



WILLIAM & MARY  
Counseling Center  
Internship in Health Service  
Psychology  
Manual  
2023-2024





**WILLIAM & MARY**

CHARTERED 1693

Counseling Center  
McLeod Tyler Wellness Center  
Post Office Box 8795  
240 Gooch Drive, 2<sup>nd</sup> Floor  
Williamsburg, VA 23187-8795

Phone Number 757-221-3620  
Fax Number 757-221-2254

### **Counseling Center Front Office Information**

The front desk personnel consist of the Executive Secretary / Office Manager and the Administrative & Program Specialist. The front desk will help you with administrative tasks. Please also feel free to ask them for assistance with getting acclimated to office, technology issues, university procedures and administrative tasks you may have.

### **Building and Office Access (Key Policy)**

All Counseling Center staff are issued a Staff ID and keys for access to building, hall office door and interior office door. To obtain your Staff ID, follow the instructions at: <https://www.wm.edu/offices/auxiliary/tribecardservices/newcard/fac-staff/index.php>.

After obtaining your Staff ID, please consult with front desk personnel to get access to the building card readers.

Assigned keys are to be used ONLY by Counseling Center Staff. DO NOT allow anyone unaffiliated with the Counseling Center to use your keys. Spare office keys are housed in a security envelope in front office. Consult with front desk personnel if you need a spare key.

Keys to College property may be duplicated only by the College locksmith. Keys will only be issued to provide access to areas and property necessary to accomplish assigned work of Counseling Center employees. All keys are returned and logged in upon separation from the College.

### **Weather policy**

To sign up for the College's emergency notification system you will need to log into the Banner on the W&M homepage and provide the necessary contact information. This will provide you updates on any College emergencies, closures, delayed openings, etc.

Please don't hesitate to see the Training Director or the Office Manager if you have any questions or concerns. The policy regarding university operations in the event of serious inclement weather conditions can be found here:

<http://www.wm.edu/about/administration/provost/forfacstaff/weather/>

### **Campus Emergencies**

The College of William & Mary is committed to providing a safe and secure environment for its students, faculty, employees and visitors to learn, teach, work and enjoy our beautiful campus and all it offers. In pursuit of that goal the College takes a comprehensive approach to protecting the College community and preparing for any emergency.

To obtain the necessary information start by keeping your emergency contact information updated in Banner so that the Emergency Management Team (EMT) can contact you through the mass notification system. (Landline phone, cell phone, text messages and e-mail). You may also check the university's mail website, [www.wm.edu](http://www.wm.edu), the W&M News Facebook page (<http://media.wm.edu/content/wm/emergency/siren.wav> ) and W&M News Twitter page (<https://twitter.com/WMNews> )

The Building Emergency Coordinator Program involves building occupants in emergency planning and response and addresses the unique needs of specific buildings. Building Emergency Coordinators are the conduit for the information flow between the Emergency Management Team and the occupants of the facility. Members of the College community should familiarize themselves with the [responsibilities of building coordinators](#) and identify the coordinators for the buildings they use most.

McLeod Tyler      Lindsey Heck      lheck@wm.edu  
Wellness Center:

### **Fire Drills**

All fire drills at the College will be announced and preplanned.

If a fire alarm sounds and you have not been notified prior to the alarm that it is a drill, take immediate action, evacuate the building and protect yourself.

#### **IF THERE'S A FIRE**

#### **FOLLOW C.A.R.E. PROCEDURES**

**Close doors**

**Alert others**

**Report the fire- call 911**

**Evacuate the building**

**Try to rescue others ONLY if you can do so safely.**

**Move away from the building at least 50 feet away, out of the way of the fire department.**

**Don't go back into the building until the fire department says it is safe to do so.**

### **Emergency Alarms**

The College has a number of ways to communicate to the campus community during an emergency situation and it's important that you take an active role in staying informed.

The College has three emergency sirens that are stationed on top of the Integrated Science Center, the School of Education building and the Law School. The sirens are 120-decibels. That's loud – about the same as a jet engine flying.

[Hear it for yourself – get to know this sound](#)

(<http://media.wm.edu/content/wm/emergency/siren.wav> ). When you hear the siren, it means two things – **seek shelter and seek information**.



**UNDERGRADUATE ACADEMIC CALENDAR 2023-2024**

**2023**

**Fall Semester**

August TBD	Orientation	
August 30	Classes begin	(Wednesday)
September 4	Labor Day	(Monday)
October 12-15	Fall Break	(Thursday-Sunday)
November 7	Election Day	(Tuesday)
November 22-26	Thanksgiving holiday	(Wednesday-Sunday)
December 8	Last day of classes	(Friday)
December 9-10	Reading period	(Saturday-Sunday)
December 11-15	Exams	(Monday-Friday)
December 16-17	Reading period	(Saturday-Sunday)
December 18-19	Exams	(Monday-Tuesday)

**2024**

**Spring Semester**

January TBD	Orientation	
January 24	Classes begin	(Wednesday)
March 9-17	Spring Break	(Saturday-Sunday)
May 3	Last day of classes	(Friday)
May 4-5	Reading period	(Saturday-Sunday)
May 6-10	Exams	(Monday-Friday)
May 11-12	Reading period	(Saturday-Sunday)
May 13-14	Exams	(Monday-Tuesday)
May 16-18	Commencement	(Thursday-Saturday)

**Summer Session**

May 28-June 28	Session I	(Tuesday-Friday)
July 1-August 2	Session II	(Monday-Friday)

# Commonwealth of Virginia 2023 Pay and Holiday Calendar

## State Holidays

- January 2**  
New Year's Day (Observed)
- January 16**  
Martin Luther King, Jr. Day
- February 20**  
George Washington Day
- May 29**  
Memorial Day
- June 19**  
Juneteenth
- July 4**  
Independence Day
- September 4**  
Labor Day
- October 9**  
Columbus Day & Yorktown Victory Day
- November 7**  
Election Day
- November 10**  
Veterans Day (Observed)  
4 hours additional holiday time
- November 23**  
Thanksgiving
- November 24**  
Day After Thanksgiving
- December 22**  
4 hours additional holiday time
- December 25**  
Christmas

Please note: In some agencies, the holiday and payday schedule may vary from what is shown here. If you have questions, see your agency human resources officer.

- Denotes Payday
- Denotes Holiday
- Denotes Additional Time Off 8 hrs 4 hrs
- Denotes Payday on Holiday or Time Off

Published by the Virginia Department of Human Resource Management. An equal opportunity employer.

Published by  
Commonwealth of Virginia  
September 2022



## January

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

## February

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28				

## March

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

## April

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

## May

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

## June

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

## July

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

## August

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

## September

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

## October

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

## November

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

## December

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

Type of Employee:

Pay Period Reporting for:

Month

Pay Period

Year

Name:

Department:

Banner ID:

Banner Orgn:

Position #

Phone Number

<b>Dates-&gt; Earned or Used:</b>																
<b>Total Hours</b>																

Original Time sheet never submitted because  
 Correction to original submission (copy attached)  
 Other Reason:

I hereby certify that this report correctly reflects all time worked by me for the pay period indicated.

Signature:

Approved By:

Date:

The College of  
William & Mary  
& The Division of  
Student Affairs



# William & Mary Vision, Mission, & Values

## **Vision:**

William & Mary transcends the boundaries between research and teaching, teaching and learning, learning and living. People come to William & Mary wanting to understand and change the world – and together we do.

## **Mission:**

A preeminent, public research university, grounded in the liberal arts and sciences since 1693, William & Mary is a vibrant and inclusive community. Through close mentoring and collaboration, we inspire lifelong learning, generate new knowledge, and expand understanding. We cultivate creative thinkers, principled leaders, and compassionate global citizens equipped for lives of meaning and distinction. William & Mary convenes great minds and hearts to meet the most pressing needs of our time.

## **Statement of Values:**

Accomplishing our mission requires that the entire community work together as stewards of the core values that infuse our collective effort:

### **Belonging.**

We create a welcoming and caring community that embraces diverse people and perspectives.

### **Curiosity.**

We foster an open academic environment that champions intellectual agility and inspires creativity in the discovery, preservation, application, and advancement of knowledge.

### **Excellence.**

We aim for the extraordinary, recognizing that personal growth and meaningful accomplishment require bold and innovative aspirations, courageous risk-taking, and focused effort.

### **Flourishing.**

We create conditions that ensure William & Mary will thrive for all time coming, and we empower those who live, learn, and work here to make choices toward a healthy and fulfilling life.

**Integrity.**

We are honorable, equitable, trustworthy, and committed to the highest ethical standards in all that we do.

**Respect.**

We treat one another with mutual respect, recognizing and upholding each person's inherent dignity and worth.

**Service.**

We engage with individuals and communities both near and far, devoting our knowledge, skills, and time to serving the greater good.

William & Mary is a community that fosters deep human connection. We reflect on the lessons of history to meet the challenges of a rapidly changing world. We engage diverse perspectives and seek wisdom in bridging differences. Together, we are unceasing in our efforts to make a meaningful difference in our communities, the state, the nation, and the world.

For more information on the strategic plan of the university, visit:  
<https://www.wm.edu/about/administration/vision-mission-values/>

*Approved by the W&M Board of Visitors on November 22, 2019.*

# College of William & Mary

## Statement on Diversity

William & Mary is a community that shares values of belonging, curiosity, excellence, flourishing, integrity, respect and service. We support the right to free expression of a range of ideas and work to create an educational environment that draws on diverse backgrounds and perspectives to foster mutual respect, collaboration, critical thinking and meaningful relationships. We affirm the vital role of the university in recognizing and fostering equity, inclusion and belonging related to social identities and positions that have been excluded or marginalized in our community, including differences such as ability, class, country of origin, gender identity and expression, language, race and ethnicity, religion, sexuality, and other cultural or political affiliations.

For William & Mary to fulfill its educational mission and become a place that is itself diverse, equitable and inclusive, we must acknowledge the uncomfortable truths of our history and consider the ways in which historical patterns of exploitation and exclusion may continue to shape our university.

We take seriously our obligation to speak up when we see bias, whether it be in our classrooms, workspaces or the university community at large. We embrace our shared responsibility to create change where we fall short of our goals. William & Mary strives to be a place where people of all backgrounds are able to learn and grow, and where each individual takes responsibility for upholding the dignity of all members of the community.

*- Approved by the W&M Board of Visitors, February 2022*

# **Division of Student Affairs**

## **Vision, Mission, Values, & Objectives**

### **Vision**

Creating an engaging learning environment where community is strengthened and individuals flourish.

### **Mission**

Through student-centered programs, policies, and services, the Division of Student Affairs supports the academic enterprise and our students by preparing them to learn, engage, and grow with integrity, wellness, and purpose.

### **Values**

We create a welcoming and caring community that embraces diverse people and perspectives.

We foster an open academic environment that champions intellectual agility and inspires creativity in the discovery, preservation, application, and advancement of knowledge.

We aim for the extraordinary, recognizing that personal growth and meaningful accomplishment require bold and innovative aspirations, courageous risk-taking, and focused effort.

We create conditions that ensure William & Mary will thrive for all time coming, and we empower those who live, learn, and work here to make choices toward a healthy and fulfilling life.

We are honorable, equitable, trustworthy, and committed to the highest ethical standards in all that we do.

We treat one another with mutual respect recognizing and upholding each person's inherent dignity and worth.

We engage with individuals and communities both near and far devoting our knowledge, skills, and time to serving the greater good.

### **Goals**

We will cultivate a welcoming, affirming environment where all members feel connected within the university community, embrace diverse people and perspectives, and express their authentic selves.

- Objective A:
  - Develop authentic connections between and amongst students, Student Affairs staff, and other members of the university community
- Objective B:
  - Create environments where all members can freely develop and thrive
- Objective C:

- Support the lifelong practice of cultural humility

We will plan and execute clear communication that advances our mission and educates, informs, and inspires the W&M community.

- Objective A:
  - Effectively communicate information across the division, university, and community through increased collaboration and technology integration
- Objective B:
  - Ensure all communication reflects our ethic of care with sensitivity to impact
- Objective C:
  - Increase the understanding of the work in Student Affairs

We will counteract inequality and injustice thereby affirming the inherent dignity and wellbeing of all in our community.

- Objective A:
  - Take an equity centered approach to openly address the impacts of power and privilege on individuals and communities at William & Mary
- Objective B:
  - Integrate restorative practices into our work
- Objective C:
  - Create a community where uncomfortable meaningful dialogue is valued and practiced

We will advance experiential and applied learning opportunities that promote whole-person development

- Objective A:
  - Amplify and enhance student leadership outcomes
- Objective B:
  - Leverage campus engagement experiences for whole-person development
- Objective C:
  - Implement credentialing opportunities for co-curricular development
- Objective D:
  - Create opportunities for students to learn and practice the skills of democracy and civic engagement

We will identify data-informed needs and cultivate opportunities and partnerships to pursue the resources necessary to accomplish our mission.

- Objective A:
  - Assess and evaluate departmental budget and programmatic goals to identify critical needs
- Objective B:
  - Develop support based upon each departments budget and fundraising goals
- Objective C:

- Boldly embrace the story of the impact Student Affairs has across campus to advance funding
- Objective D:
  - Recruit and retain diverse and talented staff as our most valuable resource

We will Create a healthy environment that empowers those who live, learn, and work here to flourish.

- Objective A:
  - Reinforce the paradigm of integrative wellness at the individual and community levels
- Objective B:
  - Develop relevant and inclusive wellness programs that meet the pressing needs of our students
- Objective C:
  - Support a work culture that prioritizes wellbeing

# **Student Affairs Diversity Statement**

The Division of Student Affairs strives to ensure a safe, affirming, and nurturing environment for William and Mary students and staff. Inherent in this mission is a belief that a strong community is built upon, and enriched by, both commonalities and differences. Division members recognize and celebrate the fact that William and Mary students, staff, and faculty are diverse—varying in age, physical abilities and cognitive talents, socioeconomic status, political viewpoints, religious/spiritual and/or philosophical beliefs, and sexual, gender, and racial/ethnic identities. We actively demonstrate our commitment to the success of all community members through our programs, policies, and services. We foster a welcoming environment based upon open and considerate dialogue, mutual understanding, and respect for individual differences.

# WMCC Internship Policies & Procedures



## **WMCC Mission Statement**

The William and Mary Counseling Center is the sole mental health unit on campus with the primary responsibility of providing a range of mental health services to students, and related support to the campus community. Our role is congruent with the mission of the College of William and Mary, and the Division of Student Affairs, which is to prepare students to learn, lead and live with integrity and purpose. In so doing, the Counseling Center seeks to provide services that allow students to achieve their personal and educational goals. These services include the provision of mental health practices intended to reduce psychological distress, treat clinical conditions, and enhance well-being and personal growth. Our interdisciplinary team facilitates primary education and prevention activities, provides support to students experiencing normal developmental issues associated with the transition from adolescence to early adulthood, provides support for emerging, acute, and chronic clinical concerns and responds to individual student and campus-wide immediate crises. Based on clinical assessment of an individual student's needs, we make evidence-based recommendations drawing from the resources available on campus, in the local area, and in the student's home community when necessary. The Counseling Center actively demonstrates commitment to diversity in its broadest form and serves as an advocate for social justice in the college community and beyond. Through our multi-level training program, we dedicate ourselves to instilling these practices and values in future professionals.

## William and Mary Counseling Center

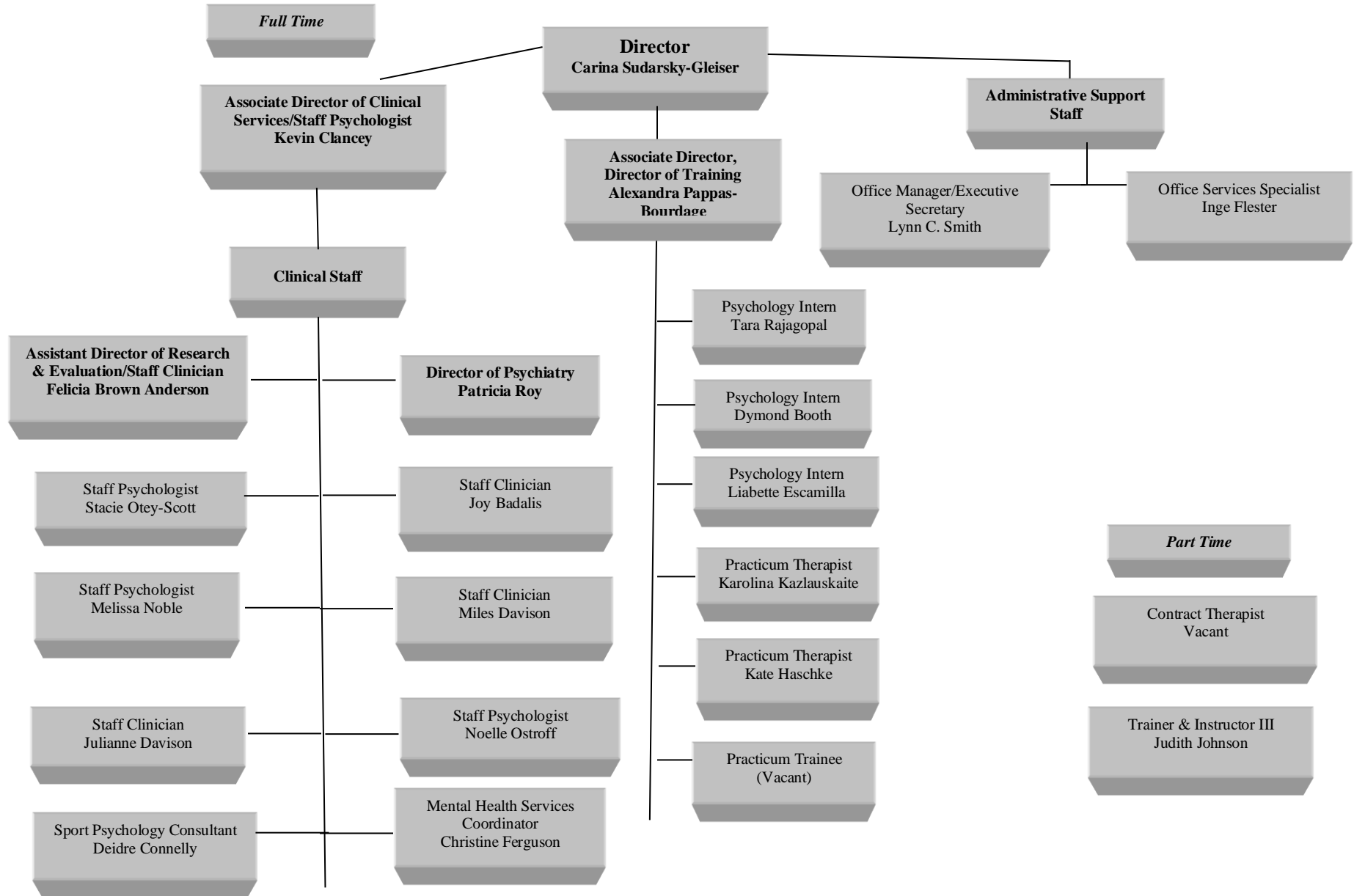
### Scope of Services

The Counseling Center is designed to provide short-term, time-limited counseling, in order to offer services to as many students as possible. In keeping with the mission of the [Division of Student Affairs](#), the Counseling Center strives to provide brief treatment to facilitate adjustment, improve functioning, achieve resolution of problems, and to relieve acute symptoms as soon as possible to support academic progress.

Students whose presenting issues suggest the need for longer long-term services, can meet with the Mental Health Services Coordinator for assistance with a referral to a private mental health care provider in the community or may search for a professional through our [online database](#). Counseling Center services will not be an appropriate substitute for long-term, intensive psychological services. Some common examples that may be more suited to an outside referral include but are not limited to:

- concerns that may require weekly appointments
- issues which may require a specific type of therapy not practiced by staff
- issues that tend to worsen in short-term counseling
- history of weekly or long-term treatment prior to college or interest/preference for this type of services

**College of William and Mary Counseling Center  
Organizational Chart  
2022-2023**





WILLIAM & MARY

CHARTERED 1693

Counseling Center  
McLeod Tyler Wellness Center  
Post Office Box 8795  
240 Gooch Drive, 2<sup>nd</sup> Floor  
Williamsburg, VA 23187-8795

Phone Number 757-221-3620  
Fax Number 757-221-2254

### **Building and Office Access**

All Counseling Center staff are issued keys and Staff IDs for access to building, hall office door and interior office door. Staff are also provided a desk/file drawer keys. Spare office keys are housed in a security envelope in front office.

- Keys to College property may be duplicated **only** by the College locksmith.
- Keys will only be issued to provide access to areas and property necessary to accomplish assigned work of Counseling Center employees.
- All keys are returned to WMCC front desk staff and logged in upon separation from the College.
- Instructions for Staff IDs can be found at the following link:  
<https://www.wm.edu/offices/auxiliary/tribecardservices/newcard/index.php>

**Office keys and Staff ID are to be used ONLY by Counseling Center Staff. DO NOT allow anyone not affiliated with the Counseling Center to use your keys or ID.**

## **Internship Duration**

Per APPIC, the Internship occurs over a 12-month period. Extensions to the Internship year beyond the original contract dates are unavailable unless there is a university-approved accommodation that would result in need for an extension or a genuine extenuating circumstance. In case of the latter, the Center will review the circumstance on an individual basis to decide on the appropriateness of an extension. Insufficient overall and direct service hours at the end of the 12-month period may be grounds for failure of the Internship.

## **Leave Accrual**

Interns accrue 8 hours of annual personal paid time off (24 days over the course of the year). Interns also additionally receive sick leave, per university policies. The university indicates that *“Sick leave may be used if you are sick or injured, or for medical appointments. Your supervisor may request the proof of any illness requiring the use of sick leave.”* In addition to annual and sick leave, employees receive 13 paid holidays per year. The university Holiday calendar can be found at:

<https://www.wm.edu/about/administration/provost/resources/holidays/index.php>.

Interns should be aware that it may be necessary to use time outside of the office to accrue the 2,000 overall hours required by APA for successful completion of Internship. Work related to psychological practice (e.g., reading psychological research, working on dissertation, presenting at a conference, etc.) outside of the office can be recorded towards the 2,000 overall hours required for Internship.

