DOCTORAL PSYCHOLOGY INTERNSHIP PROGRAM
POLICIES AND PROCEEDURES

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DOCTORAL PSYCHOLOGY INTERNSHIP PROGRAM
POLICIES AND PROCEDURES

The Louise R. Goldhagen Multidisciplinary Evaluation and Consulting Center (MDC) is a university-based training program located within the College of Social Work on the Florida State University campus in Tallahassee, Florida. The MDC provides a range of psychological services to children and adolescents and their families, including diagnostic, therapeutic and consultation services. The MDC team includes professionals from Clinical, School, and Counseling Psychology, Counseling Education and Social Work, and works closely with the FSU Center for Autism and Related Disabilities, the Autism Institute at the College of Medicine, and the FSU College of Communication Disorders. Clients are referred by 20 school districts and a number of medical and community agencies.

The MDC was formed in 1983 with a grant issued through the Florida legislature. Graduate students from Florida State University (FSU) and Florida A&M University have completed practica through the MDC since its inception. Doctoral psychology internships began in 1994 and the MDC joined the Association of Psychology Postdoctoral and Internship Centers (APPIC) in 1995. The internship was accredited by the American Psychological Association in 2007. (Contact the CoA at (750 First Street NE, Washington DC 20002-4242; (202) 202-336-5979)

PROGRAM OBJECTIVES

The primary purpose of the Doctoral Psychology Internship Program at the MDC is to prepare psychology graduate students for the professional practice of psychology in a variety of settings (e.g., school, clinic, private practice, etc.).

Exposure to a variety of settings and mentors/supervisors is an integral feature of this internship. Diversity of training is promoted through participation in a variety of therapy and assessment experiences in each setting.

Clinical assignments are based on the intern’s training goals and experience level, with increasing complexity and autonomy anticipated as the year progresses. Each intern is expected to be a contributing member of the MDC staff and, as the intern demonstrates skill development, responsibilities will also increase.
MODEL OF TRAINING

The Doctoral Psychology Internship Program at the MDC is guided by the Practitioner-Scholar Model. This model emphasizes developing professional competencies that are based on current research, scholarship, and practice. Interns are assisted in developing and expanding their skills in scholarly inquiry within the context of their clinical experiences. Interns are encouraged throughout the year to develop and utilize their critical thinking skills, their knowledge of the scientific literature, and their ability to evaluate new research findings as a basis for the practice of professional psychology. This is accomplished through mentoring and modeling, individual and group supervision, formal and informal consultation, case assignments, training placements, in-service training, attendance at professional conferences and workshops, and assigned readings.

INTERNSHIP MANAGEMENT

A. Administrative Psychologists. Responsibility for the internship rests with the MDC Director, the Director of Training, the Director of Practicum Training, the Director of Consultation Services, and the Director of Mental Health Services. These administrative psychologists are the primary supervisors of the interns and approve intern assignments as well as other training activities.

B. Director of Training. The Director of Training (DOT) is the overall supervisor of the internship program. She/he is assigned responsibility for administration of the internship and ensuring that training standards are met.

1. Selection. The DOT is appointed and serves at the discretion of the MDC Director. Appointment as the MDC DOT is limited to persons meeting the following criteria:

(a) Earned doctorate in psychology
(b) Completion of an internship in clinical, counseling, or school psychology
(c) Licensed under Florida Statute 490 as "Psychologist" and/or “School Psychologist”
(d) Florida State University Employee

2. Terms of office. Appointment as DOT is for a term so designated by the MDC Director.
3. Responsibilities. A number of functions explicitly assigned to the DOT include:

(a) Chairing the Internship Committee.
(b) Coordinating intern recruitment and selection.
(c) Coordinating the selection and assignment of expectations and performance evaluations.
(d) Reviewing performance expectations and performance evaluations with interns and supervisors.
(e) Coordinating seminar schedules and other special training events.
(f) Assuring the internship continues to meet requirements for APPIC membership and APA accreditation.
(g) Monitoring supervision.
(h) Coordinating intern evaluations and reports to graduate schools.
(i) Reporting to the Administrative Psychologists on the operation of the internship program.

C. Internship Staff

1. Staff. The Internship Staff includes the following:

(a) Center Director
(b) Director of Training
(c) Director of Practicum Training
(d) Director of Consultation Services
(e) Director of Mental Health Services
(f) Psychology Staff as appointed by the MDC Director and the DOT

2. Eligibility. Appointment to the internship faculty is limited to persons meeting the following criteria:

(a) Earned doctorate in psychology
(b) Completion of internship in clinical, counseling, or school psychology
(c) Licensure under Florida Statute 490 as "Psychologist" or "School Psychologist"
(d) Full-time or part-time employment at the MDC

3. Term. Appointment as a member of the Internship Staff is for a term so designated by the MDC Director.
4. **Responsibilities.** Internship staff provide individual intern clinical supervision, coordinate intern seminars, and provide consultation and administrative services to the interns.

D. **Internship Committee**

1. **Membership.** Membership of the Psychology Internship Committee includes the following:

   (a) MDC Director
   (b) Director of Training
   (c) Director of Practicum Training
   (d) Director of Consultation Services
   (e) Director of Mental Health Services
   (f) Psychology staff as appointed by the MDC Director
   (g) Interns

2. **Responsibilities.** The Psychology Internship Committee is the primary forum for training matters. Votes by the Committee reflect the judgment of the Committee.

3. **Meetings.** The Psychology Internship Committee meets at least once a year. Special meetings may be called by any member of the Internship Staff.

