



FRONTIER HEALTH SERVICES

DOCTORAL INTERNSHIP

IN PSYCHOLOGY

APPIC Member Since 2011

APA-Accredited Since 2016

INTERN HANDBOOK/TRAINING MANUAL

2017 – 2018

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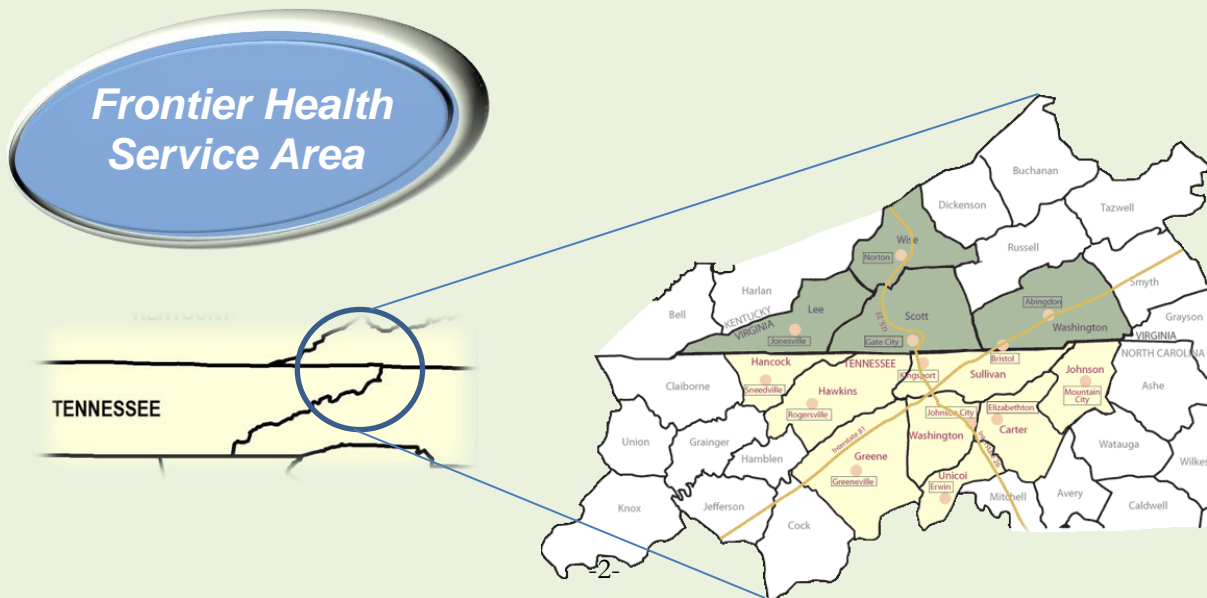
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INTRODUCTION

This Intern Training Manual provides information regarding the structure of the internship program and the main policies and procedures that guide the daily operation of the training program. Frontier Health Services Doctoral Internship in Psychology (FHSDIP) maintains general policies that relate specifically to the activities of FHSDIP. For policies that pertain to the Frontier Health organization in general, please see the Human Resources/Personnel handbook, which can be requested from Frontier Health Human Resources at 423.467.3605 or accessed via Frontier Health's intranet at <http://www.frontierhealth.org/documents/store/employee-handbook.pdf>. If you have questions regarding an issue that is not specifically addressed in this manual, please feel free to contact the Training Director for assistance.

ACCREDITATION STATUS

FHSDIP received APA accreditation following a site visit in December of 2016. The initial length of the accreditation is seven years from the date of the site visit. Questions related to the program's accreditation status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington, DC 20002
Phone: (202) 336-5979
Email: apaaccred@apa.org

FHSDIP has been a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) since 2011.

FHSDIP STAFF DIRECTORY

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Primary Supervisor, TN	Licensed in IL since 2013, TN since 2014 (423) 727-2100 pvisser@frontierhealth.org
Primary Supervisor, VA	Farah Williams, Ph.D. Licensed in VA since 2009 (276) 225-1241 fwilliam@frontierhealth.org
Human Resources Director	Scott Knowlton, MHRM (423) 467-3610 sknowlto@frontierhealth.org

PROGRAM DESCRIPTION

Frontier Health Services Doctoral Internship in Psychology (FHSDIP) is designed to provide training in a wide range of clinical skills and experiences essential to the practice of professional psychology. FHSDIP is housed within the Frontier Health organization.

Internship positions are twelve month appointments beginning on or near August 1st of each year. Interns are expected to complete 2,000 hours of training during this period. This includes time for supervision, training, and research. Interns spend approximately 20 hours of their time per week in direct face-to-face client contact. The training program consists of three doctoral level internships in clinical psychology divided between two tracks: an Adult Track with one position and a Child & Adolescent Track with two positions.

Description of Founding Organization: Frontier Health is the leading provider of behavioral health, mental health, substance abuse, co-occurring, intellectual and developmental disabilities, recovery, and vocational rehabilitation services throughout the Northeast Tennessee and Southwest Virginia region. Frontier Health has been operating since 1957 and is a private, not-for-profit 501 (C)3 organization. Each year, Frontier Health provides clinical services to nearly 50,000 adults, children, and adolescents. Staff includes psychiatrists, psychologists, licensed clinical social workers, licensed professional counselors, employment specialists, direct support and other professionals. Frontier Health's MISSION is *To provide quality services that encourage people to achieve their full potential*, and their VISION is *To be a leader in establishing and demonstrating local, regional and national standards of excellence for accessible and high quality behavioral health, intellectual and developmental disabilities, and vocational services*. Frontier Health's VALUES include 1) *People come first, are treated with dignity and respect, and are encouraged to achieve their full potential*, 2) *Employees are recognized as our greatest assets*, 3) *Service Excellence is our foundation for the quality of care for clients*, 4) *Healthier Communities are supported through partnerships and educational programs to promote improvements in the overall quality of life*, and 5) *Excellence and Efficiency are achieved through integrity, teamwork, leadership, creativity, continuous improvement and a strong work ethic*.

ADULT SERVICES PROVIDED BY FRONTIER HEALTH:

- Outpatient behavioral health
- Mental health
- Substance abuse and co-occurring problems
- Individual and group psychotherapy
- Marital and family therapy
- Crisis services
- Psychological assessment
- Forensic assessments

CHILDREN AND YOUTH SERVICES PROVIDED BY FRONTIER HEALTH:

- Outpatient behavioral health
- Regional Intervention Program
- Residential treatment for adolescents
- Mental health
- Individual and family therapy
- Psychological assessment
- Juvenile Detention Center

Philosophy and Mission of FHSDIP: The purpose of the Frontier Health Services Doctoral Internship in Psychology (FHSDIP) is to enhance service delivery for underserved persons in the context of rural community mental health centers (CMHCs) by equipping and preparing psychology doctoral students for rewarding and competent work with these groups. FHSDIP affirms the National Rural Health Association (2008) Policy Position that

cites the extreme importance of training and recruiting behavioral health professionals, particularly doctoral-level providers, for practice in non-urban areas. Doctoral-level providers, in addition to providing direct clinical services, often function in a variety of consultative, supervisory, and administrative roles in rural settings. Many of the communities with greatest need for well-prepared doctoral-level behavioral health professionals lack access to the services such a professional could provide. The training provided through FHSDIP uniquely addresses Principle D of the American Psychological Association's (2010, pg. 3) Code of Ethics, which states that "Psychologists recognize that fairness and justice entitle all persons to access to and benefit from the contributions of psychology and to equal quality in the processes, procedures and services being conducted by psychologists..."

Practitioners in CMHCs, especially in non-urban areas, often face cultural and geographic challenges for which they should be adequately prepared, such as managing dual and overlapping relationships, limited access to resources, stigma, socioeconomic disparities, and maintaining vibrant collegial relationships in spite of possible risk for professional isolation. As such, FHSDIP emphasizes several key areas of professional development, including: well-rounded generalist clinical skills that CMHC practitioners must possess given the breadth of client concerns they will treat; cultural competence with respect to the client characteristics often encountered in rural CMHC settings; appropriate use of community resources to enhance therapeutic gains; collaboration with multidisciplinary professionals and community agencies; and psychological assessment. FHSDIP recognizes the uniquely valuable contribution that psychological assessment provides rural communities and, therefore, includes at least one day each week devoted to the development of interns' assessment skills.

Training Model:

The internship year is a time of substantial professional development in which the intern translates prior academic and clinical training into skills and confidence needed for professional practice. Supervision is conducted from a developmental perspective that recognizes each intern's unique strengths and interests and reaffirms the primacy of the intern's individual growth as the core of FHSDIP's mission. FHSDIP provides interns opportunities to expand and hone their knowledge base and clinical skills for diverse presenting problems. In supervision, mentoring, and involvement in didactic activities, interns grow in their awareness of the multidimensional nature of client's presenting concerns, and in their ability to create and use flexible conceptualizations that reflect each client's uniqueness.

FHSDIP embodies a practitioner-scholar model of training (VAIL Conference) that promotes clinical development via scholarly inquiry. This model emphasizes the importance of basing clinical work on the extant literature, which requires capability in accessing and understanding scientific articles and in translating this information into the appropriate clinical context. Supervision provides opportunities for discussing the relationship between the literature and the interns' work, and developing strategies for adapting the intern's work to better reflect the best understanding of evidence-based practice. In supervision, mentoring, and involvement in didactic activities, interns grow in their awareness of the multidimensional nature of clients' presenting concerns, and in their ability to create and use flexible conceptualizations that reflect each client's uniqueness.

Intern Schedule and Expectations

Outpatient Therapy: for the Adult and Child & Adolescent tracks, each intern will dedicate approximately three and a half days per week to functioning as a therapist in providing clinical services to clients, completing session notes, communicating with other professionals, and fulfilling other general therapeutic responsibilities. Interns are expected to complete all session notes before the end of the day during which services are rendered. Most sites where interns work are open from 8 a.m. until 5 p.m., and it is expected that the intern will take a lunch break each day. Interns typically average about 5 client contacts per full day once cancellations and “no-shows” are taken into account.

