordance to the APA Guidelines on Multicultural Education, Training, Research, Practice and Organizational Change for Psychologists, and other relevant guidelines for working with diverse populations.	#DIV/0!
Outreach	
Demonstrates knowledge of and acts in accordance with the current version of the APA Ethical Principles of Psychologists and Code of Conduct.	#DIV/0!
Recognizes ethical dilemmas as they arise, applies ethical decision making processes and engages in appropriate consultation in order to resolve dilemmas encountered in the provision of outreach services and his/her/their activity as a leadWell trainer.	#DIV/0!

PROFESSIONAL WIDE COMPETENCY II: ETHICAL AND LEGAL STANDARDS

Conducts self in an ethical manner in the provision of outreach services and his/her/their activity as a leadWell trainer over this evaluation period.	#DIV/0!
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Professional Wide Competency III: Individual and Cultural Diversity

PROFESSIONAL WIDE COMPETENCY III: INDIVIDUAL AND CULTURAL DIVERSITY

Primary	
Demonstrates an understanding of how his/her/their own personal/cultural history and attitudes and biases affect his/her/their clinical work.	#DIV/0!
Demonstrates an understanding of how their client's personal/cultural history and intersectional identities impact counseling.	#DIV/0!
Demonstrates an understanding of how the social, historical and cultural context in which counseling occurs impacts clients and counseling.	#DIV/0!
Demonstrates knowledge of current theory and evidence based practice related to addressing diversity in counseling.	#DIV/0!
Demonstrates the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered.	#DIV/0!
Demonstrates the ability to work effectively with individuals whose diversity variables create conflict with their own.	#DIV/0!
Independently applies the knowledge, awareness, and skills described above to address any skill deficits and effectively work with diverse clients.	#DIV/0!
Secondary	
Demonstrates an understanding of how his/her/their own personal/cultural history and attitudes and biases affect his/her/their clinical work.	#DIV/0!
Demonstrates an understanding of how their client's personal/cultural history and intersectional identities impact counseling.	#DIV/0!
Demonstrates an understanding of how the social, historical and cultural context in which counseling occurs impacts clients and counseling.	#DIV/0!
Demonstrates knowledge of current theory and evidence based practice related to addressing diversity in counseling.	#DIV/0!
Demonstrates the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered.	#DIV/0!
Demonstrates the ability to work effectively with individuals whose diversity variables create conflict with their own.	#DIV/0!
Independently applies the knowledge, awareness, and skills described above to address any skill deficits and effectively work with diverse clients.	#DIV/0!

PROFESSIONAL WIDE COMPETENCY III: INDIVIDUAL AND CULTURAL DIVERSITY

Supervision	
Demonstrates an understanding of how his/her/their own personal/cultural history, attitudes and biases may impact his/her/their work with his/her/their supervisee.	#DIV/0!
Demonstrates an understanding of how their supervisee's personal/cultural history and intersectional identities may impact supervision and the supervisee's clinical work.	#DIV/0!
Demonstrates an understanding of how the social, historical and cultural context in which supervision occurs may impact supervision.	#DIV/0!
Demonstrates knowledge of current theory and evidence based practice related to addressing diversity in supervision.	#DIV/0!
Demonstrates the ability to integrate awareness of self and context, and knowledge of individual and cultural differences, in supervision.	#DIV/0!
Demonstrates the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered.	#DIV/0!
Demonstrates the ability to work effectively with supervisees whose diversity variables create conflict with their own.	#DIV/0!
Independently applies the knowledge, awareness, and skills described above to effectively work with supervisees.	#DIV/0!
Assessment	
Demonstrates knowledge of current theory and evidence based practice related to addressing diversity in assessment.	#DIV/0!
Demonstrates the ability to integrate awareness of self and context, and knowledge of individual and cultural differences to work effectively with clients in assessment.	#DIV/0!
Multicultural	
Demonstrates an understanding of how his/her/their own personal/cultural history, attitudes and biases may impact how he/she/they interact with people different from themselves.	#DIV/0!
Demonstrates an understanding of how others' personal/cultural history and intersectional identities may impact their ideas, thoughts and perceptions about the world.	#DIV/0!
Demonstrates an understanding of how the social, historical and cultural context in which individuals exist impact their life experiences.	#DIV/0!

PROFESSIONAL WIDE COMPETENCY III: INDIVIDUAL AND CULTURAL DIVERSITY

Demonstrates the ability to integrate awareness of self and context, and knowledge of individual and cultural differences in their clinical work.	#DIV/0!
Outreach	
Demonstrates the ability to integrate awareness of self, context, and knowledge of individual and cultural differences in the planning and implementation of outreach programs and his/her/their activity as leadWell trainer.	#DIV/0!
Independently applies the knowledge, awareness, and skills described above to effectively deliver outreach programs and participate in the leadWell program.	#DIV/0!

Professional Wide Competency IV: Professional Values and Attitudes

PROFESSIONAL WIDE COMPETENCY IV: PROFESSIONAL VALUES AND ATTITUDES

Primary	
Behaves in ways that reflect core values the values of psychology, including integrity, accountability, lifelong learning and concern for the welfare of others.	#DIV/0!
Engages in self-reflection regarding personal and professional functioning.	#DIV/0!
Demonstrates the ability to accurately assess and monitor their professional functioning.	#DIV/0!
Actively seeks and demonstrates openness and responsiveness to feedback and supervision.	#DIV/0!
Responds professionally in increasingly complex situations with a greater degree of independence.	#DIV/0!
Secondary	
Behaves in ways that reflect core values the values of psychology, including integrity, accountability, lifelong learning and concern for the welfare of others.	#DIV/0!
Engages in self-reflection regarding personal and professional functioning.	#DIV/0!
Demonstrates the ability to accurately assess and monitor their professional functioning.	#DIV/0!
Actively seeks and demonstrates openness and responsiveness to feedback and supervision.	#DIV/0!
Responds professionally in increasingly complex situations with a greater degree of independence.	#DIV/0!
Supervision	
Behaves in ways that reflect core values of psychology, including integrity, accountability, lifelong learning and concern for the welfare of others.	#DIV/0!
Engages in self-reflection regarding functioning in supervision.	#DIV/0!
Actively seeks and demonstrates openness and responsiveness to feedback and supervision.	#DIV/0!
Responds professionally in increasingly complex situations with a greater degree of independence.	#DIV/0!
Participates actively by discussing supervisory sessions.	#DIV/0!
Participates actively by bringing materials (e.g., audiotapes, videotapes, files, evaluations) relevant to supervisory sessions.	#DIV/0!
Attends seminar on a regular basis.	#DIV/0!
Assessment	
Behaves in ways that reflect core values of psychology, including integrity, accountability, lifelong learning and concern for the welfare of others.	#DIV/0!

PROFESSIONAL WIDE COMPETENCY IV: PROFESSIONAL VALUES AND ATTITUDES

Engages in self-reflection regarding functioning in assessment.	#DIV/0!
Actively seeks and demonstrates openness and responsiveness to feedback and supervision.	#DIV/0!
Responds professionally in increasingly complex situations with a greater degree of independence.	#DIV/0!
Participates actively by contributing to discussion of other intern's assessment materials.	#DIV/0!
Participates actively by bringing own assessment materials to seminar for review by group.	#DIV/0!
Submits written reports to Assessment Seminar facilitator(s) within specified time frames.	#DIV/0!
Provides feedback to examinees within specified time frames.	#DIV/0!
Multicultural	
Behaves in ways that reflect core values of psychology, including integrity, accountability, lifelong learning and concern for the welfare of others.	#DIV/0!
Attends seminar on a regular basis.	#DIV/0!
Participates actively by contributing to discussion and/or providing resources during multicultural seminar.	#DIV/0!
Outreach	
Behaves in ways that reflect core values of psychology, including integrity, accountability, lifelong learning and concern for the welfare of others in the planning and implementation of outreach programs and his/her/their activity as leadWell trainer.	#DIV/0!
Responds professionally in increasingly complex situations with a greater degree of independence.	#DIV/0!

Professional Wide Competency V: Communication and Interpersonal Skills

PROFESSIONAL WIDE COMPETENCY V: COMMUNICATION AND INTERPERSONAL SKILLS

Primary	
Develops and maintains effective relationships with colleagues, faculty and support staff.	#DIV/0!
Demonstrates effective interpersonal skills.	#DIV/0!
Produces verbal, nonverbal and written communications that are informative, well-integrated, and demonstrate a thorough grasp of professional language and concepts.	#DIV/0!
Comprehends verbal, nonverbal, and written communications.	#DIV/0!
Secondary	
Develops and maintains effective relationships with colleagues, faculty and support staff.	#DIV/0!
Demonstrates effective interpersonal skills.	#DIV/0!
Produces verbal, nonverbal and written communications that are informative, well-integrated, and demonstrate a thorough grasp of professional language and concepts.	#DIV/0!
Comprehends verbal, nonverbal, and written communications.	#DIV/0!
Supervision	
Develops and maintains effective relationships with colleagues, faculty, and support staff.	#DIV/0!
Produces verbal, nonverbal and written communications that are informative, well-integrated, and demonstrate a thorough grasp of professional language and concepts.	#DIV/0!
Comprehends verbal, nonverbal, and written communications.	#DIV/0!
Demonstrates effective interpersonal skills.	#DIV/0!
Communicates trainee strengths.	#DIV/0!

