

UNIVERSITY OF PITTSBURGH  
UNIVERSITY COUNSELING  
CENTER



*Doctoral Internship Training Program*  
Training Manual 2024-2025

Training Committee:

Training Director - Camille Velazquez, PhD

Assistant Director – Danielle Williams, LCSW

Training Coordinator – Bernadette Latuch, JD, PsyD

*Initial Accreditation: November 1987*

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## **SECTION I INTRODUCTION**

This training manual serves as the official guide to the training program's policies and procedures along with the UCC's Policies and Procedures manual. Therefore, it is important that you read it thoroughly and be generally familiar with its contents. It will serve as a resource guide throughout your training at the University Counseling Center (UCC). Although comprehensive in scope, this manual cannot answer every question or cover every possible contingency. As a result, please check with your supervisors or any senior staff member should you have questions about center policy or need assistance with a situation.

The remainder of this section will provide information about the UCC and its administrative structure as well as listings of staff, training responsibilities, and a training schedule. Section II will provide information about goals of the internship training program as well as a description of interns' weekly activities, including direct service expectations and brief summaries of individual and group supervision meetings and training seminars. Section III discusses Interns' Rights & Responsibilities, Supervisor'/Trainers' Responsibilities, Evaluation Philosophy & Procedures, Due Process and Grievance Procedures. Section IV will provide information about UCC procedures (See also UCC Policies & Procedures Manual). Sections V and VI contain UCC forms and Intern Evaluation forms, respectively.

## **The University Counseling Center**

The UCC provides counseling for undergraduate and graduate students. UCC services include short-term individual counseling and psychotherapy, relationship therapy, group counseling, and psychoeducational workshops, as well as outreach programming. Monday through Friday, UCC clinicians are available for drop-in hours from 9am-4pm. The UCC has the HEART team which is a team of clinicians that responds to mental health emergencies in the afternoon and evenings. In addition, a twenty-four hour on call emergency service (ProtoCall) is available to university students. The UCC offers a variety of psychoeducational workshops for the campus community both in the UCC and throughout campus. The UCC also provides consultation services to the Office of Residence Life, the Office of Belonging and Inclusion, the Office of Disability Resources and Services, the Career Center, Academic Departments, and to other campus offices who request services. The UCC shares space with Student Health Services (SHS), the students can access psychiatrists, primary care providers and physicians, nutritionist, gender affirming care, physical therapy, and acupuncturist.

### **Modified Operations**

The UCC will determine our operating posture based on Division, Institution and public health and safety guidance and requirements. During periods when the university is operating on a modified status, including local and national crises or emergencies, the UCC may provide services (i.e., drop-in, outreach/workshops, individual, group, etc.)

virtually. This may require Interns to work from a remote location using UCC's telemental health platform(s). The UCC remains committed to providing a comprehensive training program during periods of modified status and will attempt to accommodate the needs of Interns.

### **The Administrative Structure**

The UCC is co-located with SHS within the Wellness Center. The Wellness Center is an office within the Division of Student Affairs and contains the UCC and SHS. The Division of Student Affairs is headed by the Dean of Students, who reports to the Vice Provost for Student Affairs, who then reports to the Provost. The Provost is the highest academic officer at the University.

Overseeing the UCC side of the Wellness Center is the Executive Director of the UCC, who maintains responsibility and authority for psychological services, as well as the overall operation of the UCC who reports to the Associate Dean of Students – Wellness.

The Associate Director - Training has responsibility and oversight for the following: (1) decisions about the content of the training program (2) selection of interns (3) assignments of interns to supervisors, groups, and training rotations, (4) selection of staff to lead various training components, and (5) maintenance of internship training program records. The Associate Director - Training is assisted in carrying out certain responsibilities by the Training Committee.

The Associate Director - Training and the intern's primary clinical supervisor coordinate the intern's activities at the Center. Intern requests for leave (e.g., vacation, sick, professional development, etc.) must be submitted to the Intern's primary supervisor and training director for final approval based on staffing needs. It is recommended that interns request days off as soon as possible (i.e., at least 2 weeks in advance), and use the appropriate form and procedures consistent with overall University of Pittsburgh Human Resources and UCC policies.

## **UNIVERSITY COUNSELING CENTER (UCC) STAFF**

### Executive Director

Ahmed Ghuman, PsyD, MBA, LPC, Executive Director - *Pronouns: He, Him, His*

### Associate Director - Clinical Services

Ashlee Wolfgang, PsyD – *Pronouns: She, Her, Hers*

### Assistant Director-Clinical Services

Alex Sipe, LCSW – *Pronouns: He, Him, His*

### Coordinator - Clinical Services

Michael Hakala, MA – *Pronouns: He, Him His*

### Associate Director of Training

Camille Velazquez-Rodriguez, PhD – *Pronouns: She, Her, Hers*

### Assistant Director of Training

Danielle Williams, LCSW – *Pronouns: She, Her, Hers*

### Coordinator of Training

Bernadette Latuch, JD, PsyD – *Pronouns: She, Her, Hers*

### Associate Director - Outreach

Bernadette Smith, MS, LPC - *Pronouns: She, Her, Hers*

### Coordinator – Outreach

Brittany Jordan, MA – *Pronouns: She, Her, Hers*

### Assistant Director – Culturally Responsive Care

Dani Soltis, PhD – *Pronouns: They, Them, Theirs*

### Coordinator – Culturally Responsive Care

Peyton Kondis, MA - *Pronouns: She, Her, Hers*

### Assistant Director of Strategic Programs Coordinator

Cassandra Long, LCSW - *Pronouns: She, Her, Hers*

### Strategic Programs Coordinator

Tara Taheri, MA – *Pronouns: She, Her, Hers*

Coordinator – Crisis Response Services

Vacant

Staff Clinicians

Heather Arment, LCSW – *Pronouns: She, Her, Hers*

Lori Drost, LCSW - *Pronouns: She, Her, Hers*

Kaitlyn Emile, LPC - *Pronouns: She, Her, Hers*

Adam Gregory, LPC – *Pronouns: He, Him, His*

Veronica Jones, Ed.D. – *Pronouns: She, Her, Hers*

Mihnea Vasilescu, LCSW - *Pronouns: He, Him, His*

Amy Boyles, LCSW – *Pronouns: She, Her, Hers*

Lindsay Brunswick, LPC – *Pronouns: She, Her, Hers*

Jay Wiggins, MSW – *Pronouns: He, Him, His*

Eric Steininger, LPC – *Pronouns: He, Him, His*

Marcus O’Leary, FMT – *Pronouns: He, Him, His*

Diana Ramirez, MA – *Pronouns: She, Her, Hers*

Jason Horner, MA – *Pronouns: He, Him, His*

Kevan Schnider, LPC – *Pronouns: Any*

Hopeton Bailey, LPC – *Pronouns: He, Him, His*

Adrianna Cox, LPC – *Pronouns: She, Her, Hers*

Shavonna Mosley, PsyD – *Pronouns: She, Her, Hers*

Meloni Griffin, MA – *Pronouns: She, Her, Hers*

Khai Nelson, MSW – *Pronouns: She, Her, Hers*

Serena Valentin, MA – *Pronouns: She, Her, Hers*

Joanna Wang, MA – *Pronouns: She, Her, Hers*

Administrative Staff

Yuri Neira de Souza – *Pronouns: He, Him His*

Carol Thompson - *Pronouns: She, Her, Hers*

Brittany Chambers – *Pronouns: She, Her, Hers*

Edan Lambright – *Pronouns: She, Her, Hers*

Vacancy

## 2024-2025 UCC Supervisors

### Individual Supervisors

Ashlee Wolfgang  
Camille Velazquez  
Bernadette Latuch  
Dani Soltis

### Rotation Supervisors

Ahmed Ghuman  
Ashlee Wolfgang  
Camille Velazquez  
Bernadette Smith  
Cassandra Long  
Dani Soltis  
Bernadette Latuch

### Seminar Supervisors

Ashlee Wolfgang  
Camille Velazquez  
Bernadette Smith  
Dani Soltis  
Diana Ramirez

## 2024-2025 TRAINING SEMINARS & MEETINGS SCHEDULE

### Tuesday:

9 – 10 AM: Every other week:

- Consultation Teams

1 PM – 2 PM: Every other week:

- Wellness Center

### Wednesday:

12:30 – 2pm: Once a month

- Staff Meeting

### Consult Friday:

9 AM: Supervision of Supervision

10 AM: Culturally Responsive Care Seminar

11 AM: Clinical Skills Seminar

### Scheduled periodically:

- Trainee Progress Review
- Professional Practice Seminar
- Outreach Seminar (monthly)

## **SECTION II INTERNSHIP TRAINING PROGRAM**

### Program Training Model & Goals and Profession-Wide Competencies

The University of Pittsburgh Counseling Center (UCC) offers a full-time twelve-month professional psychology doctoral internship program. The internship program has full APA accreditation, first accredited in 1987 and most recently re-accredited in 2019 for 10 years.

