

**Pace University Counseling Center  
Internship Program in Health Service Psychology**

**2020 – 2021 Handbook**

**Health Service Psychology Interns**

**Erin Carpenter, M.S.**

University of San Francisco  
Clinical Psy.D.

**Steven Carter, MSED**

Fordham University  
Counseling Ph.D.

**Andréa Davis, M.A., M.S.**

Long Island University/CW Post-Brookville  
Clinical Psy.D.

**Melissa Ertl, M.S.**

University of Albany - SUNY  
Counseling Ph.D.

**Health Service Psychology Externs**

**Mario Gonzalez**

Adelphi University  
Psy.D. in School Psychology

**Julie Grunhaus**

Fordham University  
Ph.D. in Counseling

**Emily Olmsted**

Fordham University  
Ph.D. in Counseling

**Madison Seger**

Fordham University  
Ph.D. in Counseling

## **Senior Staff**

### **Rhea Benjamin, Ph.D.**

Senior Staff Psychologist / Consultation & Outreach Coordinator

### **Faedra Dagirmanjian, Ph.D.**

Assistant Director / Senior Staff Psychologist / Eating Disorder Specialist

### **Heather Dawson, Ph.D.**

Senior Staff Psychologist / Alcohol and Other Drug Specialist

### **Wendy Gonzalez-Canal, Ph.D.**

Senior Staff Psychologist / Group Coordinator

### **Richard Khan, Psy.D.**

Associate Director / Director of Training

### **Richard Shadick, Ph.D.**

Director, Counseling Center

## **Adjunct Staff**

### **Rebeca Gonzalez-Scherman, Psy.D.**

Adjunct Supervisor

### **Regina Hund, Psy.D.**

Adjunct Supervisor

### **Nobuko Yoshizawa Meaders, C.S.W.**

Process Group Facilitator

## **Student Accessibility Services (SAS)**

### **Ashley Sanguinetti, MSW**

Interim Assistant Director

### **Malina Persaud, B.A.**

Interim Coordinator

### **Sydney Tisch, B.A.**

Accommodations Coordinator

## **Office Coordinator**

Geeta Singh, B.A.

## Welcome!

Welcome to the Pace University Internship Program! This handbook is designed to provide you with basic information about the training program's components and procedures. Don't worry if it seems like too much to take in at once. The senior staff is happy to answer questions or to explain anything that's unclear. The topics covered in this handbook include:

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## Pace University

### About Pace University

Pace University is a comprehensive, independent, diverse institution. It was founded in 1906 by Homer and Charles Pace as a school of accountancy. Pace Institute gained college accreditation in 1948 and university status in 1973.

Pace is a multi-campus institution with sites in White Plains, Pleasantville, Midtown Manhattan, and lower Manhattan. The overall University enrollment is about 13,000 students, 8,500 of them at the New York City campus. The internship training program is offered at the New York City campus in lower Manhattan.

The Pace University student population is very diverse in many respects, including gender, race, ethnicity, domestic or international student status, dis/ability, age, religion and sexual orientation. Pace University is committed to providing the best possible education to its diverse and talented student body. As such, students can expect the University to provide them with opportunities to realize their full potential and to help them earn respect as mature adults.

The New York City campus encompasses an extensive array of facilities, including a residence tower and off-site residences, The Pace Downtown Theater of the Arts, a radio station, a library, and a computer center. The New York City campus is located in lower Manhattan immediately across from City Hall Park and the Municipal Building. The University is within easy walking distance from the South Street Seaport, Chinatown, Little Italy, Wall Street, the New York financial district, and the World Trade Center. It is easily accessible by all forms of public transportation.

### Pace University's Mission

Pace University is a comprehensive, independent, urban and suburban New York institution of higher education and offers a wide range of academic and professional programs at the graduate and undergraduate levels in six colleges and schools: the Lubin School of Business, the Dyson College of Arts and Sciences, the Lienhard School of Nursing, the School of Education, the School of Law and the School of Computer Science and Information Systems.

Pace University considers teaching and learning its highest priorities. In recognizing that its educational leadership implies broadening obligations, the University has become increasingly attentive to the integration of scholarship and service with excellent teaching. Faculty members engage in theoretical and applied research as well as other scholarly and professional activities. As part of the teaching role, faculty members often involve undergraduate as well as graduate studies in research.

Three essential qualities characterize a Pace University education. First, the liberal arts and sciences are central to the institutional mission for their intrinsic value and for the foundation they provide for specialized undergraduate and graduate programs to advance professional study. Second, Pace balances theory with practice and emphasizes their essential interaction. Third, at

the same time that a Pace education teaches the effective use of professional insights and technologies, it provides a source of values for moral and ethical development, the groundwork for critical thinking and self-expression, and the bases for informed and responsible choices and actions.

Pace University's commitment to the individual needs of students is at the heart of its teaching mission. Offering access and opportunity to qualified individuals, Pace embraces persons of diverse talents, interests, experiences, and origins who have the will to learn and the desire to participate in University life. As a multi-campus institution providing programmatic richness at urban and suburban locations, Pace offers pluralistic, interdependent, collegial environments which foster individual growth, human dignity, civil discourse, and the free exchange of ideas.

Pace has a rich, likely unique, history of strong partnerships with the business community, born of its creation as school of accounting and maintained by its distinguished reputation for commitment to responsive management and fiscal responsibility. Building on that tradition, the University has widened its relationships to include schools and governmental, cultural, health care, and other community agencies. These interactions enhance the University's capacity to provide career development for its students. Just as the University is called to serve, so too is each member of the Pace community. Faculty, students, and staff serve the University and the community as integral parts of teaching and learning.

Pace University draws heavily on the cultural and professional resources of the New York metropolitan area in its academic and co-curricular programs. In turn, the University enriches the area through the expertise its faculty can offer to various professional and civic endeavors, the talents of its graduates, the alumni who contribute to the economic, civic, and cultural life of their communities.

## The Counseling Center

The internship program is housed in the Counseling Center of Pace's New York City campus at 156 William Street-8<sup>th</sup> Floor. The campus at Pleasantville has a Counseling Center, too. The Pleasantville center currently has two post-doctoral level trainees and, in previous years, trained practicum students.

### The Counseling Center's Mission

The mission of the Counseling Center complements the University's mission by providing services for students, for the larger university community, and to the professional community. Our primary goal is to help students of all sociocultural identifications and backgrounds reach their fullest potential for growth and development. Students are assisted with interventions on three levels: primary, or preventative, interventions; secondary interventions, which involve counseling or educational programming addressed to normal developmental issues; and tertiary interventions, which are those that remediate existing or ongoing difficulties. All services for students are aimed at helping them cope more effectively with the developmental, vocational, familial, emotional, and relational aspects of their lives, enabling them to more fully direct their energies toward fulfillment of their academic, professional, and personal goals.

For the university community, the Center provides a comprehensive array of services. These include outreach services that address the prevention-related needs of students, faculty, and staff; consultation services that result in specialized programming designed to meet the needs of specific community members; crisis intervention services that include 24-hour on-call availability of professional staff; and consultation to any community member regarding a troubled student, faculty, or staff member they may encounter. Disability Services is a department housed within the Counseling Center. Counseling Center staff consults closely with Disability Services when indicated and our departments work closely with one another particularly in regards to campus outreach programming.

Finally, for the professional community, the Center trains master's- and doctoral-level students in the practice of professional psychology; the New York campus houses an internship program in Health Service Psychology that is accredited by the American Psychological Association, an externship program in Health Service Psychology and an undergraduate summer internship program.

## The Training Program

APA has accredited the Pace University Counseling Center Internship program since 1986. We are one of the smaller programs in the nation, having only five full-time staff psychologists and one part-time staff psychologist. Our Senior Staff is dedicated to training and supervision and we are proud that we offer our interns a rich training experience year after year.

### **-Training Model-**

At Pace, we train interns according to a *practitioner model*, meaning that our training goals focus on the acquisition of the skills needed to practice competently as a professional psychologist. That our program's goals represent a practitioner model should not imply that we see the job of training interns as limited solely to passing along a set of practice-oriented skills. Rather, we view the competent practitioner as defined not just by her/his skills; the competent practitioner is one who is also self-aware and who has grounding in the scientific and scholarly underpinnings of psychological practice. Thus, we think of the training experience as having three facets: skills, scholarship, and self-awareness.

### **-Orientation-**

The first two weeks of the training year are dedicated to a comprehensive orientation to the program. The first week is completely scheduled with training and introductory activities. During this time, interns' incoming skill levels will be assessed, and goals for the year established. Counseling Center procedures, evaluation criteria, and other aspects of the internship experience will be explained fully. Additionally, interns have an opportunity to get to know senior staff better and to begin to form working relationships with each other.

## - Aims, Training and Competencies -

### Requirements for Successful Completion of the Internship Program in Health Service Psychology at Pace University Counseling Center

The aim of the internship program at Pace University is to create environments and opportunities for interns to build profession-wide competencies to enter the profession of health service psychology.

In accordance with the internship's aims, interns must fulfill the following requirements to graduate from the internship program.

### **Competency I: Research**

Elements associated with this competency from IR C-8 I:

- Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.
- Program-defined elements associated with this competency (see table description above) •
- Demonstrates knowledge, skills, and competence to critically evaluate research according to methods, procedures, practices, and attention to diversity and contextual variables.
  - Demonstrates knowledge, skills, and competence to use existing knowledge in clinical practice and other professional activities, taking into consideration issues of diversity.
  - Demonstrates ability to locate, appraise, and assimilate scientific evidence on college mental health and local clinical data (trends in mental health issues in college populations, results from research comparing Pace University students' health related issues/needs to those of students in other universities, etc.).
  - Demonstrates the ability to apply research to campus outreach and consultation programming.
  - Appropriately utilizes scholarly work and applies existing evidence in the different roles assumed at the agency.
  - Appropriately disseminates research information in presentations (case presentation, supervision presentation, research presentation), outreach events, seminars, consultation, teaching in practicum student seminar, etc.
  - Demonstrates the ability to interpret Research and Quality Assurance Program Evaluations and to productively utilize this data to facilitate the therapeutic process.
- Required training/experiential activities to meet each element.
- Interns consume research that informs their clinical skills and their socialization into the profession of health service psychology throughout each of our 5 seminars (Case Conference, Consultation and Outreach, Multicultural Seminar, Assessment, and Friday Seminar Series) and 2 group supervisions (Supervision of Group Psychotherapy and Supervision of Supervision). During training seminars and group supervision, the interns meet with licensed professionals who lead them in merging their clinical skills with a body of knowledge and inquiry. Further, interns actively participate in 2 case disposition meetings per week to present and discuss cases.



Interdisciplinary discussions of research that informs the practice with college student populations from diverse backgrounds occur during these times.

- In the weekly Consultation and Outreach Seminar interns learn assessment approaches (e.g., needs-based analysis, program evaluation) for developing evidenced based programming on campus.
- At the start of the year, interns are assigned to one of four consultation rotations - the LGBTQA and Social Justice Center, Residential Life, Center for Academic Excellence (CAE), or Alcohol and Other Drugs (AOD) Specialist. Each consultation rotation includes a research component. For example, the AOD rotation includes an analysis of campus data related to drug and alcohol use on campus. Consultation rotations require interns to present evidenced based trainings to the respective student services department they are serving. Interns also learn how to evaluate consultation and outreach programming.
- Interns present a minimum of one evidenced based training seminar to the summer undergraduate interns.
- Once per semester interns participate in “Therapy Survey Week” (Quality Assurance) and are expected to become familiar with the utilization of these assessment tools. How outcomes are measured for each training/experiential activity listed above. How outcomes are measured:
  - Interns participation in training seminars must reflect familiarity with the literature assigned. Most seminars also require that interns present literature (e.g., scholarly article).
  - Interns are asked to present their learning in their group supervisions.
  - Interns are required to present cases in case disposition meetings, Case Conference Seminar, Multicultural Seminar, Supervision of Group Psychotherapy, and Assessment Seminar. Interns are expected to infuse evidence-based practice into their conceptualization, and are asked by senior staff of the program to identify and discuss ways that they infuse their learning into the case conceptualization. Interns’ clinical supervisors also evaluate interns.