**ADMISSIONS**

A. **Eligibility for Internship Training**

1. **Required.** Applicants for the Doctoral Internship Program at the MDC are required to meet **each** of the following criteria:

   (a) Graduate student in an APA approved psychology doctoral program.
   (b) At least two years of graduate education have been completed in psychology.
   (c) Endorsement from the applicant's director of graduate training that the applicant is prepared for internship.
   (d) Completion of at least 1000 hours of supervised practicum experience.
   (e) Child-based assessment experience; broad-based training in child psychology, exposure to empirically supported treatments.
   (f) Must pass criminal background check.
2. **Diversity.** The internship endeavors to recruit interns from different ethnic, racial and personal backgrounds. Variations in experience and theoretical approach are welcomed.

B. **Publicizing the Internship.** The internship is publicized annually to attract a pool of applicants which is adequate in quantity and quality. The MDC maintains membership in the Association of Psychology Postdoctoral and Internship Centers. Potential applicants can learn more about the MDC’s internship program through the APPIC directory or by reviewing our website (http://mdc.fsu.edu/).

C. **Admissions Process**

1. **Required application materials.** The completed internship application consists of the following documents to be submitted via the APPIC Online AAPI by the application deadline to be considered for interviews (to be conducted in early January)

   (a) A completed "APPIC Uniform Internship Application" (AAPI) (on-line)
   (b) A copy of the applicant’s curriculum vita
   (c) A copy of official transcripts of all graduate education
   (d) Three letters of recommendation from psychologists/supervisors
   (e) Copy of verification of internship eligibility and readiness form (with Part II of the APPI)

2. **Applicant review.** The DOT reviews applications on-line and selects those applicants to be offered interviews. If preliminary information received indicates that an applicant does not meet minimum qualifications for interning at the MDC, the DOT advises him/her of this early in the application process.

3. **Personal interviews.** Personal visits by applicants to the MDC are encouraged but not required. The process for arranging personal on-campus interviews is as follows:

   (a) The DOT contacts applicants to inform them of possible interview dates
   (b) The DOT develops a schedule for the interviewees that includes:
       i. Large group meeting to familiarize applicants with the program
       ii. Tour of facilities
       iii. Lunch with current interns
       iv. Individual interviews with MDC staff
v. Question and Answer wrap-up
vi. Dinner with current interns (optional)

4. Intern selection process. The Intern Selection Committee includes the MDC Director, the Director of Training, the Director of Practicum Training, the Director of Consultation Services, and the Director of Mental Health Services, as well as other persons that may be designated by the DOT.

The Intern Selection Committee nominates interns for the upcoming year’s class as follows:

(a) The approved applicant files are reviewed by the DOT. Applicant records are available to members of the Selection Committee for inspection throughout the application process.

(b) The top 25 to 30 applicants will be offered personal and/or phone interviews

(c) Applicants are then interviewed by the Intern Selection Committee and ranked on a number of pre-specified criteria including academic preparation, letters of recommendation, assessment experience, therapy experience, goodness of fit and interview impressions obtained from the Committee and the Interns.

(d) Individual rankings by members are reduced to a single hierarchy to generate the final rank order list to be submitted to the internship match program.

5. Notification. As a member of the Association of Psychology Postdoctoral and Internship Centers, the internship adheres to the guidelines of the internship matching program as specified by APPIC (www.appic.org).
SUPERVISION ASSIGNMENTS

A. Policy. Diversity, intensity, and relevancy of training are promoted through participation in the delivery of a variety of psychological services including assessment, therapeutic intervention and consultation.

B. Considerations. Factors considered in making supervision assignments include each of the following:

1. The intern’s initial competencies in assessment, therapeutic intervention and consultation.
2. The expected competencies that the intern needs to achieve by the completion of the internship
3. The intern's training needs as perceived by individual intern and supervisors.

C. Procedure.

1. The training committee identifies supervisors and placements prior to the start of the internship. Given the small size of the internship staff, interns will have the opportunity to be supervised by a majority of the internship staff at some point. However, a doctoral level psychologist will assume primary responsibility for each intern.
2. Interns are encouraged to participate in additional training activities specific to their individual training goals and interests throughout the year.

D. Orientation. Interns participate in formal and informal orientation during the first two weeks of internship. During this time, interns are introduced to the program’s philosophy, mission, history, organization, staff, and policies and procedures. Background checks and fingerprinting are conducted in cooperation with local school districts. Interns are provided with access to the procedural manual via Blackboard as well as the most recent version of the APA Ethical Principles of Psychologists and Code of Conduct and are expected to carefully review these materials and ask for clarification, if needed.

During orientation, each intern is assigned a child to evaluate in the clinic. This evaluation is observed by a supervisor and feedback regarding test administration is provided. The remainder of the orientation is spent reviewing commonly used assessment instruments and exceptional student education criteria in Florida. In addition, didactic sessions are conducted on
specialized topics relevant to intern training placements (e.g., empirically validated treatments/interventions, response to intervention/problem solving, assessment and differential diagnosis). Interns also attend orientations in the outlying counties to meet with school staff and review school district policies and procedures. Interns are accompanied by their primary supervisor to these orientation meetings.

Interns also are engaged with their primary supervisor in delineating baseline competencies and training goals. At least one informal social occasion is organized to allow the interns to get to know one another and the MDC staff.

**CONTENT OF ASSIGNMENTS**

A. **Policy.** The intern's supervised experiences should be characterized by diversity and challenge. They are chosen to reflect the activities of psychologists working with children and families in clinical and school settings. Scholarly pursuit is an integral part of each internship activity and the program is designed to provide graduated, sequential training and skill building with each experience.