PROFESSIONAL WIDE COMPETENCY V: COMMUNICATION AND INTERPERSONAL SKILLS

Communicates trainee weaknesses and recommendations for improvement.	#DIV/0!
Assessment	
Provides accurate and specific feedback to examinees regarding test results.	#DIV/0!
Produces verbal, nonverbal and written communications that are informative, well-integrated, and demonstrate a thorough grasp of professional language and concepts.	#DIV/0!
Comprehends verbal, nonverbal, and written communications.	#DIV/0!
Demonstrates effective interpersonal skills.	#DIV/0!
Multicultural	
Produces verbal, nonverbal and written communications that are informative, well-integrated, and demonstrate a thorough grasp of professional language and concepts.	#DIV/0!
Comprehends verbal, nonverbal, and written communications.	#DIV/0!
Demonstrates effective interpersonal skills	#DIV/0!
Outreach	
Establishes effective working relationships with WVU students, faculty, and staff.	#DIV/0!
Produces verbal, nonverbal and written communications that are informative, well-integrated, and demonstrate a thorough grasp of professional language and concepts.	#DIV/0!
Comprehends verbal, nonverbal, and written communications.	#DIV/0!
Demonstrates effective interpersonal skills	#DIV/0!

Professional Wide Competency VI: Assessment

PROFESSIONAL WIDE COMPETENCY VI: ASSESSMENT

Primary	
Establishes and initial interpersonal climate that promotes client disclosure useful for clinical assessment purposes.	#DIV/0!
Elicits and clarifies with the client the purpose of the interview (e.g. triage, crisis intervention, consultation).	#DIV/0!
Gathers adequate information for the purpose of initial assessment, intervention, and case disposition.	#DIV/0!
Communicates appropriately with the client regarding assessment outcomes and recommended interventions.	#DIV/0!
Demonstrates understanding of the DSM-V diagnostic system.	#DIV/0!
Integrates all available information into appropriate DSM-V diagnoses.	#DIV/0!
Assesses for risk to self, others, and consults appropriately with senior staff, as needed.	#DIV/0!
Makes appropriate recommendations, when indicated, for additional assessment, including psychometric/psychiatric evaluations and long term counseling.	#DIV/0!
Makes appropriate recommendations for auxiliary services for clients (e.g. Student Assistance Program, Learning Center, etc.) as needed.	#DIV/0!
Completes the required documentation for triage/intake interviews and crisis interventions appropriately.	#DIV/0!
Communicates verbally in an effective and timely manner with others in the interest of client welfare (e.g. crisis consultation, case disposition).	#DIV/0!

PROFESSIONAL WIDE COMPETENCY VI: ASSESSMENT

Makes appropriate recommendations regarding case assignment.	#DIV/0!
Secondary	
Establishes and initial interpersonal climate that promotes client disclosure useful for clinical assessment purposes.	#DIV/0!
Elicits and clarifies with the client the purpose of the interview (e.g. triage, crisis intervention, consultation).	#DIV/0!
Gathers adequate information for the purpose of initial assessment, intervention, and case disposition.	#DIV/0!
Communicates appropriately with the client regarding assessment outcomes and recommended interventions.	#DIV/0!
Demonstrates understanding of the DSM-V diagnostic system.	#DIV/0!
Integrates all available information into appropriate DSM-V diagnoses.	#DIV/0!
Assesses for risk to self, others, and consults appropriately with senior staff, as needed.	#DIV/0!
Makes appropriate recommendations, when indicated, for additional assessment, including psychometric/psychiatric evaluations and long term counseling.	#DIV/0!
Makes appropriate recommendations for auxiliary services for clients (e.g. Student Assistance Program, Learning Center, etc.) as needed.	#DIV/0!
Completes the required documentation for triage/intake interviews and crisis interventions appropriately.	#DIV/0!

PROFESSIONAL WIDE COMPETENCY VI: ASSESSMENT

Communicates verbally in an effective and timely manner with others in the interest of client welfare (e.g. crisis consultation, case disposition).	#DIV/0!
Makes appropriate recommendations regarding case assignment.	#DIV/0!
Assessment	
Demonstrates knowledge of LD/ADHD assessment instruments.	#DIV/0!
Demonstrates knowledge of criteria for LD/ADHD.	#DIV/0!
Demonstrates the ability to conceptualize assessment cases based on knowledge of instruments, criteria, and research relevant to LD/ADHD.	#DIV/0!
Accurately scores and evaluates the tests in the LD/ADHD assessment batteries.	#DIV/0!
Integrates data from the various tests to assess learning style and disabilities.	#DIV/0!
Writes organized meaningful reports based on background information, behavioral observations, and test data.	#DIV/0!
Establishes and maintains rapport with examinees.	#DIV/0!
Administers the LD/ADHD assessment batteries in a standardized fashion.	#DIV/0!

Professional Wide Competency VII: Intervention

PROFESSIONAL WIDE COMPETENCY VII: INTERVENTION

Primary	
Establishes and maintains rapport with clients.	#DIV/0!
Demonstrates knowledge of theory relevant to the provision of individual psychotherapy/counseling.	#DIV/0!
Conceptualizes cases based on theory, research, assessment data, diversity factors, contextual variables and any other relevant data.	#DIV/0!
Designs and implements effective treatment plans based on case conceptualization and evidence based standards of practice.	#DIV/0!
Accurately assesses treatment effectiveness and efficiency, modifies treatment plans as necessary, and submits continuation of service requests as needed.	#DIV/0!
Modifies evidence based approaches effectively when a clear evidence base in the literature is lacking.	#DIV/0!
Works effectively utilizing time-limited approaches to psychotherapy.	#DIV/0!
Works effectively with longer-term psychotherapy cases.	#DIV/0!
Seeks appropriate consultation from supervisors, senior staff, and colleagues as necessary.	#DIV/0!
Refers clients to a variety of resources both on and off campus, as appropriate.	#DIV/0!
Accurately assesses client readiness for termination and terminates therapy appropriately.	#DIV/0!
Secondary	
Establishes and maintains rapport with clients.	#DIV/0!
Demonstrates knowledge of theory relevant to the provision of individual psychotherapy/counseling.	#DIV/0!
Conceptualizes cases based on theory, research, assessment data, diversity factors, contextual variables and any other relevant data.	#DIV/0!

PROFESSIONAL WIDE COMPETENCY VII: INTERVENTION

Designs and implements effective treatment plans based on case conceptualization and evidence based standards of practice.	#DIV/0!
Accurately assesses treatment effectiveness and efficiency, modifies treatment plans as necessary, and submits continuation of service requests as needed.	#DIV/0!
Modifies evidence based approaches effectively when a clear evidence base in the literature is lacking.	#DIV/0!
Works effectively utilizing time-limited approaches to psychotherapy.	#DIV/0!
Works effectively with longer-term psychotherapy cases.	#DIV/0!
Seeks appropriate consultation from supervisors, senior staff, and colleagues as necessary.	#DIV/0!
Refers clients to a variety of resources both on and off campus, as appropriate.	#DIV/0!
Accurately assesses client readiness for termination and terminates therapy appropriately.	#DIV/0!
Outreach	
Demonstrates ability to plan, implement, and evaluate outreach programs tailored to the needs of the target audiences.	#DIV/0!
Meets monthly with leadWell mentors.	#DIV/0!
Demonstrates ability to incorporate feedback from leadWell mentors to improve delivery of the leadWell program.	#DIV/0!

Professional Wide Competency VIII: Supervision

PROFESSIONAL WIDE COMPETENCY VIII: SUPERVISION

Supervision	
Demonstrates the ability to conceptualize supervisory work based on knowledge of theories and research relevant to supervision.	#DIV/0!
Draws from a variety of models of supervision when conceptualizing supervisory work.	#DIV/0!
Demonstrates ability to facilitate supervisory relationships that promote both supervisee development and client welfare.	#DIV/0!
Establishes and maintains rapport with trainees.	#DIV/0!
Provides specific treatment alternatives, readings, and/or resources for trainee, as appropriate.	#DIV/0!
Assesses issues and progress of clients on trainee caseload.	#DIV/0!
Discusses issues relevant to trainee's professional identity development, as appropriate.	#DIV/0!
Is available for emergency consultation with trainee or assists trainee with identifying appropriate consultation strategies within the agency.	#DIV/0!
Demonstrates openness to receiving feedback from trainee.	#DIV/0!

Professional Wide Competency IX: Consultation and Interprofessional/Interdisciplinary Skills

PROFESSIONAL WIDE COMPETENCY IX: CONSULTATION AND INTERPROFESSIONAL/INTERDISCIPLINARY SKILLS

Primary	
Demonstrates knowledge and respect for the roles and perspectives of other professions.	#DIV/0!
Applies this knowledge in direct consultation with individuals and their families, other health care professionals, and faculty and staff.	#DIV/0!
Secondary	
Demonstrates knowledge and respect for the roles and perspectives of other professions.	#DIV/0!
Applies this knowledge in direct consultation with individuals and their families, other health care professionals, and faculty and staff.	#DIV/0!
Assessment	
Demonstrates knowledge and respect for the roles and perspectives of other professions.	#DIV/0!
Applies this knowledge in direct consultation with individuals and their families, other health care professionals, and faculty and staff.	#DIV/0!
Outreach	
Demonstrates knowledge and respect for the roles and perspectives of other professions.	#DIV/0!
Applies this knowledge in direct consultation with WVU faculty and staff.	#DIV/0!

