INTERNSHIP TRAINING HANDBOOK Ohio University Counseling and Psychological Services Doctoral Psychology Internship 2020-2021

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Introduction

Welcome to the Ohio University's APA-Accredited Doctoral Psychology Internship Program! At Counseling and Psychological Services, our goal is to provide high quality training in the practice of professional psychology. You will have the opportunity to receive a wide variety of training experiences that will help you prepare for full time clinical work.

This handbook is designed to help you become familiar with the organization and functioning of Ohio University's Counseling and Psychological Services (CPS), and to help you understand its role in the life of the University.

CPS functions under the auspices of the Division of Student Affairs. CPS is located in Hudson Health Center with some additional offices in our Lindley Hall Annex and embedded clinician partnerships. Hudson Health Center is also home to Campus Care, the student health center. Although CPS works closely with Campus Care and is located in the same building, they are administratively separate.

Our staff consists of 6 psychologists, 5 licensed clinical mental health counselors, 2 licensed social workers, 2 unlicensed senior staff members, 2 certified medical assistants, and 2 full-time psychiatrists. We have 4 clerical support staff who operate the front desk, schedule clients, manage files, coordinate meetings and communications, and provide a wide variety of support tasks for staff. We also have a business and technology manager. We provide training for 6-8 graduate student trainees and graduate assistants from Ohio University's Psychology department, the Counselor Education program, and the Social Work Program, in addition to our internship program.

CPS began implementing a telehealth program as part of its emergency operations plan in response to COVID-19, March 2020. See CPS Telehealth Policies and Procedures for additional information.

The Committee on Accreditation of the APA can be contacted at:

http://www.apa.org/ed/accreditation/index.aspx Office of Program Consultation and Accreditation 750 First St., NE Washington, DC 20002-4242 Telephone: (202)336-5979 TTD/TTY: (202) 336-6123

TTD/TTY: (202) 336-6123 Fax: (202) 336-5978 apaaccred@apa.org



Meet the Staff

Senior Staff

Paul Castelino, Ph.D.

Director

Dr. Castelino is a licensed psychologist and a licensed professional clinical counselor. He received his doctoral degree in counseling psychology at Loyola University Chicago. He came to Ohio University in 2005 as a staff psychologist and in 2009 he went to West Virginia University to serve as the Training Director at their counseling center. He returned to Ohio University fall of 2012 as an Associate/Clinic Director. In 2007, he was the recipient of the Diversity Leadership Mentoring Award presented by the Association for University and College Counseling Centers Directors (AUCCCD) and in 2009, he received the Diversity Scholar Award presented by the Association of Counseling Center Training Agencies (ACCTA). His initial clinical work and training included working in Chicago area hospitals (Cook County Hospital, Northwestern Memorial Hospital, and Veterans Affairs - Hines, IL). Since 2003, he has worked in university counseling centers. His clinical orientation and emphasis is on developmental and multicultural/empowerment models. His clinical interests include working with college students who present with depression, anxiety, interpersonal, emotional, and spiritual concerns. He is an active member of American Psychological Association.

Rebecca Conrad Davenport, Ph.D.

Associate Director & Clinical Director

Dr. Conrad Davenport received her doctorate in Counseling Psychology from the University of Illinois at Urbana-Champaign in 2000 after completing her internship at the University of Tennessee in Knoxville. Becky is a licensed psychologist in the State of Ohio and has provided counseling services to students at five different university settings over the last twenty years. Some areas of particular interest for Becky include grief and loss, multicultural counseling, the impact of oppression on well-being, identity issues including LGBT identities, relationships with self and others, sexual assault, peer abuse and other child abuse traumas, and spirituality. She also enjoys providing group therapy, training, and multicultural supervision. Becky has been part of the National Coalition Building Institute and is a certified SIDE (Summer Institute for Diversity Education) trainer. When not at work, Becky spends time with her family, enjoys gardening and cooking, and loves to travel and be outside.

Majeda Humeidan, Ph.D. Assistant Director & Training Director

Dr. Majeda Humeidan is an Ohio native. She has a Ph.D. in Counseling Psychology and M.A. in Counseling from Ball State University with a B.S. from Ohio State. She has worked as a psychologist and held leadership roles within student affairs and at several counseling centers in the US and abroad. As part of her commitment to global education, equity, and women's empowerment, she helped establish accredited psychology teaching and training programs for women internationally. Majeda is particularly interested in psychologist training and the supervisory working alliance, the topic of her early researchc. She is also interested in career development, social justice, and the role of culture and protective factors and mental health. Majeda practices from a culturally sensitive, existential model. She focuses on issues related to identity development, including intersectionality, risk, growth, transitions, and trauma (cultural, historical, familial, or other) and other areas of importance to college student health.

Rinda Scoggan, LPCC-S, LICDC-CS

Assistant Training Director

Rinda received a Master's Degree in Counselor Education, with a focus on community mental health, from Ohio University's Counselor Education Program in 2010. She is licensed with the Ohio Counselor, Social Worker, Marriage and Family Therapist Board as a Professional Clinical Counselor with a supervising credential. She has also been licensed with the Ohio Chemical Dependency Professionals Board as a Licensed Independent Chemical Dependency Counselor with a supervising credential. She is excited about the opportunity to return to the Ohio University campus to serve its students. Most recently, she served as the Substance Abuse Coordinator and Counselor at Marietta College. While at Marietta College she was accompanied by her certified therapy dog, Buddy. Her areas of interest include substance abuse, major life changes, student athletes, dual diagnosis, trauma, and mood and anxiety disorders. Her therapeutic style includes aspects of cognitive-behavioral, person-centered, motivational interviewing, and emotional support pet therapy.

Samantha Christopher, Ph.D.

Group Coordinator

Sam received her doctorate in Counseling Psychology from Texas Tech University after completing her internship at The Ohio State University's Counseling and Consultation Service. After finishing her degree, she stayed at Ohio State's counseling center and completed her Post-Doctoral Clinical Fellowship before moving back to Athens (Sam finished her undergraduate degree at OU). Sam caters

the therapy experience to meet students' specific needs and goals, and focus on variables that make each person unique – including intersecting identities, culture, and personal strengths. She approaches therapy from an integrative perspective, bringing together feminist, multicultural, and existential approaches with other therapeutic tools like narrative, solution-focused, and interpersonal process interventions. She believes a secure therapy relationship gives room for growth, self-exploration, and change – and because of this she places a great deal of importance on her relationship with students and values transparency, authenticity, and honesty in the therapy relationship. She welcomes and enjoys working with people who come to therapy with a variety of presenting concerns. These include (but are not at all limited to): grief and loss, anxiety and panic, depression, trauma, graduate student concerns, vocational/career development, adjusting and/or transitioning to new phases in life, relationship/family concerns, and identity exploration.

Chris Henry, LSW

Clinical Care Manager

Chris received undergraduate degrees from Ohio University in English and Social Work in 1990 and '95 respectively. He has been a practicing Licensed Social Worker in Southeast Ohio since receiving his license in 1995. He has primarily provided Crisis Intervention and psychiatric hospital pre-screening for Tri-County Mental Health and Hopewell Health Centers within the community since that time. He became Director of Crisis Services at Hopewell Health Centers in Athens in 2008 and left that position to join CPS in January 2019. Originally from the suburbs of Chicago and Cleveland, Chris has resided in Athens since 1985 and has extensive knowledge of the local community, the struggles that lie therein, and the resources available to assist with overcoming those struggles. His focus lies in brief solution-oriented interventions along with traditional case management services such as coordination, linkage, referrals, and support. Chris loves to explore the communities and natural environments that surround Athens and enjoys hiking, local history, music, and spending time with his family.

Kate Hibbard-Gibbons, Ph.D.

Psychology Resident

Kate Hibbard-Gibbons received her doctorate in Counseling Psychology from Western Michigan University after completing her internship at North Carolina State University's Counseling Center. Kate works collaboratively with students to help them move toward healing and personal growth. She approaches therapy through a cultural humility and trauma-informed lens that integrates acceptance and commitment, interpersonal process, and narrative therapy. She believes that cultural context (e.g., race, gender, and sexual orientation) is a significant part of who a person is and how the person interacts with others. Additionally, she believes that one's internal narrative (the story in our head) has significant influence on how one sees the self and the world around them. Through therapy, the student can become empowered by their narrative and can shape the narrative to match their authentic self. As such, therapy can be a safe place to make connections between thoughts, feelings, and physical reactions that have been feared and avoided. Some areas and populations of particular interest to Kate include disordered eating and body image concerns, perfectionism, trauma, relationship/family concerns, identity development, graduate students, and student-athletes. When not at work, Kate enjoys running in local races, cycling, cooking, reading, and Hulu (eagerly waiting for the next episode of her favorite show to be released).

David Lairmore, Psy.D.

Psychology Resident

Dr. David Lairmore received his Doctorate in Clinical Psychology (Psy.D.) from Spalding University in Louisville, Kentucky. He completed his internship at the Grand Valley State University Counseling Center in Allendale, Michigan and post-doctoral training at the Marquette University Counseling Center in Milwaukee, Wisconsin. David is originally from the Dayton/Cincinnati area and is excited to return to his home state! While David has worked with a variety of individuals across settings, a significant portion of his work has been with the college student population. Within the microcosm of a university, he finds the most rewarding work is being able to join with the client as they explore their identity and development. Grounded in an integrative approach and multicultural framework, David approaches therapy by establishing a strong clinical relationship, built on empathy and rapport. Subsequently, assessing the client's strengths through motivational interviewing; then conceptualizing through an attachment/interpersonal lens. He incorporates treatment using an integrative toolkit, relying on cognitive-behavioral and interpersonal techniques. David enters into a partnership with each client, with the partnership being intrinsically reciprocal. The client is at the center of his work, helping to navigate and clarify their best route towards personal and professional fulfillment.

