Policies and Procedures for Training

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Application & Selection Procedures

Section A1
Policy No. A1.01  Entrance Criteria for Psychology Trainees:
In order for an OU clinical psychology graduate student to be considered eligible for a trainee position at Counseling and Psychological Services (CPS), the student must meet certain entrance criteria. The training director (TD) will communicate these expectations to potential candidates by June 1 of the summer semester prior to the beginning of their training experience.

Procedures:
• Approval of the Director of Clinical Training (DCT) from the Ohio University Psychology Department.

• Feedback from the DCT to the Training Director at CPS regarding readiness, strengths and weaknesses, and growth needs of the trainee.

• Satisfactory completion of the first two years of required coursework within the Psychology Department’s curriculum, including practicum requirements.

• Ability to provide fall semester availability to CPS by July 1 (for room assignment purposes).

• Ability to attend all Graduate Professional Seminars (GPS), training seminars, and summer orientations.

• Demonstrate oral English proficiency. See Policy No. 1.08.

Policy No. A1.02  Entrance Criteria for Counseling Practicum Trainees:
In order for an OU counselor education graduate student to be considered eligible for a counseling trainee position at CPS, the student must meet certain entrance criteria.

Procedures:
• Approval to apply from the Internship Coordinator from the Ohio University Counselor Education Program.

• Submission of a completed Counseling Intern Application Packet.

• Satisfactory completion of the required coursework before beginning CPS placement, as listed in the Application Packet.

• Satisfactory completion of an interview with the Training Director, the staff member serving as liaison to the counseling program, and other designated members of the interview team.

• Ability to provide fall semester availability to CPS by July 1 (for room assignment purposes).

• Ability to attend all Graduate Professional Seminars (GPS), training seminars, and summer orientations.
• Demonstrate oral English proficiency. See Policy No. 1.08.

Policy No. A1.03 Entrance Criteria for Counseling Master’s Interns:
In order for an OU counselor education graduate student to be considered eligible for a counseling intern position at CPS, the student must meet certain entrance criteria.

Procedures:
• Approval to apply from the Internship Coordinator from the Ohio University Counselor Education Program.

• Satisfactory completion of the required coursework before beginning CPS placement, as listed in the Application Packet.

• Completion of a practicum at CPS, or submission of a completed Counseling Intern Application Packet and satisfactory completion of an interview with the Training Director together with the staff member serving as liaison to the counseling program.

• Ability to provide fall semester availability to CPS by July 1 (for room assignment purposes).

• Ability to attend all Graduate Professional Seminars (GPS), training seminars, and summer orientations.

• Demonstrate oral English proficiency. See Policy No. 1.08.

Policy No. A1.04 Entrance Criteria for Social Work interns:
In order for a social work graduate student to be considered eligible for a social work intern position at CPS, the student must meet certain entrance criteria.

Procedures:
• Be a registered student, in good standing, at the second year (at the time of beginning internship) in a masters level program in social work.

• Submission of a completed Social Work Intern Application Packet.

• Satisfactory completion of an interview with the Training Director and designated members of the Training Committee.

• Feedback from the DCT to the Training Director at CPS regarding readiness, strengths and weaknesses, and growth needs of the intern.

• Ability to provide fall semester availability to CPS by July 1 (for room assignment purposes).
Policy No. A1.05 Entrance Criteria for Clinical Counseling Graduate Assistants (GA):
In order for a Clinical Psychology or Counselor Education graduate student to be considered eligible for a Clinical Counseling Graduate Assistantship, the student must meet certain entrance criteria.

Procedures:
• Be a registered student, in good standing, at the 3rd year or above (at the time of beginning the GAship) in Clinical Psychology OR first year or above in the Counselor Education doctoral program. If in the Counselor Education doctoral program, the student must have earned a master’s in counseling.
• Submit a cover letter, a CV/resume, and 2 letters of recommendation from previous clinical supervisors.
• Complete an interview with the training director and designated members of the training committee.
• Be able to commit to a 20-hour per week assistantship and provide fall semester schedule by July 1 (for room assignment purposes).
• Demonstrate oral English proficiency. See Policy No. A1.08
• It is assumed that Graduate Assistantships will be renewed by CPS unless there is a noted academic or performance deficiency or other identified, unresolvable conflict.
• Eligibility for renewal of the Graduate Assistantship will be consistent with the academic program’s criteria for eligibility for a tuition waiver and GAship appointment.

Policy No. A1.06 Entrance Criteria for Doctoral Psychology Interns:
In order for a psychology graduate student to be considered eligible for a doctoral psychology intern position at CPS, the student must meet certain entrance criteria.

Procedures:
• Be a registered student, in good standing, at or beyond the third year in an APA accredited doctoral level program in clinical, counseling, or professional psychology.
• Have successfully completed all preliminary or qualifying exams required by the home program before application date in November. Note: candidates indicating that they will not have completed these exams before the date of acceptance of the internship offer will be disqualified from consideration.

• Have successfully proposed dissertation by start of internship.

• Have completed all doctoral expectations from the home program by July 1 of the entering internship year, with the exception of completion of the dissertation (note: Some programs now require that the dissertation be completed as well. Check with your Clinical Training Director if in doubt.).

• Have completed supervised practicum and clinical placement experience to a minimum of 1000 total practicum hours (including on-site hours, individual, group, supervision hours, etc.), 400 of which must be direct service.

• Provide three letters of reference, at least two of which must be from recent clinical supervisors.

• Provide a signed Certificate of Readiness from the home program's Clinical Training Director, indicating intern candidate's readiness to enroll in the internship, and attesting to the intern candidate's match with the above mentioned criteria.

• Be willing and able to commit to a full-time, twelve month internship.

• Be willing to commit to living within 30 minutes of the Ohio University campus.

• Demonstrate substantive consistency between candidate's interests and the goals and philosophy of the Ohio University CPS doctoral psychology internship.

Policy No. A1.07   Doctoral Psychology Internship Selection:
As a member of APPIC and the National Matching Service, CPS abides by the policies and procedures set forth by these organizations.

Procedures:
• CPS follows APPIC match policies for the internship selection process; these guidelines are available at http://www.appic.org

• CPS agrees to abide by the APPIC policy that no person at this training facility will solicit, accept or use any ranking-related information from any intern applicant

• All internship applications are considered to be confidential information and are kept in a locked file cabinet/secure computer file for a period of seven years
CPS follows the anti-discrimination policies of Ohio University and does not discriminate on the basis of race, color, age, religion, national origin, sexual orientation, gender identity, sex, marital status, disability, or status as a U.S. veteran.

Policy No. A1.08  SPEAK Test Requirements:
Per Ohio University policy and state law, all non-native English speaking students who have been offered a graduate teaching assistantship must be certified as proficient in oral English. This includes, but is not limited to, graduate students who have responsibility for laboratory in addition to classroom instruction.

Procedures:
• Ohio University students seeking traineeship or GA placements at CPS must demonstrate oral English proficiency.

• Students must submit recent iBT (internet based TOEFL) or SPEAK test scores with their application materials.
  o Scores must be no more than 1 year old.
  o An iBT score between 24-30 on the speaking portion (overall score of at least 80) OR a minimum SPEAK test score of 230 will be required to be considered for a position at CPS.