Professional Wide Competency Averages

PROFESSIONAL WIDE COMPETENCY AVERAGES

COMPETENCY I - RESEARCH	#DIV/0!
COMPETENCY II - ETHICAL AND LEGAL STANDARDS	#DIV/0!
COMPETENCY III - INDIVIDUAL AND CULTURAL DIVERSITY	#DIV/0!
COMPETENCY IV - PROFESSIONAL VALUES	#DIV/0!
COMPETENCY V - COMMUNICATION AND INTERPERSONAL SKILLS	#DIV/0!
COMPETENCY VI - ASSESSMENT	#DIV/0!
COMPETENCY VII - INTERVENTION	#DIV/0!
COMPETENCY VIII - SUPERVISION	#DIV/0!
COMPETENCY IX - CONSULTATION AND INTERPROFESSIONAL/INTERDISCIPLINARY SKILLS	#DIV/0!

Please comment on each of the following areas:

A. Particular strengths:

B. Suggested areas for further development:

RETURN TO TRAINING DIRECTOR

The TD makes copies for primary supervisor to provide feedback to intern. Only ratings completed by senior staff will be retained in the intern's file.

Workshop Evaluation

Title of Workshop: _____

Presenter(s): _____

Date: _____

Please rate the following items on a scale from 1 to 5 by circling the appropriate number:

1=Strongly Disagree (SD); 2=Disagree (D); 3=Not Sure (NS); 4=Agree (A); 5=Strongly Agree (SA)

	SD	D	NS	A	SA
1. I felt that the workshop was well organized and the main points were well covered and clarified.	1	2	3	4	5
2. I felt that the facilitator demonstrated comprehensive knowledge of the subject matter.	1	2	3	4	5
3. The facilitator helped me to understand how the workshop material related to my own life.	1	2	3	4	5
4. I felt that the facilitator conveyed ideas effectively and clearly and the material was informative and easy to understand.	1	2	3	4	5
5. I gained usable skills and will be able to apply them to my academic or personal life.	1	2	3	4	5

6. What was the most valuable aspect of the workshop?

7. What could have been done to improve the workshop?

8. Additional Comments or suggestions (Use the other side of this page if necessary):

INTERN EVALUATION PROCEDURES

Introduction

The Intern Training Staff (ITS), composed of all CCPPS staff providing supervision to interns on any given year, is asked as part of their commitment to supervision to provide ongoing feedback to interns regarding their progress toward completion of the internship, and to do so in accordance to the CCPPS intern evaluation procedures described below.

The CCPPS intern evaluation system includes both informal and formal evaluation procedures, as well as procedures for addressing concerns and grievances that may arise regarding intern performance and/or behavior and its evaluation during internship.

Due Process: General Guidelines

Due process ensures that decisions made by ITS and CCPPS staff about interns are not arbitrary or unfair. It requires that programs such as CCPPS identify specific evaluative procedures which are applied to all trainees and have appropriate appeal procedures available to the intern so they may challenge the program's actions if needed. General due process guidelines described in this handbook include:

1. Presenting interns, in writing, CCPPS's expectations related to professional functioning.
2. Stipulating the procedures for evaluation, including when and how evaluations will be conducted.
3. Articulating in writing the various procedures and actions involved in making decisions regarding intern impairment.
4. Communicating with graduate programs of origin about any significant difficulties with interns and seeking input from these academic programs about how to address such difficulties.
5. Instituting, with the input and knowledge of the graduate program of origin when needed, a remediation plan for significant intern inadequacies, including a timeframe for expected remediation and consequences of not rectifying the inadequacies.
6. Providing the Intern Handbook at the outset of the training year to interns, including the policies and procedures and, more specifically, a description of Due Process and Grievance mechanisms.
7. Ensuring that interns have sufficient time to respond to any action taken by CCPPS.
8. Using input from multiple professional sources when making decisions or recommendations regarding the intern's performance.
9. Documenting, in writing and to all relevant parties, the action taken by CCPPS and its rationale.

The Evaluation Process.

At CCPPS interns are evaluated and given feedback by individual and area supervisors, as well as by other CCPPS staff involved in their training, in various ways throughout the internship year. This feedback serves to facilitate growth by highlighting ongoing areas of strength and areas for growth that can serve as foci during training at CCPPS and beyond.

Although formative evaluation and feedback is ongoing during internship year, there are four key moments in the regular evaluation process during the year, two informal and two formal (summative):

- 1) In the middle of the first term (**or approximately November 1**) interns and supervisors informally discuss interns' performance over the first 7 weeks of internship. This informal meeting is designed to review the progress of interns and discuss any ongoing concerns or challenges as they are being addressed by supervisors in their respective areas. This initial meeting also provides an opportunity for:
 - a. early intervention if significant concerns are raised about performance with the training director and other supervising staff (see **Procedures for Addressing Staff Concerns Regarding Intern Behaviors and Skills** below)
 - b. increasing supervising staff awareness of intern performance across professional wide competencies to tailor training over next few weeks in various supervised areas as needed.

Supervising staff are encouraged to discuss any concerns they have regarding intern performance with their supervisee throughout the semester and in a formative manner.

- 2) In **late-January**, the first **formal evaluation** occurs. Primary and Secondary supervisors, as well as Assessment, Multicultural, Supervision of Supervision and Outreach supervisors fill out formal evaluation forms for their areas, which are then reviewed and signed by each area supervisor and each intern. Primary and Secondary supervisors meet prior to completing their evaluation to insure broad congruence in their ratings, and/or discuss lack thereof and possible rationale when there is lack of congruence. In the case of the latter, these differences are then explained to the intern by each supervisor. Evaluations are also provided to the intern's graduate program along with a letter regarding the overall intern's progress in the internship program.
- 3) In **mid-April**, supervising psychologists again informally discuss with interns progress over the second half of the year. Feedback from this discussion is shared with the primary supervisors and training director as is relevant.

- 4) In **early to mid-July**, final **formal evaluations** are completed by primary and secondary supervisors, as well as Assessment, Multicultural, Supervision of Supervision and Outreach supervisors, which are then reviewed and signed by each area supervisor and intern. Copies of all six final evaluations are provided to interns' graduate programs along with a letter indicating successful completion of the internship program.

The original copies of formal evaluations become a permanent part of the intern's internship file.

Intern Training Staff Concerns Regarding Intern Behavior and Skills: Definitions

There are three broad types of concerns regarding intern behaviors and skills, described below in order of severity from low to high.

Intern performance below the expected level of competency

Defined as a skill deficit in any one given supervised area or -more broadly- professional wide competency. It is typically identified by supervising staff in the course of their regular supervision/work with interns and leads to the development of an **informal remediation plan** to address the skill deficiency. This initial informal plan is developed in collaboration with the intern and may include the training director, upon the request of either party.

In instances in which the skill deficiency is still present by the time of the first **formal evaluation**, **intern performance below the expected level of competency** is defined as any rating below "3" in any single element of a written intern evaluation. Ratings of "1" in any single element mid-year automatically trigger a **formal remediation plan** (see below). Ratings of "2" mid-year may simply reflect ongoing work to improve in an area at the time of the evaluation, although clearly identify areas of concern, and consequently require a plan, formal or informal, to address them. By the end of the year, interns are expected to achieve ratings of "3" or above in all elements of their written final evaluation.

Intern unprofessional and/or problematic behavior

For purposes of this document, unprofessional and/or problematic behavior is defined broadly as behavior causing a significant interference in professional functioning that is reflected in one or more of the following ways:

- A. An inability and/or unwillingness to acquire and integrate professional standards into one's repertoire of professional behavior;
- B. An inability and/or unwillingness to acquire professional skills in order to reach an acceptable level of competency, and/or,
- C. An inability and/or unwillingness to manage personal stress, psychological difficulties, and/or excessive emotional reactions which interfere with professional relationship and functioning.

Problems typically become identified as problematic and unprofessional when they include one or more of the following characteristics:

1. The intern does not acknowledge, understand, or address the problem when it is identified;
2. The problem is not merely a reflection of a skill deficit which can be rectified by academic or didactic training;
3. The quality of services delivered by the intern is negatively affected;
4. The problem is not restricted to one area of professional functioning;
5. A disproportionate amount of attention by training staff is required; and/or
6. The trainee's behavior does not change as a function of feedback, remediation efforts, and/or time.

Intern violations of policy

Intern violations of policy, be it APA's code of ethics, CCPPS policies and procedures, West Virginia University's code of conduct and/or other state laws and regulations that may be severe enough (committing a felony, sexual/romantic contact with a client, etc.) to warrant immediate **suspension** or **dismissal** from the program.