Stephanie Maccombs, Ph.D., LPC, LICDC, CRC

Counselor

Dr. Stephanie Maccombs received her doctorate in Counselor Education and Supervision from Ohio University in 2020. She also holds a Master of Education in Clinical Mental Health and Rehabilitation Counseling from Ohio University. Stephanie is licensed in the state of Ohio as a Licensed Professional Counselor and a Licensed Independent Chemical Dependency Counselor, and she is also a Certified Rehabilitation Counselor. Before joining CPS, Stephanie provided counseling services to clients with co-occurring mental health and substance use disorders as a medication-assisted treatment counselor and member of a drug court treatment team. Her therapeutic style is integrative, incorporating aspects of cognitive behavioral therapy, motivational interviewing, and reality therapy, while emphasizing personal strengths. Clinical areas of interest for Stephanie include substance abuse and co-occurring disorders, rural and Appalachian culture, trauma, depression, anxiety, and integrated care. Additionally, Stephanie was born and raised in Athens County and has extensive knowledge about the local community. In her personal life, Stephanie enjoys music, visiting festivals and concerts, kayaking, and spending time with her friends, family, and pets.

Kristyn Neckles, Psy.D.

Diversity & Inclusion Embedded Clinician

Dr. Neckles is a native of Grenada in the Caribbean and has a doctorate in Clinical Psychology from an APA accredited program in Miami, Florida; Carlos Albizu University. She also holds a Master's degree in Organizational Management and Leadership from Springfield College in Boston, Massachusetts. She is particularly interested in understanding the role of culture and issues of privilege and power in the context of mental well-being. She also strives to understand these factors in ways that help to facilitate the provision of effective counseling and psychotherapy. Particularly, she considers the

interconnectedness of ourselves to each other and our environment and the importance of values and balance in living a healthy life.

Kristyn's approach to therapy is integrative, drawing from Cognitive-Behavioral therapies and Acceptance and Commitment therapy together with elements of Dialectical Behavioral Techniques. Her clinical interests, in no particular order, include: diversity/multicultural issues, trauma, identity and woman issues, as well as, learning disorders, and ADHD. As a member of the CPS team, Kristyn is committed to providing the necessary support to clients so that they experience effective change in their lives.

Outside of work Kristyn enjoys spending time with her family and friends, learning about different cultures, traveling, outdoor activities such as hiking, gardening and stained glass art.

Michelle Pride, Ph.D.

Athletics Embedded Clinician

Dr. Pride completed her counseling psychology doctoral program at Michigan State University and a psychology internship at Colorado State University counseling center. Before coming to Ohio University she worked at the Louisiana Tech University counseling center. She is a multicultural, feminist therapist who has specialized in working in a university setting. Her interests and expertise include women's issues, LGBTIQA+ issues, trans affirmative therapy, group therapy, trauma work, working with student athletes and students with identified learning disabilities and ADD/ADHD, peer mentoring, and clinical training and supervision. She co-led the sexual assault survivor's group for 10 years and has co-led Spectrum since 2016. She worked as the group therapy coordinator for 4 years at CPS before becoming the training director. Michelle was the training director for 8 years. Currently, Michelle is a staff member working on balancing her passions for clinical work, supervision, advocacy and social justice, and self-care. When she's not at work, you can find Michelle hiking, kayaking, doing yoga, knitting, gardening, crafting, or listening to esoteric podcasts.

Alex Reed, Ph.D., LPCC-S

BASICS Coordinator

Dr. Reed earned a master's degree in clinical mental health counseling and rehabilitation counseling and is his PhD in counselor education from Ohio University. Alex is licensed in Ohio as a Professional Clinical Counselor with training supervision designation and as an Independent Chemical Dependency Counselor. Alex is also a certified rehabilitation counselor and a national certified counselor. Alex completed an internship at CPS prior to receiving his master's degree and completed his doctoral internship at Denison University's Health and Counseling Center. Alex also has 2 years of experience working as an integrated care and substance abuse counselor at Health Recovery Services in Athens OH. Alex is excited to return to CPS and work with Ohio University students again. Alex's clinical practice orientations include person centered counseling, emotion focused therapy, cognitive therapy and motivational interviewing. Alex's clinical interests include anxiety management, sexual and gender identity development and adjustment issues.

Rebecca Smith, Ph.D., LPCC

Heritage College of Medicine Embedded Clinician

Becky received her doctorate in Counselor Education and Supervision from Ohio University in 2018. She also holds a Master of Education in Clinical Mental Health Counseling from Auburn University. She is licensed with the Ohio Counselor, Social Worker, Marriage and Family Therapist Board as a Licensed Professional Counselor, and is also a National Certified Counselor. Becky has experience working with incarcerated adults, at-risk adolescents, children and families, as well as college students. Her therapeutic style is integrative utilizing aspects of Cognitive-Behavioral Therapy, Acceptance and Commitment Therapy, Motivational Interviewing, Dialectical Behavior Therapy, and Gestalt. Her areas of interest include substance abuse, social media and wellbeing, grief and loss, anxiety, and depression.

Chad Wilt, M.A., LPCC

Counselor

Chad received his undergraduate degree in Music Education from Ohio University in 1994. He later went on to receive his Master's Degree in Clinical Counseling from Ashland Theological Seminary. Chad is licensed with the Ohio Counselor, Social Worker, Marriage and Family Therapist Board as a Licensed Professional Clinical Counselor and is excited to return to OU as a counselor at CPS. Prior to coming to CPS, Chad worked as a clinical therapist in private practice in Westerville, Ohio and also as a marriage coach, working with couples in 2 and 3 day marriage intensives. Chad's approach to counseling utilizes a combination of therapies including, person centered, cognitive behavioral therapy, acceptance commitment therapy, along with elements of imago therapy. Chad's clinical interests include stress management, anxiety, depression, grief, couples counseling, ADD/ADHD. Chad's interests outside of counseling include, hiking, backpacking, hammock camping, music and spending time with his wife and three kids.

Psychiatry

Heidi Jache, MD

Psychiatrist

Dr. Jache is a board-certified child, adolescent, and adult psychiatrist. She graduated from the Medical College of Wisconsin. She completed her psychiatry residency followed by her child psychiatry fellowship at the Medical College of Wisconsin Affiliated Hospitals. She has worked in private practice and community mental health centers in WV and Ohio prior to coming to Ohio University. She has special interests including Attention-Deficit/Hyperactivity Disorders, Depression, Bipolar disorder, Anxiety disorders, Psychosis, and teens transitioning into young adults. She evaluates students at CPS to clarify diagnosis and to assess need for medication. She recommends that many students be connected to another provider in addition to Dr. Jache to maintain continuity in summers and when the student graduates.

Patricia Mickunas, MD

Psychiatrist

Dr. Mickunas is licensed by the State Medical Board of Ohio, specializing in general adult psychiatry. She earned her M.D. at Boonshoft School of Medicine at Wright State University in Dayton, Ohio. She then completed her psychiatric residency at Wright State Department of Psychiatry which encompassed both civilian and military experiences. Prior to working at Ohio University, she worked at Appalachian

Behavioral Healthcare as an inpatient psychiatrist, at several community mental health centers and as a contractor with Ohio Department of Rehabilitation and Corrections. Her areas of interests include Attention-Deficit/Hyperactivity Disorders, Depression, Anxiety disorders, Bipolar Affective Disorder and Thought Disorders. Per department policy, Dr. Mickunas recommends that her patients be connected to another provider to maintain continuity of care when on academic break and upon graduation.

Staci L. Gambill, CMA, AAMA, AAS

Certified Medical Assistant

Staci graduated with an Associate Degree in Applied Science with her major being Medical Assisting, from Hocking College, Nelsonville, Ohio. Staci received her certification from the American Association of Medical Assistants (AAMA) June 2008. Staci joined the staff at CPS June 2013 after being employed for a Internal Medicine Doctor in Private Practice for 4 years and raising 3 wonderful children. Staci is a Certified Medical Assistant and assists the Psychiatrists at CPS.

Katie O'Rourke, CMA

Certified Medical Assistant

Katie graduated in 2007 from Hocking College with an Associate's Degree in Applied Science. She joined CPS in September 2017 as a Certified Medical Assistant for the Psychiatrists. Prior to joining CPS, Katie worked for University Medical Associates in the Geriatric department for 7 years. In her spare time, she enjoys camping and spending time with her husband, son and dogs.

Central Staff

Mitzi Trentacoste, M.A.

Business and Technology Manager

Mitzi graduated in spring 2017 with her MA in Organizational Communication through Ohio University's Scripps College of Communication. In addition, Mitzi holds a BS degree in English Education from Indiana University of Pennsylvania. After several years of teaching, Mitzi joined the CPS staff in the fall of 2012. Mitzi is a third year mentor for Ohio University's First Scholars' Program for first generation college students. When she finds time, Mitzi loves to get on her running shoes and train for races as well as spend time with her husband and three children.

Amanda Uribe

Health Services Specialist

As an administrative associate at Counseling and Psychological Services for the last 3 years, Amanda has become more passionate about working in the wellness community. She has had experience working in the mental health and addiction field for 12 years and finds that she is interested in pursuing further education in this area of work. In her time away from CPS, Amanda enjoys spending time with her family, assisting her son's extracurricular activities, and relaxing at her family campsite.

Emily Brunton

Health Services Associate

Emily is a full-time Health Services Associate for CPS. In the years prior to joining Ohio University, she worked in the optical field as a Licensed Optician. She is currently pursuing her bachelor's degree in Social Work here at O.U. When away from CPS, she enjoys exploring the outdoors and spending time with her family at Burr Oak Lake.

Suzanne Ferraro

Health Services Associate

Suzanne Clare Ferraro holds an A.S. in Natural History and an A.A. in Liberal Arts from American River College. Before joining Ohio University's Counseling and Psychiatric Services as a Health Service Associate, she worked as a teaching assistant in special needs education and as a customer service representative for MediCare. Outside of work, she enjoys Brazilian Jiu-Jitsu and spending time with her family.

Lori Fick

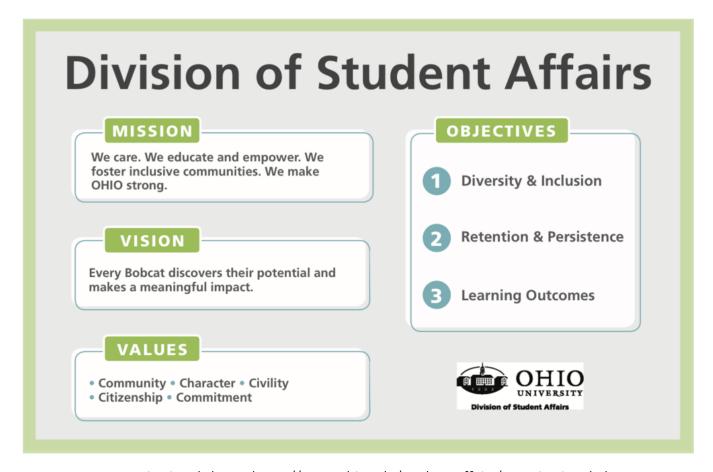
Health Services Associate

Lori is a full-time Health Services Associate for Counseling and Psychological Services. As an Ohio University alumnus with a Bachelor of Science in Human and Consumer Sciences she is looking forward to being back at the university and the opportunities that are available. Prior to joining CPS, she worked for 14 years for a local optometrist in Nelsonville and Athens. When not working she enjoys spending time with her family and taking long walks with her dog on the bike path.