B. **Considerations.** Baseline competencies and interests of interns are used to guide the selection of placements. Given the small number of staff and the large geographical area served by the MDC, interns participate in several internship placements simultaneously throughout the year. This allows interns a full twelve month period to develop and refine skills within each area. The three primary areas of training are:
   1. psychological assessment
   2. group and individual therapeutic intervention
   3. consultative services in the school setting
Interns participate in the above experiences for the entire training year. Interns also participate one day a week in three specialized four-month rotations in:
   1. Assessment of Autism Spectrum Disorders
   2. Assessment of Attention Disorders
   3. Supervision of Psychology graduate students

C. **Training Areas.**

1. **Psychological assessment.** Psychological testing is one of the clinician's most valuable skills. While trainees typically arrive with considerable didactic background in psychological assessment, they are more limited in breadth and depth of
practical experience. Graduate training should, however, provide a firm base upon which to build expertise in the selection and use of different instruments.

During the entire training year, with increasing independence and proficiency, each intern will complete assessments in the school settings with formal and informal reporting of results and verbal presentation of results and recommendations to parents/guardians and school personnel. Types of evaluations will include assessments of intelligence, academic achievement, cognitive processing abilities, social and behavioral functioning, and personality and emotional functioning. In addition, for two consecutive four-month periods, interns are part of a clinical team and participate in weekly evaluations of children referred to the MDC for assessment of Autism Spectrum Disorder or Attention Disorders. After schools close for the summer, interns will complete a variety of assessments in the MDC.

Assessment competencies expected for each intern should go substantially beyond the administration, scoring, and interpretation taught in graduate school. Individual competencies emphasized are:

1. Proficiency in understanding multicultural applications and limitations of traditional psychological assessment procedures.

2. Proficiency in conducting comprehensive intake interviews with sensitivity toward client culture and characteristics.

3. Proficiency in selection of empirically-supported test instruments and standardized administration for a variety of presenting problems and clinical questions.

4. Proficiency in the ability to manage client behavior and modify the testing environment as needed.

5. Proficiency in generating comprehensive diagnostic formulation based on DSM-5 criteria.

6. Proficiency in test interpretation and integration of test results.

7. Proficiency in writing well-organized psychological reports in a timely fashion.

8. Proficiency in developing appropriate recommendations that address the referral question.
9. Proficiency in providing appropriate verbal feedback regarding test results that is understandable, useful, and culturally sensitive to parents, teachers and professionals.

10. Proficiency in resource and referral to appropriate community-based agencies.

11. Proficiency in knowledge of and adherence to the APA ethical guidelines for assessment.

2. School-based group and individual treatment. Training in therapeutic intervention is provided through the supervised delivery of both individual and group therapy. Emphasis is placed on empirically-based treatment approaches for children and adolescents presenting with a variety of emotional and behavioral problems. As part of the school-based therapy training component, interns interact on a regular basis with teachers and other school personnel to help generalize client skills addressed in therapeutic intervention, as well as to intervene in crisis situations. Opportunities for participation as a co-therapist or as the lead therapist vary with the site. It is typical for interns to have involvement with two or three groups and five or more individual clients per week throughout the school year, with increasing independence in the therapist role as the training year progresses. Interns are responsible for all administrative and clinical tasks associated with their caseloads.

Individual competencies emphasized are:

1. Proficiency in knowledge of and familiarity with empirically based interventions.

2. Proficiency in understanding individual, societal and cultural factors that may impact the therapeutic process.

3. Proficiency in relationship skills (e.g. communication, listening, empathy, warmth).

4. Proficiency in assessment/problem and issue formulation, critical analysis, and diagnosis.

5. Proficiency in formulating treatment plans based on theory and research knowledge specific to the individual or particular group dynamics.
6. Proficiency in evaluating and addressing crisis concerns such as suicidality, abuse, and other safety issues.

7. Proficiency in developing and maintaining professional relationships with co-therapists, school personnel and other professionals.

8. Proficiency in self-awareness (e.g., one’s strengths, weaknesses, biases etc.) and the ability to seek out and effectively use supervision.

9. Proficiency in evaluating the client’s progress and modifying the intervention for optimal treatment outcome.

10. Proficiency in knowledge of and adherence to the APA ethical guidelines for therapy.

3. School-based consultation services. The consultation experience during internship primarily takes place in the school setting. Interns are expected to work with teachers and other school personnel and professionals (consultees) on behalf of students (clients) experiencing behavioral and/or academic difficulties. Consultation services are primarily initiated through intern participation in their respective school Problem-Solving Teams (also referred to as Intervention Assistance Teams, RtI Teams, Student Intervention Teams, etc). In most school settings, interns will participate in a weekly team meeting, during which children about whom teachers have academic and/or behavioral concerns are brought to the team to engage in problem-solving using Florida’s Problem-Solving/Response to Intervention Model. Interns are expected to be active members of the team and may be asked to engage in any or all of the following activities during the remainder of their time in the schools:

(a) Classroom observations of students and/or teachers using structured, unstructured, and semi-structured methods (e.g. the Behavioral Observation of Students in Schools – BOSS; the Classroom Climate Form). This information is used to compare students to their peers, gauge level of student engagement, and compare students to predetermined behavioral/academic expectations.

(b) Teacher Interviews in order to gain a fuller understanding of the exact nature of the academic/behavioral concern(s),
including the frequency, duration, and intensity of the concerns, as well as interventions that have been attempted with the student(s) and the success of those interventions. Interns are also expected to solicit input from other professionals or personnel that work with the student(s) on a regular basis to provide a comprehensive profile of the child’s strengths and weaknesses.

(c) Review of records (cumulative school files, psychological files, etc). This may include reviewing files for one or more students, or reviewing school-wide or class-wide data to determine how intensive an intervention should be (e.g. with a small group of students, with an individual student, class-wide or school-wide).