Procedures for Addressing Staff Concerns Regarding Intern Behaviors and Skills

Most discussions regarding intern performance begin with individual and area supervisors. It is their responsibility to bring to the intern's attention skills, behavior and other actions which are perceived to be problematic or below the expected level of competency for an intern at any point during the internship year, and to offer and discuss strategies at that time to address these difficulties.

At times, the concerns over an intern behavior or skills may come from a CCPPS staff member not involved in the intern's supervision. In these instances, CCPPS staff members are asked to address their concerns first directly with the intern. If they are unsure how to address them, have attempted to do so but have been unable to, or have not received an appropriate response from the intern, they are asked to consult with the primary supervisor or Training Director (TD) for guidance on how to proceed. For serious concerns, please check Grievance Procedures for Staff Complaints Concerning a Psychology Intern below for detailed grievance procedures for staff complaints.

When concerns are perceived by ITS members to be significant enough to warrant additional action, the following procedures may be initiated:

Informal Remediation

Informal Remediation can be started by any intern supervisor in consultation with the TD. It defines a relationship where a supervisor works closely with an intern to remediate perceived **performance below the expected level of competency** in any one given supervised area.

Informal remediation acknowledges through the TD and supervisor that:

1. the supervisor is aware of and concerned with the intern's skill deficit or problematic behavior;
2. the skill deficit or behavior in question has been brought to the attention of the intern
3. the supervisor in question will work with the intern to rectify the behavior or skill deficits identified, as needed (see **Schedule Modification** below) and,
4. the skill deficit or behaviors associated with the concern are not significant enough to warrant more serious action.

Once an **Informal remediation** plan is implemented, it is expected that the status of the plan will be reviewed no later than the next evaluation period. Failure to improve by that time may lead to a **Formal Remediation** plan. **Informal remediation** actions are documented in supervisor notes and with the training director.

Formal Remediation

Formal Remediation results from a decision made by a majority of supervising staff in consultation with the TD, and occurs typically after the first formal evaluation, although it may be started at any point in the year. It defines a relationship such that the supervising staff actively and systematically monitor, for a specific length of time, the degree to which the intern addresses, changes, and/or otherwise improves the behavior associated with **performance below the expected level of competency** or **unprofessional and/or problematic behavior**. Formal Remediation requires a **written** statement to the intern that includes:

1. The actual behaviors associated with the formal remediation plan
2. The specific recommendations for addressing the problem (see **Schedule Modification** and **Suspension of Direct Service Activity** below)
3. The time frame during which the problem is expected to be ameliorated and,
4. The procedures designed to ascertain whether the problem has been appropriately rectified.

If a **Formal remediation** plan is implemented, the TD will inform the intern's doctoral program, indicating the nature of the inadequate rating, the rationale for the ITS action and the plan as outlined by the ITS. The intern shall receive a copy of the letter to their doctoral program.

Once a **Formal Remediation** plan is implemented, it is expected that the status of the plan will be reviewed no later than the time frame identified in the written statement. If the concern has been addressed to the satisfaction of the ITS, the intern, doctoral program of origin and other appropriate individuals will be informed, and no further action will be taken.

Two types of interventions are typically used in **Informal** or **Formal remediation plans**, with the nature of the intervention varying depending on the specific concern:

a) Schedule Modification: A time-limited intervention designed to help an intern address a skill deficit, and professional and/or problematic behavior in the context of an **informal** or **formal remediation plan**. The length of a schedule modification period will be determined by the TD in consultation with the intern's primary supervisor, the Clinical Director, and the Director. The termination of the schedule modification period will be determined, after discussions with the intern, by the TD in consultation with the primary supervisor and the Director. Several possible and perhaps concurrent courses of action may be included in modifying a schedule. These might include:

1. Increasing supervision time, either with the same or other supervisors,
2. Change in the format, emphasis, and/or focus of supervision,
3. Recommending personal therapy (a list of community practitioners and other options will be provided),
4. Reducing the intern's workload,
5. Requiring specific didactics or academic coursework.

b) Suspension of Direct Service Activity (Partial or Complete): requires a determination, made by the TD in consultation with ITS that the welfare of an intern's client/s or consultee/s has been jeopardized or is at significant risk of being jeopardized, and that partial or complete suspension of the intern's direct service activity is needed to prevent further injury.

In this instance, direct service activities will be suspended for a specified period as determined by the TD in consultation with the primary supervisor, Director and Clinical Director. At the end of the suspension period, the intern's supervisor in consultation with the TD will assess the intern's capacity for effective functioning and determine when direct service can be resumed.

When **formal remediation plans** fail to improve intern's performance or change problematic or unprofessional behavior, the ITS will communicate in writing to the intern that the conditions of the remediation plan have not been met. Any of the following actions may then be taken and reflected in the written communication to the intern

1. An extension of the remediation plan (as stated in the original written document or modified by the ITS) for a specified added time period.
2. A recommendation to the Director of CCPPS for intern **dismissal** from the Training Program (see below)

Recommendation to the Director for Dismissal.

It results from either the **informal** and **formal remediation** process (see above), or as a direct consequence of a severe intern violation of policy (see **Grievance Procedures for Staff Complaints Concerning a Psychology Intern**, below).

Procedures for Intern Appeal

If the intern challenges any of the actions taken by the ITS as described above, they must inform the TD *in writing* of such a challenge within 10 days of receipt of the ITS's decision.

The TD will then convene a **Review Panel** consisting of two staff members selected by the TD and two staff members selected by the intern. The intern retains the right to hear all facts with the opportunity to dispute or explain their behavior.

A review hearing will be conducted, chaired by the TD, in which the challenge is heard, and the evidence presented. Within 5 days of the completion of the review hearing, the Review Panel submits a report to the Director, including any recommendations for further action. Decisions made by the Review Panel will be made by majority vote. The intern is informed of the recommendation.

Within 5 days of receipt of the recommendation, the Director of the CCPPS will either accept the Review Panel's action, reject the Review Panel's action and provide an alternative, or refer the matter back to the Review Panel for further deliberation. The Panel then reports back to the Director within 10 days of the receipt of the Director's request for further deliberation. The Director then makes a final decision regarding the appeal.

Once a decision has been made, the intern, sponsoring university, and other appropriate individuals are informed in writing of the action taken.

Grievance Procedures for Intern Complaints Concerning a CCPPS Staff Member

In the event an intern encounters any difficulties or problems (e.g., poor supervision, personality clashes, inappropriate behavior, other staff conflict) during their training experiences, an intern is encouraged to:

1. Discuss the issue directly with the staff member(s) involved in an effort to informally resolve the problem
2. If the issue cannot be resolved informally, or if the intern is uncomfortable with directly approaching the persons involved, the intern may discuss the concern with their primary supervisor or, alternatively, the TD. If the primary supervisor and the Training Director are part of the complaint, the intern may speak with a different ITS member. The role of these individuals is to support, mentor and/or direct the intern in how best to proceed with the concern and to recommend appropriate resources for consultation. The ITS member may also consult with a member of the CCPPS leadership team on how to proceed.
3. If the Primary Supervisor, TD or ITS member cannot resolve the issue, the intern can present a formal complaint following this procedure:
 - a) The intern should file a formal complaint, in writing and all supporting documents, with the TD.
 - b) If the formal complaint involves the TD, the Director will appoint a staff member from the counseling senior staff to fulfill the TD function with regard to the complaint.
 - c) Within 3 working days of a formal complaint, the TD or alternative designated staff member consults with the Director and implements Review Panel procedures as described in **Procedures for Intern Appeal**

Given that interns are staff members, they have access to the grievance procedures available to West Virginia University Employees available through Human Resources.

For more information, see below:

WVU, Division of Talent and Culture, Employee Relations

1-304-293-5700 ext. 5

EmployeeRelations@mail.wvu.edu

Grievance Procedure and Process [<https://talentandculture.wvu.edu/employee-relations/filing-a-grievance>]

WVU, Division on Diversity, Equity and Inclusion

1-304-293-5600

Diversity@mail.wvu.edu

Ethics

1-304-293-5841

LegalAffairs@mail.wvu.edu

Ethics Line [<https://talentandculture.wvu.edu/policies-forms-and-resources/hr-policies/wvu-ethicsline>]

Grievance Procedures for Staff Complaints Concerning a Psychology Intern

Any staff member of the Carruth Center may file with the TD, in writing, a grievance against an intern for any of the following reasons: 1) Unethical or legal violations of professional standards or laws; 2) Serious professional incompetence or negligence, or; 3) Infringement on the rights, privileges or responsibilities of others.

- A. The TD will review the grievance with the primary supervisor of the intern and determine if there is reason to proceed.
- B. If the TD and primary supervisor determine that the alleged behavior in the complaint, if proven, **WOULD NOT** constitute a serious violation, the TD shall inform the staff member who may be allowed to renew the complaint if additional information is provided.
- C. If the TD and primary supervisor determined that the alleged behavior in the complaint, if proven, **WOULD** constitute a serious violation, the staff member will be notified and the TD and primary supervisor will meet with the intern to inform them of the grievance and seek their response.
- D. If the intern wishes to challenge the grievance, a **Review Panel** (see in **Procedures for Intern Appeal** above) will be convened to examine the evidence and reach a decision.
- E. If the intern confirms the concerns as described in the grievance, **Procedures for Addressing Staff Concerns Regarding Intern Behaviors and Skills** would apply.
- F. Once a decision has been made, the intern, staff member, sponsoring university, and other appropriate individuals are informed in writing of the action taken.

