

UNC
Counseling and Psychological Services
Psychology Internship Program
Training Manual

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INTRODUCTION

Training Philosophy and Model

UNC Chapel Hill (UNC-CH) Counseling and Psychological Services (CAPS) Health Services Psychology Internship Training Program began in 2007. We became members of APPIC in 2008 and gained APA accreditation in 2011. The CAPS training program is grounded in a practitioner-scholar model of training. Consistent with this model, we assist interns in integrating critical thinking skills, a strong foundation in theory, scientific inquiry, empirical literature and use of local data (empirical data collected from the UNC population) to inform their clinical practice. We emphasize a training approach that encourages interns to become more cognizant of the underlying thought processes, intellectual and conceptual frameworks, and belief systems that guide their work and to think more critically about how they make decisions at clinical choice points.

Consistent with our model of training, learning is experiential. Interns “learn by doing” with supervision and mentoring. Thus, interns participate in a wide array of university counseling services including: triage interviewing and decision making, crisis services, intake clinical assessment, individual therapy, group therapy, outreach, and clinical supervision of practicum trainees. Optional training areas include couples counseling and consultation. Interns have opportunities to work closely with a large and diverse staff of psychologists with a wide range of theoretical orientations (including interpersonal, cognitive-behavioral, existential, humanistic, psychodynamic, multicultural, feminist, Acceptance and Commitment, Dialectical Behavioral Therapy, solution-focused and integrative) and areas of specialization (such as gender issues, LGBTQA identities and communities, disordered eating, sexual and relationship violence, substance abuse, mindfulness, suicide prevention, career development, and crisis intervention). As part of our multidisciplinary team, interns work closely with psychologists, social workers, and psychiatrists on staff. Additionally, interns have the opportunity for supervision by a number of senior staff as well as supplementary learning opportunities in didactic skill-building seminars and through co-therapy, clinical team participation, and ongoing professional continuing education programs.

The CAPS internship offers a variety of training experiences such as providing brief individual therapy, group therapy, intake assessment, crisis intervention and triage service, outreach, workshop development and delivery, supervision of a practicum student, and consultation. Interns participate in developmentally-targeted training experiences and supervision that help them move from areas of comfort in order to maximize growth. Interns are exposed to the values of CAPS and that of health service psychology which incorporates multiculturally-sensitive and ethical approaches, as well as knowledge of clinical theory, empirically-validated treatment, and clinical research.

The CAPS internship utilizes a developmental sequential training process. Interns are provided a planned sequence of training experiences that increase in the level of required skill, complexity, challenge and autonomous functioning across the internship year. A broad range of supervision and training experiences are offered to meet individual and group training needs. Training experiences are structured to be sequential, cumulative, and graded in complexity based on interns’ individual needs, areas of strength and interest, and skill level. We assess each intern’s

entry-level skills across the core service areas of the center, as well as in overarching areas. Over time, interns are expected to assume greater responsibility and to function more autonomously within the collaborative environment of the counseling center.

Content and personal growth areas emphasized in our training program reflect the values, philosophy and priorities that the CAPS training staff considers essential to the development of competent, responsibly functioning psychologists. In addition to our focus on a scholarly approach and the development of clinical skills, we prioritize multicultural competence, ethical practice, self-reflection, initiative to learn, and interpersonal and communication skills. Throughout the internship, emphasis is placed on increasing multicultural competence. CAPS staff is strongly committed to addressing the needs of a diverse student body and providing culturally sensitive services, as well as continuing to develop in our own multicultural competence. CAPS values people of every background having access to our services and being treated with respect and dignity. The professional ethics and standards of the various mental health fields represented at CAPS set a framework for understanding how facets of identity (e.g., gender, ethnicity, race, sexual orientation, age, physical and mental abilities, religious beliefs, and socioeconomic class) enhance the understanding and treatment of all people. We have an approach to mental health that integrates physical, emotional, social, and cultural dimensions. Interns will be expected to actively participate in activities designed to increase multicultural awareness, knowledge, and skills and to work with clients of diverse identities and experiences.

Our program expects interns to acquire and use knowledge of ethical and legal principles and professional practice guidelines to guide their work. Awareness of ethical functioning is integrated into training on multiple levels within the program in order to help interns to apply ethical functioning and learning throughout their professional lives.

It is our belief that developing competence as a psychologist requires openness to personal exploration. This use of self is essential to create a strong therapeutic alliance and guide in order to evaluate clinical interventions. Therefore, the training program relies upon interns' ability and willingness to explore their own qualities and dynamics and the ways these facilitate or hinder interpersonal interactions (with staff as well as with clients). Interns will be encouraged to use their own thoughts and feelings as a tool to better understand client dynamics and choose effective interventions. Interns will be supported in considering their values, beliefs and the assumptions that underlie their work as psychologists-in-training. Thus, interns will be asked to engage in personal self-exploration that at times may lead to disclosure of personal information. We believe that these disclosures are opportunities to further develop as a psychologist-in-training and will be held in a safe and supportive manner and as appropriate to the training goals and values.

We believe that training is most beneficial with interns who take initiative and actively participate in their training. Thus, throughout the internship year, interns are engaged in assessing their own needs and progress and understanding how they see themselves as emerging professionals.

A Developmental, Sequential Training Process

The CAPS internship program is organized developmentally. Interns begin the year with orientation which is aimed at helping them to transition into the organization and community, to become part of the staff, and in their roles as interns. During orientation, interns also become much more aware of the CAPS approach to training and the hopes and expectations we have for their year with us. They participate in activities aimed at helping them clarify their needs, current level of training, and hopes and expectations for the year. There are sessions scheduled during orientation to introduce interns to the training experiences and activities in which they will participate during the year. These sessions focus on providing information, didactic training, and some modeling of clinical and professional behavior.

As interns begin to participate in training activities and service provision, they are provided information and encouraged to observe and/or consult frequently until we are clearer about their skill level in each function and they feel confident to move forward. Supervisors and the Training Committee track whether interns' assessment of their competence levels is accurate and whether they need more support than they realize or encouragement to move forward from their comfort zone. It is anticipated that interns will potentially be at different levels of competency on different tasks, both from each other and from their own level of proficiency on other tasks. Similarly, it is expected that interns will develop at different rates as they move through different aspects of the program.

Training in each skill area will utilize a developmental approach incorporating the following modalities:

- The training year begins with a 2-3 week Orientation Program. The first few weeks are designed so that interns will familiarize themselves with the operations at CAPS. The orientation program's goal is to provide interns with an overview of CAPS' mission and values, structure, functions, and processes. Additionally, this period serves to clarify expectations, to learn about the administrative and clinical policies and procedures, to learn about other campus departments, and to facilitate team building and goal setting for the internship year. Activities focused on becoming acquainted and developing team work, camaraderie, skills for self-care, are also incorporated. Interns are able to become acquainted with staff and with their clinical supervisors. Orientation provides interns a general introduction to all areas of functioning included in the internship and provides conceptual and/or didactic frameworks for many areas. Additionally, some orientation sessions focus more extensively on some skill areas. Lastly, interns learn about both of the electronic medical record systems that are used at CAPS: Titanium and eClinical Works (eCW). Each intern learns these systems by practicing in front of the computer with the instruction of two staff. Time is built in for interns to practice using these systems and to ask questions.
- Observation of supervisors and other staff providing triage service during and after orientation provides interns with an opportunity to learn how the CAPS triage system works, learn about ways to build rapport and a therapeutic alliance within a briefer format, learn about providing risk and safety assessments, disposition options, and helps

interns become familiar with some of the issues and challenges associated with this area of service provision. Interns have the opportunity to provide triage in conjunction with a staff member. Interns have the opportunity to debrief with staff after observing their triage meetings in order to have the opportunity to ask questions and process reactions. After interns have been able to sit and observe several staff providing triage, they begin to provide triage while being observed by a staff member before moving to conducting triage on their own. They begin participating more actively and more independently as their level of competence and comfort increases. When interns begin seeing clients independently, they are initially assigned clients who deny safety concerns on their client information forms. Interns increasingly assume more responsibility and function more autonomously as they become more experienced and comfortable with triage. In addition, an hour of triage supervision is provided weekly in a group by two staff members.

- When interns see clients, either for triage, intake, or brief therapy, staff members are available for consultation, processing the session, or on the spot supervision either during the session or subsequent to the client's departure.
- Interns develop in their competency in each areas as they participate in training activities including: discussions and review of video and audio recordings of their sessions in supervision, discussions and case presentations in multicultural mentoring, participation in triage supervision, didactic seminars, group case conference, group individual supervision, bi-monthly meeting with the Coordinator of Training, interaction and discussion with other interns, and informal, on the spot consultation with staff members.
- Supervisors and the Training Committee evaluate and give feedback to interns to encourage their development, identify areas needing extra attention, and provide suggestions for areas of growth. As staff is clearer about an intern's level of competency and confidence in a particular area, the intern is encouraged to function more autonomously and with more complex presentation in that area. Supervision and other training activities encourage interns to incorporate their increased level of competency into their self-concept as a professional and level of confidence. Interns thereby feel increasingly able to take on additional challenges and push their growth edges.
- Seminar sessions offered throughout the year continue to provide background to conceptual and/or didactic frameworks for an array of relevant topics. Seminars provide more in depth explorations of various topics or encourage interns to contemplate their experiences thus far in the area or to integrate their didactic and/or scientific knowledge with their provision of the service.
- Interns, working from a practitioner-scholar model of training, "learn by doing" with supervision and mentoring, and apply theory in their work with clients. Interns are exposed to a variety of theoretical models including multicultural, psychodynamic, interpersonal, feminist, cognitive-behavioral, humanistic, existential, Acceptance and Commitment, Dialectical Behavioral Therapy, and solution-focused. Exposure to these various models arises in individual and group supervision, didactic seminars,

multicultural mentoring, consultation, continuing education, through articles and other evidence based research. Interns are expected to develop in their ability to conceptualize and provide a theoretical rationale for the work they are doing as the year progresses.

- Two hours of individual supervision are provided weekly to interns. This time is used to discuss cases and review video or audio recordings of sessions. At the beginning of the year, supervisors and interns discuss the expectations for supervision that are documented in the training manual and help the interns clarify their goals for supervision. The supervisory model for internship is a developmental one. Over the course of the training year, as interns develop and hone their therapy skills, we expect them to be able to develop and articulate their own style of therapy and to be able to take increasing responsibility for their learning in supervision.

INTERNSHIP PROGRAM GOALS AND OBJECTIVES

Overall Training Goals

The aim of the Counseling and Psychological Services (CAPS) internship is to help interns develop into professional psychologists who can think about, and integrate into their practice, the values and qualities that we have found to be essential to the field of psychology. This aim results in interns developing the skills and qualities necessary to provide effective clinical services. A priority in our training program is to support interns in the development of multicultural and ethical competencies. Additionally, the CAPS internship program focuses on encouraging self-awareness and interpersonal skills that contribute to effectiveness as a psychologist and allow interns to develop into practitioners who can function autonomously and as part of team. Throughout their training, interns will utilize and build on their knowledge of psychological theory and research and will integrate a scholarly approach into their practice of psychology. Interns will engage in a variety of training opportunities to develop and grow as psychologists. The program trains generalists who are particularly well-prepared for university counseling center work, but who are also able to perform in a variety of other positions, especially outpatient settings.

Internship is a time to build on the competencies achieved in prior training, in order to reach a point of readiness for professional functioning. The CAPS training program provides developmentally-targeted experiences and supervision that helps interns build on areas of experience and develop new ones in order to maximize growth. Interns expand their skill base through exposure to diverse clinical phenomena and approaches to treatment. Knowledge of clinical theory and empirically-supported treatment provide a framework through which to consider clinical training experiences. Interns explore the underlying values, belief systems, and assumptions that guide the approach to treatment. During the year, interns further develop in their skill level, awareness of their individual theoretical orientation and therapeutic style, and understanding of ethical and multicultural competence. This development results in an increased sense of a cohesive professional identity.

Requirements for Meeting the Internship Goals

Total Hours of the Internship: 2000

Direct Service Hours: 500 hours

Hours are divided as follows:

Clinical Experiences:

Individual Brief Therapy: Average of 11-14 clients/week

Triage/Urgent Care: Average of 4 hours/week

Group Therapy: Average of 1-2 groups/semester

Couples Therapy: Although couples are rarely seen, they can replace individual client hours

Long-term therapy: 2 clients (these would replace brief therapy hours)

Consult/Liaison: Optional

Outreach: At least 6 per year, 5 of which must be events other than tabling

Supervision of Practicum Students: 1 hour/week during either the first or second semester

Assessment: We do not offer formal psychological assessment opportunities. Interns do triage and intake assessments, safety evaluations, and academic intervention assessments

Other Training Activities:

Individual Supervision: 2 hours/week

Multicultural Mentoring/Supervision (in a group): 1 hour/week

Triage and Crisis Counseling Supervision (in a group): 1 hour/week

Professional Identity Development/Coordinator of Training Meeting (in a group): 1 hour bi-weekly

Group Case Conference: 1 hour/week for the academic year

Group Supervision: At least .5 hr/week (depends on the needs of specific group)

Supervision of Supervision (in a group): 1 hour/week

Multicultural Project: 1 per year

CAPS Didactic Seminar: 1 hour/week

Dissertation presentation to CAPS Staff: 1/year

Research Time: 2 hours/week

Administrative: documentation, phone calls, emails (varies)

Staff Meeting: About 1.5 hours twice a month

CAPS, CHS or Student Affairs Committee: 1 hour/week (optional)

DESCRIPTION OF INTERNSHIP COMPETENCIES AND RELATED TRAINING ACTIVITIES AND EXPERIENCES

RESEARCH

Professional practice in the field of psychology is built upon a foundation of the science of psychology. It is important for practitioners to utilize this knowledge to guide practice. Interns are exposed to theory and research related to their clinical work, and we integrate this exposure into many areas of our program.