## **Competency ii: Ethical and legal standards**

Elements associated with this competency from IR C-8 I

- Be knowledgeable of and act in accordance with each of the following:
    - The current version of the APA Ethical Principles of Psychologists and Code of Conduct;
    - Relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels; and
    - Relevant professional standards and guidelines.
  - Recognize ethical dilemmas as they arise, and apply ethical decision-making processes in order to resolve the dilemmas.
  - Conduct self in an ethical manner in all professional activities.
- Program-defined elements associated with this competency (if applicable)
- Demonstrate ability to monitor their behavior to conduct themselves following the APA Ethical Principles and Code of Conduct as well as APA Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change of the American Psychological Association.
  - Demonstrate knowledge and ability to follow New York State Law regarding the ethical practice of Psychologists.
  - Demonstrate knowledge regarding the relevant laws, regulations, rules, policies, standards and guidelines governing health service psychology.

- Understand and follows the Center's policies and procedures.
- Recognize ethical dilemmas and apply ethical decision-making processes.
- Appropriately seek consultation when ethical or legal issues require resolution.
- Behave in an ethical manner in all professional activities.
- Maintains accurate documentation records.

Required training/experiential activities to meet elements

- Interns receive extensive training in their orientation phase of the internship related to ethics and professional practice, as well as NYS laws.
- Interns are asked frequently during their initial phases of the program to identify and discuss relevant ethical dilemmas in their casework. In both individual and group supervision, interns are asked to discuss these dilemmas and engage in ethical decision-making.
- Interns participate in twice-weekly disposition meetings which require interns to present and discuss cases and, when applicable, explore related ethical and legal considerations.
- Interns participate in weekly Case Conference Seminar. This seminar is related to interns' twice-weekly, insight oriented treatment with one client on their caseload. Interns present clinical work with this client and, when applicable, legal and ethical considerations are discussed as related to the case.
- Interns participate in Multicultural Seminar in which multiculturally "competent" ethical and legal considerations are addressed.
- Interns participate in Assessment Seminar in which legal and ethical issues related to psychological assessment are addressed.
- Interns participate in Supervision of Supervision Seminar in which legal and ethical issues related to supervision are addressed.

How outcomes are measured:

- Active participation in orientation and training seminars mentioned above.
- Interns are asked to present their learning in their group supervisions.
- Interns are required to present cases in case disposition meetings, seminars, and supervision. Interns are expected to infuse ethical and legal standards into their conceptualization, and are asked by senior staff of the program to identify and discuss ways that they infuse their learning into the case conceptualization.

### **Competency iii: Individual and cultural diversity**

Elements associated with this competency from IR C-8 I

- The program's fourth aim is to develop a broad and general range of competencies for working with diverse populations.
- An understanding of how interns' own personal/cultural history, attitudes, and biases affect how they understand and interact with people different from themselves.
- Knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision/consultation, and service.
- The ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles (e.g., research, services, and other professional activities). This includes the ability apply a framework for working effectively with areas of individual and cultural diversity not previously encountered over the course of their careers. Also included is

the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own.

- Demonstrate the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during internship. Program-defined elements associated with this competency (if applicable) • Incorporates theoretical and research knowledge on multiculturalism.
- Demonstrates sensitivity of how self and others are shaped by individual and cultural diversity and the cultural context and sub-cultures in which people function.
- Integrates knowledge of self and others as cultural beings across professional roles and functions.
- Demonstrates an understanding of how their own personal/cultural history, attitudes, and biases affect how they understand and interact with people different from themselves.
- Demonstrates awareness of own and others' multiple identities and the intersection of these identities.
- Demonstrates sensitivity to issues of power and privilege as they interact with others.
- Demonstrates an understanding of the manner in which people of diverse cultures and belief systems perceive mental health issues and interventions.
- Understands oppression and discrimination in society and other environments including university settings, and understands how these environments are microcosms for the larger society.

Required training/experiential activities to meet elements:

- Interns receive training in their orientation phase of the internship related to increasing multicultural self-awareness, skills and knowledge.
- Interns engage in a 12 month long weekly Multicultural Seminar that emphasizes experiential learning and self-reflection (along with didactics and development of related clinical skills). Although we maintain an awareness of intersectionality throughout, the seminar is divided into modules. Each module focuses on one dimension of socio-cultural identity (e.g., race, ethnicity, sexuality, gender, dis/ability, or religion). Focusing on one identity per module alleviates diversion from dimensions of identity that we are most uncomfortable discussing.
- Interns engage in monthly Diversity in the Workplace (DiW) meetings which include all Center staff ranging from the front desk to the Center Director. The primary goal is to create a space for staff to explore self and others' socio-cultural identities and the related workplace implications.
- Friday Training Seminar is a 9 month seminar with rotating topics and facilitators. This seminar includes trainings on areas of multicultural "competency" including, for example, Safe(r) Zone Training, attending the Annual Conference on Transgender Health, Working with Domestic Violence with the South Asian Women population, providing services to students with disabilities, etc. All seminar facilitators are required to include cultural considerations related to the topic presented.
- Interns consume research within each training seminar that informs their multicultural competence and their socialization into the profession of health service psychology. During training seminars and group and individual supervision, the interns meet with licensed professionals who lead them in merging their clinical skills with self-awareness of their own cultural identities, power and cultural privilege, and social justice. Further, interns case presentations in case disposition meetings are required to include considerations of their and their clients' socio-cultural identities.

- Interns are encouraged and supported to design, implement and evaluate culturally celebratory interventions and treatment plans in their individual and group psychotherapy work.
  - Interns are encouraged and supported to design, implement and evaluate culturally celebratory workshops in their delivery of psychological outreach.
- Interns are encouraged and supported to incorporate cultural knowledge and awareness in their work as consultants to various members of the campus community.

How outcomes are measured:

- Interns' participation in all training seminars must reflect engagement in obtaining knowledge, skills and awareness related to various dimensions of socio-cultural identities. Interns participation in seminars must reflect an ability to integrate this awareness within their case conceptualizations.
- Interns participation in Multicultural Seminar must reflect an openness to the process of exploring self and others' socio-cultural identities and respect for their fellow interns. Interns are also expected to read all literature assigned and to arrive to seminar prepared to discuss. Furthermore interns are expected to present clinical cases that demonstrate an ability to incorporate cultural considerations within their case conceptualizations. Finally, interns are expected to be able to identify dimensions of identity that they feel most and least familiar/comfortable addressing and to set related goals accordingly throughout the year.
- Interns are required to present case presentations in case disposition meetings that reflect an awareness of socio-cultural identities and related therapeutic implications. Interns' clinical supervisors also evaluate interns' multicultural "competency".
- Interns increased ability to reflect on how their own socio-cultural identities are a part of their clinical process.
- Interns are asked to present their learning in training seminars and group supervision.
- Interns are required to present cases in case disposition meetings, Case Conference Seminar, and Multicultural Seminar. Interns are expected to infuse considerations of various dimensions of socio-cultural identities into their conceptualizations. Interns' clinical supervisors evaluate interns' multicultural "competency" and foster increased awareness of socio-cultural identities and related therapeutic implications.
- Feedback from various campus constituents with whom interns consult includes considerations of the interns' multicultural "competencies".

### **Competency iv: Professional values, attitudes, and behaviors**

Elements associated with this competency from IR C-8 I

- Behave in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others
- Engage in self-reflection regarding one's personal and professional functioning; engage in activities to maintain and improve performance, well-being, and professional effectiveness.
- Actively seek and demonstrate openness and responsiveness to feedback and supervision.
- Respond professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.

Program-defined elements associated with this competency (if applicable) • Behave in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others

- Engage in self-reflection regarding one's personal and professional functioning; engage in activities to maintain and improve performance, well-being, and professional effectiveness.

- Actively seek and demonstrate openness and responsiveness to feedback and supervision.
- Respond professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.
- Interns are able to identify the ways in which their identities as psychologists impact their service delivery in an interdisciplinary care team (e.g., psychiatrists, social workers, student affairs professionals).
- Interns will understand themselves as ethical instruments of the profession in their training and in their future as health service psychologists.
- Interns demonstrate respect for cultural differences within their professional relationships.

Required training/experiential activities to meet elements • Interns receive extensive training in their orientation phase of the internship related to professional development in psychology.

- At the start, middle and end of the training year, interns complete a formal self-reflection exercise. Specifically, interns take inventory of their past training experiences, set training goals for the year, identify their clinical strengths and growth edges, and write about what types of supervision works best for them. These exercises throughout the year are intended to increase interns' self awareness and to help them to articulate their goals and needs to supervisors. These exercises are also intended to promote "intentional learning" which is a concept that we encourage throughout the training year.
- Interns are asked frequently to comment on their growth in attitudes and behaviors as professional psychologists. During individual and group supervision, interns are asked to informally outline their professional development plan.
- Supervisors meet weekly for the Training Committee meeting to discuss interns' professional growth in attitudes and behaviors, including openness to feedback, professional functioning, etc.
- Interns are encouraged to attend professional conferences in the field of psychology, including the National Multicultural Summit, Diversity Challenge Conference (at BU), Division 39 of APA Annual Conference, EGPS/AGPS conferences and the American Psychological Association convention. Interns are granted professional development days to encourage them to attend professional events without compromising their vacation time.
- Interns and Senior Staff attend the annual Metro College Counseling Conference together every January. Interns are encouraged, but not required, to conduct a workshop, training or presentation at the conference. Interns and Senior Staff also attend the Annual Conference of Transgender Health together in September.
- Several Senior Staff members are actively involved in one or more professional organizations and, throughout the year, invite the interns to become involved.
- Supervision of Supervision seminar includes trainings on professionalism, ethics and multiculturally "competent" supervision. Outreach and Consultation seminar incorporates trainings on professionalism, ethics and multicultural "competency" as related to outreach programming and consultation rotations. Multicultural Seminar incorporates trainings on the relationship of social justice and mental health.
- All interns are involved in mentoring and training the Summer Undergraduate Interns. The timing of the undergraduate internship is intended to increase the doctoral-level interns' identity as a professional in contrast to the start of the training year in which they identified as a graduate student. Every year 1-2 interns choose to be the "Training Director in Training" for their summer rotation. These interns are closely supervised while they direct the undergraduate program. The interns who choose summer rotations outside of the Center also have a level of

involvement with the undergraduates training including providing training seminars and mentorship.

How outcomes are measured for each training/experiential activity listed above. How outcomes are measured:

- Supervisors and training seminar facilitators provide timely feedback regarding interns' professionalism and ability to self-reflect.
- Consultation rotation supervisors provide timely feedback regarding interns' professionalism.
- Feedback from the Center psychiatrists and other members of the community regarding the interns' professionalism.
- Interns' increased ability to reflect on how their own multicultural identities are a part of their clinical process and professional relationships.