Maintenance of Records

Intern evaluations, certificates of completion, important correspondence with home academic programs, and any records of formal remediation or grievance procedures are maintained indefinitely in a secure digital file by the Training Director for future reference and accreditation purposes.

CCPPS STAFF

Yaping Huang Anderson, Ph.D.

Staff Psychologist/Diversity Coordinator

Education: Ph.D. in Counseling Psychology, Purdue University (2018)

Licensure Status: Licensed Psychologist in West Virginia (2019)

Orientation: Integrative with a focus on humanistic and multicultural approaches

Emphasis: Multicultural and diversity issues, international students' acculturation and well-being, relationship issues, trauma, loss and grief, ADHD/LD, training and supervision.

Claire Barbetti, Psy.D.

Supervised Staff Psychologist

Education: PsyD in Counseling Psychology, Chatham University (anticipated 2020)

Licensure Status: Supervised Psychologist in WV

Orientation: Integration of Interpersonal, Feminist/Multicultural, and Ecopsychological approaches. Utilization of trauma-informed somatic and mindfulness-based interventions where appropriate.

Emphasis: Trauma, PTSD, and Complex PTSD; Sexual and relationship health and well-being; LGBTQ+, Substance use disorders and recovery; Anxiety; Art therapies, Mindfulness and Somatic therapies

Shelly Cardi, Ph.D.

Staff Psychologist

Education: Ph.D. in Clinical Psychology, University of Kentucky

Licensure Status: Licensed Psychologist in West Virginia

Orientation: Integrative approach to meet each individual client's needs with use of interpersonal process with a combination of humanistic, mindfulness-based, positive psychology and strength-based approach.

Emphasis: Identity development, relationship issues, emotional disturbances, self-compassion, self-esteem, mindfulness, women's issues, ADHD and learning disorders.

Dayna Charbonneau, Psy.D.

Staff Psychologist in Athletics

Education: Psy.D. in Clinical Psychology, University of Indianapolis (2016)

Licensure Status: Licensed Psychologist in West Virginia (2018)

Orientation: Interpersonal process framework, integrating elements of CBT, DBT, EFT, and motivational interviewing, depending on stages of change and consideration of clients' intersecting identities and cultural context. Also an emphasis on solution-focused, experiential, and mindfulness-based approaches.

Emphasis: Sport and performance psychology, body image/eating concerns, self-esteem concerns, relationship concerns, intersections of identity/multicultural considerations, trauma work, group therapy, supervision/training.

Sandy Corbett, M.S.W.

Behavioral Health Therapist

Education: M.A. in Social Work, West Virginia University

Licensure Status: Licensed Independent Social Worker in WV

Orientation: Integrative with emphasis on interpersonal process, emotion-focused, humanistic, experiential and cognitive behavioral approaches

Emphasis: First generation students, Life transitions, Grief and Loss, Multicultural Diversity, Trauma, Women's Issues, Training and Supervision

Sara DiSimone, M.S., NCC, LPC

Behavioral Health Therapist/Case Manager

Education: M.S. in Counseling Psychology, Frostburg State University

Licensure Status: Licensed Counselor in West Virginia

Orientation: Person Centered, Eclectic approach to meet the needs of the individual, utilizing cognitive behavioral therapy, solution focused and strength-based techniques.

Emphasis: LGBTQ+ concerns, anxiety and depression, identity development, outreach

Narayan Gold, Ph.D.

Staff Psychologist/Assessment Coordinator

Education: Ph.D. in Counseling Psychology, West Virginia University (2015)

Licensure Status: Licensed Psychologist in West Virginia

Orientation: Integrative, with an emphasis on psychodynamic, CBT, humanistic, and family systems.

Emphasis: Individual, group, and couples counseling, LD/ADHD assessment, cognitive training/neurofeedback, men's issues, academic success, relationship issues, family therapy.

Stephanie Harrison, Psy.D

Supervised Staff Psychologist

Education: Psy.D. in Counseling Psychology, Chatham University (2018)

Licensure Status: Supervised Psychologist (expected licensure 2020)

Orientation: Integrative, with an emphasis on interpersonal, feminist and psychodynamic approaches.

Emphasis: Individual & group counseling; trauma; multicultural, diversity, and social justice issues; LGBTQ+ concerns; women's issues; identity concerns; working with athletes

T. Anne Hawkins, Ph.D.

Administrative and Clinical Director/Staff Psychologist

Education: Ph.D. in Counseling Psychology, West Virginia University (2005)

Licensure Status: Licensed Psychologist in West Virginia

Orientation: Integrates psychodynamic, interpersonal process, experiential and solution-focused frameworks within a developmental context

Emphasis: Individual & group counseling, multicultural issues, LGBT identity, acute and chronic mental illness, crisis intervention and risk assessment. Other interests include supervision, training and organizational consulting.

Seth Haxel, M.A.

Behavioral Health Therapist

Education: M.A. in Counseling, West Virginia University

Licensure Status: Provisionally Licensed Counselor in West Virginia

Orientation: My primary theoretical orientation is Cognitive Behavioral Therapy (CBT). I utilize CBT through a multicultural lens by recognizing the unique experiences that each individual brings into the counseling sessions.

Emphasis: Anxiety and related disorders, substance use, exposure therapy

Layne M. Hitchcock, M.A., LPC, ALPS

Behavioral Health Therapist/Practicum Coordinator

Education: M.A. in Counseling (Community Specialization), West Virginia University (2012)

Licensure Status: Licensed Professional Counselor in West Virginia

Orientation: Integrative, with an emphasis on Cognitive-Behavioral, Humanistic, Existential, and Adlerian approaches.

Emphasis: Individual and group counseling with specific focus on academic concerns, issues related to relationships, spirituality, and gender/sexual identity, as well as grief and trauma. I am also very passionate about training and providing supervision.

Jeremiah Hopkins, M.D.

Psychiatrist/Assistant Clinical Professor, Department of Behavioral Medicine

Education: MD, Eastern Virginia Medical School (2011); Residency: East Tennessee State University (2015)

Licensure status: Board-Certified in general psychiatry, active license with the West Virginia Board of Medicine and Virginia Board of Medicine

Emphasis: College health Psychiatry, Trauma Psychiatry, Addiction Psychiatry

Jessica Johnston-York, Ph.D.

Supervised Staff Psychologist

Education: Ph.D. in Counseling Psychology, Texas Tech University (2019)

Licensure Status: Supervised Psychologist (expected licensure 2020)

Orientation: Person-centered/emotion-focused, with an emphasis on the therapeutic relationship and cultural awareness

Emphasis: Individual and group counseling, relationship and sexual concerns, identity development and self-esteem concerns, body image and eating concerns, and depression/anxiety/adjustment. I am also very passionate about supervision and mentorship, self-compassion, social justice, and creative approaches to group work.

Matthew C. Kellar, Psy.D.

Assistant Director/Interim Training Director/Staff Psychologist

Education: Psy.D. in Clinical Psychology, Marshall University (2012)

Licensure Status: Licensed Psychologist in West Virginia (2014)

Orientation: Integrative, with an emphasis on cognitive behavioral, interpersonal, and mindfulness-based approaches.

Emphasis: Individual & group counseling, social anxiety, relationship concerns, supervision.

Daniel G. Long II, Ph.D., BCN (Part-time clinician)

Staff Psychologist, Director of Office of Accessibility Services, WVU Mindfit Program

Education: Ph.D. in Clinical Psychology, George Mason University (2005)

Licensure Status: Licensed Psychologist in West Virginia

Orientation: Integrative - Relational/Developmental framework with an emphasis on Psychodynamic (including self-psychology, object relations, intersubjectivity), Humanistic, and Cognitive-Behavioral approaches.

Emphasis: Individual counseling, psychoeducational assessment, ADHD cognitive training, neurofeedback, and anxiety disorders.

Kayla R. Meador, M.S.W., LGSW

Behavioral Health Therapist/Veteran & Military Liaison

Education: M.S.W. in Social Work, West Virginia University (2017)

Licensure Status: Licensed Social Worker in WV

Orientation: Integrative to fit the client's needs utilizing strengths, solution focused, CBT, mindfulness based, person-centered, emotion-focused, and humanistic approaches.

Emphasis: Veteran or military-related concerns, multicultural issues, identity development, crisis intervention, family of origin concerns, substance abuse, women and men's issues, relationship issues, anxiety/depression.

Sarah Milam, Ph.D.

Supervised Adventure/Experiential Therapy Psychologist

Education: Ph.D. in Counseling Psychology, West Virginia University (anticipated 2020)

Licensure Status: Supervised Psychologist in West Virginia

Orientation: I use an integrative approach in my therapeutic work. My goal is always to tailor my approach to what fits best for my client. My orientation typically incorporates interpersonal process, cognitive-behavioral, strengths-based approaches grounded in a feminist/multicultural framework.

Emphasis: Individual and group counseling; multicultural, diversity, and social justice issues; positive psychology and strengths-based growth; post-traumatic growth; eco-psychology and wellness applications of outdoor engagement.