Elements associated with this competency:

- Demonstrates the substantially independent ability to critically evaluate research
- Demonstrates the substantially independent ability to disseminate research or other scholarly activities (e.g. case conference, presentation, publications) at the local (including CAPS), regional, or national level
- Demonstrates the ability to apply scientific inquiry and critical thinking skills to their professional work

Required training/experiential activities:

- Presents dissertation to staff members
- Participates in weekly multicultural mentoring seminar where each intern takes turns writing up a report and including at least one article regarding multicultural issues, treatment considerations, evidence-based practices
- Interns consume research (e.g. articles, literature, presentations on-line) that inform their clinical skills and socialization into the health services psychology profession. As such, they are encouraged to incorporate research findings into their clinical work and outreach, consultation, and liaison roles.
- As part of the multicultural project, interns write a brief (3-5 page) literature review to ground their projects in the research and/or clinical literature.

ETHICAL AND LEGAL STANDARDS

Ethical practice is a crucial and integrated part of all aspects of the internship. Interns are expected to conduct themselves in an ethical manner, be aware of ethical dilemmas they may face in the counseling center setting, and consult appropriately. During orientation, interns begin exploring ethical issues, and these are woven into training activities throughout the year. Part of ethical practice involves self-awareness and self-care to ensure practicing within one's competency. Our commitment to ethical practice is informed by our deep commitment to social justice, and we affirm the importance of all people being treated with respect and dignity.

Elements associated with this competency:

- Is knowledgeable of and acts in accordance with the current version of the APA Ethical Principles of Psychologists and the Code of Conduct
- Is knowledgeable of and acts in accordance with relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels
- Is knowledgeable of and acts in accordance with relevant professional standards and guidelines
- Recognizing ethical dilemmas as they arise, and apply ethical decision-making processes in order to resolve the dilemmas
- Conducts self in an ethical manner in all professional activities
- Maintains appropriate boundaries and professional roles with clients and supervisees
- Respects client confidentiality and adheres to ethical and agency standards of confidentiality

- Practices within level of competency
- Maintains required agency records and documents, clearly written and completed within specified time

Required training/experiential activities:

- Participates in ethics part 1 and 2 didactic seminar during orientation which includes professional ethics and state laws related to the practice of psychology
- Completes agency-required HIPAA training
- Participates in weekly training activities such as multicultural mentoring, didactic seminar, triage supervision, supervision of supervision, and bi-monthly Coordinator of Training (COT) meetings, in which ethical issues are identified, explored, and discussed, with emphasis on application of the ethical decision making process.

INDIVIDUAL AND CULTURAL DIVERSITY

Multicultural competence is a core value of CAPS. We are deeply committed to providing effective clinical services to diverse populations. This includes therapist self-awareness as well as understanding the effect of individual's various cultural identities (e.g., gender, race, ethnicity, sexual orientation, age, physical and mental abilities, socioeconomic class, and religion, etc.) and societal prejudices on mental health. We weave attention to cultural factors throughout the internship, most specifically in multicultural mentoring and also in individual and group supervision, supervision of supervision, weekly seminars, and triage supervision. The purpose is to help interns continue to develop their self-awareness regarding issues of difference and provide culturally sensitive services to students and the University community.

Interns will work closely with their supervisors and other staff to explore their own identities and strengths that facilitate culturally sensitive interactions with students and staff, as well as identifying areas of growth. We believe having open dialogues regarding issues of difference helps interns and staff better integrate diversity issues into their clinical work.

Elements associated with this competency:

- Demonstrates an understanding of how their own personal/cultural history, attitudes, and biases may 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
- Demonstrates the ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles, including working effectively with areas of individual and cultural diversity not previously encountered over the course of their careers
- Demonstrates the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during internship
- Demonstrates the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own

- Addresses differences between their own cultural identities and values from those of their clients in a manner that is sensitive and respectful
- Incorporates diversity issues into professional relationships by being aware of their own subtle biases and trying to improve in these areas

Required training/experiential activities:

- Conducts individual and group therapy, triage, and outreach services with diverse populations
- Discusses diversity considerations related to clinical cases during individual supervision and training seminars and activities. During multicultural mentoring and other weekly training activities, licensed professionals lead the interns in merging their clinical skills with self-awareness of their own cultural identities, power and privilege, and social justice issues
- Interns consume research (e.g. articles, literature, presentations via websites) that inform their multicultural competence and their socialization into the profession of health service psychology.
- During orientation, interns participate in the following seminars and activities: visiting Covenant Scholars office (program for low-income students who can graduate debt-free through work-study), Safe Zone Training (purpose is to create a network of allies that people can talk to on campus regarding sexual orientation, gender identity and gender expression), Green Zone Training (training to learn more about the military affiliated student experience), Haven Training (training to learn more about resources on campus and ways to support students who may experience interpersonal relationship violence), cultural humility, gender affirming therapist webinar, meet with the Director of Accessibility Resources and Services, meet with the Director of the LGBTQ Center, Black and Blue Tour (learn about the history of the university in relation to slaves who built the campus and the first Black students at UNC-CH), Road to Resilience training (a group for students who are on academic probation).
- During the year, interns participate in weekly seminar meetings that include the following topics: working with international students, sexual orientation, gender identity and gender expression, white privilege, ableism, social justice in therapy.
- Interns participate in weekly staff meetings where local, state, national events that are culturally relevant are discussed and explored. In this manner, culturally sensitive interventions are discussed and are encouraged for interns and staff to pursue in their clinical work and consultative/liaison roles. In staff meeting, representatives from offices such as Title IX and the Ombuds Office present on trends and provide information about how to best serve and assist students.
- Interns have the option of developing a liaison relationship with a department on campus. They are encouraged to consider ways they can help assist and support the mission of a department that works with and/or represents a marginalized community. For example, some interns have provided drop-in hours to students at the LGBTQ Center. For the duration of their internship experience, the interns can form an ongoing consultation relationship with this office in which they deliver consultation related to students in

distress or students that would like to explore a particular issue or particular initiatives of the office related to mental health and wellness.

- Interns participate in a multicultural outreach project designed to assess the needs of, and/or provide services for a minority or underserved population or in some way contribute to the diversity initiatives of the agency. There are several checkpoints throughout the year in multicultural mentoring where interns discuss their progress with their project and may explore possible directions to take. They may explore these issues with the licensed psychologists facilitating multicultural mentoring, the Coordinator of Training, and/or other staff. Interns present their findings and share handouts and other relevant materials they used for their projects with the training committee in the summer. Interns are encouraged to use their findings and experience with outreach and this project and incorporate them as appropriate into their clinical work, job talk or interview for a postdoctoral fellowship position or staff interview.

PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS

Internship year is a time of rapid professional development. During orientation and early parts of the year, interns are encouraged to reflect on the transition from graduate student to a more professional role. Training staff provide expectations for professional behavior and communication. As interns move through the year, we support them in the transition from student to professional. As interns begin to anticipate the termination of the internship experience, they tend to focus more on integrating the gains they have made over the year and anticipating their identities as professionals. The internship program provides a context to understand these developmental steps and use this transition period to support the consolidation of a professional identity. Interns receive support in this area through the Coordinator of Training meetings and individual supervision.

We believe that self-reflection and self-awareness is an important part of professional behavior, and that competence as a psychologist requires openness to personal exploration. This use of self is essential to create a strong therapeutic alliance, guide clinical interventions, and build strong collegial relationships. Therefore, the training program depends upon interns' ability and willingness to explore personal qualities and dynamics that facilitate or hinder interpersonal interactions with staff as well as with clients. Interns will be asked to engage in personal self-exploration, as appropriate to training goals and values that at times may lead to disclosure of personal information. We believe that these disclosures are opportunities to further develop as a psychologist-in-training. We strive to create and maintain a safe and supportive environment that is conducive to these disclosures.

While our program offers many exciting opportunities for growth and development, the extent of benefit the intern derives from the program is in part a factor of how much responsibility and initiative the intern takes in creating and responding to opportunities to learn and grow. This is an important quality, not only for internship year, but also as a prerequisite to becoming a lifelong learner as a professional. It is expected that interns demonstrate development towards a professional identity. Aspects of this include becoming more aware of and comfortable with their

own professional styles, taking steps towards completing graduation requirements, demonstrating increased confidence in their readiness for professional practice, taking initiative to prepare for licensure, and engaging in a job seeking process.

Elements associated with this competency:

- 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
- Engages in self-reflection regarding one's personal and professional functioning; engages in activities to maintain and improve performance, well-being, and professional effectiveness
- Actively seeks and demonstrates openness and responsiveness to feedback and supervision
- Responds professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training
- Demonstrates knowledge of strengths and growth edges and effectively manages these
- Works effectively as part of a treatment team
- Fully participates in internship training experiences and activities
- Maintains professional appearance/ attire consistent with agency standards

Required training/experiential activities:

- Interns participate in the following seminars during orientation: expectations of supervision, meetings with individual supervisors, becoming a therapist, professional behavior, office procedures, self-care and balance, participate in reflective exercises about where they are now and what do they want their future self to remember about this time in their life, etc, meet with HR and discuss policies and procedures, meet with the Director of Campus Health Services, have the opportunity to read the CAPS Employee Handbook and the Training Manual, meet with the operations team, participate in the Student Affairs opener and the Campus Health Services opener, learn about electronic medical records, documentation, medication management, environment of care online modules required by Campus Health Services such as HIPAA, observe staff conducting triage, conduct triage with a staff member observing them, and learn about Academic Interventions.
- Interns participate in seminars during the year on feelings of incompetence, writing for health and wellness, and boundaries in therapy. Throughout the year, interns are encouraged to reflect on their reactions to clients, session dynamics, their own multicultural identities, and their areas of strengths and growth edges.
- Interns discuss professional development issues, job search process, cohesion of their professional identity, and the transition from being students to professionals in the bi-monthly COT meetings, informal or scheduled one-on-one conversations with the COT, within individual supervision and weekly training activities, and with any CAPS staff they wish to explore these topics with.

- Interns are encouraged to attend local and national workshops and conferences in the field of psychology. They are also encouraged to consider becoming members of an organization in the field of psychology and become involved in a leadership role.
- Interns meet among themselves once a week for an hour to discuss and process their roles as interns, ways they can support each other, and their professional values, attitudes and behaviors. This lateral learning is helpful in the socialization into the profession of health service psychology.

COMMUNICATION AND INTERPERSONAL SKILLS

The value of strong communication interpersonal skills permeates all areas of professional practice as a psychologist. We expect interns to form effective professional relationships with their clients, the staff, and their cohort, and we provide support and feedback as they develop in this area. Throughout internship, we emphasize the importance of open and respectful communication with all CAPS staff and trainees. Respect, a willingness to work out differences in a constructive manner, appropriately asserting one's professional and interpersonal needs, and the ability to maintain appropriate boundaries are important qualities in establishing an effective team.

Elements associated with this competency:

- Develops and maintains effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services
- Produces and comprehends oral, nonverbal, and written communications that are informative and well-integrated; demonstrates a thorough grasp of professional language and concepts
- Demonstrates effective interpersonal skills and the ability to manage difficult conversation well
- Appropriately communicates about and tries to resolve conflict in interpersonal situations, as necessary
- Engages in self-reflection regarding their communication style, approach, and interpersonal skills

Required training/experiential activities:

- Interns participate in the professional behavior seminar during orientation.
- Professional development and each intern's professional goals are explored and discussed in bi-monthly meetings with the COT.
- Interns are encouraged to discuss in individual and group supervision their strengths and growth edges in the area of communication and interpersonal skills.
- Interns meet among themselves once a week for an hour to discuss and process their roles as interns, ways they can support each other, and their professional values, attitudes and behaviors.

ASSESSMENT

Interns participate in assessment activities consistent with services provided at CAPS and thereby learn general strategies and issues in assessment. Clinical interviewing skills are developed and honed through provision of triage interviews and more in-depth intake assessments. Consistent with CAPS guidelines, interns are expected to write brief triage summaries and more in depth intake reports. Information contained in intake assessment reports includes, but is not limited to, identifying information, presenting concerns and symptoms and relevant history, relevant family history, personal and family psychological treatment history, mental status, working diagnosis, impression, and treatment recommendations. We place particular emphasis on helping interns develop proficiency in conducting safety assessments and suicide prevention. Interns will learn to assess clients presenting with concerning thoughts and/or high risk behaviors and make appropriate treatment decisions and attend to risk management. In addition, interns will develop some skills in assessment for substance abuse and integrate these skills into triage and intake assessments. Interns will abide by the APA ethics code and maintain cultural sensitivity and competency throughout the assessment process. Triage and intake assessments are supervised by and co-signed by the triage and individual supervisors, respectively. Other training in these skills is provided in orientation, seminar, case conference and multicultural mentoring.

Elements associated with this competency:

- 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
- Selects and applies 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
- Interprets 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
- 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
- Utilizes clinical interviewing techniques to determine diagnosis and treatment needs
- Effectively and efficiently gathers the appropriate information necessary in conducting triage interviews
- Provides appropriate disposition planning from triage assessment interviews, including appropriate awareness of community resources
- Appropriately conducts risk assessments and develops safety plans
- Assesses for need for hospitalization and facilitates hospitalization as necessary

- Conducts and documents intake assessments
- Demonstrates competence in their diagnostic assessment skills through diagnostic classification, treatment planning, and clinical report writing for multicultural mentoring seminar

Required training/experiential activities:

- Interns receive training during orientation regarding intake assessments and documentation.
- Interns receive training during orientation regarding conducting risk assessments, safety planning, and providing triage services.
- Interns participate in a weekly year-long triage seminar where they are able to discuss in more depth how to apply what they are learning regarding risk assessments, safety planning, and providing triage services to the student population at UNC-CH. During the weekly triage seminar, interns learn more about risk factors of suicide, suicide prevention, and suicide assessment.
- Interns consume research (e.g., articles, literature, presentations) that inform their diagnostic assessment skills. During training activities, the interns meet with interdisciplinary professionals (licensed psychologists, social workers, psychiatrists) who lead them in integrating their clinical skills with a body of knowledge related to diagnosis.
- Interns diagnose their therapy clients. In individual supervision and group training activities, interns are asked to explore and discuss differential diagnoses with their supervisors.