## **Competency v: Communications and interpersonal skills**

Elements associated with this competency from IR C-8 I

- Develop and maintain effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services.
- Produce and comprehend oral, nonverbal, and written communications that are informative and well-integrated; demonstrate a thorough grasp of professional language and concepts.
- Demonstrate effective interpersonal skills and the ability to manage difficult communication well.

Program-defined elements associated with this competency (if applicable) • Develops and maintains effective relationships with a wide range of individuals including colleagues, peers, supervisors, supervisees, other staff/professionals, parents, communities, organizations, and those receiving professional services.

- Produces and comprehends oral, nonverbal, and written communications, demonstrating knowledge and understanding of professional language and concepts.
- Demonstrates effective communication and interpersonal skills, understanding the impact of their interpersonal and communication practices.
- Demonstrates effective communication and interpersonal skills being sensitive to issues of power and privilege.
- Demonstrates ability to manage difficult communication well.
- Appropriately manages emotional reactions while communicating/interacting with others.

Required training/experiential activities to meet elements • Interns receive training in their orientation phase of the internship related to professional development in psychology.

- As mentioned in Competency iv - At the start, middle and end of the training year, interns complete a formal self-reflection exercise. One goal of these exercises are to help interns to communicate their goals and needs to supervisors.
- As mentioned in Competency iv - Interns and Senior Staff attend a minimum of two professional conferences together per year in addition to other professional activities such as outreach presentations.
- Interns engage in a monthly, confidential process group as a cohort. The facilitator is not otherwise affiliated with Pace and is given strict direction not to disclose content of sessions to anyone including the training director. This activity is intended to support positive cohort dynamics including communication and interpersonal skills.

- Monthly Diversity in the Workplace (DiW) meetings are designed to promote cross-cultural communication and interpersonal skills.
- Interns are asked frequently to comment on their growth in attitudes and behaviors as professional psychologists. During individual and group supervision, interns are asked to informally outline their professional development plan.
- The Training Committee meets weekly to discuss interns' growth.

How outcomes are measured for each training/experiential activity listed above. How outcomes are measured:

- Interns are informally evaluated and given feedback during clinical supervision meetings.
- Various staff members that work with the intern (in group psychotherapy co-service delivery, in outreach workshops, etc.) provide feedback to the primary supervisor about growth in interpersonal behavior.
- Interns' increased ability to reflect the ways in which their communication styles and interpersonal behavior are a part of their direct service delivery.

## **Competency vi: Assessment**

Elements associated with this competency from IR C-8 I

- Select and apply assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collect relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient.
- Interpret assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective.
- Communicate orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.

Program-defined elements associated with this competency (if applicable) • Demonstrates ability to conduct initial assessments, write comprehensive intake reports, and make appropriate treatment recommendations and referrals based on client's clinical needs, diversity characteristics, and contextual variables.

- Considers the biological, cognitive, behavioral, developmental, and sociocultural components of health and illness in initial and other assessments.
- Demonstrates ability to appropriately identify when further, formal Psychological Assessment is necessary. When applicable, able to select assessment instruments/referrals. Demonstrates the ability to interpret assessments based on clients' clinical needs and diversity characteristics.
- Demonstrates ability to collect relevant data using multiple sources and methods appropriate to the goals and questions of the assessment.
- Demonstrates ability to accurately interpret assessment data according to professional standards and guidelines.
- Demonstrates ability to use assessment data to inform case conceptualization, intervention, and recommendations with a sensitivity to clients' socio-cultural identities.
- Demonstrates ability to integrate assessment data into comprehensive, culturally sensitive intake reports.
- Accurately, effectively, timely, and sensitively communicates (orally and/or in writing) the results and implications of the assessment.

- Demonstrates current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology.
- Demonstrates understanding of human behavior within its context (e.g., family, social, societal and cultural).
- Demonstrates the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process.

#### Required training/experiential activities to meet elements

- Interns consume research (e.g., literature, presentations) that informs their diagnostic assessment skills. During training seminars and group supervision, the interns meet with licensed professionals who lead them in merging their clinical skills with a body of knowledge related to diagnosis.
- Interns receive extensive training in their orientation phase of the internship related to screening assessments and to documentation (e.g., interpretation and dissemination of screening assessment data), including a seminar on screening assessments and a seminar in documentation.
- Interns attend two case disposition meetings per week to discuss screening assessments.
- Interns are asked frequently to identify and discuss diagnostic issues relevant in their casework. In both individual and group supervision, interns are asked to discuss differential diagnoses with their supervisors. Further, interns are routinely asked in individual and group supervision to identify and track the ways in which their interventions with individual and group psychotherapy clients are effective.
- In various seminars and training experiences related to multiculturalism and diversity, interns are highly encouraged to consider the ways in which cultural identities and expressions may impact the psychological assessment process and its multiple domains (e.g., administration, scoring, interpretation, etc.).
- Interns present cases and discuss related assessments in all seminars. The weekly Case Conference Seminar, for example, requires interns to present cases, including diagnostic and risk assessment, approximately once per month. Multicultural Seminar requires interns to present a clinical case, including diagnostic and risk assessment, once per module. Consultation and Outreach Seminar requires interns to engage in assessment of their programming.
- Interns engage in a nine week Assessment Seminar which trains on the use, interpretation and dissemination of psychological assessments.

How outcomes are measured for each training/experiential activity listed above. How outcomes are measured:

- Interns' screening assessments and related documentation skills are closely supervised by the Associate Director throughout the year. Interns are provided with timely feedback throughout the year.
- "Instant Disposition": Every afternoon, one Senior Staff member is assigned to provide supervision for the trainees' screening assessments. Interns are required to step out of the screening assessment to meet with this supervisor prior to the client's departure from the Center. Instant Disposition allows interns to receive intensive, timely assessment and diagnostic training throughout the year.
- Interns' respective individual supervisors provide ongoing feedback.
- Various staff members that work with the intern (in group psychotherapy co-service delivery, in outreach workshops, etc.) provide feedback to the training director about growth in assessment skills.
- Interns' increased ability in report writing (e.g., comprehensive diagnostic formulation, clinical judgment, accuracy of language in report writing, etc.).



- Growth in interns' ability to administer, score, interpret, and share findings including demonstrating these skills during Assessment Seminar.

## **Competency vii: Intervention**

Elements associated with this competency from IR C-8 I

- Establish and maintain effective relationships with the recipients of psychological services.
- Develop evidence-based intervention plans specific to the service delivery goals.
- Implement interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.
- Demonstrate the ability to apply the relevant research literature to clinical decision making.
- Modify and adapt evidence-based approaches effectively when a clear evidence-base is lacking.
- Evaluate intervention effectiveness, and adapt intervention goals and methods consistent with ongoing evaluation.

Program-defined elements associated with this competency (if applicable) Demonstrates ability to provide effective services to a wide range of individual clients with diverse presenting concerns.

- Demonstrates ability to establish and maintain an effective therapeutic relationship with diverse clients presenting with different type of concerns.
- Demonstrates ability to gather data and to facilitate exploration.
- Demonstrates ability to integrate data into meaningful conceptualizations.
- Demonstrates ability to conceptualize using different theoretical orientations.
- Demonstrates ability to formulate treatment strategies that integrate theory, current evidence-based information, assessment findings, diversity and contextual variables.
- Demonstrates sensitivity, awareness, and skills regarding diversity issues in clinical work.
- Demonstrates ability to integrate issues of identity into their case conceptualization, treatment planning, and interventions.
- Appropriately utilizes complementary approaches/services based on client need and diversity/cultural/contextual variables.
- Utilizes multicultural guidelines to inform all aspects of the intervention process.
- Demonstrates ability to handle theirs and their client's affect.
- Demonstrates ability to use the self as a therapeutic tool.
- Demonstrates effective timing of interventions with their individual clients.
- Demonstrates ability to use Empirically-Validated treatments.
- Demonstrates flexibility in therapeutic techniques, including the ability to adapt evidence-based approaches, based on assessment data, treatment goals, diversity and contextual variables, and evaluation of intervention effectiveness.
- Demonstrates ability to accurately diagnose clients.
- Demonstrates ability to handle termination issues.
- Maintains accurate documentation records.

Demonstrates ability to assess crisis situations and provide effective interventions

- Demonstrates ability to assess the intensity/magnitude of clients' crisis situation.

- Demonstrates ability to use evidence-based methodology to conduct suicide risk Assessment.
- Demonstrates ability to use appropriate interventions in crisis situations according to best practices and evidence-based information.
- Demonstrates ability to adapt intervention strategies evaluating effectiveness, issues of diversity, and contextual variables.
- Demonstrates ability to handle their affect in response to the client's affect or the nature of the crisis presented.
- Demonstrates ability to appropriately consult while assessing and responding to crises.
- Maintains accurate documentation records.

Demonstrates knowledge and skill in group therapy work

- Demonstrates ability to refer appropriate clients to groups.
- Demonstrates effective use of pre-group interviews.
- Builds rapport and cohesion in group work.
- Demonstrates ability to integrate data into meaningful conceptualizations for group members and for the group as a whole.
- Demonstrates ability to integrate theory and practice of group work.
- Demonstrates effective timing of interventions according to the group stage.
- Demonstrates ability to integrate diversity issues into their conceptualization, treatment planning, and interventions in group.
- Demonstrates ability to formulate treatment strategies based on group dynamics.
- Implements interventions informed by current group therapy scientific literature/evidence-based treatment.
- Demonstrates collaboration and effective communication with group co-leader.
- Demonstrates receptiveness to feedback about group counseling skills and ability to implement feedback and new ideas into group therapy practice.
- Demonstrates ability to handle their own and the group's affect.
- Maintains accurate documentation records.
- Demonstrates ability to handle termination issues of group work.

Demonstrates ability to plan and conduct outreach programs that are culturally and developmentally appropriate.

- Demonstrates consideration of needs of the target audience.
- Demonstrates ability to engage the audience in an effective manner.
- Demonstrates knowledge about the content area.
- Demonstrates ability to include up to date research information about the content area.
- Presents in a manner that is inclusive and/or affirming of issues of diversity.
- Demonstrates flexibility including the ability to adapt the presentation in response to the needs of the audience.

Required training/experiential activities to meet elements

- Interns engage in 4 weekly seminars (Case Conference, Multicultural Seminar, Consultation and Outreach and Friday Training Seminar Series) throughout the academic year and a weekly Assessment Seminar that meets for 12 weeks fall semester. These seminars inform both their case conceptualization and psychological intervention skills, and also their ability to implement, evaluate, and document evidence-based practice and interventions specifically with university students across a wide range of ages and cultural identities. Discussions of developmental considerations (e.g., working with college-aged students) and multiculturalism permeate each of these seminars.

- Interns consume research (e.g., literature, presentations) that informs intervention implementation and evaluation skills. During training seminars and group supervision, the interns meet with licensed professionals who lead them in merging their clinical skills with a body of knowledge related to evidence-based treatments that occur in young adult populations (e.g., depression, eating disorders).
- Interns receive 3 hours of individual supervision weekly from 3 licensed clinical psychologists. Every intern receives 1 hour of individual supervision with the training director. The second supervisor is a member of Senior Staff and the third supervisor is one of two adjuncts.
- Interns receive 2 hours of group supervision (Supervision of Group Psychotherapy and Supervision of Supervision) weekly which informs the growth of their intervention skills.
- Interns are asked frequently to identify and discuss efficacious treatment in their casework within an ethical, developmental, and cultural framework. In both individual and group supervision, interns are asked to discuss intervention implementation and evaluation with their supervisors. Further, interns are routinely asked in individual and group supervision to identify and track the ways in which their interventions with individual and group psychotherapy clients are effective.
- In various seminars and training experiences related to multiculturalism and diversity, interns are highly encouraged to consider the ways in which cultural identities and expressions may impact the process and outcome of implementing and evaluating evidence-based treatment and interventions.
- Case disposition meetings (twice weekly) inform interns' interventions particularly regarding the beginning stages of treatment.
- Interns engage in a weekly Case Conference Seminar which trains them on psychodynamic, relational and multiculturally "competent" empirically-validated interventions. This seminar is attached to interns work with the twice-weekly, insight-oriented client that they treat for the length of their internship.
- Interns successful completion of orientation.