• Students interested in applying to CPS must inform the TD if they would need to take the SPEAK test prior to the end of Fall semester of the academic year in which they are applying in order to be registered for the test with the Linguistics Department.
Evaluation/Exit Criteria

Section A2
Policy No. A2.01 Doctoral Psychology Internship Exit Criteria:
In order to be granted a Certificate of Completion of the Ohio University doctoral psychology internship, doctoral interns must complete their requirements with satisfactory evaluations. Doctoral Psychology Interns will be formally evaluated at the midyear and at the completion of their internship year. Copies of these evaluations will be sent to their academic departments. Doctoral Psychology Interns will also receive and complete evaluations in their seminars and in their apprenticeships. Ohio University Counseling and Psychological Services does not complete additional academic program contracts or evaluations for doctoral psychology interns. Therefore, if an intern is enrolled in an academic training program that requires additional training contracts and/or evaluations, these will not be completed by the Ohio University training staff.

Procedures:
• Interns must attend a minimum of 80% of individual supervision meetings.

• Interns must attend a minimum of 80% of group supervision meetings.

• Interns must complete 80% of their required outreach/preventive/psychoeducational programs with a satisfactory evaluation.

• 25% of total on-site hours must be spent in direct clinical service. For a 2000 hour internship, this means that interns must complete 500 hours of direct service (includes individual and group client hrs, emergency/drop-in hrs, and on-call crisis interventions).

• Interns are required to co-lead a total of 3 groups over the course of the academic year, one of which must be an interpersonal process group.

• Interns must satisfactorily provide supervision to a minimum of 1 trainee during fall and spring semesters.

• Interns must complete 1 apprenticeship rotation.

• Interns must satisfactorily complete all described responsibilities of the full-time, twelve-month internship, comprised of 2000 hours (with allowable holidays, vacation days, and sick days off). Generally, interns are expected to achieve an average score of “4” with no score lower than a “3” on items that are asterisked on their midyear evaluation. By the end of internship, interns should achieve an average score of “5” with no score lower than a “4” on items that are asterisked on their final evaluation.

• In the event that there are identified concerns, problematic behaviors, or unsatisfactory achievement, please see Section A8, Grievance and Due Process Guidelines, for information.
Policy No. A2.01   Clinical Psychology Traineeship Exit Criteria:
In order to successfully complete a traineeship at Ohio University Counseling and Psychological Services, trainees must receive satisfactory evaluations on all of their requirements.

Procedures:
• Clinical Psychology trainees will be evaluated at the midterm and at the completion of their traineeship by all relevant supervisors utilizing the appropriate form from the academic department.
• A copy of the final evaluation(s) will be sent to the academic department.
• CPS supervisors will meet with faculty representatives from the academic department at the midyear and the end of the year to discuss issues of progress and evaluation at the traineeship.
• Trainees must attend a minimum of 80% of their individual supervision sessions.
• Trainees must attend a minimum of 80% of the meetings of the Graduate Professional Seminar.
• Trainees must complete a minimum of 15 hours per week on site at CPS for two semesters.
• In the event that there are identified concerns, problematic behaviors, or unsatisfactory achievement, please see Section A8, Grievance and Due Process Guidelines, for information on how this will be addressed by staff and the process for disputing or ‘grieving’ any action or decision made with regards to addressing unsatisfactory or problematic behavior.

Policy No. A2.03   Master’s Level Counselor Education Practicum Exit Criteria:
In order to successfully complete a master’s level practicum in Counselor Education at Ohio University Counseling and Psychological Services, trainees must receive a rating of 3 or ‘meets expectations’ on their evaluation.
Procedures:

- Trainees will be evaluated at the end of their practicum by all relevant supervisors utilizing the appropriate form from the academic department.

- A copy of the final evaluation(s) will be sent to the academic department.

- CPS supervisors may schedule a meeting with the faculty representatives from the academic department at the end of the practicum experience to discuss progress, evaluations, and plan for the internship experience.

- Trainees must attend a minimum of 80% of their individual supervision sessions.
- Trainees must attend a minimum of 80% of the meetings of the Graduate Professional Seminar.

- Trainees must complete a minimum of 10 hours per week on site at CPS during the summer semester for a minimum total of 100 on-site hours.

- Trainees must complete 40 hours of direct service.

- Unless there is a noted academic or performance deficiency or other unresolvable conflict, it is expected that practicum students will continue at CPS for their internship.

- In the event that there are identified concerns, problematic behaviors, or unsatisfactory achievement, please see Section A8, Grievance and Due Process Guidelines, for information on how this will be addressed by staff and the process for disputing or ‘grieving’ any action or decision made with regards to addressing unsatisfactory or problematic behavior.

Policy No. A2.04 Master’s Level Counselor Education Internship Exit Criteria:
In order to successfully complete a master’s level internship in Counselor Education at Ohio University Counseling and Psychological Services, trainees must receive a rating of 3 or ‘meets expectations’ on their evaluation.

Procedures:

- Trainees will be evaluated at the midterm and at the end of their internship by all relevant supervisors utilizing the appropriate form from the academic department.

- A copy of the final evaluation(s) will be sent to the academic department.
CPS supervisors will schedule a meeting with the faculty representatives from the academic department at the midterm and at the end of the practicum experience to discuss progress and evaluations.

Trainees must attend a minimum of 80% of their individual supervision sessions.

Trainees must attend a minimum of 80% of the meetings of the Graduate Professional Seminar.

Trainees must complete a minimum of 20 hours per week for Fall and Spring Semester on site at CPS for a total of 600 on-site hours.

Trainees must complete 240 hours of direct service (defined by individual, emergency/drop-in, couples, or group therapy).

In the event that there are identified concerns, problematic behaviors, or unsatisfactory achievement, please see Section A8, Grievance and Due Process Guidelines, for information on how this will be addressed by staff and the process for disputing or ‘grieving’ any action or decision made with regards to addressing unsatisfactory or problematic behavior.

Policy No. A2.05  Doctoral Level Counselor Education Internship Exit Criteria:
In order to successfully complete a doctoral level internship in Counselor Education at Ohio University Counseling and Psychological Services, trainees must receive a rating of 3 or ‘meets expectations’ on their evaluation.

Procedures:
• Trainees will be evaluated at the midterm and at the end of their internship by all relevant supervisors utilizing the appropriate form from the academic department.

• A copy of the final evaluation(s) will be sent to the academic department.

• CPS supervisors will schedule a meeting with the faculty representatives from the academic department at the midterm and at the end of the internship experience to discuss progress and evaluations.

• Trainees must attend a minimum of 80% of their individual supervision sessions.
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• Trainees must attend a minimum of 80% of the meetings of the Graduate Professional Seminar.

• Trainees must complete a minimum of 15 hours per week on site at CPS.

• In the event that there are identified concerns, problematic behaviors, or unsatisfactory achievement, please see Section A8, Grievance and Due Process Guidelines, for information on how this will be addressed by staff and the process for disputing or ‘grieving’ any action or decision made with regards to addressing unsatisfactory or problematic behavior.

Policy No. A2.06 Master’s Level Social Work Internship Exit Criteria:  
In order to successfully complete a doctoral level internship in Counselor Education at Ohio University Counseling and Psychological Services, trainees must receive a rating of satisfactory on the evaluation of their learning contract goals.

Procedures:
• Trainees will be evaluated at the midterm and at the end of their internship by all relevant supervisors utilizing the appropriate form from the academic department.

• A copy of the final evaluation(s) will be sent to the academic department.

• CPS supervisors will schedule a meeting with the faculty representatives from the academic department at the midterm and at the end of the internship experience to discuss progress and evaluations.

• Trainees must attend a minimum of 80% of their individual supervision sessions.
• Trainees must attend a minimum of 80% of the meetings of the Graduate Professional Seminar.

• Trainees must complete a minimum of 15 hours per week on site at CPS.