INTERVENTION

Interns provide intervention in triage, individual therapy, and group therapy. They also engage in some crisis work. These CAPS modalities are described below.

Triage:

The primary means by which clients enter the CAPS system is via triage, where students are assessed to determine which services would best meet their clinical needs. Clients come in anytime between 9:00 AM-12:00 PM and 1:00-4:00 PM for regular triage sessions Monday-Fridays and between 8:00 AM and 5:00 PM for crisis visits. Triage is generally staffed by three staff members at a time, with an intern added to the team between 1-5 PM. The triage team rotates daily but teams are assigned to the same day each week. A student presenting to triage fills out client information forms and is seen by the next available therapist. Routine triage sessions usually last about thirty minutes, and crisis sessions may last longer. Triage sessions focus on gathering the following information: presenting concerns, symptoms, level of functioning, safety and risk assessment, treatment history, substance use, and other factors which are used to determine appropriate disposition and referral. Based on this assessment, clients are referred for one of a variety of treatment modalities at CAPS (e.g. individual brief therapy, group

therapy, medication evaluation), community treatment, or other community and/or university resources.

Interns participate in triage in a manner consistent with our developmental model. An introduction to the triage system is provided during orientation. Interns begin participating in the triage system by observing senior staff conducting triage appointments. They begin participating more actively and more independently as their level of competence and comfort increases. When interns begin seeing clients independently, they are initially assigned those students who deny safety concerns on their client information forms. Interns will increasingly assume more responsibility and function more autonomously as they become more experienced and comfortable with the process. When interns see clients on triage, senior staff members are available for consultation or immediate supervision either during the session or subsequent to the client's departure. In addition, an hour of triage supervision is provided weekly in a group by two senior staff therapists.

Individual Therapy:

Individual therapy is the primary treatment modality with which interns gain clinical experience at CAPS. We employ a brief treatment model of care, which usually involves 6 to 8 sessions. Clients are assigned to brief therapy as one of the dispositions from triage. There are criteria for designating a client as appropriate for treatment with an intern. First, the client must agree to audio or video taping. Second, the case must be at an appropriate level of complexity and risk for the interns' developmental stage of training. Additionally, an attempt will be made to assign some of each intern's cases to accommodate intern's specific interest areas or to provide opportunities to work with a particular population or treatment approach. Interns will work closely with their supervisors to develop and maintain a diverse client caseload, and may work with two of their clients on a long-term basis.

Interns are exposed to a variety of theoretical models including multicultural, psychodynamic, interpersonal, feminist, cognitive-behavioral, humanistic, existential, Acceptance and Commitment Therapy, Dialectical Behavioral Therapy, and solution-focused. Exposure to these various models arises in individual and group supervision, didactic seminars, diversity seminars, consultation, continuing education, articles and other research, including material on evidence based practices. Interns will be expected to develop in their ability to conceptualize and provide a theoretical rationale for the work they are doing as the year progresses. Interns will also be encouraged to attend to the process of therapy, the therapeutic relationship and their own reactions. We expect interns to be able to foster therapeutic relationships with their clients that reflect understanding of the client's concerns and needs, an empathic response, management of their own and their client's affect, and attentiveness to the "whole" person. We assist interns in learning to recognize and address transference and counter-transference issues and maintain appropriate boundaries and therapeutic roles.

Two hours of individual supervision will be provided weekly to interns. This time will be used to discuss cases and review video and audio recordings of sessions between the intern and his/her clients. At the beginning of the year, supervisors and interns will discuss the expectations for supervision that are documented in this manual and will help the interns clarify their goals for

supervision. The supervisory model for internship is a developmental one. Over the course of the training year, as interns develop and hone their therapy skills, we expect them to be able to develop and articulate their own style of therapy and to be able to take increasing responsibility for their learning in supervision. Interns will also have the opportunity to get input on their clinical work via presentations in their multicultural mentoring seminar. These formal case presentations provide interns the opportunity to demonstrate their therapy skills, particularly the integration of theory and practice.

Over the course of the internship year, interns will develop significant skill in individual brief therapy and will learn how to effectively manage a large caseload of clients at varying stages and types of treatment.

Group Therapy:

CAPS offers a diverse group program to UNC-CH students. Groups can be psycho-educational and/or process-oriented in nature and can range in length, but generally do not exceed a semester's time. Workshops, which are another venue of group work, are generally more focused in topic. Groups and workshops are generally organized around a particular presenting problem, acquisition of a skill set or coping strategies, or aimed at a particular subpopulation of students.

Groups are an integral part of the work we do at CAPS. Group therapy may be the most appropriate venue of counseling for students depending on their presenting problems, and group work is given equal consideration to individual work in disposition planning. Groups may be offered as a stand-alone option of care or suggested in conjunction with brief individual therapy. Some of the groups CAPS traditionally offers are interpersonal process groups, Courage to Heal, a group for survivors of sexual assault, a Dialectical Behavior Therapy- based skills group, mindfulness meditation groups, body image, grief and loss, and therapeutic writing. Through our Road to Resilience program, CAPS also offers a number of groups for students on academic probation.

Interns will have the opportunity to co-facilitate a group during the fall semester with a senior staff member and receive a half hour of group supervision per week from their co-facilitator. All interns will facilitate a Road to Resilience program in the fall or spring semester with a peer coach and receive an hour a week of supervision for this specific group. Spring semester interns can elect to again co-facilitate with a staff member or alternatively, may choose to offer a group with another intern or trainee. In the latter case, appropriate supervision will be arranged by the Coordinator of Training, in conjunction with the Group Facilitator(s). Group assignments will be made by the Coordinator of Training, Group Facilitator(s), and Training Committee, with input from interns.

Crisis:

UNC students who are in crisis have direct access to our services during the day, by coming to triage or calling CAPS to consult with an on-call clinician. A crisis call or visit may be initiated by the student him/herself or by anyone else in the student's life who may be concerned about him or her. Much of the crisis work that interns do will be during their triage day and related follow-up appointments with students in crisis. Interns may occasionally also have brief therapy

clients who experience crises during the course of therapy. Interns may always consult with a range of staff during crisis situations including the Associate Director, Clinical Coordinator, triage team, supervisors, and the COT. In addition to individual crisis services, CAPS is called upon to respond to community crisis situations, such as in the event of a student death or a campus tragedy. CAPS staff serve the UNC-CH community in a variety of ways in such situations, beginning with a CAPS presence in the aftermath of traumatic events. Interns will receive training in community crisis management and participate in such activities, if need arises. Interns do not participate in after-hours call.

Elements associated with this competency:

- Establishes and maintains effective relationships with the recipients of psychological services
- Develops evidence-based intervention plans specific to the service delivery goals
- Implements interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables
- Demonstrates the ability to apply the relevant research literature to clinical decision making
- Modifies and adapts evidence-based approaches effectively when a clear evidence-base is lacking
- Evaluates intervention effectiveness and adapt intervention goals and methods consistent with ongoing evaluation
- Differentiates the models, appropriate utilization, and relevant techniques of brief, crisis, long-term therapy, and group therapy
- Demonstrates awareness of the developmental issues of college students
- Conceptualizes clinical material and develops treatment approaches based on conceptualizations
- Demonstrates ability to conceptualize client presentations/material in terms of multiple theoretical perspectives, when appropriate
- Uses own reactions, dynamics in the session, transference and counter-transference to facilitate treatment
- Effectively manages termination process
- Demonstrates knowledge of group process and group dynamics and uses this knowledge in facilitating group effectiveness
- Plans and implements group design in order to provide effective treatment
- Works effectively with a co-facilitator in order to coordinate interventions, share in the responsibility for the group, and give and receive feedback

Required training/experiential activities:

- Interns participate in orientation seminars and weekly training seminars on a range of theories and methods of effective intervention for specific presenting concerns (i.e. brief therapy, groups, risk assessment, Cognitive Processing Therapy, DBT and emotion regulation, termination, dream interpretation, mind-body approaches to therapy, Interpersonal Therapy, and working with specific clinical problems including grief, assessing prodromal symptoms, working with dangerousness to others, eating disorders, trauma in university counseling centers, substance use, sexual assaults on campus, self-

injurious behaviors, boundaries in therapy, working with students on the Autism spectrum, and working with clients in the transition to motherhood.

- Interns participate in orientation, weekly multicultural mentoring, and training seminars related to multiculturalism and diversity (as described in Competency C). They are 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.
- Interns provide individual brief therapy and have the opportunity to work with two longer term clients.
- Interns co-lead group therapy.
- Interns provide triage coverage for a half of day once a week. This includes crisis work.
- Interns engage in weekly individual and group supervision utilizing a multiculturally sensitive, ethical, and developmental framework. Interns are encouraged to explore and reflect upon their interventions.

SUPERVISION

The CAPS internship program provides interns with the opportunity to advance their supervisory skills by supervising a practicum student during fall or spring semester. For some interns, supervision may be a new skill area, while for others, it may be an opportunity to build on existing skills. As in all other areas of training, a developmental process is used for interns to learn supervisory skills, with each intern progressing at their own pace. Interns tape supervision sessions and the tapes are shared in the weekly supervision of supervision sessions where group discussions of supervision cases provide opportunities for review and feedback. Supervision of Supervision includes discussion of a developmental model of supervision, as well as a consideration of multicultural issues and ethical concerns that arise in supervision. Later in the training year, a book is used which takes an interpersonal approach to supervision. We expect interns to develop beginning to intermediate supervisory skills by program completion. We assist interns in evaluating their level of supervisory skill and experience at the program outset and tailor outcome expectations accordingly. By the end of the training year, interns will be expected to articulate their conception of their supervisory style.

Elements associated with this competency:

- Applies supervision knowledge in direct or simulated practice with psychology trainees or other health professionals
- Forms effective supervisory alliances with their supervisee
- Helps supervisee monitor treatment goals and progress in therapy
- Assesses supervisee's clinical functioning and provides helpful and supportive feedback
- Ensures the welfare of clients as part of supervisory responsibilities

Required training/experiential activities:

- Interns are introduced to how supervision of supervision is conducted at CAPS during orientation and discuss their training, supervision experiences, and supervision models they have used prior to internship.
- Interns supervise a practicum student for one semester at CAPS and meet weekly for one-hour supervision meetings with their supervisee.
- Interns participate in weekly, year-long supervision of supervision meetings where they each take turns showing tape of their supervision session and reviewing their work with licensed psychologists. In supervision of supervision, supervision theory, models, ethics, and multicultural considerations are explored and discussed.
- Interns read a book over the summer on supervision and discuss relevant chapters and themes. For example, interns have read “Critical Events in Psychotherapy Supervision: An Interpersonal Approach” by Nicholas Ladany, Myrna Friedlander, and Mary Lee Nelson.

CONSULTATION AND INTERPROFESSIONAL/INTERDISCIPLINARY SKILLS

Interns will engage in consultation and interprofessional communication throughout their year at CAPS. Interns fully engage in our multidisciplinary environment where there is frequent consultation between psychologists, social workers, and psychiatrists. We are located in the Campus Health Services building and frequently consult with other medical and professional staff in Campus Health Services. Additionally, interns have the opportunity to consult with other staff and faculty within the university.

Part of the mission of CAPS includes provision of outreach activities to the UNC community. Interns will participate in outreach programming, and are encouraged to develop and present outreach in areas of special interest, as well as to expand their interests to new topics and populations, with particular attention to marginalized groups. Examples of outreach may include stress management programs, time management workshops, substance abuse education, conflict resolution, communication skills training, and others. Interns have the opportunity to participate in consultation and liaison activities, and are encouraged to select projects based on their own interests and agency needs. Interns may work on their own projects/initiatives, or collaborate with another intern or staff member. This decision will be made with approval of supervisors and the Coordinator of Training. Consultation projects may include contact with various campus departments, offices, services, and student groups. Examples of former intern consultation projects include: addressing needs of international students, provision of academic success workshops to the Covenant Scholars, providing liaison services to the LGBTQ Center, The Women’s Center, and providing liaison services to students of color. Each intern will complete a multicultural project, which is typically an outreach/consultation project. Supervision for this multicultural project will be included as part of Multicultural Mentoring. Following the completion of their multicultural projects, interns will present a final written and oral presentation of their projects to the Training Committee.

Elements associated with this competency:

- Demonstrates knowledge and respect for the roles and perspectives of other professions
- Applies 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
- Demonstrates the ability to conduct outreach, including their multicultural project

Required training/experiential activities:

- Interns participate in a multicultural outreach project designed to assess the needs of, and/or provide services for a minority or underserved population or in some way contribute to the diversity initiatives of the agency.
- Interns will provide a minimum of six outreaches per year and may collaborate with cohort members or staff.
- Interns work closely with interdisciplinary staff who are psychiatrists, social workers, and psychologists.
- Interns have the option of joining staff members in providing support during a campus tragedy. Clinical staff and leadership staff provide information regarding the event, information about models of responding to a crisis, and mentoring to interns when a crisis does occur on campus. Interns are able to observe staff and work simultaneously with them during such an event. Staff are available to de-brief afterwards with interns.
- Interns have the option of developing a liaison relationship with a department on campus. For example, some interns have provided drop-in hours to students at the LGBTQ Center. For the duration of their internship experience, the interns can form an ongoing consultation relationship with this office in which they deliver consultation related to students in distress or students that would like to explore a particular issue or particular initiatives of the office related to mental health and wellness.
- Interns participate in weekly staff meetings where staff discuss coverage of the week's after-hours phone consultation service. Although interns are not directly involved with the after-hours phone consultation service to the university community, they learn about themes that emerge, and about navigating and handling crisis calls. They also learn about how staff work with and provide consultation to offices such as the Office of the Dean of Students, as well as health providers in Campus Health Services.
- During orientation, interns meet with the Associate Director of CAPS who discusses working and consulting with the Office of the Dean of Students, the Emergency Evaluation and Action Committee and Care Team
- During orientation, CAPS staff meets with the interns and discusses the orientation activity of meeting with Residence Hall Assistants (RA). They discuss the interns' role with consulting and providing guidance with RA Training Preparation. This outreach is designed to provide support and information to RAs on ways they can assist their residents with a range of concerns through vignettes. Interns learn themes that may emerge in working with the student population and strategies that they can use when consulting with departments on campus.