How outcomes are measured for each training/experiential activity listed above. How outcomes are measured:

- Interns are informally evaluated and given feedback during clinical supervision meetings on their intervention implementation and evaluation skills.
- Interns videotape their sessions with clients and these sessions are reviewed in individual and group supervision.
- Various staff members that work with the intern (in group psychotherapy, in outreach workshops, etc.) provide feedback to the training director about growth in intervention and treatment skills.
- Interns' increased ability in documentation of interventions (e.g., documenting their use of verbal and nonverbal components of psychological interventions) in various modalities (e.g., individual and group psychotherapy).

### **Competency viii: Supervision**

Elements associated with this competency from IR C-8 I

- Apply supervision knowledge in direct or simulated practice with psychology trainees, or other health professionals. Examples of direct or simulated practice examples of supervision include, but are not limited to, role-played supervision with others, and peer supervision with other trainees.

Program-defined elements associated with this competency

- Demonstrates knowledge of supervision models and practices.
- Applies knowledge scientific/scholarly work in the supervision of a practicum trainee.
- Demonstrates commitment to supervision.
- Demonstrates ability to establish and maintain a safe and supportive supervisory relationship.
- Demonstrates respect and offers support for their supervisee.
- Demonstrates sensitivity to issues of power/privilege.
- Demonstrates ability to monitor their supervisee professional functioning and quality of services provided.
- Demonstrates ability to offer ongoing/formative feedback and suggestions about their supervisees' clinical work.
- Provides support for the development of case conceptualizations.
- Demonstrates ability to provide effective formative and summative feedback through mid and end of semester evaluations of their supervisees' professional functioning.
- Demonstrates cultural sensitivity in the supervisory relationship with their supervisees.

Required training/experiential activities to meet elements

- Interns provide weekly supervision for an assigned extern throughout the academic year. (Externs receive an additional hour of weekly supervision from either the training director or another licensed senior staff supervisor).
- Interns will successfully complete the weekly Supervision of Supervision Seminar which informs their interventions and identities as clinical supervisors. This seminar is facilitated by the training director.
- Interns consume research (e.g., literature, presentations) that fosters their emerging identities as clinical supervisors. The program's training model identifies clinical supervision as a distinct professional competence for health service psychologists; thus, the interns meet with licensed professionals who lead them in merging their clinical skills with a body of knowledge related to clinical supervision.
- In both individual and group supervision, interns are asked to discuss their identities as clinical supervisors.
- In various seminars and training experiences related to multiculturalism and diversity, interns are highly encouraged to consider the ways in which cultural identities and expressions may impact the process and outcome of implementing and evaluating evidence-based clinical supervision.
- All interns are involved in the mentoring and training of the Summer Undergraduate Interns. 1-2 interns choose the "Training Director in Training" summer rotation every year in which they act as, under close supervision, the director (or co-director) of the Summer Undergraduate Internship. The 2-3 interns who decline the Training Director in Training rotation in order to have summer rotations outside of the Center also participate in mentoring and training the undergraduates but in a much less capacity.
- Observation of licensed professionals providing feedback to unlicensed trainees that informs the practice with university student populations from diverse backgrounds occur during interns' case consultation and disposition meetings.
- Interns will demonstrate an understanding of psychodynamic, relational, developmental (IDM model) and multicultural supervisory approaches. Furthermore, interns will demonstrate an ability to foster supervisees' ability to integrate active/directive interventions from other relevant theoretical orientations.
- Interns will be able to evaluate their extern supervisee based upon empirically validated supervisory approaches.

How outcomes are measured for each training/experiential activity listed above. How outcomes are measured:

- The Training Director, who supervises the interns' supervision of their extern supervisee, consistently provides interns with feedback by facilitating interns' weekly Supervision of Supervision seminar.
- The Training Director also provides one hour of individual supervision to each intern. Although this supervision is primarily focused on the interns clinical work, when relevant it includes attention to the intern's supervision of their extern supervisee. Furthermore, interns consistently seek out additional consultation from the Training Director outside of their weekly supervision session and seminar.
- Interns mentorship and training of the summer undergraduate interns.

### **Competency ix.: Consultation and interprofessional/interdisciplinary skills**

Elements associated with this competency from IR C-8 I

- Demonstrate knowledge and respect for the roles and perspectives of other professions.
- Apply this knowledge in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior.

Program-defined elements associated with this competency (if applicable)

- Demonstrates knowledge and respect for the roles and perspectives of other professions and professionals.
- Applies knowledge about other professions in consultation with other health care professionals, interprofessional groups, and/or systems.
- Appropriately consults with peers/other trainees and senior staff.
- Demonstrates ability to effectively communicate and consult with parents/family members while respecting client's confidentiality/scope of signed releases of information.
- Demonstrates sensitivity, awareness, and skills regarding diversity in their provision of consultation services.

Required training/experiential activities to meet elements:

- Interns consume research (e.g., literature, presentations) related to their emerging identities as professional mental health consultants. The program's training model identifies mental health consultation as a distinct professional competence for health service psychologists; thus, the interns meet with licensed professionals who lead them in merging their clinical skills with a body of knowledge related to consultation.
- Interns engage in a weekly Consultation and Outreach seminar. Discussions of developmental considerations (e.g., practicum students, predoctoral interns, postdoctoral fellows) and multiculturalism permeate this seminar.
- Interns are assigned one of four consultation rotations at the start of the year – Residential Life, LGBTQA and Social Justice Center, Center for Academic Excellence and AOD Specialist) and are closely supervised in providing consultation to this department.
- Interns conduct outreach programming throughout the year. Interns create and implement an original outreach program during Wellness Week (spring semester). Interns, along with the rest of Center staff, conduct 4-5 outreach programs for first year students at the start of fall semester. Interns will conduct or assist in a minimum of 2 additional outreach programs throughout the year.

- In both individual and group supervision, interns are asked to discuss their identities as psychological consultants.
- In various seminars and training experiences related to multiculturalism and diversity, interns are highly encouraged to consider the ways in which cultural identities and expressions may impact the process and outcome of various phases of consultation, including conducting a needs assessment, negotiating ethics, and learning about consultation.
- Center psychiatrists designate one hour per week to consult with interns about shared clients. Interns learn to work interdisciplinary with Center psychiatrists. Interns also learn how to consult with Disability Services and their clients' medical provider when applicable. Disability Services is housed within the Counseling Center and participates in weekly staff meetings, Center activities and monthly Diversity in the Workplace meetings.
- Interns will successfully complete training that helps them implement, evaluate, and document consultation with other mental health professionals (e.g., psychiatrists, social workers) and those within the university community. Interns also learn the importance of consulting with interdisciplinary staff outside of the university community (medical providers, former therapists, etc.)
- Interns will successfully complete the Consultation and Outreach Seminar that helps them implement, evaluate and consult with non-mental health professionals working in a university setting.
- Interns will successfully complete a consultation rotation.
- Interns will successfully create and implement an original outreach program during Wellness Week. This programming often requires work with other student service departments (e.g., the LGBTQA and Social Justice Center).
- Interns, along with the rest of the staff, will successfully conduct 4-5 outreach presentations to first year students at the start of fall semester.
- Interns will conduct or assist in a minimum of two additional outreach programs to those mentioned above (Wellness Week and outreach to first year students).
- Interns will learn program-specific competencies of designing and implementing consultation relationships (e.g., ethics, contracting a consultation relationship, evaluating a consultation relationship within a university campus community).
- Interns will gain an ability to provide guidance or professional assistance in response to a client's/consultee's needs or goal.
- Interns will gain an ability to appropriately approach and process providing feedback and recommendations to consultee.
- Interns are able to identify, discuss, consult, and plan for ethical dilemmas as they arise (e.g., the multiple roles that occur working within student affairs as a counseling center psychologist) and apply ethical-decision making processes to engage in potential resolution with respect to their identity as a consultant.

How outcomes are measured:

- Successful completion of weekly Consultation and Outreach Seminar.
- Successful completion of consultation rotation. Through this rotation, interns demonstrate a working understanding of theories and models of consultation.
- Intern can conduct an informal needs assessment and then plan and implement interventions that are consistent with the assessment.
- Intern can evaluate the effectiveness of intervention(s) and overall consultation.
- Intern approaches consultation taking into consideration multicultural responsive and sensitive interventions.
- Articulates common and distinctive roles of consultant.

- Intern shows ability and appreciation for various facets of working within an interdisciplinary health care team.
- Intern creates and implements one outreach program for Wellness Week (spring semester), 4-5 outreach programs for first year students (start of fall semester) and implements or assists with a minimum of 2 additional outreach programs throughout the year.

## -Components of the Training Program-

The major components of the training year are as follows:

1. **Multicultural “Competence”\***. This component is considered to be one of the most important of the training program and, in addition to being a freestanding training element in and of itself, is woven throughout the other components. A Senior Staff Member meets once per week with the interns for Multicultural Seminar. This seminar focuses on increasing self-awareness of socio-cultural identities. Attention to socio-cultural identities and considerations of social status are also incorporated into individual supervision, outreach programming, training seminars, disposition and case conferences, and our monthly Diversity in the Workplace meetings, which will be described below. (*\*Competence is in quotes to connote that striving towards competency is an ongoing, lifelong process that inherently can never be fully attained*).
  
2. **Individual Psychotherapy**. Interns are responsible for managing a caseload of 12 individual clients throughout the year which, considering the twice-weekly client described below, is a total of 13 clinical hours. This number may be lower during slower times of the year, such as winter break and summer, and higher during peak times such as the beginning of the semester.
  
3. **Supervision of Individual Therapy**. Each intern will have three therapy supervisors for the training year, and will divide her/his caseload such that each supervisor oversees three or four cases. Each intern meets with each of the three supervisors on a weekly basis. One of these supervisors is the Training Director and the other is a senior staff member. The third supervisor is one of our two adjunct supervisors. Interns will be responsible for bringing *de-identified* case notes to their adjunct supervisors in order to obtain their written signatures for the notes. The intern is also responsible for returning these signed notes to the Training Director. The Training Director will document in Titanium that the progress note was approved and signed by adjunct supervisor via logging in to Titanium using a password distributed by the Director of the Counseling Center. *After the progress note is signed in Titanium, the Training Director returns the notes to appropriate intern who files the signed notes in the client’s paper chart.*  
See the policy on Adjunct supervision below for information regarding handling of crises with supervisors.
  
4. **Case Conference**. This 60-minute meeting takes place once weekly and is facilitated by Dr. Richard Shadick. It is an opportunity for interns to present their cases to each other and to give and receive feedback on their clinical work with their twice-weekly, insight-oriented case. The emphasis in the conference is aiding the intern to view psychotherapy as a developing, relational process. A psychoanalytic orientation is used. Didactics are incorporated to help interns develop conceptualization skills.
  
5. **Group Psychotherapy and Supervision**. Each intern is involved in an ongoing psychotherapy group serving as group co-leaders. Groups typically last for 75 minutes once per week. Interns meet weekly for one hour of group supervision with Dr. Gonzalez-Canal. Interns also conduct group screenings in which potential group members are assessed for their appropriateness for group.