Assessment: An average of two to four day per month will be set aside for working in Frontier Health’s Assessment and Forensic Services Division, which will involve conducting a variety of psychological tests for diverse referral questions. Interns are expected to utilize the available dictation service and complete typed reports in one to two weeks, barring unforeseen barriers.

Sample Schedules for each internship position are listed below. Please note that these are only samples and that the specific details of each intern’s schedule are contingent upon multiple factors and set at the beginning of the internship each year.

C&A Track, Scott County:

	Monday <i>Scott County</i> <u>Outpatient</u>	Tuesday <i>Scott County</i> <u>Outpatient</u>	Wednesday <i>Scott County</i> <u>Outpatient</u>	Thursday <i>Scott County</i> <u>Outpatient</u>	Friday <i>Scott County</i> <u>Assessment (2x mth)</u>
AM	Therapy	Therapy	Therapy Didactic	Supervision, Therapy	Group sup Assessment
PM	Supervision, Therapy	Therapy	Therapy Group sup	Therapy	Assessment

C&A Track, Holston Children & Youth:

	Monday <i>H CY/Watanga</i> <u>Assess (2x mth)</u>	Tuesday <i>Holston C&Y</i> <u>Outpatient</u>	Wednesday <i>Holston C&Y</i> <u>Outpatient</u>	Thursday <i>Holston C&Y</i> <u>Outpatient</u>	Friday <i>Scott Cnty/H CY</i> <u>Outpatient</u>
AM	Assessment	Supervision Therapy	Therapy	Group Sup Therapy	Supervision Group sup
PM	Assessment.	Therapy Group Th.	Didactic	Supervision Therapy	Therapy

Adult Track, Kingsport:

	Monday <i>Watanga/HCY</i> <u>Assessment</u>	Tuesday <i>Holston Adult</i> <u>Outpatient</u>	Wednesday <i>Holston Adult</i> <u>Outpatient</u>	Thursday <i>Watanga/HCY</i> <u>Assessment</u>	Friday <i>Holston Adult</i> <u>Outpatient</u>
AM	Therapy	Therapy Group Th.	Group sup Therapy	Assessment	Supervision Group sup
PM	Therapy	Therapy Supervision	Therapy Didactic	Assessment	Therapy

Stipends, Benefits, and Resources:

The annual stipend for FHSDIP interns is \$22,000. All payments to interns are handled by Frontier Health’s corporate offices. Although there are many sites within Frontier Health and intern salaries are reflected proportionally on the budgets of the sites where they render services, the interns’ salaries are guaranteed and handled by the corporate offices. Interns benefit from time off, including for 8 recognized holidays. Interns work out other time off needs, such as for sickness, road conditions, vacation, dissertation work, or graduation travel, with their primary supervisor, and it is generally expected that this will not exceed 12 additional days. Interns are not currently eligible to apply for employee-sponsored health insurance benefits; although a one-time payment of \$1000 is given to help cover costs associated with maintaining health coverage. Questions regarding the specific benefits can be directed to the Human Resources at sknowlto@frontierhealth.org.

FHSDIP interns are provided private office space, a dedicated computer, and a user ID for accessing a personal account and Frontier Health’s electronic medical record. Interns have access to an extensive testing library through their work with the Assessment and Forensic Services Department. Interns have access to administrative support through the Information and Technology Help Desk.

Didactic seminars

The following is a list of sample didactic seminars that may be included each training year:

- | | |
|--|---|
| Appalachian Culture | APA Ethics in Community Mental Health |
| Collaborating with Case Management in CMH | Managing Safety Concerns in CMH |
| Managing Dual Relationships in Rural Settings | Residential Treatment for Children & Adolescents |
| Duty To Protect: Promoting Safety | Selecting and Adapting Assessment Tools |
| Trauma-Focused CBT | Working with Minority Groups in Appalachia |
| Assessing and Treating Behavioral and Attachment Concerns Using PCIT | Treatment for People with Autism Spectrum Disorders |
| Evidence-Based Models of Supervision | Acceptance and Commitment Therapy |

Motivational Interviewing	Anger Management in CMH
Diversity as Pertains to the Person of the Therapist	Internet Privacy Issues and Psychotherapy
Group Therapy in CMH	Vocational Rehabilitation Services in CMH
Adult Residential Treatment as a Continuum of Care	Couples Therapy in CMH
Medications: What a Therapist Should Know	Prescription Privileges in Psychology
Forensic Assessment in CMH	Neuropsychology in the Real World
Assessing and Treating Borderline Personality Disorder Using DBT	Assessing and Treating Eating Disorders
Integrated Behavioral Health: Primary Care Psychology	Consultation in Psychology
Strengthening Adoptive Families	Assessing and Treating ADHD in Children and Adults
Family Assessment and Treatment	Program Evaluation in CMH
Projective Testing	Voluntary & Involuntary Termination of Therapy

In addition to the scheduled didactic seminars that will be presented by professionals in the region, each intern will be expected to give a 2-hour presentation on a mutually agreed-upon topic relevant to the training and mission goals of FHSDIP.

Reading List on Diversity-Related Topics

Interns will be given a reading list at the beginning of the year. The articles or other readings selected will pertain to issues of diversity. It will be expected that interns complete the readings in preparation for discussion during designated sessions of group supervision. Some flexibility in the timing of these discussions will be maintained per the discretion of the group supervisor.

TRAINING GOALS AND OBJECTIVES

Given the mission described above, FHSDIP has the following goals and objectives:

- 1) To prepare interns for entry-level practice of professional psychology within a generalist framework, with particular emphasis on diagnostic and clinical skills needed in a rural context.

Objectives:

- To provide effective supervision and sufficient clinical opportunities that guide interns towards development of a breadth of scientific knowledge and clinical skills in the practice of professional psychology, enabling interns to conceptualize

diagnosis and treatment on the basis of social, psychological, biological, and systemic factors.

- To prepare interns for their career goals by ensuring readiness to apply for licensure as professional psychologists
- 2) To increase the number of psychologists competent to provide quality services to underserved populations in rural regions.

Objectives:

- To promote interns' recognition of the valuable contributions psychologists can make in community mental health centers
 - To develop intern's ability to understand and apply ethical standards in the practice of professional psychology, particularly with respect to the unique challenges presenting in community mental health centers and rural areas.
- 3) Consistent with the Profession-Wide Areas of Competence for Health Service Psychologists ([APA Link](#)), FHSDIP has the goals promoting interns' professional development in the following areas:
- a. **Evidence-Based Intervention:** The intern will deliver interventions based on evidence-based practices that promote client well-being and success.
 - b. **Evidence-Based Assessment:** The intern will demonstrate skill in diagnosis and assessment as evidenced by administration and interpretation of psychometric tests, writing comprehensive psychological reports, and communicating assessment results with others.
 - c. **Ethical and Legal Standards:** The intern will display knowledge of ethical principles and legal issues and incorporate this knowledge into professional practice.
 - d. **Individual and Cultural Diversity:** The intern will demonstrate awareness and sensitivity of issues related to cultural diversity through interactions with clients and other professionals.
 - e. **Evaluation/Research:** The intern will evaluate the efficacy of professional activities and use research to inform the professional practice of psychology.
 - f. **Professional Values and Attitudes:** The intern will display professionalism, cultural sensitivity, and respectful behaviors in interactions with clients and others.
 - g. **Communication and Interpersonal Skills:** The intern will demonstrate verbal and nonverbal skills needed to effectively communicate with clients and others.
 - h. **Consultation:** The intern will provide culturally sensitive, professional guidance and information that supports the clients' goals for treatment.
 - i. **Supervision:** The intern will engage in ongoing weekly supervision at a minimum of two hours per week with a Licensed Psychologist.
 - j. **Reflective Practice:** The intern will demonstrate appropriate knowledge, skills, and attitudes in reflecting on, critically evaluating, and improving one's own professional performance.
- 4) Additional areas of professional competence—outlined in the APA's Competency Benchmarks in Professional Psychology—that FHSDIP promotes among interns during the training year include the following:
- a. **Scientific Knowledge and Methods:** The intern will demonstrate advanced knowledge of core sciences and independently apply the scientific method to practice
 - b. **Teaching:** The intern will exhibit knowledge of didactic learning strategies and how to apply teaching methods in multiple settings.

- c. **Interdisciplinary Systems:** The intern will demonstrate awareness of multiple professional worldviews and a good ability to collaborate with interdisciplinary teams.
- d. **Management-Administration:** The intern will develop and offer constructive criticism and suggestions regarding management and leadership of the organization.
- e. **Advocacy:** The intern will intervene with clients to promote action on factors impacting development and function, and will demonstrate an ability to promote change at institutional levels.

SUPERVISION

Supervision is provided by licensed, doctoral level psychologists. Each intern will receive at least four hours of supervision per week, two of which will be in the form of individual supervision with one or two licensed clinical psychologists, one of which will be in the form of group supervision with a licensed clinical psychologist, and one of which will be in the form of group or individual supervision with a clinician licensed to provide mental health services. Additionally, supervisors sign all treatment plans and psychological evaluation reports completed by interns. Other mental health professionals that may provide supervision to interns include senior psychological examiners, clinical social workers, counselors, and marriage and family therapists.

For a copy of the Supervision Contract, please see **Addendum A**.

EVALUATIONS

Intern Evaluations

Intern competence in meeting training goals will be evaluated at least twice annually. Evaluations are completed at least at mid-year and near the end of the internship experience. Oral and written feedback is provided to interns during these evaluations and throughout the internship experience. All evaluations are completed by licensed doctoral level psychologists familiar with the interns' work.