The Doctoral Internship Training Program at the University of Pittsburgh UCC offers a developmental-practitioner model of training for interns that emphasizes our valuing of a developmental perspective in the formation of our professional identities as psychologists. The doctoral internship at the UCC is designed to build on the foundation of interns' training in their academic programs. It is our belief that this is best accomplished through the establishment of strong mentoring relationships with practicing psychologists and professionals from other mental health disciplines including counseling and social work who provide the interns with models of ethical practice and a strong professional identity. The internship is viewed as an apprenticeship, in which the interns learn through a combination of supervised practice, consultation, and observation of the practicing psychologists and other mental health professionals.

The internship program is designed to provide a broad-based training experience in a setting that is heavily oriented toward the direct delivery of mental health services. As colleagues-in-training, interns are actively involved in all UCC

efforts to provide a wide range of mental health and consultation services to students, faculty, and staff throughout the University.

The training aims of the UCC include nine areas of profession-wide competencies as outlined in the American Psychological Association (APA) Standards of Accreditation. This internship in health service psychology uses a variety of training methods and aims to prepare interns for entry-level practice in all capacities of a professional psychologist within integrated and multidisciplinary university counseling center settings. The goals, objectives, and expected competencies of the internship program are as follows:

**I. Research:**

- a. Independently critically evaluate and disseminate research or other scholarly activities (e.g., case conferences, presentations, publications) at the local (including the University of Pittsburgh), regional or national level
- b. Integrate theory and research to inform your practice across all professional activities with a university counseling center setting

**II. Ethical & Legal Standards:**

- a. Identify and act in accordance with ethical principles and legal issues based on local, state, and national statutes and guidelines in your work as a psychologist
- b. Recognize ethical dilemmas as they arise and apply ethical decision-making processes in order to resolve the dilemmas
- c. Conduct yourself in an ethical manner in all professional activities.

### **III. Individual & Cultural Diversity:**

- a. Continually evaluate and understand how your own personal/cultural history, attitudes, and biases may affect how you understand and interact with people different from you
- b. Demonstrate a current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision/consultation, and service
- c. Integrate your awareness and knowledge of individual and cultural differences in the conduct of professional roles, and independently apply frameworks for working effectively with areas of individual and cultural differences you have not previously encountered that may/may not create conflict with your own cultural values

### **IV. Professional Values, Attitudes, & Behaviors:**

- a. Behave in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others
- b. Engage in self-reflection regarding your personal and professional functioning, as well as engage in activities to maintain and improve performance, well-being and professional effectiveness
- c. Actively seek and demonstrate openness and responsiveness to feedback and supervision

- d. Respond professionally in increasingly complex situations with a greater degree of independence

**V. Communication & Interpersonal Skills:**

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

**VI. Assessment:**

- a. Demonstrate current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including considerations of client strengths and psychopathology
- b. Understand human behavior within its context (e.g., family, social, societal, and cultural)
- c. Apply knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process
- d. Select and apply assessment methods that draw from the best available empirical literature and that reflect the science of measurement and

psychometrics; collect relevant data using multiple sources (i.e., CCAPS, clinical interviews) and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient

- e. Interpret assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective
- f. Communicate orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a wide range of audiences

**VII. Intervention:**

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

evidence-base is lacking

- f. Evaluate intervention effectiveness, and adapt intervention goals and methods consistent with ongoing evaluation

#### **VIII. Clinical Supervision:**

- a. Understand models of supervision; supervise, mentor and monitor Interns and others in the development of competence and skills in professional practice; and effectively evaluate those skills
- b. Act as a role model maintaining responsibility for the activities you oversee

#### **IX. Consultation & Interprofessional/Interdisciplinary Skills:**

- a. Intentionally collaborate with other individuals or groups to address a problem, seek or share knowledge, or promote effectiveness in professional activities
- b. Directly consult with individuals and their families, other healthcare/multidisciplinary professionals, interprofessional groups, or systems related to health and behavior

### **How Competencies are Taught, and Outcomes are Measured**

The Training Program strives to teach the aforementioned competencies in a variety of didactic manners and experiential methods. The Training staff is committed to ongoing support and formative feedback that is summarized semi-annually in written evaluations. Outcomes are measured in myriad ways by all UCC staff who participate in training and have clinical, consultative, or co-facilitative interactions with the Interns.

Assessment methods may include direct observation of work; review of written work and/or raw data (CCAPS/testing materials); videotape review; client satisfaction survey responses; discussion of clinical interactions; case presentations; seminar presentations; comments from other training, supervising, administrative and support staff; and consultations conducted during drop ins.

Teams and multidisciplinary staff or treatment teams. Some teaching methods and evaluative components include:

- Training on and discussion of the drop in, including initial consultation, process in orientation and Clinical Skills Seminar.
- Participation in role-plays and practice drop in, including initial consultation, sessions at the start of internship with newly-assigned primary clinical supervisors and Clinical Skills Seminar leader.
- Training is provided in assessing risk factors through Clinical Skills Seminar and consultation with clinical supervisors, as well as during consultation team meetings.
- Drop in initial consultation notes are reviewed and edited by primary (and as applicable delegated clinical supervisors), and interns incorporate feedback into the notes until narratives, diagnostics and treatment planning are satisfactory.
- Individual and/or relationship treatment therapeutic intervention skills are continually assessed via discussion and video tape review with primary and delegated supervisors throughout internship.

- Individual and/or group counseling skills are assessed in written format by primary and delegated supervisors at mid-year (end of January) and the conclusion of the internship, with verbal formative feedback provided consistently throughout the supervision relationships.
- Conceptualization, intervention, and self-reflection skills related to individual and/or relationship counseling work are discussed in Culturally Responsive Care Seminar throughout the year, and abilities in this area are measured on seminar evaluations at mid- year and the conclusion of seminar.
- Diversity and multicultural issues, including culture-bound syndromes in addition to the effects of minority stress, bias, and discrimination, are discussed on a regular basis in all seminars and supervision relationships as well as emphasized in Culturally Responsive Care Seminar.
- Cultural humility and the ability to understand and attend to multicultural factors and intersectionality of identities in counseling work is assessed on the Culturally Responsive Care Seminar evaluation at mid-year and the conclusion of the seminar.
- Leaders of Culturally Responsive Care Seminar evaluate these competencies based on discussions in seminar, clinical case presentations, videotape observations, and participation in multicultural didactic trainings and experiential learning activities.
- Evaluation of competence in diversity-related material and work is also

evaluated in Clinical Skills Seminar and Supervision of Supervision.

- Ability to self-reflect is discussed verbally by both primary and delegated supervisors throughout internship and is assessed in written form on the evaluation of individual and/or group counseling work by both supervisors at mid-year and the conclusion of internship.
- Effectiveness of individual and/or group counseling is assessed by written client satisfaction surveys throughout the internship year, and feedback is reviewed by clinical supervisors and shared with interns during the internship year.
- The ability to effectively assess and conceptualize clients, plan treatment, and provide therapeutic intervention is evaluated at interns' Culturally Responsive Care Seminar presentations to the entire clinical staff near conclusion of the training year. The form includes a Likert-type scale as well as an opportunity for staff to provide narrative, more thorough feedback to interns. This feedback is summarized and shared with the intern by Culturally Responsive Care Seminar leaders; Clinical supervisors also receive a summary.
- Intern progress and competency in clinical work is discussed and assessed at biweekly training program check-in meetings by training committee members, individual clinical supervisors, rotation supervisors, and seminar leaders.
- Provision of crisis, urgent and emergent services to clients is continually assessed and discussed by primary supervisors (and as applicable delegated supervisors) and staff doing drop in.

- Competence in crisis intervention is assessed in written evaluation by primary and delegated clinical supervisors at mid-year and the conclusion of internship.
- Readiness and skill are evaluated by the leader of the Clinical Skills Seminar in verbal and written evaluations at mid-year and the conclusion of internship.
- Knowledge of general group dynamics and theory is assessed by Clinical Skills seminar leaders, verbally and in written form on evaluations at mid-year and the conclusion of internship.
- Group care coordination skills are evaluated by senior staff co-facilitators throughout the group process(es) and evaluated in written form at the conclusions of the group(s).
- Awareness and response to ethical and diversity issues are assessed by senior staff group co-facilitators verbally throughout the group process, and in written format mid-year and conclusion of the seminar and/or group(s).
- Group members of each therapy group evaluate both co-facilitators and overall group experience at the conclusion of each academic semester.
- Competence in consultation is measured by primary and delegated clinical supervisors based on discussion, observation, and staff feedback on consultations provided by interns, namely during drop ins.
- Competence in outreach is measured in part by the Associate Director - Outreach, who is the leader of the Outreach Seminar, and is based on observation and

discussion of outreach activities throughout the internship year.

- Effectiveness of outreach activities, including attending to multicultural factors, and workshops is evaluated in writing or verbally by audience participants whenever possible.
- In cases where senior staff members co-facilitate presentations with interns, feedback is given to interns and to their supervisors, who incorporate that feedback into their evaluations of the interns' effectiveness in consultation and outreach activities.
- Senior staff leaders of Supervision of Supervision will provide ongoing verbal, formative feedback based on discussions, observation of videotapes, and review of clinical notes written by practicum supervisees and edited by the supervising interns.
- Senior staff leaders of Supervision of Supervision will assess interns' effectiveness in providing clinical supervision in written form at the practicum students' mid-year point and conclusion of the supervision relationship and experience.
- Knowledge of and adherence to ethical principles and state laws (including mandated reporting guidelines and duty to protect) are discussed, applied, and evaluated in Clinical Skills Seminar and in individual clinical supervision by both primary and delegated supervisors.
- Written evaluation of knowledge and skill in ethical principles and state laws are evaluated by primary and delegated clinical supervisors based on videotape review,

case discussion in supervision, appropriate consultation, and feedback from staff at mid-year and the conclusion of internship.