• In the event that there are identified concerns, problematic behaviors, or unsatisfactory achievement, please see Section A8, Grievance and Due Process Guidelines, for information on how this will be addressed by staff and the process for disputing or ‘grieving’ any action or decision made with regards to addressing unsatisfactory or problematic behavior.

Policy No. A2.07 Clinical Counselor Graduate Assistant Exit Criteria
It is assumed that Graduate Assistantships will be renewed by CPS unless there is a noted academic or performance deficiency or an identified, unresolvable conflict.
Procedures:

• GA’s will be evaluated at the midterm and at the end of the academic year utilizing the appropriate CPS evaluation form.

• GA’s must receive an average score of 4, with nothing lower than a 3 on their evaluation in order for the GA to be renewed.

• Copies of these evaluations will be kept in the GA’s personnel file at CPS and will not be communicated to their academic department without the GA’s consent, except in extraordinary circumstances involving a significant breach of ethics or violations of the ORC/other relevant laws.

• In the event that there are identified concerns, problematic behaviors, or unsatisfactory achievement, please see Section A8, Grievance and Due Process Guidelines, for information on how this will be addressed by staff and the process for disputing or ‘grieving’ any action or decision made with regards to addressing unsatisfactory or problematic behavior.
Ethics

Section A3
Policy No. A3.01 Ethical and Professional Guidelines/Standards:
All GA’s, interns, and trainees will be provided with copies of the Ohio Revised Code and their respective profession’s ethical guidelines and standards.

Procedures:
• GA’s and Trainees in Clinical Psychology are expected to adhere to the Ohio Revised Code and ethical guidelines and standards outlined by the American Psychological Association.

• GA’s and Trainees in Counselor Education are expected to adhere to the Ohio Revised Code and ethical guidelines and standards outlined by the American Counseling Association.

• Trainees in Social Work are expected to adhere to the Ohio Revised Code and ethical guidelines and standards outlines by the National Association of Social Workers Code of Ethics.

• Doctoral psychology interns are expected to adhere to the Ohio Revised Code and ethical guidelines and standards outlined by the American Psychological Association.

Policy No. A3.02 Supervision Disclosure:
Any individual receiving supervision for their clinical work must review and complete the Supervisory Disclosure Form with all clients.

Procedures:
• This form should be completed during the first contact with the client – whether a Drop-In/Emergency, IC&R, or First Session appointment.

• A clinician-in-training may have two supervisors listed on the form if the direct supervisor is a doctoral psychology intern or unlicensed senior staff member.

• Clinicians-in-training must provide a copy of this form to all clients.

Policy No. A3.03 Trainee Self-Disclosure:
Opportunities for personal exploration and reflection occur throughout the year, given our training program’s goal to prepare effective psychotherapists with a consolidated professional identity.

Procedures:
• When appropriate, clinicians-in-training are encouraged – but not required – to explore historical influences and personal information which may affect subsequent clinical practice.

• Clinician-in-training self-disclosure in supervision is for the purpose of providing the best possible services to clients and fostering the trainee’s development as a therapist. As such, these behaviors are consistent with the responsible and ethical practice of psychology.
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- The protection from being required to share information is in accordance with the American Psychological Association’s 2002 Ethical Standard 7.04 (Student Disclosure of Personal Information) as contained in the Revised Ethical Principles of Psychologists and Code of Conduct (APA, 2002).

Policy No. A3.04 Sexual Harassment:
Ohio University Policies and Procedures forbid the sexual harassment of students, staff, or faculty. No member of the university community may sexually harass any other member of the community. Sexual harassment is a form of sex discrimination under Title VII of the Civil Rights Act of 1964 and, thereby, illegal under the law, as well as a violation of OU Policies. (See Ohio University Policy and Procedure 03.004: Sexual Misconduct).

Procedures:
- Sexual harassment is defined as unwanted advances, requests for sexual favors, or other verbal or physical conduct of a sexual nature when:
  - Submission to such conduct is made either explicitly or implicitly a term or condition of employment or of a student’s status in a course, program, or activity.
  - Submission to or rejection of such conduct is used as the basis for decisions affecting the individual; or
  - Such conduct has the purpose or effect of unreasonably interfering with the individual’s work, performance, or educational experience; or creating an intimidating, hostile, or offensive environment for work or learning.

- All OU employees and students are responsible for compliance with this policy. All University supervisory personnel have an affirmative responsibility to discourage and eliminate conduct inconsistent with this policy.

- Complaints may be received and investigated only by employees who have been authorized by the institution. Authorization will be given only to those individuals who have completed training provided by staff of the Office of Institutional Equity.
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Accountability

Section A4
Policy No. A4.01  Compliance with Documentation Guidelines:
Clinicians-in-training and all professional staff/supervisors are expected to complete all necessary documentation for clinical and consultation appointments.

Procedures:
• Clinicians-in-training and senior staff must complete all documentation, including all case notes, in a timely manner consistent with the Clinical Documentation Guide.

• Supervisors are expected to read and sign off on all entries in a client’s file for their supervisee(s) according to the time frame outlined in the Clinical Documentation Guide.

• If the supervisee is a psychology trainee with a doctoral psychology intern supervisor, the intern will sign off on each case note, and then the licensed staff will sign and lock the note.

• When it is clear that therapy has ended, the supervisee must complete any closed therapy note or termination summary in a time frame consistent with the Clinical Documentation Guide and notify their supervisor that the file needs to be reviewed and the client needs to be removed from the active client list once the file review is completed.

• All clinicians-in-training sign their documentation on Line 1.

• All clinicians-in-training, are encouraged to complete their documentation and other responsibilities between 8am-5pm. Trainees, with the exception of doctoral psychology interns, may not be on CPS premises after 5pm unless there is a senior staff member present.

Policy No. A4.02  Computer Usage:
Clinicians-in-training are provided with offices furnished with computers equipped with Titanium and Internet. It is expected that trainees use these computers only for the purposes of clinical and other professional work.

Procedures:
• Clinicians-in-training are expected to adhere to all policies regarding responsible and ethical use of computers and other technology as explained in the general Policy and Procedures Manual for CPS.

• Clinicians-in-training should lock their computer any time when leaving their respective offices. They may also adjust the settings on the computer to automatically lock if the computer is not in use for a specified amount of time.

• Clinicians-in-training are strongly discouraged from responding to client emails outside of their work hours, including evenings and weekends and should discuss all after hours contacts with clients during supervision.
Clinicians-in-training should engage in responsible use of the Internet and social media while using a work computer. Clinicians-in-training are also strongly encouraged to engage in responsible use of social media outside of the office, including (but not limited to) considering privacy settings, monitoring one’s own online posts, and not accepting friend requests from clients.

Policy No. A4.02  Graduate Professional Seminar:
All trainees in Clinical Psychology, Counselor Education, and Social Work must attend the Graduate Professional Seminar (GPS) at CPS, as part of their agreement for the traineeship.

Procedures:
• This seminar meets weekly during the Academic Year and during the summer, as needed.

• As part of the seminar, trainees will be asked to complete assignments and make presentations based on their caseload both informally and formally.

Policy No. A4.03  On-Site Supervision for Unlicensed Staff, Doctoral Psychology Interns, and Psychology Trainees:
Any clinician-in-training, or unlicensed staff member should not be scheduled to see clients at CPS during times when a licensed senior staff member is not available (e.g., crisis Drop-In, running an evening group).

Procedures:
• If an exceptional situation occurs, senior staff should be made aware of the situation (e.g., call/inform front desk).