For a sample intern evaluation, please see **Addendum B**. On the mid-year evaluations, the minimum threshold for satisfactory performance is achieving an average of 3 ("Some supervision needed; intern entry level") or better on each of the 16 domains assessed, with no individual item rated less than 2 ("Requiring close supervision; mid- to late-practicum level"). On the end-of-year evaluation, the minimum threshold for satisfactory performance is achieving an average of 4 ("little supervision needed; intern exit/postdoc level") or better on each of the 16 domains assessed, with no individual item rated less than 3 ("Some supervision needed; intern entry level"). If an intern fails to meet expected competency levels, the primary supervisor, Training Director, and the intern, with the input of the Training Committee, will prepare a joint written remedial plan, with specific dates indicated for completion. At the end of the remediation, the intern's performance in the area of concern will be re-evaluated. Failure to achieve the minimum passing threshold by the specified date may result in a decision of the Training Committee to terminate training, following the *Due Process and Grievance Procedures*.

Interns complete self evaluations at the beginning and end of the year. Please see **Addendum E** for the intern self evaluation.

Supervisor Evaluations

In addition to informal evaluations regarding the intern's experience with each individual supervisor, interns will complete a formal supervisor evaluation of each individual supervisor at the mid-point and near the end of each year. For a sample Supervisor Rating form, please see **Addendum C**.

Didactic Evaluations

At the conclusion of each didactic experience, interns will complete a brief evaluation regarding their perspective of the experience, whether or not they recommend the didactic experience for the following year's interns, and what changes they would recommend for the training. For a sample Didactic Evaluation Form, please see **Addendum F**.

Evaluation of Training Program

At the midpoint and near the end of each year, interns will complete an evaluation providing feedback about their experiences in the internship, highlighting strengths and weaknesses of the program, and suggesting changes for following years. These evaluations will be reviewed in a group format to facilitate open dialogue about possible changes. Please see **Addendum D** for the Internship Program Evaluation form.

DUE PROCESS AND GRIEVANCE

Frontier Health has a procedure for due process and grievance. Interns are informed of this process at the beginning of the internship by either the Training Director or their Supervisor.

For copy of the Due Process and Grievance Procedure, please see **Addendum G**.

INTERNSHIP SITES

Scott County Behavioral Health Services

Scott County Behavioral Health Services offers outpatient behavioral health, mental health, substance abuse and co-occurring treatment programs for children, adolescents and adults. Services include individual and group psychotherapy, marital and family counseling, psychiatric services, case management, medication monitoring, crisis services, intensive in-home services, home-based services, education and consultation services, Virginia Alcohol Safety Action Plan and Children in the Middle. Comprehensive psychological evaluations are also available at this site. **Project LINK**, an outpatient program for pregnant, substance-abusing women or mothers with dependent children, is also offered.

The intern's assessment experience will be obtained on site under the supervision of the Clinical Psychologist at Scott County.

Holston Children and Youth Services

Services at Holston Children and Youth Services include evaluation and treatment of all child and adolescent behavioral health, mental health, substance abuse and co-occurring disorders. Services include individual and group psychotherapy, family therapy, parenting

classes, psychiatric consultation, pharmacotherapy, crisis services, case management, consultation and education services, Children and Youth Continuous Treatment Team, Comprehensive Child & Family Therapy.

Nolachuckey-Holston Area Mental Health Center

Nolachuckey-Holston Area Mental Health Center offers outpatient behavioral health, mental health, substance abuse and co-occurring programs for children, adolescents and adults. Nolachuckey Mental Health Center. services include individual and group psychotherapy, marital and family counseling, pharmacotherapy, crisis services, case management, consultation and education services, Continuous Treatment Team and comprehensive child and family services. Nolachuckey MHC is located in Greeneville, TN. As part of this placement, the intern will see both adult and children and adolescent clients.

Holston Counseling Center

Holston Counseling Center offers outpatient behavioral health, mental health, substance abuse and co-occurring programs for children, adolescents and adults. Holston Counseling Center services include individual and group psychotherapy, marital and family counseling, pharmacotherapy, crisis services, case management, consultation and education services, and Continuous Treatment Team. Holston Counseling Center is located in Kingsport, TN. The intern will see adults at this placement, clients with mental health diagnoses as well as those with substance abuse and co-occurring diagnoses.

Johnson County Counseling Center

Johnson County Counseling Center (JCCC) offers outpatient services for adults, children, adolescents, and families. JCCC is located in rural Mountain City in the northeastern corner of Tennessee, bordering Virginia to the north and North Carolina to the east. The intern located at JCCC will primarily work with adults and may have opportunities for conducting a substance use group.

Assessment and Forensics:

For the three interns placed in Tennessee, two days a month will be spent in the Assessment and Forensics Services. The program there will be tailored depending on what skills the intern already has in assessment in order to build on and increase their skills in this area. Assessments will include intellectual testing, personality testing, law enforcement assessment, and Disability assessments. It will include testing for both adults and children and youth. In addition, the Tennessee interns will spend two days per month in Scott County obtaining additional assessment experience. The two interns placed in Virginia will have ongoing experience and supervision in assessment under the supervision of the Virginia Clinical Psychologist.

Frontier Health does the Forensic assessments for East Tennessee for the State. These usually involve assessing for Competency to Stand Trial and support/no support for an Insanity Defense. The Intern will have the opportunity to sit in and observe these assessments.

APPLICATION PROCESS AND SELECTION CRITERIA

FHSDIP offers four intern positions total, including two positions for the Adult track and two in the Child & Adolescent track. Each of these positions may involve at least some work with clients across the age spectrum. For example, interns in the adult track will still have opportunities to conduct assessments with children and youth.

Applicant Qualifications

Interns are required to be advanced graduate students in clinical or counseling psychology. Intern applicants should have completed a minimum of three years of graduate training. Applicants are also expected to have completed basic required academic coursework, successfully passed their doctoral comprehensive or qualifying examinations, and have the endorsement of their graduate program Director of Training. Preference will be given to applicants that by the start of the internship will have completed at least 400 intervention and 50 assessment supervised hours and to those that express interest in working in a rural, community-based context with underserved populations.

Application Procedures

As a member in good standing of APPIC, the psychology internship program's recruitment and selection procedures are in compliance with APPIC guidelines. We participate in the National Match and follow the APPIC Match Policies. We use the standard APPIC Online Application for Psychology Internship (AAPI) that can be obtained at the following website: <http://appic.org>. The deadline for receipt of your application form and associated materials is December 1st. This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use and ranking-related information from any intern applicant. Internship slot offers are made through the APPIC National Matching program in compliance with the APPIC policy. Frontier Health is an equal opportunity employer and adheres to APPIC's nondiscrimination policies.

Selection and Interview Process

Applicants who meet the basic requirements (e.g. psychology graduate students with a minimum of three years of graduate study, broad clinical practicum experiences) and appear to be a good match for the program (e.g. interest in community mental health settings, rural populations) are selected for an on-site interview in January. Interviews are an integral part of the selection process for both the program and interested applicants. On interview day, applicants meet with the Training Director to discuss the overall structure and goals of the internship, address general questions about the internship program, and review information about Frontier Health as an organization. Applicants are interviewed by the Training Director, clinical supervisors, as well as other contributors to the internship program. Current interns are present to converse with interviewees throughout the day. Interviewees are provided lunch. Interviews create an opportunity to assess goodness of fit for both internship program and intern applicant.

Background Checks/Drug Screening

All matched applicants must pass a required drug test before they can be hired as psychology interns. Frontier Health's Human Resources office will instruct interns in how to obtain a drug screen during the orientation week of the internship. Frontier Health assumes the cost for the completion of this requirement. For any additional information that may be required to assist you in the application process contact: Preston Visser, Ph.D.

Email: pvisser@frontierhealth.org

Phone: 423.727.2100

Students interested in applying for the internship program should submit an online application through the APPIC website (www.appic.org) using the AAPI Online application portal (<https://portal.appicas.org>). A complete application consists of the following materials:

1. A completed online AAPI (APPIC's standard application)
2. Cover letter (part of online AAPI)
3. A current Curriculum Vitae (as part of the online AAPI)
4. Three letters of recommendation, two of which must be from persons who have directly supervised the applicant's clinical work (as part of the online AAPI). Please submit no more than three letters.
5. Official transcripts of all graduate coursework
6. Supplementary materials: 1) One full integrated assessment report (please redact appropriately).

**The deadline for submitting the application and all required materials is
December 1st by 11:59 p.m. (EST).**

FHSDIP adheres to the Association of Psychology Postdoctoral and Internship Centers' (APPIC) guidelines regarding offers and acceptances. Our Center participates in the APPIC Matching Program for Psychology Internship Positions. For additional information regarding the APPIC Internship Matching Program, you may contact www.natmatch.com/psychint

ADDENDUM A

Supervision Contract

Frontier Health Services Doctoral Internship in Psychology (FHSDIP)

Adapted from recommendations in Sutter, E., McPherson, R. H., & Geeseman, R. (2002). Contracting for supervision. *Professional Psychology: Research and Practice*, 33, 495-498. doi: 10.1037/0735-7028.33.5.495. Copyright 2002 American Psychological Association and from a sample supervision contract available at www.schoolmentalhealth.org.

Overall Description of Roles and Expectations:

The supervisor agrees to orient the intern to the supervisory process, including setting goals, planning, and identifying criteria for success; provide face-to-face supervision as agreed upon; take supervision time seriously, be on time and prepared, and address questions/concerns; adhere to ethical, legal, and professional standards of supervision; share relevant resources with the intern to promote evidence-based practice; take a strengths-based approach with a focus on both successes and challenges; comply with documentation requirements; seek consultation/support on best practices in supervision and issues outside of the supervisor's competency; provide honest and constructive feedback to the intern; be available to address crisis situations as much as possible; promote the intern's adherence to ethical standards and professional development and competence; review evaluations of the intern in-person; adhere to Frontier Health and FHSDIP policies regarding supervision; and keep the FHSDIP Training Director and other relevant staff informed of the intern's progress.

The intern agrees to take supervision time seriously; be on time and prepared; to act ethically, legally, and professionally, to be open and honest; to be receptive of constructive feedback; comply with clinic and FHSDIP policies; request assistance when needed; actively participate in supervision; provide honest feedback to the supervisor about supervision; work within limits of competency, skills, and training; be respectful of and abide by confidentiality, required reporting, and related regulations; to strive to be self-aware and willing to work towards professional growth and competence; and to communicate concerns directly with the supervisor and, if needed, with the FHSDIP Training Director or other staff.