- In addition to focusing on ethical competencies in Clinical Skills Seminar and individual supervision, other seminars (including Culturally Responsive Care Seminar, Supervision of Supervision, Outreach Seminar, and training rotations) also assess knowledge and application of ethical principles and state laws at mid-year and conclusion of each seminar.
- Primary and delegated clinical supervisors assess the ability to utilize supervision and incorporate feedback verbally throughout internship, and in written format at mid-year and the conclusion of internship.
- Intern self-awareness and ability to reflect on and incorporate feedback is assessed in Clinical Skills Seminar, Outreach Seminar, Culturally Responsive Care Seminar, Supervision of Supervision, and individual supervision.
- Discussion of interns' openness and ability to receive and use feedback is discussed at biweekly training program check-in meetings designed to review the clinical, interpersonal, and professional competency and growth of each intern.
- Intern's rotation experiences are evaluated at conclusion of rotation-by-rotation supervision and via evaluation of rotation presentation

## **Internship Hours and Days Away From the UCC**

The internship at the UCC consists of approximately a 37.5 -hour workweek for a twelve-month period. Interns accrue time (i.e., sick time, personal days, vacation) in accord with their position classification as Student Services I within the University of Pittsburgh Student Affairs Division. Electronic timecards are completed once weekly - reviewed and approved by Associate Director of Training.

Interns also receive annual University holidays and do not work when UCC is closed. Interns are allowed to save no more than 5 days to end internship early (i.e., finishing one week early), they need to inform the Associate Director- Training as soon as possible, or at least 4 weeks in advance. Arrangements for days away from the office (other than illness) must be cleared in advance by the intern's Primary Clinical Supervisor with 2 weeks advanced notice. If an intern needs to call out of work, they are required to email the front desk staff by 8:30 AM so that they can reschedule appointments (and cc UCC primary supervisor and Associate Director - Training); and text primary supervisor and Associate Director - Training also by 8:30 AM.

Congruent with polices of the University of Pittsburgh as outlined in the [Staff Handbook](#), if an intern is out due to illness for more than three consecutive days, they may be required to provide documentation to the Associate Director - Training, may be required to make up missing training responsibilities, and may be asked to apply for leave under Family Medical Leave Act (FMLA,). If an intern is experiencing significant health problems that requires extended time off from internship, they will be required

to follow university policy adhering to FMLA.

### **Internship Activities**

Interns at the UCC participate in a wide variety of activities including individual psychotherapy, psychological testing, group therapy, and outreach; supervision and provision of supervision; as well as training seminars that reflect their roles as professionals-in-training. Interns are asked to take on increasing responsibility and independence as the year progresses in accordance with the training program's developmental perspective.

The Weekly Activity Profile on the following page represents an intern's average week, but interns' actual schedules vary greatly depending on the time of the academic year, training rotations, and additional responsibilities. Generally, interns are expected to complete 20 hours of direct service work each week. Following the weekly profile is a brief description of each activity. Interns will receive more detailed information about these activities throughout their orientation period.

### **Supervision**

Every intern will receive at least four hours of supervision on a weekly basis. They should have at least two hours a week of individual supervision with a licensed psychologist and two hours that can be in group or individual with designated supervisors which may include therapists with licenses in counseling and social work. Supervision may be face to face or via a HIPPA compliant platform.

**Weekly Intern Activity Profile**  
Average Hours/Week

	<u>Fall</u>	<u>Spring</u>		<u>Summer</u>
<b><u>Direct Services</u></b>				
Individual Psychotherapy and/or Relationship Counseling	10+	10+		10+
Group Psychotherapy	2+	2+		2+
Outreach	1+	1+		1+
Day-Call	6	6		6
<b><u>Consultation</u></b>				
	1+	1+		1+
<b><u>Supervision</u></b>				
Individual	2	2		2
Rotation Supervision	2/month	2/month		2/month
Group (CSS, Sup of Sup, CRCS)	3	3		3
Group Supervision from Co-Facilitator	.5+	.5+		.5+
Providing to a Practicum Student	1	1		0
Supervision Prep	3	3		2
<b><u>Training/Seminars</u></b>				
Professional Practice Seminar	Periodically	Periodically		Periodically
Outreach Seminar	2/month	2/month		2/month
<b><u>Meetings</u></b>				
Staff Meeting	.5	.5		.5
Training Program Check-In	Periodically	Periodically		Periodically
Wellness Center Consultation	2/month	2/month		2/month
Consultation Team	2/month	2/month		2/month
<b><u>Administration</u></b>				
Documentation/Clinical Notes	5+	5+		5+

## **Direct Services**

### Individual Psychotherapy and

Interns will provide short-term individual to a wide variety of clients throughout the internship year. While caseloads will vary throughout the year depending on other clinical activities (e.g., groups, outreach, drop in), interns are expected to complete at least 10 hours of individual psychotherapy and/or group counseling a week.

### Initial Consultations

Interns will conduct initial assessment for individual and group therapy from Drop in, and at times based on student's self-referral to group screening or ADHD screening. The number of initial consultations will vary by time of year and requests for UCC services. Interns will conduct clinical interviews, write up intake reports, make DSM-5TR diagnoses as appropriate, and conduct ongoing assessment as they formulate conceptualizations of their clients' concerns and strengths within a framework of cultural humility.

### Group Counseling

Interns are expected to co-facilitate at least one and up to three groups with a senior staff member throughout each semester during (fall, spring, and summer). Interns work closely with the Clinical Services Team, their supervisors, and staff members leading groups to determine the number and types of groups in which they will be involved during each part of the year. Based on training rotations, interns will be

required to co-facilitate particular groups. Responsibilities will include assisting the co-leader with planning and marketing the group, conducting pre-group interviews and screens, reviewing the group agreement forms, co-leading the group, and assisting the co-leader in documentation and evaluation of the group.

### Crisis Intervention

Interns will provide crisis services such as screening for higher level of care including a voluntary and involuntary hospital-based assessment as the year progresses, and while also considering an intern's prior experience, the intern moves from working with students with urgent and emergent concerns in ongoing coordination with the supervising clinician to handling urgent and emergent client contacts autonomously with support from senior staff members for consultation and debriefing. Furthermore, interns will encounter urgent/emergency situations during Drop in to which they will complete six hours per week on which they and other staff members are responsible for drop-in screenings, and emergency contacts for that day. Within a multiculturally attuned framework, interns will work with clients to assess the nature and immediacy of the urgency/emergency and work with the client to determine what steps need to be taken.

### Outreach

The Counseling Center's Outreach program, led by the Associate Director - Outreach, is an integral part of the UCC's services. Through the outreach program and from the

perspective of cultural humility, the UCC provides wellness workshops and psychoeducational information to students, strengthens its ties with faculty and staff throughout the university community, and ensures that students are well-informed about its services from orientation through graduation. Interns play an important part in the Outreach program. They are expected to plan, deliver, and evaluate workshops and outreach programming. As part of outreach services, interns may engage in Let's Talk, which is drop-in service that offers informal, confidential consultation with a clinician from the University of Pittsburgh Counseling Center. Consultations are typically 10-15 minutes long and are offered on a first come, first-serve basis

**Interns are required to complete at least 30 hours of outreach during internship.**

#### Supervision of Practicum Students

During the fall and spring semesters, interns will have the opportunity to supervise psychology practicum students from doctoral programs in the area. Interns have primary responsibility for individual supervision of practicum students throughout their practicum rotation at the UCC. Interns are supervised by a licensed senior staff member who is a psychologist, as well as by two staff members in Supervision of Supervision seminar. Interns will need to evaluate the practicum student each semester, a copy of this evaluation needs to be uploaded on the practicum's student's file.

## Psychological Assessment

During the academic year, interns will be able to complete psychological assessments. Interns will be supervised by the Associate Director – Training. The UCC provides one type of assessment where we test for ADHD. **Interns are expected to complete no less than three and no more than six assessments and reports per academic year.**

## **Training Components**

### Individual Supervision

Individual supervision consists of two hours per week of clinical supervision throughout internship utilizing a primary or hybrid model of supervision. In the primary model, two hours are provided by a primary supervisor each week. In the hybrid model, one hour is provided by the intern's primary supervisor, a licensed psychologist, and the second hour by a different, delegated staff clinician who is a licensed psychologist. While the primary model of supervision allows continuity and the opportunity to foster a deeper supervisory relationship, the hybrid model allows interns the opportunity to work with supervisors who could have different theoretical orientations and supervisory styles. Generally, at the midway point of internship, interns begin working with new supervisors when availability permits. **Interns are required to present recordings of their sessions to supervisors.**

Supervision models and arrangements are determined by the Training Committee based on various factors including UCC staffing needs; Intern's self-assessment, training goals and needs, and interpersonal style; and the supervisor's professional competencies and interests, supervision style, theoretical orientation, and clinical approach to treatment. Additionally, there may be instances where one Intern is being supervised through the primary model, while another Intern is being supervised through the hybrid model.