Fanica J. Payne, M.S.W., LICSW

Substance Use Disorder Specialist

Education: M.A. in Social Work, West Virginia University (2013)

Licensure Status: Licensed Independent Clinical Social Worker in West Virginia

Orientation: Evidence-based, integrative, therapeutic approach specific to meet client's needs while respecting their self-determination. Emphasis on Strengths Based, Person-centered, along with Cognitive Behavioral Therapy. Solution Focused, Motivational interviewing and elements of Dialectical Behavioral Therapy are also incorporated when appropriate.

Emphasis: Individual and group therapy, substance use, anxiety, depression and other mood related concerns. Areas of important also include self-esteem, self-care, stress management, multicultural and LGBTQ+ concerns, along with relationship challenges. Other interest includes mentoring and teaching.

Missy Pforr, M.S.W.

Director of Student Assistance Program

Education: M.S.W, West Virginia University, 1993

Licensure Status: Licensed Social Worker in West Virginia

Orientation: Integrative specifically to fit the client's needs utilizing solution focused and strength based, MET, mindfulness, and client centered approaches.

Emphasis: Substance abuse, self-compassion, mindfulness, identify development, diversity, psychoeducation, and teaching.

Brian Quigley, M.D.

Director of Psychiatry/Assistant Professor, Department of Behavioral Medicine

Education: MD, University of Washington School of Medicine (2001)

Licensure Status: Board certified in general psychiatry, board eligible in forensic psychiatry, active license with the West Virginia Board of Medicine

Emphasis: College health psychiatry; HIV psychiatry; psychosomatic psychiatry

Jennifer Randall Reyes, Ph.D., ALPS, LPC

Behavioral Health Therapist in Health Sciences Center

Education: Ph.D., Counselor Education and Supervision, Regent University (2017); MA, Counseling, Community Counseling Specialization, West Virginia University (2011)

Licensure Status: Licensed Professional Counselor in West Virginia

Emphasis: posttraumatic growth, Eye Movement Desensitization and Reprocessing (EMDR), teaching, supervision, research, social justice and advocacy work

Morgan Sharpless, M.S.W.

Behavioral Health Therapist/Case Manager

Education: MSW, West Virginia University (2011)

Licensure Status: Licensed Social Worker in West Virginia

Orientation: Integrative specifically to fit the client's needs utilizing strengths, solution focused, MET, CBT, mindfulness-based and attachment approaches.

Emphasis: Identity development, crisis intervention, substance abuse, body-image, self-compassion, diversity and social justice issues, first-generation students

Jeneice Shaw, Ph.D.

Supervised Staff Psychologist/Outreach Coordinator

Education: Ph.D. in Counseling Psychology, West Virginia University (2019)

Licensure Status: Supervised Psychologist (expected licensure 2020)

Orientation: Integrative with an emphasis on humanistic, feminist/multicultural, and interpersonal approaches.

Emphasis: Individual and group counseling, LGBTQ+ concerns, trauma, sexual health, multicultural and social justice issues, identity concerns, outreach.

Christine Keller Simpson, Psy.D.

Staff Psychologist/Group Coordinator

Education: Psy.D. in Counseling Psychology, Chatham University (2016)

Licensure Status: Licensed Psychologist in West Virginia

Orientation: Integrative, with an emphasis on interpersonal process, positive psychology/strengths-based, and feminist approaches

Emphasis: Individual and group counseling; trauma; supervision and training; multicultural, diversity, and social justice issues; LGBTQ+ concerns; women's issues; first-generation students.

STATEMENT ON TRAINEE SELF-DISCLOSURE

The CCPPS chooses to adhere to Standard 7.04 of the APA Ethical Principles of Psychologists and Code of Conduct (2002) by identifying our expectations of trainees with respect to self-disclosure of personal information during training. We do not require trainees to self-disclose specific personal information as a matter of course. However, our training model is one that values both personal and professional development.

We believe that becoming a competent and ethical psychologist often involves exploration of those experiences that have shaped one's worldview. In both individual and group supervision, the supervisors seek to create a safe environment for trainees to willingly engage in the process of self-examination in the service of their training and in the service of their clients.

This process may involve trainee self-disclosure of personal information as it relates to the trainee's clinical work and/or professional development. Thus, trainees at the CCPPS can expect to engage in some degree of self-exploration in the context of safe supervisory relationships as a means of furthering their professional development.

As noted in the Ethical Principles, we may require self-disclosure of personal information if the information is necessary to evaluate or obtain assistance for students whose personal problems could reasonably be judged to be preventing them from performing their training or professionally related activities in a competent manner or posing a threat to the students or others (APA, 2002).

American Psychological Association (2002). Ethical principles of psychologists and code of conduct. *American Psychologist*, 57, 1060-1073.

INTERN BENEFITS PACKAGE

Annual Salary

Intern annual salary is currently set at \$35,600.

Intern Professional Development

Interns are encouraged to engage in professional development activities in discussion with the Training Director. These may involve presenting at and/or attending regional or national conferences, presenting at local agencies, etc.

Interns are given the option to attend the yearly WV/VA Intern and Training Director Retreat, usually occurring over the summer before the end of internship at one of the West Virginia and Virginia Counseling Center APA accredited training sites. Hotel and travel expenses for this retreat are covered by CCPPS.

Interns will be given professional development leave if they are presenting at a conference while they are an intern at CCPPS (maximum 3 days for the year).

CCPPS does not pay for expenses related to attending conferences (presenting or not).

Interns should use annual leave for job interviews, dissertation defense, etc.

Intern Vacation (Annual Leave)

WVU offers generous vacation time to all its full-time employees. Interns are entitled to 180 hours (24 days) of vacation during the year. As part of an APA-accredited internship program, an intern is required to complete 2000 hours of internship activity during the internship year. To meet the minimum requirement of 500 hours of direct service, it is important that an intern does not take prolonged vacation time during the fall and spring semesters. Interns are strongly encouraged to use their vacation time during the winter break and summer sessions, when the demand for services is less. **All Interns are asked to take five days of vacation during their final week of internship (last week of July) so their offices can be readied for the incoming new interns.**

Most training activities (group supervisions, seminars) occur either on Monday or Friday morning, and therefore interns are discouraged from being absent on these days. If an intern is considering taking three or more days of vacation at any time of the year, they should discuss it with the Training Director in advance (before applying for vacation)

Intern Sick Leave

Interns also accrue 1.5 days of sick leave a month (18 days a year). According to University policy, an employee may not use sick leave before it has been earned. Sick leave may be used when the employee is ill or injured and unable to work; for employee medical appointments; or when a member of the employee's immediate family is seriously ill or dies.

Unplanned sick leave: If an intern gets sick during the week, they need to call the office between 8:30 and 9 am to inform the front desk staff. The front desk staff will take care of rescheduling their appointments for that day. Upon their return, they need to apply for sick leave.

Planned sick leave: Interns may plan their sick leave for medical appointments in advance. In these situations it is an intern's responsibility to inform/reschedule their clients and other activities as necessary. If they plan to be away for three or more days, they must discuss it with the Training Director before applying for sick leave.

To read more about this policy, please visit the WVU website:

<https://talentandculture.wvu.edu/policies-forms-and-resources/hr-policies/sick-leave>

Parental Leave

West Virginia University adheres to the requirements of the West Virginia state Parental Leave Act. Parental Leave provides interns up to 12 weeks of unpaid family leave during a twelve-month period following exhaustion of all their annual leave. To meet eligibility requirements for Parental Leave, interns must have been hired and worked at least 12 consecutive weeks.

Given the uniqueness of the one-year appointment of the internship program, combined with requirements for a specific completed number of direct service and general working hours, every effort is made to assist interns wishing to take parental leave to still meet the requirements of the internship program without having to extend their time at CCPPS; however, if this cannot be accommodated, an intern's time at CCPPS may be extended to satisfy the hours requirements of the internship program. In the service of this, a specific schedule will be agreed upon between the intern, CCPPS staff, and WVU's Talent and Culture division on a case-by-case basis.

To read more about this policy, please visit the WVU website:

<https://talentandculture.wvu.edu/benefits-and-compensation/medical-management/parental-leave>.

MISCELLANEOUS

Supervision Contract and Informed Consent

Carruth Center for Psychological and Psychiatric Services (CCPPS) Supervision Contract for Psychology Interns and Practicum Counselors

Goals of Supervision

Supervision is a vital component of every clinician's training. In supervision, the trainee should feel free to discuss weaknesses as well as strengths. The goals of supervision are to enhance clinical skill and knowledge, promote self-awareness/emotional competence, ensure the welfare of clients, and evaluate the suitability of the trainee to enter the profession.