Both Parties Agree to the Following:

Description of the Purpose of the Supervised Clinical Experience:

This supervision experience is designed to partially satisfy the requirements of the Association of Psychology Postdoctoral and Internship Centers (APPIC) that stipulate two hours of weekly individual face-to-face supervision between the doctoral intern and a licensed clinical psychologist. The broader and more meaningful goals of this clinical supervision experience involve promoting the ongoing development of the intern in preparation for independent practice in professional psychology as well as ensuring that clients affected by the intern's work are receiving safe and satisfactory treatment and services.

Beginning and Ending Dates of Supervision:

This supervisory relationship will last from _____ to _____ barring unforeseen circumstances. The supervisor and/or intern will notify the other party as well as the FHSDIP of any changes to these dates as soon as is feasibly possible.

Description of Hours:

As an intern in the FHSDIP, the intern will be expected to work approximately 40-50 hours per week (see FHSDIP Training Manual). One hour weekly will be dedicated to individual face-to-face supervision between the undersigned intern and psychologist.

Statement of Legal Limits:

This form does not represent a contract of employment, and neither party represented in this form carries the authority to obligate the other party to any additional commitment not represented in this form or in other FHSDIP documents, including but not limited to the FHSDIP Training Manual. The intern is not obligated to pay the psychologist for the supervision since the supervision is being provided as a part of the FHSDIP.

Fees:

FHSDIP is responsible for any fees incurred by the supervisor's work, and the intern has no obligation to financially reimburse the supervisor.

Compliance with FHSDIP Policies:

The supervisor and intern agree to comply with the policies of Frontier Health and the FHSDIP for managing patient records, documentation of supervised activities and supervision, confidentiality and its exceptions, handling of emergencies and terminations, client billing, and obtaining appropriate client informed consent. Please refer to Frontier Health Policy manuals as well as the FHSDIP Training Manual for more information.

Malpractice Insurance Details:

The intern will be covered for professional liability insurance by Frontier Health for any services rendered as a part of the intern's work in the FHSDIP. Any services provided outside of the scope of the intern's work through the FHSDIP will not be considered covered by Frontier Health's liability insurance. For clarification, it is expected that the intern will not maintain employment outside of the FHSDIP given the importance of dedicating sufficient time and energy to successfully completing the internship; if, however, an intern does maintain any employment outside of the FHSDIP, any such clinical services provided would not be covered by the liability insurance provided by Frontier Health.

Managing any Malpractice Situations:

The intern and supervisor agree to keep one another fully informed of facts regarding any alleged injury resulting from the care or treatment of a patient and to cooperate with each other if there is a malpractice claim. The intern agrees to provide accurate and comprehensive information regarding any possible situations involving malpractice in order to enable the supervisor to appropriately communicate with Frontier Health and to manage the response.

Changes in Contract:

The supervisor and intern agree to keep one another informed of any changes that need to be made to the present contract, including whether or not the supervisory relationship

needs to be determined, as soon as is feasibly possible, and with no less than 2 weeks notice. Both parties agree that any dispute about the enforcement or application of this agreement must be managed according to Frontier Health and FHSDIP policies.

Supervisor Agrees to the Following:

Avoidance of Dual Relationships:

The supervisor agrees to avoid any dual relationship with the intern that would lead to exploitation or loss of objectivity.

Responsibility for Professional Services:

The supervisor agrees to maintain responsibility for professional services conducted under the supervisor's supervision. Since this contract pertains to supervision in the context of a doctoral internship in psychology, it is possible for interns to maintain multiple supervisory relationships, and as such, the supervisor and intern attempt to clarify what services are considered to be in the domain of the current supervisory relationship. The supervisor will also provide the intern with contact information and discuss levels of availability for consultation outside of normal supervision hours. In the event that the supervisor is unable to attend a scheduled supervision appointment, the supervisor will notify the intern and attempt to coordinate back-up supervision if needed and possible. The supervisor will notify the intern of how supervision will be documented.

Obligation To Evaluate:

The supervisor agrees to continually evaluate the appropriateness of the services rendered by the intern. The supervisor will plan for sufficient frequency and comprehensiveness of evaluations of the intern's professional development, and to notify the intern of any individual or agency that will receive a copy of these evaluations.

Description of Supervision:

The supervisor agrees to be responsible for communicating to the intern how supervision will be conducted and to notify the intern of any preparation needed for upcoming supervision sessions.

Space:

The supervisor agrees to be responsible for acquiring the physical space to be used in supervision as well as any ancillary equipment used in the context of supervision.

Credentials:

The supervisor agrees to maintain credentials as a licensed clinical psychologist to ensure that the intern's experience is consistent with supervision requirements stipulated by APPIC. The supervisor will notify the intern of any changes and coordinate alternate supervision if needed.

Appropriate Title:

The supervisor is responsible to assure that the intern uses his or her appropriate title indicating a training status in interactions with clients.

Supervision Site:

The supervisor agrees to attempt to provide supervision consistently at a Frontier Health site where client electronic medical records can be viewed.

The Intern Agrees to the Following:

Documenting Supervised Experience: The intern agrees to communicate with the supervisor and develop a plan for the intern to consistently document the supervised experience.

Compliance with Ethical and Legal Requirements:

As a doctoral intern in psychology, it is expected that the intern knows, understands, and attempts to follow ethical principles and codes of conduct as described by the American Psychological Association. The intern will also be learning state- and organization-specific requirements relevant to services rendered through the FHSDIP. The intern agrees to attempt to maintain awareness of and compliance with such policies. The intern agrees to communicate with the supervisor about areas of uncertainty with the legal and organizational policies that may affect the intern's work.

Communicating about Crisis Situations:

As soon as feasibly possible, and no more than 24 hours after the provision care, the intern agrees to communicate accurate and comprehensive information with the supervisor regarding any crisis situations involving a client considered to be within the supervisor's responsibility. This requirement serves the dual purpose of assuring that the intern receives adequate guidance in managing any challenging decisions and that the supervisor remains aware of critical incidents for which the supervisor is responsible.

Informed Consent to Clients:

The intern agrees to provide appropriate informed consent to clients and to sufficiently communicate the intern's trainee status to service-recipients.

Maintaining Learning Attitude:

The intern agrees to consider the supervision experience to be a learning opportunity in which he or she will seek the benefit of the supervisor's instruction and oversight. The intern agrees to communicate with the supervisor about ways to make the supervision experience more fulfilling for the intern's professional development.

My signature below indicates that I have read the Supervision Contract and have agreed to abide by its terms.

Intern

Date

Supervisor

Date

Addendum B

Supervisee Competency Evaluation Form

Frontier Health Services Doctoral Internship in Psychology

Benchmarks in Professional Psychology Readiness for Entry to Practice Level Rating Form

Trainee Name:

Name of Placement: *Frontier Health Services Doctoral Internship in Psychology*

Date Evaluation Completed:

Name of Person Completing Form (please include highest degree earned):

Licensed Psychologist?

Yes No

Was this trainee supervised by individuals also under your supervision?

Yes No

Type of Review:

Initial Review Mid-Placement Review Final Review
 Other (please describe):

Dates of Training Experience this Review Covers:

Training Level of Person Being Assessed: *Doctoral Intern*

Year in Doctoral Program:

Notes on Scoring:

- Any score of "1" for a single item must result in a remediation plan targeting the assessed domain
- The 16 overall domains are averaged. Minimum expected level of achievement is at least a "3.0" for each domain.

*** Last updated August 2015***

This form was adapted from recommendations given in *A Practical Guidebook for the Competency Benchmarks* (July, 2012). For more details, please visit <http://www.apa.org/ed/graduate/benchmarks-guide.aspx>

Not at all/Slightly=1 Somewhat=2 Moderately=3 Mostly=4 Very=5 No. Opp=[N/O]

Rate each item (using the drop-down menu to the right of each) by responding to the following questions using the scale below:

How characteristic of the trainee's behavior is this competency description?

Not at All/ Slightly	Somewhat	Moderately	Mostly	Very
1	2	3	4	5
Remediation is Required	Limited Knowledge	Average Competence	Well developed; Advanced	Highly developed; Independent

If you have not had the opportunity to observe a behavior in question, please indicate this by checking "No Opportunity to Observe" (N/O). Near the end of the rating form, you will have the opportunity to provide a narrative evaluation of the trainee's current level of competence.

FOUNDATIONAL COMPETENCIES

I. PROFESSIONALISM

1. Professional Values and Attitudes: as evidenced in behavior and comporment that reflects the values and attitudes of psychology.

With Clients

- Demonstrates knowledge of professional codes when working with clients.....
- Displays respect for individual differences with clients.....
- Respects the autonomy of clients to make decisions.....
- Displays appropriate therapeutic support for clients.....
- Communicates with clients in understandable terms and language while avoiding talking down to any individual.....
- Respects cultural differences among clients.....

With Other Professionals

- Demonstrates knowledge of professional codes when working with other professionals.....
- Treats other professionals in a respectful manner.....
- Displays a willingness to listen to the viewpoints of others.....
- Demonstrates effective communication skills, both in oral and written form, with other professionals.....
- Demonstrates knowledge of how to resolve differences of opinion with other professionals.....
- Works collaboratively with other professionals.....
- Works effectively with peers.....

Integrity: Honesty, personal responsibility, and adherence to professional values.

- Monitors and independently resolves situations that challenge professional values and integrity.....

Department

- Conducts self in a professional manner across settings and situations.....

Accountability

- Independently accepts personal responsibility across settings and contexts...

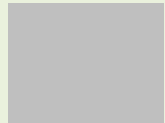
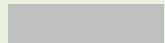
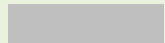
Concern for the Welfare of Others

- Independently acts to safeguard the welfare of others.....

Professional Identity

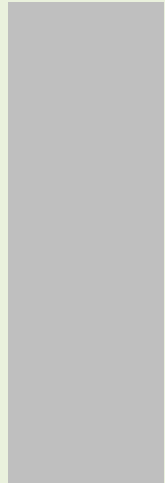
- Displays consolidation of professional identity as a psychologist; demonstrates knowledge about issues central to the field; integrates science and practice.....