In the primary model of supervision, the primary supervisor provides two hours of individual supervision weekly and coordinates the intern's activities at the UCC with the Associate Director - Training. In the hybrid model of supervision, the intern's delegated supervisor provides one hour of individual supervision weekly, collaborates with the primary supervisor and defers overall decisions about the intern's activities and administrative responsibilities to the primary supervisor. Both supervisors provide oral feedback to the intern from written evaluations and comment on the intern's overall performance within the UCC. Lastly, Interns may be expected to maintain a client log at the discretion of their supervisors (individual and rotation) to assist in the supervisory process.

## ***Group Supervision***

### Clinical Skills Seminar

Learning how to effectively obtain and integrate clinical information from the initial interview into meaningful conceptualization and treatment planning is an important part of the internship experience. As part of the Clinical Skills Seminar, interns will be provided with didactic information and experiential discussion regarding the triage and intake appointments, group screenings, and common DSM-5TR diagnostic categories for the college population. Interns will also have intensive training on crisis intervention skills, individual and group therapy. Interns will process their group sessions and roles as co-leaders and discuss group process and administrative issues.

Interns will also be responsible for weekly Drop-in service hours. Interns will also receive training on ethical issues that may arise during crisis intervention and how to collaborate with providers in higher levels of care if intensive outpatient, partial hospital, services, or referral to hospital assessment is required.

### Supervision of Supervision

In Supervision of Supervision, Interns learn the Guidelines for Clinical Supervision in Health Service Psychology, as well as various models of supervision.

Depending on the needs of the intern and practicum student cohorts, interns will supervise one student throughout both semesters, and engage in supervision

with two practicum students, each for one half of the practicum rotation. In Supervision of Supervision, the interns present material from their work with practicum and discuss challenges they might encounter during various aspects of supervision provision.

### Culturally Responsive Care Seminar (CRC)

In CRC, interns have an opportunity to give and receive peer-supervision on cultural aspects of their individual cases. There are opportunities for both self-exploration and case presentations, with a focus on the intersectionality of identities and cultural humility. The goal of CRC is to conceptualize cases from various theoretical perspectives, to consider new ideas regarding intervention decisions, to heighten awareness of therapist reactions and experiences, and to evaluate diversity variables and the intersection of identities. Diversity variables discussed include, but are not limited to, age/generational influences; body type; physical, learning, and other abilities; health/illnesses; race; ethnicity; nationality; culture/heritage including indigenous identities; languages; religion/spirituality, socioeconomic status, education, and vocation; sexual orientation, behaviors and identity; gender identity and expression; military affiliation, as well as relationship orientation. CRC focuses on stages of identity awareness from both majority and minority perspectives and examines the implications these stages of identity development have for therapists and clients through a variety of

activities. Moreover, this seminar provides an opportunity to practice client presentation skills prior to the case presentations that interns are required to present to the staff; as such, this exercise helps interns prepare for clinical case presentations in a professional setting.

### Assessment Seminar

During the hour, interns will learn about the test that they will be administering, how to score and help with interpretation. Test that interns will administer are the WAIS IV, WIAT 4, DKEFS, PAI, CPT – 3, and BRIEF. As well as screeners such as the Beck Depression Inventory (BDI–2), Beck Anxiety Inventory (BAI), The Primary Care PTSD Screen for DSM-5 (PC-PTSD-5) and the Adult ADHD Self-Report Scale (ASRS) – Symptom Checklist. They will also learn about therapeutic assessment model and how to incorporate this into testing at the UCC.

### ***Training Seminars & Meetings***

#### Consultation Teams

There one biweekly consultation meeting, which includes the Wellness Center consultation meeting with psychiatric providers from SHS; and the consultation team meeting that includes all UCC staff who consult about their cases.

These meetings occur on a biweekly basis and provide an opportunity for interns to gain greater awareness of how multidisciplinary staff members work

with clients, to develop skills in informal case presentation, as well as to learn how to seek and provide consultation and feedback.

### Outreach Seminar

This seminar focuses on the theoretical understandings of outreach and its effectiveness within university settings and provides Interns an opportunity to develop outreach programming from a multiculturally affirming perspective with individualized guidance. Interns will learn how to assess needs for program development, as well as to evaluate the efficacy of their outreach interventions.

### **Training Rotations**

Interns will be required to complete two 6-month primary training rotations. Additionally, Interns can choose to complete an optional secondary rotation during the Fall and Spring semesters. Interns will rank their preference of training rotations and will be assigned to them by the Training Committee. The Training Committee will equitably assign training rotations to all Interns to maximize training opportunities during the internship. Primary training rotations should account for at least 25% of all clinical work. While primary rotations vary in nature, most include a mix of individual, relationship (when applicable), and group therapy, outreach consultation, treatment teams, and committees. Based on the assigned rotation, each Intern's responsibilities and schedule will vary

greatly.

If an Intern elects to complete a secondary rotation, their schedules will vary depending on the responsibilities of the rotation. The Training Committee will work with the Intern and their Primary and Rotation Supervisors to determine the allocation of time for completing the rotation. Each rotation (primary and secondary) requires one hour of biweekly individual supervision with a delegated supervisor. Rotation supervisors will include licensed Staff Clinicians in the UCC. For each primary rotation, Interns will be required to complete a presentation on a topic related to the rotation to present to the staff.

### ***Primary Rotations***

#### Psychological Assessment

The psychological assessment rotation focuses on providing evaluations to students who have symptoms related to attention deficit disorder. The intern will screen students who would like to be tested and evaluate if they are appropriate for psychological testing. They will be expected to complete between 4-6 reports during their rotation.

#### Eating Disorders

This rotation will focus on providing counseling services to students with eating and body image concerns through a multidisciplinary and multiculturally attuned approach. Interns will provide individual and/or group therapy to students who seek

counseling services at the UCC and will provide referral services when a higher level of care is warranted. Additionally, Interns will provide outreach services including workshops for students with body image concerns. Moreover, Interns will participate on the Eating Disorder Treatment Team that includes a physician who specializes in the medical management of eating disorders, a registered dietitian with expertise in eating disorders, and clinicians that specialize in the psychological treatment of eating disorders.

### LGBTQIA+ Community

This rotation will focus on providing counseling services to and regarding students in the LGBTQIA+ community through a multidisciplinary approach. Interns will work with students who are exploring intrapersonal and interpersonal aspects of their sexual or gender identity, the coming out process, or how their gender or sexuality intersects with other identities. Interns will also work with students from the LGBTQIA+ community seeking services for other mental health concerns, provided that they fit within the UCC scope of service. Additionally, Interns will participate on the Gender Affirmation Treatment Team that includes a physician that provides transgender health care, as well as clinicians that specialize in providing mental health, physical health, and dietetic treatment for transgender students.

Moreover, Interns will serve as liaisons for the Rainbow Alliance and the Gender & Sexuality Living Learning Community. Lastly, Interns will have an opportunity to

participate in the Allies Network Training that is designed to provide support to LGBTQIA+ students and employees.

### Multicultural Counseling

This rotation will focus on providing counseling services to diverse students that belong to marginalized groups on campus. Interns will prioritize individual and group work with students to address concerns around race, ethnicity, religion, gender, sexuality, SES, varying abilities, and other marginalized identities that lead to experiences of prejudice, discrimination, oppression, racism, and/or violence. Moreover, Interns will participate on the Multicultural Care Team and the Culturally Responsive Care Committee. Lastly, Interns will participate in outreach consultation services in the Office of Belonging and Inclusion and the Global Hub.

### Outreach

This rotation will focus on providing campus outreach to the University of Pittsburgh community including students, staff, and faculty. From a multiculturally attuned perspective, outreach services provide preventative interventions to promote wellness across campus and to connect with students who may not seek out clinical services. Additionally, outreach services may include tabling events to provide information about the UCC or trainings to promote staff and faculty development. Moreover, Interns will have the opportunity to create outreach initiatives that are aligned with their clinical interests and training goals. Lastly, Interns who complete this

rotation will be required to complete an additional 10 hours of outreach that does not include the required 30 hours of outreach for the completion of internship.

### Trauma

This rotation will focus on providing treatment to students who are experiencing psychological trauma. Interns will provide counseling services to students who have experienced acute concerns related to psychological trauma and/or sexual misconduct, (i.e., rape/sexual assault, relationship violence, sexual harassment, and/or stalking) including individual and group therapy. Additionally, Interns will participate on the Trauma Care Team that includes clinicians who specialize in providing psychological treatment for trauma.

### DBT Training Rotation

This rotation will focus on providing a wide range of DBT services to students experiencing emotional dysregulation and skills deficits resulting in maladaptive behaviors that impacts their academic success and overall collegiate experience. Interns will work with students to help them apply and generalize the skills they are learning in therapy to problem solve and effectively cope with difficult situations that arise in their everyday lives. This rotation will consist of a variety of clinical services including individual therapy, individual and group skills training, case management, and DBT skills workshops. Additionally, Interns will participate on the DBT consultation team that supports clinicians who provide clinical services and reviews the implementation and

effectiveness of such services provided to students.