**6. Consultation and Outreach.** Interns are involved in various Counseling Center programming efforts over the course of the year under the supervision of Dr. Rhea Benjamin. Some of these are regular and ongoing; for example, interns serve as liaison consultants for various campus groups, including the LGBTQA and Social Justice Center, Residential Life, Center for Academic Excellence, and the Counseling Center's AOD (Alcohol and Other Drugs) specialist. Other outreach projects are designed to meet the needs of the university community during a particular year, and still others arise from the interests and expertise that interns bring to us. *Interns must complete a minimum of five outreach programs during the training year. All outreach presentations should be developed with an awareness of multiculturally- "competent" principles.* Time spent on these projects varies widely; spring seems to be a busy time with regard to outreach, while other times of the year are slower. During summer, less programming is done but interns work with the summer undergraduate interns on summer projects and participate in new student orientations. Interns may also continue to provide consultation services on an as-needed basis throughout the summer.

**7. Extern Supervision.** Once weekly, interns meet with Dr. Faedra Dagirmanjian for 60 minutes for group supervision of the extern staff. The meeting entails didactic discussions/readings and experiential processing of supervisory sessions. The goal of the supervision is to provide interns with the fundamentals of the practice of supervision. Additional supervision-of-supervision is provided on an as-needed basis by Dr. Faedra Dagirmanjian as supervisory situations arise throughout the year.

**8. Training Seminars.** Training Seminars are scheduled for 90 minutes every Friday morning. During this time slot, senior staff or adjunct lecturers from the New York community come and speak to the staff on their areas of expertise. Previous presentation topics have included clinical issues involving special populations, such as Latino clients, Asian/ Pacific-Islander clients, and GLBTQ clients; diagnostic groups such as eating disorders, self-harming behaviors, and substance abuse; specialized clinical orientations such as contemporary relational psychoanalytic theory, Gestalt therapy, and couples therapy; and other issues such as psychopharmacological referrals.

**9. Process group.** This confidential, 90-minute meeting is held on one Friday afternoon a month with Nobuko Meaders. The interns themselves can determine the agenda, and the meeting is often used to discuss issues that come up around working in the Counseling Center or to process dynamics within the intern group. Interns may also choose to use this time as a case conference.

**10. Summer Rotation.** Beginning late in the fall semester, interns will consider various options for summer rotation placements. Rotations include Training-Director-in-Training rotation and the Outreach rotation. Interns can also chose to work with a staff member to complete a specialized rotation. Examples include working with our Eating Disorder Specialist or AOD Specialist. Rotations make up 8-10 hours of their weekly schedules.

### -Intern Schedules-

In addition to the major components of the training program, interns' weekly schedules will also include some or all of the following:

1. **Screening times.** Each intern provides two hours of walk-in screening availability per week. During these hours, students may walk in to the Counseling Center and request an initial screening appointment, which takes approximately 30 minutes to complete. Training in conducting screening interviews takes place during orientation in September, but may continue on an as-needed basis for interns who have less experience in this area. Furthermore, senior staff members rotate coverage throughout the week to ensure that every screening time is covered by a designated supervisor. Interns receive supervision on every screening immediately after conducting the screening and before the client leaves the Center.
2. **Group Screening times.** Each intern will provide two 30-minute group screening slots per week. During these times, group leaders can meet with potential group clients in order to assess their appropriateness for group.
3. **Staff meeting.** The Center staff meets every Wednesday from 11am to 12pm. This meeting usually begins with announcements and other business, and then moves to case disposition (see **Disposition Meetings** for further details).
4. **Disposition Meetings.** There are 2 Disposition Meetings held each week at the Counseling Center. The first of those meetings occurs on Wednesdays during Staff Meeting (see **Staff Meeting** for further details) and the second occurs on Friday mornings. At those times, staff members who have done screenings during the week present them and the staff as a team determines appropriate dispositions for the cases. Details regarding what pieces of information are required in these meetings will be provided to you during Orientation. Interns are expected to attend both of these meetings so that they may present their screenings and pick up cases of interest to them. Interns receive supervision throughout these disposition meetings.
5. **Staff lunch.** The first and third Wednesday of every month is set-aside for staff lunch. The first meeting of the month is a working lunch for all interns and members of the Training Committee during which we can spend time together updating each other, planning for projects, or discussing other Counseling Center issues. The Training Director's lunch is held every third Wednesday of the month and is conducted with the interns and the Training Director. This meeting allows interns time to address internship-related issues they would like to discuss with the Training Director.
6. **Diversity in the Workplace and Wellness Activities.** On the second Wednesday of every month the entire staff comes together to explore issues related to our sociocultural identities and diversity. These meetings and workshops are facilitated by Dr. Faedra Dagirmanjian. Wellness Activities are facilitated at various times throughout the year to focus on the importance of ethical self-care as mental health providers. We also have a "Spirit Committee" who plan small events to help us have fun as a staff. One "Spirit Committee" mission is to celebrate birthdays with treats and the annual "Gnome Party" which is a non-denomination celebration prior to Winter Break.

7. **Attendance at departmental meetings and functions.** As members of the Center staff, interns attend various meetings throughout the year that involve the staff, such as Student Services meetings and functions.
8. **Administrative time.** Interns are encouraged to schedule time into their weekly schedules to complete their paperwork and attend to other administrative tasks.

Interns work 43.5 hours per week in order to accrue the 2000 hours towards licensure. 1 hour of this administrative time – from 5:00pm to 6:00pm - is dedicated to intern's completion of group notes and debriefing the group process. Each intern will dedicate this administrative hour on the day that corresponds with their facilitation of their group (either Tuesday or Wednesday).

9. **Research time.** Interns who are working on their dissertation or other research may schedule 1-3 hours of time per week for this purpose. The amount of time permitted is negotiated with the Training Director, and usually varies depending on how busy the Center is at that particular time of the year and the intern's progress towards completing their 2000 hours towards licensure.
10. **Emergency walk-in.** Daytime emergency coverage will be part of your year at the Center. Each semester, a variety of crisis cases demand our attention. These include calls from Residential Life regarding emergency situations in the dorm, requests from faculty or staff to consult about troubled students, or walk-in clients who seem to be in crisis. We respond to these situations on an as-needed, as-available basis. Remember that supervision is always available to you when you are faced with an emergency with a client - in fact, we ask that you alert a senior staff member to such a situation whenever it arises, even if it means interrupting someone who is in session. Interns are not responsible for nighttime emergency coverage. Senior staff members respond to all emergencies that take place after hours.

**The result:** your schedule! On average, the above typically works out to be about a 43-hour workweek that accumulates to a 2000-hour internship. However, you should expect your weeks to vary somewhat with the academic calendar. Certainly, the Counseling Center is busier when school is in session than when the students are gone. In addition, there are times when several consultation projects may be in progress at once - this seems to happen in the spring, but could happen at other times as well. During these times, your work week will expand to around 45 hours. During the summer, you will certainly find that you have fewer demands on your time. You will still need to be in the Center for your scheduled hours during the slower summer months, but you'll have more discretionary time to spend on such things as your dissertation or your job search.

At midyear evaluation time, you will have an opportunity to provide the Training Director with formal updates on your semester activities, and to formally re-evaluate your personal training goals with your supervisors. The "Internship Training Program Expectations and Activities" form is due at midyear and you are responsible for completing it and delivering it to the Training Director in a timely fashion. You will also be reviewing the "Personal Training Goals" form that is initially filled out during Orientation.

### **-Terms of Employment-**

The Pace Counseling Center Internship begins on August 15<sup>th</sup>, and concludes on August 14<sup>th</sup>.

Interns are paid on or around the 1st and 15th of each month and receive a stipend of \$27,300 per year. Additionally, interns are paid \$4,050 for the overtime required to accrue 2000 hours in one year for a total of \$31,350.

All university policies, procedures and benefits are delineated in the Pace University Employee Handbook and Policies which can be found at: <http://www.pace.edu/human-resources/employer-resources/employee-handbook-policies>. All interns are required to read and familiarize themselves with the Pace University Employee Handbook and Policies in addition to this Doctoral Internship Program Handbook.

Health insurance, dental insurance, life insurance, short-term disability, commuter reimbursement account, and flexible spending accounts are available for interns during the internship year. A number of different health care plans are available and interns can choose among them during the beginning of their time at Pace. Additionally, interns are free to change their insurance options during the open enrollment period at end of the spring semester.

Interns receive a Pace staff ID card that allows them to use any of Pace's facilities, including the library.

### **- Paid Time Off –**

Interns are granted 10 vacation days and 3 personal days during the year. It is important to note that **5 of those vacation days will be reserved for the last week of your training year in early August**. Personal days are provided for use during religious holidays but may be used for any reason in accord with university policy.

In addition, interns are allowed all university holidays, including the winter break. For a complete list of university holidays, please visit the Human Resources webpage: <https://www.pace.edu/human-resources/university-holiday-calendar>

Interns are also granted up to 13 days of professional development leave time, contingent upon approval of the Training Director and senior staff. Interns can use this professional development time to attend to their job search, attend conferences, graduation, or dissertation. Professional development time *cannot* be utilized for vacation or personal time considering that these hours count towards accrue of program requirements.

Pace depends upon the regular attendance of its employees and hence does not allot a fixed number of days to be taken for illness. Your supervisor will be as helpful as possible when illness occurs. If you are absent for more than three consecutive days, a statement from your physician may be required. If you are out for eight consecutive days (including the weekend) you will be considered as having a temporary disability. In that event, your supervisor will arrange to have Human Resources supply you and your physician with the appropriate forms to complete. Restoration of your position will be provided upon your return from a medically verified period of temporary disability.

A pattern of sporadic absences will result in an inquiry from your supervisor, who may require substantiation of the illness in each case. Excessive tardiness and unexcused or sporadic absences may lead to disciplinary action up to and including termination of employment.

If an illness or other situation requires excessive use of sick leave, measures will be taken to insure that the intern has actually spent the required amount of time for completion of the internship, such as increasing the intern's hours of coverage in the Center.

Days away will be granted at the discretion of the Training Director and Senior Staff and will be based upon staffing needs and adequate notice. Interns will be required to inform all staff members of their days away as far in advance as possible. An email indicating the requested leave must be sent to the Training Director at least one week prior to time away. The Training Director will notify interns of approval on the Wednesday after notice was given to the senior staff.

#### **- Emergency Closing -**

In response to unusual conditions such as inclement weather or unanticipated occurrences, the University may officially close its operations in whole or in part.

When an early morning decision is made to cancel or delay classes on a given campus due to emergency conditions, all offices will be subject to the same closure or delay. The time of such opening or closure will be specified in an announcement on Pace website's homepage and via electronic mail.

Employees are encouraged to sign up for the Pace University Emergency Alert System to receive a phone call, text message and emails regarding emergency notifications, from the following link: <http://www.pace.edu/general-services/safety-security/campus-preparedness-and-emergency-planning/university-resources/emergency-closing>.

## **-Affirmative Action, Equal Opportunity, Sex-Based Misconduct & Hate/Bias-Related Crime Policies-**

### **Affirmative Action Policy Statement**

Pace University is committed to achieving full equal opportunity in all aspects of University life. Pursuant to this commitment, the University does not discriminate on the basis of actual or perceived sex, gender or gender identity; race; color; national origin; religion; creed; age; disability; citizenship; marital or domestic partnership status; sexual orientation or affectional status; genetic predisposition or carrier status; military or veteran status; status as a victim of domestic violence, sex offenses or stalking; or any other characteristic protected by law federal, state or local law, rule or regulation.