(d) Screening/Assessment using standardized instruments (e.g. Woodcock-Johnson III Tests of Achievement, Woodcock-Johnson III Tests of Cognitive Abilities, Comprehensive Test of Phonological Processing, Vineland Adaptive Behavior Scales – Second Edition, Achenbach Teacher’s Report Form, etc) or curriculum-based measures (e.g. Dynamic Indicators of Basic Early Literacy Skills, measure of Oral Reading Fluency, etc).

(e) Functional Behavior Assessments

These activities culminate in an operational definition of the presenting problem (Problem Identification) and generation of hypotheses regarding the origin of the problem (Problem Analysis). This information is then used to design an empirically supported and/or evidence-based intervention targeted to address the specific concerns of the child or group of children in question. Interns are expected to design and help implement the respective interventions in the classroom context. It is appropriate for interns to teach, model, and observe teachers/administrators in the implementation of the intervention. As well, interns are expected to participate in the progress monitoring process once an intervention has been implemented. This may include observing the consultee to assess fidelity, re-teaching the intervention, providing a method for or assisting in the collection of progress-monitoring data, graphing performance to document success of the intervention, and/or revision of the intervention. In keeping with the Problem-Solving approach, interns may continuously cycle through this process through the course of the academic year.
Interns are also expected to assist Problem-Solving Teams in determining which students should be considered for Exceptional Student Education placement, as well as assist in the collection of the necessary data and documentation to support such a placement. For students that are candidates for placement in ESE, the intern is responsible for writing a comprehensive report that summarizes the problem-solving process, the student’s response to the implemented intervention, and any psychological testing that was completed.

Supervision is addressed via weekly supervision using group and individual formats.

Competencies assessed during the consultation component of training include:

1. Proficiency in knowledge of and familiarity with behavioral consultation models including the steps in problem-solving and evaluation of Response to Intervention (RtI).

2. Proficiency in understanding societal and cultural factors that may impact the interpretation of consultee and client problems.

3. Proficiency in developing professional and supportive relationships with teachers and other professionals.

4. Proficiency in communicating effectively regarding the purpose, sequence, and intended outcomes of consultation as well as each professional’s role in the consultation process.

5. Proficiency in identifying behaviors in need of intervention and communicating objective concerns to teachers and professionals regarding management and instructional practices, while simultaneously fostering investment in the consultation process.

6. Proficiency in the ability to locate, research, design, and implement empirically supported or evidence-based interventions for academic and behavioral concerns.

7. Proficiency in developing or strengthening a user-friendly data collection process for the consultee.
8. Proficiency in designing, modeling, and helping implement empirically supported interventions based on behavioral hypotheses derived from classroom observations.

9. Proficiency in applying behavioral and cognitive-behavioral principles throughout the problem-solving process.

10. Proficiency in assessing the fidelity of the intervention implementation.

11. Proficiency in collecting, graphing, and interpreting intervention data.

12. Proficiency in compiling and clearly communicating process and outcome information in a coherent written document.

4. **Description of four-month specialized training rotations.**
Interns participate in their assessment, therapeutic intervention, and consultation placements for the entire year. In addition, they participate in weekly specialized training experiences. The four-month rotations include:

(a) **Training in the Assessment of Attention Disorders:** Interns will spend one day a week during four months of their internship year completing specialized assessments of children and adolescents referred as possibly having symptoms consistent with Attention-Deficit/Hyperactivity Disorder. The Attention Disorders specialty clinic was developed due to both an increased demand for this type of services based on presentation of symptoms in the patient population and a match with clinical/research interests of Clinical Psychology faculty at the FSU and the MDC staff. The need for this type of evaluation was evident due to the high prevalence of the disorder, its debilitating effects on school and social functioning, as well as frequently co-morbid psychiatric conditions including depression and anxiety that all can have a significant impact on educational outcomes. Referrals for these evaluations will come from school districts or one of the community-based agencies served by the MDC.

Competencies assessed will include:

1. Proficiency in conducting intake interviews with parents or guardians focusing on psychosocial and developmental histories, as well as conducting semi-structured clinical
interviews with clients, parents/guardians and educators focusing on specific indicators of an attention disorder.

2. Proficiency in administration and scoring of specialized, empirically supported instruments used to diagnose Attention-Deficit/Hyperactivity Disorder, including behavior checklists and self-report instruments, formal psychological assessment tools, and structured in-school behavior observation systems.

3. Proficiency in using the DSM-5 criteria to confirm or rule out the presence of an attention disorder as well as other emotional or behavioral disorders of childhood.

4. Proficiency in writing a user-friendly, comprehensive assessment report that will allow families to access appropriate services at the school and community levels.

5. Proficiency in presenting assessment results and recommendations to both families and professionals in a sensitive, clear manner.

6. Proficiency, through scholarly pursuit, in demonstrating a scientific-based understanding of the current literature on the etiology and treatment of Attention-Deficit/Hyperactivity Disorder.

(b) Training in the Assessment of Autism Spectrum Disorders: The rapidly rising incidence of Autism Spectrum Disorders nationwide has highlighted the increased need for comprehensive assessments of the disorder that will allow families to access appropriate services for their children both at the school and community levels. This is particularly true in our rural area where psychological services are limited in number and scope. As a result of this, the MDC has teamed with the FSU Center for Autism and Related Disabilities to develop a comprehensive assessment protocol. Interns will spend one day a week across a four month interval of their internship year completing specialized assessments of children and adolescents to confirm or rule out Autism Spectrum Disorders. Interns will participate on a clinical team comprised of members of the MDC staff and other interns; as well, staff members from the FSU Center for Autism and Related Disabilities (CARD) are routinely invited to participate in team activities. Referrals for these evaluations will come directly from the CARD, from one of 20
school districts, or one of the community-based agencies served by the MDC.