### ***Secondary Rotations***

#### Crisis

This rotation will focus on providing crisis counseling to help students with coping and support during and after a major crisis. Interns will provide multiculturally attuned short-term therapy with a focus on achieving stability and safety and determining appropriate resources and support. While on drop in, Interns will meet with students who present with crisis and urgent concerns. Additionally, Interns will be required to cover an additional shift of drop in during the week. Moreover, Interns will have an opportunity to work with the Campus Crisis Support Team to provide campus-wide support in response to major events that occur on campus; and an opportunity to work closely with the HEART program.

#### UCC Administration

This rotation will focus on gaining administrative experience in a university counseling center. Interns will have an opportunity to work with the Executive Director, Associate Director - Clinical Services and Associate Director - Training to learn about the administrative functions of a counseling center. Moreover, Interns will have an opportunity to participate in UCC committees and workgroups including Policy &

Procedures, Digital Presence & Marketing, and the Innovation Team, among others.

### Behavioral Health Consultant

This rotation will focus on providing consultation services for the Wellness Center. In collaboration with the Associate Director - Clinical Services, Interns will provide consultation services and help coordinate care for students who are receiving services from Student Health Services (SHS). Additionally, Interns will participate in various multidisciplinary treatment teams including, the Eating Disorder Treatment Team, and the Gender Affirmation Treatment Team. Moreover, Interns will participate in the Collegiate Recovery Program, which provides a safe, nurturing, and affirming environment where students in recovery from substance use can receive the assistance and support, they need to achieve academic success and personal goals while in college. Lastly, Interns will provide Let's Talk consultation services for SHS.

### **Additional Intern Activities**

#### Staff Meeting

The staff meeting, led by the Executive Director of the UCC or Designee, is an important part of the training experience. Interns regularly attend staff meetings, which include an update on the various functions of the UCC. During this meeting, Interns have the opportunity to participate in the administrative functioning of a university counseling center. Interns are encouraged to feel empowered to share their

ideas, current perspectives, and valuable past experiences.

### Record Keeping

Interns are expected to keep current with their clinical documentation in order to provide ethical treatment and to keep their supervisors informed of their clients' progress. Interns are provided one hour each day for clinical notes.

### Preparation Time for Seminars, Outreach Projects, etc.

On occasion, interns will need to set aside additional administrative time to work on seminar or consultation and outreach projects. These projects will be assigned in advance so that interns can integrate this preparation time into the rest of their schedule.

### Presentations

Interns will be required to complete three professional presentations during the internship year to present to staff. These include a case conceptualization presentation (which will be planned and organized in CRC), and two presentations on topics related to the intern's primary rotations (which will be planned and organized with rotation supervisors).

**SECTION III INTERNS' RIGHTS & RESPONSIBILITIES,  
SUPERVISORS'/TRAINERS' RESPONSIBILITIES, EVALUATION  
PHILOSOPHY & PROCEDURES, DUE PROCESS AND GRIEVANCE  
PROCEDURES**

Introduction

The psychology internship is designed to be the most intensive clinical training experience in a doctoral student's career. Interns have the privilege of working in a setting that affords many opportunities. They have full opportunity to promote the welfare of clients, the public, the UCC, and the profession. They have opportunities to further their professional and personal growth, to acquire new areas of skill, and to remediate areas of practice where further growth and support is needed.

Upon successful completion of the internship, the UCC confers a certificate on each intern. This certificate indicates endorsement that this intern has acquired the knowledge and skills required for beginning competent independent practice, and that this intern is capable of exercising the rights and responsibilities of a practicing psychologist. The intern is often at the last point when professional functioning is not yet autonomous; consequently, the profession (and thus the training site) is expected to be mindful about endorsing intern readiness for independent practice. Thus, the training site has a special responsibility to continually assess and provide feedback on the progress of each intern. This document will therefore discuss:

- (1) Interns' Rights
- (2) Interns' Responsibilities

(3) Supervisors'/Trainers' Responsibilities

(4) Evaluation--ongoing feedback to the intern

(5) Due Process, Intern Problems/Concerns, Intervention Procedures

(6) Intern Grievance

#### Procedures Interns' Rights

1. The right to a clear statement of general rights and responsibilities upon entry into the internship, including a clear statement of goals and parameters of the training experience.
2. The right to be trained by professionals who behave in accordance within their profession's ethical guidelines.
3. The right to be treated with professional respect, recognizing the training and experience each intern brings with them.
4. The right to constructive ongoing evaluation by supervisors and all senior staff who are involved in training.
5. The right to be informed in a timely manner of any major concerns by members of the Training Committee about performance in any competency area.
6. The right to engage in an ongoing evaluation of all aspects of the training experience.
7. The right to initiate:

- a. informal discussion and resolution of problems that might arise in the training experience (supervision assignments, etc.) through request to the individual concerned and/or to the Associate Director - Training and/or;
  - b. complaint procedures for conflict-based problems in accordance with the procedures set forth in Section III.G of this document.
8. The right to due process to deal with problems after informal resolution or complaint procedures have failed, as well as to determine when rights have been infringed upon.
9. The right to privacy and respect of one's personal life and sociocultural identities. Disclosure of personal information is voluntary except when it is reasonable to judge that personal issues are significantly interfering with an intern's professional functioning. Even if this is deemed to be the case, disclosure is limited to areas directly affecting the intern's functioning.

### Interns' Responsibilities

As noted in section II, interns are expected to achieve minimum levels of competencies in the following nine profession-wide competency areas to successfully complete the internship:

- 1) Research

- 2) Ethical and Legal Standards
- 3) Individual and Cultural Diversity
- 4) Professional Values and Attitudes
- 5) Communication and Interpersonal Skills
- 6) Assessment
- 7) Intervention
- 8) Supervision
- 9) Consultation and Interprofessional/Interdisciplinary Skills

To achieve these goals, interns' responsibilities are as follows:

1. The intern is expected to accurately assess their skill level and cooperatively determine appropriate goals for training with supervisors.
2. The intern is expected to be aware of areas for growth and improvement and to seek appropriate supervision when practicing in those areas.
3. The intern is expected to maintain openness to learning and to grow in skills and knowledge over the course of the internship.
4. Throughout the internship year, interns are expected to develop and demonstrate professional skills and attributes as psychologists that apply in all domains of service delivery and training. These include the goals, objectives, and competencies of the training program as referenced in Section II of this document.

5. Interns' specific ethical and other professional responsibilities include:
- (a) Practicing within the bounds of the APA Ethical Principles of Psychologists and Specialty Guidelines for the Delivery of Services. The code and the guidelines can be found on the APA website. Violations of the APA Code and the guidelines include, but are not limited to: sexual harassment, sexual contact with clients and/or supervisors/supervisees, violation of confidentiality, practicing outside competency areas without supervision, and infringement on the rights, privileges, and responsibilities of clients, Interns, and staff of the Center.
  - (b) Practicing within the bounds of the laws and regulations of the Commonwealth of Pennsylvania as set out in the Pennsylvania Professional Psychologist Practice Act (See Pennsylvania Board of Psychology website.)
  - (c) Practicing in a manner that conforms to general professional standards. Examples of unacceptable conduct include, but are not limited to: theft, intoxication on the job, dishonesty, assault, use or possession of illegal drugs, unexcused absences, and failure to comply with University rules.
  - (d) Being cognizant of adhering to UCC policies and procedures, such as:
    - Read and discuss the Training Manual during orientation
    - Read and discuss the UCC Policies and Procedures Manual during orientation

- Maintain professional records as required
  - Be punctual, account for absences, meet obligations to client and staff members
  - Contribute to the effective functioning of the agency within the scope of training responsibilities
- (e) Conducting oneself professionally. For example:
- Be aware of own impact on others. Maintain appropriate interactions with clients, peers, colleagues, staff, Interns, etc.
  - Make appropriate use of supervision (e.g., be on time and be prepared to take full advantage of learning opportunities, as well as maintain openness to learning and be able to accept and use feedback)
  - Actively participate in training seminars and other activities of the UCC
  - Balance agency needs with one's own needs. Manage personal stress and monitor potential over-commitments in order to maintain a sense of well-being
  - Use appropriate channels of communication when issues arise with staff or the Training Program, to be outlined below.

6. Interns also have the responsibility to give constructive feedback to their supervisors and trainers as well as the Associate Director - Training throughout

the year through individual and group meetings. Each intern is given the opportunity to provide input and suggest changes and modifications regarding the program. In July, when most seminars and group supervision sessions have been completed, interns are asked to give anonymous written feedback about the strengths and limitations of these components to assist the training committee in planning for the following year. At the middle and end of the internship, interns are asked to give written feedback concerning the supervisors of their clinical training.

7. In the area of personal functioning, the UCC recognizes that stressors are inherent in the transition from graduate school to an internship setting. Interns are expected to be sensitive to the possibility of professional interference due to adjustment problems and emotional responses. They are expected to accept feedback and seek professional help if necessary. During orientation, interns are informed of their excellent mental health benefits and are invited to ask any staff members for recommendations for therapists in the community.