Average "Professionalism" Score:



#DIV/0!

Comments about Professionalism Domain:



2. Individual and Cultural Diversity: Awareness, sensitivity, and skills in working professionally with diverse individuals, groups, and communities who represent various cultural and personal backgrounds and characteristics defined broadly and consistent with APA policy.

Cultural Awareness

- Understands a variety of cultural responses and responds appropriately in practice.....
- Communicates across culturally specific groups in a non-offensive manner....
- Is familiar with the research literature on culturally competent practice.....
- Independently monitors and applies knowledge of self as a cultural being in assessment, treatment, and consultation.....

Bias

- Understands own cultural identity and potential biases.....
- Avoids displaying any cultural bias with clients or other professionals.....
- Is familiar with strategies on neutralizing own cultural bias.....

Average "Individual and Cultural Diversity" Score:



#DIV/0!

Comments about Individual and Cultural Diversity Domain:



3. Ethical and Legal Standards and Policy: Application of ethical concepts and awareness of legal issues regarding professional activities with individuals, groups, and organizations.

Ethical Issues

- Demonstrates knowledge of APA's ethical code.....
- Maintains ethical behavior when working with clients and professionals.....

- Discusses ethical dilemmas with supervisor.....
- Incorporates an ethical decision-making model into supervision discussions...

Legal Issues

- Displays an awareness of relevant legal issues.....
- Is able to locate resources related to legal issues.....
- Practices within the confines of law.....
- Explains the importance of knowledge of legal issues.....

Average "Ethical and Legal Standards and Policy" Score:

#DIV/0!

Comments about Ethical and Legal Standards and Policy Domain:

4. Reflective Practice/Self-Assessment/Self-Care: Practice conducted with personal and professional self-awareness and reflection; with awareness of competencies; with appropriate self-care.

Reflective Practice

- Demonstrates reflectivity in context of professional practice (reflection-in-action); acts upon reflection; uses self as a therapeutic tool.....

Self-Assessment

- Accurately self-assesses competence in all competency domains; integrates self-assessment in practice; recognizes limits of knowledge/skills and acts to address them; has extended plan to enhance knowledge/skills.....

Self-Care (attention to personal health and well-being to assure effective professional functioning).....

- Self-monitors issues related to self-care and promptly intervenes when disruptions occur.....

Average "Reflective Practice/Self-Assessment/Self-Care" Score:

#DIV/0!

Comments about Reflective Practice/Self-Assessment/Self-Care Domain:

II. RELATIONAL

5. Communication/Interpersonal Skills: Relate effectively and meaningfully with individuals, groups, and/or communities.

Interpersonal Relationships

- Develops and maintains effective relationships with a wide range of clients, colleagues, organizations, and communities.

Affective Skills

- Manages difficult communication; possesses advanced interpersonal skills.

Expressive Skills

- Verbal, nonverbal, and written communications are informative, articulate, succinct, sophisticated, and well-integrated; demonstrates thorough grasp of professional language and concepts.

Average "Communication and Interpersonal Skills" Score:

Comments about Communication/Interpersonal Skills Domain:

#DIV/0!

III. SCIENCE

6. Scientific Knowledge and Methods: Understanding of research, research methodology, techniques of data collection and analysis, biological bases of behavior, cognitive-affective bases of behavior, and development across the lifespan. Respect for scientifically derived knowledge.

Scientific Mindedness

- Independently applies scientific methods to practice.

Scientific Foundation of Psychology

- Demonstrates advanced level knowledge of core science (i.e., scientific bases of behavior).

Scientific Foundation of Professional Practice

- Independently applies knowledge and understanding of scientific foundations to practice.

Average "Scientific Knowledge and Methods" Score:

Comments about Scientific Knowledge and Methods Domain:

#DIV/0!

7. Research/Evaluation: Generating research that contributes to the professional knowledge base and/or evaluates the effectiveness of various professional activities.

Evaluation of Professional Activities

- Uses research to evaluate the effectiveness of programs.
- Provides written feedback on how to improve program efficacy.

Research

- Demonstrates knowledge of relevant research literature.
- Demonstrates knowledge of methods related to research.
- Demonstrates knowledge of how to analyze data.
- Engages in ongoing research such as presenting at professional conferences, submitting manuscripts for publication, member of a research group, or working on a dissertation.

Average "Research/Evaluation" Score:

#DIV/0!

Comments Research/Evaluation Domain:

FUNCTIONAL COMPETENCIES

IV. APPLICATION

8. Evidence-Based Practice: Integration of research and clinical expertise in the context of patient factors.

Knowledge and Application of Evidence-Based Practice

- Independently applies knowledge of evidence-based practice, including empirical bases of assessment, intervention, and other psychological applications, clinical expertise, and client preferences.

Comments Evidence-Based Practice Domain:

9. Assessment: Assessment and diagnosis of problems, capabilities, and issues associated with individuals, groups, and/or organizations.

Measurement and Psychometrics

- Identifies appropriate assessment measures for clients for comprehensive psychological evaluations.
- Correctly administers standardized assessment instruments.
- Accurately scores assessment protocols.
- Communicates results in oral form in a meaningful manner.
- Writes a comprehensive psychological report.

Evaluation Methods

- Collects accurate and relevant data from structured and semi-structured interviews.

Application Methods

- Selects assessment tools that reflect awareness of patient population.
- Regularly selects and uses appropriate methods of evaluation.
- Demonstrates ability to adapt environment and materials according to client needs (i.e., privacy, lighting, excess noise).

Diagnosis

- Links diagnosis of developmental and clinical findings to assessment questions.
- Demonstrates ability to identify problem areas and to use concepts of differential diagnosis.

Conceptualization & Recommendations

- Presents cases and reports demonstrating how diagnosis is based on case material.

Findings

- Writes clear, concise, comprehensive reports that accurately interpret assessment findings.
- Orally communicates findings in terms that are clearly understood by the client.

Average "Assessment" Score:

Comments Assessment Domain:

10. Intervention: Interventions designed to alleviate suffering and to promote health and well-being of individuals, groups, and/or organizations.

Intervention Knowledge

- Demonstrates knowledge of how to use research literature to locate evidence-based practices.
- Is able to appropriately match an evidence-based practice to a presenting problem.
- Identifies a client's readiness for change level before implementing an intervention.

Intervention Application

- Writes treatment plans describing the steps of the intervention in measurable terms.
- Matches the intervention to the client's presenting symptoms.
- Ensures that all interventions are ethical and evidence-based.
- Uses ongoing assessment to evaluate the efficacy of the intervention.
- Documents client progress on the treatment plan.
- Makes changes to the treatment plan as necessary based on evaluation results.
- Implements interventions with fidelity to empirical models and flexibility to adapt where appropriate.

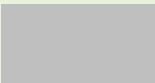
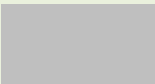
Intervention Planning

- Independently plans interventions; case conceptualizations and intervention plans are specific to case and context.

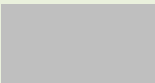
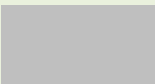
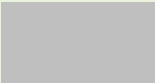
Skills

- Displays clinical skills with a wide variety of clients and uses good judgment even in unexpected or difficult situations.

Average "Intervention" Score:



#DIV/0!



#DIV/0!



Comments Intervention Domain:

11. Consultation: The ability to provide expert guidance or professional assistance in response to a client's needs or goals.

Therapist/Consultant Relationship

- Clearly defines the role of the therapist or consultant.
- Clearly explains the therapy or consulting process to clients.

Therapy/Consulting Process

- Gathers information from clients regarding presenting problem.
- Develops questions to be answered during the consulting process.
- Expresses the questions in operationally defined terms.
- Appropriately determines assessment tools or other methods for data collection.
- Systematically collects data.
- Clearly communicates findings to client (either in oral or written form).
- Works with the client to determine an evidence-based intervention.
- Monitors progress of selected intervention.
- Evaluates the efficacy of the intervention.

Average "Consultation" Score:

#DIV/0!

Comments Consultation Domain:

V. EDUCATION

12. Teaching: Providing instruction, disseminating knowledge, and evaluating acquisition of knowledge and skill in professional psychology.

Didactics

- Attends didactic training activities.
- Articulates the importance of ongoing didactic training activities.
- Summarizes knowledge gained from the didactic and how to apply this information to practice.
- Actively participates in didactics.
- Actively participates in case conferences.

Professional Presentations/Workshops/Trainings

- Attends professional workshops and trainings.
- Provides feedback on professional workshops and trainings.
- Organizes and presents on a relevant topic.

Average "Teaching" Score:

#DIV/0!

Comments Teaching Domain:

13. Supervision: Supervision and training in the professional knowledge base of enhancing and monitoring the professional functioning of others.

Expectations and Roles

- Understands the ethical, legal, and contextual issues of the supervisor role.

Models of Supervision

- Describes aspects and benefits of differing models of supervision.

Receives Supervision

- Arrives on time for supervision sessions.
- Arrives to supervision sessions prepared.
- Receives constructive feedback in a positive manner.
- Works effectively with supervisor.
- Addresses ethical dilemmas with supervisor.

Skills Development

- Engages in professional reflection about one's clinical relationships with supervisees, as well as supervisees' relationships with their clients.

Average "Supervision" Score:

Comments Supervision Domain:

VI. SYSTEMS

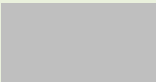
14. Interdisciplinary Systems: Knowledge of key issues and concepts in related disciplines. Identify and interact with professionals in multiple disciplines.

Knowledge of the Shared and Distinctive Contributions of Other Professions

- Demonstrates awareness of multiple and differing worldviews, roles, professional standards, and contributions across contexts and systems; demonstrates intermediate level knowledge of common and distinctive roles of other professionals.

Comments Interdisciplinary Systems Domain:

15. Management-Administration: Manage the direct delivery of services (DDS) and/or the administration of organizations, programs, or agencies (OPA).