Counseling & Psychological Services Assistant Training Director Dr. Paul Castelino (Rachel Seigel) Majeda Humeidan Rinda Scoggan Counselor and Basics Coordinator Psychologist, Embedded in Athletic Mitzi Trentacoste J. Alex Reed Michelle Pride Heidi Binder David Lairmore Counselor, Embedded in HCOM Amanda Uribe Sam Christopher Andrea Cooper Becky Smith (Jane Mallorn and Katherine Ziff, Psychologist, Embedded in D&I Lori Fick Aaron Melnek Kate Hibbard-Gibbons Kristyn Neckles Heidi Jache, M.D. Certified Medical Assistant Emily Brunton Chris Henry Staci Gambill Stephanie Maccombs Suzanne Ferraro (L. Justin Wheeler) Patricia Mickunas, M.D Chadwick Wilt Certified Medical Katie O'Rourke

Ann Addington

Strategic Plan of the Ohio University Division of Student Affairs



For organizational charts: https://www.ohio.edu/student-affairs/organizational-chart

Offices within the division are Counseling and Psychological Services, Survivor Advocacy Program, Career Leadership and Development, Campus Recreation, Dean of Students Office, Campus Involvement Center, Community Standards & Student Responsibility, Event Services, Housing & Residence Life, Culinary Services, Bobcat Depot, and Regional Campus Retail Operations.

Mission of Ohio University Counseling and Psychological Services

Counseling and Psychological Services facilitates and supports the educational mission of Ohio University and the strategic plan of the Division of Student Affairs. Our aim is to enhance the personal development and academic success of students by providing quality clinical, consultation, and training services.

In seeking to accomplish our mission, we are committed to:

- Excellence in all of the counseling, psychiatric services, crisis intervention, outreach, consultation, training, and referral services we provide to the Ohio University community;
- Respect for differences and continual work toward creating a safe, affirming, and inclusive environment for all individuals;
- Collaboration to sustain our high standards of productivity and wellness.

Counseling and Psychological Services Diversity Statement

CPS affirms a commitment to advocating for respect, dignity, and inclusion throughout the OHIO community. We acknowledge the impact discrimination in all forms has on wellbeing and strive to foster a more culturally conscious environment in which we serve students. The staff of CPS values the unique contribution of intersectionality to the identity development of people. We recognize how themes of power and privilege inform policies, practices, and events that impact the lives of our students. We use this appreciation to develop ongoing cultural awareness that enhances the work we do.

Mission of Ohio University Doctoral Psychology Internship Training Program

The mission of Counseling and Psychological Services (CPS) doctoral psychology internship training program at Ohio University is to provide a generalist practitioner training in the areas of psychological counseling, education, and consultation. We strive to offer services that promote emotional, physical, and social well-being for Ohio University students facing adjustment and developmental challenges, as well as a broad range of psychological problems while respecting and appreciating all cultural identities of our student population. Further, our goal is to prepare generalist practitioners with the knowledge and skills needed for successful entry-level practice of psychology careers.

Philosophy of Training

Counseling & Psychological Services (CPS) at Ohio University offers a Doctoral Psychology Internship based on a Developmental Mentorship training philosophy. Our program is designed to build upon previously acquired skills and knowledge, fostering the competencies for delivering professional psychological services. We provide graduated learning opportunities with increased responsibility as the training year progresses, and focus on the developmental process and transitions of interns as they move from student/learner in the classroom, to learner/practitioner in the field, to entry-level professional psychologist.

The internship year begins with staff assessment of entering interns' skills, and progresses with facilitated, active involvement in professional activities, culminating in the interns' ability to function as independent, self-directed clinicians. This progression is guided by a practitioner orientation, which emphasizes skillful, ethical, and culturally competent clinical practice and intervention. The practitioner orientation is rooted in applied psychology and at CPS includes extensive training in: diagnosis and triage, individual and group therapy, outreach and consultation, provision of supervision, and training. Throughout the internship experience, developmental themes are observed and fostered in clinical work, clinical supervision, evaluation, and training.

The developmental focus of this model highlights the parallel process that occurs between clients' self-development, interns' development of their professional selves, and the transitions of the academic and training year. The developmental perspective informs interns' work with a clinical population experiencing a range of life-phase issues, from normative adjustment issues to major mental illnesses that draw on developmental theory.

Our staff members are strong generalists with a variety of specialty areas. As part of their professional development, interns may choose an area of clinical/theoretical focus during the internship year, and apprentice with a "mentor" in a supportive relationship marked by an individualized pace of learning. This learning is enhanced by the development of safety and trust between apprentice and mentor, which allows for appropriate levels of self-reflection and challenge. Supervisors will communicate about the content of the apprenticeship relationship when ethical violations or other issues of competence arise, when general feedback regarding an intern's professional development is offered as part of our assessment process, and other times when deemed necessary given the supervisor's professional judgment.

The basic components of our training program are: 1) a strong emphasis on the growth process of the interns throughout their experience of socialization into the field of professional psychology, and 2) the amount and quality of supervision and mentoring the intern receives from experienced clinicians. As a staff, we are committed to providing ethical, culturally competent mentoring throughout the internship training experience. Intern growth and maturation occur under the guidance of licensed psychologists and other licensed mental health professionals, who value the reciprocal nature of learning within supportive and challenging mentor relationships.

<u>Summary of Core Doctoral Internship Experiences</u>

The goal of the doctoral internship program at Ohio University Counseling and Psychological Services is to provide training experiences that prepare interns to function as generalist psychologists. Although an effort is made to individualize the training program, there is a core set of standard expectations. These expectations include the following:

1. Interns are to work with a variety of clients, gaining experience not only with varying presenting concerns, but also across varying individual and cultural identity variables. Interns will have a

- weekly average of **13 -15 therapy hours**, which may include individual, and couples. Individual therapy is provided from a brief therapy model and clients are often seen every other week or less frequent.
- 2. Interns will provide **4 hours of drop-in coverage** weekly.
- 3. Interns will co-lead a minimum of **2 therapy, support, or psycho-educational groups** during the internship year. One of the three groups must be a process group.
- 4. Interns will participate in at least **5 outreach interventions each semester**, including development and presentation of workshops, staffing display tables, and being present at student events on campus.
- 5. Interns will **provide supervision** to a trainee or graduate assistant during the fall and spring semesters. Supervision will include weekly meetings, tape review time, and giving evaluation/feedback to the student.
- 6. Interns will **be evaluated formally by their supervisors** at the end of each semester. These evaluations will assess current strengths and weaknesses and will be used to focus on the next semester's supervision. Less formal evaluations will be scheduled with the interns' individual supervisors and the Training Director. Interns will evaluate their supervisors each semester and formally and informally evaluate their internship program at the end of the year.
- 7. Interns will spend **4 hours per week in training seminars** (PIE, Clinical Training Series, and Group) that combine didactic and experiential learning.
- 8. Interns will increase their awareness, knowledge, and skills about multicultural issues in a variety of ways including participation in monthly Diversity Dialogues. During the final 3-4 months of internship, interns will each **facilitate a Diversity Dialogue** on a topic they may choose in consultation with the Training or Diversity Committees during spring semester.
- 9. Interns will each complete an **apprenticeship** for the training year. The apprenticeship may focus on an area of clinical interest or other aspects of university counseling center function.
- 10. Interns are expected to present a sample of their clinical work that is informed by current research regarding the treating modality, client population, and clinical practice. This presentation will be given to the entire staff early during spring semester. Preparation will be one of the focuses of the Client Conceptualization section of the Clinical Training Series.

Aims of the Program:

- 1. To promote the development of general **professional identity, knowledge, and competencies** for entry into professional practice as a psychologist.
- 2. To promote a broad and general range of **clinical competencies** necessary for entry into professional practice as a psychologist.
- 3. To promote the development of both a broad and a general range of **outreach**, **consultation**, **supervision**, **and training competencies** necessary for entry into professional practice as a psychologist.

4. To promote the development of knowledge, skills, and awareness of the role of **cultural and individual diversity** in the professional practice as a psychologist.

<u>Profession Wide Competencies:</u>

1. Research

- a. Integration of science and theory in professional practice
- b. Critically consumes research to inform evidence-based practice
- 2. Ethical and legal standards
 - a. Knowledge and application of Ohio State Laws and APA ethics code and standards in professional practice
 - b. Knowledge and application of agency policy and procedures
 - c. Identifies, discusses, and addresses ethical dilemmas as they arise and applies ethical decision making processes
- 3. Individual and cultural diversity
 - a. Increases multicultural self-awareness
 - b. Increases awareness of the variables that impact the delivery of psychological services to diverse population
 - c. Increases knowledge of the role of cultural and individual diversity in the delivery of psychological services
 - d. Demonstrates understanding of human behavior within its context (eg., family, social, societal, and cultural)
 - e. Increases skill in the delivery of psychological services to diverse populations
 - f. Knowledge and skills in social justice
- 4. Professional values, attitudes and behaviors
 - a. Consolidation of identity as a psychologists that reflects professional values
 - b. Actively seeking and demonstrating openness to feedback and supervision
 - c. Engages in self-reflective practice regarding professional values, attitudes and behaviors
- 5. Communication and interpersonal skills
 - a. Engages in self-reflection regarding one's communication ability and style
 - b. Communicates and collaborates effectively with other professionals, peers, and clients
 - c. Responding professional complex interpersonal situations with a greater degree of independence as they progress across levels of training
 - d. Actively seeks and demonstrates openness to feedback about interpersonal communication style

6. Assessment

- a. Demonstrates competence in initial psychological assessment
- b. Demonstrates basic skills related to documentation of initial assessment, diagnostic classification, and treatment planning

- c. Demonstrates current knowledge of diagnostic systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology
- d. Demonstrates the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process

7. Intervention

- a. Demonstrates competencies in individual psychotherapy
- b. Demonstrates competencies in group psychotherapy
- c. Demonstrates competencies in crisis intervention
- d. Effectively documents psychological interventions, including case conceptualization, treatment planning, and therapeutic process and outcome
- e. Professionally discusses clinical interventions in clinical team meetings and with clinical supervisor

8. Supervision

- a. Demonstrates competence in provision of supervision
- b. Appropriately documents supervision activities and consults with umbrella supervisor and other supervisors as necessary
- c. Demonstrates awareness and knowledge of appropriate ethical and legal standards
- d. Demonstrates awareness and knowledge of individual and cultural diversity as it impacts provision of supervision

9. Consultation/interdisciplinary skills

- a. Demonstrates competence in providing consultation and implementing outreach to nonmental health professionals and students in a university setting
- b. Demonstrates competence in providing professional assistance in response to a client's or consultee's needs or goals.
- c. Demonstrates awareness of potential ethical dilemmas in outreach and consultation

Overview of the Training Program

Training Activities/Seminars

Professional Issues and Ethics Series (1.5 hours/week, all year): This seminar addresses ethical issues, multicultural and diversity issues, and issues of professional development and entry into the field of professional psychology. Presentations by staff members, community professionals, and interns cover a wide range of topics based on the intern group's needs and special topics that are of interest to them.