#### Supervisors' and Trainers' Responsibilities

1. Provide interns with supervision and training that is based on current professional literature and is multiculturally attuned.
2. Establish a caring, supportive, and safe environment in which interns can discuss issues that arise in response to their work with clients, within the supervisory

relationship and with others.

3. View client video recordings and provide constructive and specific feedback in supervision sessions and/or in written form to supervisees.
4. Read supervisees' case notes regularly and provide constructive feedback on those notes, signing off in a timely manner.
5. Communicate with other supervisors and training staff about supervisees' progress in areas in addition to your training responsibilities
6. Write complete evaluations that include interns' strengths, areas in need of improvement or growth edges, ability to receive feedback and use it constructively, and issues addressed in your supervision or training. Use specific examples whenever possible in your evaluations.
7. Model professional and ethical practice for interns.
8. Adhere to the policies and procedures outlined in the UCC's Supervisor Manual

### Evaluation--Ongoing Feedback to the Intern

#### *Philosophy of Evaluation*

Training is an important process by which interns develop professional, personal and interpersonal skills to become psychologists. Interns are expected to progress toward attainment of the competencies outlined in Section II of this manual. In addition to the responsibility to provide feedback to students, trainers have monitoring responsibility to the profession and the public. This section discusses this necessary

process of ongoing, formative feedback.

### *Evaluation Procedures*

Evaluation is a continued, ongoing process with both informal and formal elements. The expectation of the Training Committee is that all staff who agree to provide training and supervision make a commitment to provide detailed oral and written feedback to interns and to other supervisors as appropriate. All trainers, including supervisors of individual counseling work, training rotation supervisors, group co-facilitators, seminar leaders, and outreach co-facilitators provide ongoing feedback to interns both individually and as a group. The interns will have two hours weekly of clinical individual supervision where they will be given informal verbal feedback on their performance throughout the year. It is anticipated that at least a fourth of this time will be spent reviewing recordings of the intern's clinical work. The training program check-in meeting, led by members of the training committee, is held regularly to support the interns' supervisors and other staff involved in training throughout the year. The primary supervisor relays information from these meetings as appropriate to support their supervisees. If the intern is struggling in any area, the intern and primary supervisor discuss concerns and decide on a plan for growth and direction. If problems persist, members of the Training Committee will be consulted with to provide guidance and future directions to support the Intern.

At the midway point and conclusion of the internship, interns receive written feedback from their individual clinical supervisors, and from seminar and group

supervision leaders. Group co-facilitators provide written feedback at the conclusion of group each semester (Fall, Spring, and Summer). A written progress report is submitted to the intern's graduate program with the option of submitting copies of all evaluations at the midway point and conclusion of internship. If an intern and a supervisor disagree on any written evaluation, the intern may submit additional comments that are then placed in the intern file along with the evaluation.

#### Due Process, Intern Problems/Concerns, Intervention Procedures

Interns work under the supervision of licensed staff clinicians. Their performance is evaluated, and they are provided with feedback at planned intervals during their tenure at the UCC. Due process ensures that decisions made regarding interns are not arbitrary or personally biased. Specific evaluative procedures are applied to all interns. Appropriate appeal procedures are available to interns so that they may challenge the program's action.

This section describes general guidelines for due process at the UCC, the program's definition of "Learning Need," interns "Not Meeting Performance Standards," procedures for intervention, and the levels of appeal that are available to interns if they disagree with or have questions about evaluations or decisions made by their supervisors and evaluators.

#### *Due Process*

Due process at the Counseling Center includes:

1. Presenting the interns with the program's expectations related to professional functioning in written form (please refer to Goals and Objectives, Section II of Intern Manual).
2. Stipulating the procedures for evaluation, including when and how evaluations will be conducted (please refer to Evaluation Philosophy and Procedures in this document above).
3. Articulating the various procedures and actions involved in making decisions regarding interns not meeting performance standards (please refer to Due Process and Grievance Procedures in this document below; see definition of "Not Meeting Performance Standards" below).
4. Communicating with graduate programs about any identified occurrences that represent significant "Learning Needs" and seeking input from those academic programs as to how to address such difficulties (please refer to definition of "Learning Needs" below).

5. Communicating promptly in writing with graduate programs about any instance of an intern not meeting performance standards in accordance with the procedures set forth below.
6. Instituting, with the input and knowledge of the graduate program, a remedial plan for identified unmet performance standards, including a time frame for expected remediation and consequences of not rectifying the unmet performance standards in accordance with the procedures set forth below.
7. Ensuring that the appropriate person(s)/group(s) meet with the intern to discuss the unmet performance standards, the remedial plan to be instituted, the timing and procedures involved in the remedial plan, and the consequences of not rectifying the unmet performance standards. This would include as a minimum the Assistant Director - Training and the intern's primary clinical supervisor.
8. Providing the intern with a procedure for appealing the program's action (see Grievance Procedure in this document below).
9. Ensuring that the intern has sufficient time to respond to any action taken by the program.
10. Using input from multiple professional sources including but not limited to Training Committee members and UCC administrators when making decisions or recommendations regarding the intern's performance of the remedial plan.
11. Communicating to all relevant parties, both verbally and in writing, the final action taken by the program and its rationale for that action.

### *Definitions of "Learning Need" and "Not Meeting Performance Standards"*

For the purposes of this document a **"Learning Need"** is defined as:

- A competency, behavior, and/or a characteristic that is identified as an important area for growth, focused learning, or remediation.
- This need is developmentally expected for a professional at this stage in training.
- An intern who does not maintain a '3' average on a scale from 1-5 on each item of any of their midyear written evaluations and a "4" average on final evaluation may at the discretion of the Associate Director - Training and the Training Committee be deemed to be experiencing a "learning need" or to be "not meeting performance standards" based on the criteria listed in this document.

For the purpose of this document, **"Not Meeting Performance Standards"** is defined broadly as an interference in an intern's professional functioning that is manifested in one or more of the following ways:

- Professional Standards: An inability and/or unwillingness to acquire and integrate professional standards into one's repertoire of professional behavior. This would include negligent, unethical, or unprofessional conduct. Any intern who knowingly and intentionally violates ethical and legal guidelines governing the practice of psychology is not meeting performance standards and may be subject to termination and/or failure of the training program. Likewise, failure to abide by University rules and policies, if of a serious nature, will be deemed as not meeting

performance standards, **which** may also lead to termination and/or failure of the training program. Consultation with members of the Training Committee would occur about next steps.

- Operating with appropriate skills: an inability to acquire sufficient clinical skills to reach an acceptable level of competency in the skill areas outlined as internship Goals and Objectives (see Section II of the Intern Manual).
- Personal Functioning: An inability to address personal stress, psychological difficulties, and/or strong emotional reactions such that they substantially interfere with professional functioning.
- A "Learning Need" typically becomes identified as "Not Meeting Performance Standards" when the situation includes one or more of the following characteristics:
  - The quality of services delivered by the intern is significantly compromised by the problem.
  - The intern does not comprehend, acknowledge, or address the problem once it has been identified.
  - The problem reflects a skill deficit that cannot be rectified by academic or didactic training.
  - The problem affects multiple areas of clinical or professional functioning.
  - A disproportionate amount of attention by training personnel is required because of the problem.

- The intern's behavior does not change as a function of feedback, remedial attention, and/or time.
- Assessment of these criteria may be made at any time during the training period and is incorporated into mid-semester and end-of-semester evaluations.

#### *Procedures for Responding to an Intern Experiencing a Learning Need*

At any point in the year, Training Committee members may identify an aspect of an intern's performance as a learning need. The same designation may also be made during the aforementioned verbal or written evaluation periods. In either case, the Associate Director - Training and Primary Clinical Supervisor in conjunction with other Training Committee members will meet to discuss and agree upon an appropriate response to the intern's learning need. This includes but is not limited to improvement plans and/or additional consultation or supervision.

#### *Procedures for Responding to an Intern Not Meeting Performance Standards*

At any time during the year, the Training Committee may designate some aspect(s) of an intern's performance as "Not Meeting Performance Standards." The same designation may also be made during the aforementioned verbal or written evaluation periods. In either case, the following procedures will be initiated:

1. A Review Committee will be formed, chaired by the Associate Director - Training or by a chair selected by the UCC Executive Director if deemed that the Associate Director - Training has an interfering dual relationship with or personal bias

regarding the intern. The Chair will appoint two Training Committee members to the Review Committee, taking into consideration the need to minimize dual relationships or the possibility/perception of unacceptable personal bias. The intern will select one member from the UCC licensed staff to be part of the review.

2. The intern will be notified, in writing, that such a review is occurring, and the Review Committee will request information and/or a statement from the intern in response to designated unmet performance standards.
3. In discussing the unmet performance standards and the intern's statement, the Review Committee may adopt any one or more of the following measures or may take any other appropriate action, referred to as the "Initial Review Committee Decision."