• A licensed senior staff member must remain at CPS until the client meeting the unlicensed clinician leaves.

Policy No. A4.04  Relevant Ohio University Policies:
All clinicians-in-training must understand and adhere to all relevant Ohio University policies.

Procedures:
• All clinicians-in-training are expected to follow the policies, procedures, and protocols outlined in the Division of Student Affairs Handbook found at http://www.ohio.edu/studentaffairs/loader.cfm?csModule=security/getfile&pageid=2203054.

• Clinicians-in-training who are students currently enrolled at Ohio University are expected to follow the Ohio University Student Handbook (http://www.ohio.edu/students/handbook/index.cfm) and Code of Conduct (http://www.ohio.edu/communitystandards/).
Policy No. A4.05  Seminar Books:
Many seminars for trainees and doctoral interns involve assigned readings. In some cases, textbooks have been purchased for seminars and trainees will be provided with these textbooks to use for the duration of the seminar.

Procedures:
• Trainees are expected to sign-in 1) when they receive the textbook and 2) when they return the textbook at the end of the seminar.

• Trainees are not permitted to highlight or mark these textbooks, as they are the property of Counseling and Psychological Services and will be used with future training cohorts. Should marking be found in a textbook, the trainee last assigned the textbook will be asked to purchase a replacement.

Policy No. A4.06  Titanium Schedules:
Clinicians-in-training and GA’s are expected to manage their schedules using Titanium software, including accounting for all of their direct and indirect service, supervision, seminar attendance, administrative time, etc. in order to fulfill their requirements for traineeship, GAship, or doctoral internship.

Procedures:
• GA’s are expected to work 20 hours per week. They are required to cover a 4-hour drop-in shift, provide 10-12 hours of individual therapy, and receive 2 hours of supervision.

• Trainees in Clinical Psychology do not have a specific total hour requirement through their academic department. CPS expects these trainees to work a minimum of 15 hours per week during the academic year (this includes approximately 7 hours of individual client contact, 2 hours of drop-in coverage once approved by their supervisor(s), 2 hours of supervision, 1.5 hours of GPS, and 2 hours of paperwork).

• Trainees in Counselor Education must fulfill the requirements for practicum and internship. For practicum, this includes 40 direct service hours and 100 total hours. For internship, this includes 240 direct service hours and 600 total hours (300 total hours per semester).

• Trainees in Social Work are required to work 16 hours per week during the Fall Semester, and 20 hours per week during the Spring Semester. Their weekly schedule includes 6-10 individual therapy client hours, 2 hours of drop-in coverage once approved by their supervisor(s), 4 hours of supervision, 2 hours of paperwork, and 2-4 hours of outreach/consultation.
• Doctoral psychology interns must fulfill the 2,000-hour requirement for internship, with 500 direct clinical hours. All completed hours must be documented in Titanium.

Policy No. A4.07 Tracking Hours:
The requirements for documenting practicum/internship hours differ among Clinical Psychology, Counselor Education, and Social Work programs.

Procedures:
• Trainees in Clinical Psychology must document their hours using Time to Track, which will assist in completion of applications for future doctoral internships. They are required to track their hours at CPS through Titanium, and may use such documentation to support their use of Time to Track. Trainees must submit their total hours to the Training Director at the mid-term and at the end of the training year (total of two submissions). The Training Director will sign a document indicating the total number of hours completed at the end of the traineeship.

• Trainees and interns in Counselor Education must document their hours and submit to their department. Trainees are required to track their hours at CPS through Titanium, and submit to the Training Director at the end of each semester: summer, fall, spring (total of three submissions). The Training Director will sign a document indicating the total number of hours completed at the end of the traineeship.

• Trainees and interns in Social Work must document their hours and submit to their department. Trainees are required to track their hours at CPS through Titanium, and submit to the Training Director at the mid-term and at the end of the academic year (total of two submissions). The Training Director will sign a document indicating the total number of hours completed at the end of the traineeship.

• Doctoral interns are responsible for documenting their hours on an Excel spreadsheet that is provided to them at the beginning of their internship. Hours can be totaled for report in the spreadsheet. A copy of the spreadsheet data needs to be submitted to the Training Director on a monthly basis. Interns will be given feedback about their hours every three months, minimum.

• Titanium can produce a report of clinical and total internship hours that can facilitate this documentation process.

• GA’s must use their specific academic department guidelines to track and document their hours.
Policy No. A4.08  Training Manuals:
Training manuals are provided to all clinicians-in-training at the beginning of their training at Counseling and Psychological Services.

Procedures:
• Training manuals typically include the respective training handbook, due process and grievance procedures, policies and procedures that are both general and specific to training, and clinical documentation guidelines.

• It is the clinician-in-training’s responsibility to read all information contained in these training manuals, and submit a signed Acknowledgment Form that indicates they understand and will adhere to the agency and training program’s policies and procedures.
Administrative Policies

Section A5
Policy No. A5.01 Definitions:
A trainee is defined in terms of the following positions:

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<th>Program of Study &amp; Training Level</th>
<th>Designation</th>
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<tbody>
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<td>Trainee</td>
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<tr>
<td>Master’s Counselor Education trainee completing an internship</td>
<td>Intern/trainee</td>
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<td>Doctoral Counselor Education Trainee completing an internship</td>
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<td>Doctoral Clinical Psychology/Doctoral Counselor Education Advanced level</td>
<td>Clinical Counseling GA</td>
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<tr>
<td>Doctoral psychology intern</td>
<td>Doctoral intern</td>
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- For the purposes of this document, all trainees, interns, doctoral trainees and doctoral interns will be referred to collectively as “clinicians-in-training” when applicable.

Policy No. A5.02 Dress Code:
Clinicians-in-training are expected to abide by the general dress code detailed in the CPS Policies and Procedures (Policy No. 2.05) manual whenever they are present at CPS during business hours. Therefore, this policy applies whether or not the clinician-in-training is seeing clients or in the computer lab writing notes, they should be presentable and adhere to the dress code at all times.

Policy No. A5.03 Moonlighting for Doctoral Interns:
Due to the intensity of the internship year, interns are discouraged from seeking or maintaining outside employment. However, if an intern chooses to work outside of CPS, there are certain requirements.

Procedures:
- Outside employment may not interfere with the intern’s ability to perform their required duties at CPS, and must not conflict with their regular work schedule (8am-5pm Monday through Friday, with regular after hours responsibilities to include emergency phone coverage and attendance at campus events).
• Interns are expected to make significant progress towards the completion of their dissertation during their training year.

• If a doctoral intern decides to seek outside employment, they must first seek the approval of the training director prior to accepting a position and disclose any outside employment as soon as possible.

• Other clinicians in training are exempt from this policy.

Policy No. A5.04  Trainees/Employees Receiving Services at CPS:
In an effort to protect client confidentiality and avoid ethical dilemmas, guidelines exist regarding the graduate students in training at CPS receiving concurrent counseling services.

Procedures:
• Students who have been accepted for internship, practicum, GA, or contract work will not be eligible for clinical services at CPS during the tenure of their training or employment at CPS.

• If the student chooses to seek services at CPS after completing employment/training, the identified clinical issues cannot be related to training/employment experiences received at CPS (e.g. grievances with another staff member or trainee).

• The file of a previous employee/trainee who is currently a CPS client will be marked as a “Restricted Access,” on both their paper and electronic file. Access will be restricted to the administrative staff, the assigned clinician, and that clinician’s supervisor (if applicable).