Additional information on the university’s employee leave policy can be found here:

<https://www.wm.edu/offices/uhr/benefits/leave/12month-facultyleave/index.php>

For any additional questions, please contact university Human Resources.

## **Requesting Leave:**

Trainees must get prior approval from their individual supervisor and the Training Director to take annual leave. Trainees must make arrangements for any of their responsibilities affected while away from the office including, but not limited to 1) exchanging Team Days, 2) rescheduling any supervision sessions that will be missed (own supervision and/or provision to an Advanced Practicum Student), 3) consulting with your supervisor regarding any clinical issues/clients of concern, and/or 4) informing seminar leaders if you will be absent for a meeting, 5) rescheduling any clients, etc.

Trainees request leave via the following steps:

1. Go to your personal calendar in Outlook.
2. Select the date starting your leave and double click to create a “New Event”

3. Once the “New Event” window pops up, add the following information:
  - a. **Add a Title:** “Vacation”
  - b. **Invite attendees:** Enter and select “CAL-WMCCTraineeLeave”, Training Director, AND individual supervisor
  - c. **Start Time:** First day and time of leave (if relevant, you may click the “All day” option)
  - d. **End Time:** Last day and time of leave (if relevant, you may click the “All day” option)
  - e. **Location:** Leave blank
  - f. **Narrative Box:** Please detail relevant arrangements you have made for any clinical and training (e.g., Exchange of Team Days, rescheduled supervision meetings, seminars affected, etc.).
  
4. At the top of the New Event window, select the “Send” button. You will receive a notice if the request has been approved and the appointment will be placed on the Outlook calendar to ensure appropriate coverage for the office.

Leave requests may be denied for reasons including, but not limited to: 1) the trainee is requesting more time off than available in their Leave Balance denoted in Banner, 2) the trainee is requesting an amount time off that could disrupt continuity of care to clients and/or hours accrual (i.e., typically more than 1 consecutive week off during semesters, or 2 consecutive weeks off in the summer), and/or 3) several other trainees and/or staff have already gotten approved time off on the dates requested, thus resulting in disruption to office coverage.

To view your current Leave Balance in Banner, visit:

<https://prod.banner.wm.edu/EmployeeSelfService/ssb/hrDashboard#/leaveBalanceDetailByEmployee>

### **Recording Leave Taken:**

Interns are classified as exempt employees, and therefore, only record leave when taken. Leave is recorded by submitting timesheets through the Banner system. Interns record the hours of leave taken on the appropriate days of the timesheet. Trainees are required to independently monitor the university pay period schedule to submit timesheets by the appropriate deadlines.

Should you miss a timesheet submission deadline, a Manual Timesheet must be completed and submitted to the Training Director as soon as possible. Manual Timesheets can be found at:

<https://www.wm.edu/offices/financialoperations/payroll/timesheetsandcorrections/index.php>

Inaccurate documentation of leave taken and/or misrepresentation of leave taken (i.e., pre-planning sick days), may be grounds for disciplinary action.

### **End of Internship**

Interns are required to reserve 5 days (40 hours) of **annual leave** for the last 5 business days of Internship to allow for transition from Internship. Interns must complete all end of year tasks by the end of their last working day of Internship. Not doing so jeopardizes successful completion of the Internship. Interns may choose to use up to 10 days (80 hours) of annual leave at the end of the Internship. Requests for more than 10 consecutive days off for the end of Internship may be denied, as this may present a continuity of care concern for clients. Should the entire cohort wish to reserve more than the required 5 days of leave for the end of Internship, please inform the Training Director as soon as possible, so the end of Internship celebration can be scheduled accordingly.

## **Remote Work**

Any clinical work provided by trainees, including tele-mental health services, is done so on-site at the agency. Trainees are not eligible for remote work/work-from home or remote access of Titanium software unless they have a university-approved accommodation. Information and procedures on employee accommodations can be found at:

[https://www.wm.edu/offices/compliance/policies/employee\\_reasonable\\_accommodation/index.php](https://www.wm.edu/offices/compliance/policies/employee_reasonable_accommodation/index.php)

## **Telesupervision**

Telesupervision is defined by the Commission on Accreditation (CoA) as “*supervision of psychological services through a synchronous audio and video format where the supervisor is not in the same physical facility as the trainee*” (CoA C-13 D.

Telesupervision; CoA C-15 I. Telesupervision). The CoA defines In-Person supervision as “*supervision of psychological services where the supervisor is physically in the same room as the trainee.*”

Any clinical work provided by trainees, including tele-mental health services, is done so on-site at the agency. All supervision at WMCC is provided by licensed permanent staff members on-site. WMCC values the unique benefits of in-person supervision, including but not limited to, opportunities to observe and process nonverbal and affective cues and establish professional relationships. It is the general expectation that all supervision provided at WMCC occur in-person; however, WMCC recognizes that there may be an occasional need for telesupervision. Telesupervision may be considered in cases of temporary extenuating circumstances, based on supervisor discretion. Any long-term need for telesupervision requires a university-approved accommodation. Information and procedures on employee accommodations can be found at:

[https://www.wm.edu/offices/compliance/policies/employee\\_reasonable\\_accommodation/index.php](https://www.wm.edu/offices/compliance/policies/employee_reasonable_accommodation/index.php). The Training Director should be consulted in cases where telesupervision is being considered.

In the event that telesupervision has been approved, it may not account for more than 50% of the two weekly hours of individual supervision and may not account for more than 50% of the overall supervision hours at the training site.

Any telesupervision conducted should occur on a HIPAA-compliant platform and both parties should be in a confidential space.



## **Hours of Operation & Lunch**

Typical business hours at the Center are 8am-5pm. Any deviation in hours of operation will be communicated to interns. Interns are expected to be present at the office during operating hours. The Center observes lunch from 12-1pm. Interns are discouraged from scheduling clients over the lunch hour, as staff may not be available to provide back up in case of an urgent need. Trainees must always have a permanent staff member available for backup when meeting with clients.

Occasionally on Team Days, an urgent issue may arise over the lunch hour. Interns should coordinate with their Teammate to determine how the urgent need will be addressed.

There is reasonable flexibility understood in this policy (i.e., arriving a few minutes late, leaving a few minutes early), so long as there is no neglect of clinical and/or training responsibilities, and/or any negative impact to client care. Abuse of this flexibility may be cause for adjusted expectations and/or disciplinary action.

### **Team Days:**

Interns are assigned to a Team Day with a permanent staff member during the Fall and Spring Semesters. Team Day assignments are made by the Clinical Director and Training Director. Interns can submit Team Day preferences, though preferences are considered secondary to system/Center needs. Interns will be assigned a new Team Day as the semesters change, following the same procedures noted previously.

When on Team Day, staff are responsible for coverage with their teammate during the entire business day (8:00am-5:00pm). Any time away from the office (e.g., stepping out to get lunch, going for a brief walk on campus, running late to the office, etc.) on a Team Day should be coordinated among the teammates. Informing Front Desk staff is also advised in these cases. Even when temporarily out of the office on a Team Day, staff should keep their cellphones nearby to monitor if there is an urgent need.

No appointments other than Initial Consultations should be scheduled on Team Days, as to ensure staff are available for urgent appointments and consultations. The number of Initial Consultation appointments on each staff member's Team Day is determined by the Director, Clinical Director, and when relevant, the Training Director. Any other meeting scheduled on a Team Day should have prior coordination and approval with one's teammate. Such occurrences should be rare. Even when coordinated by the Team, it is possible that a meeting scheduled on a Team Day could be interrupted due to a clinical need. Any participants in such a meeting should be informed of the possibility for interruption.

If you plan to request annual leave on a Team Day, you must work to find coverage for your Team Day. This typically takes the form of "exchanging" Team Days with another staff member. Which days are exchanged should be clearly denoted on Titanium. Due to clinical demand, it is advised to request coverage for Team Days as far in advance as possible. Similarly, if you are planning leave or need uninterrupted time for part of a Team Day (e.g., medical appointments, providing an outreach, attending an event on campus, etc.), the same coverage expectations apply.

Occasionally, an urgent issue may arise at the end of the day and those on Team Day may be required to stay late at the office. Please plan accordingly.

### **On-Call:**

WMCC uses a center-provided cellphone for on-call concerns. Interns provide one week of on-call/after hours coverage during each semester and one week during the summer. On-call coverage typically begins at 4pm on a Friday and extends until 8am the following Friday. Interns are asked to provide their availability for on-call coverage at the start of the semester. On-call coverage is determined primarily by availability and

Center needs; preferences are considered secondarily. Interns' individual supervisors serve as back up during on-call coverage. Interns are expected to consult with their supervisors for any calls received during their on-call weeks. Interns also receive an on-call folder with various resources.

The on-call clinician is required to reserve the 4pm hour on their schedule for any urgent appointments for each day that they are on-call, as these issues are more likely to extend after hours. Should an urgent appointment extend beyond business hours, a staff member on Team Day will remain in the office to provide support for the on-call clinician. It is the on-call clinician's responsibility to find coverage if there is a conflict with any 4pm or after-hours coverage requirements. If exchanging a 4pm coverage hour with a staff member, please clearly denote this on Titanium. Any coverage changes after hours should have prior approval from the intern's supervisor and the Clinical Director, as this requires notification to campus partners.

While on-call, Interns should always remain close to the on-call phone. Known reception issues should be communicated to the intern's individual supervisor to explore solutions. Documentation, particularly for issues of safety/risk, should occur as soon as possible once the intern has access to Titanium.

## **Case Documentation & Clinical Records**

### **Clinical Records (Electronic) Include:**

- New Client paperwork, including consent forms
- Consent for Supervision & Recording forms, where relevant
- Session notes
- All other correspondence (i.e., e-mail and/or phone communication, etc.)
- Releases of Information, where applicable
- Referral forms, where applicable (e.g., referred to MHSC for off-campus services, referred to SHC for medication evaluation, referred to group, etc.)
- Terminations

### **Documentation Timelines:**

The following timelines indicate the amount of the time supervisees have until the note is forwarded to their supervisor.

<b>Appointment Type</b>	<b>Timeline</b>
Initial Consultations	2 business days
Individual, Couples, Group sessions	2 business days (*group addendums complete 2 business days after note is distributed)
Urgent/Crisis sessions	1 business day
Terminations	30 days after last seen with no scheduled appointments

*\*Any safety/risk information should be documented before the end of the day for any session type\**

Supervisors are expected to review and provide revisions on notes within 2 business days of original receipt of the note, after which supervisees have 2 business days to integrate supervisor edits.

*\*Throughout this policy, business days denote days in the office.*

### **Additional Procedures:**

- Trainees should forward notes in Titanium to supervisors unsigned until supervisors provide guidance otherwise.

- Interns sign notes on Line 2 in Titanium. Practicum Students sign on Line 1.
- Trainees never deactivate clients from their “My Clients” list. This step should always be completed by supervisors.

## **Telehealth Procedures:**

### **Conducting Initial consultations via Zoom:**

1. Send the Zoom initial consultation welcome email (see example below) via encrypted email at the beginning of the hour-long initial consultation appointment
2. Monitor paperwork completion in Titanium - Open - Approve Incoming Data
3. Confirm a match in our system and/or address any mismatches in the existing file (not the new, incoming data). Typical sources of mismatches are (a) inconsistent formatting of student ID number; (b) inclusion or exclusion of middle name or middle initial; or (c) incorrect or mismatched birthdays. When in doubt, call the front desk staff or senior staff for help before processing
4. Once matched, process the paperwork by selecting the checkbox next to the client's name and clicking "Process Selected"
5. Access the new "Client Data" in the client's file and take 5-10 minutes to review the paperwork for any relevant information
6. Create the Zoom appointment and email the client the Zoom link
7. Begin initial consultation by reviewing:
  - a. Limits of confidentiality
  - b. "Consent to Supervision, Observation, and Recording of Counseling Sessions" form; ask the client to complete it and then start video-recording in Zoom
  - c. Purpose of the initial consultation
  - d. Client's physical address during the initial consultation; confirm it is correct in the file
  - e. Client's alternative contact information; confirm it is correct in the file
  - f. Client's emergency contact information; confirm it is correct in the file
8. Conduct initial consultation in the remaining time (~20-30 minutes)
9. Schedule extended initial consultation in Titanium and in Zoom, and send Zoom invitation email prior to ending the session

10. Write initial consultation note with attached, signed consent form and submit to supervisor

11. Discuss disposition in supervision meeting

12. Confirm disposition with client in extended initial consultation

**Zoom Initial consultation Email Example \*Check with Supervisor Before Using\*:**

Dear [CLIENT NAME],

I'm looking forward to connecting with you for our telemental health initial consultation appointment! During the initial consultation, we will discuss whether the counseling center services, including telemental health services, are the very best way to your needs and create a plan for next steps.

Before we can begin our meeting, please visit the URL below and select "Telemental Health – New Client" to complete our full set of paperwork. It's important that you read, complete, and sign this paperwork in order to: (1) provide important information about yourself; (2) learn about the benefits and limitations of mental health/telemental health services; (2) verify an emergency contact near your physical location during appointments; and (3) provide a secondary method of contacting you should there be a technological failure before or during an appointment.

<https://wmcounseling.titaniumhwc.com/Hwc>

Our paperwork typically takes 15-20 minutes to complete and then we will spend the remainder of the appointment discussing your goals and concerns. Please note that we cannot proceed with the initial consultation appointment before the full set of paperwork is completed by you. Once you have submitted your completed paperwork, I will review it and then email you a unique Zoom link and password so that we can begin the video-conferencing portion of your appointment. It's important that you safeguard this information to ensure the privacy and confidentiality of your work. If you have any questions, would like to discuss the paperwork before signing it, and/or do not receive the email with the Zoom link within 15 minutes of submitting your paperwork, please call me directly at (757) 221-3626 during the scheduled time of our initial consultation.

Also note that it is important that you are physically located in Virginia during all appointments, as this is the only state where counseling center clinicians are licensed to provide services. If you are not located in Virginia (or do not expect to be) during an appointment, please let your clinician know as soon as possible to reschedule.

The counseling center is currently using HIPAA-compliant Zoom Healthcare video-conferencing software to protect your confidentiality. However, there are a few items to be aware of prior to engaging in telemental health services.

Please ensure that you have the following equipment/technology:

- Tablet, laptop, or desktop computer (a smartphone would be a last resort)
- Access to high-speed internet
- Built-in or external camera
- Built-in or external microphone
- Headphones or speakers

Here are some tips for you engaging in telemental health services:

- Try to log-in 5-10 minutes before appointments to certify that everything is working properly and take time to troubleshoot any technical issues. Should you need assistance, it may be helpful to consult with W&M IT.
- Make certain that you have access to good bandwidth. Poor bandwidth may weaken our connection and create difficulties for us communicating via Zoom.
- Choose a place and time that guarantees your privacy during appointments. This will help ensure confidentiality and reduce the likelihood of being overheard. If this does not feel possible, we can brainstorm about options.
- I encourage you to use headphones, if possible (I probably will, too). This can help us ensure that we have a confidential conversation and minimize distractions for both of us.
- It's very important that we can see each other as clearly as possible, so confirm that your image is sharp and bright, you have a diffuse light source in front of you (not above or behind) to avoid shadows on your face, your lens is at eye level, and your face is centered in the camera view.
- If there is a technological failure that prevents us from using Zoom, ensure that your phone is nearby and will accept incoming calls from a potentially unfamiliar or unidentified number.
- If you are unable to connect or get disconnected during an appointment, please try to connect again. If problems continue, please call me directly at (757) 221-3626.
- Use of email should be limited to general questions and other non-sensitive information (e.g., scheduling). Sensitive or therapeutic topics should be discussed during Zoom appointments or by phone.

What you can expect from me during Zoom appointments:



- I will verify your physical location at the beginning of an appointment.
- I may ask to briefly be shown the space you're in during the appointment to ensure your privacy and that other individuals are not present without your consent.
- I will use the alternative method that you've provided in the paperwork for contacting you if we experience a technological failure.
- I will determine whether telemental health services are the very best way to address your concerns and make alternative recommendations, if necessary.

If you experience a mental health emergency or other crisis while you are an enrolled W&M student, please use the following crisis services:

- W&M Counseling Center crisis services: 757-221-3620 (24 hours)
- National Suicide Prevention Hotline: 800-273-8255 (24 hours) · Crisis text line: text HOME to 741741 (24 hours; <https://www.crisistextline.org/>)
- Call 911 or go to your nearest emergency room

Please let me know if you have any questions or concerns. I'm looking forward to meeting you soon!

### **Conducting Individual Counseling Sessions via Zoom:**

1. The morning of the session, send out the session Zoom link via encrypted e-mail. (E-mails can be scheduled to send later, so consider prepping the day before, particularly if you have an 8am telehealth appointment)
2. Begin the session once the client appears in the Waiting Room
3. Confirm client's physical address and that they are in a private/confidential space
4. Proceed with individual session
5. At end of session, be sure to schedule client for their next appointment

\* If you need to administer the CCAPS during a session, put the link for CCAPS in the Zoom chat. Instruct that you and the client will turn off your cameras to allow them privacy as they complete the questionnaire. Instruct the client to turn on their camera once complete, indicating they are ready for you to process the paperwork. Go to Titanium - Open - Approve Incoming Data. Confirm a match in our system and/or address any mismatches in the existing file (not the new, incoming data). Typical sources of mismatches are (a) inconsistent formatting of

student ID number; (b) inclusion or exclusion of middle name or middle initial; or (c) incorrect or mismatched birthdays. When in doubt, call the front desk staff or senior staff for help before processing. Once processed, review CCAPS results. When prepared, turn your camera back on and provide feedback of CCAPS results to client.

## **Evaluations:**

Evaluations are submitted on forms via Google Drive. Except for evaluations of presentations and seminars, evaluations are reviewed in person by the trainee and supervisor. Each member of the supervision dyad will come prepared with an evaluation of the other. Supervisors provide their evaluation of a trainee before a trainee shares their evaluation of the supervisor to reduce concerns of retaliation. Trainees should discuss with their supervisors the timelines for evaluation to ensure both parties are prepared.

## **How to Complete & Print Evaluations:**

- 1) Ensure you are signed into Google workspace (<https://my.wm.edu/> --click on the "G Workspace" icon)
- 2) Go to:  
<https://drive.google.com/drive/folders/129oF9VenKyxAT8zPui1i4m47Nd6xlyzH?usp=sharing>
- 3) Click on the Evaluation to be completed
- 4) Complete the evaluation (be sure to type in your e-mail address [XXX@wm.edu](mailto:XXX@wm.edu) at the top of the form)
- 5) At the bottom of the form, **be sure to select "Send me a copy of my responses."** before submitting. This will ensure that you will have a backup copy of the form to print in case Lynn is unable to format the evaluation by the date the supervisory dyad has selected to share evaluations.
- 6) Once submitted, contact Lynn/Front Desk staff with the name of the evaluation for formatting.
- 7) Once formatted, Lynn/Front Desk staff will send you a final copy for review and printing.
- 8) Review evaluation with supervisor/trainee, if relevant. **Should any changes be made to the evaluation (quantitative or qualitative), you must inform Lynn/Front Desk staff of the changes so the data is accurate in our records.**
- 9) Once all parties agree on the evaluation, sign the document, if relevant (e.g., no signature required on presentation evaluations, seminars, etc.).
- 10) Interns should immediately scan and upload the evaluation to their Electronic Portfolio.

## Checking Out of the Center

- 1) Please schedule a final meeting to discuss your internship experience with the Training Director
- 2) Complete the End of Internship Self-Assessment, Seminar Evaluations, Evaluation of the Internship Experience, and Evaluation of the Training Director
- 3) You are to scan all documents listed on **the End of Year Checklist** to leave a **complete portfolio** at the Center. This portfolio should be stored electronically on G→Interns→AY (your cohort year)→Your Name→New Folder Titled Electronic Portfolio. The **evaluations** scanned need to be the ones that were **signed** by you and your supervisor. Please do not include copies of unsigned evaluations. That would be a serious problem for us during our next accreditation visit. The End of Year Checklist should be reviewed and signed by you, your individual supervisor, and the Training Director before Internship is considered complete. The signed copy should be uploaded as the last document in your electronic portfolio.
- 4) Closing Cases: Please make sure that all client files have been closed and removed from your client list by your supervisor. By the end of the internship, there should be no cases in your client list.
- 5) Documentation of Supervision: Please provide all documentation of your supervision of the practicum student to the Training Director.
- 6) Digital Recordings: Please make sure that you have deleted all digital recordings of your individual and group work
- 7) Cleaning and Packing: Please make sure that you clean your office so that you leave it in the way as you found it (to the best of your ability)
- 8) Keys: Please return your key to the building to the Front Desk Staff on your last day in the office
- 9) University Clearance: There is an HR clearance process as you separate from the university. I have already initiated this process. Things that most often apply to interns are returning any outstanding library books and returning your parking pass. They will contact you if there are any other outstanding items for your attention.

**10) Leave:** Please remember that you will still need to submit leave in Banner for any leave taken until the end of your contract, even if you are no longer coming in to the office. (Pay periods may not yet be open on Banner to submit time before the last day in office).





## **COMMON SENSE GUIDELINES**

The following guidelines have been established through the years given experiences we have had at the Center. This document is intended to make our expectations explicit from the start of internship.

### **General Counseling Center Issues:**

- Interns are to comply with the Center's hours of operation. The Center is open from 8am-5pm. Lunch is observed as a Center from 12-1pm.
- It is expected that, like the rest of the staff, interns will be flexible with their schedules to meet the needs of the community while doing outreach and when there is special need to attend to an emergency. Evening and weekend hours may be necessary for outreach purposes and/or to respond to crises.
- To help with communication at the Center, it is expected that trainees will read email at the very least twice (morning and afternoon) during the workday. Please reply to all emails that are asking for your response or input.
- Professional attire is expected while at work. Our clinical staff strives to balance appearing warm and approachable while maintaining a professional image. We all attempt to do so, respecting our individuality, taste, and cultural traditions while being mindful of the emotional vulnerability of clients, the intimacy that characterizes therapeutic encounters, and the potential for sexualization of the therapy hour/therapist. Please refrain from wearing attire that shows midriff, undergarments, and significant amounts of upper thighs. While sandals may regularly be worn by staff, please refrain from wearing flip-flops to work.
- In order to maintain a comfortable and clean break area, it is encouraged that we all clean any area or appliance we use. Cleaning as soon as something spills is easier than cleaning after it has dried out. Please inform us if there are any cleaning supplies that are needed.
- The front office is the admin staff's only office space. Please be respectful of their privacy and personal space while in this area. Please also wait until there are no clients at the window if you need to ask them something. They are skilled at multi-tasking but it may become confusing when their attention is called in different directions.
- There are times when you will need to use College equipment for educational purposes (dissertation, contact with graduate program or committee members, etc.). Please take into consideration when others may need the equipment to print or fax for Counseling Center business purposes.