Supervision of Supervision Seminar (2 hour/week, fall semester): Provides training and preparation for supervision of counseling and psychology trainees at CPS.

Group Supervision of Supervision (2 hours/wk, fall and spring semester): Provides training and preparation for supervision of counseling and psychology practicum students, and trainees at CPS under supervision of licensed staff.

Group Therapy Seminar/Supervision (1 hr/wk, fall and spring semesters): Interns meet to learn about group facilitation and to get supervision for their ongoing therapy groups at CPS.

Consultation/Outreach Seminar/Supervision (summer intensive seminar and scheduled as needed throughout the year): This seminar will provide an overview of theory, models, and techniques of consultation and outreach, including: how to design programming, conduct a needs assessment, etc. Intern activities in the areas of consultation and outreach are supervised at this time and the amount of time in supervision decreases over the year as interns operate more autonomously. The Outreach Coordinator will meet with the interns, as a group, at least twice during each of the academic semesters.

Clinical Training Series (1.5 hours/week, all year): This seminar series will address differential diagnosis, evidence based treatments, and client conceptualization. Differential Diagnosis will provide an overview to the DSM-5. Evidence based treatments will focus on those treatments used with common presenting issues at a University Counseling Center (e.g. anxiety, depression, substance abuse, trauma). In client conceptualization, interns will have the opportunity to develop their conceptualization skills and present more formal client presentations. Interns and staff are invited to contribute alternate theoretical perspectives, research or treatment information, as well as feedback to the presenter.

Summer intensive seminars (approx. 25-30 hours per week, approx. 3 weeks in summer): Brief, intensive seminars are offered in summer to get interns "jump-started" so they can begin providing services in a wide range of areas for fall semester. These seminars are offered in the following areas: alcohol and substance abuse treatment, group counseling, couples counseling, clinical interviewing, outreach, and emergency services and crisis intervention.

Clinical Team Meeting (1 hour/week, all year starting in fall): All interns join with the clinical staff for one hour weekly clinical consultation meetings. This meeting provides an opportunity to distribute new clients as well as receive support, feedback, and suggestions for particularly interesting and challenging clients, or those where some factor(s) present potential ethical conflicts, etc. This is also a forum to discuss emerging critical clinical issues from the university community: recent university crises, or emerging situations likely to lead to crisis, such as severe conflict in a program, a student death, an attempted suicide, etc. This meeting is used, at times, for professional development topics of interest to the staff. The meetings are informal in format, and trainees as well as staff are invited to bring in relevant information, viewpoints, or case material.

Diversity Dialogues (1.5 hours, once a month): Interns are required and staff and trainees are strongly encouraged to participate monthly in the diversity dialogues. Topics are collaboratively identified and address a wide variety of diversity issues based on the interests and needs of current staff, interns, and trainees. The goals are to promote ongoing personal reflection on diversity issues in order to increase awareness and knowledge about these issues and to create a safe environment to have genuine discussion about these issues. The format is varied and may include reading and discussing articles, watching videos, having panel presentations from campus or community members, or staff presentations.

Individual Clinical Supervision (2 hours/week, all year): Intern supervision is a priority of the program and is geared to the intern's level of professional development. Each intern receives a minimum of two hours of individual supervision weekly. All primary supervisors are licensed psychologists. As might benefit the intern, other staff contribute supplementary supervision in areas such as group work, consultation and outreach, etc. Interns will be evaluated quarterly by each of their clinical supervisors (see Quarterly Intern Performance Evaluation) as well as receive evaluative feedback in each of the supervision/seminar areas. Each intern also has a broader evaluation given twice yearly, written by his or her primary supervisor. This evaluation will include feedback from all staff members who had worked with the intern during that evaluation period and will be shared with the intern's home department (see Six Month Intern Performance Evaluation). Evaluation will be discussed in more detail in the section on evaluation.

Apprenticeship Supervision (1 hour every other week, see list of apprenticeships):

While most CPS clinicians serve as generalists, they have expertise in a number of different areas, whether clinically (i.e., eating disorders, substance abuse), in other services areas (i.e., diversity training, group coordination, outreach), or administratively (i.e., training, clinic management) for which they offer specific mentorship. Interns will need to choose one 'major' rotation for apprenticeship that they focus on for the entire year. It is expected that interns will integrate their apprenticeships into their requirements so that their hours stay within reasonable limits. The apprenticeship supervisor and intern will together with the training director to develop a contract to clarify what are the goals of the apprenticeship experience and expectations for both the supervisor and intern. Interns should contract for their time and activity commitment with their apprenticeship mentor prior to the start of fall semester.

Administrative/Staff Activities

Administrative Staff Meeting (1.5 hr/wk, all year): All interns and the full staff meet together once a week, for one hour to discuss emerging issues on campus, changes in our policies and procedures, concerns, or information important to all staff. Trainees as well as full staff are invited to bring in topics and concerns to be discussed.

Meeting with the Training Director (2 hr/month, fall and spring): The training director meets with the interns individually once per month and as a group once per month. This serves as an opportunity to answer administrative questions, discuss any business items, air problems, process, and relax together.

Committee Work (variable): As part of their apprenticeship experiences and interests, interns may become involved in committee work either in CPS to further our own goals, for the Division of Student Affairs, or for the Ohio University campus at large. CPS committees include, Eating Disorder Support Team, Clinical Services Committee, Diversity Committee, and Training Committee.

Professional Development Time (variable): Interns are allowed to use professional development time to attend conferences, go on job interviews, attend home program meetings for dissertation and graduation, etc. All professional development time must be submitted in writing and approved by the Training Director.

Direct Services

Clinical Services: Interns are required to provide approximately 13-15 hours in direct clinical services to individuals and couples, as well as conduct group therapy sessions throughout the year (see Time Commitment Chart for a breakdown of the hours). They are also required to provide emergency walk-in services in rotation with the rest of the professional staff. Clients at CPS represent a wide range of backgrounds and identities, presenting concerns, and levels of clinical complexity. Interns must maintain a minimum of 13 and up to 20 hours, weekly to meet training requirements that a minimum of 25% of the intern's time, over the course of the internship year (500 of the 2000 hours), be spent in direct clinical service. Each intern will be able to develop some specific clinical interests within an apprenticeship structure and broad generalist skills in the counseling center.

Consultation and Outreach Services: Interns engage in regular outreach and consultation programming for CPS. Over the course of the year, each intern must provide a minimum of five programs per semester for the fall and spring semesters. A maximum of one outreach program may be a "tabling" event per semester. Interns will meet with the Outreach Coordinator during the regularly scheduled Outreach Seminar to develop outreach programs, identify opportunities to engage in programming, and receive supervision of their programming.

Supervision of Practicum Students and Trainees: Interns will be required to provide direct supervision to one clinical or counseling trainee/practicum student during fall and spring semesters. These trainees/practicum students see between 7-9 clients and their supervision is divided between two supervisors, one of whom will be an intern. Part of the supervision will involve reviewing tapes and notes of the supervisee. Training and supervision of supervision will be provided throughout the year in the form of a 2-hour supervision of supervision meeting during fall and spring semesters.

List of Potential Apprenticeships

NOTE: Not all apprenticeships will be offered every year. You will need to talk with staff members to determine the availability of various offerings. Apprenticeships vary in their time commitment and intensity, including time involved in direct service and readings/trainings. Meetings with apprenticeship mentors will be one hour every other week. Interns are expected to integrate their apprenticeship interests into their expected hours for the agency. Apprenticeships are offered in a variety of areas or may be designed by the intern in consultation with the staff.

Apprenticeships related to specific presenting concerns

The intern completing an apprenticeship that is related to an area of clinical interest will work with their supervisors and the clinical director to have a significant portion of their client load related to these presenting concerns or client populations.

Eating Disorders

An intern apprenticing in this area would develop more in-depth experience with clients who have clinical or subclinical eating disordered behaviors (approximately 20-25% of the interns' client load would be clients with ED). The intern would meet regularly with the ED support team and would be responsible for organizing Eating Disorders Awareness Week on campus. The intern may also choose to dovetail their consultation and outreach projects to fit with their interest in eating disorders.

Motivational Interviewing/Substance Abuse

Alcohol and other drug use present a huge challenge to student development and wellbeing. An intern wanting extra experience in this area may choose to meet with our AOD specialist and develop more in-depth knowledge about and skill using motivational interviewing. Approximately 20-25% of the interns' client load would be clients with AOD issues.

Trauma/Sexual Assault

An intern apprenticing in this area would develop more in-depth experience with clients who have experienced a sexual assault, a portion of their case load would be sexual assault survivors. They may also choose to facilitate a sexual assault survivors group. The intern may choose to attend committee meetings and consult with offices on campus that are involved in sexual assault prevention, policy development, and intervention, including The Women's Center, Dean of Student's Office, and OU's Sexual Assault Advocate/Survivor Advocacy Program. Approximately 20-25% of the interns' client load would be clients with trauma related issues.