• If any masters or doctoral student within the Counseling, Psychology or Social Work programs anticipates future training and/or employment at CPS, they should strongly consider seeking services elsewhere. If such a student attends a drop-in session and discloses this information, it is the responsibility of the drop-in clinician to discuss potential ramifications for the student at that time. Referrals to community resources will be provided as needed.
- If, due to financial or other constraints, graduate students from mental health training programs are unable to secure treatment elsewhere, CPS staff will bear in mind their potential future training opportunities when considering client assignment. Specifically, these students cannot be assigned to another clinician-in-training in any academic program, with the exception of doctoral psychology interns. They will also not be seen clinically by the TD, to avoid the future possibility of dual roles. The clinician responsible for supervision of supervision should not provide supervision over doctoral intern cases involving these graduate students.

- If a former client is accepted for a training or work placement at CPS, they should inform the TD promptly to minimize any dual roles. No CPS staff member will attempt to obtain any information from the former client’s paper or electronic records. If the client’s former clinician is still an active staff member, they are encouraged to promptly initiate a conversation with that staff member to discuss any concerns and negotiate any role overlap.

Policy No. A5.05  Accessing Titanium outside of CPS/paperwork:
CPS utilizes the Titanium Schedule software program for clinical documentation. In addition, each client has a paper file containing protected health information (PHI).

Procedures:
- Under no circumstances should clinicians-in-training remove any document containing PHI from the CPS offices.

- Clinicians-in-training should never access Titanium to view and/or edit clinical documentation at any other location other than CPS.

- If it is discovered that a clinician-in-training has removed PHI from CPS or that they have accessed Titanium from a remote location outside of CPS, the clinician-in-training will be immediately suspended from their position pending a review of the situation by the clinician’s supervisor and the TD. Please see the Grievance/Due Process Guidelines in Section A8.

- Client files and/or paperwork should not remain in a clinician in training’s mailbox for more than one day, but should be filed in that client’s chart promptly. Clinicians-in-training may also utilize the designated file cabinet behind the reception area for storage of their process notes and other PHI that is not stored in the client’s paper file.
Policy No. A5.06  Digital recordings/no backlog/when to delete:
All clinicians-in-training are required to digitally record every client session for supervision purposes. Exceptions to this policy must be negotiated between clinicians-in-training and their primary supervisors.

Procedures:
• Each recording must be stored securely in the clinician-in-training’s folder on the shared drive, and labeled with the client’s identifying information (e.g. first name, initials) and the date of the session.

• Digital recordings of client sessions should NEVER be stored anywhere other than the shared drive, such as on the desktop or on a flash drive.

• Clinicians-in-training should negotiate with their primary supervisors at the beginning of their training regarding how long to retain client recordings, and who is responsible for periodically deleting the files. For instance, one supervisor may require a trainee to retain an entire semester’s worth of client recordings, while another may request their supervisee delete all sessions after two weeks have passed.

• By the end of their training experience, all clinician-in-trainings’ recordings will be deleted permanently from the shared drive. It is the responsibility of the individual supervisor to confirm that this task is completed by the clinician’s last day at CPS.

Policy No. A5.07  Communication with Academic Department:
Unless there is an exceptional situation that needs immediate attention, CPS will communicate with the academic departments of the clinicians-in-training only during mid-year and final evaluations.

Procedures:
• Prior to submitting evaluations of clinicians-in-training, CPS training staff will consult with the TD to collaborate on the clinicians’ progress and recommendations.

• The TD and individual supervisors will meet with representatives from the academic departments to discuss mid-year and final evaluations.

• The training director will communicate with the academic department on a regular basis to discuss ongoing training concerns not directly related to evaluation.
Policy No. A5.08  Trainee/Staff Relationships:
Senior staff must conduct themselves appropriately and professionally with clinicians-in-
training, keeping in mind the APA Ethics Code, ACA Ethics Code, NASW Code of Ethics, and
Ohio state law.

Procedures:
• Any opportunity for training should be offered to all equivalent level clinicians-in-training,
and should be routed through the TD before arrangements are made.

• Likewise, invitations for social events should attempt to include all members of a training
cohort. Senior staff should not socialize individually with clinicians-in-training.

• Staff should never engage in any activity with clinicians-in-training where alcohol is
consumed, or there is a monetary exchange of any kind (including gambling or for goods or
services).

• Preventative discussions with clinicians-in-training will be conducted by the TD at the
beginning of each cohort’s training.
Leave Time

Section A6
Policy No. A6.01  Absence Request Forms:
Psychology interns must submit documentation for any leave time taken, including time for
vacation or illness. Trainees and GA’s do not earn vacation or sick time.

Procedures
• Any doctoral intern who is aware of the need to be absent on a scheduled work day is
required to submit an Absence Request Form to the Director prior to the absence. The
Director will sign and return this form. Any absence must be documented accordingly in
Titanium.

• Doctoral interns must also submit a Confirmation of Paid Time Off Form to the Director
following any absences due to illness or vacation. Any absences must be documented
accordingly in Titanium.

• Any trainee or GA who requires time off on a day they would normally be scheduled at CPS
must discuss this with their supervisor, in advance of the absence, and document accordingly
in Titanium.

• If a clinician-in-training requires an extended period of time off, in addition to their
supervisor, they should also notify the TD so that appropriate accommodations can be made.

Policy No. A6.02  Professional Development:
The following section outlines leave time for professional development as it is permitted for all
levels of training.

Procedures:
• GA’s, Trainees and interns in Counselor Education and Clinical Psychology are not provided
with specific time for professional development.

• As they are allotted free time during their work schedule (e.g., client cancelled an
appointment), trainees may stay in the office/CPS and complete professional development
activities (e.g., seminar reading assignments, research projects, clinically-based reading)
when all other traineeship activities have been completed (i.e., paperwork, preparation for
supervision, review of videotaped sessions). Such time must be documented accordingly in
Titanium.

• In addition, trainees and GA’s are not penalized for taking professional development time in
order to attend research meetings (i.e., proposal, defense), outside conferences or workshops.
Such time must be communicated to the TD and documented accordingly in Titanium.

• Doctoral interns are not penalized for taking professional development time in order to travel
for dissertation meetings, and attend conferences or workshops. Such time must be approved
by the TD and documented accordingly in Titanium.
Policy No. A6.03 Sick Leave:
The following section outlines sick leave as it pertains to all levels of training.

Procedures:
• In order to fulfill their requirements, GA’s, trainees and interns in Clinical Psychology, Counselor Education, and Social Work do not earn specific sick leave. However, a trainee who needs to cancel appointments due to illness should call CPS/Front Desk staff by 8am on the given day. The trainee must call and leave a voicemail on the CPS main line (740-593-1616), and email all front desk staff, as well as their supervisor(s) notifying them of your absence. All sick leave must be documented accordingly in Titanium.

• All Counselor Education and Social Work trainees and interns, who have an hour requirement for their traineeship, will determine with their supervisor(s) and TD if they need to make up missed hours.

• Doctoral interns are provided with sick leave at a rate that is consistent with senior staff members, and explained in the general Policy and Procedures Manual. Doctoral interns are expected to follow the same procedures for requesting and documenting sick leave.

• A doctoral intern who needs to cancel appointments due to illness should call CPS/Front Desk staff by 8am on the given day. They must call and leave a voicemail on the CPS main line (740-593-1616), and email all front desk staff, as well as their supervisor(s) notifying them of your absence. All sick leave must be documented accordingly in Titanium.

Policy No. A6.04 Vacation:
The following section outlines vacation time as it is permitted for all levels of training.