TRAINING STRATEGIES

Orientation

The first few weeks of the internship are dedicated to an extensive full time orientation which introduces the interns to the CAPS organization and training program. Orientation provides an overview of services offered by CAPS and the skills required to perform these services. Some aspects of the orientation are designed to help interns become more aware of themselves as they make the transition into the intern role and phase of training. The experiences, goals and training strategies of the internship program are discussed and interns define their own personal goals. Other activities are designed to help the interns get to know the agency and the staff and to become part of the CAPS organization; these sessions involve interactions with other staff, trainees, and key campus agencies and colleagues.

Supervision: General

Supervision at CAPS is based on a developmental model. Interns participate in developmentally targeted experiences with supervision that is designed to facilitate interns functioning at increasingly higher levels of competence, sophistication, autonomy, responsibility, and complexity over the internship year. Supervision assists interns in identifying their strengths and growth edges and supports and encourages them in the process of moving from areas of comfort to maximal growth.

Individual Supervision

Each intern receives two hours of individual supervision per week from two different licensed psychologists. Individual supervisors are initially assigned by the Coordinator of Training with the input of the Training Committee and the interns. Video and audio recordings are used as a tool in supervision.

Supervision of Triage and Crisis Counseling

Interns participate on a triage team with increasing levels of responsibility, autonomy and independence through the year and as their competence and confidence develops. Interns are on a triage team with three staff members who will provide immediate assistance and consultation, as needed. In addition, interns as a group will participate in an hour per week of additional supervision of triage and crisis counseling with two staff supervisors.

Supervision of Group Therapy

Interns participate in a one-hour weekly group case conference. The facilitator(s) of the CAPS groups program provide this supervision, and other staff members may attend the case conference as well. The case conference is designed to address developmental stages of the group process through the use of articles and case examples. In addition to group case conference, interns will receive supervision from staff co-facilitators. When interns participate in the Road to Resilience program, they will receive a one-hour weekly Road to Resilience supervision group. If two interns provide a group second semester, the Coordinator of Training will work with the group facilitators to identify appropriate staff supervision.

Supervision of Supervision

Interns meet weekly as a group with two staff members for one hour per week of supervision of their work supervising practicum students. These sessions provide a theoretical and conceptual framework for supervision, a format to receive feedback and increase awareness of their own supervision styles, and an opportunity to develop supervisory skills and technique. Video/audio recordings of interns' supervision with practicum students are viewed and discussed as part of supervision.

Multicultural Mentoring

Throughout the year, interns meet weekly as a group with two staff psychologists for multicultural mentoring and supervision. The purpose of these meetings is to assist interns to look more closely at their own attitudes, awareness, sensitivity and issues related to multicultural competency and the ability to work with diverse populations. These sessions provide a format for interns to acquire familiarity with models of diverse identity development, to process other prior multicultural training experiences, to receive supervision on how multicultural factors are impacting their clinical work and to receive feedback on their multicultural projects. During multicultural mentoring, interns have the opportunity to engage in a multi-cultural "journey" where they explore how their personal identities influence their work as a therapist.

Professional Development Supervision/Coordinator of Training Meetings

Interns meet as a group with the Coordinator of Training for one hour bi-weekly. The purpose of these meetings is to facilitate interns in processing their training experiences as a whole. There will be particular focus on encouraging interns to identify the changes that they are undergoing as they move from the graduate student to intern role and then again as they anticipate completing internship and moving forward into the role of a professional psychologist. Early in the year, sessions will focus on assisting interns in actively setting goals for their internship year; later sessions will focus more on professional identity development, job search, terminating from internship and entering the professional role. These meetings will also provide oversight of the training experience and will serve to help interns monitor their schedules, identify resources and opportunities and ensure that the internship experience is meeting intern and program goals and requirements.

Multicultural Project

Interns will each implement a multicultural project designed to assess the needs of, and/or provide services for a minoritized or underserved population or in some way contribute to the diversity initiatives of the agency. Examples of projects might include: designing a group or outreach targeted to a minority population, creating a liaison relationship with a campus organization or division that serves a minoritized population, or creating psycho-educational materials that address some specific concerns of an underserved group.

Didactic Seminar

Interns meet weekly for one hour with various staff members who have expertise on the designated topics. The hour provides in depth discussion of the topic in terms of the interns' development and clinical experiences and is specific to the intern cohort. Sometimes post-MSW social work fellows also participate in this seminar. Seminar topics include multicultural competence, aspects of therapy provision, ethics, specific populations, concerns prevalent in a

college population, and professional identity development. Given staff's commitment to lifelong learning, there may be a few seminars that staff are invited to.

Staff Professional Development Activities

Interns have the opportunity to participate in continuing education activities designed for our staff. Some examples from past years include treating anxiety disorders, a conference on PTSD treatment, autism spectrum disorder, interpersonal violence and sexual assault, and ethics in a campus university center.

Research

Interns are allowed two hours per week to work on their dissertations and/or other research or professional activities. Near the end of the year, interns are asked to present their research to staff. Interns' research presentations enhance the professional development of staff and provide the interns with an opportunity to practice a presentation that may be requested during a job interview and/or dissertation defense.

Staff Meeting

CAPS staff meets for 1.5 hours weekly to discuss administrative and professional issues relevant to the functioning of CAPS. Through observation of administrative functioning and participation in discussion of current administrative issues, interns have the opportunity to develop a sense of how they interact with organizational structure. Interns attend approximately two staff meetings per month, and the other meetings are for senior staff only.

Other Administrative Meetings

Interns participate in occasional staff retreats. Further, interns have opportunities to serve on committees or participate in administrative functions linking CAPS to the larger Campus Health Services or campus community.

STRUCTURE OF THE INTERNSHIP TRAINING PROGRAM

The CAPS Internship Program is directed by the Coordinator of Training. The Coordinator of Training assumes overall responsibility for the design, implementation and administration of the Internship Program. Responsibilities include, but are not limited to: setting and prioritizing of goals, objectives and competencies addressed by the program, program design, implementation and evaluation, resource allocation and program development, growth and improvement. The Coordinator of Training is also responsible for assigning supervisors and overseeing supervision, intern selection, evaluation and feedback, and ensuring interns' readiness for internship completion. The Coordinator of Training serves as the chair of the Training Committee.

The Training Committee assists the Coordinator of Training in directing, administering and implementing the doctoral psychology training program. The Internship Training Committee consists of CAPS staff psychologists who have expressed a particular interest in training and have been licensed for a minimum of two years. Responsibilities of the committee include: contributing ideas to program design and development, implementation of the program design, evaluating and modifying the program to accommodate to feedback, evaluating and providing

feedback to interns, selection of new interns and contributing to self-studies and annual reports. Training Committee members also serve as supervisors and seminar presenters. Supervisors (both individual and group) are an important part of the internship structure. Some, but not all intern supervisors, are also on the Training Committee. Supervisors meet weekly with the Coordinator of Training for a supervision meeting, in order to ensure a consistently high level of supervision, to process supervision issues, to communicate information about the internship program and to share input about training needs of particular interns. Supervisors also provide input and feedback used to improve the program.

There are other CAPS staff who are less directly involved with the internship program, but who still participate by providing orientation and seminar sessions, working directly with interns in service provision, consulting with interns and serving as resources in their areas of expertise. Communication with other staff, who are involved in the internship program, occurs in the weekly staff meeting or on an individual basis, as needed.

SUPERVISORS' RESPONSIBILITIES

General Responsibilities:

Trainees at CAPS are supervised by several staff at any given time for different functions. Regardless of the kind of supervision being provided, each supervisor has the following general responsibilities:

1. Clearly establish parameters of your own role as supervisor (i.e. style, issues covered, and negotiable areas).
2. Assess level of competence and modify supervision to the appropriate level, given our developmental model of training.
3. Establish, in conjunction with the supervisee, training goals for supervision within the time frame allotted.
4. Delineate expectations for supervision.
5. Provide ongoing feedback on the supervisee's skills, style, dynamics, etc., in a manner that is facilitative and constructive.
6. Integrate ethical and multicultural considerations into supervision.
7. Provide early feedback to the supervisee and the Coordinator of Training in the case of a concern about the trainees' progress, professionalism, or competence
8. Complete the six month and twelve month evaluations of the supervisee and process the evaluations within supervision. This may include evaluations for the supervisee's department as well.
9. Modify the nature of input and process of supervision in response to supervisee needs and developmental level.
10. Receive and process evaluations by the supervisee of the supervisor during supervision.
11. Participate in the relevant supervisors meetings on a regular basis.
12. Serve as a professional role model for supervisees in accordance with ethical and professional guidelines as noted by APA or ASWB.
13. Demonstrate respect for trainees as one would other colleagues, acknowledging diversity in values, culture and experience.
14. Protect the supervision session from unnecessary interruptions within the hour and over time

(i.e. phone calls, frequent schedule changes, etc.).

15. Take primary responsibility for the supervisory relationship and, when there are difficulties, take responsibility to address or resolve those difficulties either directly or through consultation.
16. Arrange adequate supervisory coverage if absent.
17. Keep records of supervision sessions in accord with APA or ASWB requirements.
18. Integrate relevant research, clinical literature and a scholarly approach into input about clinical practice.

Responsibilities of Individual Clinical Supervisors:

Clinical supervision in our model of training provides opportunities for the following: 1) to deepen connections among empirical and theoretical knowledge and clinical experience; 2) increase awareness of issues of difference and of how to integrate multicultural models and interventions into practice; 3) apply ethical constructs to clinical practice; 4) strengthen clinical skills; and promote the comprehensive growth, self-awareness and development of the trainee into a competent psychologist or social worker. Specifically, supervision will help promote the development of the competencies specified under the goals section of this manual. The focus of supervision will be:

1. Accurate assessment and understanding of clinical situations.
2. The ability to conceptualize and elaborate hypotheses about what is going on with the client.
3. Awareness of clinical decision-making and choice points in therapy.
4. Sensitivity to dynamics and interpersonal process in the room.
5. Awareness of a supervisee's reactions and feelings as a useful source of clinical information.
6. Awareness of when a supervisee's reactions are hindering treatment.
7. Identifying supervisee's strengths and areas of growth, providing feedback about these areas, and help supervisee's integrate competencies.
8. Awareness of own limitations in knowledge, skills, and experience when working with diverse populations, as well as trying to improve on these skills.

By facilitating the above skills, supervision will promote the trainee's ability to make appropriate technical interventions and to build working alliances. Our philosophy of training and supervision is based on the developmental perspective that trainees at different levels of training and experience have different needs for challenge and support. In response to developmental needs, the focus of supervision may shift over time from facilitating concrete skill development to deepening self-knowledge, awareness of counter-transference concerns, and confidence in one's theoretical orientation and therapeutic style. In response to a supervisee's growing autonomy and assumption of responsibility, the supervisor's role will shift. Initially the supervisor will take more responsibility for initiating discussion, defining issues, and providing direction and structure. Eventually, as a trainee progresses through the internship year, a supervisor will serve more as a consultant, stepping into the former role when needed to address challenging clinical situations.

Responsibilities of Individual Supervisors:

- Provide supervision that involves both the training of the supervisee and monitoring the welfare of the client.

- Review audio and video tape material of client sessions.
- Monitor the supervisee's record keeping including intake assessments and progress notes.
- Monitor the appropriateness and diversity of the client case load according to the supervisee's ability level, time commitments, and training needs.
- Facilitate the professional growth of the supervisee by attending to professional issues, career issues, and transition issues concerning development from trainee to professional staff.
- Assist the supervisee in balancing agency demands.

Responsibilities of Group Supervisors:

Group supervisors are often co-leaders with their supervisees, and may also be responsible for the supervision of a process observer. If trainees co-facilitate a group together or with a peer coach (as in Road to Resilience), supervision will be provided by a designated staff member. In either case, the following guidelines will apply:

- Clearly establish parameters of your role as supervisor (i.e. style, issues covered, negotiable areas, and evaluation).
- Clearly establish parameters of trainee roles for the group (process observer, assistant leader, co-leader), of expectations for attendance at group and at pre-group screenings.
- Clearly establish responsibilities for record keeping (case notes, process notes, closing reports) and sign off on any supervisee records.
- Establish training goals with the trainee appropriate to the role agreed upon (process observer, assistant leader, and co-leader) and the level of clinical skill.
- Take primary responsibility for monitoring the overall group (client welfare, procedures and process) and the monitoring of the co-leadership relationship.
- In case of absence, discuss the appropriateness of the supervisee leading the group alone with both the supervisee and the appropriate counseling staff. Supervision for this supervisee must be arranged and available both during and after the session.
- Facilitate discussion of the group process, group members, and related issues with trainees.