It may:

- a. determine that the criteria of not meeting performance standards have not been met and consequently does not warrant further action or
- b. issue an "Acknowledgement Notice", which formally acknowledges that:
  - i. the Review Committee concurs with the designation of not meeting performance standards,
  - ii. the unmet performance standards have been brought to the attention of the intern,
  - iii. the Review Committee will work with the intern to rectify the problem(s) addressed by the unmet performance standards and will establish a time frame

for this rectification, or

- c. issue a "Probation Statement" indicating that the Review Committee will actively and systematically monitor for a specific length of time the degree to which the intern addresses, changes, and/or otherwise improves the behavior associated with the unmet performance standards. The Probation Statement is a written statement to the intern which includes:

- 1) a description of the behaviors associated with the unmet performance standards
- 2) the specific recommendations for rectifying the problem,
- 3) the time frame for the probation during which the problem is expected to be ameliorated, and
- 4) the procedures designed to ascertain whether the problem has been appropriately rectified, or

**Note:** *Means of addressing the identified behaviors are listed below in the Remediation Options section*

- 5) recommend to the Executive Director of the UCC that the Executive Director terminate the intern's participation in the training program. The Executive Director of the UCC will have discretion as to whether or not to issue a "Termination Statement," terminating the intern's participation in the Training Program. If the Executive Director determines not to issue a Termination

Statement, the Executive Director will consult with the Review Committee to arrive at an appropriate Probation Statement. The Executive Director of the UCC, in consultation with Student Affairs administration, will have final discretion regarding intern termination.

4. If a Probation Statement is issued (3c above), the Chair of the Review Committee will meet with the intern to review the probationary conditions. The intern may also request to meet with the Review Committee. The intern may choose to accept the conditions of the Probation Statement or may choose to challenge the Review Committee's action and Probation Statement. An Acknowledgement Notice may also be challenged. The procedures for challenging the action are presented in Section D: Intern Grievance Procedures.
5. If a Probation Statement is issued, the Associate Director - Training will inform the intern's sponsoring university, indicating the nature of the unmet performance standards, the rationale for Review Committee action and the specific action taken by the Review Committee. The intern shall receive a copy of the letter to the sponsoring university. If an Acknowledgement Notice is issued, the graduate program will also be informed if deemed appropriate.
6. If the Acknowledgement Notice or Probation Statement is not challenged, it is expected that the status of the unmet performance standards will be reviewed no later than the time limits identified in the Acknowledgement Notice or Probation

Statement.

7. If the unmet performance standards have been rectified to the satisfaction of the Review Committee, the intern, the sponsoring university, and other appropriate individuals will be informed in writing and no further action will be taken.
8. If the Review Committee determines that there has not been sufficient improvement of the unmet performance standards under the conditions stipulated in the Probation Statement, the Review Committee may adopt any one of the following measures:
  - a. Issue an extension of the probation for a specified time period, whereupon the Review Committee will once again determine if sufficient improvement in the intern's behavior has rectified the unmet performance standards.
  - b. Issue a suspension whereby the intern is not allowed to continue engaging in certain professional activities until there is evidence that the behavior in question has sufficiently improved.
  - c. Recommend to the Executive Director of the UCC that the intern's participation be immediately terminated.
9. Within three working days of the Review Committee's decision per item 8 above, the Review Committee will communicate in writing to the intern, the Associate Director - Training and the Executive Director of the UCC that the conditions for revoking the probation have not been met. The decision to

implement one of the three options listed under item 8 above is contained in that letter.

10. Within five working days of receipt of letter containing the Review Committee's determination and proposed course of action, the intern may respond to the Review Committee's action by a) accepting the determination and/or action or b) challenging the determination and/or action (see Section D: Intern Grievance Procedures).

11. Once the intern has made a decision under item 10 above, the intern, sponsoring university, Executive Director of the UCC and other appropriate individuals are informed in writing by the Review Committee of the action taken by the Review Committee and intern's response to such action.

\* All documents related to the processes outlined above will be kept within the intern's training file.

### *Remediation Options*

It is important to have meaningful ways to address "not meeting performance standards" once this determination has been made. Regardless of the recommendations, they will be documented and kept within the intern's training file.

Several possible and perhaps concurrent courses of action designed to remediate such problems include, but are not limited to:

1. increasing supervision, either with the same or other supervisors;

2. changing the format, emphasis, and/or focus of supervision;
3. recommending personal therapy and/or psychological assessment with all parties involved having clarified the manner in which therapy or assessment contacts will be used in the intern evaluation process;
4. reducing the intern's clinical or other workload and/or requiring specific academic course work or other forms of training; and/or
5. recommending, when appropriate, a leave of absence and/or further training experiences

Intern Grievance Procedures in connection with Intern "Not Meeting Performance Standards"

1. Interns can institute formal grievance procedures in order to: a) challenge an Initial Review Committee Decision, b) challenge an initial decision of the UCC Executive Director or c) challenge consequent Review Committee decision(s).
2. If an intern wishes to challenge the Initial Review Committee Decision or an initial decision by the UCC Executive Director, they must, within five working days of receipt of the decision, provide the Chair of the Review Committee their formal grievance in writing and explain the grounds for the challenge.
3. The Chair of the Review Committee will convene a Grievance Panel consisting of two staff members selected by the Chair of the Review Committee and two selected by the intern. Any staff members who are complainants will not sit on the Grievance

Panel. The UCC Executive Director, who has final decision-making authority, will not sit on the Grievance Panel. The intern retains the right to hear all facts with the opportunity to dispute and/or explain their behavior.

4. A grievance hearing is conducted, chaired by the Chair of the Review Committee, in which the challenge is heard. Within five working days of the completion of the review hearing, the Grievance Panel submits a report to the Executive Director of the UCC, including any recommendations for further action. Recommendations to the Executive Director are determined by majority vote of the Grievance Panel.
5. Within five working days of receipt of the recommendation of the Grievance Panel, the Executive Director of the UCC, in consultation with Student Affairs administration, accepts the Grievance Panel's action, rejects the Grievance Panel's action and provides an alternative, or refers the matter back to the Grievance Panel for further deliberation. In the latter case, the Grievance Panel then reports back to the Executive Director within ten working days of the receipt of the Executive Director's request for further deliberation. The Executive Director then makes a final decision regarding what action is to be taken with similar consultation as noted above.
6. Once a decision has been made, the intern, sponsoring university and other appropriate individuals are informed in writing of the decision and subsequent action taken.

7. If the intern wishes to challenge the final decision of the Executive Director, the intern must within five working days of receipt of the Executive Director's final decision, file a petition in writing with the Vice Provost and Dean of Students of the University informing them of the situation and the grounds for challenge. The Vice Provost and Dean of Students will have discretion on the handling of such a challenge; confidentiality of any clinical related material will be maintained.
8. The UCC will maintain a confidential and de-identified log of all formal intern complaints and grievances filed against the UCC, training staff members of the UCC or other individuals associated with the UCC and/or the Training Program. The Associate Director- Training will also maintain complete documentation of all such formal intern complaints and grievances in a locked cabinet in the office of the Associate Director - Training. The Associate Director - Training will also maintain copies of such documentation in the intern's internship file that resides in a locked cabinet to which only the Associate Director - Training has access.

#### Intern Complaint Procedures for Conflict-based Situations

In order to protect the needs and rights of all interns, a complaint procedure has been developed. While it is hoped that any concerns or complaints can be discussed and resolved informally, a formal mechanism is appropriate considering the power differential between interns and supervisors. Interns should also refer to the [Staff Handbook: Employee Relations Procedures and Guidelines | Human Resources |](#)

[University of Pittsburgh.](#)

In general, interns and supervisors are encouraged to speak openly to facilitate a congenial learning environment that fits the needs and interests of the interns. Interns are encouraged to give feedback to staff members/supervisors or the Associate Director - Training. Procedures covered in this document may be initiated in the following situations:

- Conflict with Another Intern:
  - Level 1: Make an attempt to work through conflict with the other intern.
  - Level 2: Bring matter to the attention of the intern's Primary Supervisor who will intervene as appropriate.
  - Level 3: Intern(s) and/or clinical supervisor(s) bring matter to the Associate Director - Training who will intervene as appropriate.
  - Level 4: Matter is brought to the Executive Director
  
- Conflict with an Administrative Staff Member:
  - Level 1: Make attempt to work through conflict with Administrative Staff member.
  - Level 2: Bring matter to the attention of the intern's Primary Clinical Supervisor.
  - Level 3: Matter is brought to the Associate Director - Training.
  - Level 4: Matter is brought to the Executive Director.
  
- Conflict with Non-Supervising Senior Staff:
  - Level 1: Make an attempt to work through conflict with the Senior Staff member.

Level 2: Bring matter to the attention of the intern's Primary Clinical Supervisor.

Level 3: Intern and supervisor bring matter to the Associate Director - Training.

Level 4: Matter is brought to the Executive Director.

- Conflict with Clinical Supervisor:

Level 1: Make an attempt to work through conflict with supervisor.

Level 2: Matter is brought to Associate Director - Training.

Level 3: Matter is brought to the Executive Director

- Conflict with the Associate Director - Training:

Level 1: Make an attempt to work through conflict with Associate Director - Training.

Level 2: Bring matter to the attention of the intern's Primary Clinical Supervisor.