Procedures:
• In order to fulfill their requirements, trainees and interns in Counselor Education and Clinical Psychology are not allotted specific vacation time. However, a trainee should meet with the Training Director if they need to be out of the office during their regular schedule for purposes of vacation. All vacation time must be documented accordingly in Titanium.

• All Counselor Education trainees and interns, who have an hour requirement for their traineeship, will determine with their supervisor(s) and TD if they need to make up any missed hours.

• Doctoral interns are provided with vacation that is consistent with senior staff members, and explained in the general Policy and Procedures Manual. Doctoral interns are expected to follow the same procedures for requesting and documenting planned vacation time. However, they must reserve 7-9 vacation days to be taken at the end of their internship year. All vacation time must be documented accordingly in Titanium.
Stipends and Benefits

Section A7
Policy No. A7.01 Stipend and Benefits:

The following section outlines stipend and benefits as they pertain to all levels of training.

Procedures:

• Trainees (Clinical Psychology, Counselor Education, or Social Work) will not receive a stipend or qualify for any insurance, retirement, vacation, or sick time benefits.

• GA’s will be provided with an $11,000.00 stipend for the academic year. Tuition waivers will be provided by academic departments.

• Doctoral Psychology Interns will receive a $28,851.00 stipend for the year they are employed. They will receive a benefits package that includes insurance, retirement, vacation, and sick leave benefits that are on par with full-time, senior staff employees. For more specific information, please contact the Human Resources Office at Ohio University.
Grievance and Due Process Guidelines

Section A8
Policy No. A8.01  Due Process:
The basic meaning of due process is to inform and provide a framework to respond, act, or dispute. Due process ensures that the decisions about clinicians-in-training are not arbitrarily or personally based. It requires that the Training Program identify specific evaluative procedures which are applied to all clinicians-in-training, and provide appropriate appeal procedures to the intern. All steps need to be appropriately documented and implemented.

Procedures:
• Clinicians-in-training will be presented with the program expectations related to professional functioning, in writing, during orientation. These expectations will be discussed in both group and individual settings.

• Procedures for evaluation, including when and how evaluations will be conducted, will be clearly communicated during orientation and in the training materials.

• The training program will articulate the various procedures and actions involved in making decisions regarding problematic behaviors or concerns.

• In compliance with Training Policy 5.07, CPS communicates with Academic Departments twice a year regarding evaluation and at other times to coordinate training. In the case of problematic behaviors or concerns with clinicians-in training, CPS will seek input from academic programs about how to address such difficulties, in a timely manner.

• CPS will institute, when appropriate, a remediation plan for identified inadequacies, including the time frame for expected remediation and consequences of not rectifying the inadequacies.

• Clinicians-in-training will be provided with written procedures for how they may appeal the program’s actions. Such procedures are included in the Training Binder and/or Intern Handbook, which the clinician-in-training receive during orientation. These procedures will also be available on the CPS training website.

• Clinicians-in-training will be allotted sufficient time to respond to any action taken by CPS.
Decisions and recommendations regarding the professional performance of clinicians-in-
training will be made using input from multiple sources.

Written documentation of the actions taken by CPS and the rationale for these actions will be
provided to all relevant parties.

**Policy No. A8.02  Grievances:**
In the event that a training issue cannot be resolved between the Training Director (TD) and the
clinician-in-training, the clinician-in-training may choose to file a grievance. A "grievance" is a
dispute concerning terms and conditions of training arising from any administrative decision
which the clinician-in-training claims is in violation of their rights under established University
and/or counseling center personnel regulations, policies, or practices.

**Procedures:**
- There are two situations in which grievance procedures can be initiated:
  1. In the event an clinician-in-training encounters any difficulties or problems (e.g. poor
     supervision, unavailability of supervisor, evaluations perceived as unfair, workload
     issues, personality clashes, and other staff conflict) during their training experiences, an
     clinician in training can:
        a) Discuss the issue with the staff members involved
        b) If the issue cannot be resolved informally, the intern should discuss the concern with
           the TD or other member of the senior staff
        c) If the TD or member of the senior staff cannot resolve the issue, the clinician-in-
           training can formally challenge any action or decision taken by the TD, the supervisor
           or any member of the training staff by following this procedure:
           i. The clinician-in-training should file a formal complaint, in writing and all
              supporting documents, with the TD or the Center Director if the complaint is
              with the TD. If the clinician-in-training is challenging a formal evaluation, the
              clinician-in-training must do so within 5 days of receipt of the evaluation.
           ii. Within 3 days of a formal complaint, the TD must consult with the Director and
               implement Review Panel procedures as described in Policy 7.03
  2. If a training staff member has a specific concern about a clinician-in-training, the staff
     should:
        a) Discuss the issue with the clinician(s)-in-training involved
        b) Consult with the TD
c) If the issue is not resolved informally, the staff member may seek resolution of the concern by written request, with all supporting documents, to the TD for a review of the situation. When this occurs the TD will:

i. Within 3 days of a formal complaint, the TD must consult with the Director and implement Review Panel Procedures described below.

Policy No. A8.03  Review Panel and Process:
When needed, the Director of the counseling center will convene a Review Panel. The panel will consist of 3 staff members selected by the Director with recommendations from the TD and the clinician-in-training involved in the dispute. The clinician-in-training has the right to hear all facts with the opportunity to dispute or explain the behavior of concern.

Procedures:
• Within 5 work days, a hearing will be conducted in which the challenge is heard and relevant material presented.

• Within 3 work days of the completion of the review, the Review Panel submits a written report to the Director, including any recommendations for further action.

• Recommendations made by the Review Panel will be made by a majority vote.

• Within 3 work days of receipt of the recommendation, the Director will either accept or reject the Review Panel’s recommendations. If the Director rejects the panel’s recommendations, due to an incomplete or inadequate evaluation of the dispute, the Director may refer the matter back to the Review Panel for further deliberation and revised recommendations, or may make a final decision.

• If referred back to the panel, they will report back to the Director within 5 work days of the receipt of the Director’s request of further deliberation. The Director then makes a final decision regarding what action is to be taken.

• The TD informs the clinician-in-training, staff members involved, and, if necessary, members of the training staff of the decision and any actions resulting from the decision.

• If the clinician-in-training disputes the Director’s final decision, the clinician-in-training has the right to contact the Department of Human Resources to discuss the situation.
Policy No. 8.04  Definition of Problematic Behavior:
Problematic behavior is defined broadly as an interference in professional functioning, which is reflected in one of more of the following ways:
1. An inability and/or unwillingness to acquire and integrate professional standards into one’s repertoire of professional behavior
2. An inability to acquire professional skills in order to reach an acceptable level of competency and/or
3. An inability to control personal stress, strong emotional reactions, and/or psychological dysfunction which interfere with professional functioning.

Procedures:
• It is the professional judgment of a supervisor/staff member as to when an clinician-in-training’s behavior becomes problematic rather than of concern, and, therefore, consultation with other staff members is encouraged. Clinicians-in-training might exhibit behaviors, attitudes or characteristics which, while of concern and requiring remediation, are not unexpected or excessive for professionals in training. Problems typically become identified when they include one or more of the following characteristics:
  1. The clinician-in-training 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 clinician-in-training is sufficiently negatively affected.
  4. The problem is not restricted to one area of professional functioning.
  5. A disproportionate amount of attention by training personnel is required.
  6. The clinician-in-training’s behavior does not change as a function of feedback, remediation efforts and/or time.

Policy No. A8.05  Remediation and Sanction Alternatives:
It is important to have meaningful ways to address problematic behavior once it has been identified. In implementing remediation or sanction interventions, the training staff must be mindful and balance the needs of the clinician-in-training, the clients involved, members of the training cohort, the training staff, and other agency personnel.