### **Clinical Issues:**

- As a professional in the field, we do not operate out of convenience. It is expected that interns will prioritize client care and have integrity in their work at all times.

Always operate in the interest of your client. Do the right thing. When there is a question, ask—please!

- We aspire to uphold the highest ethical standards in our work and expect integrity in the work of our trainees. This holds true in clinical documentation. Please ensure your documentation accurately summarizes what occurred in sessions. Examples include but are not limited to: Documenting anything that was not explicitly discussed in session (such as past and present suicidal risk assessment of ideation, plan, intent, and/or attempts). If you are going to quote a client, please ensure this quote is accurate and not your language (if unsure, find a different way to document it!). Please do not exclude clinically relevant information. Etc.
- Consult! Consult! Consult! Most supervisors do not like surprises—keep us in the loop!
- At times, you may have questions and opinions about Center operations. You are welcome to be curious and engage in professional dialogue around such issues. We value feedback and regularly adjust our procedures; however, we ask that you give us the benefit of the doubt and trust our wisdom as you enter this new system. There is usually a solid rationale or historical context for why we do things the way we do.
- Confidential information (clients' files, case notes, reports, assessment measures, etc.) is to be kept at the Counseling Center. It is illegal to take information out of the Counseling Center. Remember that the Ethics Code emphasizes the obligation to protect confidential information.
- For security reasons, all documentation of clinical services is to be done using TITANIUM. Word documents are not protected in the same way Titanium is protected.
- Zoom HealthCare is the Center's HIPAA-compliant virtual platform. Any telemental health services should occur via this platform. Please ensure that you are logged into and using your Zoom HealthCare account when interacting with clients. Additionally, any recordings of telemental health sessions should only be saved to the Center's secure drives (V-video), and should be saved immediately following sessions.
- At the end of the day, please make sure any clinical information is locked in your desk, and that your office door is locked and closed. This ensures confidentiality is maintained.
- Assessment instruments are not to leave the Counseling Center (unless they are public assessment measures such as the LVI). Remember that the Ethics Code addresses the need to maintain the integrity and security of test materials and the confidentiality of test data.
- All signed consent forms for supervision/digital recording as well as consent to release information are to be scanned and kept in clients' clinical files. Hard copies should be shredded only after they are properly scanned to the right file.
- A new consent form for supervision is to be completed if there is a change of supervisor for that client between semesters. Informed consent regarding supervision requires that clients are not only informed that a trainee is under supervision but also the name(s) of the supervisors.



- All supervision notes with your practicum student(s) are to stay at the Counseling Center upon your departure. Return these to your supervisor of supervision when you have completed the practicum student's final evaluation.
- All faxes are to be sent with a cover page that indicates that the information is coming from the Counseling Center. Information fax is to be scanned into the client's file (even if the same information is already in the file as a note) to indicate that in fact the information was faxed to the office/person intended to be faxed to. It is good practice to include the confirmation from the fax machine. Feel free to create a personal fax cover page for any personal faxes.
- It is possible to open two windows with Titanium. This is for instance useful when you are typing a termination report and you want to look at client's file for any given reason.

### **Training:**

- Be aware that APA/licensure standards are not always aligned with your classification as a state employee. For example, should you take all the leave available to a state employee, you may risk not obtaining the required hours for APA/licensure standards. It is the Intern's responsibility to balance these various roles and expectations.
- Seminars have readings that will add to the time at the office. The time spent reading counts towards the required 2000 internship hours and should be recorded in the log. Also count any readings done in preparation for work with certain clients, to learn about certain clinical issues, etc.
- Interns are expected to be truthful in the recording of hours. Hours logs should be kept on the G- drive and updated weekly to allow for random audits by supervisors.
- While clinical load is typically lower during the summer, interns are still expected to see clients during this time. This is true even if they have already met their required number of hours.
- Test all equipment (e.g. digital camera) before your first session. Let Training Director or Director know immediately if you experience any technical malfunctions.
- Please keep in mind that the staff at the Counseling Center is committed to training and to the professional and clinical development of interns. Feedback is provided with the intent of promoting growth. It is the hope of the staff that interns would recognize that the aim of the corrective feedback they will offer during the year is to create possibilities and stimulate growth. Similarly, the staff at the Counseling Center appreciates constructive feedback from interns. We are interested in learning if there are ways in which we can better address your training needs.
- Given our commitment to training and if believed to be helpful, different staff members may watch videos of or discuss your work. This may result in additional understanding of a case or ideas on how to proceed. Similarly, it may be helpful for a multiple number of reasons, for a staff member, in addition to the supervisor of supervision, to watch tape of or discuss your supervision with the practicum student.
- Peer supervision is an important component for professional growth. As such it is expected that you would complete evaluations of each other's presentations when those are requested and provide ongoing support for the work of other trainees.



# WILLIAM & MARY

CHARTERED 1693

Counseling Center  
McLeod Tyler Wellness Center  
Post Office Box 8795  
240 Gooch Drive, Second Floor  
Williamsburg, VA 23187-8795

Phone Number 757-221-3620  
Fax Number 757-221-3615

I, \_\_\_\_\_, understand that as an employee in the William & Mary Counseling Center:

- I will be working with sensitive and confidential information.
- I will follow the policies and procedures of the WMCC Training Program and The College of William & Mary
- I will follow the Ethics Code of my profession and all laws regarding confidentiality and the practice of my profession as indicated in the *Code of Virginia* and the Regulations Governing the Rule of Psychology, Counseling, or Social Work
- I am jeopardizing my employment and potentially subjecting the University to litigation for violation of the Family Educational Rights and Privacy Act if I break the confidentiality of this office and that I may be subject to dismissal from my position if I have violated any of the above.

\_\_\_\_\_ Check here if you have read, understood, had the opportunity to ask questions, and agree with the policies and procedures of the training program outlined in this Training Manual.

\_\_\_\_\_

Trainee Signature (sign)

Date \_\_\_\_\_

\_\_\_\_\_

Trainee Name (print)



W&M Counseling  
Center  
Internship  
Training



WILLIAM & MARY

CHARTERED 1693

## **PHILOSOPHY OF TRAINING**

The training program at the WMCC embraces the responsibility of providing supportive, comprehensive doctoral-level internship training in a counseling center setting. Our training program is consistent with the overall mission of the WMCC, providing quality and culturally sensitive professional services to students facing developmental and clinical issues that could interfere with the fulfillment of their educational and personal goals.

### **Developmental-Experiential-Mentorship Based Training**

The WMCC internship program is based on a Developmental-Experiential-and mentorship philosophy of training. The internship builds on the foundation of knowledge and skills acquired through the diverse experiences of graduate coursework, research, practica and other applied activities. The center considers the internship a capstone to a doctoral training in health service psychology. We strive to facilitate the integration of research, knowledge, and skills and the consolidation of a professional identity as a psychologist. As such, our mission is to provide a training environment that facilitates the transition from graduate student to culturally sensitive, clinically skilled and ethically sound psychologist.

### **Integration of Research/Scholarly Work and Practice**

An important component of the WMCC philosophy of training is the belief in the need to integrate scholarly knowledge, research findings, and critical thinking into clinical practice and clinical decision making. We encourage the consumption and implementation of scholarly research across roles within the agency.

### **Mentoring, Modeling, and Supervision**

Trainees are supervised by senior staff members who model the highest ethical, legal, and professional standards of the profession and provide a safe and supportive environment that would foster interns' learning and development. It is in this type of environment that interns could effectively develop conceptual, methodological, therapeutic, and case management skills while engaging in a self-exploration process that would be conducive to personal and professional growth.

In addition to the intense clinical supervision interns receive, they also participate in formal training activities that are structured to promote a theoretical and clinical foundation in health service psychology. The structured training activities include an orientation program, training seminars, case conferences, and group supervision.

Mentoring and an “open door policy” are highly valued at the center. Interns are encouraged to utilize and consult with all professional staff regardless of supervision assignments.

## PROFESSION-WIDE COMPETENCIES

The field of health service psychology demands a flexible and integrated repertoire of skills and competencies. The Standards of Accreditation in Health Service Psychology define nine Profession-Wide Competencies that serve as the basis for evaluation throughout the internship program. The Profession-Wide Competencies are as follows:

PROFESSION-WIDE COMPETENCIES	
I.	RESEARCH
II.	ETHICAL AND LEGAL STANDARDS
III.	INDIVIDUAL AND CULTURAL DIVERSITY
IV.	PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS
V.	COMMUNICATION AND INTERPERSONAL SKILLS
VI.	ASSESSMENT
VII.	INTERVENTION A. Individual Therapy B. Crisis Intervention C. Group Therapy D. Outreach Programming
VIII.	SUPERVISION
IX.	CONSULTATION AND INTERPROFESSIONAL/ INTERDISCIPLINARY SKILLS

### **I. RESEARCH**

During the year, interns will regularly read research articles for seminars and integrate research in presentations. Interns are presented with multiple opportunities to consume research to inform their clinical practice. In addition, interns are expected to present their personal research (e.g., dissertation) to their peers and the staff at the Center. Interns will be expected to demonstrate knowledge, skill, and competence to critically evaluate research and apply research findings in the different professional roles assumed during the internship year.

### **II. ETHICAL BEHAVIOR AND LEGAL STANDARDS**

An overarching goal of the WMCC is to instill a commitment to ethical practice. Interns will have opportunity to discuss ethical issues in the different didactic seminars offered during the year, as well as in group supervision meetings (e.g., case conference, group therapy supervision, etc.), and in supervision. Interns will be expected to behave according to the Ethical Principles of Psychologists and Code of Conduct of the American Psychological Association (2002) and demonstrate knowledge regarding the rules, regulations and standards governing health service psychology. In addition, interns are to familiarize themselves with the Virginia Law regarding the ethical practice of psychology. Interns will be expected to recognize ethical dilemmas and apply ethical decision-making processes competently. In addition, interns are expected to follow the Counseling Center policies and procedures, maintain an appropriate professional role with clients, develop appropriate interaction with staff and trainees, and maintain accurate documentation records.

### **III. INDIVIDUAL AND CULTURAL DIVERSITY**

Interns participate in didactic and experiential training regarding multicultural competence. Sensitivity to issues of power and privilege as well as social justice issues are central to the mission of the Counseling Center and the Training program. As such, interns are to demonstrate ability to engage in self-reflection about the way in which their own personal/cultural history affects how they understand and interact with people different from themselves, including peers, colleagues, supervisees, supervisors, other staff/professionals, and those seeking services. Interns are expected to demonstrate cultural sensitivity and competence in service delivery with clients, groups, and organizations from diverse cultural backgrounds and other forms of individual difference. Multicultural competence is defined according to APA Guidelines (see Training Manual, VII. ETHICS & LAWS).

### **IV. PROFESSIONAL VALUES, ATTITUDES AND BEHAVIORS**

A significant goal of the internship is to instill a commitment to professionalism, integrity, self-reflection, and lifelong learning. The internship attempts to foster the development of interns' reflective practice and self-assessment so that they can recognize the boundaries of their competencies, demonstrate ability to monitor their own professional behavior, and recognize strengths and areas of growth. Similarly, the internship offers opportunities for interns to consolidate their professional identity. It is anticipated that interns will gain a sense of competence, confidence, and autonomy in the practice of health service psychology. As the year progresses, it is expected that interns will respond professionally in increasingly complex situations with a greater degree of independence. As such, interns are to demonstrate ability to effectively use supervision, being receptive feedback and new ideas as well as open to looking at own issues that may impact professional behavior.

### **V. COMMUNICATION AND INTERPERSONAL SKILLS**



Appropriate communication and interpersonal skills are essential for positive interactions and effective work with others. Communication and interpersonal skills are the foundations for many of the other vital competencies in the field of health service psychology. It is expected that Interns will demonstrate understanding of professional language and concepts, and produce and comprehend oral, nonverbal, and written communication. Interns are to demonstrate the ability to maintain effective relationships with a wide range of individuals including clients, peers, colleagues, supervisees, supervisors, and other staff/professionals, being sensitive to individual and cultural differences as well as to issues of power and privilege. Interns are expected to utilize and develop appropriate interpersonal skills, appropriately managing emotional reactions while interacting with others, particularly when engaged in difficult communication.

## **VI. ASSESSMENT**

Interns participate in didactic and experiential assessment training as well as in weekly supervision to assure competent assessment practices. They will have ample opportunity to engage in initial assessments and clinical interviews with clients seeking services. Interns are expected to accurately assess clients' psychological needs, write comprehensive conceptualizations, and make appropriate treatment recommendations such as the need for individual or group therapy, psychiatric referral, or other interventions including referrals to other professionals or community services. Interns are also expected to be able to make clinical decisions about the selection and utilization of psychological tests in their clinical practice; they are to demonstrate ability to accurately interpret data from assessment instruments. Interns will demonstrate sensitivity to the context of the client's culture when selecting, implementing and interpreting test results. Interns will be able to demonstrate ability to use assessment data to inform their clinical interventions.

## **VII. INTERVENTION**

### **A. Individual Psychotherapy:**

Interns demonstrate the ability to offer individual psychotherapy to college students with a variety of presenting concerns and identities during the internship year. Interns will receive didactic and experiential training as well as weekly supervision to assure competent service delivery. Interns are expected to appropriately apply therapeutic knowledge, multicultural guidelines, and evidenced-based treatments in clinical work. It is expected that interns demonstrate the ability to gather data, establish therapeutic rapport, develop accurate diagnostic impressions, and appropriately conceptualize cases, with consideration of client diversity variables. Interns will demonstrate effective timing and flexibility in therapeutic interventions. Interns are expected to timely and accurately document their clinical interventions with clients.

**B. Crisis Intervention:**

Interns receive didactic and experiential training as well as ongoing supervision and consultation regarding crisis intervention skills. During working hours or through after-hours on-call duties (with a back-up supervisor), interns will be able to provide crisis intervention for clients experiencing acute personal distress or symptomatology. Interns are to be aware of best practices and evidence-based strategies related to crisis intervention. Interns will appropriately consult when assessing and responding to crisis situations. Interns are expected to appropriately assess the magnitude of the crisis situation, the clients' needs, and to implement appropriate interventions to reduce distress. Interns are expected to demonstrate ability to evaluate clients' safety regarding risk of danger to self and/or others and mobilize resources accordingly. Interns will also maintain timely and accurate documentation records.

**C. Group Psychotherapy:**

Interns receive didactic and experiential training in group therapy intervention. They work with a group co-leader from the earlier stages of group referral, pre-group screenings and group formation, through the working and termination stages of group. Interns are expected to demonstrate ability to facilitate process-oriented therapy groups and/or theme/population-oriented groups. They are to be able to collaborate with co-leaders and accurately document the clinical interventions with groups.

**D. Outreach Programming:**

Interns are presented with multiple opportunities to engage in outreach programming. Interns are expected to be able to design and implement psycho-educational presentations and workshops for audiences within the campus community. Interns are expected to demonstrate the ability to develop programming based on current research, with sensitivity to different cultural variables, and based on the needs of the target audience. Interns will exhibit competency in their presentation skills. Interns receive didactic and experiential training in crisis management; it is expected that interns will be able to respond to critical incidents or crisis debriefing outreach events if there are situations of this caliber during their internship year.

**VIII. SUPERVISION**

Interns provide supervision for doctoral level practicum students. Interns receive didactic and experiential training in supervision. Interns are expected to model ethical practice, provide a safe environment for practicum students to discuss their cases, and demonstrate ability to assist supervisees with conceptualization and treatment planning. As supervisors, interns provide feedback and help supervisees develop self-reflective skills, encouraging identification of strengths as well as areas of growth. Interns are to apply the criteria for evaluation in a fair and developmentally appropriate manner.

**IX. CONSULTATION AND INTERPROFESSIONAL/INTERDISCIPLINARY SKILLS**

Interns are expected to gain knowledge and skills regarding consultation. Interns receive didactic and experiential training as well as supervision regarding consultation with the multidisciplinary staff of the Center, faculty, staff, parents, Student Affairs professionals, and any other members of the university. Interns will be expected to exhibit ability to use their assessment and clinical judgment as they consult with others. Similarly, interns are expected to demonstrate knowledge and respect for the roles and perspectives of other professions and apply this knowledge in interprofessional/interdisciplinary consultation with individuals, groups and/or systems.

## Clinical & Training Requirements

### **Specialty Tracks at WMCC:**

The training program offers various optional specialty tracks. The program's Training Committee will meet and discuss supervisor availability and decide if a specialty track will be offered at the start of each training year. The program does not guarantee that specialty tracks will be available each year. An intern's decision to participate in a track will occur during an orientation period at the start of internship after Interns have learned more about the specific requirements of a track and the standard internship requirements.

An intern may decline to participate in a specialty track with no consequence to their standing in the program. If an intern does wish to complete a specialty track, they may only choose one specialty track to participate in over the course of the year. All members of a cohort can participate in a track simultaneously.

Please see track specific documents for more information on specific training activities required of these optional tracks.

### **Hours<sup>1</sup>:**

1. **Direct Service Hours:** Interns must accrue a minimum of 500 direct service hours over the course of the internship for successful completion of the program.<sup>2</sup>
2. **Overall Internship Hours:** Interns must accrue a minimum of 2,000 overall hours over the course of the internship for successful completion of the program.

### **Individual, Couples, & Group Therapy:**

1. **Individual/Couples Therapy:** Schedule individual/couples for an average of 16 clinical hours/week. <sup>3,4,5</sup>

---

<sup>1</sup> Interns use an hour log provided by the program to record their hours

<sup>2</sup> Direct service hours include interactions with clients or supervisees while serving in a clinical role (i.e., individual, couples, group, crisis, and/or consultation sessions, outreach events, and provision of supervision).

<sup>3</sup> To complete the 500 direct service hours required for completion of the internship, interns may need to have more than the estimated clinical hours per week scheduled during some weeks of the semester.

<sup>4</sup> At the beginning of semesters, interns may have less than the estimated clinical hours scheduled.

<sup>5</sup> If an intern chooses to participate in the optional group therapy track, adjustments are made to the individual/couples therapy hours expectations (See Weekly Activity Summary for details).

2. **Group Therapy:** Co-facilitate one therapy group with a senior staff member during the Fall and Spring semesters. <sup>6</sup>
3. **Initial Consultations:** Schedule three initial consultations per week on Team Day, weekly throughout the Fall and Spring semesters.<sup>7</sup>
4. **Intakes:** Schedule three intake appointments/week in the Fall and Spring semesters.<sup>8</sup>
5. **Urgent/Crisis & Consultation Appointments:** In collaboration with one's teammate, urgent/crisis and consultation appointments are distributed throughout the day.<sup>9,10</sup>
6. **On call:** Provide at least one week of on-call/after-hours coverage per semester and one week of on-call/after-hours coverage during the summer.

#### **Outreach<sup>11</sup>:**

1. **Orientation:** Observe or co-facilitate at least two outreach programs during the W&M students' orientation.
  - a. If the RA Suicide Risk Reduction/Campus Connect Training is conducted during orientation, Interns are required to co-facilitate this program in addition to the two other orientation outreach programs.
2. **Screening Programs:** Participate in at least one screening program during the internship year, if offered.
3. **Mental Health Mondays (MHM):** Facilitate at least 1 MHM program per semester.<sup>12</sup>

---

<sup>6</sup> Interns who are interested in acquiring more group therapy experience may participate in an optional group therapy track, if it is being offered during the training year (see Group Therapy Track for details).

<sup>7</sup> During the initial weeks of the fall semester, interns will schedule more initial consultations, as determined by the Training Director and Clinical Director, to assist in building their caseloads.

<sup>8</sup> The number of Intakes expected per week may vary if an intern chooses to participate in the optional group therapy track (see Weekly Activity Summary for details).

<sup>9</sup> Distribution of appointments between teammates may not be equal, due to the unpredictable nature of such appointments.

<sup>10</sup> Interns as well as senior staff members may be called to help with crisis, initial consultations, or consultation appointments on non-team days if the team for that day is managing excessive clinical need.

<sup>11</sup> Interns who are interested in acquiring more outreach experience may participate in an optional outreach track, if offered during the training year.

<sup>12</sup> Interns can participate in more than 1 MHM program per semester, however, this will not take the place of the Didactic/Interactive outreach requirements detailed in item #4.

4. **Didactic/Interactive Presentations:** Facilitate a minimum of three didactic/interactive outreach presentations per semester (minimum of six didactic outreach programs over the course of the internship year).<sup>13,14</sup>
5. **Campus Connect:** Facilitate at least one Campus Connect suicide prevention training per semester, if offered. During the Spring semester, Interns will assist in training practicum students in the program and co-facilitate the program with a practicum student, if offered.

### **Program Evaluation:**

1. Interns will conduct a program evaluation project over the course of the internship year. The intern cohort may choose the emphasis of the project based on the following options:
  - a. **Campus Connect/Suicide Prevention Training:** Interns coordinate with the Suicide Prevention Coalition to schedule trainings and discuss needs of the campus community. Administer pre- and post-tests to training participants. The pre and post evaluation forms have already been developed for this project. Analyze data obtained from trainings conducted throughout the year. Interns can access previous data to use in analysis as well. The project culminates by Interns providing a written document detailing results and feedback, as well as an accompanying presentation to staff and campus partners at the end of the year.
  - b. **WMCC Group Therapy Program:** Interns will collaborate with the Group Coordinator, Assistant Director for REO and Training Director to obtain data about the effectiveness of the group therapy program at WMCC. Gather and analyze data from group therapy participants through the administration of various clinical instruments and/or feedback forms. The project culminates by Interns providing a written document detailing results and feedback, as well as an accompanying presentation to staff at the end of the year.

---

<sup>13</sup> Interns must produce an original program for at least one didactic/interactive presentation over the course of the year and be observed by a licensed staff member to complete the evaluation of Intern's outreach skills.

<sup>14</sup> Programs can be in response to requests received by the Counseling Center or based on own interest. If self-initiated, it would be important to take into account the academic calendar and students' schedules to increase the likelihood of getting an audience.