Responsibilities of Staff Providing Supervision of Supervision:

Doctoral psychology interns will supervise a psychology practicum student either in the fall or the spring semester. Supervision of this work takes place in a group format. Supervisor responsibilities include:

- Supervise the intern's supervision, which involves the training of the intern, the welfare of the practicum student, and monitoring the welfare of the client.
- Review videotape material of supervision sessions regularly.
- Monitor intern knowledge of the developmental model of supervision.
- Be available to practicum students as needed regarding the supervisory relationship.
- Be attentive to own training needs as a supervisor and address these needs in staff supervisors' meetings.

Responsibilities of Interns Supervising Practicum Students

Interns supervise psychology practicum students and participate in a weekly Supervision of Supervision seminar. This seminar has a combined focus on the practicum students' growth and clinical work and the interns' development as supervisors. Intern supervisors have the

responsibilities of individual clinical supervisors as previously described. Additionally, they are expected to:

- Explain to their supervisee their role as an intern supervisor and their participation in Supervision of Supervision, and have the permission to record form signed at the beginning of the supervisory relationship.
- Participate in weekly Supervision of Supervision in which they discuss the supervision process and show tape of their supervision sessions.
- In a timely manner, review their supervisee's notes, provide feedback as appropriate, and assign the supervisee's notes to the staff member providing Supervision of Supervision for signature.
- Promptly seek consultation from staff around safety concerns should they occur.
- Intern supervisors may at times consult with other staff supervisors of the practicum student and are expected to bring this information into Supervision of Supervision discussions or individual discussion with the staff providing Supervision of Supervision.
- Complete an evaluation of the practicum student near the end of the semester, and show and discuss this evaluation to the staff providing Supervision of Supervision before submitting the evaluation or sharing it with the practicum student.
- Complete a supervision note after every supervision session, and keep them in a locked drawer until the period of supervision ends, at which point notes should be given to the staff providing Supervision of Supervision.

It is expected that any supervision information can be shared in Supervision of Supervision. If a practicum student shares personal information that the intern is reluctant to share in Supervision of Supervision, they should discuss it individually with one or both staff providing Supervision of Supervision, or with the Coordinator of Training.

SUPERVISEE RESPONSIBILITIES

In order to develop the skills and characteristics necessary to becoming an effective psychotherapist, the trainee needs to be an active and responsible participant in the learning process. And because being an effective therapist involves interpersonal skills, self-knowledge and intense self-reflection, trainees need to be open to learning about themselves. The self-growth that occurs is often at an intense pace and involves personal vulnerability. While supervisors and staff are available to provide structure and support throughout this development, it is incumbent on the intern to engage in the process in a manner that facilitates success. The following guidelines are meant to clarify expectations, as well as provide some structure for how to be active and reflective in supervision.

- Be on time and prepared for client and supervision sessions.
- Establish, in conjunction with the supervisor, training goals for supervision within the time frame allotted.
- Actively work on processing and conceptualizing what has occurred in therapy sessions.
- Accurately and appropriately document clinical services. Provide progress notes for weekly review. Notes are to be completed as specified in the staff manual and should be written with an appreciation of their purpose in mind. They should track the course of evaluation and treatment, communicate with other providers and provide a legally sound document.

- Participate actively in supervision by being prepared and organized with video/audiotapes, progress notes, and questions and concerns about case management.
- Provide audio/video tapes as requested for supervision. We are committed to your development as a therapist and listening to or viewing tapes of your work is an important way of assisting you in this process. As supervisors, we are also legally liable for the welfare of your clients and need to know how you are working with them. The expectations for video/audiotapes are to remain open to feedback, be willing to engage in dialogue in order to promote understanding of feedback, be open to making changes in response to feedback and supervisory suggestions, and take initiative to discuss results of suggested changes.
- Take responsibility for your own development by being forthcoming about needs and challenges in your work.
- Be aware of your own level of competence and follow ethical guidelines by consulting appropriately and asking for assistance, even if this means exposing mistakes or areas of inadequacy.
- In situations where responsibility for a service is shared (e.g. group, some workshops, consultations, some crisis interventions) the trainee takes on leadership tasks appropriate to the role and level of clinical skill. This is decided through discussions with co-leaders.
- Be aware of and follow ethical guidelines.
- Strive to be aware of your own biases and prejudices in approaching clients, clinical information, colleagues and organizational systems.
- Work to actively identify and own your areas of strength, as well as those areas that need development.
- Complete evaluations of the supervisor and process them within supervision.
- Complete self-evaluations as scheduled and process the supervisor's written evaluations of the supervisee's work within supervision.
- Participate actively in the supervisory relationship, and take increasing responsibility for the working relationship as the year proceeds.
- In the event of any concern about the supervisory relationship, we encourage direct communication with the supervisor. Trainees may also discuss concerns with the Coordinator of Training.

PROFESSIONAL STANDARDS AND GUIDELINES

Policies and Procedures (adapted from Northern Illinois University)

Standards of professional conduct (adapted from University of California Santa Barbara)

STANDARDS OF PROFESSIONAL CONDUCT FOR INTERNS

All interns are expected to comply with Campus Health Services (CHS) and University policies that apply to all other staff. These policies are listed on the CHS website. Policies include but are not limited to: non-discrimination and non-harassment, confidentiality, HR policies, requirements for on-line training and testing required by the Environment of Health and Safety, and Joint Commission specified regulations. Interns are expected to conduct themselves ethically, responsibly and professionally and to follow the same standards of behavior required of all CAPS professional staff. It is our intent at CAPS to provide effective services in a competent, respectful and ethically informed manner. Thus it is expected that interns are aware of and maintain behavior within the scope of APA ethical guidelines and HIPAA standards, especially around issues of practicing within one's competence level, confidentiality, disclosure

of information, maintaining appropriate boundaries and multicultural competence. In order to work together as an effective team, we have to treat one another with respect and strive to communicate effectively. Interns and other trainees are expected to behave in a manner that promotes professional interaction within CAPS and is in accordance with the standards and expectations of the center. This would include treating all staff, fellow trainees and clients in a considerate, respectful and professional manner at all times, including when working out disagreements or conflicts. Furthermore, conveying respect requires the earnest effort to become aware, and considerate of values/beliefs based upon cultural, ethnic, racial, gender, sexual orientation, age, ability, religion, etc.

In addition to the professional behavior expected of all staff, there are certain expectations of interns, commensurate with their roles and needs, as participants in a training program. At CAPS, we view training as an active process that requires interns to take responsibility and actively participate in defining and communicating their own training needs. In addition, the following expectations are also geared to maximize the gains trainees are likely to derive from the program.

- Attend, be on time and be prepared for supervision and other training activities and clinical Responsibilities.
- Advise appropriate staff if unable to attend training activities or other responsibilities.
- Be cognizant of and meet specified deadlines.
- Fill out requested evaluations in a timely manner.
- Follow appropriate and professional guidelines if problems are encountered.
- Maintain appropriate boundaries and negotiate multiple roles within the training program, staff and University.
- Be aware of and follow all responsibilities delineated in the training manual.
- Take initiative and contribute your skills as part of the CAPS team.
- Use good judgment in choice of attire in order to appear professional.

Conflict is a natural part of teams of people working together. However, the atmosphere in the organization is directly impacted by the manner in which conflict is addressed and managed. Thus, it is important to maintain responsible and professional behavior in attempting to resolve interpersonal conflicts, differences and disagreements. It is also recognized that power differentials within the organization may sometimes make it difficult to resolve a conflict directly, especially if the person with whom you are having difficulty has authority over you and is in a position to evaluate you. Positive steps towards resolving a conflict could include any of the following: Attempt to discuss the situation/disagreement directly with the person involved. It is always appropriate, but not necessarily required, to seek consultation regarding a disagreement from one's supervisor, or the Coordinator of Training. If the conflict involves these people, other resources for consultation might include CAPS' Associate Director or Director, as appropriate. One of the purposes of consultations is to try to slow down the process of conflict resolution in order to sort out and clarify assumptions, expectations, and misunderstandings. If consultation is sought, discuss the outcome with one's supervisor, the Coordinator of Training or the Director. Give direct feedback, after appropriate consultation and preparation, rather than talking about the person in question to others. While an intern would be encouraged to initiate resolution of a conflict, to the extent that staff members are aware of a conflict, it is expected that staff would

initiate and model conflict resolution by taking the steps outlined above. Defining and initiating resolution of a conflict should never lead to punitive or retaliatory behavior.

Trainee/staff relationship guidelines (adapted from University of California, Davis-1992)

CAPS is committed to promoting the personal and professional development of all trainees. This process of development is fostered by respect for each trainee as an individual and with an atmosphere of openness and honesty in communication. Our goal is to create an environment conducive to learning where trainees feel safe and respected. We strive to foster positive mentoring relationships while not compromising our ability to adequately maintain objectivity and serve in an evaluative role. Staff is encouraged to form strong, authentic, supportive relationships with trainees in which they can serve as positive role models, supervisors, and mentors while also maintaining appropriate and clear boundaries and operating within the ethical guidelines specified by APA.

POLICY ON TRAINEE/ STAFF SOCIAL RELATIONSHIPS

Recognizing the importance of relationships between supervisors and supervisees, the complexity of issues related to multiple relationships, and the need for the highest level of ethical conduct by clinicians, the following overarching principles and guidelines should inform the conduct of staff members. Although support staff have different relationships with trainees, these policies still apply to support staff, as well.

1. CAPS utilizes a team model of supervising trainees, therefore, all staff are directly or indirectly supervisors of all trainees (i.e., there are no neutral relationships).
2. Given this, all contact between staff and trainees involve an inherent power differential.
3. Staff should not seek social contact with trainees to fulfill their own social needs.
4. Staff makes every effort to avoid “special relationships” with individual trainees that may be damaging to individual trainees or cohorts of trainees.
5. Consistent with valuing overall diversity, it is acknowledged that staff and trainees vary in their styles related to socializing at work. Lack of socializing does not reflect lack of caring about training.
6. Staff who choose to socialize during working hours (e.g., lunch, coffee breaks) make attempts to include trainees as a group or provide equitable invitations across trainees in a given cohort.
7. Staff recognizes the power differential inherent in supervisory relationships and acknowledges trainees may find it difficult to say “no” to a seemingly innocuous social invitation. However, all social invitations are considered optional and trainees are encouraged to say “no” to social invitations without fear of recourse if they do not want to attend.
8. There will be events during the work day and after hours that trainees will be invited to and events that trainees will not be invited to. Expectations/invitations of participation and attendance will be made clear to the trainees ahead of time.
9. Staff is encouraged to seek peer consultation and/or discuss their concerns with the Coordinator of Training or other Operations Team members regarding social relationships with trainees, as well as transference/countertransference issues that may

come up with trainees. Trainees are similarly encouraged to consult with supervisors and/or the Coordinator of Training about any social relationship concerns.

10. Staff will not be Facebook friends with current trainees or follow trainees on other social media sites.
11. Staff do not casually text with trainees. In general, email is the preferred mode of communication when a staff member or trainee is immediately unavailable. Sometimes staff do communicate via text with trainees and these are situations such as a staff member needing to hospitalize a client and letting the rest of the triage team know in order to best manage the triage day; inclement weather announcement; urgent issue that may arise, etc.

INTERN SELECTION PROCEDURES

General Criteria

The CAPS intern selection process is designed to choose interns who are well suited to the training opportunities we offer and who evidence interest in and/or potential for development in the area emphasized by our program. In our selection procedures we are attempting to seek out those applicants who evidence the following characteristics:

- 1) Show particular interest through their past experience and/or future career goals in working in a counseling center setting.
- 2) Are well-trained in the field of psychology and able to expand their knowledge base (including scholarly thinking and evidence-based practice) and apply their knowledge to their clinical practice.
- 3) Value diversity and have sought experiences that evidence a commitment to becoming multi-culturally competent, and have a strong interest in developing in this area during internship year.
- 4) Are committed to understanding the ethical guidelines of our field and applying them to ethical practice and have sufficiently good judgment to behave in an ethical and professional manner.
- 5) Demonstrate ability for self-reflection and openness to feedback to learn and grow.
- 6) Have the interpersonal skills to successfully relate to clients and other staff.
- 7) Have demonstrated a past history of success in their academic and practicum experiences.
- 8) Possess clinical skills indicating readiness for internship.
- 9) Can grow and develop from, actively engage in, and take initiative in their own training.

Practica and Academic Preparation Requirements

All formal academic coursework, accepted dissertation proposal, and practicum training requirements should be completed prior to the beginning of internship. Applicants are expected to have participated in at least one practicum experience in a counseling center or which in some way indicates interest in areas consistent with the work and goals of our center and/or our training program. Furthermore, there should be evidence in the strength of the application, nature and sophistication of responses to interview questions, and qualities alluded to in recommendations that the applicant has benefited and developed as a result of their experiences and coursework (in addition to accumulated the hours and course credits).

Process for Application Review and Interviews

Applications are reviewed by the Training Committee, using a standardized rating form to consider applicants' experiences, strengths, and fit with CAPS' training program. Based on this review, the Training Committee meets to determine which applicants will be invited for phone interviews. Phone interviews will occur in December and/or early January (please see the APPIC website or our internship website for specific dates). Phone interviews typically range between 30-45 minutes in length and are conducted with members of the Training Committee. Interviews will utilize a standard set of interview questions, although Training Committee members may modify these or ask additional questions as appropriate. Applicants are notified of invitation for a phone interview via email and are asked to sign up through an on-line scheduling program. Visits to our center are optional and occur in January. They are arranged with the Coordinator of Training. Ranking decisions are made using the application materials as well as information gathered during the interview process.

Non-Discrimination Policy

CAPS is committed to ensuring that the program is accessible to all interns. On the most basic level, we comply with our agency and UNC-CH's non-discrimination policies. CAPS adheres to the university's non-discrimination and harassment policies and provides equal opportunity for all employees and applicants for employment. Statuses that are protected from discrimination and harassment include age, color, disability, gender, gender expression, gender identity, genetic information, national origin, race, religion, sex, sexual orientation, or veteran status (their "protected status").