Supervisor's Role and Responsibilities

- Abide by ethical guidelines, as outlined by the American Psychological Association and statutes of the State of West Virginia, as well as the policies and procedures of the CCPPS.
- Establish parameters of supervisory role (e.g., style, issues covered, etc.).
- Negotiate appropriate training goals with trainee.
- Foster meeting training goals.
- Monitor trainee's clinical cases.
- Monitor the trainee's record keeping in a timely manner (progress notes, intake reports, case management, etc.).
- Facilitate trainee's ability to conceptualize cases and develop treatment plans.
- Serve as consultant in crisis/emergency situations.
- Enhance trainee's self-awareness.
- Provide ongoing feedback on trainee's clinical skills, style, dynamics, etc., in a manner that is facilitative and constructive.
- Provide early feedback to the supervisee and the Assistant Director for Training in the case of concern about the trainee's progress, professionalism, or competence.
- Complete scheduled evaluations of the trainee and process the evaluations within supervision.
- Process, within supervision, trainee's written evaluation of supervisor.
- Serve as a professional role model for trainee.
- Demonstrate respect for trainees, acknowledging diversity in values, culture, and experience.
- Take primary responsibility for the supervisory relationship and, when there are difficulties, take responsibility to address or resolve those difficulties either directly or through consultation.
- Assist the supervisee in balancing agency demands.
- Attend to supervisee's administrative needs in a manner that does not compromise clinical supervision goals.
- Facilitate the professional growth of the supervisee by attending to professional issues, career issues, and transition issues concerning development.
- When asked by trainee to serve as a reference, provide honest, straightforward information.

Supervisee's Responsibilities

- Abide by all ethical guidelines, as outlined by the American Psychological Association and statutes of the State.
- Negotiate appropriate training goals with the supervisor.
- Inform each client of trainee status and name of supervisor.
- Keep supervisor informed of all cases.
- Keep timely records and make them available to the supervisor.
- Prepare for supervision by providing recordings of sessions, records needing to be reviewed, and questions or concerns about case management.
- Remain open and responsive to feedback and supervisory suggestions. Implement supervisor directives, if any.
- Process, within supervision, supervisor's written evaluations of the trainee's work.
- Complete scheduled evaluations of the supervisor (if any requested) and process them within supervision.
- Participate actively in supervision, and take increasing responsibility for the working relationship as the year proceeds.
- Demonstrate respect for clients, the supervisor, and other staff members, acknowledging diversity in values, culture, and experience.
- Inform supervisors and practicum coordinator (for trainees) and assistant director for training of any absences related to training obligations, clients, supervision, or administrative duties.

Trainee must seek immediate consultation from a supervisor (or another licensed staff member) if any of the following should occur:

- Mental health emergencies requiring immediate action.
- High risk situations, i.e. cases in which clients evidence suicidal thoughts, gestures, or attempts or a significant history of attempts; cases in which clients present with a history of, propensity for, or threats of violence; cases where clients appear to be significantly decompensating emotionally, cognitively or physically.
- Departures from standards of practice or exceptions to general rules, standards, policies, or practices.
- Suspected or known ethical errors, e.g. breach of confidentiality.
- Allegations of unethical behavior by clients, colleagues, client's friends, family, or others
- Threats of a complaint or lawsuit; any other pending litigations.
- Legal issues, such as possible reporting obligations related to suspected abuse of a child or vulnerable adult, or ethical violations by other professionals.

Trainees should notify the supervisor of the following issues at their earliest convenience, and no later than the next supervision session:

- **Contact from a client's family members, academic personnel, or others requesting information about a client**
- Unexpected terminations or no-shows with therapist or psychiatric providers
- Disputes/conflicts with clients or impasses in the therapy process
- Suspected or known clinical errors and related countertransference issues
- Contact with clients outside the context of treatment

- Any indirect attempts at contact from the client, e.g. from social media sources

Confidentiality

The nature of our training site means that some aspects of supervision sessions will not be confidential. For instance, the supervisor may discuss a client (and clinical information gathered via supervision with other clinicians attending to the case) or may discuss the supervisee's work and progress with other staff members as needed for training and evaluation purposes. In addition, supervision of a practicum student by a doctoral intern may be recorded and discussed in the intern's supervision meeting for the purpose of the intern's supervision skills development. However, the supervisor will keep confidential any personal material that is not relevant to those purposes. The confidentiality of clients is also of paramount importance. Any notes, recordings, or other client information must be treated as carefully and as sensitively as possible and should only be discussed in an appropriate confidential context and not outside the counseling center.

Multiple Role Relationships

The supervisor will avoid any dual or multiple role relationships with the supervisee, which could reasonably be expected to lead to exploitation or loss of objectivity.

Evaluation Procedures

Supervisors are responsible for providing ongoing feedback to the trainee regarding progress, including strengths and areas in need of improvement. In addition to ongoing feedback, trainees are provided written evaluations of their clinical work regularly. These evaluations are discussed with the trainee and are forwarded to the practicum coordinator or assistant director for training to become part of the trainees' record. Evaluations will also be provided to the trainees' home program.

Policy for Dealing with Trainee Competency Problems/Deficiencies

In the event there are concerns about the trainee's progress, ethics, professionalism or competence, the supervisor will consult with the assistant director for training who will follow the appropriate due process procedures. Interns are asked to refer to the appropriate section in the intern manual for more information. Practicum counselors are referred to the due process policy for trainees.

Complaint Procedures and Due Process

Ideally, any disagreement between supervisor and trainee can be resolved between them. In the event of a disagreement that is not resolvable at this level, Supervisors and Interns/Practicum Counselors are asked to refer to relevant procedures in their respective Training Manual and to consult with the assistant director for training or practicum coordinator.

Terms of the Contract

This contract serves as verification and a description of the clinical supervision provided by _____, as the

Primary Supervisor for _____ hour(s) per week

Secondary Supervisor _____ hour(s) per week

(check one)

for _____, Supervisee Name

This contract is effective for _____ (start date) to _____ (finish date).

We have discussed the expectations above and agree to perform the duties described and operate within the outlined parameters.

Supervisee Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Supervision Disclosure Form

West Virginia University
 Carruth Center for Psychological and Psychiatric Services
 Second Floor, Health and Education Building
 P.O. Box 6422, Morgantown, WV 26506
 304-293-4431

In addition to providing psychological and psychiatric services, CCCPPS serves as a training clinic. This means that one of our functions is to provide clinical experience for graduate students, doctoral interns, post-doctoral fellows, and other clinicians working to become fully-licensed psychologists, counselors, or social workers or to obtain additional credentials.

My name is _____, and I am under supervision at the Center.

I am a _____, which means I am training to be a _____.

Title of clinician under supervision *Professional title*

By law, I am being supervised by licensed psychologists, counselors or social workers. The name (s) of my supervisor (s) is (are) _____ / _____. My supervisor(s) will be directly responsible for overseeing the treatment you receive – I am practicing under his or her license. You have the right to meet with my supervisor if you wish. My supervisor(s) and I may be reached at the phone number above.

We will discuss confidentiality and its limitations today as outlined in our privacy policy. Both my supervisor and I are bound by confidentiality laws as specified in our privacy policy.

Because it is important for my supervisor to provide me with feedback regarding my performance as your therapist, notes from our sessions will be shared with them. I also record sessions using video or audio recording devices. Session recordings are for supervisory and training purposes only and are kept on a secure server with access limited only to Carruth clinical staff. Any information that you reveal, whether oral or written, will not be discussed or shared with anyone outside Carruth clinical staff without your prior written permission. The recordings are erased promptly after my supervisor provides me with feedback or by the end of the semester.

If you have any questions or concerns about these policies, please feel free to let me know today. You can also bring up your concerns at any time in the future.

Your signature below indicates your agreement to have your sessions recorded under the above conditions as well as agreement that you understand the statements above.

 Name of Client (Please print)

 Signature of Client and Date

 Clinician Signature

 Date

 Signature of Supervisor

 Date

 Signature of Supervisor

 Date

Clinical Experience Questionnaire

1. With what client populations, diagnosis, or issues are you currently comfortable (i.e. have had a significant amount of didactic and clinical experience)?

2. Are there particular client populations, diagnosis, or issues you would like to obtain clinical experience with during this year? If so, please describe.

3. Please list any client populations, diagnosis, or issues that you would prefer to not have assigned to you at least for this semester.

4. Please share any additional information that you want to have considered regarding assignment of client to you, e.g., whether you want to be assigned career clients, couples ...)

Your name:

Date:

Learning Objectives For Trainees

Semester:

Year:

Supervisee: _____ Supervisor: _____

1.

2.

3.

4.

5.

Strengths:

Growth Areas:

Record of Supervisory Sessions

Client Initials: _____ Demographics: _____

Presenting Concerns and Goals for Treatment:

Supervision Disclosure in File? _____

	Session # & Type	Session # & Type	Session # & Type
Attendance			
<i>If No Show, is there documentation?</i>			
Safety Concerns			
Focus of Session			
Interventions			
Diagnosis <i>Principal by end of 1st PC Session?</i>			
Plan			
Miscellaneous			
Supervisors Feedback			

Supervision Preference Form

This form is to allow you to indicate your preferences for clinical supervisors. Please understand that, although we will do our best to accommodate your preferences, there are many variables to factor into which supervisors are matched with which supervisees (e.g., supervisor availability, competing preferences of other trainees). Please also be aware that supervision assignments will change at the end of the semester, so if you do not get to work with a preferred supervisor during the first semester, it is possible that you may work with that supervisor the following semester.