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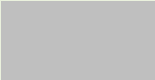
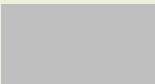
Appraisal of Management and Leadership

- Develops and offers constructive criticism and suggestions regarding management and leadership of organization.

Administration

- Demonstrates in emerging ability to participate in administration of service delivery program.

Average "Management-Administration" Score:



#DIV/0!

Comments Management-Administration Domain:

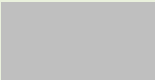


16. Advocacy: Actions targeting the impact of social, political, economic, or cultural factors to promote change at the individual (client), institutional, and/or systems level.

Empowerment

- Intervenes with client to promote action on factors impacting development and functioning.

Comments Advocacy Domain:



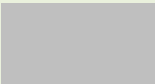
TOTAL AVERAGE SCORE

#DIV/0!

Overall Assessment of Trainee's Current Level of Competence

Please provide a brief narrative summary of your overall impression of this trainee's current level of competence. In your narrative, please be sure to address the following questions:

- What are the trainee's particular strengths and weaknesses?
- Do you believe that the trainee has reached the level of competence expected by the program at this point in training?
- If applicable, is the trainee ready to move to the next level of training, or independent practice?



Supervisor

Date

Intern

Date

ADDENDUM C

Frontier Health Services Doctoral Internship in Psychology

Adapted from Canvas Health Rating Form available at www.apa.org

SUPERVISOR RATING FORM

Supervisor _____ Trainee _____ Date _____

- 0-Not applicable
- 1-Behavior never displayed/observed
- 2-Behavior rarely displayed
- 3-Behavior often displayed
- 4-Behavior Typically Displayed
- 5-Behavior displayed without exception

General

Interest/commitment	0	1	2	3	4	5
Knowledge of areas being supervised	0	1	2	3	4	5

Structure

Time:

Promptness	0	1	2	3	4	5
Meeting times regularly scheduled	0	1	2	3	4	5
PRN Availability for consultation	0	1	2	3	4	5
Provides for back-up supervision during absences	0	1	2	3	4	5

Information:

Describes how supervision to be conducted/follows model described	0	1	2	3	4	5
Adjusts teaching model to skill level (e.g., less teaching/more deference to intern over the course of the year and in keeping w/skill increase)	0	1	2	3	4	5
Provides own work samples to illustrate specific issues	0	1	2	3	4	5

Comments: _____

Process

Personal Characteristics:

Demonstrates respect for intern, clients and colleagues	0	1	2	3	4	5
Open to feedback from intern	0	1	2	3	4	5
Creates/maintains emotionally safe environment for intern	0	1	2	3	4	5

Interpersonal Characteristics:

Gives regular, clear feedback verbally in supervision meetings	0	1	2	3	4	5
Observes both positive and negative intern behaviors	0	1	2	3	4	5
Addresses personal issues that impact role as therapist (i.e., countertransference) in respectful, emotionally						

supportive manner	0	1	2	3	4	5
Limits focus of intern personal characteristics to those impacting clinical work (i.e., asks/pursues information on need-to-know basis)	0	1	2	3	4	5
Maintains appropriate professional boundaries	0	1	2	3	4	5
Demonstrates empathy and use of relevant self-disclosure w/in supervisory relationship (practices what is preached)	0	1	2	3	4	5
Is supportive of intern completing the training program	0	1	2	3	4	5
Promotes the acquisition of skills, competencies, and knowledge	0	1	2	3	4	5
Serves as positive professional role model for the intern	0	1	2	3	4	5

Comments: _____

Written Material:

Reports reviewed/returned w/commentary w/in one week of receipt	0	1	2	3	4	5
Progress notes co-signed and returned w/in 2 days of receipt	0	1	2	3	4	5
Written feedback consistent w/verbal discussions/feedback	0	1	2	3	4	5

Comments: _____

Content

Conceptualization:

Assists in development of cogent conceptualization of relevant issues in case	0	1	2	3	4	5
Provides input consistent w/developmental needs of intern (i.e., less specific over time)	0	1	2	3	4	5
Uses/encourages use of specific cases as examples of larger issues	0	1	2	3	4	5
Refers intern to other resources (colleagues, research) where appropriate	0	1	2	3	4	5

Ethical Concerns:

Highlights potential client risk areas and assists in determining appropriate action needed	0	1	2	3	4	5
Notifies and processes w/intern any diversity issues w/particular clients, including referral to additional resources if needed	0	1	2	3	4	5
Delineates resources to contact as needed for managing client safety, obtaining other professional referral sources (e.g., area hospitals), and social service agencies	0	1	2	3	4	5

Professional Responsibility:

Uses case examples to make intern aware of impact of

their particular beliefs, personality or other personal characteristics	0	1	2	3	4	5
Explicitly addresses any potential or enacted boundary violations	0	1	2	3	4	5

Comments: _____

Overall Rating key:
 0-Poor supervision relationship
 1-Fair, stressful, lots to change
 2-Adequate
 3-Good
 4-Strong, informative, and supportive
 5-Consistently excellent overall

Overall Rating 0 1 2 3 4 5

Trainee requests for change: _____

Other comments: _____

Signature: _____ Review Date: _____

ADDENDUM D

Internship Program Evaluation – FHSDIP

This Program Evaluation is used by the FHSDIP Training Committee to continually improve and enhance the training program. All responses are reviewed by the Training Committee, and your feedback is carefully considered. Any ratings of “Poor” or “Fair” will result in action by the Training Committee to address the problematic item, so please be sure to include helpful explanations wherever applicable in order to help us respond effectively.

	Poor	Fair	Good	Excellent
Please use the following scale:	1	2	3	4
<hr/>				
<u>Orientation Week:</u>				
Overall quality of the orientation week:	1	2	3	4
Comments Section: <i>What was helpful, what was unhelpful, and how can we improve?</i>				
<u>Didactic Seminars:</u>				
Overall quality of the didactic seminars:	1	2	3	4
Relevance/usefulness of didactic seminars:	1	2	3	4
Comments Section: <i>What was helpful, what was unhelpful, and how can we improve?</i>				
<u>Evaluation Process:</u>				
Overall helpfulness of feedback:	1	2	3	4
Timeliness of feedback for facilitating growth:	1	2	3	4
Comments Section: <i>What was helpful, what was unhelpful, and how can we improve?</i>				
<u>Individual Supervision:</u>				
Helpfulness of supervision for facilitating growth:	1	2	3	4
Availability of supervision:	1	2	3	4
Supervisor as role model:	1	2	3	4
Appropriate frequency of supervision:	1	2	3	4
Overall satisfaction with supervision:	1	2	3	4

Comments Section:

What was helpful, what was unhelpful, and how can we improve?

Clinical Experience:

Overall quality of training:	1	2	3	4
Breadth of clinical intervention experience:	1	2	3	4
Satisfaction with number of client contacts:	1	2	3	4
Clarity of expectations and responsibilities for intern:	1	2	3	4
Improved confidence in evidence-based intervention:	1	2	3	4
Improved confidence in using professional literature and research:	1	2	3	4

Comments Section:

What was helpful, what was unhelpful, and how can we improve?

Assessment Experience:

Quality of training:	1	2	3	4
Breadth of assessment experience:	1	2	3	4
Satisfaction with number of client contacts:	1	2	3	4
Clarity of expectations and responsibilities for intern:	1	2	3	4
Improved confidence in evidence-based assessment:	1	2	3	4

Comments Section:

What was helpful, what was unhelpful, and how can we improve?

Ethical & Legal Issues:

Quality of training:	1	2	3	4
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Comments Section:

What was helpful, what was unhelpful, and how can we improve?

Supervision (i.e., learning about supervision, models of supervision):

Quality of training:	1	2	3	4
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Comments Section:

What was helpful, what was unhelpful, and how can we improve?

Consultation (i.e., learning about professional consultation):

Quality of training:	1	2	3	4
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Comments Section:

What was helpful, what was unhelpful, and how can we improve?

Cultural and Individual Diversity:

Quality of training: **1 2 3 4**

Comments Section:

What was helpful, what was unhelpful, and how can we improve?

Professionalism:

Improved confidence in displaying professionalism: **1 2 3 4**

Comments Section:

What was helpful, what was unhelpful, and how can we improve?

Communication and Interpersonal Skills:

Improved confidence verbal and nonverbal communication skills: **1 2 3 4**

Comments Section:

What was helpful, what was unhelpful, and how can we improve?

Collegiality of the Internship Personnel:

Ability to relate positively with internship supervisors and personnel: **1 2 3 4**

Comments Section:

What was helpful, what was unhelpful, and how can we improve?

Overall Internship Program:

Overall Quality of the internship experience: **1 2 3 4**

Comments Section:

What was helpful, what was unhelpful, and how can we improve?

Please provide any other feedback and recommendations that you believe might be helpful or might improve the internship:

Please provide any other feedback that you think would help improve this program evaluation survey:

Thank you very much for taking the time to provide this important feedback!

ADDENDUM E

Intern Self Evaluation - FHSDIP

This evaluation is for your personal reflection and for FHSDIP to have the opportunity to track any changes in your self-report at the end of your internship year.

Please list three goals that you have with respect to your training during the internship year:

- 1.) _____
- 2.) _____
- 3.) _____

Please rate on a scale from 1-10 your current level of confidence in each of the following domains with respect to professional practice. A score of 1 indicates that you have extremely little confidence, and a score of 10 indicates that you are extremely confident.