Competencies assessed will include:

1. Proficiency in conducting intake interviews with parents or guardians focusing on psychosocial and developmental histories and specific indicators of an Autism Spectrum Disorder.

2. Proficiency in administration and scoring of specialized, empirically supported instruments used to diagnose Autism Spectrum Disorders, including the Autism Diagnostic Observation Schedule, Second Edition (ADOS-2).

3. Proficiency in using the DSM-5 criteria to differentially diagnose autism spectrum disorder and/or other childhood mental health disorders.

4. Proficiency in writing a user-friendly, comprehensive developmental assessment report that will allow families to access appropriate services at the school and community levels.

5. Proficiency in presenting assessment results and recommendations to both families and professionals in a sensitive, clear manner.

6. Proficiency, through scholarly pursuit, in demonstrating a scientific-based understanding of the current literature on the etiology and treatment of Autism Spectrum Disorders.

(c) Training in supervision.

The MDC recognizes the unique opportunity that its organizational structure provides for interns to gain hands-on supervision experiences under the careful scrutiny of training faculty. The MDC subscribes to the definition of supervision as outlined in the 2002 Competencies Conference: Future Directions in Education and Credentialing in Professional Psychology. Supervision is defined as “An intervention provided by a more senior member of a profession to a more junior member or members of that same profession. This relationship is evaluative, extends over time, and has the simultaneous purposes of enhancing the professional functioning of the more junior person(s), monitoring the quality of professional services offered to
the client(s) she, he, or they see(s), and serving as a gatekeeper of those who are to enter the particular profession.” (Goodyear, Competencies Conference 2002)

Training in supervision is accomplished through several different means.

1. Interns supervise practicum students who work alongside them in the school districts. The interns help train the practicum students in structured observations, teacher interviewing, and cumulative file review. Along with their primary supervisor, they guide the practicum students in the work they complete in the school districts. This training in supervision is supervised by the intern’s primary supervisor as well as during the consultation supervision.

2. In the final three months of the internship, interns will be assigned to supervise individual students from psychology programs at Florida State University. During the three months, the Director of Practicum Training leads the interns in a weekly meeting, which explores the following topics in supervision: components and roles of, theories, methods and techniques, the role of the relationship, helping the supervisee grow and develop, difficult supervisees, ethical/legal issues, multicultural issues, administrative tasks, personal development, and closure.

For this rotation, interns supervise doctoral students from Florida State University (FSU), who are in graduate level Psychology and/or Social Work programs. The students from FSU are completing a practicum placement at the Center. Each intern will be assigned one graduate student and together they will co-lead a therapy group. The intern will function as the student’s supervisor, under the supervision of the licensed psychologist who directs the Center’s School Mental Health program. The clients for these groups are referred through Children’s Medical Services, a state agency that serves low income children with chronic medical issues. Some groups involve the children and some involve their parents. Group topics vary according to the needs of CMS at the time. Possible topics include: A Cognitive-Behavioral Approach to Managing Internalizing Behavior in Children, Teaching Social Thinking and Social Skills to Children, Parent Mindfulness with Preschoolers, Emotional Regulation and Distress Tolerance in Young Adolescents, and Anger Management.
3. Interns gain some supervisory experience in late spring, when they have the opportunity to assess the skills of graduate students in administering psychological assessments. The interns work with graduate students who are beginning training at the Adult Learning and Evaluation Center (ALEC), which is under the Department of Educational Psychology and Learning Systems.

Intern competencies assessed in supervision over the course of the internship year will include:

1. Proficiency in knowledge of supervision models and the supervisory process.

2. Proficiency in sensitivity to issues related to multicultural factors that can affect the supervisory process.

3. Proficiency in the ability to assess the learning needs and developmental level of the supervisee.

4. Proficiency in the ability to build a supervisory relationship and alliance, including the ability to provide effective feedback that will promote growth and self-assessment in the supervisee.

5. Proficiency in the ability to evaluate the progress of the supervisee.

6. Proficiency in self-assessment and awareness of need for consultation when necessary.

SUPERVISION AND DIDACTIC TRAINING

A. Supervision. Interns receive a minimum of one hour of weekly individual, face-to-face supervision with their primary supervisor. The primary supervisor is responsible for individual supervision of the intern’s school-based assessment activities. A second hour of individual supervision is with the Director of Mental Health Services. The Director of Consultation Services is responsible for facilitating a weekly, hour-long group supervision meeting during which all interns and supervisors meet to discuss cases, process administrative and procedural issues, and participate in training in the use of empirically supported interventions. The Director of Consultation Services initially provides training on a variety of topics (e.g.
conducted FBA’s, understanding Florida’s model of problem-solving). Interns are then expected to provide didactic trainings across the remainder of the fall and spring semester; fall training must focus on empirically supported behavioral interventions and spring training must focus on empirically supported academic interventions. Specialty evaluations for Attention Disorders or Autism Spectrum Disorder are supervised by licensed psychologists with expertise in those areas. Supervision for specialty evaluations is provided in weekly group meetings during those rotations. Interns are provided with in-depth training in identification of these disorders, differential diagnosis, specialized instruments, and direct supervision of their cases. As well, interns in the ASD clinic are expected to read 1-2 research articles regarding a topic relevant to ASD and present on their readings to the group each week. Interns’ training in supervision is supervised by the Director of Practicum Training, again in weekly group meetings during that rotation. Individual supervision for consultation cases, specialty evaluation cases, and supervisory activities is also provided on an as-needed basis.

1. **Appointment of supervisors.** The Director of Training appoints the primary supervisor for each intern.