Sexual and Gender Identity

CPS collaborates regularly with the LGBT programming office and provides clinical services for lesbian, bisexual, gay, transgender, nonbinary, gender expansive and gender diverse students across campus. An intern apprenticing in this area would have about 20-25% of their client load designated for clients for whom gender or sexual identity development is a presenting concern. They may also run Spectrum, which is a trans and gender diverse/expansive group, or another support group for the LGBT community. Interns may also choose to do outreach and consultation with the LGBT center on campus. If interns are interested in the gender identity aspect of this apprenticeship, they may have opportunities to learn how to write letters for gender confirming surgery.

International Students

CPS collaborates with the International Student and Faculty Services office and provides clinical services to international students. An intern apprenticing in this area would have 20-25% of their client load designated for international students. They may also work with the ISFS office to provide programming and outreach adapted to the needs of international students.

<u>Apprenticeships related to other counseling center functions</u> Group Therapy

An intern choosing a more intensive experience with group will have the opportunity to facilitate an additional therapy group as well as complete a project related to group therapy. This project could include engaging in research about group therapy, developing a therapy group to include conceptualization as well as an outline for sessions, various administrative tasks related to group therapy, or some other project discussed with the Group Coordinator.

Outreach

An intern can work directly with the outreach coordinator, learning how outreach programming is organized and managed, how to connect staff with expertise to potential clients needing outreach and consultation. Liaison work may also be a more intensive focus for the intern who is completing an outreach apprenticeship. The intern may also assist the center's social media team to generate or find content to publish via social media.

Suicide Prevention

An intern can work directly with suicide awareness and prevention efforts within CPS and across campus. Activities may include providing leadership with the student organization Bobcats for Suicide Prevention, assisting with maintenance and revision of materials for Bobcats Who Care (OU's suicide prevention gatekeeper training program) and organizing activities for suicide prevention and awareness week on campus

Diversity and Intercultural Communication

An intern engaged in this apprenticeship may develop more in depth experience in outreach and clinical work with diverse students and student groups. Activities may include participation on the diversity committee, coordination of center's diversity dialogues, and an increase in client load of clients with diverse cultural and community backgrounds.

Crisis

An intern engaged in the Crisis apprenticeship will be seeking experiences to enhance crisis management skills. Activities may include provide on-call and triage services and assisting in some hospitalization tracking, and reviewing center procedures related to hospitalization and crisis.

Apprenticeships related to center administration

Training

An intern engaged in the Training apprenticeship will be focused on learning about current training issues within a center that includes various levels of training—doctoral interns as well as graduate assistants and trainees from various mental health provider disciplines. Activities may include participation on training committee, discussing scholarly work, assisting with matters pertaining to APA accreditation, and modifying training requirements for trainees at CPS.

Clinic Administration

An intern engaged in the Clinic Administration apprenticeship will focus on learning about activities related to successful functioning of the clinic. The apprentice may participate in clinical services committee, assist with revision of center policies and procedures, and engage in program evaluation or other projects related center functioning.

Sample Weekly Time Allocation

Direct Clinical Services	Hours Committed
 Ongoing clients 	13-15
 Couples counseling 	0-2
 Group work 	2-4
• Drop-in	4.0
Consultation/Outreach	
 Outreach presentations 	0-2
 Preparation for presentations 	0-1
 Consultation services 	0-1
Receiving/Giving Supervision	
Individual supervision	2.0
 Supervision of supervision 	2.0
 Apprenticeship supervision 	0.5
 Provision of supervision to trainee 	1.0
 Preparation for supervision 	2.0
Training and Professional Development	
Clinical Skills Series	1.5
 Professional Issues and Ethics Seminar 	1.5
Group therapy seminar	1.5
Diversity brown bags	1.5/month
Committee work	0.5
 Clinical team meetings 	1.0
Administrative/Other Activities	
Administrative staff meeting	1.5
Meeting with training director	0.5
Paperwork/preparation	2.0
1 1	

Documentation of Hours

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

Total: 40-45 hours

Salary/Benefits

The stipend for the internship year is currently \$29,577.00. Interns receive a benefits package that includes health and dental insurance, vacation and sick time, professional development time, and retirement benefits commensurate with full-time, senior staff members. For more information about benefits, please contact the Ohio University HR Department at 740.593.1636.

Contact with Home Departments

Under normal circumstances, the home programs of interns are contacted in writing three times. The first contact occurs when the intern accepts an offer from CPS. A letter will be sent to the academic Training Director informing him/her of acceptance. The second and third contacts occur after the mid and end of the year evaluations. These reports include the intern's progress in the program, a description of the training and service activities in which the intern engaged, and a summary of the evaluation reports written by the supervisors. In the case that serious concerns are experienced about an intern, the home department is contacted early on in the remediation process as outlined in the section on "Evaluation, Disciplinary Actions, Appeals and Grievances Procedures."

Ohio University Counseling and Psychological Services does not complete additional academic program contracts or evaluations. 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 for Evaluation

- 1. Every six months throughout the year, interns are given verbal and written feedback about their progress in the competency areas listed under the objectives of the internship program. Semester evaluation periods include feedback from seminars, group supervisions, and individual clinical supervision. In addition, interns give their seminar facilitators, supervisors, and the training director feedback about the program, their training experiences, and their supervision. Beside the specific evaluation forms designed for the separate seminar areas, an overall Intern Performance Evaluation form is completed by individual clinical supervisors. This form covers primary areas of competency that are appropriate for clinical work, including professional and ethical conduct, therapy, assessment, multicultural skills, etc. Just before this evaluation is due, the training faculty meets to discuss their experiences with each intern, including the strengths and weaknesses, growth areas, and goals that they would suggest to the intern, in order for the staff to clarify their feedback and catch any potential areas that might need more attention. Information from that meeting and from all evaluations is shared with the intern by the relevant supervisor or seminar facilitator. A copy of the Six-Month Intern Evaluation is sent to the home department of each intern after it has been signed and a copy is placed in the intern's personnel file. Copies of all written evaluative material are placed in the file, as well, throughout the year.
- 2. Mid-way through each semester, training staff will meet to discuss intern progress and interns will be given informal, verbal feedback by their primary supervisor based on the recommendations of the staff at this time. If a problem is identified at this time, feedback may be documented in writing. Copies of this feedback may be placed in the intern's file and the home program may be contacted if it is determined that this level of intervention in warranted.
- 3. The six month evaluation form that is sent to the home department will be accompanied by an overview letter to the Director of Clinical Training of that department from the Training Director with a cover letter. Any concern about an intern's progress through the program is first discussed with the intern, then if a supervisor feels that a concern is not being addressed adequately, he or she approaches the Training Director who then determines the next course of action whether it be more intensive supervision, consultation with the training committee or other experienced supervisory staff, or consultation with the Director. We make this process as transparent as possible to the intern, while also protecting the intern's privacy.
- 4. The supervisor and intern discuss written evaluations prior to their submission to the Training Director and before inclusion in the intern's file. Any evaluation report must be signed by the individual supervisor and the intern. The intern's signature on the document **does not** necessarily reflect agreement with the content, but rather that the document has been presented to the intern. The intern may provide a written reaction to the evaluation report. The evaluation report and any additional material must be submitted to the Training Director for inclusion in the intern's file.
- 5. Interns are expected to evaluate their individual supervisors at the end of each semester (See Evaluation of Internship Supervision). A 1-hour exit interview with the Training Director is scheduled at the end of the year for interns to have the opportunity to express feedback about the strengths and weaknesses of the internship program itself.

Due Process and Grievance Policy

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. 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. For a full description of Ohio University Counseling and Psychological Services Due Process and Grievance Policy, see Section 8 of the Policies and Procedures for Training. A hard copy of the Policies and Procedures for Training will be made available to you. You can also access electronic copies on the CPS shared drive and on the CPS training website.

Potential After Hours Work Commitments: Non-crisis

There are three times during the internship year in which interns may be required to work at events outside of normal work hours.

The first of these is Opening Weekend. During opening weekend, Residential Housing, the Campus Involvement Center, Event Services and the Campus Recreation staff are already working events. CPS staff along with other Student Affairs members typically work one two-hour shift opening weekend during Friday night's Bobcat Bash or a shift during Sunday afternoon's President's First Year Convocation.

The second of these events is Halloween. In an effort to keep Ohio University and surrounding areas safe, the university utilizes a program known as "Green Jackets." This program was put in place to provide an additional presence on and around campus during this celebration. Interns typically patrol the streets of Athens during the nationally known Halloween block party and be a presence that is available to students and visitors who might be in need of assistance. We are support staff. Our job is not to police but to offer directions and assistance to those in need on this very busy evening. Interns will be partnered with another staff member, given a flashlight, a walkie-talkie and a green jacket with the words "STAFF" on the back that must be worn during your entire shift. Shifts begin around 9:30PM and end between midnight and 2 am.

The final of these events is Graduate and Undergraduate Commencement Ceremonies that occur in December and early May at the end of the academic semesters. Interns, along with many other Student Affairs staff members typically serve as ushers and support staff for the entire commencement ceremony. The event lasts several hours and support staff is encouraged to wear comfortable shoes as they will be on their feet for several hours.

An additional opportunity for interns to participate in a campus-wide event is as a Go Green Guide. Division staffs are encouraged to help out with Go Green during the work days of Thursday and Friday of move-in. Staff typically act as guides and helpers as the students move into their residential halls.

These events are a way for CPS to participate with our colleagues in Student Affairs as we welcome new students to campus, help them get settled in, help them celebrate, and also to wish them well as they finish their time with us. It is a way for us to be a visible and active part of our University community and it is one that we value as staff members.