The internship program abides by the guidelines set forth by the university in regards to due process and fair treatment policies. All policies within the internship adhere to APA and SoA requirements, agency policies, and state guidelines. Interns are informed of our due process and grievance procedures during orientation and can read information and guidelines about our non-discriminatory practices, harassment, and fair treatment listed in this manual. For both formal and informal grievances, interns are encouraged to consult with the Coordinator of Training (COT), their supervisors, or any staff they wish to consult with. For example, if an intern has a concern with a CAPS staff member, he or she is first encouraged to raise the issue through direct communication with the staff member if possible and appropriate. The discussion and resolution of these problems are seen as opportunities for each intern's professional growth. If this is not possible, the intern can further discuss the issue with the COT or Director. Interns are also provided with information about the Office of the Ombuds and how this office can be a resource for them or for their clients.

Other University Resources For Addressing Training Program Concerns

A. As mentioned above, a University resource to address work or training-related complaints is the University Ombuds Office. The Ombuds Office listens to complaints from employees, provides information, facilitates communication, and helps arrange mediation or conflict resolution between or among members of the University's faculty, staff and postdocs. More information about the Ombuds Office and additional resources are available at: <http://www.ombuds.unc.edu/about.html>.

B. Interns are also invited to openly discuss and resolve any workplace issues through the University's facilitated conversations program, which is available at <https://hr.unc.edu/managers/consultations/facilitated-conversations/>

C. Interns who believe that they may have been discriminated against or harassed based on their age, color, creed, disability, gender, gender expression, gender identity, genetic information, national origin, race, religion, sex, sexual orientation, or veteran status (their "protected status") should contact the University's Equal Opportunity and Compliance Office (<https://eoc.unc.edu/>) or the University's Title IX Compliance Coordinator (<https://eoc.unc.edu/our-policies/state-and-federal-laws/title-ix-and-vawa/>). In addition to prohibiting all forms of discrimination and harassment based on an individual's protected status, the University's Policy on Prohibited Discrimination, Harassment and Related Misconduct also prohibits related misconduct, including interpersonal violence, stalking, complicity, and retaliation. Further information about the University's Policy on Prohibited Discrimination, Harassment, and Related Misconduct can be found at the following website: <https://eoc.unc.edu/our-policies/ppdhrm/>

CAPS is committed to ensuring that the program is accessible to all interns. On the most basic level, we comply with our agency and University's non-discrimination policies. We also work to hold in mind more subtle factors that could inadvertently restrict access. For example, we have chosen to only use phone interviews instead of in-person interviews to ensure that any interested applicant could apply, regardless of financial means to travel. Finally, the training program seeks out feedback from current and past interns in order to make any necessary modifications regarding restricting program access.

INTERN APPOINTMENTS

Stipend and Benefits

The stipend for the year-long (August 1 through July 31) full-time internship for 2020-2021 will be \$30,688 to be paid in increments on a monthly basis. This stipend has been modified to reflect the interns' purchase of a health insurance plan of their choice and payment of associated premiums. We expect each intern to purchase an insurance plan to be able to attend to any health concerns that may arise over the internship year.

Please note that this appointment may be rescinded if a criminal convictions check discloses information that affects this hiring decision. Before a final decision is made to rescind your appointment, you will receive a copy of the information used in reaching this decision and you will have an opportunity to provide any exculpatory or explanatory information.

Leave time provided includes eleven University holidays and two vacation days per month, to be used at agreed upon times during the year. You will also earn one day of sick leave per month. However, due to APA's requirement that interns work 2000 hours, it is typically not practical for interns to take all of their vacation and sick days. Five of the vacation days are required to be taken the last week of the internship and typically one or two days are required to be taken when the building is closed in December. In the event of a medical emergency or unforeseen circumstance, it is at the discretion of the Coordinator of Training to determine

arrangements for missed work. You will not be paid at the end of your internship for any unused vacation or sick leave.

We will provide professional liability (malpractice) insurance for the scope of your practice within Campus Health Services during your employment here. Interns are eligible for the UNC One Card, which permits access to University libraries and can be used as a debit card for UNC Student Stores and other services. Interns have access to the UNC gym and other facilities and are eligible for a free pass to non-revenue sporting event.

Parental Leave

(Adapted from the “APPIC Guidelines for Parental Leave During Internship And Postdoctoral Training” by Allison N. Ponce, Ph.D., Allison C. Aosved, Ph.D., and Jennifer Cornish, Ph.D., ABPP)

Interns will be able to take unpaid leave following the birth, adoption, or foster care placement of a child. Interns are not eligible for FMLA, as UNC-CH requires one year of employment prior to its implementation. When the need for parental leave arises, CAPS administration works proactively with the intern, their academic program, and APPIC to arrange alternatives.

Regardless of whether the intern is a primary or secondary caregiver, the intern can have up to 6 weeks of unpaid leave, at the discretion of the Operations Team and the Coordinator of Training. The intern is encouraged to share their needs and wishes with the Coordinator of Training as soon as possible in order to allow time to plan for the leave and come up with a mutually agreeable solution. Given that each intern has different needs regarding parental leave, it is difficult to provide specifics regarding accommodations, but a possibility may include an increased workload during non-leave time. The intern is encouraged to be open-minded, realistic, and collaborative when working with CAPS staff towards a mutually agreeable plan.

It is the responsibility of the training program to “ensure that trainees have achieved the program’s aims, training requirements, competencies, and outcomes and have received a sufficient number of hours of training.”

CAPS Policy for Psychology Trainees with Disabilities and Accommodations

A trainee is responsible for notifying CAPS Coordinator of Training (COT), or Training Committee (if COT is not available), as soon as possible about requests for accommodation to insure time to best consider and process the request, be it upon formal offer and acceptance of a training position at CAPS or some other early moment. Once a request for accommodations is received, the COT, Psychology Training Committee and CAPS staff (as appropriate) will review how the requested accommodations fit within the job demands and work that CAPS does.

Agreed upon accommodations will be given in writing. Some accommodations might come into conflict with professional responsibilities in certain circumstances, or might not be feasible for serving student clientele. Should this occur, there will be a meeting with the trainee, COT, and Training Committee to review options and develop a plan. As needed or appropriate, Human Resources (HR) may be consulted to consider appropriateness of accommodation requests with university policy governing staff positions. In addition, the Accessibility Resource Services (ARS) office at UNC may be consulted, for guidance from experts in the field of disability.

Counseling and Psychological Services (CAPS) is committed to providing reasonable accommodations in accordance with the [Americans with Disabilities Act \(ADA\)](#). Find more information on the ADA by clicking on the link above. Another helpful link can be found below.

<http://www.apa.org/pi/disability/resources/publications/second-edition-guide.pdf>

Intern Work Schedule

CAPS is open Monday through Friday, 8:00 a.m. to 5:00 p.m. Interns are expected to work during those hours unless other arrangements are made with the Coordinator of Training. In addition, interns may sometimes be required to work outside of typical work hours. Clients must be scheduled between 8:00 am and 5:00 pm. The CAPS internship is a yearlong program which requires interns to accrue a minimum of 2000 total hours, with at least 500 of these hours in direct service. Interns must work throughout the year to meet this requirement. Vacation days, sick days and holidays do not count towards the 2000 hours required to complete the internship. If an intern uses all of their possible vacation days and holidays, there will be 44.8 weeks remaining in which to meet the internship hours requirement. If interns choose to use all their allotted days off, they may be required to work an average of 45 hours per week for the remaining weeks. This requirement can be fulfilled by after-hours outreach activities, interns staying late because of triage requirements, or to catch up on documentation or other demands. Service demand is highest in the fall and spring semester, with lesser demand in the summer. As a result, direct service hours will not be spread evenly throughout the year and interns will need to plan to accrue more direct service hours during the fall and spring semesters (approximately 30 weeks).

Tracking Hours

It is the responsibility of the interns to keep track of their hours on an ongoing basis and provide updates upon request to the Coordinator of Training.

Licensure

States vary in their requirements for licensure in terms of hours, credentials of supervisors and required paperwork. Interns are responsible to learn about licensure requirements of states in which they are interested in obtaining licensure and providing required forms to the Coordinator of Training.

Professional Attire

Interns are expected to dress in a professional manner, in accordance with attire of CAPS professional staff. Interns are encouraged to be cognizant of what their dress may communicate to others and to consult with their supervisors or the Coordinator of Training regarding questions of appropriate dress.

Office Space

Each intern is assigned an individual office space, for their use throughout the year. Interns are encouraged to create a comfortable space for their own use as well as one that is a welcoming and professional office space for clients, parents, colleagues, and other visitors. Interns are encouraged to be cognizant of what their office décor may communicate to others.

Computers

Computers are provided to interns for their professional use. Interns are expected to be intentional and thoughtful about their computer use, including what is downloaded and what is sent or forwarded to staff. Each intern has a Titanium account and E-clinical account and is listed as a resource on the CHS system. Each intern also has an e-mail account on the UNC server and is listed on the CAPS listserv, the Division of Student Affairs listserv and has access to the CHS intranet. However, e-mail is not a secure or confidential form of communication. What is sent over e-mail may be accessed by persons for whom the message was not intended. Secure e-mails may be sent to clients through the e-clinical system.

Administrative Assistance

During orientation, interns receive information about administrative processes at CAPS including expectations for turning in their schedules and making schedule changes. They also receive office keys, learn about our phone system and photocopy procedures, and receive passwords for each system. Additional administrative support comes through Campus Health Services Information and Technology (IT) staff. Interns meet IT staff during orientation. There are several aspects to technology orientation. First, each intern is assigned a computer which is configured for them prior to their arrival. A University e-mail account and an account on e-clinical works is also established for each intern. Each intern also has an external hard drive and camera and accompanying software installed in their office. Technology orientation introduces the interns to each of these systems.

Taping Sessions

Interns are required to audio or video tape all therapy sessions. Interns have a camera and hard drive in their offices with accompanying software installed in their desktop computers.

Observation of trainee counseling sessions is an essential part of supervision, as it provides accurate information to both trainees and supervisors about clinical activities.

The following guidelines are designed to facilitate the proper use of taping methods and to ensure appropriate safeguards for clients:

1. Familiarize yourself with the technical equipment prior to use.
2. It is your responsibility to make sure that the hard drive is delivered to your supervisor or viewing upon request.
3. Staff should discuss the recording requirement when they refer a client to a trainee for therapy.
4. However, trainees should also discuss this requirement when first starting to work with a client and make sure that they have clients sign the form giving permission to tape.
5. Do not apologize to the client for needing to record or make it seem like an imposition on her/him. Simply ask in a straightforward manner. The client is much more likely to accept observation if you are comfortable with it yourself and convey this to her/him by your manner.
6. Be prepared to respond to any client questions as to how the recording will occur, who will be viewing it, the purpose of the recording and confidentiality concerns. Be sure to provide the client your supervisor's name.
7. Client materials should at all times be treated with the utmost confidentiality.
8. Under no circumstances may any of the recording equipment or client materials be removed from CAPS or utilized for other than training or educational purposes.

SUPERVISOR ASSIGNMENT PROCEDURES

Each intern receives two hours of individual supervision per week from two different licensed senior psychologists. Based on intern need and training goals, sometimes interns maintain continuity with one of these supervisors throughout the entire year and switch their second supervisor in January. Other times, both supervisors are changed in January or remain constant. We believe that there is value in multiple supervisory perspectives throughout the year and our program is designed so that interns have exposure to a variety of staff members in supervision. Individual supervisors are initially assigned by the Coordinator of Training with the input of the Training Committee and the interns. Interns are sent a questionnaire prior to beginning the internship year that addresses the interns' supervision goals, prior experiences and preferences for particular theoretical orientations and areas of expertise. Supervision needs for each intern are assessed based on review of these questionnaires, as well as from information from applications and interviews. The characteristics, strengths, and experience levels of available supervisors are considered in matching supervisors to the needs of each intern. Interns have the opportunity to share their goals for supervision in spring semester, which are used in making supervision assignments, along with consideration of staff availability.

MAINTENANCE OF RECORDS

CAPS' internship program maintains records of the interns' evaluations, training experiences, and certificates of internship completion. These records are stored in a locked cabinet in a closet in the Coordinator of Training's office which is kept locked when unattended in order to maintain confidentiality. Intern records are kept indefinitely.

COMMUNICATION WITH HOME DEPARTMENTS

CAPS may communicate with interns' home departments during the internship year. This may include sharing CAPS evaluations and/or providing feedback as requested by home departments.

PROGRAM EVALUATION

CAPS is committed to developing and improving our internship program. Regular input from interns about their experiences and perceptions of the program is essential to our being able to make necessary modifications and improvements. Interns formally evaluate the training program at the end of the year. Interns meet regularly with the Coordinator of Training and are encouraged to raise concerns and /or provide input during these meetings. CAPS is responsive to trainee concerns, and has used trainee feedback to make changes in the content, structure and processes of the program. Supervisors and training staff are also involved in proposing changes. Both supervisors and the Training Committee meet regularly and as a result, can identify and rapidly respond to individual trainee needs, needs of the training cohort or programmatic concerns. Finally, the Training Committee reviews the program and plan for the upcoming year; this planning process incorporates prior intern evaluations as well as incoming intern needs assessments.

INTERN EVALUATION

Overview:

Our training program has specific goals, objectives and competencies that were delineated above. Evaluations of interns assess how well interns have performed relative to these specific criteria. The major purpose of assessment is to provide the intern feedback in order to facilitate professional growth and development. Feedback to interns throughout the year maximizes the benefit of the internship training and guides them in assessing their progress as they move through the program. Helping interns to identify areas of strength, as well as growth edges, can assist them to focus and prioritize their efforts during internship year. Interns are still in training and it will sometimes be the case that evaluations reveal areas in which the intern needs to make improvements in order to achieve the competency expected by the program. This is usually accomplished by defining the problematic area, focusing on growth and development in this area, and reassessing to determine improvement and whether the intern has overcome the deficit.