2. **Selection standards for primary clinical supervisors:**
   Minimum standards for appointment as primary intern supervisor are:
   (a) Earned doctorate in psychology.
   (b) Completion of an internship in clinical, school, or therapeutic intervention psychology.
   (c) Licensure under Florida Statute as "Psychologist and/or School Psychologist".
   (d) Knowledgeable and experienced in the activities to be supervised.

3. **Selection standards for secondary clinical supervisors:**
   Minimum appointment standards for secondary supervisors are:
   (a) Member of the MDC staff
   (b) Advanced degree appropriate for their discipline
   (c) Licensure appropriate for their discipline
   (d) Knowledge and experienced in the activities to be supervised

4. **Term.** Supervision assignments are for the duration of the internship year.

5. **Supervision sessions.** The basic structure for individual supervision is scheduled, one-to-one, face-to-face discussion of
relevant professional clinical activities and progress towards training goals. Unscheduled conferences may also be held, but do not substitute for structured supervision.

6. **Supervision hours.** Minimum supervision hours per week will be at least two individual, face-to-face hours per week, which will be supplemented by two or more hours of group or individual supervision.

7. **Documentation.** Supervision contact is documented by the intern as required by their academic program. Notes on intern’s current clinical cases are also kept by supervisors.

8. **Work products.** Supervisors co-sign all work products, including progress notes, written reports, letters, etc. Confidentiality of submitted documents is maintained following standard MDC policy.

9. **Confidentiality.** It is the responsibility of the supervisor to assure that MDC policies regarding confidentiality and security of records are maintained. Interns are informed of these policies during orientation and indicate their awareness of and obligation to follow these policies.

B. **Didactic Seminars.** In addition to practical experience and individual supervision, interns participate in weekly seminars.

1. **Seminar content and schedule.** The schedule of seminars is determined and publicized by the DOT as each topic is identified. Typical seminars at the MDC include the scope of practice and expertise of psychologists, physicians, social workers, school personnel, and other experts in various fields related to the practice of psychology. Each intern is required to present a one hour seminar to the MDC staff during the second half of their internship year on a topic previously agreed on by the DOT and the intern.

2. **Seminar structure.** Information is presented in lecture and demonstration format. Involvement of other MDC staff, including psychology staff, is encouraged.

3. **Attendance.** Seminar participation is mandatory. Except for authorized absence from the MDC, interns are expected to attend every meeting and every seminar. The DOT is required to maintain an attendance roster.
C. **Colloquia.** Interns will have the option to attend seminars and colloquia sponsored by academic departments as they are available (e.g. Psychology, Education, Social Work, and College of Medicine). Interns are also apprised by the DOT of other local, regional, and state training opportunities available. Funding will be provided for at least one local workshop or training during the course of the year.

**PERSONNEL POLICIES**

A. **Employment.** All the MDC Doctoral Psychology interns are assigned to the MDC Director. Interns report to the director for administrative and management matters.

B. **Pay and Benefits.**

1. **Training stipend.** The intern’s stipend provides not less than $18,000 for one full year, paid biweekly.

   (a) Health Insurance through Blue Cross Blue Shield of Florida may be purchased individually through the FSU Thagard Student Health Center.

2. **Attendance/Vacation/Leave Policies.**

   Dependable and prompt attendance is an essential function of every staff and intern position at the Multidisciplinary Center. Any planned absences should be scheduled and approved well in advance.

   The following nine days have been designated as official University holidays and interns will have these days off as well as staff: Labor Day; Veterans Day; two Thanksgiving Holidays; Christmas Day; New Year’s Day; MLK B-Day; Memorial Day, July 4.

   In addition, the university will close the last week of December and interns will have these days off. The center does not close for spring break as many of our counties have different break dates.

   **Other** leave will be divided into sick and annual leave.

   Interns will be given a maximum of 13 days of sick leave to be used only in the event of illness. This includes time for medical or dental appointments for the intern or their immediate family members. Sick leave may not be transferred to annual leave hours.
Total annual leave for interns will be capped at 13 days. Annual leave is defined as time off for vacation or professional development. Professional development is defined as time off for professional conference attendance, dissertation defense, and job or postdoctoral interviews. Interns are not allowed to take leave on more than one Friday and one Monday per semester so as not to disrupt specialty clinic participation or supervision time.

Interns taking annual leave for any reason will first receive approval by their primary supervisor and the director. All leave hours will be tracked by the staff and reviewed regularly. Leave forms should be completed and submitted to supervisors for signatures for both annual and sick leave.

C. **Fingerprinting/Level 2 Background Screening.** All MDC personnel, including interns, who are permitted access on school grounds when students are present or have direct contact with students, are required, prior to beginning work, to meet Level II screening requirements of Sections 1012.32 & 435.04 of Florida Statutes. Once the screening is complete and the intern is cleared, a laminated card will be issued by Leon County Schools. This card will be checked upon entering schools in the districts that are served by the MDC.

D. **Duty Schedule.**

1. **Working hours.** Accreditation requirements and the MDC Doctoral Psychology Internship Program expect 2,000 hours of supervised experience and training.

   (a) The internship program obligates interns for forty hours per week duty.

   (b) Unless specifically excused, interns are required to be at their assigned placements from 8:00 a.m. until 4:30 p.m., Monday through Friday. Deviations from standard hours require approval by the supervisor and the director.

2. **Training year.** The beginning and ending dates of the training year are published in advance on the internship website as well as the APPIC directory. Typically, the internship year runs from August 1 through July 31.
E. Living and Transportation Arrangements.

1. Interns are responsible for arranging their own living accommodations.
2. Interns are responsible for making their own commuting arrangements.
3. Interns will be reimbursed for mileage monthly relevant to placement travel.