DOCTORAL PSYCHOLOGY INTERNSHIP TRAINING CONTRACT

COUNSELING AND PSYCHOLOGICAL SERVICES

OHIO UNIVERSITY

Intern:		
Fall Semeste	er:	
Spring Seme	ester:	
Summer:		

Please complete hourly commitment. DIRECT PSYCHOLOGICAL SERVICES Individual Counseling/Therapy Couples Counseling/Therapy Group Therapy (process), Group title: Group Therapy (support/educational), Group title: Crisis Drop-In Shift

Outreach	Number of hours
Programming and Outreach Provided	
Preparation for Programming and Outreach	
Liaison Service Provided	
Miscellaneous Outreach Activities	
Training/Professional Development	Number of hours
Clinical Skills Seminar	
Professional Issues and Ethics Seminar	
Group Therapy Seminar/Supervision	
Supervision of Supervision	
Diversity Dialogue	
Committee Work	
RECEIVING OR GIVING SUPERVISION	Number of hours
Individual Clinical Supervision	
Group Supervision of Group Work	

Supervision of Supervision	
Apprenticeship Supervision	
Intern Provision of Supervision to Trainee	
Professional/Scholarly Activities	Number of hours
Dissertation, Conference, Readings, Job Search, etc.	
Administrative Activities	Number of hours
Administrative and Clinical Staff Meetings	
Administrative and Clinical Staff Meetings Meeting with Training Director	
_	
Meeting with Training Director	
Meeting with Training Director Clinical Preparation and Management (paperwork)	
Meeting with Training Director Clinical Preparation and Management (paperwork) Preparation and Management for Group Treatment (paperwork, co-leader meetings)	
Meeting with Training Director Clinical Preparation and Management (paperwork) Preparation and Management for Group Treatment (paperwork, co-leader meetings) Preparation for Supervision Given (review of tapes, readings, etc.)	

Apprenticeship Choices (Your 1 st choice should be reflected in the hours above)			
1 st :			
2 nd :			
Signature of Intern	Date		
Signature of Training Director	Date		

Template for Baseline Expectations Per Week		
DIRECT PSYCHOLOGICAL SERVICES	Number of hours	
Individual Counseling/Therapy	13.0-15.0	
Couples Counseling/Therapy	0-2.0	
Group Therapy (process), Group title:	2.0	
Group Therapy (support/educational), Group title:		
Crisis Drop-In Shift	4.0	
Outreach	Number of hours	
Programming and Outreach Provided	0-2.0	
Preparation for Programming and Outreach	0-1.0	
Liaison Service Provided	0-1.0	
Miscellaneous Outreach Activities		
Training/Professional Development	Number of hours	
Clinical Skills Seminar	1.5	
Professional Issues and Ethics Seminar	1.5	
Group Therapy Seminar/Supervision	1	
Supervision of Supervision	2.0	
Diversity Dialogue	1.5/month	
Committee Work	1.0- 2.0/month	
RECEIVING OR GIVING SUPERVISION	Number of hours	
Individual Clinical Supervision	2.0	
Group Supervision of Group Work	(see above)	
Supervision of Supervision	(see above)	

Supervision of Apprenticeship	0.5
Intern Provision of Supervision to Trainee	1.0
Professional/Scholarly Activities	Number of hours
Dissertation, Conference, Readings, Job Search, etc.	
Administrative Activities	Number of hours
Administrative and Clinical Staff Meetings	2.0
Meeting with Training Director	0-1.0
Clinical Preparation and Management (paperwork)	4.0
Preparation and Management for Group Treatment (paperwork, co-leader meetings)	0.5
Preparation for Supervision Given (review of tapes, readings, etc.)	1.0
Preparation for Supervision Received (review of tapes, readings, etc.)	1.0
	40-45 hours/
Total:	week



EVALUATION OF DOCTORAL INTERN

COUNSELING AND PSYCHOLOGICAL SERVICES

OHIO UNIVERSITY

Intern:			
Individual Supervisor:	August-January	Individual Supervisor:	January-July
Group Supervisor:	August-January	Group Supervisor	January-July
Supervision Supervisor:	August-January	Supervision Supervisor	January-July

Evaluation is most beneficial when it is a collaborative process to facilitate growth, pinpoint areas of strength and difficulty, and refine goals. Evaluation is a tool for assessing performance and a vehicle for exchange. At the end of the evaluation period, the intern's competencies in each of the areas designated below should be discussed and evaluated.

DIRECTIONS: Below are several general areas of professional competencies, each with a set of specific skills or behaviors for evaluation. Generally, interns are expected to achieve an average score of "4" with no score lower than a "3." By the end of internship, interns should achieve an average score of "5" with no score lower than a "4" on an asterisk (**) item in order to pass internship. Please comment on evaluations below expected level.

Rating Scale

- Level 1. Performs inadequately for an intern in this area. Requires frequent and close supervision, and monitoring of basic and advanced tasks in this area.
- Level 2. Shows beginner-level competence in carrying out routine tasks in this area. Requires significant supervision and close monitoring in carrying out advanced tasks in this area.
- Level 3. Requires only light supervision in carrying out routine tasks in this area. Requires training and ongoing supervision for developing advanced tasks in this area.
- Level 4. Displays mastery of routine tasks in this area. Requires ongoing supervision for performance of advanced skills in this area. At times, the intern spontaneously demonstrates advanced skills in this area.
- Level 5. Displays mastery of routine tasks in this area. Often performs at the advanced level. Requires periodic supervision for refinement of advanced skills in this area.
- Level 6. Displays mastery of routine tasks in this area. Could continue to benefit from some supervision on advanced and/or non-routine tasks in this area.
- Level 7. Performs at the independent practice level in this area and is capable of teaching others in this area. Performs without the general need of supervision, but consults when appropriate.

Aims of the Program:

- 5. To promote the development of general **professional identity, knowledge, and competencies** for entry into professional practice as a psychologist.
- 6. To promote a broad and general range of **clinical competencies** necessary for entry into professional practice as a psychologist.
- 7. To promote the development of both a broad and a general range of **outreach**, **consultation**, **supervision**, **and training competencies** necessary for entry into professional practice as a psychologist.
- 8. To promote the development of knowledge, skills, and awareness of the role of **cultural and individual diversity** in the professional practice as a psychologist.

Profession Wide Competencies:

10. Research

- a. Integration of science and theory in professional practice
- b. Critically consumes research to inform evidence-based practice

11. Ethical and legal standards

- a. Knowledge and application of Ohio State Laws and APA ethics code and standards in professional practice
- b. Knowledge and application of agency policy and procedures
- c. Identifies, discusses, and addresses ethical dilemmas as they arise and applies ethical decision making processes

12. Individual and cultural diversity

- a. Increases multicultural self-awareness
- b. Increases awareness of the variables that impact the delivery of psychological services to diverse population
- c. Increases knowledge of the role of cultural and individual diversity in the delivery of psychological services
- d. Demonstrates understanding of human behavior within its context (eg., family, social, societal, and cultural)
- e. Increases skill in the delivery of psychological services to diverse populations
- f. Knowledge and skills in social justice

13. Professional values, attitudes and behaviors

- a. Consolidation of identity as a psychologists that reflects professional values
- b. Actively seeking and demonstrating openness to feedback and supervision
- c. Engages in self-reflective practice regarding professional values, attitudes and behaviors

14. Communication and interpersonal skills

- a. Engages in self-reflection regarding one's communication ability and style
- b. Communicates and collaborates effectively with other professionals, peers, and clients
- c. Responding professional complex interpersonal situations with a greater degree of independence as they progress across levels of training
- d. Actively seeks and demonstrates openness to feedback about interpersonal communication style

15. Assessment

a. Demonstrates competence in initial psychological assessment

- b. Demonstrates basic skills related to documentation of initial assessment, diagnostic classification, and treatment planning
- c. Demonstrates current knowledge of diagnostic systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology
- d. Demonstrates the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process

16. Intervention

- a. Demonstrates competencies in individual psychotherapy
- b. Demonstrates competencies in group psychotherapy
- c. Demonstrates competencies in crisis intervention
- d. Effectively documents psychological interventions, including case conceptualization, treatment planning, and therapeutic process and outcome
- e. Professionally discusses clinical interventions in clinical team meetings and with clinical supervisor

17. Supervision

- a. Demonstrates competence in provision of supervision
- b. Appropriately documents supervision activities and consults with umbrella supervisor and other supervisors as necessary
- c. Demonstrates awareness and knowledge of appropriate ethical and legal standards
- d. Demonstrates awareness and knowledge of individual and cultural diversity as it impacts provision of supervision

18. Consultation/interdisciplinary skills

- a. Demonstrates competence in providing consultation and implementing outreach to non-mental health professionals and students in a university setting
- b. Demonstrates competence in providing professional assistance in response to a client's or consultee's needs or goals.
- c. Demonstrates awareness of potential ethical dilemmas in outreach and consultation

For All Supervisors			
ETHICS & PROFESSIONAL PRACTICE	Eval	Aim	Competency /Element
1. **Integrates science in professional practice (including research on college student development, relevant disorders, trends in college mental health issues, psychological theories, and evidence-based practice).		1	1a, 1b, 3c, 6c, 6d
2. **Demonstrates knowledge of and consistent adherence to Ohio mental health statutes, and APA ethical guidelines and standards.		1	2a, 2c
3. **Follows agency policy and procedures.		1	2b
4. Demonstrates an appropriate professional demeanor in appearance and behavior.		1	4a
5. Completes commitments professionally and promptly.		1	4a, 5b, 6b,7d
 **Utilizes supervision to address personal concerns to minimize interference with competent professional functioning, increase self- awareness, and consolidate professional identity. 		1,3	2c,4a, 4b, 4c, 7e
7. Identifies professionally challenging situations, and seeks supervisory guidance.		1,3	4b, 4c, 5a, 5c, 5d
8. Shows self-evaluation, self-direction, and motivation for professional growth.		1	4a, 4c, 5a
9. Monitors and takes action towards self-care.		1	4c
10. Establishes productive, culturally appropriate professional relationships with peers, supervisors, and staff.		1,4	3a, 5b
11. Conveys appropriate respect for the individual rights, personal dignity, and worth of all clients.		1,4	3b, 3c, 3d, 3f
Averaged Overall Level :			
Comments for the Evaluation:			

		For All Supervisors			
U:	SE OF S	SUPERVISION & TRAINING	Eval	Aim	Competency /Element
1.		gnizes the value of supervision and seeks consultation (e.g., for ns, areas of practice, or issues that need supervisory attention).		1,2, 3	3a, 4b, 5b 5c,7e
2.	punctu	ctive responsibility for learning in supervision (including ality, preparedness, organization, asserting training needs, and appropriate requests).		1,2	1a, 1b, 4a,4b,4c, 7d,7e
3.		ponsive to feedback and suggestions, and makes purposeful s in subsequent work.		1,2	3e, 4b, 5a, 5d, 7e
4.		pervision to develop self-awareness in clinical work (including ing own behavior, motives, affect, and countertransference).		1,2, 4	3a,3e,4a,4 b4c, 5a, 5d,7e
5.	**Accu issues.	rately acknowledges limited competence with particular clients or		1,2	3a, 5a
6.	Uses su	pervision to work on a professional identity.		1	4a, 4b
7.	profess	oaches supervision within appropriate boundaries (including using ional language and expression, differentiating supervision and all therapy, and an appropriate level of self-disclosure).		1	4a, 4b, 5a, 5b, 5c, 5d
8.		ates goals for supervision based on own, current developmental and communicates these to supervisor.		1,2, 4	4a,4c,5b,5c
		Averaged Overall Level :			
for	nments the luation:				