## Assessment<sup>15, 16</sup>:

1. **CCAPS-62:** Interns administer and interpret the CCAPS-62 at initial consultation, urgent appointments, and every three sessions of individual therapy.
2. **Clinical Interviewing:** Interns regularly engage in assessment via clinical interviews during initial consultations, urgent/crisis appointments, and intakes.
3. **Case Presentations:** Interns complete one case presentation during the Fall and Spring semesters.<sup>17</sup> Case presentations occur during weekly Case Conference meetings attended by all staff (see *Supervision* below for details on Case Conference). Case Presentation requirements are described below:
  - a. Complete a short write up of the case (no more than 3 pages single-spaced)<sup>18</sup> including:
    - i. Demographics
    - ii. Relevant Background/History
    - iii. Presenting Concerns
    - iv. Assessment data (instruments, rationale, results)
    - v. Diagnosis
    - vi. Treatment Summary
    - vii. Theoretical Approach & Conceptualization
    - viii. Relevant Research/Literature (include citations)
    - ix. Discussion Questions
    - x. References
  - b. During the presentation, provide a summary of the case/write-up for no more than 10-15 minutes
  - c. Show a video clip illustrating your work approximately 10 minutes in length

## Supervision:

---

<sup>15</sup> Interns who are interested in acquiring more assessment experience may integrate use of more assessment instruments and/or request more assessment referrals and supervision. Consultation should occur with the intern's supervisor before administering any additional assessment beyond the CCAPS-62.

<sup>16</sup> Interns may select to participate in an optional therapeutic assessment track, if offered during the training year.

<sup>17</sup> The intention is for Case Presentations to generate feedback that will benefit you and your client. Therefore, the Training Director will determine dates by which Case Presentations must be completed each semester in efforts allow for integration of feedback before the semester ends.

<sup>18</sup> The case presentation write up should be printed and distributed to staff members at least 48 hours prior to the presentation.

1. **Individual Supervision:** Interns receive two-hours per week of clinical supervision for individual cases, initial consultations/intakes, on-call and crises.
2. **Provision of Supervision:** Interns provide 2 hours per week of individual supervision to a practicum student in the Spring semester. Based on the number of practicum students being trained each year, interns will supervise the equivalent of at least half a caseload of a practicum student during the Spring semester. Interns will meet with their practicum supervisee for 2 hours per week
3. **Supervision of Supervision:** During the Spring semester, interns receive 1 hour of supervision of supervision per week (in additional to individual supervision) overseeing their supervision of a practicum student.
4. **Group Therapy Supervision:** Interns receive 1.5 hours per week of group therapy supervision. One hour of group therapy supervision occurs during weekly meetings attended by all staff members facilitating groups. This meeting will include regular discussion of group progress and informal presentations (including showing video recordings) of group therapy. The remaining 0.5 hours per week of supervision occurs during a meeting with the intern's group co-leader to discuss and process issues relevant to your specific group.<sup>19</sup>
5. **Case Conference (1-2hr/week).** This meeting is considered supervision in a group format, attended by all staff members. Trainees take turns showing clips of sessions and discussing clinical issues in order to hear different perspectives and receive feedback from those in attendance. Peer input is valued and encouraged. Practicum students also bring cases to these meetings and interns are able to provide input as a way to demonstrate their consultation, conceptualization, and clinical skills.<sup>20</sup>
6. **Supervision Logs:** Interns maintain a weekly supervision log for individual supervision and supervision of supervision caseloads, presenting concerns, any safety/risk concerns, and supervision discussions.<sup>21</sup>

## Seminars:

---

<sup>19</sup> Interns may receive additional weekly group therapy supervision if participating in multiple therapy groups as part of the group track.

<sup>20</sup> The Training Director typically coordinates a rotation with trainees to share clinical work in this meeting. If a trainee is unexpectedly unable to present on a scheduled day, a different person will need to present that day.

<sup>21</sup> Supervision logs are to remain at the Center with the Training Director after the completion of the Internship. Please do not shred any supervision logs.



1. **Integrated Seminar:** Interns meet for two hours per week during the Fall semester for this seminar covering various topics. More details provided in seminar syllabus.
2. **Diversity Seminar:** Interns meet for one hour biweekly (once every other week) throughout the Fall and Spring semesters for this seminar focused on issues of identity, diversity, and social justice. More details provided in seminar syllabus.
3. **Supervision Seminar:** Interns meet for one hour biweekly (once every other week) throughout the Fall and Spring semesters for this seminar focused on supervision.<sup>22</sup> More details provided in seminar syllabus.

### Meetings:

1. **Staff Meetings:** Attend and participate in “All Staff” meetings scheduled throughout the Fall and Spring semesters, typically one hour per month.
2. **Meetings with Training Director:** Attend and participate in meetings with the Training Director, scheduled 0.5-1.0 hour per month during the Fall semester (alternating group-individual meetings), 0.5-1.0 hour per month (alternating group-individual meetings) during the Spring semester, and as needed/as requested during the summer. The purpose of these meetings is to address potential questions or concerns and/or provide feedback about the training program to the Training Director.<sup>23</sup>
3. **Student Affairs Meetings:** Interns attend all Student Affairs meetings, typically two hours per month, including semester “Kickoffs” and end of semester celebrations.<sup>24</sup>

### Research<sup>25</sup>:

---

<sup>22</sup> The seminar focused on supervision theories/approaches during the Fall, as interns prepare to supervise a practicum student. In the Spring, seminar takes the form of a group consultation format to discuss supervision issues. Interns also present on their supervision work with a practicum student in the Spring seminar.

<sup>23</sup> Interns are always welcome to request an individual meeting with the Training Director outside of these regular meetings.

<sup>24</sup> Any absence from a Student Affairs gathering should have prior approval from the Training Director and the intern's individual supervisor.

1. **Research Presentation:** Interns present on personal research to Counseling Center staff. This presentation can be scheduled at any time during the academic year.<sup>26</sup>

### Teaching:

1. **Practicum Seminar Teaching Presentation:** Interns present on a topic of their choice during the practicum seminar (fall or spring semester).<sup>27</sup>

### Summer Project:

1. **Summer Project:** Interns will complete a summer project of their choosing. Examples include creating psychoeducational brochures, developing resource guides, developing training resources, improvements to counseling center website, projects identified as Counseling Center needs, etc.<sup>28</sup>

### Evaluations<sup>29</sup>:

1. **Self-Assessments:** Completed at the start and end of internship.
2. **Individual Supervisor(s) Evaluations:** The “Evaluation of Psychology Interns by Supervisors” is used for this purpose. Interns receive evaluations from individual supervisors on a quarterly basis over the internship year: 1<sup>st</sup> quarter (approximately October), 2<sup>nd</sup> quarter (approximately January), 3<sup>rd</sup> quarter (approximately April), and end of internship/4<sup>th</sup> quarter (July).

---

<sup>25</sup> It is expected that interns will apply scholarly work and research findings in all activities and roles assumed during the internship year.

<sup>26</sup> Interns who decide to present during the academic year (vs. summer) should schedule early in the semester to increase the likelihood for staff availability.

<sup>27</sup> Interns should consult with practicum seminar co-leader(s) and the Training Director before finalizing a presentation topic and to coordinate scheduling.

<sup>28</sup> Interns should seek approval of their summer project idea with their primary supervisor(s) and the Training Director before moving forward.

<sup>29</sup> All evaluations can be found in the Training Manual, V. *EVALUATIONS*. Interns are encouraged to familiarize themselves with the program's Minimum Level of Achievement (MLA) and all evaluations.

3. **Group Supervisor(s) Evaluations:** Interns receive evaluations from group supervisor(s) at mid-group and end-group.<sup>30</sup>
4. **Supervisor of Supervision Evaluations:** Interns receive an evaluation of their supervisory skills by their Supervisor of Supervision in the Spring at mid-semester and end-semester.
5. **Evaluations of Intern Performance in Seminar<sup>31</sup>:**
  - a. **Diversity Seminar:** Evaluations of performance provided at mid-seminar (end Fall) and end-of-seminar (end Spring).
  - b. **Supervision Seminar:** Evaluations of performance will be provided at mid-seminar (end Fall) and end-of seminar (end Spring).
6. **Case Presentation Evaluations:** Staff members and trainees in attendance during interns' case presentations (Fall and Spring) complete a case presentation evaluation.
7. **Supervision Presentation Evaluation:** The coordinator(s) of the Supervision Seminar and all interns in attendance during presentation complete a supervision presentation evaluation (Spring semester).
8. **Outreach Presentation Evaluation:** The licensed staff member observes and completes the outreach presentation evaluation.<sup>32</sup>
9. **Teaching Presentation Evaluation:** A licensed staff member observes and completes the teaching presentation evaluation (Fall or Spring semester).
10. **Research Presentation Evaluation:** Staff members and trainees in attendance during the intern's research presentation complete the research presentation evaluation.
11. **Intern Evaluations of Supervisors:** Interns complete an evaluation of supervision to share with supervisors (individual, group, supervision of

---

<sup>30</sup> If an intern is participating in the group track, they also receive the Group Track Evaluation at these time points.

<sup>31</sup> There is no performance evaluation for Integrated Seminar.

<sup>32</sup> This evaluation may occur at any time over the course of the internship; however, interns are asked to be proactive when requesting observation by a staff member.

supervision) whenever receiving an evaluation of themselves, except for presentation evaluations.<sup>33</sup>

12. **Intern Evaluation of Supervisee(s):** Interns complete evaluations of their practicum supervisee at mid- and end-semester, in collaboration with their Supervisor of Supervision. Practicum students typically have evaluation forms specific to their graduate program.
13. **Supervisee Evaluation of Intern Supervisor:** Practicum provide evaluations of the intern in their role of supervisor using evaluation of supervision form.<sup>34</sup>
14. **Intern Evaluation of Seminar:** Interns provide evaluations of seminar at the end of the seminar.
15. **Intern Evaluation of Training Director:** Interns complete an evaluation of the Training Director at the end of internship.
16. **Evaluation of Internship Experience:** Interns complete an evaluation of the internship experience at the end of internship.
17. **Evaluations from Academic Programs:** Interns are responsible for informing the Training Director and submitting all required forms to the doctoral program if their academic program requires specific forms to be completed. Interns are to provide copies of these evaluation forms to the Training Director and supervisor(s).

### **Electronic Portfolio:**

All training records are included in an Electronic Portfolio to remain indefinitely in a restricted file with the Center. Interns use the “End of the Year Checklist” (*Training Manual, V. Evaluations, 22. End of Year Checklist*) to determine that all required documents are in the Electronic Portfolio. The Intern, individual supervisor, and Training Director must sign off on this document before the internship is considered complete.

---

<sup>33</sup> Interns should share their evaluation of supervision *after* receiving the supervisor’s evaluation to eliminate any concerns of retaliation.

<sup>34</sup> As is the case for interns, Practicum Students provide their evaluation of the Intern supervisor *after* receiving the evaluation of themselves to eliminate concerns of retaliation.



# WILLIAM & MARY

CHARTERED 1693

Counseling Center  
McLeod Tyler Wellness Center  
Post Office Box 8795  
240 Gooch Drive, Second Floor  
Williamsburg, VA 23187-8795

Phone Number 757-221-3620  
Fax Number 757-221-3615

I \_\_\_\_\_ have read, understood, and agree with the Clinical and Training Requirements of the internship outlined above (including footnotes). I had the opportunity to discuss these requirements with the Training Director and have questions answered. I understand that it is my responsibility to ensure I meet all the clinical and training requirements for successful completion of the training program.

\_\_\_\_\_

Date \_\_\_\_\_

Psychology Intern (sign)

\_\_\_\_\_

Psychology Intern (print)

**William & Mary Counseling Center Group Therapy Track**

A. **PURPOSE.** The Group Therapy Track offers interns the opportunity to enhance their knowledge and skills in group therapy through a program that aligns with the APA Division 49 (Society of Group Psychology and Group Psychotherapy) Group Specialty Council’s guidelines for specialty training in group therapy: <sup>1</sup>

- a. A training philosophy that highlights the distinctiveness of group therapy
- b. A curriculum that includes preparation of doctoral-level knowledge, skills, and competences related to group therapy <sup>2</sup>
- c. Opportunities for gaining the knowledge, skills, and experiences required

**B. LEARNING OBJECTIVES.**

1. Enhance interns’ knowledge related to the theory and practice of group therapy
2. Ensure that approximately 10% of interns’ direct clinical service hours is spent in the provision of group therapy <sup>3</sup>
3. Provide interns with the potential for additional supervised group leadership experience, above and beyond general internship requirements
4. Assist interns in developing the following group-related skills:
  - a. Apply evidence-based, scientific principles from the current research to group interventions
  - b. Design, screen for, plan/organize, orient, and facilitate groups
  - c. Recognize and address ethical dilemmas that arise in group
  - d. Select, administer, and assess data from suitable group measures
  - e. When relevant, apply a supervision model to group work with trainees
  - f. Use of appropriate group interventions
  - g. Multicultural competence leading groups with diverse clients
5. When relevant, fulfill a portion of the requirements for interns who desire to obtain specialty designation as a group therapist (see section E)

C. **METRICS.** Consistent with the APA Division 49 Group Specialty Council’s benchmarks <sup>4</sup> for doctoral-level competency in group therapy, interns in the Group Therapy Track will be evaluated by the following criteria:

Competency:	Expectation:
1. Integration of Science and Practice	<ul style="list-style-type: none"> <li>• Demonstrates the use of evidence-based knowledge and interventions for planning and facilitating groups.</li> <li>• Conducts effective group organization practices such as screening, orientation, and group process commentary.</li> <li>• Applies the scientific principles from current research findings to group members’ problems, issues and concerns.</li> </ul>

<p>2. Ethical and Legal Standards/Policy</p>	<ul style="list-style-type: none"> <li>• Recognizes ethical dilemmas and concerns related to group psychotherapy and uses an ethical decision making model when ethical dilemmas arise in groups.</li> </ul>
<p>3. Consultation and Evaluation</p>	<ul style="list-style-type: none"> <li>• Demonstrates an ability to work constructively with interdisciplinary mental health professional teams.</li> <li>• Engages in evaluative practices as applied to groups such as cohesion, group progress, and the like.</li> </ul>
<p>4. Supervision and Teaching</p>	<ul style="list-style-type: none"> <li>• Applies a supervision model when working with mental health professionals in training, such as in practicum and internship.</li> <li>• Presents information relative to group psychology and group psychotherapy in venues such as case presentations, grand rounds and the like.</li> </ul>
<p>5. Assessment</p>	<ul style="list-style-type: none"> <li>• Demonstrates an ability to evaluate the group's and group members' needs and progress.</li> <li>• Uses appropriate assessment measures and instruments for screening and progress.</li> </ul>
<p>6. Professional Values, Attitudes and Behaviors</p>	<ul style="list-style-type: none"> <li>• Demonstrates an awareness of personal values, attitudes and behaviors that have the potential to affect the therapeutic process.</li> <li>• Conceptualizes and implements a self-reflective process related to group facilitation.</li> </ul>
<p>7. Intervention</p>	<ul style="list-style-type: none"> <li>• Facilitates the emergence of group therapeutic factors such as universality, hope, catharsis and cohesion.</li> <li>• Effectively intervenes to prevent and/or address problematic group member behaviors, such as monopolizing, story-telling, and help-rejecting.</li> <li>• Effectively and safely manages members' expression of difficult emotions such as anger, fear, guilt and shame.</li> </ul>
<p>8. Individual and Cultural Diversity</p>	<ul style="list-style-type: none"> <li>• Facilitates the therapeutic experience for groups composed of diverse individuals.</li> <li>• Conceptualizes the role of power dynamics in groups.</li> <li>• Demonstrates an ability to intervene effectively when issues such as marginalization and microaggressions occur in groups.</li> </ul>

**D. TRACK REQUIREMENTS.** (see section F for stipulations)

- Participate in WMCC Group Therapy Mini-Seminar consisting of 15 hours of didactic study in group therapy theory and practice at the start of the training year
- Facilitate a minimum of 4 diverse groups:
  - Fall: 1 USO group, 1 themed or USO group
  - Spring: 1 USO group, 1 themed or USO group
- Assume primary management of one or more spring groups (e.g., collect referrals, arrange pre-group interviews, take the lead in sessions, etc.)

**E. OPTIONAL EXPERIENCES.** To some extent, the Group Therapy Track may be tailored to fit interns' interests and goals. Additional and optional opportunities could include (1) co-leading with and supervising a practicum student providing group therapy in Spring using a triad supervision model; (2) independent study with the Group Therapy Coordinator or another group supervisor emphasizing administrative duties associated with group program development and management; and/or (3) self-designed group-related activities created collaboratively with the Group Therapy Coordinator and/or Training Director. An intern must obtain approval from their primary supervisor(s), the Training Director, and/or the Training Committee to participate in any additional and optional experiences. Approval would take into consideration the availability of groups, developmental level of trainees, and other center-wide factors.

Additionally, interns participating in the track may begin or continue the process of meeting the requirements to acquire specialty designation through various credentialing boards.<sup>5,6</sup> After completing internship, early career post-licensure practitioners are best positioned to become a certified group psychotherapist (CGP) through the International Board for Certification of Group Psychotherapists after meeting the following criteria during or following graduate training (as of 2019):<sup>6</sup>

- Master's or doctoral degree
- Highest state clinical licensure available to practice independently
- 15 clock hours of didactic study in group therapy theory and practice
- 300 hours of group therapy experience as a (co)leader
- 75 hours of group therapy supervision with an approved supervisor<sup>7</sup>

An intern's ability to qualify to become a CGP at the completion of internship will largely depend on their prior training. Nonetheless, participating in the Group Therapy Track could fulfill a significant portion of the CGP requirements.

**F. STIPULATIONS.** The Group Therapy Track is offered based on the availability of groups and licensed staff psychologists to provide appropriate supervision. Additionally, interns' participation in the various components of the track will depend on their training prior to internship. For example, interns with minimal or



no past experience (co)leading interpersonal process groups may be required to process observe during at least one USO group in the fall semester.

The general internship expectations for individual therapy hours will be adjusted to accommodate the extra group therapy hours associated with participating in the track. The group-focused case presentation is in addition to the two formal case presentations associated with the general internship requirements. Themed groups may be selected based on the intern's interest in gaining experience with a specific population or concern, provided that the group receives appropriate referrals and/or the intern is willing to create and implement a recruitment strategy. If an intern self-designs a themed group, the topic must be approved by the Group Therapy Coordinator, Training Director, and/or Training Committee. Interns will facilitate an additional USO group in fall or spring if a themed group matching the interns' interests cannot be offered.

Importantly, interns' ongoing participation in the Group Therapy Track is contingent upon their satisfactory fulfillment of both the general internship and track requirements. As part of a growth or remediation plan, an intern may be temporarily or permanently removed from the track if their primary supervisor(s), the Training Director, and/or the Training Committee become concerned about their performance.

## Footnotes

1. See the APA Division 49 Group Specialty Council's suggested *Education and Training Guidelines* for specialty training of group therapists at <https://www.apadivisions.org/division-49/leadership/committees/group-specialty>
2. According to the *Education and Training Guidelines* (see Footnote 1), this curriculum should total 96+ hours of didactics and include 50+ hours of group leader experience and 30+ hours of qualified supervision
3. See the APA Division 49 Group Specialty Council's *Taxonomy for Group Training Programs* at <https://www.apadivisions.org/division49/leadership/committees/group-specialty>
4. See the APA Division 49 Group Specialty Council's *Postdoctoral Residency Competencies for Group Psychology and Group Psychotherapy Specialty* at <https://www.apadivisions.org/division49/leadership/committees/postdoctoral-competencies.pdf>
5. A specialty certification is offered by the American Board of Group Psychology after post-licensure practitioners have conducted 600+ hours of group therapy; see the criteria at <https://abpp.org/Applicant-Information/Specialty-Boards/Group-Psychology/Application,-Specialty-Specific-Fees.aspx>
6. See the International Board for Certification of Group Psychotherapists' criteria to become a CGP at <https://www.agpa.org/cgp-certification/how-to-apply>
7. According to the International Board for Certification of Group Psychotherapists, an approved supervisor must be listed or eligible for listing as a CGP and have conducted 600+ hours of group therapy; see <https://www.agpa.org/cgp-certification/how-to-apply>

## **W&M Counseling Center Outreach Concentration**

**Description:** The Outreach Concentration provides interns enhanced training in the practice of outreach intervention within clinical and non-clinical populations that can be applied across multiple professional venues. This training is congruent with the Standards for University and College Counseling Services set forth by the International Association of Counseling Services (IACS, 2016). These standards and Asidao and Sevig's (2014) proposed outreach intervention competencies will serve as the basis for which goals, objectives, and evaluation occur given standards and competencies for the area of college counseling center outreach and education are currently under development by the Association of University College Counseling Center Outreach (AUCCCO). This concentration will only be offered if licensed staff are available to supervise the experiences. It is offered through a collaboration between the licensed staff member and the Assistant Director for Research, Evaluation, and Outreach.