### **Equal Opportunity Policy Statement**

In line with its commitment to equal opportunity, the University will take affirmative action to recruit, hire, promote and educate minorities, women, persons with disabilities, and Vietnam-era veterans.

Pace University fully complies with all federal and state legislation and regulations regarding discrimination.

### **Sex-Based Misconduct Policy**

Pace University is committed to providing a safe environment for every member of its community and to ensuring that no student, faculty or staff member is excluded from participation in or denied the benefits of any University program or activity on the basis of sex. Accordingly, the University prohibits the following forms of Sex-Based Misconduct: sexual assault, sexual harassment, gender-based harassment, dating violence, domestic\intimate partner violence, sexual exploitation, and stalking. This Policy also applies to dating violence, domestic\intimate partner violence and stalking that is not sex-based (definitions of these terms can be found below.) All references in this Policy to “Sex-Based Misconduct” shall also be deemed to apply to non sex-based dating violence, domestic\intimate partner violence and stalking. Under certain circumstances an attempt to violate this Policy and Procedure may itself be considered a violation. The use of alcohol or other drugs will not be accepted as a defense to a violation of this Policy and Procedure.

The University prohibits retaliation against any individual for reporting an incident of Sex-Based Misconduct or for participating in any investigation or proceeding related to any such report.

Members of the University community who believe that they have been subjected to Sex-Based Misconduct are encouraged to report such incidents to the University and, where applicable, to local law enforcement. Pursuant to the procedures detailed below, upon receiving a report, the University will respond promptly and fairly. When appropriate, the University will take steps to prevent future incidents and to ameliorate the effects of past incidents.

Sexual Harassment is defined as unwelcome conduct of a sexual nature, including but not limited to sexual advances, requests for sexual favors, or other physical, verbal or visual conduct of a sexual nature, including rape, sexual assault and sexual exploitation. In addition, depending on the facts, dating violence, domestic/intimate partner violence, and stalking may also be forms of sexual harassment. This definition prohibits conduct which is intentional and also conduct which, regardless of intent, has the effect or impact of creating an intimidating, hostile or offensive working or learning environment on the basis of sex. It makes no difference in determining whether conduct violates this Policy, that the person accused of violating the Policy was “just joking”, teasing” or being “playful” or had an evil motive. The fact that a person does not object to the alleged harassing conduct or does not request that the harassing conduct stop, does not mean that he/she welcomes the conduct.

Gender Based Harassment is verbal or physical conduct that belittles or shows hostility or aversion toward an individual because of his or her gender and that substantially interferes with an individual’s educational, campus life or employment experience. Gender based harassment includes verbal and/or physical aggression toward another based upon a perception that the other fails to conform to stereotypical notions of expected characteristics for males or females.

For more information including other types of sex-based misconduct as defined by the university, please visit: <http://www.pace.edu/sites/default/files/files/SexualMisconductPolicy.pdf>

### **Hate/Bias-Related Crime Policy**

The New York State Legislature found and determined that “criminal acts involving violence, intimidation, and destruction of property based upon bias and prejudice have become more prevalent in New York State in recent years. The intolerable truth is that in these crimes, commonly and justly referred to as “hate crimes,” victims are intentionally selected, in whole or in part, because of their race, color, national origin, ancestry, gender, religion, religious practice, age, disability, or sexual orientation. Hate crimes do more than threaten the safety and welfare of all citizens. They inflict on victims, incalculable, physical and emotional damage and tear at the very fabric of free society. Crimes motivated by invidious hatred toward particular groups not only harm individual victims but send a powerful message of intolerance and discrimination to all members of the group to which the victims belongs. Hate crimes can and do intimidate and disrupt entire communities and vitiate the civility that is essential to healthy democratic process. In a democratic society, citizens cannot be required to approve of the beliefs and practices of others, but must never commit criminal acts on account of them.

Pace University’s Guiding Principles of Conduct clearly and unequivocally states that “membership in the University community is accompanied by the responsibility to maintain and foster an environment characterized by freedom of expression, inquiry and exchange of ideas and respect for the dignity and uniqueness of each individual.” In addition, the University has established standards of behavior to ensure the safety of all members of the University community. For more information regarding the Hate/Bias-Related Crime Policy, please refer to the following link: <http://www.pace.edu/student-handbook/hatebias-related-crime-policy>.

### -Intern Evaluation Procedures-

The evaluation process begins during the orientation period of the internship program. At this time, interns and their supervisors meet to set professional and personal goals. Interns are responsible for articulating goals for their training, while supervisors assist interns in addressing other issues that need attention.

Informally, intern evaluation involves a feedback loop that exists between interns and supervisors each time that they meet. Formal evaluation occurs biennially. At the end of each semester, supervisors complete written evaluation forms for each intern, using the Pace Intern Rating Scale (PIRS), the results of which are discussed by each supervisor with each intern. Following these meetings, the supervisors meet as a team to discuss the progress of each intern, and to make recommendations for future training. The Training Director shares the results of these recommendations with each intern separately, and subsequently sends a letter of evaluation to each intern's home program. The letter summarizes the intern's evaluation in terms of strengths and skills, areas of growth during the semester, suggested areas for further training, and an overall rating. In late July, the senior staff meets to formally discuss the interns' completion of the internship, and a letter to that effect is sent to the intern's home program.

The evaluation form used for intern evaluations is called the PIRS. It contains sections for the evaluation of all internship training goals and objectives, as well as interns involvement in all Training Seminars. The staff members who work with interns in each particular area will be responsible for completing the items for those areas. The PIRS provides a format in which supervisors can summarize intern strengths while targeting areas for future growth.

Essentially, each item in the PIRS asks supervisors to rate an intern's competence in a particular skill. The supervisor may rate competence at one of four levels:

PIRS Rating Scale:

CR- Cannot Rate at this time due to insufficient data

- 1- Not yet competent. Requires improvement for successful attainment of competency
- 2- Generally competent but with some inconsistency and room for growth
- 3- Competent and consistent
- 4- Competent and an area of real strength

A score of 2, 3, or 4 is required by midterm and final for items in each section.

A score of 1 is in need of remediation at either point of the year.

As an aside, it is important to note that staff review of an intern's progress could take place at any time of year, and remediative efforts could be initiated as a result (see "Impaired Performance Procedures" in this handbook for a complete description of this process). In fact, if an intern is having difficulty with some aspect of her/his work in the internship, such a situation should usually have been noticed and addressed in some way prior to the midyear review. A rating of 1 at midyear would simply indicate that the skill difficulty was still in existence at that time, and the subsequent review would take into account the attempts made thus far to address it.

Interns are encouraged to speak with the Training Director about the evaluation process at any point in the year.



### – Supervisor and Program Evaluations –

As is the case with intern evaluations, our intention is that feedback to supervisors as to the quality of the supervisory experience be an ongoing process. At various points in the year we will ask you to articulate your goals and expectations for training and supervision, and we request your continuing input. As for formal evaluations, the timing of interns' evaluations of supervisors parallels the description given previously: at the end of each semester, each intern completes a supervisor evaluation form, discusses it with her/his supervisors, and then forwards it to the Training Director. The Training Director is available to assist in the resolution of any problems that may have arisen in the supervisory relationship. Interns also evaluate every training seminar at the end of each seminar series, and the internship as a whole at the end of the year.

### – Completion of the Training Program –

To summarize the foregoing, completion of the training program requires that interns:

- Provide individual psychotherapy (an average of 13 hours per week) to students.
- Co-facilitate one ongoing therapy group.
- Provide walk-in crisis intervention on an as-needed basis.
- Successfully complete the on-call coverage rotation (closely supervised by Senior Staff).
- Conduct weekly intake screenings.
- Provide supervision for one pre-doctoral extern.
- Develop one original outreach program to implement during Wellness Week.
- Participate in Center-wide outreach programming to first year students.
- Participate in at least one additional outreach program throughout the remainder of the year and, at the start of the year, complete a minimum of 5 outreach programs to incoming students.
- Complete your consultation rotation, including all applicable outreach programming, with your designated student service department (Residential Life, LGBTQA and Social Justice Center, Center for Academic Excellence or AOD Specialist).
- Attend all training seminars and meetings, unless excused by the Training Director.
- Receive scores indicating passage of the Pace Intern Rating Scale (PIRS).
- (Optional Rotations: Teaching).

### - Professional Relationships -

Each Pace University staff member does not always have a designated supervisory relationship with each intern. Even so, it should be kept in mind that power differentials exist, meaning that whether or not this takes place in a formalized role, every staff member still serves as a de facto supervisor. Further, at our site, each supervisor participates in Training Committee and so has input into training decisions that may affect each intern.

Each supervisor and each intern has decisions to make regarding appropriate boundaries. For example, the following questions may arise in the course of negotiating any professional relationship: is it appropriate to have lunch with an intern? With the group of interns? Would it be acceptable to invite the interns as a group to a social event? When would it be appropriate to disclose personal information to the intern(s)? Consequently, several principles should be kept in mind to guide decision-making about professional boundaries. Interactions and proposed interactions should be weighed in terms of several factors.

The staff member may ask her or himself several questions to guide this exploration:

- Is the proposed activity truly for the primary benefit of the intern(s)?
- Does the activity include the entire intern group, or one intern alone?
- Given the involvement of the staff member in meetings regarding evaluations, letters of recommendation, and other decisions regarding the intern's current and future careers, does the intern truly feel the freedom to decline the invitation?
- Is the proposed activity a one-time event or a repeated one?
- What is the intern or interns' developmental level—early in the internship, or near the end of the year?

Generally speaking, this will mean that staff psychologists will not be “friends” with interns on Facebook or other social media sites during the interns' training year, although this may change after the internship is completed.

Similarly, interns should allow such questions to guide their decision making regarding appropriate relationships with supervisory staff. If a staff member or intern is confused or uncertain regarding such issues, consultation with the Coordinator of Training, the Director, or any permanent training staff member is recommended.

## -Impaired Performance Procedures-

### - Remedial Action -

A staff member who experiences concern about any aspect of an intern's behavior is expected to discuss that concern directly with the intern and to inform the Training Director about the discussion.

Any time that any **significant** concern about an intern's progress or behavior is brought to the attention of the Training Director, the importance of this concern and the need for related action will be assessed by the senior staff. In the event that it is assessed that remedial action is necessary, the intern will be asked to meet with the senior staff in order to discuss the concern and to reach an agreement as to what action should be taken. The intern may invite a colleague to attend this meeting in an advocacy role for the intern. The outcome will be a "Remedial Action Plan," which summarizes the concerns that exist and outlines the remedial steps that the intern must take.

The purpose of the Remedial Action Plan is to provide the intern with a clear written statement of what behaviors are deemed problematic and to facilitate the intern's ability to make the desired changes. The need to protect client and agency welfare will be incorporated into this plan when these issues are relevant to the problematic behavior. Examples of potential components of a Remedial Action Plan are:

- The intern is required to more responsibly attend to professional duties such as completion of case notes, or attending schedule client and supervision sessions regularly and on time.
- The intern is provided with additional supervision time, or the format and focus of supervision is modified in order to facilitate the development of therapeutic skills.
- The intern is required to complete additional readings, to complete additional coursework, or to attend relevant workshops in order to supplement knowledge in deficient areas.
- Increased monitoring of the intern's performance is instituted by measures such as additional review of case notes and therapy tapes by the primary supervisor and/or other designated senior staff.
- The intern may decide to obtain professional consultation outside of the Center in order to address personal issues that are seen as interfering with her/his professional development or behavior.