For Individual Supervisor				
INDIVIDUAL PSYCHOTHERAPY COMPETENCIES	Eval	Aim	Competency /Element	
 ** Competence in managing a diverse and increasingly complex clinical caseload. 		2, 4	3e, 3d, 7d	
 ** Demonstrates knowledge of theories, techniques, and research relevant to individual psychotherapy. 		1, 2, 4	1a, 1b	
3. ** Manages the interpersonal dimensions of therapy (including the use of empathy, the self, personal style, and transference and countertransference).		1, 2	3e, 4c, 5d, 7a	
4. ** Manages the therapeutic process effectively (including establishing a relationship, setting the frame, managing crisis, and termination).		2, 4	6b,7a,7c	
5. ** Conceptualizes client concerns in a way that usefully guides and is consistent with the therapy process, goals, and interventions, and incorporates appropriate diversity and developmental issues.		2, 4	3b, 3c, 3d, 6c, 6d,7d	
6. ** Demonstrates competence in formulating diagnoses.		2, 4	6b, 6c, 6d	
7. Develops, articulates, and follows a treatment plan.		2, 4	6b, 7d	
8. Identifies, is sensitive to, and appropriately uses and manages:				
a. Confrontation		2, 4	7a	
b. Interpretation		2, 4	7a	
c. Feedback		2, 4	7a	
d. Summarization		2, 4	7a	
e. Transference/Countertransference		2, 4	4c, 7a	
9. Applies features of the brief-therapy model when appropriate (including client selection, goal setting, and maintaining focus).		2, 4	6b, 7a, 7d	
10. Develops interdisciplinary collaboration and coordination with others (including psychiatrists, group therapists, medical personnel, hospital-based emergency services, services for students with disabilities, and advocacy).		2,3	5b, 7e, 9b	
11. Keeps clinical documentation of individual therapy sessions in accordance with agency, professional, and legal requirements.		1, 2	2a, 2b, 6b, 7d	
Averaged Overall Level :				

Comm for the Evalua	е				
		For Group Supervisor			
GRO	UP PS	YCHOTHERAPY COMPETENCIES	Eval	Aim	Competency /Element
1. D	emons)	trates group conceptual and assessment skills.		2	7b
	Can arti ractice	culate a theoretical framework and translate that theory in group		2	7b
	* Displ process	ays understanding of the influence of culture/diversity on group		2, 4	3c, 7b
4. A	pprop	iately evaluates a client's fit and readiness for group (screening).		2, 4	6a, 7a, 7b
	_	zes the developmental stages of the group and determines iate interventions to facilitate transition to the next stage.		2	7b
6. *	* Reco	gnizes and facilitates processing of group dynamics.		2	7b
7. *	* Can	work collaboratively and effectively with a co-therapist.		1, 2	5b, 5d, 7b
8. F	acilitat	es effective termination of group.		2	7b
		competence in clinical documentation of group therapy sessions dance with agency, professional, and legal requirements.		1,2	2a, 2b, 7d
		Averaged Overall Level :			
Comm for the Evalua	е				

	For Individual Supervisor						
ΙN	ITIAL PSYCHOLOGICAL ASSESSMENT COMPETENCIES	Eval	Aim	Competency /Element			
1.	** Establishes rapport and gathers relevant data at intake (including clients' presenting problems, symptoms, treatment history, familial and sociocultural history, strengths, and risk factors).		2, 4	3d, 5b, 6a, 7a			
2.	** Provides immediate clinical interventions, as needed, to the client (e.g., empathic listening, cognitive-reframing, psychoeducation, crisis intervention).		2, 4	7a			
3.	Can develop an initial case conceptualization and working diagnosis taking into account human development and diversity issues.		2, 4	3d, 6c, 6d, 7d			
4.	** Performs an adequate risk assessment and assesses for suicidal/homicidal ideation.		2	6a, 7a, 7c			
5.	Evaluates client motivation and determines appropriateness of/readiness for counseling.		2, 4	5b, 6a, 7a			
6.	Is aware of and appropriately refers to campus and community resources, and communicates these appropriately to the client.		1, 2	9b, 7d			
7.	** Coordinates appropriate case disposition from triage and intake (including referrals and follow-up).		1, 2	6a, 6b, 7a, 7d, 9b			
8.	** Displays competence in clinical documentation of initial psychological assessment/intake sessions in accordance with agency, professional, and legal requirements.		1,2	2a, 2b, 6b, 7d			
	Averaged Overall Level :						
for	mments the iluation:		L	1			

		For Individual Supervisor	ı		
CR	ISIS INT	ERVENTION COMPETENCIES	Eval	Aim	Competency /Element
1.	Accuratel level of se	y assesses client presenting problem and needs, and determines everity.		2	6a, 7c
2.	** Appro	oriately assesses for suicidal/homicidal risk.		2	7c
3.	** Detern the crisis.	nines and performs the appropriate intervention to help contain		2	7c
4.		appropriate consultation and/or assistance from supervisor aling with crisis.		2	4b, 7c, 7e
5.	professio therapist	tes and coordinates effectively with interdisciplinary nals (including the Clinical Director, CPS Director, psychiatrists, s, medical personnel, emergency services, campus ators, and third parties).		1, 2	4b, 5b, 9b
6.		es appropriate case management and follow-up after the initial rvention (including facilitating referrals for follow-up care).		1,2	7c
7.		clinical documentation of crisis intervention and clinical consults ance with agency, professional, and legal requirements.		1, 2	2a, 2b, 7d
Ave	eraged Ove	rall Level :			
for	nments the luation:				

		For Outreach Coordinator				
Со	МРЕТЕ	NCIES IN PSYCHOLOGICAL CONSULTATION,			!	
	JTREAC MMUN	H, AND PREVENTIVE SERVICES TO UNIVERSITY ITY	Eval	Aim	Competency /Element	
1.		nsitive to ethical issues, confidentiality, and professional ries in consultation (including identifying who the client is).		1, 4	9a, 9c	
2.	and lim	is self professionally while demonstrating appropriate authority its of a CPS representative (including empathy, assertive limitappropriate referrals).		1, 4	5b, 9a	
3.	Is know	ledgeable of organizational dynamics and policy within a system.		1, 4	2b, 3c, 3f	
4.	Is effec	tive in addressing the needs of consultees.		1, 4	3c, 3f, 9a, 9b	
5.	Works	diligently to meet outreach programming obligations.		1, 4	9a, 9b	
6.		strates appropriate design and planning skills for educational and the programs and workshops.		1, 4	1a, 9a	
7.		fective in facilitating both cognitive (content teaching) and ntial learning (exercise/activity, discussion/processing).		1, 4	5b, 9a, 9b	
8.		strates appropriate presentation skills, as displayed through n feedback or observation.		1, 4	5b, 5d, 9a	
9.	Conduc efficacy	ts program evaluation to assess participant satisfaction/program		1, 4	1a, 5d, 9a	
		Averaged Overall Level:				
for	nments the luation			<u>L</u>		

	For Supervision Supervisor				
Со	MPETEN	NCIES IN PROVISION OF SUPERVISION	Eval	Aim	Competency /Element
1.	** Establ	lishes a climate of trust, support, and understanding with ee.		1, 3	8a, 8d
2.	with the	ately assesses skill level of supervisee and works collaboratively supervisee to define the supervision process and develop goals supervision session.		1, 3	8a, 8d
3.		pectful of individual differences and cultural contexts between or and supervisee.		1,3, 4	3a, 8a, 8d
4.		discussing individual differences and cultural contexts between or and client.		1, 3, 4	3a, 8a, 8d
5.		trates awareness of parallel process, activation and transference ntertransference issues in supervision.		1, 2, 3	3a, 4c, 8a, 8d
6.	Facilitate supervise	es development of conceptualization and intervention skills in ee.		1, 3	8a
7.	•	e supervisee become aware of transference/countertransference ena with clients.		1, 3	8a, 8d
8.		trates ability to provide accurate and specific feedback, including s and growth edges, to supervisee, faculty, and other training		1, 3	5b, 8a, 8b
9.	Demonst supervisi	trates knowledge of theoretical models relevant to providing on.		1, 3	1a, 8a
10.	_	ges discussion and exploration of differential diagnostic issues, ualization of client issues, and theory-based interventions with ee.		2, 3	6c, 6d, 8a
11.		specific treatment alternatives, readings, and/or resources for ees, as appropriate.		2, 3	1a, 1b, 8a
12.	** Accur	ately assesses issues and progress of clients on supervisee's .		2, 3	6a, 8a
13.	professio	es supervisee's professional and personal issues related to onal goals (including assessing strengths and growth areas, ng theoretical orientation, and exploring cultural perspectives).		1,3	8a, 8d
14.		des feedback in a timely and appropriate manner as well as ges and responds to feedback provided by supervisee.		1, 3	8a, 8b

15. Demon	15. Demonstrates openness to receiving feedback from supervisee. 2, 3 5b, 5d, 8a					
16. ** Displays competence in clinical documentation of provision of supervision in accordance with agency, professional, and legal requirements.				2a, 2b, 2c, 8a, 8b, 8c		
	Averaged Overall Level :					
Comments for the Evaluation:						

	For All Supervisors				
Di	versity & Multicultural Competencies	Eval	Aim	Competency /Element	
1.	** Demonstrates sensitivity to the contributions of diversity issues (including culture, ethnicity, nationality, geopolitical factors, gender and gender identity, sexual orientation, religion, disability, age, SES, privilege, and other sources of difference) when conceptualizing clients' concerns.		2, 4	3a, 3b, 3c, 3d	
2.	** Is aware of the ways in which own attitudes, values, beliefs, power, and cultural identity may affect the counseling process.		1, 4	3a, 3b, 4c	
3.	Adapts interventions in a culturally sensitive manner to improve client outcomes.		2, 4	3e	
4.	Initiates consultation/supervision for issues related to diversity in clinical work.		1, 4	3a, 4b, 7e	
5.	Demonstrates effective skills in building rapport with clients from both a universal and a culturally-specific orientation.		2, 4	3d, 3e, 5b	
6.	** Seeks supervision and consultation appropriately regarding cross- cultural and same-culture issues as they affect the therapeutic relationship, outreach activities, and other CPS services.		1, 4	4b, 7e	
7.	Demonstrates theoretical knowledge and ability to employ effective techniques with diverse populations.		1, 4	1a, 3c	
8.	Demonstrates skills in social justice interventions such as conflict resolution, collaboration, or advocacy.			3f, 9a	

	1, 3, 4	
9. Demonstrates knowledge of prejudice, discrimination, the dynamics of power and privilege, and interlocking systems of oppression.	4	1b, 3c, 3f
10. Demonstrates knowledge of models for designing, delivering, and evaluating system-based social justice interventions, outreach, and advocacy within the university community.	1, 3, 4	1b, 3c, 3e 3f, 9a
Averaged Overall Level :		
Comments for the Evaluation:		
\A/bat and the atmongths of this intern?		
What are the strengths of this intern?		
What are the areas for development?		
What are the areas for development?		
What are the areas for development?		
What are the areas for development?		
What are the areas for development?		