Procedures:
The remediation plan should be constructed with sensitivity to the developmental level of the clinician-in-training and the seriousness of presenting concern. The plan may include any of the interventions listed below, singly or in combination.

- **Verbal Warning**: The clinician-in-training is given verbal feedback that emphasizes the need to discontinue the inappropriate behavior that is being addressed. No record of this action is kept.

- **Written Acknowledgement**: Written feedback to the clinician-in-training that formally acknowledges the following:
  - The Training Director (TD) is aware of and concerned with the performance rating
  - The concern has been brought to the attention of the clinician-in-training
  - The TD will work with the clinician-in-training to rectify the problem or skill deficits, AND
  - The behavior associated with the rating are not significant enough to warrant more serious action

- **Written Warning**: This is a letter that indicates the need for the clinician-in-training to discontinue an inappropriate action or behavior. This letter will contain the following:
  - A description of the clinician-in-training’s unsatisfactory performance
  - Actions needed by the clinician-in-training to correct the unsatisfactory behavior
  - The time line for correcting the problem
  - What action will be taken if the problem is not corrected
  AND
  - Notification that the clinician-in-training has the right to request a review of this action
  - A copy of this letter will be kept in the clinician-in-training’s file. Consideration may be given to removing this letter at the end of the training period by the TD in consultation with the clinician-in-training’s supervisor and Director. If the letter is to remain in the file, documentation should contain the position statements of the parties involved in the dispute.

- **Schedule Modification**: This is a time-limited, remediation-oriented, closely supervised period of training designed to return the intern to a more fully functioning state. Modifying a clinician-in-training’s schedule is an accommodation made to assist the clinician-in-training in responding to personal reactions to environmental stress, with the full expectation that the clinician-in-training will complete the traineeship/internship. This period will include more closely scrutinized supervision conducted by the regular supervisor in consultation with the TD. Several possible and perhaps concurrent courses of action may be included in modifying a schedule. These include:
  - Increasing the amount of supervision, either with the same or other supervisors
  - Change in the format, emphasis, and/or, focus of supervision
- Recommending personal therapy aimed at addressing the behaviors of concern (a list of community practitioners and other options will be made available)
- Reducing the clinician-in-training’s clinical or other workload
- Requiring specific academic coursework
- The length of the modification will be determined by the TD in consultation with the primary supervisor and the Director. The termination of the schedule modification period will be determined, after discussions with the clinician-in-training, by the TD in consultation with the primary supervisor and the Director.

- **Probation:** This is a time-limited, remediation-oriented, more closely supervised training period. The purpose of probation is to assess the ability of the clinician-in-training to complete their training and to return the clinician-in-training to a more fully functioning state. Probation defines a relationship that the TD systematically monitors the degree to which the clinician-in-training addresses, changes and/or otherwise improves the behavior associated with the inadequate rating for a specific length of time. The clinician-in-training is informed of the probation in writing. The statement will include:
  - The specific behaviors associated with the unacceptable rating
  - The recommendations for rectifying the problem
  - The time frame for the probation during which the problem is expected to be ameliorated AND
  - The procedures to ascertain whether the problem has been appropriately rectified
  - If the TD determines that there has not been sufficient improvement in the clinician-in-training’s behavior to remove the Probation or Modified Schedule, then the TD will discuss with the primary supervisor and the Director possible courses of action to be taken. The TD will communicate in writing to the clinician-in-training that the conditions for revoking probation or modified schedule have not been met. This notice will include the course of action the TD has decided to implement. These may include continuation of the remediation efforts for a specified time period or implementation of another alternative. Additionally, the TD will communicate to the Director that if the clinician-in-training’s behavior does not change, the clinician-in-training will not successfully complete the traineeship/internship.

- **Suspension of Direct Service Activities:** This action requires a determination that the welfare of the clinician-in-training’s clients or consultee has been jeopardized. Therefore, direct service activities will be suspended for a specified period as determined by the TD in consultation with the Director. At the end of the suspension period, the clinician-in-training’s supervisor in consultation with the TD will assess the clinician-in-training’s capacity for effective functioning and determine when direct service can resume.
• **Administrative Leave:** This involves the temporary withdrawal of all responsibilities and privileges in the agency. If the Probation Period, Suspension of Direct Service Activities, or Administrative Leave interferes with the successful completion of the training hours needed for completion of their training, this will be noted in the clinician-in-training’s file and the clinician-in-training’s academic program will be informed. The TD will inform the clinician-in-training of the effects the administrative leave will have on the clinician-in-training’s stipend and accrual of benefits.

• **Dismissal from the Training Program:** This involves the permanent withdrawal of all agency responsibilities and privileges. When specific interventions do not, after a reasonable time period, rectify the problem behavior or concerns and the clinician-in-training seems unable or unwilling to alter their behavior, the TD will discuss the possibility of termination from the training program or dismissal from the agency with the Director. Either administrative leave or dismissal would be invoked in cases of severe violations of the APA/ACA/NASW Code of Ethics, or when imminent physical or psychological harm to a client is a factor, or the clinician-in-training is unable to complete their training due to physical, mental, or emotional illness. When a clinician-in-training has been dismissed, the TD will communicate to the clinician-in-training’s academic department that the clinician-in-training has not successfully completed the training program.

**Policy No. A8.06  Procedures for Responding to Inadequate Performance by a Clinician-in-Training:**

If a clinician-in-training receives an ‘unacceptable rating’ from any of the evaluation sources in any of the major categories of evaluation, or if a staff member has concerns about a clinician-in-training’s behavior (e.g., ethical or legal violations, professional incompetence) the following procedures will be initiated:

**Procedures:**

• The staff member will consult with the TD to determine if there is reason to proceed and/or if the behavior in question is being rectified.

• If the staff member who brings the concern to the TD is not the clinician-in-training’s primary supervisor, the TD will consult with the primary supervisor.

• If the TD and primary supervisor determine that the alleged behavior in the complaint, if proven, would constitute a serious violation, the TD will inform the staff member who brought the complaint.

• The TD will meet with the Director to discuss the concerns and possible courses of action to be taken to address the issue.
The TD, primary supervisor, and the Director may meet together to discuss possible courses of action.

Whenever a decision has been made by the Director or the TD about an clinician-in-training’s training or status within the agency, the TD will inform the clinician-in-training in writing and will meet with the clinician-in-training to review the decision. This meeting may include the clinician-in-training’s primary supervisor. If the clinician-in-training accepts the decision, any formal action taken by the Training Program may be communicated in writing to the clinician-in-training’s academic department. This notification indicates the nature of the concern and the specific alternatives implemented to address the concern.

The clinician-in-training may choose to accept the conditions or may choose to challenge the action. See the Policy 8.07 for procedures for challenging an action.

Policy No. A8.07  How to Appeal or Challenge a Decision to Remediate a Clinician-in-Training’s Behavior:
In the event that an intern does not agree with any of the aforementioned notifications, remediation or sanctions, or with the handling of a grievance – the following appeal procedures should be followed:

Procedures:
- The intern should file a formal appeal in writing with all supporting documents, with the Director. The trainee must submit this appeal within 5 work days from their notification of any of the above (notification, remediation or sanctions, or handling of a grievance).

- Within three work days of receipt of a formal written appeal from an intern, the Director will consult with the Training Director and the Director of Clinical Services and then decide whether to implement a Review Panel or respond to the appeal without a Panel being convened.