The Outreach Concentration will include the following:

- An emphasis on ethical and evidence-based support and enhancement of healthy growth and development of students through outreach to the campus community
- Ongoing involvement in evidence-based outreach that support the effort enhancing the William and Mary environment.
- A focus on the understanding of the relationship of the Counseling Center to the William & Mary community through outreach programming
- A learning process that allows the demonstration of evidence-based advanced proficiency and skill in outreach
- An opportunity to obtain advanced evidenced-based training, supervision and education integrally connected to the counseling service and consistent with the mission of the Counseling Center and William & Mary.
- Increased understanding of outreach as a direct intervention

### **Outreach Concentration Goals:**

- To demonstrate evidence-based knowledge of the principles of outreach
- To understand the individual in the context of a diverse social and cultural setting through evidenced research about outreach
- To design and present evidence-based developmentally appropriate outreach program activities
- To support and enhance the healthy growth and development of students through outreach to the campus community based outreach literature and research
- To be responsive to sexual and relational orientation, gender identity, racial, cultural, disability and ethnic diversity among students, and reach students who are less likely to make use of traditional counseling services

**Evaluation:** based on IACS (2016) Asidao and Sevig (2014)

## W&M Counseling Center Outreach Concentration

Competency	Measured by:
General Group Skills	<ul style="list-style-type: none"> <li>• Demonstration of skills in group facilitation and presentation delivery. _____</li> <li>• Demonstration of skills in workshop design. _____</li> <li>• Demonstration of the ability to connect with communities. _____</li> <li>• Demonstration of the ability to weave in and out as both participant and observer in the process of connecting with communities and facilitating change. _____</li> <li>• Demonstration of well thought out workshop design. _____</li> </ul>
Multicultural Competency	<ul style="list-style-type: none"> <li>• Demonstration of the ability to work effectively with diverse groups of students. _____</li> <li>• Demonstration of the ability to know or learn about the cultures and particular needs of students based on gender, race, sexual orientation, national origin, and ability/disability status. _____</li> <li>• Demonstration of a solid understanding of individual values, beliefs, and multiple social identities. _____</li> <li>• Demonstration of an ability to engage across diverse populations and topic areas. _____</li> <li>• Demonstration of awareness of the W&amp;M Counseling Center's mission statement addressing diversity that is used as a daily guide in Center work. _____</li> </ul>
Evaluation (of outreach programming)	<ul style="list-style-type: none"> <li>• Demonstration of effective targeted evaluation of outreach efforts to see if the original goals were achieved. _____</li> <li>• Demonstration of whether or not the evaluation of outreach informs future outreach and education work. _____</li> <li>• Demonstration of whether or not the outreach helped students reflect on their experience, increasing understanding, and informing future action. _____</li> </ul>
Training Others in Effective Prevention and Outreach	<ul style="list-style-type: none"> <li>• Demonstration of the process of building on previous academic and/or outreach training. _____</li> <li>• Participation in seminars focused on outreach. _____</li> <li>• Demonstration of knowledge and attention to outreach Demonstration of interest and participation in outreach oriented mentorship relationship. _____</li> </ul>
Effective Use of Technology	<ul style="list-style-type: none"> <li>• Demonstration of the ability to use technology in order to meet student needs. _____</li> <li>• Demonstration of the ability to use technology (i.e. presentation programs, social media, podcasts, etc.) for delivery of information. _____</li> </ul>
Research	<ul style="list-style-type: none"> <li>• Demonstrates knowledge, skills, and competence to critically evaluate research according to methods, procedures, practices, and attention to diversity and contextual variables _____</li> </ul>

## W&M Counseling Center Outreach Concentration

	<ul style="list-style-type: none"><li>• Demonstrates knowledge, skills, and competence to use existing knowledge in outreach and programming activities, taking into consideration issues of diversity _____</li><li>• Demonstrates ability to locate, appraise, and assimilate scientific evidence on college mental health and local clinical data (trends in mental health issues in college populations, results from research comparing W&amp;M students health related issues/needs to those of students in other universities, etc.) _____</li><li>• Appropriately disseminates research information in outreach events and programming. _____</li></ul>
--	---

### **Requirements to complete the Outreach Concentration:**

1. In addition to completion of all general outreach requirements, intern(s) completing the outreach concentration will identify an outreach topic specific to the college student population and create a 3-4 part outreach program for students that will be a part of the Supportive Workshop Series to be offered at least once during the fall and spring semesters. Administer a pre/post test to evaluate the effectiveness of the series. All plans should be pre-approved by the Assistant Director for Research, Evaluation, and Outreach.
2. Intern(s) will offer a support group to students in the Fall and Spring semesters. Support groups may be established based on client demand or intern interest. All plans should be pre-approved by the Assistant Director for Research, Evaluation, and Outreach.
3. Mental Health Screenings:  
Fall: Completion of general requirement to be involved with the mental health screening. Observe/shadow the process of organizing the screening with student organizations and campus partners.  
Spring: Work with Assistant Director for Research, Evaluation, and Outreach for the spring mental health screening. Tasks could include things like creating data forms, contacting student organization and campus partners, reserving space,

Note: If more than one intern is interested in the Outreach Concentration, the mental health screening project will be completed as a group project. See item 2 of requirement list.

4. The interns will complete supervision and didactic components as described below.

**Note:** All of the above requirements will be under the supervision of a licensed staff member and in consultation with the Assistant Director for Research, Evaluation, and Outreach.

### **Fall semester**

1. Meet with the Assistant Director for Research, Evaluation, and Outreach to discuss the planning and implementation of the mental health awareness week, mental health screening, and outreach theory and research. Articles from the reference list below may be assigned for discussion.

**1/month**

## W&M Counseling Center Outreach Concentration

2. Meet with the Assistant Director for Research, Evaluation, and Outreach to discuss the coordination and development of the spring semester supportive workshop series and other outreach requests.  
**At least 1 time end of Fall semester**

### Spring Semester

1. Meet with the Assistant Director for Research, Evaluation, and Outreach to discuss fall experience with outreach. **Every 2 weeks**
2. Meet with the Assistant Director for Research, Evaluation, and Outreach to discuss the end of the year role responsibilities like compiling feedback, outreach-related information needed for the Center's annual report, preparation for summer outreach, review of Counseling Center outreach positions, etc. **At least 1 time Spring Semester**

### Summer Semester

1. Meet with the Assistant Director for Research, Evaluation, and Outreach to discuss the coordination of fall semester orientation and fall supportive workshops. **At least 1/month**
2. Meet with the Assistant Director for Research to discuss the process of planning and implementing College Counseling Center outreach programs and to discuss the outreach concentration experience throughout the year of internship. **1 time Summer Semester**
3. Provide a presentation analyzing feedback from assessments administered for supportive workshop series.

### Notes:

For ongoing participation in the Outreach Concentration, intern performance must be satisfactory with both the general internship and concentration requirements. If an intern is placed on a growth or remediation plan, this may include temporary or permanent removal from the concentration if the primary supervisor(s), the Training Director, and/or the Training Committee become concerned about performance.

The Assistant Director for Research, Evaluation, and Outreach and licensed staff psychologists must be available to provide appropriate supervision. Interns with outreach or presentation training prior to internship will be able to have more autonomy choosing outreach programs to offer. Interns with minimal or no past college counseling outreach or presentation experience may be required to read additional literature and observe during at least two outreach programs during the fall semester prior to independently presenting.

Because interns who chose this concentration will be providing extra outreach hours, individual therapy hours will be adjusted to accommodate the extra outreach hours. If an intern designs an outreach program or workshop, the topic and outline must be approved by the Assistant Director for Research, Evaluation, and Outreach, the Training Director, and/or the Training Committee prior advertising.

### **References**

Asiado, C. and Sevig, T. (2014). Reaching in to reach out: One Counseling center's journey in developing new outreach approach. *Journal of College Student Psychotherapy*, 28, 132-143.

## W&M Counseling Center Outreach Concentration

Brooks-Harris, J. E., & Stock-Ward, S. R. (1999). *Workshops: Designing and facilitating experiential learning*. Thousand Oaks, CA: Sage Publications.

Dource, L.A. and Keeling, R.P. (2014). *A strategic primer on college mental health*. Collaboration between American Council on Education, NASPA, and the American Psychological Association.

Gary D. Glass (2019): *College Counseling Center Outreach—An Organizing Framework*, *Journal of College Student Psychotherapy*, DOI: 10.1080/87568225.2019.1596773

Glass, G. D. (2016). *Introducing a psychotherapy for the collective: A paradigm shift for college mental health*. *Change: the Magazine of Higher Learning*, 48(6), 16–23.

Golightly, T., Thorne, K., Iglesias, A., Huebner, E., Michaelson-Chmelir, T., Yang, J., & Greco, K. (2017). *Outreach as intervention: The evolution of outreach and preventive programming on college campuses*. *Psychological Services*, 14(4), 451–460.

Marks, L., & McLaughlin, R. (2005). *Outreach by college counselors: Increasing student attendance at presentations*. *Journal of College Counseling*, 8, 86–96.

Vera, E.M., Phillips, J.C., Speight, S.L., Brounck, T.M., Weathersby, D., Gonzales, R.R., and Kordesh, K. (2016). *University and college counseling center's commitment to social justice*. *Journal of Social Action in Counseling and Psychotherapy*, 8(1), 34-52.

## W&M Counseling Center Outreach Concentration

### Overall OUTREACH & Program Evaluation Requirements

1. **Observe/Co-Facilitate at least two** outreach programs during the W&M students' orientation. If the RA Suicide Risk Reduction/Campus Connect Training is conducted, Interns are required to co-facilitate this program in addition to the two other orientation outreach programs.
2. **Screening Programs:** Participate in **at least one screening program during the internship year**, while **not participating in more than one screening per semester** (e.g. mental health/eating disorders/depression/alcohol screening).
3. **Passive Programming:** Interns will create (conceive and construct) **one passive outreach per semester**. They may work individually or in groups, selecting appropriate materials -preventive or affirmative messages/articles- based on the time of the academic year and what students may be facing at that time.
4. **Didactic/interactive outreach:** Facilitate a minimum of **three didactic/interactive** outreach workshops **per semester**, for a minimum of **six** didactic outreach programs during the internship year. **At least one** of these didactic/interactive workshops **per semester** will be a **Campus Connect** suicide prevention training. The remaining programs could be in response to requests received by the Counseling Center or based on own interest. Opportunities for outreach with established audiences include presentations for student leaders and classes on mental health topics offered to peer-educators. If you want to develop your own program based on your own interests, it would be helpful to choose either a population you want to reach out to or a topic you believe students would be interested in. It would be important to take into account the academic calendar and students' schedules to increase the likelihood of getting an audience. Generally speaking, students are too busy to attend programs in the weeks close to final exams.

Note: See Evaluation of Intern Outreach Presentation form to familiarize yourself with how your outreach planning and implementation/facilitation skills will be evaluated.

OPTIONAL: Interns who are interested in acquiring more outreach experience may participate in an optional outreach rotation, if it is being offered during the training year. If an intern chooses to participate in the rotation, please see outreach rotation document for information on impact on training requirements. **\*\*An intern may only participate in one optional rotation over the course of the training year.\*\***

### **Program Evaluation:**



## **W&M Counseling Center Outreach Concentration**

Interns will conduct a program evaluation a Suicide Prevention Training offered to the campus community. Under the mentorship of an identified staff member, interns will analyze data of the pre and post evaluation obtained from trainings that occur have occurred at William & Mary. The pre and post evaluation forms have already been developed and they will be administered at the start and end of the program. Interns will work throughout the year to analyze data and identify feedback that may improve the program. The project culminates by Interns providing a written document and accompanying presentation to staff at the end of the year.



Meetings with Training Director	0.25	0.25	0.25	0.25	As needed	As needed
SA Meetings	0.5	0.5	0.5	0.5	0	0
<b>Subtotal:</b>	<b>8</b>	<b>8</b>	<b>9</b>	<b>9</b>	<b>6</b>	<b>6</b>
<b>Other</b>						
Intern Bonding	.25	.25	.25	.25	0	0
Summer Project	0	0	0	0	3	3
<b>Subtotal:</b>	<b>0.25</b>	<b>0.25</b>	<b>0.25</b>	<b>0.25</b>	<b>3</b>	<b>3</b>
<b>TOTAL HOURS/WEEK</b>	<b>39.75</b>	<b>39.75</b>	<b>39.25-40.25</b>	<b>41-42.5</b>	<b>38.5</b>	<b>40</b>

## INTERN SEMINARS COORDINATORS

SEMINAR	COORDINATOR(S)	FORMAT	FREQUENCY
<b>INTEGRATIVE SEMINAR</b>	<p>Felicia Brown-Anderson, Psy.D.</p> <p>Joy Badalis, LPC</p>	<p>Different Presenters/ Readings +Discussion</p>	<p>1 hr, 2x/week-Fall semester</p>
<b>DIVERSITY SEMINAR</b>	<p>Carina Sudarsky- Gleiser, Ph. D.</p> <p>Miles Davison, LCSW</p>	<p>Readings + Discussion</p>	<p>1 hr every other week- Fall &amp; Spring semesters</p>
<b>SUPERVISION SEMINAR</b>	<p>Ali Pappas-Bourdage, Ph.D.</p> <p>Kevin Clancey, Psy.D.</p>	<p>Readings+ Discussion + Case Presentation</p>	<p>1 hr every other week-Fall &amp; Spring semesters</p> <p>*Seminar leaders may change in Spring per Supervision of Supervision assignments</p>

Intern: \_\_\_\_\_

Supervisor(s): \_\_\_\_\_

Summer Overall Total: **0.00**

Clinical/Direct Hours: **0.00**

Direct Service Overall: **0.00**

Overall Internship Total: **0.00**

ACTIVITY	I	Summer Overall Total: 0.00							
		6/6	6/13	6/20	6/27	7/4	7/11	7/18	7/25
Clinical/Direct Service									
Individual/Couples	0.00								
Group Therapy	0.00								
Initial Consults	0.00								
Intakes	0.00								
Immediate Crisis	0.00								
Assessment: face to face	0.00								
Sup w/Prac Student	0.00								
Outreach: face to face	0.00								
On-Call Contact	0.00								
Supervision & Seminars									
Individual Supervision	0.00								
Group Therapy Sup	0.00								
Case Conference	0.00								
Sup of Sup	0.00								
Sup Seminar/SOS	0.00								
Diversity Seminar	0.00								
Outreach & Consultation	0.00								
Teaching	0.00								
Admin, Case Mgt & Prep									
Assessment Prep-V	0.00								
Outreach Prep-V	0.00								
Supervision Prep-1	0.00								
Case Prep: sup, pres, research	0.00								
Admin: e-mail, checking vm	0.00								
Case Mgt/Paperwork	0.00								
Meetings									
Orientation	0.00								
Staff Meeting	0.00								
Student Affair Meetings	0.00								
Networking	0.00								
Staff Development	0.00								
Meeting w/Training Director	0.00								
Prof Dev: job rel, conf	0.00								
Dissertation/Research	0.00								
Intern Support	0.00								
Other	0.00								
Sick Time	0.00								
Vacation	0.00								
Weekly Total Hours	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Overall Total Hours	0.00								

Manual Hours Check

Fall Direct Service Total:

Fall Overall Total:

Spring Direct Service Total:

Spring Overall Total:

# of Clients      Cumulative Totals

African-American/Black/African Origin	_____	_____
Asian-American/Asian Origin/Pacific Islander	_____	_____
Latino/a/Hispanic	_____	_____
American Indian/Alaska Native/Aboriginal Canadian	_____	_____
European Origin/White	_____	_____
Biracial/Multiracial	_____	_____
Heterosexual	_____	_____
Gay	_____	_____
Lesbian	_____	_____
Bisexual	_____	_____
Male	_____	_____
Female	_____	_____
Transgendered	_____	_____
Physical/Orthopedic Disaability	_____	_____
Blind/Visually Impaired	_____	_____
Deaf/Hard of Hearing	_____	_____
Learning/Cognitive Disability	_____	_____
Developmental Disability	_____	_____
Other: Questioning	_____	_____
Other: Asexual	_____	_____
Other: Middle Eastern	_____	_____

# Supervision

## **Individual Supervision Contract**

This document is intended to outline the expectations and parameters of supervision, assist in supervisee professional development, and provide clarity in supervisor responsibilities in accordance with the APA Ethical Principles of Psychologists and Code of Conduct and the Virginia Board of Psychology.

This contract between (supervisor) and (supervisee) at the William & Mary Counseling Center, signed on (date), serves to verify supervision and establish its parameters.

### **Context of Supervision**

- A. Supervision will occur in a competency-based and developmentally appropriate framework
- B. 2 hours of individual supervision weekly
- C. Review of videotapes will be a part of the supervision process
- D. Treatment notes will be completed for all clinical contact with clients and will be an important aspect of supervision. Risk and safety will be documented before the end of the business day for all types of notes. A draft of all notes will be sent to the supervisor within 1 week of the date of session.
- E. Supervision will consist of multiple modalities including review of tapes, progress notes, instruction, modeling, discussion, and mutual problem-solving

### **Evaluation**

- A. Competency-based and developmentally appropriate feedback will be provided to the supervisee
- B. A formal final evaluation will be conducted and provided to the supervisee
- C. Evaluation forms are available on the G: Drive and in the Training Manual
- D. The supervisee will formally evaluate the supervisor at the end of the semester

### **Duties and Responsibilities of Supervisor**

- A. Upholds and adheres to the APA Ethical Principles of Psychologists and Code of Conduct, the policies and procedures of the William and Mary Counseling Center and College of William and Mary, and Virginia Board of Psychology
- B. Attends all supervision meetings in a private/confidential space and/or platform
- C. Oversees and monitors all aspects of client case conceptualization and treatment planning
- D. Reschedules all missed supervision meetings to ensure supervisee receives 3-hrs/week individual supervision. Supervisors will work with the Training Director to develop a plan in the event of an issue that prevents a supervisor from making up meetings.
- E. Prepares for supervision meetings and reviews video tapes outside of sessions
- F. Challenges and problem solves with supervisee
- G. Provides interventions and directives for clients at risk
- H. Identifies and builds upon the supervisee's strengths
- I. Introduces and models use of personal factors including belief structures, worldview, values, culture, transference, countertransference, and parallel process
- J. Ensures a high level of professionalism in all interactions
- K. Identifies and addresses strains or ruptures in the supervisory relationship
- L. Establishes informed consent for all aspects of supervision

- M. Helps supervisee to attain training goals and tasks
- N. Reviews and signs all supervisee case notes according to Center's documentation policy timeframes.
- O. Clearly distinguishes and maintains the line between supervision and therapy
- P. Avoids dual relationships which could compromise the objectivity of the relationship to the supervisee
- Q. Ensures understanding of all aspects of the supervisory process in this document and the underlying legal and ethical standards from the onset of supervision
- R. Assumes full responsibility for the clinical activities of the supervisee for the duration of this contract
- S. If the supervisee does not meet criteria for successful completion, the supervisee will be informed at the first indication of this, and supportive and remedial steps will be implemented to assist the supervisee.

### **Duties and Responsibilities of the Supervisee**

- A. Upholds and adheres to the APA Ethical Principles of Psychologists and Code of Conduct, the policies and procedures of the William and Mary Counseling Center and College of William and Mary, and Virginia Board of Psychology
- B. Attends all supervision meetings in a private/confidential space and/or platform
- C. Prepares for supervision and provides weekly updates to a client log for supervision meetings
- D. Identifies training goals and tasks to achieve in supervision
- E. Identifies strengths and areas of future development
- F. Understands the liability (direct and vicarious) of the supervisor with respect to supervisee's practice and behavior
- G. Identifies to clients his/her status as a supervisee and name of the clinical supervisor
- H. Receives client permission prior to recording any sessions and receives an agency supervisors' approval prior to conducting any sessions without recording.
- I. Discloses errors, concerns, and clinical issues to the supervisor as they arise
- J. Limits all email communication with clients to non-sensitive information (e.g. scheduling appointments)
- K. Documents all communications and meetings with clients according to aforementioned timelines and disposes of all confidential materials in an appropriate manner
- L. Consults with the supervisor or other agency clinical staff member in all cases of emergency or significant risk concerns
- M. Conducts all telemental health appointments in HIPAA compliant platforms and/or settings, and only provides treatment to clients located in jurisdictions where the supervisor is licensed to practice.
- N. Verifies the client's physical location before starting any telemental health appointment
- O. Communicates with supervisor, or other appropriate staff as necessary, if they are going to be out of the office
- P. Makes appropriate arrangements for clients if canceling appointments due to absence and makes up any missed supervision meetings.
- Q. Ensures that all email correspondence with clients includes a signature disclaimer:

**Example:**



*E-mail is not a confidential form of communication and confidentiality cannot be guaranteed. Further, we cannot guarantee that e-mail messages will be read regularly or within a given time period. Therefore, we recommend that all clients communicate with us by phone. This is especially important in the case of an emergency situation. For W&M crisis services after hours and weekends call (757) 221-3620. To access crisis services unaffiliated with W&M, call the National Suicide Hotline at 1-800-273-8255 or text HOME to 741741 (text "STEVE" for a culturally trained clinician). For a life-threatening emergency, call 911 right away. If you are not the intended recipient of this message, please destroy this message and notify the sender immediately.*

- R. Monitors and tracks their caseload and hours logs to ensure they are meeting hours expectations. The supervisee communicates to the supervisor should concerns about hours arise.

**Procedural Aspects of Supervision**

- A. Information which relates to the client is strictly confidential in supervision, the supervisor will treat supervisee disclosures with discretion
- B. There are limits of confidentiality for supervisee disclosures. These include ethical and legal violations, indication of harm to self and others, and/or reported abuse or neglect of a vulnerable population (e.g. a minor or elderly individual).
- C. If the supervisor or the supervisee must cancel or miss a supervision session, the supervisor and supervisee will communicate to determine a plan for rescheduling.
- D. The supervisee will contact the supervisor at \_\_\_\_\_. or on-call counselor during business hours at (757) 221-3620 should an urgent matter arise.

This contract may be revised at the request of supervisee or supervisor. Revisions will be made only with consent of supervisee and approval of supervisor. A copy of this signed contract will be provided to both the supervisor and supervisee.

We, \_\_\_\_\_ (supervisee) and \_\_\_\_\_ (supervisor), will follow the directives laid out in this supervision contract and conduct ourselves in keeping with the APA Ethical Principles and Code of Conduct, Virginia Board of Psychology, state and federal laws, and site-specific procedures.

\_\_\_\_\_  
(Supervisor)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Supervisee)

\_\_\_\_\_  
Date

This contract is in effect from \_\_\_\_\_ (date) through \_\_\_\_ (date).

## **Group Therapy Supervision Contract** **Semester XXX**

This document is intended to outline the expectations and parameters of group therapy supervision, assist in supervisee professional development, and provide clarity in supervisor responsibilities in accordance with the APA Ethical Principles of Psychologists and Code of Conduct and the Virginia Board of Psychology.

This contract between \_\_\_\_\_ (supervisor) and \_\_\_\_\_ (supervisee) at the William & Mary Counseling Center, signed on \_\_\_\_\_ (date), serves to verify supervision and establish its parameters.

### **Context of Supervision**

- A. Supervision will occur in a competency-based and developmentally appropriate framework for 0.5 hr/group
- B. Supervision will consist of multiple modalities including review of tapes, progress notes, instruction, modeling, discussion, and mutual problem-solving
- C. Treatment notes will be completed for all clinical contact with group members will be an important aspect of supervision. Risk and safety will be documented before the end of the business day for all types of notes. A first draft of all notes will be sent to the supervisor according to agency documentation policies.