TRAINING RESOURCES

A. Policy. An active training program requires provision of adequate facilities and services by the sponsoring agency.

1. Procedures. The customary support available to other staff at the MDC is available to interns, following standard MDC policies and procedures.
2. Responsibility. The individual supervisor is responsible for the provision of necessary support services and responsible for accessing off-site services.

B. Offices. We believe that the more thoroughly integrated the intern's activities are with those of the MDC staff, the more rewarding is the training experience.

1. Location. Interns are assigned offices that are located in the site of their major clinical experience. Although it is not encouraged, it is permissible for interns to share offices with members of the staff in some cases. Interns sharing offices with their primary supervisor is expressly forbidden.

C. Clerical Support. Interns are accorded the same clerical and administrative assistance as are staff psychologists.

D. Additional Support. Telephones and computers are made available for the interns to use during their internship. Interns are also provided access to high speed internet and email accounts. Interns are also provided with university identification cards which allow them access to the major university library, which is located on the FSU campus. Interns have access to all testing equipment and materials for therapeutic intervention activities with children.

E. Blackboard. Interns have access to the MDC’s Blackboard site, an on-line academic learning management system. This
comprehensive resource has an intern-only section for intern training materials (e.g., scholarly articles, report writing tools, materials for school-based activities, power point presentation, etc.) documents and information related to all the specialty clinics as well as psychological assessment and their school based placements.

OUTCOME EVALUATION

A. **Policy.** The internship evaluation process should be continuous and mutual. The Director of Training is responsible for systematic evaluation of intern progress and program adequacy.

B. **Ratings of Intern Performance.** Supervisors may formally or informally evaluate interns at any time during the training year, and submit assessment of intern performance to the Director. Supervisors formally assess the performance of their assigned interns three times during the training year, at 4, 8, and 12 months. For Intern evaluations completed in December and April, all competency areas are expected to be rated at a level of competence of “Needs regular supervision” or higher. No competency areas are expected to be rated as “Needs remedial work”. For intern evaluations completed at the end of the internship program, at least 80% of the competency areas are expected to be rated at a level of competence of “Needs occasional supervision” or higher. No competency areas are expected to be rated as “Needs remedial work.”

1. **Schedule.** Interns are evaluated three times during the training year using the Psychology Intern Competency Assessment Form. (See Appendix.)

2. **Contents.** Supervisor ratings of interns focus on the following areas:

   (a) General professional and ethical competencies
   (b) Competence in psychological assessment
   (c) Competence in psychotherapeutic interventions
   (d) Competence in professional consultation
   (e) Competence in supervision
   (f) Competence in scholarly pursuit
   (g) Competence in issues of individual and multicultural diversity
3. **Procedure.** The rating procedure is initiated by the DOT:

   (a) The DOT distributes the "Psychology Intern Competency Assessment Form" to supervisors seven days before the end of the rating period.

   (b) Supervisors:
       i. evaluate interns on the schedule.
       ii. share completed evaluation forms with the intern.
       iii. request the intern sign the evaluation form.
       iv. meet with the DOT to discuss the form.

   (c) The DOT
       i. maintains copies of all evaluation forms in the interns’ files.
       ii. provides copies of all evaluations to the interns’ university training director upon request.

4. **Problematic intern performance.** Any concerns or difficulties that are identified during the evaluation period may be addressed by the appropriate steps listed under the problematic intern performance. Grievance procedures are outlined in the next section of this document.

C. **Ratings of Training Experience.**

1. **Schedule.** Interns rate their experiences at the end of each semester using the Supervisor Evaluation Form. (See Appendix.)

2. **Contents.** Interns are asked to evaluate their supervisors with respect to training activities pertaining to psychological evaluations, therapeutic intervention, consultation, mentoring, supervisory relationship and interaction.

3. **Procedure.** The rating procedure is initiated by the DOT:

   (a) The DOT distributes the Supervisor Evaluation Form to interns seven days before the end of the rating period.

   (b) Interns rate each supervision experience on the rating forms and then turn them over to the DOT.

   (c) In addition to use of the above form, the DOT has an individual interview with each intern at the end of each semester to provide time in which the intern can discuss the experience and make suggestions for change.
D. **Communications with Graduate Schools.** The DOT is responsible for notifying graduate programs in writing that their students have been selected for internship within 72 hours of the match. A final letter summarizing the training year will be sent upon the completion of internship. Informal communication between the DOT and the graduate program is encouraged at any time during the year. When major changes in the structure of the internship occur, the DOT will inform the graduate program faculty contact.

1. **Schedule.** Summarized results are mailed at the end of the year.

2. **Contents.** Reports to the departments outline the range of the intern’s experiences, and summarize supervisor ratings of intern performance. The final letter summarizes the entire year’s performance.

E. **Program Self-assessment and Quality Enhancement:** Consistent with concerns regarding accountability and outcomes of services, the MDC is committed to multiple-level program evaluation.
INTERN GRIEVENCE PROCEDURE

A. Policy. The MDC Doctoral Psychology Internship Program follows the standard MDC grievance policy.

B. Responsibility. It is the responsibility of the DOT to inform each new class of interns and supervisors of the official grievance policy. This is completed during orientation on the first day of the internship this information is provided to each intern via the blackboard website.

C. Purpose. The general purpose of the Grievance Procedure is to provide a structured means by which an intern may seek formal resolution to personal, professional, or ethical conflicts involving other interns and staff members. The intern is treated in a manner generally similar to staff members who have such concerns. These procedures are designed to be consistent with Principle 1 (Resolving Ethical Issues) of the Ethical Principles of Psychologists and Code of Conduct (American Psychological Association, 2002). The second purpose of the Grievance Procedure is to provide a means by which a training staff member can address specific concerns about an intern. These two situations will be addressed separately.