In cases in which it is determined that the welfare of the intern and/or the client has been jeopardized, the intern's case privileges will either be significantly reduced or suspended for a specified period of time.

The Remedial Action Plan will be put into writing, with copies going to the intern and the intern's file at the Center. The intern's home graduate program will be consulted.

The senior staff will meet with the intern at a designated time (typically two weeks to one month) after the development of the plan to assess compliance with the plan and progress in the program. Failure to adhere to the plan or to make sufficient progress in the designated behaviors of concern will be evaluated for appropriate consequences and/or the need for modification of the plan.

## – Probation –

Formal probation of an intern may be implemented when serious concerns emerge about an intern's competence, professionalism, emotional stability, or ethics. Probation is both a time-limited and remediation-oriented consequence. The primary purpose of probationary action is to bring the intern to an adequately functioning state as a professional. As a result, the intern is placed on probation for a specified period of time during which her/his behavior will be closely monitored by the primary supervisor in consultation with the rest of the training staff.

The most common grounds for probation include:

- Failure to make adequate progress in a Remedial Action Plan.
- Consistent lack of responsibility in one's professional duties at the Center.
- Significant emotional instability or impairment that interferes with the ability to deliver adequate services to clientele or to work with other professionals.
- A serious breach of the ethical standards of APA or the laws of New York.

The need to place an intern on probation will be decided upon by the senior staff, and after a review meeting with the intern and her/his supervisor. A written plan for remediation will be designed, as outlined in the section on remedial action. Faculty from the intern's home program shall be notified in writing. Phone contact will also be initiated with the home program if it is appropriate to involve them in the remedial planning or if information is being sought as to the intern's prior level of functioning.

The Training Director may consult Pace University Human Resources while managing issues that require disciplinary action in order to ensure compliance with university policies and procedures. Please note Pace University's Statement of At-Will Employment which can be found at: <http://www.pace.edu/human-resources/employer-resources/employee-handbook-policies#Statement-of-At-Will-Employment>.

Probationary status will be specified for a designated length of time and will include regularly scheduled evaluation sessions with the senior staff, intern, and supervisor. Termination of probationary status will:

- (a) be contingent upon demonstrated improvements in the intern's functioning,
- (b) be determined by the entire senior staff, and
- (c) be communicated to the intern in writing by the Director of Training within two working days of the final decision.

The intern's home academic program will be notified immediately of the decision to place the intern on probation and of the disposition following the probationary period. Failure to comply with remedial plan or to significantly improve the concerns leading to probation can result in a number of consequences to be decided by the senior staff:

- Continuation of the probationary period.
- Provision of a negative evaluation of the intern to the home program and other appropriate parties.
- Extension of the training experience at Center. In situations where the intern's behaviors and/or skills need remediation, and where the trainee has made some progress toward

change, but where sufficient progress has not been made prior to the end of the training program, the intern may be allowed to extend her/his stay at the Center in order to complete the requirements. This decision is completely at the discretion of the Center staff. In some cases, the intern may be recommended to complete part or all of a second internship. In any case, the intern must demonstrate a capacity and willingness for full remediation, and the home program will be notified and consulted.

- Notification to the home program that the training program has not been successfully completed with a possible recommendation that the home program require the intern to complete additional training experiences prior to moving forward in their program. The Center is not responsible for the provision of the additional training.
- Suspension or dismissal.

#### – **Suspension or dismissal** –

In cases involving severe violations of the APA Code of Ethics, where imminent harm to a client is a salient concern, where there is a preponderance of unprofessional behavior, or where there is a lack of change in behaviors for which a trainee has been placed on probation, suspension of agency privileges or dismissal may be recommended consequences. In such cases, this decision will be made by the entire training staff and will be subject to approval by the Director of the Center. Written documentation will be given to the intern. The intern will be notified immediately and will be provided with a copy of the documentation and informed of grievance and appeal procedures. If the decision is made to suspend the intern, the Director of Training will send written notification of this action to the intern's home academic department within two working days of the decision and also contact the student's advisor by phone. Suspension would take the form of a required leave of absence from the Center; dismissal means that the intern would be terminated from the training program. In the latter case, the agency will make recommendations to the home program regarding further remediation and/or a career shift.

#### – **Definition of Impairment** –

Interns make significant developmental transitions during the internship placement period. Part of the training process involves the identification of growth and/or problem areas for the intern. A problem area is defined as a behavior, attitude, or other characteristic which, while of concern and requiring remediation, is not excessive or outside the domain of behaviors for professionals in training. Problems are typically amenable to management procedures or amelioration.

While it is a professional judgment as to when an intern's behavior becomes impaired rather than problematic, impairment can be broadly defined as interference in professional functioning which is reflected in one or more of the following ways:

- An inability and or unwillingness to acquire and integrate professional standards into one's repertoire of professional behaviors.
- An inability to acquire professional skills in order to reach an acceptable level of competency.
- An inability to control personal stress, psychological dysfunction, and/or strong emotional reactions.
- More specifically, problems will typically become identified as impairments if they include one or more of the following characteristics:
  - The intern does not acknowledge, understand or address the problem when it is identified.

- The problem is not merely a reflection of a skill deficit that can be rectified by academic or didactic training.
- The quality of services delivered by the intern is seriously impacted and not at an acceptable level for the Center.
- The problem is not restricted to one area of professional functioning.
- A disproportionate amount of attention by training staff is required.
- The intern's behavior does not change as a function of feedback, remediation efforts, and/or time.

### **-Due Process-**

If the intern is in disagreement with any aspect of the remedial action, probationary, suspension, or dismissal procedures, s/he may utilize the designated intern grievance procedures. The intern may grieve the validity of concerns that have been raised, the requirements of a Remedial Action Plan, and/or the process used during the remediation procedure.

### **– Grievance Procedures –**

At any time during the year, an intern may take issue with a staff member regarding a particular behavior or pattern of behaviors, or with the entire staff regarding policy or procedure. It is expected that the complainant will take the concern directly to the person(s) with whom s/he takes issue and that the parties will work to resolve the concern in a manner satisfactory to both.

In the event that the intern feels dissatisfied with the outcome, the following grievance procedures are established to aid in the resolution:

If the intern has a problem with a supervisor, seminar leader, or staff person which s/he has been unable to resolve through discussion with that person, the Director of Training will meet with both parties to provide mediation and resolution of the problem. The senior staff will also be notified of the situation. If the Director of Training is the party with whom the intern has issue, then the Director of the Center will meet with both parties to provide mediation and resolution. The intern may also invite another staff member or colleague to attend this meeting to serve in an advocacy role, or to present information supporting the intern.

If resolution still has not been achieved, the intern may request a three-person committee, composed of two senior staff members or adjunct supervisors and one other colleague chosen by the intern, be assembled. This committee will, in a timely fashion (not to exceed 30 days), gather information regarding the grievance, inform the intern of its findings, and offer recommendations to the Director of Training (or the Center Director if the Director of Training is involved in the issue). Should the intern contest the decision, he/she can take the issue to the Director of the Center who will review the information and make a final decision.

The decision of the Director may be grieved through out-of-agency mechanisms internal and external to Pace University. An intern who desires an out-of-agency hearing with the University will be directed to take his/her case to the Dean for Students, the University Ombud's office, or some other appropriate office (such as the Office of Equal Opportunity), for further investigation and resolution according to University policy.

**-Confidential Storage of Grievances Filed-**

It is the policy of Pace Counseling Center that all formal complaints and grievances filed against the program and/or against individuals associated with the program will be processed by the Internship Training Director and, when necessary, the Center Director.

Should an intern choose to file a grievance:

1. All formal complaints and grievances will be treated with sensitivity and confidentiality.
2. Information and records of all formal complaints and grievances are stored in a locked file cabinet adjacent to the office of the Training Director, where all intern personnel files are kept.
3. A separate log of complaints/grievances that does not identify either the complainant or the party against whom the complaint was filed will be maintained by the Center Training Director. Entries in the log include the date the complaint/grievance was filed; the issue(s) addressed; what, if any, action was taken; and the governance level (e.g. department, college, institution) at which the complaint/grievance has been or will be adjudicated.

### **-Policy Regarding Adjunct Supervision of Cases-**

In the event that an emergency occurs with a client who is being supervised by an Adjunct Supervisor, the following procedure should be followed irrespective of whether the Adjunct Supervisor is available:

1. Intern should inform the Training Director of the emergency. If the Training Director is unavailable, the Director should be informed. If neither is available, the Assistant Director should be informed. If all three directors are unavailable, one of the senior staff psychologists should be informed.
2. The Center staff member should then designate an Administrative Supervisor to work with the intern on the case. Every effort should be made to contact the Adjunct Supervisor who remains responsible for the clinical supervision of the case.
3. If possible, the designated administrative supervisor should work collaboratively with the intern to develop an effective plan of action. However if the clinical supervisor is unavailable, administrative supervision supersedes clinical supervision.
4. When the crisis is over, the clinical supervisor resumes primary responsibility of the case.



### -Suicidal Crises Procedures-

When a counseling center staff member encounters a student in the Counseling Center who may be suicidal, evaluate the immediacy and seriousness of the crisis by using the **Suicide Assessment Checklist**.

#### – Not Actively Suicidal –

1. The **Commitment to Treatment Statement** should be reviewed with the client and signed by the client and counselor. Detail the steps to be taken in the event that suicidal impulses recur. Make a copy of the contract. Give a copy to the client and put original in client's paper folder. You must notify your supervisor immediately when you make a commitment to treatment contract.
  - a. The Commitment to Treatment Statement is used with students who are currently in therapy at the counseling center. The Commitment to Treatment Statement can also be used with a student who is not a current client but agrees to a screening and will be a future client.
  - b. It is not to be used with non-clients who refuse treatment at the counseling center. In cases where crisis clients have refused treatment, make a note of this.
  
2. If no attempt has been made and the student is not suicidal at the time of the interview (i.e. student states that he/she can control suicidal impulses; student demonstrates awareness that current situation will be ameliorated with time; student shows planning for future productive activities), then the client's commitment to treatment should be established.
  
3. No further action is necessary if the student is not actively suicidal during the interview, has not already made an attempt, and cooperates in establishing a commitment to treatment.

#### – Actively Suicidal –

In the event that the student is actively suicidal during the interview and completion of the **Suicide Assessment Checklist** (i.e., states that impulses cannot be controlled; has a definite plan and the means to carry it out; refuses to make a commitment to treatment), further action is necessary.

1. **Do not leave the student alone.** Call senior staff for support. Discuss hospitalization with the student. If the student will go voluntarily to a hospital (and has not just made a suicide attempt or was not interrupted in the process of making an attempt) and in your judgment is capable of traveling to a hospital, you may make arrangements for them to go voluntarily for psychiatric evaluation. **Intern and extern counselors must seek supervision and consultation with a senior staff member prior to calling the hospital or Pace security.**
2. Generally, Pace students warranting **voluntary** hospitalization will be fielded through North Shore LIJ : The Zucker Hillside Hospital. Specific protocol: 1. Consult with senior staff who will call LIJ EMS (516) 719-5000 for emergency transport. 2. Complete emergency referral form to give to EMS upon arrival. 3. Fax a copy of the emergency referral form to BHCP (718) 470-1905. 4. Call Emergency Department at (718) 413-1791 to reach Psychiatric Attending or ED Social Worker. Alert them to the impending arrival of a college student and provide them with a phone number that you can be reached 24/7. 5. Dr. Richard Shadick will call Laura Braider, Ph.D.