### **Evaluation**

- A. Competency-based and developmentally appropriate feedback will be provided to the supervisee
- B. A formal mid-semester evaluation and formal final evaluation will be provided by both supervisor and supervisee (Evaluation forms are available on the G: Drive in the program training manual).

### **Duties and Responsibilities of Supervisor**

- A. Upholds and adheres to the APA Ethical Principles of Psychologists and Code of Conduct, the policies and procedures of the William and Mary Counseling Center and College of William and Mary, and Virginia Board of Psychology
- B. Attends all supervision meetings in a private/confidential space and/or platform
- C. Oversees and monitors all aspects of group conceptualization and treatment planning
- D. Reschedules all missed supervision meetings to ensure supervisee receives the necessary supervision hours. The supervisor will work with the Training Director to develop a plan in the event of an issue that prevents a supervisor from making up meetings.
- E. Provides regular feedback to supervisee to assist in their development as a group leader
- F. Provides a space for exploration of clinical interventions, supervisee's strengths and areas for growth, diversity factors, potential countertransference and personal factors, the supervisory relationship, etc., in the interest of the clinical work.
- G. Establishes informed consent for all aspects of supervision
- H. Helps supervisee to attain training goals and tasks
- I. Reviews and signs all supervisee case notes according to Center's documentation policy timeframes.

- J. Clearly distinguishes and maintains the line between supervision and therapy
- K. Avoids dual relationships which could compromise the objectivity of the relationship to the supervisee
- L. Ensures understanding of all aspects of the supervisory process in this document and the underlying legal and ethical standards from the onset of supervision
- M. Assumes full responsibility for the clinical activities of the supervisee for the duration of this contract
- N. If the supervisee does not meet criteria for successful completion, the supervisee will be informed at the first indication of this, and supportive and remedial steps will be implemented to assist the supervisee.

### **Duties and Responsibilities of the Supervisee**

- A. Upholds and adheres to the APA Ethical Principles of Psychologists and Code of Conduct, the policies and procedures of the William and Mary Counseling Center and College of William and Mary, and Virginia Board of Psychology
- B. Attends all supervision meetings in a private/confidential space and/or platform
- C. Prepares for supervision and identifies training goals, tasks to achieve in supervision.
- D. Understands the liability (direct and vicarious) of the supervisor with respect to supervisee's practice and behavior
- E. Identifies to clients his/her status as a supervisee and name of the clinical supervisor
- F. Receives client permission prior to recording any sessions and receives an agency supervisors' approval prior to conducting any sessions without recording.
- G. Discloses errors, concerns, and clinical issues to the supervisor as they arise
- H. Limits all email communication with clients to non-sensitive information (e.g. scheduling appointments)
- I. Documents all communications and meetings with clients according to aforementioned timelines and disposes of all confidential materials in an appropriate manner
- J. Consults with the supervisor or other agency clinical staff member in all cases of emergency or significant risk concerns
- K. Conducts all telemental health appointments in HIPAA compliant platforms and/or settings, and only provides treatment to clients located in jurisdictions where the supervisor is licensed to practice.
- L. Verifies the client's physical location before starting any telemental health appointment
- M. Communicates with supervisor, or other appropriate staff as necessary, if they are going to be out of the office
- N. Makes appropriate arrangements for clients if canceling appointments due to absence and makes up any missed supervision meetings.
- O. Ensures that all email correspondence with clients includes the following signature disclaimer:

*E-mail is not a confidential form of communication and confidentiality cannot be guaranteed. Further, we cannot guarantee that e-mail messages will be read regularly or within a given time period. Therefore, we recommend that all clients communicate with us by phone. This is especially important in the case of an emergency situation. For W&M crisis services after hours and weekends call (757) 221-3620. To access crisis services unaffiliated with W&M, call the National*

*Suicide Hotline at 1-800-273-8255 or text HOME to 741741 (text "STEVE" for a culturally trained clinician). For a life-threatening emergency, call 911 right away. If you are not the intended recipient of this message, please destroy this message and notify the sender immediately.*

**Procedural Aspects of Supervision**

- A. Information which relates to the client is strictly confidential in supervision, the supervisor will treat supervisee disclosures with discretion
- B. There are limits of confidentiality for supervisee disclosures. These include ethical and legal violations, indication of harm to self and others, and/or reported abuse or neglect of a vulnerable population (e.g. a minor or elderly individual).
- C. If the supervisor or the supervisee must cancel or miss a supervision session, the supervisor and supervisee will communicate to determine a plan for rescheduling.
- D. The supervisee will contact the supervisor at XXXX or on-call counselor during business hours at (757) 221-3620 should an urgent matter arise.

This contract may be revised at the request of supervisee or supervisor. Revisions will be made only with consent of supervisee and approval of supervisor. A copy of this signed contract will be provided to both the supervisor and supervisee.

We, \_\_\_\_\_ (supervisee) and \_\_\_\_\_ (supervisor), will follow the directives laid out in this supervision contract and conduct ourselves in keeping with the APA Ethical Principles and Code of Conduct, Virginia Board of Psychology, state and federal laws, and site-specific procedures.

\_\_\_\_\_  
(Supervisor)                      Date

\_\_\_\_\_

\_\_\_\_\_  
(Supervisee)                      Date

\_\_\_\_\_

This contract is in effect from \_\_\_\_\_ (date) through \_\_\_\_\_ (date).

## **Supervision of Supervision Contract**

### **Semester XXX**

This document is intended to outline the expectations and parameters of supervision, assist in supervisee professional development, and provide clarity in supervisor responsibilities in accordance with the APA Ethical Principles of Psychologists and Code of Conduct and the Virginia Board of Psychology.

This contract between \_\_\_\_\_ (supervisor) and \_\_\_\_\_ (supervisee) at the William & Mary Counseling Center, signed on \_\_\_\_\_ (date), serves to verify supervision and establish its parameters.

### **Context of Supervision**

- A. Supervision will occur in a competency-based and developmentally appropriate framework
- B. **1 hour of group supervision biweekly** (supervision of supervision)
- C. Review of videotapes will be a part of the supervision process
- D. Supervision will consist of multiple modalities including review of tapes of your supervision, progress notes and feedback given to your supervisee, triad supervision, instruction, modeling, discussion, and mutual problem-solving

### **Evaluation**

- A. Competency-based and developmentally appropriate feedback will be provided to the supervisee
- B. A formal mid-semester evaluation and formal final evaluation will be conducted and provided to the supervisee
- C. Evaluation forms are available on the G: Drive in respective program training manuals
- D. The supervisee will formally evaluate the supervisor at the mid-point and end of the semester

### **Duties and Responsibilities of Supervisor**

- A. Upholds and adheres to the APA Ethical Principles of Psychologists and Code of Conduct, the policies and procedures of the William and Mary Counseling Center and College of William and Mary, and Virginia Board of Psychology
- B. Attends all supervision meetings in a private/confidential space and/or platform
- C. Oversees and monitors all aspects of client case conceptualization and treatment planning
- D. Reschedules all missed supervision meetings to ensure supervisee receives the agreed upon hours of supervision (see Context of Supervision—B, above). The supervisor will work with the Training Director to develop a plan in the event of an issue that prevents a supervisor from making up meetings.
- E. Prepares for supervision meetings and reviews video tapes outside of sessions
- F. Challenges and problem solves with supervisee
- G. Provides interventions and directives for clients at risk
- H. Identifies and builds upon the supervisee's strengths
- I. Supervision may include exploration of belief structures, worldview, values, culture, transference, countertransference, and parallel process
- J. Ensures a high level of professionalism in all interactions

- K. Identifies and addresses strains or ruptures in the supervisory relationship
- L. Establishes informed consent for all aspects of supervision
- M. Helps supervisee to attain training goals and tasks
- N. Reviews and signs all supervisee case notes according to Center's documentation policy timeframes.
- O. Clearly distinguishes and maintains the line between supervision and therapy
- P. Avoids dual relationships which could compromise the objectivity of the relationship to the supervisee
- Q. Ensures understanding of all aspects of the supervisory process in this document and the underlying legal and ethical standards from the onset of supervision
- R. Assumes legal liability for all clinical activities of the practicum trainee for the duration of this contract
- S. If the supervisee does not meet criteria for successful completion, the supervisee will be informed at the first indication of this, and supportive and remedial steps will be implemented to assist the supervisee.

### **Duties and Responsibilities of the Supervisee**

- A. Upholds and adheres to the APA Ethical Principles of Psychologists and Code of Conduct, the policies and procedures of the William and Mary Counseling Center and College of William and Mary, and Virginia Board of Psychology
- B. Attends all supervision meetings in a private/confidential space and/or platform
- C. Prepares for supervision and provides weekly updates to a client log for supervision meetings
- D. Identifies training goals and tasks to achieve in supervision
- E. Identifies strengths and areas of future development
- F. Understands the liability (direct and vicarious) of the supervisor with respect to supervisee's practice and behavior
- G. Ensures clients and practicum student are aware of their status as a supervisee, and the name of the licensed clinical supervisor
- H. All supervision sessions with practicum trainee should be recorded and only with pre-approval from agency/licensed supervisor can recording be waived.
- I. Discloses errors, concerns, and clinical issues to the supervisor as they arise, including those that occur for the practicum trainee.
- J. Consults with the supervisor or other agency clinical staff member in all cases of emergency or significant risk concerns for practicum trainee
- K. Conducts all supervision sessions with the practicum trainee using a HIPAA compliant platform and/or setting
- L. Communicates with supervisor, or other appropriate staff as necessary, if they are going to be out of the office
- M. Will reschedule any missed supervision session with their practicum trainee
- N. Monitors and tracks their supervisee's caseload and communicates to the licensed supervisor any concerns.
- O. No information should be withheld from the licensed supervisor regarding supervision of the practicum trainee

**Procedural Aspects of Supervision**

- A. Information which relates to the client is strictly confidential in supervision, the supervisor will treat supervisee disclosures with discretion
- B. There are limits of confidentiality for supervisee disclosures. These include ethical and legal violations, indication of harm to self and others, and/or reported abuse or neglect of a vulnerable population (e.g. a minor or elderly individual).
- C. If the supervisor or the supervisee must cancel or miss a supervision session, the supervisor and supervisee will communicate to determine a plan for rescheduling.
- D. The supervisee will contact the supervisor at XXXX or on-call counselor during business hours at (757) 221-3620 should an urgent matter arise.

This contract may be revised at the request of supervisee or supervisor. Revisions will be made only with consent of supervisee and approval of supervisor. A copy of this signed contract will be provided to both the supervisor, supervisee, and Training Director.

We, \_\_\_\_\_ (supervisee) and \_\_\_\_\_ (supervisor), will follow the directives laid out in this supervision contract and conduct ourselves in keeping with the APA Ethical Principles and Code of Conduct, Virginia Board of Psychology, state and federal laws, and site-specific procedures.

\_\_\_\_\_  
(Supervisor)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Supervisee)

\_\_\_\_\_  
Date

This contract is in effect from \_\_\_\_\_ (date) through \_\_\_\_\_ (date).



**Counseling Center**  
**240 Gooch Drive**  
**Williamsburg, VA 23185**  
**757/221-3620, Fax 757/221-3615**

### **Consent to Supervision, Observation, and Recording of Counseling Sessions**

In order to provide you with the best possible care, counselors-in-training are assigned supervisors with whom they must consult regarding their cases and are required to record their sessions using a digital camera. They review these video recordings with their supervisors and, on rare occasions, with other Counseling Center staff for the purpose of supervision and consultation regarding the services you receive.

It is our strict policy that recordings are viewed only at the Counseling Center. Digital video files are typically deleted within 60 days. Occasionally, video files may be stored longer for supervision purposes. No recordings are stored permanently.

Video files are protected in accordance with confidentiality laws. They are saved in encrypted format and stored in password-protected computers accessible to Counseling Center staff only. You have the right to refuse recording and may withdraw your consent at any time. However, this may result in your case being transferred to another clinician.

**I understand that:**

- The purpose of recording is to ensure the quality of services I receive, and for training, supervision, and consultation purposes.
- I may request that recordings be stopped at any time during the sessions.
- All recordings will be viewed and safeguarded appropriately within the Counseling Center.
- I may discuss or clarify these issues with my counselor at any time.

**Counselor's Licensed Supervisor is:** \_\_\_\_\_

\_\_\_ Yes, I give my consent to recording of my counseling sessions with \_\_\_\_\_  
(Counselor's Name/Title)

\_\_\_ No, I do not give my consent to recording of my sessions.

**This release expires in 12 months unless another date is specified:** \_\_\_\_\_

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Print)





**Counseling Center**  
**240 Gooch Drive**  
**P.O. Box 8795**  
**Williamsburg, VA 23185**  
**757/221-3620, Fax 757/221-3615**

### **Consent to Supervision of Supervision and Recording of Supervision Sessions**

As you were previously informed about the WMCC Advanced practicum during the interview and orientation processes, in order to provide you with the best possible supervisory experience, psychology interns are assigned supervisors with whom they must consult about their supervision of the practicum student they are working with. Recording of supervision sessions using a digital camera is used for this purpose. Licensed supervisors review these video recordings with the psychology intern they are supervising and, once a semester, with the group of their peers and the coordinators of the Supervision Seminar when they present a report of their supervisory experience. The purpose of all supervision of supervision is to offer you, the practicum student, the supervisory experience that would most adequately fit your training needs.

It is our strict policy that recordings are deleted regularly. Video files are protected in accordance with confidentiality laws. They are saved in encrypted format and stored in password-protected computers accessible to Counseling Center staff only.

**I understand that:**

- The purpose of recording is to ensure the quality of supervision I receive, and for training, supervision, and consultation purposes.
- All recordings will be viewed and safeguarded appropriately within the Counseling Center.
- I may discuss or clarify these issues with my supervisor or with the Coordinator of Practicum at any time.

**The Supervisor in charge of the Psychology Intern’s Supervision of the Practicum Student is:**

\_\_\_\_\_

\_\_\_\_ Yes, I give my consent to recording of my Supervision sessions with \_\_\_\_\_  
(Intern’s name/title)

\_\_\_\_ No, I do not give my consent to recording of my sessions (In this case, the practicum student would need to be transferred to another practicum site)

This release expires in 12 months unless another date is specified: \_\_\_\_\_

\_\_\_\_\_  
Practicum Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Print)

### Supervision Log & Discussion

Supervisee \_\_\_\_\_

Supervisor \_\_\_\_\_

Date \_\_\_\_\_

Supervisee Training Goals:	General Supervision Discussion and Feedback

Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns
Date of last Sup Discussion	Supervision Discussion:				
Date of Sup of Sup Discussion	Sup of Sup Discussion:				

**Supervision Log & Discussion**

Supervisee \_\_\_\_\_

Supervisor \_\_\_\_\_

Date \_\_\_\_\_

Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns
Date of last Sup Discussion	Supervision Discussion:				
Date of Sup of Sup Discussion	Sup of Sup Discussion:				
Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns
Date of last Sup Discussion	Supervision Discussion:				
Date of Sup of Sup Discussion	Sup of Sup Discussion:				

**Supervision Log & Discussion**

Supervisee \_\_\_\_\_

Supervisor \_\_\_\_\_

Date \_\_\_\_\_

Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns
Date of last Sup Discussion	Supervision Discussion:				
Date of Sup of Sup Discussion	Sup of Sup Discussion:				
Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns
Date of last Sup Discussion	Supervision Discussion:				
Date of Sup of Sup Discussion	Sup of Sup Discussion:				

**Supervision Log & Discussion**

Supervisee \_\_\_\_\_

Supervisor \_\_\_\_\_

Date \_\_\_\_\_

Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns
Date of last Sup Discussion	Supervision Discussion:				
Date of Sup of Sup Discussion	Sup of Sup Discussion:				
Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns
Date of last Sup Discussion	Supervision Discussion:				
Date of Sup of Sup Discussion	Sup of Sup Discussion:				

**Supervision Log & Discussion**

Supervisee \_\_\_\_\_

Supervisor \_\_\_\_\_

Date \_\_\_\_\_

Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns
Date of last Sup Discussion	Supervision Discussion:				
Date of Sup of Sup Discussion	Sup of Sup Discussion:				
Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns
Date of last Sup Discussion	Supervision Discussion:				
Date of Sup of Sup Discussion	Sup of Sup Discussion:				

**Supervision Log & Discussion**

Supervisee \_\_\_\_\_

Supervisor \_\_\_\_\_

Date \_\_\_\_\_

Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns
Date of last Sup Discussion	Supervision Discussion:				
Date of Sup of Sup Discussion	Sup of Sup Discussion:				
Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns
Date of last Sup Discussion	Supervision Discussion:				
Date of Sup of Sup Discussion	Sup of Sup Discussion:				

**Supervision Log & Discussion**

Supervisee \_\_\_\_\_

Supervisor \_\_\_\_\_

Date \_\_\_\_\_

Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns
Date of last Sup Discussion	Supervision Discussion:				
Date of Sup of Sup Discussion	Sup of Sup Discussion:				
Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns
Date of last Sup Discussion	Supervision Discussion:				
Date of Sup of Sup Discussion	Sup of Sup Discussion:				



**Supervision Log & Discussion**

Supervisee \_\_\_\_\_

Supervisor \_\_\_\_\_

Date \_\_\_\_\_

### Supervision Log & Discussion

Supervisee \_\_\_\_\_

Supervisor \_\_\_\_\_

Date \_\_\_\_\_

Supervisee Training Goals:	General Supervision Discussion and Feedback

Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns

Date of last Sup Discussion	Supervision Discussion:
-----------------------------	-------------------------

Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns

Date of last Sup Discussion	Supervision Discussion:
-----------------------------	-------------------------

**Supervision Log & Discussion**

Supervisee \_\_\_\_\_

Supervisor \_\_\_\_\_

Date \_\_\_\_\_

Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns
Date of last Sup Discussion	Supervision Discussion:				
Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns
Date of last Sup Discussion	Supervision Discussion:				
Client Initials & Demographics	# of Sessions	Last session date	Presenting Issue	Treatment Goals/Disposition Treatment Plan	Safety concerns
Date of last Sup Discussion	Supervision Discussion:				

## TRAINING NEEDS, SUPERVISORS, GROUPS

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Please list the areas of strength you have identified at this point in your professional development and the training goals you have for this semester:

Please describe, based on your knowledge/understanding of their work/clinical/supervisory approach, what you believe you can learn from *ALL* of the available individual supervisors and how this learning connects with your training needs and goals:

Please describe, based on your knowledge/understanding of the different groups and the co-leaders' therapeutic style/approach, what you believe you can learn from your experience in each of them. Please address how your training needs/goals regarding group therapy would be achieved in *ALL* of the available groups:

## Minimum Supervisor Expectations

Supervision Type	Hour Requirements	Evaluation Timeline
Individual Supervision	2 hours/week	<b>Interns:</b> Quarterly (~October; ~January; ~April; End of Internship)  <b>Practicum:</b> Mid & End Semester
Group Therapy Supervision	0.5hr/week co-leaders; 1hr/week group meeting	Mid & End Group
Supervision of Supervision	1hr/week	Mid & End Semester

- Complete the appropriate Supervision Contract at the onset of supervision (G→Internship Training→TRAINING MANUALS→Training Manual (year)→IV. Supervision). Make a copy for yourself, your trainee, and the Training Director.
- Review signed informed consent form for supervision and recording. Make sure forms are accurately represented in client files.
- The Supervisor assumes responsibility for clinical cases of the trainee. Review clinical procedures and consult about disposition of Initial Consultation/Intake. Monitor readiness for specific cases. Monitor client welfare.
- Review and sign-off on all documentation following the agency's timelines.
- Review of progress of all cases on a regular basis and assist with all case conceptualizations.
- Regularly review/monitor recordings of supervisee's sessions outside the supervisory session. Reviewing one hour of recording per week is encouraged.
- Maintain a current overview of the kinds of clients needed by the supervisee for a broad/diverse training experience.
- Provide back-up/emergency consultation during trainee's on-call week (as relevant), and as needed during business hours.

- Keep regular weekly supervision process notes for each supervision session. These should be provided to the Training Director at the end of the supervisory period.
- Exchange evaluations with trainee according to timelines denoted above. While evaluations should be shared during the same meeting, supervisors are required to provide their evaluation of the trainee first as to prevent any concerns of retaliation towards the trainee. Use the following link for access to trainee evaluations:  
<https://drive.google.com/drive/folders/129oF9VenKyxAT8zPui1i4m47Nd6xlyzH?usp=sharing>
- At the end of the supervisory period, ensure that all case files are closed with termination summaries written; sign-off on all cases; ensure that all terminated clients are removed from the trainee's client list; ensure that all digital recordings are deleted.
- Keep the Training Director apprised of any training issues.
- Supervisors are to participate in Training Committee and Supervisor Meetings and openly share their evaluation of the clinical skills and overall functioning of their supervisee in the agency. It is expected that supervisors will share the supervisee's strengths, progress in areas of growth as well as challenges the supervisee may be experiencing. It is encouraged for the supervisor to seek consultation from other supervisors on how to best help a supervisee with their learning needs, gain further clinical skills or any type of competency.
- **Supervisor of Supervision:** In addition to the expectations outlined above, engage in 1 hr triad meetings (intern, practicum student, supervisor of supervision) at least once a month.
- **All Staff:** Regardless of your status as a supervisor, all staff clinicians are expected to participate in the training programs at the Center in various ways such as (co)leadership of training seminars, participation in Training Committee meetings, participation in weekly Group Therapy Supervision and Case Conference meetings, and provision of evaluations on various trainee presentations. Access to trainee evaluations is found at:  
<https://drive.google.com/drive/folders/129oF9VenKyxAT8zPui1i4m47Nd6xlyzH?usp=sharing>

# Evaluation Forms

## Minimum Level of Achievement & Passing Criteria

Per the Commission on Accreditation (CoA) Implementing Regulation C-8 I. Profession-Wide Competencies, programs are required to establish a Minimum Level of Achievement (MLA) by which Interns are considered ready for entry level practice in the field/meet passing criteria of the internship. As such, evaluations associated with profession-wide competencies use the following definition and rating scales to determine if an Intern has met the MLA:

MLA/Passing Criteria: An average score of 4 is required on each of the overall nine professional competencies and a minimum score of 3 on any given item within each competency area by the last evaluation of the competency area during the internship.