	Comments on Evaluation: (Please print evaluation a	nd have inter	rn write comme
rite in this	box; use another sheet of paper if needed)		
Total	Direct Clinical Hours at time of Evaluation:	Hours	S
Addi	tional Requirements by the End of the Internship Ye Intern completed and passed formal case presenta		Yes
No	Intern facilitated a total of 10 outreach presentation	ons	Yes
No			
	Intern co-facilitated a total of 3 groups. _ No		Yes
Si	gnatures		
	Intern's Signature	Date	
	(Intern signs when all evaluations are complete)	Dute	
	Individual Supervisor's Signature		Date

Group Supervisor's Signature	Date
Supervision Supervisor's Signature	Date
Training Director's Signature	Date

Self-Disclosure in Training

Given our Training program's goal to prepare effective psychotherapists with a consolidated professional identity, opportunities for personal exploration, and reflection occur throughout the year. When appropriate, interns are encouraged, but not required to explore the historical influences and personal data which may affect subsequent clinical practice. 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 Principals of Psychologists and Code of Conduct (APA, 2002).

An intern's willingness to address personal issues that affect the provision of professional services can be very helpful in resolving difficulties and in promoting professional growth. A primary 'thread' running through all of our training activities is the skill of "Awareness and Use of Self." A positive working alliance is essential for effective counseling or supervision and those require effective use of self by the counselor. We want interns to recognize, improve, and employ personal qualities that will assist in forming effective working relationships with clients, peers, other center staff, and other members of the university community.

The intern makes a choice about how much to share in supervision and interns are not penalized for choosing not to share personal information that does not directly impact their work with clients. We expect that our supervisory relationships will be characterized by safety, trust, and respect. Any exploration of an intern's personal qualities and history by a supervisor must focus on enhancing an intern's effectiveness in a helping relationship, as opposed to attempting to conduct therapy or for some other inappropriate purpose.

Self-disclosure in supervision may occur in a variety of different ways. The following are offered as example situations that illustrate this concept in action:

- The intern, with awareness that their professional activities may be impacted by personal experiences, may choose to disclose such experiences. Interns are welcome and encouraged to share personal information they determine may have bearing on their professional functioning.
- A supervisor may notice a single significant incident or pattern in behavior that suggests that an intern's professional behavior may be influenced by personal issues. The supervisor may ask the intern to reflect on this in the context of encouraging professional growth.
- An intern may manifest difficulties that have a severe enough impact on competent professional functioning to cause the initiation of the formal due process procedures. As part of the remediation, therapy may be recommended.

Within the context of these examples, intern's self-disclosure in supervision would be for the purpose of providing the best possible services to clients, as well as fostering the intern's

development as a psychologist. As such, these behaviors are consistent with the responsible and ethical practice of psychology.

Mental Health Resources in the Community

Jeanne Heaton, Ph.D.

3 West Stimpson Ave. Athens, OH 45701 740.707.1201

The Offices at Blue Line Drive

Behavioral Health Specialists
http://www.counselingatbluelinedrive.com/
17 Blue Line Drive
Athens, OH 45701
(740) 592-5689

Jason Weber, Med, LPCC-S, LICDC-CS

3 W. Stimpson Avenue, Suite 3 Athens, OH 45701 740-856-1463

Leah Jaquith, Ph.D.

Clinical Psychologist 3 West Stimpson Ave. Athens, OH 45701 740.591.0284

Beverly Williams

3 West Stimpson Ave. Athens OH 45701 740.707.1269

Statement on Professional Relationships

Fair Treatment

Even minor considerations accorded to one intern and not another can be perceived as differential treatment. Therefore, any opportunity for training should be offered to all equivalent level trainees and should be routed through the Training Director before final arrangements are made.

Mentoring

Bozeman and Feeney (2007) define mentorship as, "...the informal transmission of knowledge, social capital, and the psychosocial support perceived by the recipient as relevant to work, career, or professional development; mentoring entails informal communication, usually face-to-face and during a sustained period of time, between a person who is perceived to have greater relevant knowledge, wisdom, or experience (the mentor) and a person who is perceived to have less (the protégé)". CPS values and embraces a mentorship approach to training, both formally and informally. Interns will be formally matched with a mentor to facilitate their apprenticeship project and they may connect with other staff members with similar interests in a more informal ways. We believe these relationships can contribute to the richness and depth of training that occurs at CPS, we also recognize that mentorship relationships can create a "fuzziness" between the personal and professional. CPS encourages senior staff and interns to have on-going discussions about the multiple role relationships in order to be mindful and intentional about the development of the mentorship relationship and its boundaries.

Socialization

As a training team, we value developing positive collegiality with interns and regard warm relationships as an asset to the training experience. We expect that individual interns may eventually develop closer relationships with some staff and not others. However, invitations for social events should attempt to include all members of a training cohort. Senior staff should not socialize individually with doctoral interns. Socialization that is centered around the consumption of alcohol or exchange of money (i.e. socializing at a bar or cocktail party, playing cards for money, borrowing money from one another) is strongly discouraged and staff members should seek peer consultation and inform the Training Director should unforeseen situations arise. Preventative discussions regarding navigating relationships with multiple roles are encouraged. The CPS recognizes the unique development issues that occur during the internship year and recognizes that socialization with individual interns and with the intern cohort as a whole may change over the course of the internship year as interns complete their training requirements and move closer to the role of professional peer.

Business Casual Dress Guidelines

The following are guidelines for dress and hygiene. They are to be applied equally to all employees, regardless of gender. The guidelines are meant to be flexible and cultural and religious beliefs that apply to dress and hygiene will always be honored. Business casual attire is acceptable, employees must appear neat and professional at all times, whether they are scheduled to meet with clients or not. When conducting formal presentations, meeting with administrative officials, or attending other campus meetings, more formal and traditional business attire may be required.

Appropriate	Inappropriate
Slacks/Skirts	
Khakis, corduroys, slacks, capris Jeans (must be clean, free of rips, tears, fraying and may not be excessively tight or revealing) Skirts/skorts that are no shorter than one hand length above the knee	Sweatpants, leggings, exercise wear Shorts, Low Rise or Hip Hugger pants or jeans, mini-skirts
Shirts	
Polo collar knit or golf shirts Oxford shirts Short-sleeve blouses or shirts Company Logo Wear Turtlenecks, sweaters, knit tops Blazers or sport coats, or jackets Dressy/fitted T-shirts	Shirts with writing/logos (other than OU logo) sporty/unfittedT-shirts or sweatshirts Crop Tops, Midriffs, spaghetti straps Exercise wear, beachwear, thermals
Shoes	
Boating or deck shoes Sandals, open toe shoes Casual, low heel, open back shoes (i.e. mules, sling backs)	moccasins, thongs or flip flops that are old, stained, dirty
General	
Clothing that is clean and pressed	Stained, wrinkled, torn, dirty clothing

Clothing that reveals your underwear, stomach, lower back, or cleavage is not appropriate.

Any clothing, jewelry, or tattoo that conveys a negative statement toward a race, gender, sexual orientation, age, religion, disability, or is otherwise considered harassing or offensive is forbidden.

CPS has a **fragrance policy** that includes the following: Use of air fresheners, plug-ins, candles, and other fragrance products are prohibited in Counseling and Psychological Services (CPS). Personal care products such as cologne, perfume, aftershave lotions, scented lotions, fragrance hair products and/or similar products are to be fragrance-free or lightly fragranced, and applied prior to the start of the employees shift. At no time should the personal care product be applied at work.

Intern Flex Time Guidelines

Generally, interns are not allowed to accrue flex time. However, we recognize that there may be certain circumstances under which it would be appropriate for an intern to have the ability to flex their scheduled hours.

- Interns are responsible for informing and gaining approval from the Training Director for any flex time arrangement.
- If an intern is co-facilitating an evening group (i.e., after 5pm), they may accumulate flex time for the actual time of the group and up to 30 minutes for paperwork.
- Flex time must be used during the same work week during which it was accrued. Interns are not allowed to bank flex time and use it in blocks to add to vacation time.
- Professional Activities such as Move-in Weekend, Graduation, or Halloween are not compensated with flex time. Outreach, and professional development activities outside regular business hours, are not compensated with flex time.

Social Networking Site and

Electronic Communication Statement

Trainees who use social networking sites (e.g., Facebook, MySpace, Instagram, Pinterest, Twitter, LinkedIn, etc.) and other forms of electronic communication should be mindful of how their communication may be perceived by clients, colleagues, faculty, and other mental health professionals. Trainees should make every effort to minimize visual or printed material that may be deemed inappropriate for a professional psychologist. To this end, trainees should set all security settings to "private" and should avoid posting information/photos that may convey a negative view of psychology, their training site, mental health issues, or their colleagues and they should avoid using any language that could jeopardize their professional image. Trainees should consider limiting the amount of personal information posted on these sites and should never include clients, undergraduate or graduate students (for whom they currently serve as an instructor or supervisor) as part of their social network, because doing so constitutes a boundary violation. Additionally, any information that might lead to the identification of a client or represent a violation of client confidentiality is a breach of the ethical standards that govern the practice of psychologists and other mental health professionals in training. Engaging in these types of actions could result in the trainee being disciplined and/or dismissed from the program.