Director at (718) 470-8049 to alert her that a student has been sent to the ED. 6. A senior staff member will be available (24/7) for phone call from ED in order to provide collateral and receive phone call regarding disposition.

3. Students warranting **involuntary** hospitalization will generally be fielded by EMS, contacted by Pace Security. Consult with a senior staff member who will call security at x11800. EMS determines the hospital in which the student will receive treatment. Many of our involuntary hospitalizations are treated by Bellevue Hospital's ER at 462 First Avenue. A senior staff member, at times along with a trainee, should accompany the student to the hospital. The counselor should notify his/her supervisor and the Director of the counseling center followed by the Residence Life Director, Mr. Andrew Patrick Roger Gordon (if the student lives in the dorm) and the Dean for Students, Marijo Russell O'Grady. The student should be informed that his/her family may need to be notified. The Dean for Students may contact the student's family to inform them about the student's situation.

If student has just made a suicide attempt, was interrupted in the process of making an attempt, or student refuses to go for hospital evaluation then:

**Make sure the student is not left alone.** Call on other staff for support. **Intern and extern counselors must seek supervision and consultation with a senior staff member prior to calling the hospital or Pace security.** When speaking with Pace security (x11800), state the name of the student, location, phone number, what happened, and condition of the student.

1. Have security call 911 and state the emergency.
2. Contact your clinical supervisor and he or she will contact the Dean for Students and Director of Residential Life (if they are in residence).
3. A senior staff member and, at times together with a trainee, should accompany the student to the hospital.
4. Interns and externs should check in with senior staff after the student has been admitted.

At the hospital, it is standard procedure for the client to be asked questions related to insurance and for demographic information. This may seem like an unwarranted delay in receiving services but it is standard procedure with all potential admissions and outpatients. Be aware that the person collecting this information may not be fully aware of the crisis nature of your visit.

If the hospital refuses to admit the student after psychiatric evaluation:

Family should be informed of the student's mental health needs prior to the ER's evaluation for hospitalization and, if feasible, prepared to accept student back home temporarily should the hospital refuse admission. In the event that the student strongly opposes this, or the family environment is judged to be disruptive, then some other supportive relative or person may serve as a resource.

**Appendix I.****PIRS- Pace Intern Rating Scale 2020**

Q1

**Evaluation Form for Profession Wide Competencies for Psychology Interns in Health Service Psychology**

Q2 Intern Name:

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Q3 Evaluation Period:

- Mid-year (1)
- Final (2)

Q7 Supervisor:

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Q23 Supervisor's Email:

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Q8 Date:

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Q22 **Work Supervised:**

- Individual Psychotherapy- Adjunct Supervisor (1)
- Individual Psychotherapy- Onsite Supervisor (2)
- Group Psychotherapy (3)
- Consultation and Outreach/C&O Seminar (4)

Provision of Supervision/ Supervision Seminar (5)

Multicultural Competency Seminar (6)

Case Conference Seminar (7)

Q11 Evaluation Based on:

Discussion (1)

Observation (2)

Case Presentations (3)

Video Tapes (4)

Training Director (Receives Feedback from Training Committee) (6)

Other (7)

Q13 **Rating Scale:**

**CR-** Cannot Rate at this time due to insufficient data

**1-** Not yet competent. Requires improvement for successful attainment of competency

**2-** Generally competent but with some inconsistency and room for growth

**3-** Competent and consistent

**4-** Competent and an area of real strength

A score of 2, 3, or 4 is required by midterm for items in each section.

A score of 3 or 4 is required by final for items in each section.

A score of 1 is in need of remediation at either point of the year.

**Q26 RESEARCH**

1. Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level. Dissemination of research includes, but is not limited to, that which the intern discusses and/or disseminates during weekly internship training seminars. (4)

▼ CR (2) ... 4 (16)

2. Demonstrates knowledge, skills, and competence to use existing scientific knowledge in clinical practice and other professional activities such as consultation and outreach presentations, taking into consideration issues of diversity and contextual variables. (5)

▼ CR (2) ... 4 (16)

**Q15 ETHICAL AND LEGAL STANDARDS**

3. Is knowledgeable of and acts in accordance with: a) APA Ethical Principles of Psychologists and Code of Conduct b) Relevant laws, regulations, rules and policies governing health service psychology c) Relevant professional standards and guidelines (1)

▼ CR (1) ... 4 (5)

4. Recognizes ethical dilemmas and applies ethical decision-making processes consulting as appropriate to resolve the dilemmas. (2)

▼ CR (1) ... 4 (5)

5. Conducts self in an ethical manner in all professional activities (3)

▼ CR (1) ... 4 (5)

## Q17 INDIVIDUAL AND CULTURAL DIVERSITY

6. Demonstrates an understanding of how own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves. (1)

▼ CR (1) ... 4 (5)

7. Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision/consultation, and service. (2)

▼ CR (1) ... 4 (5)

8. Demonstrates the ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles (e.g., research, services, and other professional activities). (3)

▼ CR (1) ... 4 (5)

9. Demonstrates the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered over the course of their careers. (4)

▼ CR (1) ... 4 (5)

10. Demonstrates the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own. (5)

▼ CR (1) ... 4 (5)

11. Demonstrate the ability to independently apply their knowledge and

▼ CR (1) ... 4 (5)

approach in working effectively with the range of diverse individuals and groups encountered during internship. (6)

12. Seeks to expand self-awareness, skills, knowledge, and sensitivity to individual and cultural diversity. (7)

▼ CR (1) ... 4 (5)

## Q27 PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS

13. Behaves in ways that reflect the values and attitudes of psychology including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others. (1)

▼ CR (1) ... 4 (5)

14. Engages in self-reflection regarding one's personal and professional functioning. (2)

▼ CR (1) ... 4 (5)

15. Engages in activities to maintain and improve performance, well-being, and professional effectiveness. (3)

▼ CR (1) ... 4 (5)

16. Actively seeks and demonstrates openness and responsiveness to feedback and supervision. (4)

▼ CR (1) ... 4 (5)

17. Responds professionally in increasingly complex situations with a greater degree of independence over the course of training. (5)

▼ CR (1) ... 4 (5)

**Q20 COMMUNICATION AND INTERPERSONAL SKILLS**

18. Develops and maintains effective relationships with a wide range of individuals including colleagues, communities, organizations, supervisors, supervisees (if supervising), and those receiving services. (1)

▼ CR (1) ... 4 (5)

19. Produces and comprehends oral, non-verbal, and written communications that are informative and well-integrated, demonstrating a thorough grasp of professional language and concepts. (2)

▼ CR (1) ... 4 (5)

20. Demonstrates effective interpersonal skills and the ability to manage difficult communication well. (3)

▼ CR (1) ... 4 (5)

**Q21 ASSESSMENT**

21. Demonstrates current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology. (1)

▼ CR (1) ... 4 (5)

22. Demonstrates understanding of human behavior within its context (e.g., family, social, societal and cultural). (2)

▼ CR (1) ... 4 (5)

23. Demonstrates the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process. (3)

▼ CR (1) ... 4 (5)



24. Selects and applies assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collects relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient. (Selecting and applying assessment methods includes clinical assessments, e.g., suicide assessment, and, when indicated, providing clients with referrals for a battery of formal psychological assessment). (4)

▼ CR (1) ... 4 (5)

25. Demonstrates the ability to interpret assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective. (5)

▼ CR (1) ... 4 (5)

26. Communicates orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences. (6)

▼ CR (1) ... 4 (5)

## Q22 INTERVENTION

27. Establishes and maintains effective relationships with the recipients of psychological services (i.e., builds therapeutic rapport and repairs ruptures in the therapeutic alliance as needed). (1)

▼ CR (1) ... 4 (5)

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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> 28. Develops evidence-based intervention plans specific to the service delivery goals. (2)                                                                                                                                          | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |
| <input type="checkbox"/> 29. Implements interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables. (3)                                                                           | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |
| <input type="checkbox"/> 30. Demonstrates the ability to apply the relevant research literature to clinical decision making. (4)                                                                                                                             | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |
| <input type="checkbox"/> 31. Modifies and adapts evidence-based approaches effectively when a clear evidence-base is lacking. (5)                                                                                                                            | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |
| <input type="checkbox"/> 32. Evaluates intervention effectiveness, and adapts intervention goals and methods consistent with ongoing evaluation. (6)                                                                                                         | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |
| <input type="checkbox"/> 33. Uses appropriate timing of interventions. (7)                                                                                                                                                                                   | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |
| <input type="checkbox"/> 34. Demonstrates an ability to identify transference and countertransference and to integrate transference and countertransference issues into case conceptualizations and therapeutic interventions when clinically indicated. (8) | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |
| <input type="checkbox"/> 35. Manages caseload effectively by making appropriate case disposition decisions based on the client's needs and available resources. (9)                                                                                          | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |
| <input type="checkbox"/> 36. Works toward effective termination from the onset of treatment. (10)                                                                                                                                                            | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |

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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> 37. Identifies the limits of own competency and consults or refers as appropriate. (11)                                                                                    | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |
| <input type="checkbox"/> 38. Demonstrates the ability to identify relevant non-verbal behavior and the ability to explore inconsistencies between nonverbals and client self-report as needed. (12) | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |

### Q23 SUPERVISION

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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> 39. Demonstrates knowledge of supervision models and practices. (1)                                                                                                                           | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |
| <input type="checkbox"/> 40. Demonstrates the ability to apply the knowledge of supervision while supervising a pre-doctoral extern. (2)                                                                               | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |
| <input type="checkbox"/> 41. Demonstrates integration of diversity and multiple identity aspects in conceptualization of supervision process with all parties involved such as client/s, supervisee, & supervisor. (3) | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |
| <input type="checkbox"/> 42. Provides informal, on-going and timely feedback to supervisee. (4)                                                                                                                        | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |
| <input type="checkbox"/> 43. Completes formal evaluation of supervisee that is congruent with “ongoing and timely” feedback highlighted above, effectively communicating strengths and growth areas. (5)               | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |
| <input type="checkbox"/> 44. Seeks continual feedback from supervisee regarding the supervisory relationship and supervisee needs. (6)                                                                                 | <input type="checkbox"/> ▼ CR (1) ... 4 (5) |

**Q24 CONSULTATION AND INTERPROFESSIONAL/ INTERDISCIPLINARY SKILLS**

45. Demonstrates knowledge and respect for the roles and perspectives of other professions. (1)

▼ CR (1) ... 4 (5)

46. Demonstrates the ability to apply this knowledge in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior. (2)

▼ CR (1) ... 4 (5)

47. Demonstrates knowledge of consultation models and approaches with individuals, groups, and organizations (e.g., The department to which intern provides consultation vis-à-vis their consultation rotation). (3)

▼ CR (1) ... 4 (5)

48. Demonstrates ability to develop and present effective outreach programs. (4)

▼ CR (1) ... 4 (5)

**Q29 Narrative Section**

Q30 Narrative Comments:

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Q31 Strengths Identified:

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Q32 Areas for Growth/ Areas to target for improvement:

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Q33 Recommendations for training to further develop strengths or to address areas identified for improvement:

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Q24 Supervisor's Electronic Signature:

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Q25 Date:

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### **Verification of Completed Review of Pace Counseling Internship Handbook**

By signing below, I am acknowledging that I have read the entire Pace Counseling Internship Handbook and have had the opportunity to have any questions or concerns answered by the Training Director and/or my supervisors. I also acknowledge that I have been informed that I can ask questions or receive clarification on any of the information, policies, and procedures delineated in the Internship Handbook at any time during the training year.

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Intern Name

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Intern Signature & Date

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Training Director Signature & Date