The Evaluation Process:

In the context of their supervisory relationships, interns receive ongoing feedback to provide validation of their strengths and to target areas/skills for further growth and in need of improvement. Formal evaluation primarily occurs at two distinct points during the year at six months and at twelve months, and informally at three months. At the three-month evaluation, the procedure is less formal with feedback from the staff being conveyed to the intern by the Coordinator of Training and individual supervisors. For the formal evaluations, training staff pool input regarding the performance of the trainees in all aspects of their training. On the basis of both the information presented and on the evaluation forms completed by the individual supervisors, the Coordinator of Training and the individual supervisors schedule a time with the intern to provide feedback and discuss the evaluation. Individual supervisors then have opportunity to follow up with the intern regarding expanded goal-setting, questions that may have come up for the intern, etc. However, it is the expectation at CAPS that individual supervisors will be providing the intern ongoing feedback throughout the course of the semester so that the intern is able to set appropriate training goals and is not surprised by the formal evaluations.

Interns also meet bi-weekly in a group setting with the Coordinator of Training to discuss any matters of concern, including those related to feedback and evaluation. During this meeting, discussion revolves around how the internship experience is progressing, and the trainee is provided with the opportunity to discuss the quality of supervision and other aspects of the training experience. Interns are also invited to schedule any additional meetings as needed with the Coordinator of Training, or their individual supervisors, should they have any concerns, questions, or reactions they would like to discuss.

The intern evaluation form (see Appendix I) uses a five-point Likert scale. To successfully complete the internship, interns must obtain a minimum score of “3” (Intermediate Skill) on all elements related to each competency area. If interns receive any ratings below 3 in the midyear feedback, the COT references the Due Process Guidelines for a thoughtful development of a remediation plan.

INTERN EXIT CRITERIA AND GRADUATION

Interns must meet required standards and finish required tasks as follows, in order to successfully complete the internship program:

- 1) Interns must responsibly complete all tasks associated with their internship responsibilities, especially termination with all clients and documentation of all clinical work.
- 2) Intern evaluations are expected to reflect an overall level of competence and growth throughout the year.
- 3) Interns must complete and turn in to the Coordinator of Training the Interns Responsibility checklist and show that they have satisfied all listed experiential requirements.
- 4) Interns must turn in to the Coordinator of Training an accounting that shows that they have met total and direct service hour requirements.
- 5) Interns must turn in to the Coordinator of Training all supervisor and program evaluations.
- 6) Interns must provide the Coordinator of Training with a list of documentation/ evaluations required by their departments and contact information where the information is to be sent.
- 7) Interns must provide the Coordinator of Training with contact information.
- 8) Interns must turn in to the Coordinator of Training all keys and complete all required forms/tasks for human resources.

Appendix I

**UNC Counseling and Psychological Services
Psychology Intern Evaluation Form**

Intern _____ Date _____

Evaluation completed by _____

Covering Intern Performance From _____ to _____

Please indicate which of the following sources you have used to make your evaluation:

- | | |
|--|---------------------------------|
| _____ Supervision | _____ Seminar discussions |
| _____ Review of clinical notes | _____ Feedback from other staff |
| _____ Review of audio tapes | _____ Co-facilitating therapy |
| _____ Review of video tape or other direct observation | |
| _____ Other (please specify) _____ | |

Please complete the evaluation using the following scale:

1. Significant Development Needed: Functions well below expected for level of training
2. Below Expected Level: Some improvement in functioning is needed to meet expectations
3. Intermediate Skill: Functions adequately and meets expectations based upon level of training (Note: When given at the end of the internship year, this rating reflects readiness for entry-level independent practice and licensure)
4. Above Expected Level: Functions above average and exceeds expectations based upon level of training
5. Advanced: Consistent high-level demonstration of competency and independence

N/A: Not applicable/Unable to assess

Please use the above scale to rate the intern in each of the competencies. Use the comment area to elaborate or indicate which skills are particular strengths or growth edges for this intern.

I) Demonstrates competence in critically evaluating and disseminating research and other scholarly activities

- 1) Demonstrates the substantially independent ability to critically evaluate research _____
- 2) Demonstrates the substantially independent ability to disseminate research or other scholarly activities (e.g. case conference, presentation, publications) at the local (including CAPS), regional, or national level _____
- 3) Demonstrates the ability to apply scientific inquiry and critical thinking skills to their professional work _____

Average score for broad area of competence _____

II) Demonstrates competence in upholding ethical and legal standards

- 1) Is knowledgeable of and acts in accordance with the current version of the APA Ethical Principles of Psychologists and the Code of Conduct _____
- 2) Is knowledgeable of and acts in accordance with relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels _____
- 3) Is knowledgeable of and acts in accordance with relevant professional standards and guidelines _____
- 4) Recognizing ethical dilemmas as they arise, and apply ethical decision-making processes in order to resolve the dilemmas _____
- 5) Conducts self in an ethical manner in all professional activities _____
- 6) Maintains appropriate boundaries and professional roles with clients and supervisees _____
- 7) Respects client confidentiality and adheres to ethical and agency standards of confidentiality _____
- 8) Practices within level of competency _____
- 9) Maintains required agency records and documents, clearly written and completed within specified time _____

Average score for broad area of competence _____

III) Demonstrates competence in understanding and working with individual and cultural diversity

- 1) Demonstrates an understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves _____
- 2) 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 _____
- 3) Demonstrates the ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles, including working effectively with areas of individual and cultural diversity not previously encountered over the course of their careers _____
- 4) Demonstrates the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during internship _____
- 5) Demonstrates the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own _____
- 6) Addresses differences between their own cultural identities and values from those of their clients in a manner that is sensitive and respectful _____
- 7) Incorporates diversity issues into professional relationships by being aware of their own subtle biases and trying to improve in these areas _____

Average score for broad area of competence _____

IV) Demonstrates competence in professional values, attitudes, and behaviors

- 1) 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 _____
- 2) Engages in self-reflection regarding one's personal and professional functioning; engages in activities to maintain and improve performance, well-being, and professional effectiveness _____
- 3) Actively seeks and demonstrates openness and responsiveness to feedback and supervision _____
- 4) Responds professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training _____
- 5) Demonstrates knowledge of strengths and growth edges and effectively manages these _____
- 6) Works effectively as part of a treatment team _____
- 7) Fully participates in internship training experiences and activities _____
- 8) Maintains professional appearance/ attire consistent with agency standards _____

Average score for broad area of competence _____

V) Demonstrates competence in communication and interpersonal skills

- 1) Develops and maintains effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services _____
- 2) Produces and comprehends oral, nonverbal, and written communications that are informative and well-integrated; demonstrates a thorough grasp of professional language and concepts _____
- 3) Demonstrates effective interpersonal skills and the ability to manage difficult conversation well _____
- 4) Appropriately communicates about and tries to resolve conflict in interpersonal situations, as necessary _____
- 5) Engages in self-reflection regarding their communication style, approach, and interpersonal skills _____

Average score for broad area of competence _____

VI) Demonstrates competence in assessment

- 1) Demonstrates current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology
- 2) Demonstrates understanding of human behavior within its context (e.g. family, social, societal and cultural)
- 3) Demonstrates the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process
- 4) Selects and applies 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 _____
- 5) Interprets 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 _____
- 6) 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 _____
- 7) Utilizes clinical interviewing techniques to determine diagnosis and treatment needs _____
- 8) Effectively and efficiently gathers the appropriate information necessary in conducting triage interviews _____
- 9) Provides appropriate disposition planning from triage assessment interviews, including appropriate awareness of community resources _____
- 10) Appropriately conducts risk assessments and develops safety plans _____
- 11) Assesses for need for hospitalization and facilitates hospitalization as necessary _____
- 12) Conducts and documents intake assessments _____

Average score for broad area of competence _____

VII) Demonstrates competence in intervention

- 1) Establishes and maintains effective relationships with the recipients of psychological services ____
- 2) Develops evidence-based intervention plans specific to the service delivery goals ____
- 3) Implements interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables ____
- 4) Demonstrates the ability to apply the relevant research literature to clinical decision making ____
- 5) Modifies and adapts evidence-based approaches effectively when a clear evidence-base is lacking ____
- 6) Evaluates intervention effectiveness and adapt intervention goals and methods consistent with ongoing evaluation ____
- 7) Differentiates the models, appropriate utilization, and relevant techniques of brief, crisis, long-term therapy, and group therapy ____
- 8) Demonstrates awareness of the developmental issues of college students ____
- 9) Conceptualizes clinical material and develops treatment approaches based on conceptualizations ____
- 10) Demonstrates ability to conceptualize client presentations/material in terms of multiple theoretical perspectives, when appropriate ____
- 11) Uses own reactions, dynamics in the session, transference and counter-transference to facilitate treatment ____
- 12) Effectively manages termination process ____
- 13) Demonstrates knowledge of group process and group dynamics and uses this knowledge in facilitating group effectiveness ____
- 14) Plans and implements group design in order to provide effective treatment ____
- 15) Works effectively with a co-facilitator in order to coordinate interventions, share in the responsibility for the group, and give and receive feedback ____

Average score for broad area of competence _____

VIII) Demonstrates competence in supervision

- 1) Applies supervision knowledge in direct or simulated practice with psychology trainees or other health professionals ____
- 2) Forms effective supervisory alliances with their supervisee ____
- 3) Helps supervisee monitor treatment goals and progress in therapy ____
- 4) Assesses supervisee's clinical functioning and provides helpful and supportive feedback ____
- 5) Ensures the welfare of clients as part of supervisory responsibilities ____

Average score for broad area of competence _____

IX) Demonstrates competence in consultation and interprofessional/ interdisciplinary skills

- 1) Demonstrates knowledge and respect for the roles and perspectives of other professions _____
- 2) Applies 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 _____
- 3) Demonstrates the ability to conduct outreach, including their multicultural project _____

Average score for broad area of competence _____

Comments:

I acknowledge that my supervisors have reviewed this evaluation with me.

Intern Signature _____ Date _____

Supervisor Signature _____ Date _____

Supervisor Signature _____ Date _____

Appendix II

DUE PROCESS AND GRIEVANCE GUIDELINES AND PROCEDURES Adapted from, and parts taken directly from, Stanford University's Counseling and Psychological Services at Vaden Health Center

Due process and grievance guidelines ensure that decisions made by the CAPS doctoral internship program regarding interns are not arbitrary or personally based, and are consistent with the accreditation standards provided by the American Psychological Association (APA). Internship year is a time of much growth, which entails receiving feedback throughout the year. Most concerns that arise with interns are a normal part of the developmental training process, and will be addressed informally in supervision. Discussing problems and possible solutions are opportunities for professional growth. Likewise, we invite interns to collaborate with staff in any remediation processes that may occur during the internship year.

EVALUATION

At the beginning of the academic year, interns are given the training manual which includes the CAPS internship program goals, learning objectives, and expected competencies. This can be found on the CAPS internship website.

Interns are evaluated throughout the year, and will be given copies of the evaluation forms which are utilized to assess their skills and professional functioning. Interns are formally evaluated twice a year (mid-year and end of the year) using the "Psychology Intern Evaluation Form," which is completed by supervisors with feedback from other Training Committee members and staff. The Coordinator of Training (COT) and individual supervisors then meet with each intern to provide feedback and discuss the evaluation. The form is signed by the intern and supervisors and scanned and emailed to the intern's Director of Clinical Training (DCT) along with a summary email of the intern's strengths and growth edges. Individual supervisors then have the opportunity to follow up with the intern regarding expanded goal-setting, questions that may come up for the intern, etc. Interns also meet with the COT and their supervisors for an informal feedback meeting (around the 3rd month mark) prior to their formal mid-year evaluation. Throughout the year, interns receive ongoing feedback to provide validation of their strengths and to target areas/skills for further growth and in need of improvement.

The intern evaluation form uses a five-point Likert scale. To successfully complete the internship, interns must obtain a minimum score of "3" (Intermediate Skill) on all elements related to each competency area. If interns receive any ratings below 3 in the midyear feedback, the COT references the Due Process Guidelines for a thoughtful development of a remediation plan.

DEFINITION OF PROBLEMATIC BEHAVIOR

Problematic behavior is defined broadly as an interference in professional functioning which is reflected in one or more of the following ways: 1) an inability and/or unwillingness to acquire and integrate professional standards into one's repertoire of professional behavior; 2) an inability

to acquire professional skills in order to reach an acceptable level of competency; and/or 3) an inability to control personal stress, strong emotional reactions, and/or psychological dysfunction which interfere with professional functioning.

It is a professional judgment as to when an intern's behavior becomes problematic rather than as of concern. Trainees may exhibit behaviors, attitudes, or characteristics which, while of concern and requiring remediation, are not unexpected or excessive for professionals in training. Problems typically become identified when they include one or more of the following characteristics:

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

PROCEDURES FOR RESPONDING TO INADEQUATE PERFORMANCE BY AN INTERN

The following procedures will be implemented if an intern receives a rating below 3 on their formal evaluation or if staff have concerns about problem behavior.

1. The staff member will consult with the COT to determine how to proceed (for example provide feedback and discuss with intern in supervision or write a remediation plan) and continue to assess behavior in question for improvement.
2. If the staff member who brings the concern to the COT is not one of the intern's supervisors, the COT and/or person with the concerns will discuss their concerns with the intern's clinical supervisors to determine how to proceed.
3. If the COT and supervisors determine that the alleged behavior in the complaint, if proven, would constitute a serious ethical, legal, or clinical violation, the COT will inform the person who initially brought the complaint.
4. The COT will meet with the Training Committee to discuss the performance rating or the behavioral concern and possible courses of action to be taken to address the issues.
5. The COT, Training Committee, and supervisors may meet to discuss possible courses of action.
6. Whenever a decision has been made by the COT about an intern's status at CAPS, the COT will inform the intern in writing and will meet with the intern to review the decision. This meeting may include the supervisors.
7. The intern may choose to accept the conditions or may choose to challenge the action (see Due Process guidelines).
8. The COT or supervisors may consult with the intern's Director of Clinical Training from their doctoral program at any time.