### Rating Scale:

- Level 1.** Inadequate Performance: The intern performs inadequately for a psychology intern in this area. The intern exhibits behaviors indicating lack of readiness for the work that is required in the internship setting. Requires significant and close supervision and monitoring of basic tasks in this area. Remediation plan required to provide the intern immediate augmented supervision or structured training opportunities.
- Level 2.** Limited knowledge and skill: The intern is moving towards acquiring ability in the competency being measured. Requires frequent supervision and close monitoring. Remediation may be considered or recommended or is available by intern request.
- Level 3.** Emerging Competence: The intern uses the skill being evaluated intermittently. The intern may still need some assistance from didactic training and/or supervisory activities to further develop the knowledge, awareness, and skill in the competency being evaluated.
- Level 4.** Competent: The intern performs at the level expected for entry level practice. Demonstrates the ability to consistently utilize the knowledge, awareness or skill with minimum structured assistance. The intern is generally self-sufficient; exhibits the ability to generalize knowledge and skills to new situations and is able to appropriately self-assess when further assistance/supervision is needed, such as in non-routine cases.
- Level 5.** Advanced Competence: The intern demonstrates mastery of the competency being evaluated. Routinely performs at or beyond levels expected for an early career professional. Consistently uses the skill independently; this is the case even in complex cases.



**N/A.** Not enough information obtained at this time to provide an evaluation of competency.

Ratings on evaluations are reflective of the expected developmental progress at the time of the evaluation. For example, at the beginning of the year, interns are evaluated according to what the profession describes as “readiness to enter internship” and at the end of year based on the competencies expected for “entry level practice.” Given this framework, interns could make progress on any given aim/competency and receive the same score on two different evaluation periods considering what is developmentally expected at that point in the internship year. It is hoped that the written evaluation will promote meaningful discussion concerning specific areas of the trainee’s training, progress, and how skills can be acquired or improved.

A score of 1 or 2 on any given item should be accompanied by specific data or description in the narrative/comment section addressing why the intern is receiving such rating for that competency.

## Passing Criteria

Competencies	Measured by	Passing Criteria	Criteria Met
I. RESEARCH	<b>Evaluation of Psychology Interns by Supervisor Form</b>  Supervisors integrate information from digital recordings, supervision discussions, case/supervision/outreach presentations, supervisor meetings ' feedback, etc. to complete the evaluation form.	<b>Minimum average of 4.0 in the overall competency and a 3.0 or above on all of the items evaluated under that competency, on the <u>final evaluation</u> of the internship year.</b>	
II. ETHICAL AND LEGAL STANDARDS			
III. INDIVIDUAL AND CULTURAL DIVERSITY			
IV. PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS			
V. COMMUNICATION AND INTERPERSONAL SKILLS			
VI. ASSESSMENT			
VII. INTERVENTION A. Individual Therapy B. Crisis Intervention C. Group Therapy D. Outreach Programming			A.     _  B.     _  C.     _  D.     _
VIII. SUPERVISION			
IX. CONSULTATION AND INTERPROFESSIONAL/ INTERDISCIPLINARY SKILLS			

\_\_\_\_\_  
**Training Director**

\_\_\_\_\_  
**Date**

# DUE PROCESS AND GRIEVANCE PROCEDURES FOR PSYCHOLOGY INTERNS

**The following guidelines have been drawn from multiple sources including:**

Lamb, D.H., Presser, N., Pfost, K., Baum, M., Jackson, V.R., & Jarvis, P. (1987).

Confronting professional impairment during internship: Identification, due process, and remediation. *Professional Psychology: Research and Practice*, 18, 597-603.

Lamb, D.H., Cochran, D.H., Jackson, V.R. (1995). Training and organizational issues associated with identifying and responding to intern impairment. *Professional Psychology: Research and Practice*, 22(4), 291-296.

Texas A&M University Student Counseling Services Due Process and Grievance Procedures for Psychology Interns.

Texas State University Counseling Center Interns Evaluation, Review and Grievance Procedures.  
Arizona State University Counseling and Consultation Evaluation Procedures.

## General Guidelines for Due Process

Due process ensures that judgments or decisions made by the training program about interns are not arbitrary or personally biased. The training program has adopted specific evaluation procedures which are applied to all interns. The appeals procedures presented below are available to the intern so that the intern has ample opportunity to ensure fairness is involved in the decision-making process.

### General due process guidelines include:

1. presenting to interns, in writing, the program's expectations in regards to professional functioning at the outset of training;
2. stipulating the procedures for evaluation, including when, how, and by whom evaluations will be conducted;
3. using input from multiple professional sources when making decisions or recommendations regarding the intern performance;
4. specifying the definition of "problem behavior."
5. articulating the various procedures and actions involved in making decisions regarding competent functioning and deficiencies;
6. communicating, early and often, with graduate programs about the performance of interns while on internship;
7. methods for instituting a remediation plan for identified inadequacies, including a time frame for expected remediation and consequences of not rectifying the inadequacies;
8. providing the intern with a written statement of procedural policy describing how the intern may appeal the program's actions or decisions;
9. ensuring that interns have a reasonable amount of time to respond to any action(s) taken by the program; and
10. documenting in writing, the action(s) taken by the program and the rationale to all relevant parties (e.g., the intern's academic advisor or training director, intern supervisor).

## EXPECTATIONS OF PSYCHOLOGY INTERNS

With regard to the intern behavior and performance during the internship experience, the general expectations of the training program are that the intern will:

- Practice within the bounds of the APA Ethical Code of Conduct ([www.apa.org/ethics/](http://www.apa.org/ethics/))
- Practice within the bounds of the laws and regulations of the [State of Virginia](#);
- Practice in a manner that conforms to the professional standards of The College of William & Mary and the Counseling Center.
- Fulfill the internship requirements established by the W&M Counseling Center

### **I. The Evaluation Process**

In accordance with our training philosophy, supervisors provide ongoing feedback to interns to assist in their professional development. It is important for interns to understand that communications between interns and supervisors are not confidential. However, as the supervisory relationship is an intimate one in nature, supervisors will use discretion when deciding what is appropriate and necessary to communicate to other supervisors and the Training Committee.

Each intern receives two hours per week of one-on-one supervision from their individual supervisor(s). Interns receive additional supervision of core experiential component activities. In the context of these supervisory relationships, interns receive ongoing feedback regarding their professional strengths and areas/skills in need of development.

Interns are supervised by experienced practitioners in the mental health field. Primary individual supervision is provided by psychologists licensed in the Commonwealth of Virginia. Formal evaluations within the individual supervision context occur quarterly. At these intervals, training staff may pool input regarding the performance of the interns in all aspects of their training. Evaluations are shared with the intern's graduate program as necessitated by remediation plan or academic program requirements.

The Director of Training will meet with the intern cohort as a group and individually throughout the training program in order to provide opportunities to discuss how the training experience is progressing. In addition, interns may request to meet at any time with the Director of Training or Counseling Center Director to discuss any matters of concern, including those related to feedback and evaluation.

Evaluation Processes include:

#### ***1. Ongoing Feedback***

Staff members involved in the training program are responsible for providing ongoing feedback to interns regarding their strengths, areas for growth, and progress towards successful completion of the internship year.

#### ***2. Supervisor Meetings***

During supervisor/training committee meetings, training staff share observations regarding interns' skills and areas for growth. Feedback is based upon all aspects of the intern's training experiences, including: reports by all clinical supervisors, case presentations, informal consultations regarding cases, collaboration during team days, observations by seminar leaders, and observations of interdisciplinary communication and professional behavior. The purpose of this process is to ensure an integrated approach towards developing the interns' competencies. Interns may be invited to supervisors/training committee meetings as a way to provide opportunities for open, direct communication and mutual feedback.

#### ***3. Written Evaluation***

Written evaluation forms are used to provide feedback and document the intern's clinical skills and professional development. Individual supervision written evaluations occur quarterly and are compiled by

each of the intern's primary individual supervisors. Each supervisor meets with the intern to discuss the evaluation, and all sign it to indicate that the evaluation has been reviewed. The formal evaluations become a part of the intern's permanent file. The intern is encouraged to maintain a copy of the evaluations for their own records.

#### ***4. Providing Evaluation***

Interns are asked to reflect on their own progress and experience during the evaluation periods. They complete written evaluations of their supervisors after the supervisor has completed and reviewed the formal evaluation with the intern.

## **II. Determining Adequate Intern Performance**

The training staff considers interns performance in profession-wide competencies (use of research, ethical and legal standards, professional values, attitudes and behaviors, communication and interpersonal skills, assessment, intervention, supervision, and consultation and inter-professional/interdisciplinary skills) in determining adequate performance.

### **Definition of "Learning need" and "Not meeting performance standards"**

Any behavior that does not meet the standard for satisfactory functioning at the Counseling Center according to agency policies and procedures, training requirements and guidelines, or instruction by licensed clinical supervisor while operating under their license, can be categorized as "Learning need" or "Not meeting performance standards" depending on the following factors:

- a) intent and impact regarding professional practice in psychology and delivery of services within this agency
- b) Functioning as an agent or employee of the College of William and Mary and/or
- c) Severity and seriousness of the behavior

A "learning need" can be defined as any of the following:

- a) an intern's behavior that is identified as an important area for growth or focused learning.
- b) Marginal competency in basic skills (as noted in the description of a score of "2" or below in the evaluation)
- c) any behavior that is not consistent with the expected level of development for an intern
- d) any behavior that doesn't change with feedback and/or time

Any member of the staff can identify a "learning need" at any time during the internship year, and upon consultation with the Training Director, this could result in a "growth plan." A learning need that does not change as a function of the growth plan could become an issue classified as "not meeting performance standards."

"Not meeting performance standards" can be defined as any of the following:

- a) An inability and/or unwillingness to acquire and integrate professional standards into one's repertoire.
- b) An inability to acquire professional skills and reach an accepted level of competency.
- c) An inability to control personal stress, psychological dysfunction, or emotional reactions.
- d) An inability or unwillingness to acknowledge, understand, or address problematic behavior when identified.
- e) Quality of service delivered results in negative outcomes and/or harm for clients.
- f) Problematic behavior impacts multiple areas of professional functioning.
- g) Problematic behavior could have ramifications in ethics and legalities if not addressed.
- h) Disproportionate amounts of resources are required to support intern functioning.
- i) Intern's behavior does not change as a function of feedback, remediation efforts, or time.
- j) Intern's behavior negatively affects WMCC public image or the image of the profession.

Problematic behavior that doesn't adequately improve through supervision, academics, or didactics could be attended to by the training committee with consultation from any entity which may be able to provide relevant remedies to adequately address the identified issue. These entities include but are not limited to professional standards, legal counsel, human resources, state licensing boards, professional consultants, national professional organizations, etc. Any such consultations will be documented and kept in a confidential file.

### **III. Procedures for Responding to Performance Concerns by an Intern**

All trainees' progress during the year is regularly discussed in meetings including staff involved in the planning and implementation of the training program. Routine developmental issues that are the focus of training, seminars, and clinical supervision are often identified. Supervisors make every effort to manage these within the normal scope of training activities. At any time during the year, a CC staff member may determine some aspect(s) of an intern's performance as not meeting expected level of development ("learning need") or is inadequate ("Not meeting Performance Standards").

#### **A. Procedures to address a "learning need" – growth plan**

At any point during the training year any member of the training staff can identify a "learning need" and, through consultation with the Training Director, suggest a growth plan to help the intern develop a given competency. Similarly, an intern may request the development of a growth plan for their professional development. In either case, the trainee would be informed of the creation of the plan, a written plan would be developed, and the Supervisors Committee will be informed.

As stated above, a "learning need" that does not change as a function of the growth plan could become an issue classified as "Not meeting performance standards."

An intern has the opportunity to respond, in writing, to the growth plan if there is disagreement within 1 week of learning of the plan. The disagreement can be addressed with the Supervisors/Training Committee by providing a written statement and/or presenting a statement in person. Supervisors/Training Committee will then discuss the decision on whether to put the growth plan in effect by majority vote. In the event of a tie, the Training Director will make the tie-breaking decision.

#### **B. Procedures used when an intern is "not meeting performance standards" - Remediation**

At any point during the training year any member of the training staff can identify concerning behavior that may qualify as "not meeting performance standards." In this event, the following procedures will be initiated:

1. The intern will be notified in writing that a concern has been identified, what the concern is, and that a review of the concern is occurring among the Supervisors/Training Committee to determine a course of action. The intern can respond to the identified concern by providing a written statement and/or requesting to present a statement in person to the Supervisors/Training Committee
2. In discussing the identified issue(s) and considering the intern's statement (if one is given), the Supervisors/Training Committee will then determine the best course of action via majority vote. In the event of a tie, the Training Director will make the tie-breaking decision. The Supervisors/Training Committee may determine, that one or more of the following responses to the identified concern is warranted:

- **No Action Required or Written Growth Plan**

The identified issue does not warrant any further action or the behavior is either part of a normal developmental issue or a “learning need” that can be addressed in the course of ongoing supervision or a “growth plan.” In such case, the supervisor and intern will be notified and recommendations to address the behavior may be included.

- **Written Remediation Plan**

The intern will be given a remediation plan specifying the following:

- a. Description of the unsatisfactory behavior
- b. Actions required to correct the unsatisfactory behavior (e.g. increasing supervision, changing the format, emphasis, and/or focus of supervision, recommending personal therapy and/or psychological assessment, reducing the intern’s clinical or other work load and/or requiring specific academic course work or other forms of training)
- c. Timeline for correction
- d. Explanation of the procedure that will be used to determine whether satisfactory progress has been made
- e. Possible consequences if the problem is not corrected

A copy will be sent to the intern’s academic program.

- **Suspension of Clinical Privileges**

If it is determined that the intern’s problem behavior might impact client welfare, the intern’s clinical privileges may be suspended. The intern will be informed in writing about potential consequences resulting from suspension, which might include inability to complete program hours or other requirements. The intern will be given a letter specifying the following:

- a. Description of the unsatisfactory behavior
- b. Actions required to correct the unsatisfactory behavior and restore clinical privileges
- c. Timeline for correction
- d. Explanation of the procedure that will be used to determine whether satisfactory progress has been made
- e. Possible consequences if the problem is not corrected

A copy will be sent to the intern’s academic program.

- **Administrative Leave**

The intern may be placed on administrative leave, accompanied by suspension of all duties and responsibilities in the agency. The intern will be informed in writing about potential consequences, which might include inability to complete program hours or other requirements. The intern will be given a letter specifying the following:

- a. Description of the unsatisfactory behavior
- b. Actions required to correct the unsatisfactory behavior
- c. Timeline for correction
- d. Explanation of the procedure that will be used to determine whether satisfactory progress has been made
- e. Possible consequences if the problem is not corrected

A copy will be sent to the intern’s academic program.

- **Dismissal**

The intern will be given a letter specifying the following:

- a. Description of the unsatisfactory behavior and attempts to address it
- b. Grounds for decision to dismiss

A copy will be sent to the intern's academic program.

Dismissal from the internship program might occur under the following circumstances:

- a. It is determined that remediation cannot be successfully accomplished.
  - b. Serious violation of ethical standards
  - c. Serious violation of the WMCC policy and procedures
  - d. Serious violation of College Policy
  - e. Violation of federal or state statute
  - f. Any other condition that jeopardizes intern, client or staff welfare
  - g. Evidence that harm has been caused to client(s)
3. The Training Director and/or supervisor/staff member(s) will meet with the intern to review the outcome of Supervisors Committee decision; the intern may also request to meet with the Supervisors Committee as a whole. The intern may choose to accept the conditions or may choose to appeal the decision. The procedures for appealing the decision are presented in Section IV.
  4. If the intern chooses not to appeal the Supervisors Committee's decision it is expected that the intern's performance will be reviewed no later than the next evaluation period or the timeline specified in the plan or letter.
  5. If the intern's performance is deemed satisfactory at the next review period the intern will be informed in writing and no further action will be taken. A copy will be sent to the intern's academic program.
  6. However, if the Supervisors Committee determines that there has not been sufficient improvement in the intern's performance to remove the conditions stipulated, the Supervisors Committee may adopt any one of the following measures:
    1. Issue an extension of the remediation for a specified time period in which the Supervisors Committee will once again determine if sufficient improvement in the intern's behavior has been made.
    2. Determine which further action is necessitated and follow outlined procedures (see actions in section B:3 above).

#### **IV. Appeal Process regarding Remediation**

- A. If the intern wishes to appeal the decision made by the Training Director and supervisor/staff member(s) the intern must inform the Director of Training in writing and explain the grounds for the appeal within five (5) working days of receipt of the decision.
- B. In no later than seven (7) working days of receipt of the appeal, an **Appeal Panel** will be formed. This panel will be chaired by the Training Director and consist of two staff members selected by the Training Director and two selected by the intern (5 total members). An appeal hearing will be conducted in which relevant information may be requested by and/or provided to the Appeal



Committee by the intern or other relevant training staff members. The intern retains the right to hear all facts with the opportunity to dispute or explain his or her behavior during the appeal hearing. The CC Director, who has final decision-making authority, will not sit on the Appeal Panel.

- A. The Appeal Panel will render a decision, in writing, to accept or reject the initial action taken by the Supervisors/Training Committee. All decisions and recommendations by the Appeal Panel are determined by majority vote.
  - i. In the event that the initial action is upheld, the Training Director will notify the intern in writing of this decision within 24 hours. If the intern chooses, the intern can exercise a final appeal to the CC Director. The intern's decision and rationale to exercise a final appeal to the CC Director should be expressed in writing to the Training Director within 48 hours of receipt of the Appeal Panel's decision. In this case, the Intern and Appeal Panel may provide all relevant information to the CC Director, who will render a final decision within 10 business days of notification of the Intern's final appeal request.
  - ii. If the initial decision is overruled, the Training Director will notify the intern in writing of this decision within 24 hours. In the event that the Appeal Panel suggests any recommendations, the Training Director will include those in the written notification. The intern meets with the Training Director and supervisor/training staff members(s) who outline the new recommendations for action as determined by the Appeal Panel.
- B. Once a final decision has been made, the intern, intern's academic program and other appropriate individuals are informed in writing of the action taken.

## **V. Intern Complaint Procedures**

In order to protect the needs and rights of all interns, a complaint procedure has been developed. While it is hoped that any concerns or complaints can be discussed and resolved informally, a formal mechanism is appropriate in light of the power differential between interns and supervisors. In general, interns are encouraged to work actively to create an experience that fits their needs and interests and to work with the CC staff to ensure that their needs are met. Giving feedback to staff members/supervisors or the Director of Training is encouraged in order to create an environment that facilitates open dialogue and feedback, and supports professional development.

Complaints may be initiated in the following situations:

1. an intern has a complaint concerning any staff member/supervisor regarding a situation other than an evaluation,
2. an intern has a complaint concerning another intern or trainee,

### Complaints Regarding Non-Training Issues:

1. The intern is encouraged to speak directly with the colleague involved for a resolution.
2. If the situation is not resolved, or if the intern prefers not to speak directly to a colleague one-on-one, the intern may inform the Training Director in order to either a) facilitate a discussion of the complaint with the identified colleague, b) address the issue directly with this staff member, or c) determine the appropriate procedure or office to address the complaint.
3. If the complaint is not or cannot be resolved in this manner then the intern may provide a written statement to the Supervisors Committee who will make recommendations for resolution.

4. If the complaint remains unresolved, the Director of the CC will meet with the Supervisors Committee to review and act upon the complaint.

All employees of the College of William Mary, including trainees, have the right to file formal grievances with the College. Guidelines for grievance procedures are outlined in [W&M Human Resources Grievance Procedures](#). In the case of perceived harassment or discrimination (sexual, racial or other), which is not resolved through this procedure, the intern should refer to the [W&M Sexual Harassment Policy](#)

I \_\_\_\_\_ have read, understood, and agreed with the Due Process and Grievance Procedures described above. I had the opportunity to discuss these processes with the Training Director and have questions answered.

\_\_\_\_\_  
Psychology Intern (print)

Date \_\_\_\_\_

\_\_\_\_\_  
Psychology Intern (sign)

**Intern** \_\_\_\_\_

**GOALS FOR THE INTERNSHIP YEAR**

Considering the different areas of strength and growth based on the self-evaluation, please describe what your major goals are for the internship year.  
Please describe these goals in terms of the following aims:

**I. RESEARCH**

---

---

---

---

---

**II. ETHICAL AND LEGAL STANDARDS**

---

---

---

---

---

---

**III. INDIVIDUAL AND CULTURAL DIVERSITY**

---

---

---

---

---

**IV. PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS**

---

---

---

---

---







# **Self-Assessment: Beginning of Internship**

## **William & Mary Counseling Center**

Intern: \_\_\_\_\_

Date: \_\_\_\_\_

Please use this evaluation form to assess your skill in the following competencies. The goal of this self-assessment is to help you engage in self-reflection in terms of strengths and areas of growth and help your supervisor and others involved in training of interns be aware and intentional about your goals.

***Please rate your skills using the following 5-point scale.***

- Level 1.** Inadequate Performance: The intern performs inadequately for a psychology intern in this area. The intern exhibits behaviors indicating lack of readiness for the work that is required in the internship setting. Requires significant and close supervision and monitoring of basic tasks in this area. Remediation plan required to provide the intern immediate augmented supervision or structured training opportunities.
- Level 2.** Limited knowledge and skill: The intern is moving towards acquiring ability in the competency being measured. Requires frequent supervision and close monitoring. Remediation may be considered or recommended or is available by intern request.
- Level 3.** Emerging Competence: The intern uses the skill being evaluated intermittently. The intern may still need some assistance from didactic training and/or supervisory activities to further develop the knowledge, awareness, and skill in the competency being evaluated.
- Level 4.** Competent: The intern performs at the level expected for entry level practice. Demonstrates the ability to consistently utilize the knowledge, awareness or skill with minimum structured assistance. The intern is generally self-sufficient; exhibits the ability to generalize knowledge and skills to new situations and is able to appropriately self-assess when further assistance/supervision is needed, such as in non-routine cases.
- Level 5.** Advanced Competence: The intern demonstrates mastery of the competency being evaluated. Routinely performs at or beyond levels expected for an early career professional. Consistently uses the skill independently; this is the case even in complex cases.
- N/A.** Not enough information obtained at this time to provide an evaluation of competency.