- _____ 1.) Professional Values and Attitudes: knowledge and skill in displaying professionalism and respectful behaviors with clients and other professionals
- _____ 2.) Individual and Cultural Diversity: awareness of and sensitivity to issues related to cultural diversity during interactions with clients and other professionals
- _____ 3.) Ethical and Legal Standards: knowledge of ethical principals and legal issues; incorporating this knowledge into professional practice
- _____ 4.) Reflective Practice/Self-Care: ability to conduct oneself with personal and professional awareness and reflection with appropriate self-care.
- _____ 5.) Communication and Interpersonal Skills: Verbal and nonverbal skills needed to effectively communicate with clients and others
- _____ 6.) Scientific Knowledge and Methods: Understanding of research, research methodology, techniques of data collection and analysis, biological bases of behavior, cognitive-affective bases of behavior, and development across the lifespan.
- _____ 7.) Evaluation/Research: ability to evaluate efficacy of professional activities and use research to inform professional practice of psychology
- _____ 8.) Evidence-Based Practice: integrating research and clinical expertise in the context of patient factors.
- _____ 9.) Evidence-Based Assessment: skill in diagnosis and assessment as evidenced by administration and interpretation of psychometric tests, writing comprehensive psychological reports, and communicating assessment results with others.
- _____ 10.) Evidence-Based Interventions: using evidence-based intervention to promote client well-being and success.
- _____ 11.) Consultation: ability to provide culturally sensitive, professional guidance and information that supports clients' goals for treatment

- _____ 12.) Teaching: providing instruction, disseminating knowledge, and evaluating acquisition of knowledge and skill in professional psychology
- _____ 13.) Supervision: understanding evidence-based models of supervision and competency in comparing and contrasting different approaches to supervision
- _____ 14.) Interdisciplinary Systems: knowledge of key issues and concepts in related disciplines. Identifying and interacting with professionals in multiple disciplines
- _____ 15.) Management/Administration: manage the direct delivery of services and/or the administration of organizations, programs, or agencies
- _____ 16.) Advocacy: actions targeting the impact of social, political, economic, or cultural factors to promote change at the individual, institutional, and/or systems level
- _____ 17.) Community Mental Health: a working knowledge of how and what kind of treatment is provided in the context of community mental health care and how a psychologist can contribute
- _____ 18.) Rural Practice: a working knowledge of factors that are particularly relevant for providing care to clients in a rural setting, and how to best address potential barriers and bolster strengths
- _____ 19.) Generalist Orientation: interest in and preparedness to treat clients of diverse demographic and clinical characteristics. Ability and motivation to engage in ongoing self-directed learning within multiple areas of clinical psychology
- _____ 20.) Overall self-assessment: please rate how confident you feel to begin independent practice.

.....
 In the following space, please list some of your perceived strengths and areas requiring growth.

Strengths:

Growth Needs:

.....
 _____ Underserved Populations: For this last question, please rate on a scale from 1-10 your sense of commitment to dedicating a substantial portion of your professional practice to underserved populations. A score of 1 indicates no commitment and a score of 10 indicates full commitment. Please be aware that this question is not evaluative in nature, and you will not be penalized in any way for any answer. The question is intended to provide an opportunity for self-reflection about your sense of direction for your career.

*Thank you for your time and effort in completing this important form
 for you and for the internship as a whole.*

ADDENDUM F

Didactic Seminar Evaluation Form

Frontier Health Services Doctoral Internship in Psychology

Seminar:

Date:

Instructor:

Please use the following rating scale for assessing the seminar:

1 = Strongly Disagree

2 = Disagree

3 = Neither Agree nor Disagree/Neutral

4 = Agree

5 = Strongly Agree

Criteria	Rating	Criteria	Rating
The objectives of the seminar were clearly stated/communicated		I learned something new at this seminar	
The content of the course was related to the objectives		The instructor has a clear understanding of the material	
The content was well organized		The instructor was well-prepared and organized	
The content was understandable		The instructor responded to questions professionally	
The content fit the time available		The instructor was easy to follow	
The teaching methods were effective		The instructor maintained my interest throughout	
The teaching materials were helpful		The facilities were conducive to my learning	
The teaching materials were clean and readable		The seminar met my objectives	
The topic was applicable to my needs		Overall, I found the seminar a valuable experience	

Would you recommend this seminar for next year's interns: Yes / No
Why?

Other comments:

ADDENDUM G

Due Process and Grievance Procedures – Frontier Health Services Doctoral Internship in Psychology

Due Process Procedures

A: Basic Procedures

On the competency evaluation that supervisors complete for interns, if an intern receives a rating of “2” or less on any individual item or an average rating of “3” or less for any domain that is assessed, or if the primary supervisor, in collaboration with the Training Director, has sufficiently serious concerns about an intern’s behavior (e.g., ethical or legal violations, professional incompetence) the following procedures will be initiated:

1. In some cases, it may be appropriate to speak directly to the intern about these concerns and in other cases a consultation with the supervisor or TD will be warranted. This decision is made at the discretion of the staff or supervisor who has concerns.
2. Once the supervisor /TD has been informed of the specific concerns, they will determine if and how to proceed with the concerns raised.
3. If the staff member who brings the concern to the supervisor/TD is not the intern’s supervisor, the concern will be brought to the attention of primary and secondary supervisors.
4. If the TD and supervisors determine that the alleged behavior in the complaint, if proven, would constitute a serious violation, the TD will inform the staff member who initially brought the complaint.
5. The TD will consult with the Training Committee to discuss the concern.
6. The TD will consult with the Director of HR and, when necessary, the Applicable Vice President to discuss the concerns and possible courses of action to be taken to address the issues.
7. The TD, supervisors, and Director of HR may meet to discuss possible course of actions, (as listed in section B below).

B. Notification Procedures to Address Problematic Behavior or Inadequate Performance

It is important to have meaningful ways to address problematic behavior once identified. In implementing remediation or sanctions, the training staff must be mindful and balance the needs of the problematic intern, the clients involved, members of the intern’s cohort, the training staff, other agency personnel, and the organizational community. All evaluative documentation will be maintained in the intern’s file. At the discretion of the TD (in consultation with the Director of HR and applicable Vice President) – the intern’s home academic program will be notified of any of the actions listed below:

1. Verbal Notice to the intern emphasizes the need to discontinue the inappropriate behavior under discussion.
2. Written Notice to the intern formally acknowledges:
 - a. that the TD is aware of and concerned with the behavior
 - b. that the concern has been brought to the attention of the intern
 - c. that the TD will work with the intern to rectify the problem or skill deficits
 - d. that the behaviors of concern are not significant enough to warrant more serious action such as immediate termination.
3. Second Written Notice to the intern will Identify Possible Sanction(s) and describe the remediation plan. This letter will contain:
 - a. a description of the intern's unsatisfactory performance
 - b. actions needed by the intern to correct the unsatisfactory behavior
 - c. the timeline for correcting the problem
 - d. what sanction(s) may be implemented if the problem is not corrected
 - e. notification that the intern has the right to request an appeal of this action (see *Appeal Procedures - Section D of Due Process Procedures*)

Note: If at any time the intern disagrees with the aforementioned notices, the intern can appeal (see *Appeal Procedures - Section D of Due Process Procedures*)

C: Remediation and Sanctions

The implementation of a remediation plan with possible sanctions should occur only after careful deliberation and thoughtful consideration of the TD, relevant members of the training staff and the Director of HR. The remediation and sanctions listed below may not necessarily occur in that order. The severity of the problematic behavior plays a role in the level of remediation or sanction.

1. Schedule Modification is a time-limited, remediation-oriented closely supervised period of training designed to return the intern to a more fully functioning state. Modifying an intern's schedule is an accommodation made to assist the intern in responding to personal reactions to environmental stress, with the full expectation that the intern will complete the internship. This period will include more closely scrutinized supervision conducted by the primary supervisor in consultation with the TD. Several possible and perhaps concurrent courses of action may be included in modifying a schedule. These include:
 - a. increasing the amount of supervision, either with the same or additional supervisors
 - b. change in the format, emphasis, and/or focus of supervision
 - c. recommending personal therapy
 - d. reducing the intern's clinical or other workload
 - e. requiring specific academic coursework

The length of a schedule modification period will be determined by the TD in consultation with the TD, supervisor(s) and the Director of HR. The termination of the schedule modification period will be determined, after discussions with the intern, by the Supervisor in consultation with the TD, the Director of HR and applicable Vice President.

2. Probation is also a time-limited, remediation-oriented, more closely supervised training period. Its purpose is to assess the ability of the intern to complete the internship and to return the intern to a more fully functioning state. Probation defines a relationship in which the TD systematically monitors for a specific length of time the degree to which the intern addresses, changes and/or otherwise improves the behavior associated with the inadequate rating. The intern is informed of the probation in a written statement that includes:
 - a. the specific behaviors associated with the unacceptable rating
 - b. the remediation plan for rectifying the problem
 - c. the time frame for the probation during which the problem is expected to be ameliorated
 - d. the procedures to ascertain whether the problem has been appropriately rectified.

If the TD determines that there has not been sufficient improvement in the intern's behavior to remove the Probation or modified schedule, then the TD will discuss with the supervisor(s) and the Director of HR and applicable Vice President possible courses of action to be taken. The TD will communicate in writing to the intern that the conditions for revoking the probation or modified schedule have not been met. This notice will include a revised remediation plan, which may include continuation of the current remediation efforts for a specified time period or implementation of additional recommendations. Additionally, the TD will communicate that if the intern's behavior does not change, the intern will not successfully complete the training program.

3. Suspension of Direct Service Activities requires a determination that the welfare of the intern's client(s) or the Frontier Health community has been jeopardized. When this determination has been made, direct service activities will be suspended for a specified period as determined by the TD in consultation with the intern's supervisor(s), Director of HR and applicable Vice President. At the end of the suspension period, the intern's supervisor(s) in consultation with the TD and Director of HR will assess the intern's capacity for effective functioning and determine if and when direct service can be resumed.
4. Administrative Leave involves the temporary withdrawal of all responsibilities and privileges at Frontier Health. If the Probation Period, Suspension of Direct Service Activities, or Administrative Leave interferes with the successful completion of the

training hours needed for completion of the internship, this will be noted in the intern's file and the intern's academic program will be informed. The TD will inform the intern of the effects the administrative leave will have on the intern's stipend or other benefits.