GUIDELINES FOR ADDRESSING PROBLEMATIC BEHAVIORS

The remediation guidelines below are intended to address an intern's unsatisfactory performance and/or other problematic behaviors. CAPS reserves the right, in its sole discretion, to determine the appropriate remedial action, up to and including immediate dismissal from the internship program, as are necessitated by the individual facts of a particular case. At any time during the year, a CAPS staff member may designate some aspect(s) of an intern's progress, performance, and/or behavior as "unsatisfactory for an intern in training" and "needs remediation." One or more of the following procedures will be initiated according to the level of unsatisfactory progress and/or problematic behavior. In addition, as noted above, CAPS may also communicate with the intern's graduate program regarding any unsatisfactory/problematic behavior and remediation procedures implemented by CAPS.

A. Verbal Warning: Direct communication and verbal warning to the intern identifying the unsatisfactory behavior and/or the need to discontinue the problematic behavior.

Example: A meeting is scheduled with the intern, COT and/or supervisors to discuss the intern's failure to submit progress notes in a timely manner, or the intern's tardiness to meetings or work.

No record of this action is kept in the intern file.

B. Written Acknowledgement: Written acknowledgement to the intern formally stating:

1. That the COT and supervisors are aware of and concerned about unsatisfactory progress and/or problematic behavior;
2. That the concerns have been brought to the intern;
3. That the COT and/or supervisors will work with the intern to rectify the skill deficit and/or problem behavior and;
4. That the skill deficit and/or problem behaviors are not significant enough to warrant more serious action at present time, but that if the deficit and/or behavior continues, or if additional performance or behavioral issues arise, additional action may be warranted, up to and including dismissal from the internship program.

Example: Three months into the training year, an intern demonstrates an ongoing skill deficit in determining appropriate level of care during triage. A plan is agreed upon that requires additional reading and focus in supervision so that the intern can "catch up" to a level of competency consistent with her/his level of training.

The written acknowledgement may be removed from the intern file when the intern responds to the concerns and successfully completes the internship.

C. Written Warning: Written warning to the intern indicates the immediate need to address unsatisfactory progress and/or discontinue problematic behavior. The written warning will contain:

1. A description of the intern's unsatisfactory progress and/or problematic behavior;

2. Specific actions required by the intern to address unsatisfactory progress and/or correct problematic behavior;
3. The time line for addressing the area of concern; and
4. What action will be taken if the unsatisfactory progress and/or problematic behavior is not corrected
5. Notification that the intern has the right to request a review of this action.

Example: An intern consistently violates a specific CAPS policy or procedure or does not adequately address areas of unsatisfactory progress and/or problematic behavior specified in the Written Acknowledgement.

A copy of this letter will be kept in the intern's file. Consideration may be given to removing this letter at the end of the internship by the COT in consultation with the Training Committee and the intern's supervisors.

D. Schedule Modification: Schedule modification is a time-limited, remediation-oriented, closely supervised period of training used to assist the intern in overcoming unsatisfactory progress and/or problematic behavior, often associated with personal reactions to environmental stress, with the full expectation that the intern will complete the internship. This period will include more closely scrutinized supervision conducted by the regular clinical supervisors in consultation with the COT. Any element of the training program is subject to schedule modification. Schedule modification may include, but is not limited to:

1. Increasing the amount of supervision, either with the same or other supervisors;
2. Changing the format, emphasis and/or focus of supervision;
3. Recommending personal therapy;
4. Reducing or otherwise modifying the intern's clinical or other workload;
5. Requiring specific didactic activities.

The COT, in consultation with the Training Committee, and/or individual supervisor(s) will determine the length of the schedule modification period. Generally, the documentation will include the reasons for the schedule modification, the actions taken, and the basis for a decision to return to a normal schedule. This documentation will be kept in the intern's file. The termination of the schedule modification period will be determined, after discussions with the intern, by the COT in consultation with the Training Committee and the intern's supervisors.

E. Probation: Probation is also a time limited, remediation-oriented, closely supervised training period. Typically, probation is a response to unsatisfactory progress and/or problematic behavior that requires the training staff to assess the ability of the intern to successfully complete the internship. The purpose of probation is to clearly identify and define the problem area and to specify what needs to be done to improve the intern's performance or behavior. During probation, the COT, in consultation with appropriate supervisor(s), systematically monitors for a specific length of time the degree to which the intern addresses, changes, or otherwise improves the unsatisfactory progress and/or problematic behavior. The intern is informed of the probation in a written statement that includes:

1. The specific skill deficits and/or problematic behaviors that need remediating;
2. The recommendations for rectifying the problem, including any recommendations for personal

- therapy and/or professional development, as deemed appropriate;
3. The time frame for the probation during which the problem is expected to be ameliorated;
 4. The procedure to ascertain whether the problem has been appropriately rectified; and
 5. The consequences of not ameliorating the identified performance or behavior issues

A copy of this statement will be kept in the intern's file.

Example: Supervisor evaluations in one or more of the major competency areas reflect significant skill deficits inconsistent with level of training and/or expected level of development, supervisor(s') reports indicate consistent significant lapses in ethical or professional judgment, or client care is jeopardized based on the decisions and/or behaviors of the trainee.

F. Notice of Insufficient Improvement: If the COT determines, in consultation with the appropriate supervisor(s), that there has not been sufficient improvement in the intern's progress and/or behavior to remove either the schedule modification or probation, the COT and the Training Committee will discuss possible courses of action to be taken. The COT will communicate in writing to the intern that the conditions for revoking the probation or modified schedule have not been met, and a copy of this will be kept in the intern's file. This notice will include the course of action the COT has decided to implement. These may include continuation of the remediation efforts for a specified time period, or any of the following:

G: Suspension of direct service activities: This requires a determination that the welfare of the intern's clients has been jeopardized. Therefore, direct service activities will be suspended for a specified period as determined by the COT in consultation with the Training Committee. At the end of the suspension period, the intern's supervisors in consultation with the COT will assess the intern's capacity for effective functioning and determine when direct service can be resumed. Documentation regarding suspension of direct service activities will be kept in the intern's file.

H. Administrative leave: This involves the temporary withdrawal of all responsibilities and privileges at CAPS, and will be documented in the intern's file. It will also be noted if the probation period, suspension of direct service activities, or administrative leave interferes with the successful completion of the training hours needed for completion of the internship. The COT will inform the intern of the effects the administrative leave will have on the intern's stipend and benefits.

G. Dismissal: Generally, the above guidelines are intended to aid the intern achieving expected competencies for their level of development and their training goals. Dismissal involves the permanent withdrawal of CAPS responsibilities and privileges. When specific interventions do not, after a reasonable time period, remedy the problematic behavior or concerns and the trainee seems unable or unwilling to alter her/his behavior, the COT will consult with the Operations Team about the possibility of termination from the training program. Either administrative leave or dismissal would be invoked in cases of severe violations of the APA code of ethics, or when imminent physical or psychological harm to a client is a major factor, or major disruption to other people in the training program or CAPS staff, or the intern is unable to complete the internship due to physical, mental, or emotional illness. Interns who are dismissed prior to their

completion of the program as a result of unsatisfactory progress and/or other problematic behaviors will receive a written dismissal notice, which will include the actions resulting in the dismissal and, if applicable, any previous attempts to address the concerns.

DUE PROCESS: GENERAL GUIDELINES

Due process ensures that the training program's decisions about interns are not arbitrary or personally based. Specific evaluative procedures apply to all interns, and appeal procedures are available for interns who wish to challenge the program's actions. All steps need to be appropriately documented and implemented. General guidelines are as follows:

1. The training program's expectations related to professional functioning are presented to interns in writing and discussed both in group settings and with individual supervisors.
2. Formal evaluations occur with each supervisor at specified times. Evaluation is a mutual process (with interns evaluating supervisors and supervisors evaluating interns) and meant to be a learning experience for both.
3. Problematic behaviors or concerns are clearly defined in writing and opportunities for discussion and clarification are provided if necessary.
4. Interns are informed of due process procedures and written policies for appealing actions of the program when warranted.
5. The training program will institute a remediation plan for identified inadequacies, including a time frame for expected remediation. Consequences of not resolving the inadequacies will be clearly stated in writing.
6. The training program ensures that interns have sufficient time to respond to any action taken by the program.
7. The training program considers multiple professional sources when making decisions or recommendations regarding an intern's inadequate performance.
8. The training program documents the action taken by the program and its rationale, and provides this documentation to all relevant parties.

DUE PROCESS: PROCEDURES

The intent of due process is to inform and provide a framework to respond, act, or dispute. When a matter cannot be resolved between the COT and intern, the steps to be taken are listed below.

GRIEVANCE PROCEDURES

There are two situations in which grievance procedures can be initiated.

1. An intern can challenge an evaluation report by their supervisors or a complaint from another party or actions recommended by the COT and Training Committee. They can elect to attempt to resolve this informally or formally; both sets of procedures are detailed below.
2. An intern may have a complaint against a CAPS staff member

Informal intern challenge

If an intern is dissatisfied with supervisors' evaluations or disagrees with a complaint from another party, he or she may request a special meeting with the COT and/or Training Committee. The review meeting will include the COT and any staff involved in the dispute. The intern may invite other staff members to assist or present additional information. Following this special review meeting, recommendations will be forwarded to the COT and Training Committee for further action. Possible actions include but are not limited to:

- a) Acceptance or modification of the supervisors' evaluations
- b) Specific changes in the remediation program
- c) Change of supervisor, and/or
- d) Addition of another supervisor

If the intern remains dissatisfied they can institute a formal challenge or ask for the Review Panel procedures (detailed below) to be instituted.

Formal intern challenge

If the intern wishes to formally challenge any action taken by their supervisor or the COT, the intern must, within 5 work days of the receipt of the COT's decision, inform the COT in writing of their challenge. When a challenge is made, the intern must provide the COT with information supporting the intern's position or concern. Within 3 work days of the receipt of this notification, the COT will consult with the Operations Team and will implement Review Panel procedures as described below.

When an intern has a complaint against a CAPS staff member

The training program recognizes that unanticipated problems may occasionally arise between interns and other CAPS staff. The problem-solving procedures described below are intended to address these problems.

- 1) An intern who has a concern with a CAPS staff member is first encouraged to raise the issue through direct communication with the staff member if possible and appropriate.
- 2) If direct communication with the CAPS staff member is not possible or appropriate, or if the intern makes an attempt to address the issue directly but is unable to resolve the issue, he or she is encouraged to bring the issue to the COT or Director.
- 3) If no solution is identified, or if the identified solution is unsuccessful, the COT informs the target of the complaint that this unresolved matter is being referred to the Operations Team. If the situation is still not resolved to the satisfaction of the intern, they can call for the Review Panel procedures (described below) to be instituted.

Review Panel and Process

- 1) When needed, the Director of CAPS will convene a Review Panel. The panel will consist of 3 staff members selected by the Operations Team with recommendations from the COT and the intern involved in the dispute. The intern has the right to hear all facts with the opportunity to dispute or explain the behavior of concern.

- 2) Within 5 work days, a hearing will be conducted in which the challenge is heard and relevant material presented. Within 3 work days of the completion of the review, the Review Panel submits a written report to the Operations Team, including any recommendations for further action. Recommendations made by the Review Panel will be made by majority vote.
- 3) Within 3 work days of receipt of the recommendation, the Operations Team will either accept or reject the panel's recommendations. If the Operations Team rejects the panel's recommendations due to an incomplete or inadequate evaluation of the dispute, the Operations Team may refer the matter back to the Review Panel for further deliberation and revised recommendations, or may make a final decision.
- 4) If referred back to the panel, they will report back to the Operations Team within 5 work days of the receipt of the Operations Team's request for further deliberation. The Operations Team then makes a final decision regarding what action is to be taken.
- 5) The COT informs the intern, Training Committee, the intern's graduate program, and other appropriate individuals in writing of the final action taken.
- 6) If the intern disputes the Operations Team's final decision, the intern has the right to contact the Ombud's Office at (919) 843-8204 to discuss the situation.

If there are extenuating circumstances that make these timelines or procedures unattainable, the involved parties will be notified in writing.

OTHER UNIVERSITY RESOURCES FOR ADDRESSING INTERNS CONCERNS

A. The Ombuds Office listens to complaints from employees, provides information, facilitates communication, and helps arrange mediation or conflict resolution between or among members of the University's faculty, staff and Postdocs. More information about the Ombuds Office and additional resources are available at: <http://www.ombuds.unc.edu/about.html>.

B. Interns are also invited to openly discuss and resolve any workplace issues through the University's facilitated conversations program, which is available at <https://hr.unc.edu/managers/consultations/facilitated-conversations/>

C. Interns who believe that they may have been discriminated against or harassed based on their age, color, creed, disability, gender, gender expression, gender identity, genetic information, national origin, race, religion, sex, sexual orientation, or veteran status (their "protected status") should contact the University's Equal Opportunity and Compliance Office (<https://eoc.unc.edu/>) or the University's Title IX Compliance Coordinator (<https://eoc.unc.edu/our-policies/state-and-federal-laws/title-ix-and-vawa/>). In addition to prohibiting all forms of discrimination and harassment based on an individual's protected status, the University's Policy on Prohibited Discrimination, Harassment and Related Misconduct also prohibits related misconduct, including interpersonal violence, stalking, complicity, and retaliation. Further information about the University's Policy on Prohibited Discrimination, Harassment, and Related Misconduct can be found at the following website: <https://eoc.unc.edu/our-policies/ppdhrm/>