In very rare instances there may be a supervisor whom you strongly feel would be an incompatible match with you (e.g., you have a pre-existing relationship with the supervisor that would constitute an unhealthy multiple relationship). If you feel that a supervisor is in that category, and that you therefore should not work with that supervisor, please approach the Training Director to discuss your concerns of being matched with that supervisor.

Please rank the following available supervisors with “1” being your most preferred supervisor.

_____ T. Anne Hawkins

_____ Matthew Kellar

_____ Christine Simpson

_____ Narayan Gold

_____ Michelle Cardi

_____ Yaping Anderson

INTERN STAFF RELATIONS

Training Staff Responsibilities

1. *Issues of Professionalism*

Trainers (supervisors and all staff involved in providing training) will demonstrate the same respect for interns/trainees that they grant other colleagues.

2. *Individual Differences*

Trainers will respect individual differences among interns/trainees, particularly regarding prior experience/training and articulation of current training needs.

3. *Issues of Training*

- a. Trainers involved in providing training will provide models for ethical, professional behavior.
- b. Training staff will provide models for honoring organizational parameters.
- c. Within the context of their own interests, staff will be available for consultation, supervision, co-therapy experiences and direct teaching.
- d. Trainers will provide clear expectations of interns, explicit guidelines for involvement in training activities and vehicles for tapping and utilizing interns' ideas, perspectives, experiences, and energy.
- e. Trainers will provide professionally appropriate feedback to the interns regarding their performance during their training experiences. Because training is a process that entails both teaching and evaluations, it is essential for trainers to provide continuous feedback. With ongoing feedback, final/formal evaluations are neither a surprise nor a hindrance, but a cumulative experience.
- f. Trainers will consult with other members of the professional staff who have contact with their supervisee to develop a broad picture of the interns' competencies and areas where further attention are needed.
- g. Trainers will discuss with the Training Director their questions and problems that arise in the supervision.
- h. Supervisors will attend regular Supervisor Meetings to discuss the experience, organizational problems and to develop effective interventions to resolve difficulties within the training program.
- i. When trainers encounter problems with a predoctoral intern, trainers will follow the due process procedures that have been developed.
- j. Supervisors must document their supervision and maintain a file for their supervisee that consists of supervision agreement, supervision session notes and a copy of all evaluations.
- k. Trainers, on a regular basis, will evaluate the Internship Training Program. Feedback for the training program is a necessity, which will allow it to provide more effective experiences for the present and future interns.

Trainee / Staff Relationships

CCPPS' training mission is to promote the personal and professional development of all trainees. This process of development is fostered by respect for each trainee as an individual and an atmosphere of openness and honesty in communication. Our goal is to create an environment conducive to learning where trainees feel safe and respected.

The training environment can be an emotionally charged atmosphere that provides a catalyst for trainee or staff member to experience a variety of feelings, including sexual attraction, towards each other. Interns are at an early stage of professional collegial relationships that will go through many evolutionary stages. Each trainer, however, provides a model of ethical and professional behavior and it is incumbent on the training staff to honor the boundaries of the professional relationships that are formed with the trainees. There is no such thing as a consensual sexual relationship between trainee and staff due to the power imbalance and authority the staff member has over the trainee. Thus, sexual relationships between trainees and staff are in violation of agency policy.

There is a need to distinguish sexual attraction from sexual acting out. Supervisors/trainers who feel a sense of attraction to a trainee that may be interfering with that staff member's sense of objectivity and ability to provide service should consult with their supervisor, the Training Director, or the Director.

Trainers are encouraged to discuss any feelings they have about the trainees. This will provide staff an opportunity to assess their current needs and the implications of any possible courses of action. Trainees who find themselves attracted to staff are encouraged to talk about their feelings with colleagues, supervisors, or the Training Director to assess their current needs and possible future behaviors.

If a trainer's behavior crosses the boundaries of a professional relationship with a trainee, an administrative review of the situation will be conducted. The trainer may be subject to disciplinary action by the Director according to the relevant West Virginia University's policies and procedures.

Trainers are advised to be familiar with CCPPS policies regarding multiple relationships (CCPPS Manual page 16).

Supervision

Interns/trainees are offered the opportunity to indicate their preferences for supervisors from the eligible licensed staff members at CCPPS. An effort is made to match supervisors with trainee preferences. Supervisors are generally assigned for 6 month-long experience.

Supervision is meant to provide a supportive and challenging environment in which interns can share their goals, strengths, and growth areas. Our goals in providing these meetings is to help each trainee make the most out of their training experience, to facilitate personal and professional development, and ensure client welfare.

Supervisors meet on a weekly basis with their supervisees. Supervisors discuss the supervision contract with their supervisees thoroughly and clarify any questions supervisee may have about the contract. Supervisors meet with each other quarterly to discuss and review trainees' progress and the training program. These meetings serve a purpose of also allowing supervisors the ability to share their own supervisory work and style with each other. There are three important factors to keep in mind about supervision:

1. Supervision is not therapy and as such is not a "confidential" relationship.
2. Supervisors respect what trainees disclose in supervision and share information judiciously.
3. If a supervisor feels the need to discuss sensitive information that a trainee has disclosed during supervision, the supervisor will inform the trainee and discuss the limits of the disclosure.

COVID-19 ADDENDUM

Given the unprecedented challenges of providing doctoral internship training while in the global COVID-19 pandemic, several changes are being made to the internship program with additional adaptations likely necessary over the course of the year. Much of this will hinge on CDC, state, and university guidelines.

While this is a challenging time to be an intern, it is also an opportunity to practice flexibility and to learn things you never expected.

Additional information can be found in the CCPPS Outline of Phased Staffing & Clinical Plan. We request that interns arrive to the area 5 days prior to their physical start date per WVU quarantine protocols. Any out-of-state travel will also require a subsequent 5-day quarantine. WVU will be testing all employees for COVID-19 prior to starting in-person work. Significant changes to the internship training program are delineated in the categories below.

Telehealth Services: Most services will be provided via telehealth for the foreseeable future. At the beginning of the internship year, interns will receive specific training on provision of services within a telehealth environment. Our hope is to have interns able to provide telehealth services out of their Carruth Center offices to allow ease of access to senior staff for consultation and support. Pending Center clinical policy and certainly in the event of a broad reversion to work from home services, we will work with administration to secure university laptops to prevent disruption in intern service delivery and training. It will be essential for interns to have a confidential and secure home environment from which to provide services.

In-Person Services: For the duration of the pandemic, in-person service delivery will be rare and typically in the event of utilization of the Crisis Clinic. Such services will be delivered with appropriate physical distancing and utilization of masks. Interns are unlikely provide such crisis services independently until after a period of shadowing and co-facilitation. This will depend on developmental level of the trainee and supervisory discretion. For any in-person services, strict sanitation protocols will need to be followed by staff and interns. If there is an improvement in the global health crisis, any return to in-person services more broadly will be done in a gradual manner.

Group Therapy Changes: CCPPS group offerings will take place via telehealth with the suspension of interpersonal process groups or trauma-focused group offerings. Primary group offerings will be skills groups, psychoeducational groups, and support groups. Our hope is that we will be able to broaden our group offerings later in the year should we be able to resume in-person group treatment.

Triage Changes: CCPPS will be suspending typical drop in hours for the remainder of 2020. We will instead be offering a larger number of scheduled triage appointments. We will maintain an in-person Crisis Clinic for higher-risk students who need an in-person intervention.

LD/ADHD Assessment Changes: Interns will continue to administer learning disability/ADHD assessments throughout the internship year. However, it is likely that an abbreviated assessment

battery will be adopted. Personal protective equipment (PPE), physical distancing, and sanitation protocols will be in place.

Providing Supervision Changes: Given the increased challenge of providing supervision in a teleconferencing environment, supervision provision may be adapted depending on the experience and background a given intern has with telehealth and supervision. Some possible adaptations might include a period of co-supervision of a trainee with a senior staff member, participation as a co-leader of group supervision, or a focus on didactics for fall semester with supervision participation being delayed until spring semester.

Consultation & Outreach Changes: Outreach will be provided in primarily in a teleconferencing environment, although there plans for outdoor outreach opportunities with appropriate physical distancing. Depending on clinical demand experienced by the center, interns may have the option for additional outreach opportunities (which count as direct hours) in place of any reduction of individual counseling opportunity.

Individual Supervision Changes: Individual supervision is likely to be received primarily in a teleconferencing environment. In some cases, it may be feasible for supervision to take the form of discussion outdoors (only in cases where adequate privacy can be ensured) or in larger rooms with appropriate physical distancing.

Seminar Changes: Seminars are likely to be provided primarily in a teleconferencing environment. In some cases, it may be feasible for seminars to take the form of discussion outdoors or in larger rooms (e.g. yoga room) with appropriate physical distancing.

Staff Meetings/Case Conference/Committee Work Changes: Staff meetings, case conference, and committees are likely to be conducted primarily in a teleconferencing environment.

After-Hours/On-Call Changes: After-hours phone coverage will remain largely unchanged. In-person interventions are rarely needed but, if necessary, on-site services will be conducted with PPE and appropriate physical distancing. As is always the case, a supervisor will arrive with you for any in-person emergencies.

ETHICAL PRINCIPLES OF PSYCHOLOGISTS AND CODE OF CONDUCT