Level 3: Intern and supervisor attempt to work through conflict with Associate Director - Training.

Level 4: Matter is brought to the Executive Director

- Conflict with Executive Director:

Level 1: Make an attempt to work through conflict with Executive Director.

Level 2: Bring matter to the attention of the intern's Primary Supervisor, who will intervene as appropriate.

Level 3: Intern and supervisor bring matter to the attention of Associate Director - Training, who will intervene as appropriate.

## SECTION IV POLICES & PROCEDURES

### Introduction

Interns will be required to adhere to all of the guidelines outlined in the UCC's [P&P 2022-23.pdf](#). Therefore, Interns are required to read the entire P&P manual during their orientation. A few policies and procedures specific to interns are outlined below.

### Telehealth

Interns should adhere to all telehealth guidelines outlined in the UCC's Policy & Procedures manual. Additionally, Interns are expected to maintain professionalism when engaging in telehealth and should be mindful of the following: 1) maintaining confidentiality at all times in all settings; 2) being present and engaged in all settings which includes: a) being on time; b) having your camera on, and c) not in the background; 3) adhering to the UCC's dress code; 4) while food and non-alcoholic beverages are permissible during non-clinical activities, they should not be distracting; 5) having a protected workspace with minimal distractions; 6) finding coverage for training responsibilities as needed (e.g., drop in, workshops, etc.); 7) being logged on and available during your scheduled work hours (including admin time); and 8) contacting appropriate staff via email/text/phone if experiencing connectivity issues that interfere with scheduled appointments. Please consult with your supervisor and/or appropriate staff members if there are any exceptions needed to these telehealth expectations.

### Requesting a Change in the Supervisory Relationship

If a supervisor and/or supervisee experience conflict in the supervisory relationship, they are encouraged to follow the guidelines outlined in the section: “Intern Complaint Procedures for Conflict-based Situations” which encourages them to work through the conflict together. If this is not attainable, the matter is then brought to the Associate Director – Training unless the person in this role is the supervisor with whom there is conflict; in that instance, the consultation would occur the Executive Director. As noted in the guidelines, if an informal resolution is not possible, a formal resolution procedure will be initiated, which may include a change of supervisors. If it is determined that a change in supervisors is in the best interest of the supervisor and/or supervisee, the Associate Director – Training or Executive Director if the Associate Director -Training is the supervisor in conflict - will consult with the Training Committee to make the final recommendations on a formal resolution of the conflict and all parties will be notified of the outcome.

### Dual Relationships

This policy provides guidelines and specific examples of appropriate behaviors between staff and trainees and respecting the professional boundaries between staff and trainees. It cannot include all possible scenarios. Therefore, staff members and trainees are expected to practice ethical decision-making, including consultation with colleagues when necessary. The best interest of the trainee and the UCC are the top priority in

making decisions about such relationships.

1. Contact between staff and trainees are restricted to interactions at work and at officially sanctioned work-related social gatherings.
  - a. Trainees can be invited to work-related social gatherings, both at the office and at a staff member's home (e.g., beginning of the year gathering, holiday gathering, etc.).
  - b. Staff should not socialize with trainees outside of the office, outside of the purview of (a) (e.g., trainees should not be invited to non-work-related dinners or outings).
  - c. If one trainee is to be invited to an event, all trainees must be invited.
2. The rationale underlying this policy is rooted in protecting the trainee's professional integrity and includes the following assumptions:
  - a. ALL staff members are in a formal, or informal, supervisory role with the trainees. Healthy boundaries must be clearly maintained and modeled by professional staff members.
  - b. Trainees may feel pressure to accept invitations made by staff members and/or feel guilt, shame, or left out if they cannot, or do not wish to, attend, or are not invited. The Associate Director – Training will explicitly discuss with trainees during orientation that staff members will not invite them to social events on a regular basis.

## Dress Code

The dress code policy is determined by the Division of Student Affairs. The policy can be found here: [Student Affairs Dress Code.pdf](#)

Enforcement of Dress Code: Staff should consult the UCC Director, or designee, if they have questions or concerns about what is considered appropriate attire. Employees who report to work inappropriately dressed may be asked to leave work to change clothes and will be required to use personal time or vacation time to do so.

*\*If, for any reason, an employee requires a permanent medical exception to the dress code, the employee should contact the Office of Disability Resources and Services and follow the appropriate procedures. Employees whose religious beliefs preclude them from following the dress code should first discuss a reasonable accommodation with the UCC Director, or designee, or contact Human Resources.*

## Accommodations Due to Disability

If the intern is in need of accommodations due to a temporary or permanent medical diagnosis, they shall contact the Office of Disability and Resources and Services

[Workplace Accommodations for Employees | Office for Equity, Diversity, and Inclusion | University of Pittsburgh](#), and follow appropriate procedures.

## Client Evaluation of Services

Periodically, the front desk staff sends out electronic surveys to students to

gather their feedback about and satisfaction with UCC services. Interns will be provided with feedback about their performance from clients during the year; this feedback will be reviewed with their primary and/or delegated supervisor.

### Record Keeping and Confidentiality

All case records at the UCC are to be handled so that the confidentiality of our clients is assured. Interns' documentation is recorded on Titanium, the UCC's electronic scheduling system. **Under no circumstances should any notes, files, or electronic storage devices with client information be taken out of this office.**

It is important that interns complete their notes in a timely manner to ensure optimal client care. It is expected that:

1. Intake forms/progress notes/group screens/etc. need to be completed/forwarded to the supervisor within 72 hours of the appointment. If there needs to be an exception to this, please consult with Primary Supervisor.
2. Emergency/Urgent/Crisis notes need to be completed/forwarded to the supervisor by the end of the day that the appointment took place.

### Intern Records

The Pitt UCC maintains records of interns' application materials, applicant rating forms, interview materials, hiring correspondence, training experiences and evaluations, correspondence with interns' academic institutions, certificates of completion, and

related documentation; as well as records of formal complaints and grievances filed against the training program. These records are maintained electronically in two places on a secured drive.

### Use of the Webcam

Interns are expected to video record sessions using the webcam for in-person sessions and for telemental health sessions. The number of video recordings will be determined by the supervisor based on Intern goals, performance, and training needs as appropriate. As with written case records, utmost care must be used in handling these webcam files; they may only be stored on the V: drive. When interns are working remotely in a telehealth format, they are to connect to the V: drive in a secure manner to save recordings. Be sure to review client consent forms prior to recording sessions. If a client has not consented to being recorded, they cannot have their sessions recorded. However, if a client initially declines on the consent but later agrees, update the consent form and document it in their files. Also, remind them that your supervisor/s (identify them by name) may view the video to give you feedback on your therapeutic approach.

### Viewing a Session and Setting Permissions for Supervisor Viewing

1. Rename your video using the client's initials followed by the supervisor's initials.

Example: If you saw Student A and the supervisor was Clinician B, you would name the file: SACB. For confidentiality reasons, **never use client's full names in naming your video.**

2. By placing a video in the folder with your name on the "shared" video drive, your supervisor will be able to locate and view your video.
3. On a biweekly basis, erase **every** session that had been recorded for a supervisor unless you need it for a specific training requirement. There is limited space on your computer and the server to save these very large files. If you get too many you and other interns will no longer be able to record your sessions properly and you will also not be able to delete or alter any sessions already on your drive.

### Reporting Computer Problems

Report problems with your webcam or computer immediately to the IT Help Desk via email or their website [Request Form - Technology Help Request \(pitt.edu\)](#). Also immediately let your primary supervisor know if you have any issues with software or hardware.

### Administrative Support Staff

While Interns will be required to maintain their own schedules, Front Desk staff can assist in scheduling/rescheduling if necessary. During orientation the Front Desk staff will meet with interns to explain office practices and front desk protocols in detail.

### Copy/Scan/Fax Machine

The photocopy machine may be used for work purposes only (i.e., forms, handouts for groups, etc.). Please do not leave confidential material at the copy/scan/fax machine.

## Counseling Center Resources

The center is equipped with multiple DSM-5TR and CAMS Suicide Prevention Manual for use during internship. Additional resources can be accessed through the Pitt Library or our own internal resource library.

## **SECTION V INTERN EVALUATION FORMS**

During orientation, Interns will be given copies and thoroughly review the following forms:

### Supervision Evaluations

1. Intern Evaluation for Individual Supervision – completed by Primary and Delegated Supervisors
2. Intern Evaluation for Clinical Skills Seminar – completed by Seminar Leaders
3. Intern Evaluation for Supervision of Supervision – completed by Seminar Leaders
4. Intern Evaluation for Culturally Responsive Care Seminar – completed by Seminar Leaders
5. Intern Evaluations for Group Therapy Co-Facilitating – completed by Group Co-Facilitator(s)

### Seminar Evaluations

6. Outreach Seminar - completed by Associate Director – Outreach
7. Professional Practice Seminar – not evaluated Presentation Evaluations - completed by all Senior staff in attendance
8. Multicultural Case Conceptualization Presentation
9. Rotation Presentation/s

### Evaluations Completed by Interns

10. Evaluation of Seminars, Program & Associate Director - Training
11. Evaluation of Primary and Delegated Supervisors