5. Dismissal

- a. Dismissal from the Training Program involves the permanent withdrawal of all agency responsibilities and privileges. When specific interventions do not, after a reasonable time period, rectify the problem behavior or concerns and the intern seems unable or unwilling to alter her/his behavior, the TD will discuss with the Director of HR and applicable Vice President the possibility of termination from the training program or dismissal from the agency. Either administrative leave or dismissal would be invoked in cases of severe violations of the APA Code of Ethics, or when imminent physical or psychological harm to a client is a major factor, or the intern is unable to complete the internship due to physical, mental or emotional illness. The applicable Vice President will make the final decision about dismissal.
- b. Immediate Dismissal involves the immediate permanent withdrawal of all agency responsibilities and privileges. Immediate dismissal would be invoked but is not limited to cases of severe violations of the APA Code of Ethics, or when imminent physical or psychological harm to a client is a major factor, or the intern is unable to complete the training program due to physical, mental or emotional illness. In addition, in the event an intern compromises the welfare of a client(s) or Frontier Health by an action(s) that generates grave concern from the TD, the applicable Vice President may immediately dismiss the intern from Frontier Health. This dismissal may bypass steps identified in notification procedures (*Section B of Due Process Procedures*) and remediation and sanctions alternatives (*Section C of Due Process Procedures*). When an intern has been dismissed, the Director of HR and TD will communicate to the intern's academic department that the intern has not successfully completed the training program.

If at any time an intern disagrees with the aforementioned sanctions, the intern can implement *Appeal Procedures (Section D of Due Process Procedures)*.

D. Appeal Procedures

In the event that an intern does not agree with any of the aforementioned notifications, remediation or sanctions, or with the handling of a grievance – the following appeal procedures should be followed:

1. The intern should file a formal appeal in writing with all supporting documents to the Director of HR. The intern must submit this appeal within 5 work days from their notification of any of the above (notification, remediation or sanctions, or handling of a grievance).
2. Within 3 work days of receipt of a formal written appeal from an intern, the Director of HR will consult with members of the Frontier Health Management Team and then decide whether to implement a Review Panel or respond to the appeal without a Panel being convened.
3. In the event that an intern is filing a formal appeal in writing to disagree with a decision that has already been made by the Review Panel and supported by the Director of HR, then that appeal is reviewed by the applicable Vice President in consultation with the Frontier Health Management Team. The applicable Vice President will determine if a new Review Panel should be formed to reexamine the case, or if the decision of the original Review Panel is upheld.

Grievance Procedures

A: Basic Procedures

In the event an intern encounters difficulties or problems other than those stemming directly from evaluations (e.g. poor supervision, unavailability of supervisor(s), workload issues, personality clashes, other staff conflicts) during his/her training program, an intern can:

1. Discuss the issue with the staff member(s) involved to attempt informal resolution
2. If the issue cannot be resolved informally, the intern should discuss the concern with the TD who may then consult with the Director of HR, other staff members, or the applicable Vice President if needed (if the concerns involve the Supervisor or the TD, the intern can consult directly with the applicable Vice President)
3. If the supervisor, TD, and/or Director of HR cannot resolve the issue of concern to the intern, the intern can file a formal grievance in writing with all supporting documents to the Director of HR.

B: Implementation of Review

When the Director of HR has received a formal grievance, within 3 work days of receipt, the Director of HR will implement Review Procedures as described below and inform the intern of any action taken.

C. Review Procedures / Hearing

1. When needed, a Review Panel will be convened by the Director of HR to make a recommendation to the TD about the appropriateness of a Remediation Plan/Sanction for an intern's problematic behavior or to review a grievance filed by an intern.
 - a. The Panel will consist of three staff members selected by the Director of HR with recommendations from the TD and the intern who filed the appeal or grievance. The Director of HR will appoint a Chair of the Review Panel.
 - b. In cases of an appeal, the intern has the right to hear the expressed concerns of the internship and have an opportunity to dispute or explain the behavior of concern.
 - c. In response to a grievance, the intern has a right to express concerns about the internship or Frontier Health staff member, and the Frontier Health program or staff has the right and responsibility to respond.
2. Within 5 work days, a Panel will meet to review the appeal or grievance and to examine the relevant material presented.
3. Within 3 work days after the completion of the review the Panel will submit a written report to the Director of HR, including any recommendations for further action. Recommendations made by the Review Panel will be made by majority vote if a consensus cannot be reached.

4. Within 3 work days of receipt of the recommendation, the Director of HR will either accept or reject the Review Panel's recommendations. If the Director of HR rejects the recommendation, the Director of HR may refer the matter back to the Panel for further deliberation and revised recommendations or may make a final decision.
5. If referred back to the Panel, a report will be presented to the Director of HR within 5 work days of the receipt of the Director of HR's request of further deliberation. The Director of HR then makes a final decision regarding what action is to be taken and informs the TD and the intern's supervisor(s).
6. The Training Director and/or supervisor informs the intern, staff members involved, and necessary members of the training staff of the decision and any action taken or to be taken.
7. If the intern disputes the Director of HR's final decision, the intern has the right to appeal through following steps outlined in Appeal Procedures (*Section D of Due Process Procedures*).

For more information please contact: pvisser@frontierhealth.org

ADDENDUM H

Sample Didactic Calendar

Date	Presentation	Presenter
8/3/16:	Orientation to the FHSDIP/Expectations for the Training Year	Diane Whitehead, Ph.D Preston Visser, Ph.D.
8/10/16:	DSM V Training	Margaret Bloom, Ph.D.
8/17/16:	Appalachian Culture	Ken Taylor, LPC
8/24/16:	Acceptance and Commitment Therapy	Preston Visser, Ph.D.
8/31/16:	Meaningful Use, Compliance, Values-Based Reimbursement, HIPAA	Diane Bowen, M.Ed.
9/7/16:	Crisis Management	Cicely Brooks, LMSW
9/14/16:	ARC Model for Attachment Trauma	Jon Ebert, Psy.D.
9/21/16:	Stages of Change	Diane Whitehead, Ph.D.
9/28/16:	Motivational Interviewing	Preston Visser, Ph.D.
10/5/16:	Selecting and Adapting Assessment Instruments	Jorge Fuchs, LSPE
10/12/16:	Family Assessment and Therapy	Lindsay Castillo, Psy.D.
10/19/16:	Using projective assessment measures	Farah Williams, Ph.D.
10/26/16:	TF-CBT	Tim Perry, LPC
11/2/16:	Illness Management and Recovery	Chris Braddock, M.A.
11/9/16:	Residential Services, Working with those in State Custody	Kim Trantham, LCSW
11/16/16:	A&D COD -Assessment, Treatment ,Client, Family, Community	Randy Jessee, Ph.D.
11/23/16:	<i>NO didactic d/t holiday</i>	
11/30/16:	Ethics in the Age of the Internet and Social Media	Preston Visser, Ph.D.
12/7/16:	Consultation in Psychology	Chris Dula, Ph.D.
12/14/16:	Anger Management	Chad Duncan, LCSW
12/21/16:	Working with Sex Offenders	Jill Stinson, Ph.D.
12/28/16:	<i>No didactic d/t holiday</i>	
1/4/17:	Challenges in Community Mental Health, Behavioral Health Homes	Teresa Kidd, Ph.D.
1/11/17:	<i>Internship Interview Day</i>	
1/18/17:	Couples Therapy in Community Mental Health	Sheila Talley, LMFT
1/24/17:	Real World DBT: Adapting DBT to Fit Your Practice	Mark Carlson, Psy.D.
2/1/17:	Pediatric Primary Care Psychology	Natasha Gouge, Ph.D.
2/8/17:	Case Management Services	Ginger Naseri, LCSW

2/15/17:	Neuropsychology in the Real World	Eric Roth, Psy.D.
2/22/17:	Introduction to EMDR	Jane Fanslow, LPC
3/1/17:	Forensic Assessment and Psychologists Role in the Court Process	Farah Williams, Ph.D.
3/8/17:	Primary Care Integration	Brandon Bogle, Ph.D.
3/15/17:	Vocational Rehabilitation Services in CMH	Mary Fultineer, B.A., CPRP
3/22/17:	Working with Minority Groups in the Appalachian Region	Celinda Fuchs, BA
3/29/17:	Theories and Methods of Supervision	Preston Visser, Ph.D.
4/5/17:	Diversity as Pertains to the Person of the Therapist	Diane Whitehead, Ph.D.
4/12/17:	Pharmacology: What a Psychologist Should Know	Allen Musil, M.D.
4/19/17:	Suicide Prevention	Kathy Benedetto, LSPE
4/26/17:	Psychological Interventions for ADHD in Children and Adults	Angela Hilton-Prillhart, Ph.D.
5/3/17:	Parent-Child Interaction Therapy	John Paul Abner, Ph.D.
5/10/17:	Effective Assessment and Treatment for People with Eating Disorder	Jill Stinson, Ph.D.
5/17/17:	Best Practices in Assessment of Autism Spectrum Disorders	Angela Hilton-Prillhart, Ph.D.
5/24/17:	Services for At-Risk Children and Families	Michele Moser, Ph.D.
5/31/17:	Preparing for the EPPP and a Life of Professional Practice	Lindsay Castillo, Psy.D.
6/7/17:	Ethical Practice and Promoting Accessible Services for the Underserved	Preston Visser, Ph.D.
6/14/17:	Group Therapy in Community Mental Health	Faith Mahoney, LPC
6/21/17:	<i>Intern Presentation - 1</i>	
6/28/17:	<i>Intern Presentation - 2</i>	
7/5/17:	<i>Intern Presentation - 3</i>	
7/12/17:	<i>Intern Presentation - 4</i>	
7/19/17:	<i>Intern Presentation - 5</i>	
7/26/17:	Final Didactic	Preston Visser, Ph.D.

References

American Psychological Association. (2002). *American Psychological Association ethical principles of psychologists and code of conduct*. Retrieved October 22, 2014 from <http://www.apa.org/ethics/code/principles.pdf> October 22, 2014.

National Rural Health Association Policy Position (2008). Workforce Series: Rural Behavioral Health. *Recruitment and retention of quality health workforce in rural areas: A series of policy papers on rural health careers pipeline, paper #5*. Accessed from www.ruralhealthweb.org October 22, 2014.