1. Psychology intern grievance procedure

   (a) The intern is fully expected to first discuss the conflict directly with the person with whom the intern has the grievance in an effort to resolve the problem.

   (b) If the matter cannot be resolved informally, the intern should discuss the concern with their immediate supervisor, unless this person is the subject of concern, in which case the intern should go directly to the Director of Training. If the intern’s informal attempts to resolve the grievance are unsuccessful, the intern may submit a formal, written grievance to the MDC Director, outlining the specifics of the grievance with all supporting documents, including attempts to solve the problem informally, and the request for a hearing to resolve the matter. If the intern is challenging a formal evaluation, they should do so within five days of receipt of the evaluation. Throughout this procedure, the sponsoring university faculty advisor is kept appraised of the intern’s grievance and subsequent procedures. The DOT
communicates a number of times with the sponsoring university faculty advisor. In addition, the DOT requests the graduate program’s policies and procedures for identifying and dealing with the problem trainees.

(c) The MDC Director will review the issue based on the materials supplied by the intern and the subject of the grievance and will then appoint a Hearing Committee consisting of two supervisors (one of which will be the Director of Training unless that person is named in the grievance). This committee will meet with the intern to resolve the grievance after reviewing the relevant material and will submit a formal written recommendation to the MDC Director. The MDC Director has final discretion regarding outcome within the MDC. The MDC Director then informs the intern, staff members involved, graduate training director and if necessary, members of the training staff of the decision and any action taken or to be taken.

(d) If the intern disputes the MDC Director’s final decision, the intern has the right to appeal, which must be in writing and submitted to the MDC Director. In cases involving breach of civil law, including discrimination or sexual harassment, the intern may consider appealing directly to the Employee Relations Department or to the Executive Assistant to the President for Human Resources. The intern also has the civil right to pursue concerns through any legal means outside and beyond the MDC regardless of the nature or seriousness of the concern.

2. Problematic intern performance – grievance procedures

(a) The supervisor is fully expected to first discuss the problem directly with the intern and try to resolve issues informally.

(b) When it is recognized that an intern needs more intense remedial work, the Psychology Intern Competency/Assessment form is filled out and shared with the intern and the DOT. A written remedial plan is developed with the supervisor and intern and includes specific competencies to be addressed, corrective actions to be undertaken and dates for completion. The remedial plan is reviewed and signed by both the
supervisor and intern. Weekly supervision includes review of the plan and the specific corrective actions to insure that the intern is making satisfactory progress. At the end of the specified period, the Psychology Intern Competency/Assessment form is again completed. This is reviewed with the intern and shared with the DOT. In addition, the supervisor and the DOT provide the intern with a detailed letter outlining the extent to which the corrective actions specified in the remedial plan have or have not been successful in addressing the competency goals of concern. If the remedial plan has not been successful, a review committee, consisting of the MDC Director, the DOT, and the intern’s supervisor, reviews all the specifics of the competency goals of concern, the remedial plan, the intern’s efforts with the specific corrective actions and the current outcome of those actions. The intern may also submit any documentation concerning the competency goals of concern and the remedial plan. Throughout this process, the DOT engages in regular communication with the intern’s graduate advisor from his or her sponsoring university. At the end of this process, the committee can choose to recommend:

i. No further action taken.
ii. Continued implementation of the above-outlined remedial plan, with modifications if needed, for a specified period of time, with another review at the end of that period, or
iii. Immediate dismissal from the program.

At this point, the intern may either:

i. Agree with the decision
ii. Challenge the decision using the steps outlined in section of the Psychology Intern Grievance Procedures

RESEARCH

1. Basic guidelines. Supervisors and interns need to adhere to the following elementary rules when considering conducting research, including dissertation research, at the MDC.

(a) The internship year is principally an experience in applied training; research is of subordinate importance.

(b) Research activities must be conducted within the limitations of internship commitments and available time. Interns should anticipate that preparing and
conducting research will require initiative and exertion outside of the normal training schedule.

(c) Research activities are conducted in accordance with the MDC policies and requirements of the Florida State University. These requirements include compliance with rules involving client’s rights and confidentiality of records.

(d) Research at the MDC, whether by staff, intern or outside agent, requires the consent of the MDC Director and review and approval by the FSU Human Subjects Committee.

(e) If an intern is collecting research data at the MDC, it is required that a member of the MDC staff be designated as the intern’s research supervisor. Intern and supervisor are required to meet weekly for the duration of the data collection.

(f) The MDC Director should be provided with copies of the completed research manuscript as well as of any published or presented papers resulting from the research.

2. **Dissertations.** Intern research activities may include working on dissertation projects. Dissertations usually entail considerations in addition to the directions cited above.

(a) Responsibility for the dissertation remains with the interns and their universities.

(b) Dissertation preparation and data collection are typically prolonged ventures demanding considerable enterprise outside of the normal working schedule and may involve on-site activity beyond the internship year.

(c) Interns are encouraged to assist each other’s dissertation activity. The MDC staff has traditionally been supportive of intern research.

(d) If an intern intends to collect dissertation data at the MDC, it is required that the intern’s research chair concur with the designation of a member of the MDC psychology staff as the intern’s on-site research supervisor. This appointment should not encumber the on-site research supervisor to attend dissertation defense or otherwise participate in off-site activities.

(e) The MDC Director should be provided with a copy of the completed dissertation.
Supervision and special release time is granted for preparing and writing all dissertations, whether the data is collected at the MDC or not.

ETHICAL BEHAVIOR

Psychology interns and supervisors adhere to the published ethical guidelines of the American Psychological Association. The guidelines can be accessed at http://www.apa.org/ethics/. Interns are provided with this link via Blackboard during orientation.