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	• 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 (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, Group Psychotherapy Seminar, 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.	Evaluation tool: • Evaluation tools are both formative (ongoing and frequent) and summative (6 months and end-of-internship) using the Pace Intern Rating Scale (PIRS). • In the weekly Training Committee meeting, the training director and respective individual supervisors of each intern meet to discuss interns' growth.

Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.	On the recently revised Pace Intern Rating Scale (PIRS), given at 6 months and 12 months/end-of-internship, a rating of 2 (*Generally competent but with some inconsistency and room for growth*), 3 (*Competent and consistent*) or 4 (*Competent and an area of real strength*) is required by midterm and final for items in each section. A score of 1 (*in need of remediation*) is in need of remediation at either point of the year. Please see attached for the revised Pace Intern Rating Scale (PIRS).

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)	• Demonstrates 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. • Demonstrates knowledge and ability to follow New York State Law regarding the ethical practice of Psychologists. • Demonstrates knowledge regarding the relevant laws, regulations, rules, policies, standards and guidelines governing health service psychology. • Understands and follows the Center's policies and procedures. • Recognized ethical dilemmas and apply ethical decision-making processes. • Appropriately seeks consultation when ethical or legal issues require resolution. • Behaves 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 for each training/experiential activity listed above.	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.	Evaluation tool: Evaluation tools are both formative (ongoing and frequent) and summative (6 months and end-of-internship) using the Pace Internship Rating Scale (PIRS). • In the weekly Training Committee meeting, the training director and respective individual supervisors of each intern meet to discuss interns' growth.
Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.	On the recently revised Pace Intern Rating Scale (PIRS), given at 6 months and 12 months/end-of-internship, a rating of 2 (Generally competent but with some inconsistency and room for growth), 3 (Competent and consistent) or 4 (Competent and an area of real strength) is required by midterm and final for items in each section. A score of 1 (in need of remediation) is in need of remediation at either point of the year. Please see attached for the revised Pace Intern Rating Scale (PIRS).	

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 for each training/experiential activity listed above.	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	Evaluation tool: • Evaluation tools are both formative (ongoing and frequent) and summative (6 months and end-of-internship) using the Pace Intern Rating Scale (PIRS).

	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	• In the weekly Training Committee meeting, the training director and respective individual supervisors of each intern meet to discuss interns' growth.

	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".	
Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.	On the recently revised Pace Intern Rating Scale (PIRS), given at 6 months and 12 months/end-of-internship, a rating of 2 (Generally competent but with some inconsistency and room for growth), 3 (Competent and consistent) or 4 (Competent and an area of real strength) is required by midterm and final for items in each section. A score of 1 (in need of remediation) is in need of remediation at either point of the year. Please see attached for the revised Pace Intern Rating Scale (PIRS).	

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

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<tr><td></td><td colspan="2">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.</td></tr>
<tr><td>How outcomes are measured for each training/experiential activity listed above.</td><td>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.</td><td>Evaluation tool:
• Evaluation tools are both formative (ongoing and frequent) and summative (6 months and end-of-internship) using The Pace University Rating Scale (PIRS).
• The Training Committee meets weekly to discuss interns' growth.
• Consultation rotation supervisors' evaluation of the intern.</td></tr>
<tr><td>Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.</td><td colspan="2">On the recently revised Pace Intern Rating Scale (PIRS), given at 6 months and 12 months/end-of-internship, a rating of 2 (Generally competent but with some inconsistency and room for growth), 3 (Competent and consistent) or 4 (Competent and an area of real strength) is required by midterm and final for items in each section. A score of 1 (in need of remediation) is in need of remediation at either point of the year.

Please see attached for the revised Pace Intern Rating Scale (PIRS).</td></tr>
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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.	Evaluation tool: • Evaluation tools are both formative (ongoing and frequent) and summative (6 months and end-of-internship) using the Pace Intern Rating Scale (PIRS). • Weekly Training Committee meetings review interns interpersonal functioning and any related concerns.
Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.	On the recently revised Pace Intern Rating Scale (PIRS), given at 6 months and 12 months/end-of-internship, a rating of 2 (Generally competent but with some inconsistency and room for growth), 3 (Competent and consistent) or 4 (Competent and an area of real strength) is required by midterm and final for items in each section. A score of 1 (in need of remediation) is in need of remediation at either point of the year. Please see attached for the revised Pace Intern Rating Scale (PIRS).	

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.	Evaluation tool: • Evaluation tools are both formative (ongoing and frequent) and summative (6 months and end-of-internship) using the Pace Intern Rating Scale (PIRS). • Weekly Training Committee meetings to discuss interns' progress in this competency.

	• 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.	
Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.	On the recently revised Pace Intern Rating Scale (PIRS), given at 6 months and 12 months/end-of-internship, a rating of 2 (Generally competent but with some inconsistency and room for growth), 3 (Competent and consistent) or 4 (Competent and an area of real strength) is required by midterm and final for items in each section. A score of 1 (in need of remediation) is in need of remediation at either point of the year. Please see attached for the revised Pace Intern Rating Scale (PIRS).	

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 9 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 (Group Psychotherapy Supervision 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.	Evaluation tool: • Evaluation tools are both formative (ongoing and frequent) and summative (6 months and end-of-internship) using the Pace Intern Rating Scale (PIRS). • Weekly Training Committee meetings to

	• 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).	discuss interns' growth in this area.
Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.	On the recently revised Pace Intern Rating Scale (PIRS), given at 6 months and 12 months/end-of-internship, a rating of 2 (Generally competent but with some inconsistency and room for growth), 3 (Competent and consistent) or 4 (Competent and an area of real strength) is required by midterm and final for items in each section. A score of 1 (in need of remediation) is in need of remediation at either point of the year. Please see attached for the revised Pace Intern Rating Scale (PIRS).	

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.	Evaluation tool: • Evaluation tools are both formative (ongoing and frequent) and summative (6 months and end-of-internship) using the Pace Intern Rating Scale. • Weekly Training Committee meetings to discuss interns' progress in this competency.
Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.	On the recently revised Pace Intern Rating Scale (PIRS), given at 6 months and 12 months/end-of-internship, a rating of 2 (Generally competent but with some inconsistency and room for growth), 3 (Competent and consistent) or 4 (Competent and an area of real strength) is required by midterm and final for items in each section. A score of 1 (in need of remediation) is in need of remediation at either point of the year. Please see attached for the revised Pace Intern Rating Scale (PIRS).	

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, inter-professional 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 for each training/experiential activity listed above.	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.	Evaluation tool: • Evaluation tools are both formative (ongoing and frequent) and summative (6 months and end-of-internship) using the Pace Intern Rating Scale (PIRS). • Weekly Training Committee meetings which to review interns' progress.

	• 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.	
Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.	On the recently revised Pace Intern Rating Scale (PIRS), given at 6 months and 12 months/end-of-internship, a rating of 2 (Generally competent but with some inconsistency and room for growth), 3 (Competent and consistent) or 4 (Competent and an area of real strength) is required by midterm and final for items in each section. A score of 1 (in need of remediation) is in need of remediation at either point of the year. Please see attached for the revised Pace Intern Rating Scale (PIRS).	