- In the event that an intern is filing a formal appeal in writing to disagree with a decision that has already been made by the Review Panel and supported by the Director, then that appeal is reviewed by the Director in consultation with the Training Director and the Director of Clinical Services. The Director will determine if a new Review Panel should be formed to reexamine the case, or if the decision of the original Review Panel is upheld.
Supervision Policies

Section A9
Policy No. A9.01  Supervision Contracts:
Each supervisor providing supervision of a clinician’s clinical work must establish with the supervisee a supervision contract.
• The supervision contract shall specify the rights and responsibilities of both the supervisee and supervisor.
The supervisor shall retain a copy for their supervision records.

**Policy No. A9.02 Supervision Documentation:**
Each clinical supervisor is required to maintain supervision records in accordance with the appropriate Ohio Revised Code.

**Policy No. A9.03 Evaluation of Interns and Trainees:**
Each supervisor is required to conduct formative and summative evaluations in accordance with the appropriate professional ethics, state law, and the supervisee’s academic department.
- The evaluation form that will be used shall be provided to the supervisee by the second supervision session at the beginning of a supervision relationship.
- The supervisor will inform the supervisee to whom the evaluation will be provided.
- CPS staff involved in training will periodically consult during an administrative staff meeting in order to coordinate and inform summative and formative evaluations of trainees and interns.

**Policy No. A9.04 Supervisory Assignments:**
The TD shall designate the process by which supervisory assignments will be made.

**Procedures:**
- Licensed staff members will inform the Training Director of their supervisory capacity for the semester/academic year.
- Doctoral Psychology Interns must be supervised by a licensed psychologist who is at least 3 years post-licensure.
- Priority will be given to doctoral psychology interns’ preferences when deciding supervisory matches.
- Doctoral Psychology Interns should discuss supervision styles and training goals with potential supervisors and inform the TD of their preferences for supervisor given the fit of supervisory styles with the intern’s training goals.
• Supervisory assignments may change throughout the year depending on the changing needs/requirements for supervision.

• Supervisory matches are final for each supervisory period (semester) once announced by the TD unless a change is deemed necessary or appropriate by the TD in consultation with the Training Committee.

• Supervisees or supervisors who are dissatisfied with their supervisory assignment may express their concerns to the TD. If the conflict cannot be resolved, the TD, in consultation with members of the training committee, will decide the appropriateness of modifying the supervisory assignment. Please refer back to Section 8: Grievances and Due Process Procedures for guidance in managing conflicts or issues that cannot be resolved informally in the supervisory relationship.

Training Requirements for Group Work
Policy No. A10.01  Doctoral Psychology Intern Group Therapy Entrance Requirements:
It is strongly preferred that Doctoral Psychology Interns have taken a doctoral level graduate class in group theory and therapy and have prior clinical experience in facilitating therapy groups.

Policy No. A10.02  Doctoral Psychology Intern Group Therapy Exit Requirements:
Doctoral Psychology Interns will be formally evaluated twice during their internship year.

Procedures:
• Doctoral Psychology Interns will be formally evaluated on a 7-level rating scale for group psychotherapy competencies by the group supervisor during mid-year and final evaluations.

• Areas of competencies include: conceptual and assessment skills; articulation and translation of group therapy in practice; group screening capability; recognition of group developmental stages and use of appropriate interventions at each stage; recognition of group dynamics; collaboration with co-therapist; facilitation of termination of group; and documentation skills.

• Doctoral Psychology Interns are expected to co-facilitate a minimum of three therapy groups over the course of the internship year.

Policy No. A10.03  Clinical Psychology Trainee Entrance Requirements for Co-Facilitation of Group:

Procedures:
• Clinical Psychology Trainees must have taken a graduate level course in group theory and therapy.

• Prior therapy experience in facilitating therapy groups is preferred.

• Depending on prior experience with group, trainees may be required to process observe for one semester prior to co-leading a therapy group.

• Trainees are required to co-facilitate therapy groups with senior staff or doctoral interns if they have no prior co-leadership experience.

• If a trainee is co-facilitating a therapy group with a doctoral intern or unlicensed senior staff member, there must be a licensed senior staff member present in the office.

Policy No. A10.04  Clinical Psychology Trainee Exit Requirements for Co-Facilitation of Group:
Clinical Psychology Trainees will be evaluated at the termination of each group they co-facilitate or at the end of the semester for on-going groups.

Procedures:

- Clinical Psychology Trainees will be informally evaluated by co-facilitator and formally evaluated by group supervisor.

- Formal evaluations will be based on a 7-level rating scale for group psychotherapy competencies by the group supervisor.

- Areas of competencies include: conceptual and assessment skills; articulation and translation of group therapy in practice; group screening capability; recognition of group developmental stages and use of appropriate interventions at each stage; recognition of group dynamics; collaboration with co-therapist; facilitation of termination of group; and documentation skills.

Policy No. A10.05 Counselor Education Trainee Entrance Requirements for Co-Facilitation of Group:

- Counselor Education trainees must have taken a graduate level course in group theory and therapy.

- Prior therapy experience in facilitating therapy groups is preferred.

- Depending on prior experience with group, trainees may be required to process observe for one semester prior to co-leading a therapy group.

- Trainees are required to co-facilitate therapy groups with senior staff or doctoral interns if they have no prior co-leadership experience.

- If a trainee is co-facilitating a therapy group with a doctoral intern or unlicensed senior staff member, there must be a licensed senior staff member present in the office.

Policy No. A10.06 Counselor Education Trainee Exit Requirements for Co-Facilitation of Group:

Counselor Education Trainees will be evaluated at the termination of each group they co-facilitate or at the end of the semester for on-going groups.

Procedures:

- Counselor Education Trainees will be informally evaluated by co-facilitator and formally evaluated by group supervisor.

- Formal evaluations will be based on a 7-level rating scale for group psychotherapy competencies by the group supervisor.
Areas of competencies include: conceptual and assessment skills; articulation and translation of group therapy in practice; group screening capability; recognition of group developmental stages and use of appropriate interventions at each stage; recognition of group dynamics; collaboration with co-therapist; facilitation of termination of group; and documentation skills.

Policy No. A10.07 Graduate Psychology Students Entrance Requirements for Co-Facilitation of Group and for Process Observation:
Graduate Students in psychology must have taken or currently be enrolled in a graduate level group theory and therapy class, as well as be enrolled in a practicum seminar course in their program.

Policy No. A10.08 Graduate Psychology Students Exit Requirements for Co-Facilitation of Group and for Process Observation:
Graduate psychology students will be evaluated at the termination of the group they are co-facilitating or at the end of the semester for on-going groups.

Procedures:
- Students will be given a letter grade by group supervisor.
- Students will be formally evaluated by group coordinator.

Policy No. A10.09 Group Therapy Assignments for Clinicians-in-Training:
Pre-doctoral psychology interns, counseling interns, and psychology trainees may, where possible, participate in the group therapy process as either a co-leader or an observer.

Procedures:
- Clinicians-in-training may notify the group coordinator of their interest in facilitating a group. Preference is given to those who have successfully completed a group class.
- Factors considered for assignments include prior opportunity, clinical needs of the groups, year in training, clinical skills, observation of an ongoing group, and participation in specialized training.
- Doctoral Psychology Interns are given preference before other clinicians-in-training, in consultation with the training committee.
- Clinicians-in-training may observe therapy groups for training purposes. Observation is the only option for clinicians-in-training who have not taken a class or practicum in group therapy.
Please see the Group Therapy Policies and Procedures, Section 4, in the CPS Policy and Procedure Manual for general policies related to the Group Therapy Program.