**I. RESEARCH**  
**Demonstrates knowledge, skills, and competence in Research**

Rating: \_\_\_\_\_

1. Demonstrates knowledge, skills, and competence to critically evaluate research according to methods, procedures, practices, and attention to diversity and contextual variables \_\_\_\_\_
2. Demonstrates knowledge, skills, and competence to use existing knowledge in clinical practice and other professional activities, taking into consideration issues of diversity \_\_\_\_\_
3. Demonstrates ability to locate, appraise, and assimilate evidence from scientific studies on college mental health and local clinical data (trends in mental health issues in college populations, results from research comparing W&M students health related issues/needs to those of students in other universities, etc.) \_\_\_\_\_
4. Appropriately utilizes scholarly work and applies scientific knowledge in the different roles assumed at the agency \_\_\_\_\_
5. Appropriately disseminates research information in presentations (case presentation, supervision presentation, research presentation), outreach events, seminars, consultation, teaching in practicum student seminar, etc.

**Summary Comments:**

**II. ETHICAL AND LEGAL STANDARDS**  
**Demonstrates knowledge, skills, and competence in Ethical and Legal Standards**

Rating: \_\_\_\_\_

1. Demonstrates ability to monitor their behavior to conduct themselves following the APA Ethical Principles and Code of Conduct as well as APA Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change of the American Psychological Association \_\_\_\_\_



2. Demonstrates knowledge and ability to follow the Virginia Law regarding the ethical practice of Psychologists \_\_\_\_\_
3. Demonstrates knowledge regarding the relevant laws, regulations, rules, policies, standards and guidelines governing health service psychology \_\_\_\_\_
4. Understands and follows the Center's policies and procedures \_\_\_\_\_
5. Recognized ethical dilemmas and apply ethical decision-making processes \_\_\_\_\_
6. Appropriately seeks consultation when ethical or legal issues require resolution
7. Behaves in an ethical manner in all professional activities \_\_\_\_\_
8. Maintains accurate documentation records \_\_\_\_\_

**Summary Comments:**

**III. INDIVIDUAL AND CULTURAL DIVERSITY**  
**Demonstrates knowledge, skills, and competence as it relates to addressing diversity in all professional activities**

Rating: \_\_\_\_\_

1. Incorporates theoretical and research knowledge on multiculturalism \_\_\_\_\_
2. Demonstrates sensitivity of how self and others are shaped by individual and cultural diversity and the cultural context and sub-cultures in which people function.
3. Integrates knowledge of self and others as cultural beings across professional roles and functions \_\_\_\_\_
4. Demonstrates an understanding of how their own personal/cultural history, attitudes, and biases affect how they understand and interact with people different from themselves \_\_\_\_
5. Demonstrates awareness of own and others' multiple identities and the intersection of these identities \_\_\_\_\_
6. Demonstrates sensitivity to issues of power and privilege as they interact with others \_\_\_\_\_
7. Demonstrates an understanding of the manner in which people of diverse cultures and belief systems perceive mental health issues and interventions \_\_\_\_\_
8. Understands oppression and discrimination in society and other environments including university settings, and understands how these environments are microcosms for the larger society \_\_\_\_\_

**Summary Comments:**

**IV. PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS (Sections A-B)**  
**Demonstrates the development of a professional identity congruent with Health Service Psychology**

Rating: \_\_\_\_\_

**A: Behaves in ways that reflect the values and attitudes of Health Service psychology.**

Rating: \_\_\_\_\_

1. Demonstrates integrity, accountability, a professional demeanor, eagerness/readiness to learn, and concern for others, across the different roles assumed at the agency \_\_\_\_\_
2. Engages in self-reflection regarding personal and professional functioning \_\_\_\_\_
3. Demonstrates ability to monitor their reactions and behaviors \_\_\_\_\_
4. Demonstrates ability to recognize areas of strength \_\_\_\_\_
5. Demonstrate ability to recognize areas of growth \_\_\_\_\_
6. Seeks the means to ameliorate the impact of potential problems on the delivery of services, including engagement in activities to maintain and improve performance, well-being, and professional effectiveness \_\_\_\_\_
7. Uses diverse resources for professional development including staff resources (supervision and consultation), workshops, conferences, and/or professional organizations \_\_\_\_\_
8. Responds professionally in increasingly complex situations with a greater degree of independence as the internship year progresses \_\_\_\_\_

**Summary Comments:**

**B: Demonstrates ability to effectively use supervision**

Rating: \_\_\_\_\_

1. Demonstrates effective preparation for supervision \_\_\_\_\_
2. Demonstrates receptiveness to new ideas and approaches \_\_\_\_\_

3. Actively seeks and demonstrates openness to/in supervision \_\_\_\_\_
4. Demonstrates receptiveness to feedback about counseling deficits/strengths \_\_\_\_\_
5. Demonstrates effective use of what is learned in future sessions \_\_\_\_\_
6. Demonstrates openness to looking at own issues \_\_\_\_\_
7. Demonstrates awareness of multicultural issues within the supervisory relationship \_\_\_\_\_
8. Demonstrates ability to seek supervisory help resulting from a self-perceived need \_\_\_\_\_

**Summary Comments:**

**V. COMMUNICATION AND INTERPERSONAL SKILLS**

Rating: \_\_\_\_\_

1. Develops and maintains effective relationships with a wide range of individuals including colleagues, peers, supervisors, supervisees, other staff/professionals, parents, communities, organizations, and those receiving professional services, \_\_\_\_\_
2. Produces and comprehends oral, nonverbal, and written communications, demonstrating knowledge and understanding of professional language and concepts \_\_\_\_\_
3. Demonstrates effective communication and interpersonal skills, understanding the impact of their interpersonal and communication practices \_\_\_\_\_
4. Demonstrates effective communication and interpersonal skills being sensitive to issues of power and privilege \_\_\_\_\_
5. Demonstrates ability to manage difficult communication well \_\_\_\_\_
6. Appropriately manages emotional reactions while communicating/interacting with others \_\_\_\_\_

**Summary Comments:**

**VI. ASSESSMENT**

**Demonstrates competence in conducting intake and objective assessment consistent with the scope of Health Service Psychology.**

Rating: \_\_\_\_\_

1. Demonstrates ability to conduct initial assessments, write comprehensive intake reports, and make appropriate treatment recommendations and referrals based on client's clinical needs, diversity characteristics, and contextual variables \_\_\_\_\_
2. Considers the biological, cognitive, behavioral, developmental, and sociocultural components of health and illness in initial and other assessments \_\_\_\_\_
3. Demonstrates ability to appropriately select assessment instruments and interpret test results based on clients' clinical needs and diversity characteristics \_\_\_\_\_

4. Demonstrates ability to collect relevant data using multiple sources and methods appropriate to the goals and questions of the assessment \_\_\_\_\_
5. Demonstrates ability to accurately interpret assessment data according to professional standards and guidelines \_\_\_\_\_
6. Demonstrates ability to use assessment data to inform case conceptualization, intervention, and recommendations \_\_\_\_\_
7. Demonstrates ability to use assessment instruments and interpret assessment data being sensitive to clients' cultural identity(ies) \_\_\_\_\_
8. Demonstrates ability to integrate assessment data into comprehensive, culturally sensitive reports \_\_\_\_\_
9. Accurately, effectively, timely, and sensitively communicates (orally and/or in writing) the results and implications of the assessment \_\_\_\_\_

**Summary Comments:**

## **VII. INTERVENTION (Sections A-D)**

**Demonstrates knowledge and skill in implementing interventions for prevention and treatment consistent with the scope of Health Service Psychology. The level of intervention includes those directed at an individual, a group, an organization, a community, or other systems level**

Overall Rating: \_\_\_\_\_

**A: Demonstrates ability to provide effective services to a wide range of individual clients with diverse presenting concerns**

Rating: \_\_\_\_\_

1. Demonstrates ability to establish and maintain an effective therapeutic relationship with diverse clients presenting with different type of concerns. \_\_\_\_\_
2. Demonstrates ability to gather data and to facilitate exploration \_\_\_\_\_
3. Demonstrates ability to integrate data into meaningful conceptualizations \_\_\_\_\_
4. Demonstrates ability to conceptualize using different theoretical orientations \_\_\_\_\_
5. Demonstrates ability to formulate treatment strategies that integrate theory, current scientific literature, assessment findings, diversity and contextual variables \_\_\_\_\_
6. Demonstrates sensitivity, awareness, and skills regarding diversity issues in clinical work \_\_\_\_\_
7. Demonstrates ability to integrate diversity issues into their case conceptualization, treatment planning, and interventions \_\_\_\_\_
8. Appropriately utilizes complementary approaches/services based on client need and diversity/cultural/contextual variables \_\_\_\_\_
9. Utilizes multicultural guidelines to inform all aspects of the intervention process \_\_\_\_\_
10. Demonstrates ability to handle theirs and their client's affect \_\_\_\_\_
11. Demonstrates ability to use the self as a therapeutic tool \_\_\_\_\_

12. Demonstrates effective timing of interventions with their individual clients \_\_\_\_\_
13. Demonstrates ability to use Empirically-Validated treatments \_\_\_\_\_
14. Demonstrates flexibility in therapeutic techniques, including the ability to adapt evidence-based approaches, based on assessment data, treatment goals, diversity and contextual variables, and evaluation of intervention effectiveness \_\_\_\_\_
15. Demonstrates ability to accurately diagnose clients \_\_\_\_\_
16. Demonstrates ability to handle termination issues \_\_\_\_\_
17. Maintains accurate documentation records \_\_\_\_\_

**Summary Comments:**

**B: Demonstrates ability to assess crisis situations and provide effective interventions**

Rating \_\_\_\_\_

1. Demonstrates ability to assess the intensity/magnitude of clients' crisis situation \_\_\_\_\_
2. Demonstrates ability to thoroughly assess suicidality; this assessment is informed by the scientific literature in regards to safety assessment \_\_\_\_\_
3. Demonstrates ability to use appropriate interventions in crisis situations according to best practices and the scientific literature \_\_\_\_\_
4. Demonstrates ability to adapt intervention strategies evaluating effectiveness, issues of diversity, and contextual variables \_\_\_\_\_
5. Demonstrates ability to handle their affect in response to the client's affect or the nature of the crisis presented \_\_\_\_\_
6. Demonstrates ability to appropriately consult while assessing and responding to crises \_\_\_\_\_
7. Maintains accurate documentation records \_\_\_\_\_

**Summary Comments:**

**C: Demonstrates knowledge and skill in group therapy work**

Rating: \_\_\_\_\_

1. Demonstrates ability to refer appropriate clients to groups \_\_\_\_\_
2. Demonstrates effective use of pre-group interviews \_\_\_\_\_
3. Builds rapport and cohesion in group work \_\_\_\_\_

4. Demonstrates ability to integrate data into meaningful conceptualizations for group members and for the group as a whole \_\_\_\_\_
5. Demonstrates ability to integrate theory and practice of group work \_\_\_\_\_
6. Demonstrates effective timing of interventions according to the group stage \_\_\_\_\_
7. Demonstrates ability to integrate diversity issues into their conceptualization, treatment planning, and interventions in group \_\_\_\_\_
8. Demonstrates ability to formulate treatment strategies based on group dynamics \_\_\_\_\_
9. Implements interventions informed by current group therapy scientific literature/ evidence-based treatment \_\_\_\_\_
10. Demonstrates collaboration and effective communication with group co-leader \_\_\_\_\_
11. Demonstrates receptiveness to feedback about group counseling skills and ability to implement feedback and new ideas into group therapy practice \_\_\_\_\_
12. Demonstrates ability to handle their own and the group's affect \_\_\_\_\_
13. Maintains accurate documentation records \_\_\_\_\_
14. Demonstrates ability to handle termination issues of group work \_\_\_\_\_

**Summary Comments:**

**D: Demonstrates ability to plan and conduct outreach programs that are culturally and developmentally appropriate**

Rating: \_\_\_\_\_

1. Demonstrates consideration of needs of the target audience \_\_\_\_\_
2. Demonstrates ability to engage the audience in an effective manner \_\_\_\_\_
3. Demonstrates knowledge about the content area \_\_\_\_\_
4. Demonstrates ability to include up to date research information about the content area \_\_\_\_\_
5. Presents in a manner that is inclusive and/or affirming of issues of diversity \_\_\_\_\_
6. Demonstrates flexibility including the ability to adapt the presentation in response to the needs of the audience \_\_\_\_\_

**Summary Comments:**

**VIII. CLINICAL SUPERVISION**

**Demonstrates ability to establish a supervisory relationship that has the purpose of enhancing the professional functioning of a practicum student and monitoring the quality of the professional services offered by this trainee**

Rating: \_\_\_\_\_

1. Demonstrates knowledge of supervision models and practices \_\_\_\_\_
2. Applies knowledge scientific/scholarly work in the supervision of a practicum trainee \_\_\_\_\_
3. Demonstrates commitment to supervision \_\_\_\_\_
4. Demonstrates ability to establish and maintain a safe and supportive supervisory relationship \_\_\_\_\_
5. Demonstrates respect and offers support for their supervisee \_\_\_\_\_
6. Demonstrates sensitivity to issues of power/privilege. \_\_\_\_
7. Demonstrates ability to monitor their supervisee professional functioning and quality of services provided \_\_\_\_\_
8. Demonstrates ability to offer ongoing/formative feedback and suggestions about their supervisees' clinical work \_\_\_\_\_
9. Provide support for the development of case conceptualization \_\_\_\_\_
10. Demonstrates ability to provide effective formative and summative feedback through mid and end of semester evaluations of their supervisees' professional functioning \_\_\_\_\_
11. Demonstrates cultural sensitivity in the supervisory relationship with their supervisees \_\_\_\_\_

**Summary Comments:**

**IX. CONSULTATION AND INTERPROFESSIONAL/INTERDISCIPLINARY SKILLS**  
**Collaborates with others to address a problem, seek or share knowledge, or promote effectiveness in professional activities.**

Rating: \_\_\_\_\_

1. Demonstrates knowledge and respect for the roles and perspectives of other professions \_\_\_\_\_
2. Applies knowledge about other professions in consultation with other health care professionals, inter-professional groups, and/or systems \_\_\_\_\_
3. Appropriately consults with peers/other trainees and senior staff \_\_\_\_\_
4. Demonstrates ability to effectively communicate and consult with parents/family members while respecting client's confidentiality/scope of signed releases of information \_\_\_\_\_

5. Demonstrates sensitivity, awareness, and skills regarding diversity in their provision of consultation services \_\_\_\_\_



# Evaluation of Psychology Interns by Supervisors

## College of William and Mary Counseling Center

Intern: \_\_\_\_\_  
Clinical Supervisor: \_\_\_\_\_  
Evaluation Period: \_\_\_\_\_ to \_\_\_\_\_ Date: \_\_\_\_\_

The goal of this evaluation is primarily that of stimulating feedback regarding the perceived status and progress of the intern being evaluated. As such, the ratings should be reflective of the expected developmental progress at the time of the evaluation; at the beginning of the year, interns are evaluated according to what the profession describes as “readiness to enter internship” and at the end of year based on the competencies expected for “entry level practice.” Given this framework, interns could make progress on any given aim/competency and receive the same score on two different evaluation periods considering what is developmentally expected at that point in the internship year. It is hoped that the written evaluation will promote meaningful discussion concerning specific areas of the trainee’s training, progress, and how skills can be acquired or improved.

A score of 1 or 2 on any given item should be accompanied by specific data or description in the narrative/comment section addressing why the intern is receiving such rating for that competency.

Passing Criteria: An average score of 4 is required on each of the overall nine professional competencies and a minimum score of 3 on any given item within each competency area by the last evaluation of the competency area during the internship.

### **Please rate trainee using the following 5-point scale:**

- Level 1.** Inadequate Performance: The intern performs inadequately for a psychology intern in this area. The intern exhibits behaviors indicating lack of readiness for the work that is required in the internship setting. Requires significant and close supervision and monitoring of basic tasks in this area. Remediation plan required to provide the intern immediate augmented supervision or structured training opportunities.
- Level 2.** Limited knowledge and skill: The intern is moving towards acquiring ability in the competency being measured. Requires frequent supervision and close monitoring. Remediation may be considered or recommended or is available by intern request.
- Level 3.** Emerging Competence: The intern uses the skill being evaluated intermittently. The intern may still need some assistance from didactic training and/or supervisory activities to further develop the knowledge, awareness, and skill in the competency being evaluated.
- Level 4.** Competent: The intern performs at the level expected for entry level practice. Demonstrates the ability to consistently utilize the knowledge, awareness or skill with minimum structured assistance. The intern is generally self-sufficient; exhibits the ability to generalize knowledge and skills to new situations and is able to appropriately self-assess when further assistance/supervision is needed, such as in non-routine cases.

**Level 5.** Advanced Competence: The intern demonstrates mastery of the competency being evaluated. Routinely performs at or beyond levels expected for an early career professional. Consistently uses the skill independently; this is the case even in complex cases.

**N/A.** Not enough information obtained at this time to provide an evaluation of competency.

Mark the work that you supervised	Mark the methods used to supervise/evaluate
<input type="checkbox"/> Individual Psychotherapy	<input type="checkbox"/> Video recordings
<input type="checkbox"/> Group Psychotherapy	<input type="checkbox"/> Co-therapy
<input type="checkbox"/> Day Crisis Intervention	<input type="checkbox"/> Verbal summary of cases
<input type="checkbox"/> Intake Assessment	<input type="checkbox"/> Case documentation/written notes
<input type="checkbox"/> Objective/Personality Assessment	<input type="checkbox"/> Assessment data
<input type="checkbox"/> Symptom Assessment	<input type="checkbox"/> Written intakes or assessment reports
<input type="checkbox"/> On-call Crisis Intervention	<input type="checkbox"/> Case presentations
<input type="checkbox"/> Outreach	<input type="checkbox"/> Outreach/Research presentations
<input type="checkbox"/> Consultation	<input type="checkbox"/> Case Conference
<input type="checkbox"/> Supervision Provision	<input type="checkbox"/> Didactic seminars
<input type="checkbox"/> Other (Please describe) _____	<input type="checkbox"/> Feedback provided by other supervisors/senior staff
	<input type="checkbox"/> Other (Please describe) _____

**I. RESEARCH**  
**Demonstrates knowledge, skills, and competence in Research**

Rating: \_\_\_\_\_

1. Demonstrates knowledge, skills, and competence to critically evaluate research according to methods, procedures, practices, and attention to diversity and contextual variables \_\_\_\_\_
2. Demonstrates knowledge, skills, and competence to use existing knowledge in clinical practice and other professional activities, taking into consideration issues of diversity \_\_\_\_\_
3. Demonstrates ability to locate, appraise, and assimilate scientific evidence on college mental health and local clinical data (trends in mental health issues in college populations, results from research comparing W&M students health related issues/needs to those of students in other universities, etc.) \_\_\_\_\_
4. Appropriately utilizes scholarly work and applies existing evidence in the different roles assumed at the agency \_\_\_\_\_
5. Appropriately disseminates research information in presentations (case presentation, supervision presentation, research presentation), outreach events, seminars, consultation, teaching in practicum student seminar, etc.

**Summary Comments:**

## **II. ETHICAL AND LEGAL STANDARDS**

### **Demonstrates knowledge, skills, and competence in Ethical and Legal Standards**

Rating: \_\_\_\_\_

1. Demonstrates ability to monitor their behavior to conduct themselves following the APA Ethical Principles and Code of Conduct as well as APA Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change of the American Psychological Association \_\_\_\_\_
2. Demonstrates knowledge and ability to follow the Virginia Law regarding the ethical practice of Psychologists \_\_\_\_\_
3. Demonstrates knowledge regarding the relevant laws, regulations, rules, policies, standards and guidelines governing health service psychology \_\_\_\_\_
4. Understands and follows the Center's policies and procedures \_\_\_\_\_
5. Recognized ethical dilemmas and apply ethical decision-making processes \_\_\_\_\_
6. Appropriately seeks consultation when ethical or legal issues require resolution \_\_\_\_\_
7. Behaves in an ethical manner in all professional activities \_\_\_\_\_
8. Maintains accurate documentation records \_\_\_\_\_

#### **Summary Comments:**

## **III. INDIVIDUAL AND CULTURAL DIVERSITY**

### **Demonstrates knowledge, skills, and competence as it relates to addressing diversity in all professional activities**

Rating: \_\_\_\_\_

1. Incorporates theoretical and research knowledge on multiculturalism \_\_\_\_\_
2. Demonstrates sensitivity of how self and others are shaped by individual and cultural diversity and the cultural context and sub-cultures in which people function.
3. Integrates knowledge of self and others as cultural beings across professional roles and functions \_\_\_\_\_
4. Demonstrates an understanding of how their own personal/cultural history, attitudes, and biases affect how they understand and interact with people different from themselves \_\_\_\_\_
5. Demonstrates awareness of own and others' multiple identities and the intersection of these identities \_\_\_\_\_
6. Demonstrates sensitivity to issues of power and privilege as they interact with others \_\_\_\_\_
7. Demonstrates an understanding of the manner in which people of diverse cultures and belief systems perceive mental health issues and interventions \_\_\_\_\_

8. Understands oppression and discrimination in society and other environments including university settings, and understands how these environments are microcosms for the larger society \_\_\_\_\_

**Summary Comments:**

**IV. PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS (Sections A-B)**  
**Demonstrates the development of a professional identity congruent with Health Service Psychology**

Rating: \_\_\_\_\_

**A: Behaves in ways that reflect the values and attitudes of Health Service psychology.**

Rating: \_\_\_\_\_

1. Demonstrates integrity, accountability, a professional demeanor, eagerness/readiness to learn, and concern for others, across the different roles assumed at the agency \_\_\_\_\_
2. Engages in self-reflection regarding personal and professional functioning \_\_\_\_\_
3. Demonstrates ability to monitor their reactions and behaviors \_\_\_\_\_
4. Demonstrates ability to recognize areas of strength \_\_\_\_\_
5. Demonstrate ability to recognize areas of growth \_\_\_\_\_
6. Seeks the means to ameliorate the impact of potential problems on the delivery of services, including engagement in activities to maintain and improve performance, well-being, and professional effectiveness \_\_\_\_\_
7. Uses diverse resources for professional development including staff resources (supervision and consultation), workshops, conferences, and/or professional organizations \_\_\_\_\_
8. Responds professionally in increasingly complex situations with a greater degree of independence as the internship year progresses \_\_\_\_\_

**Summary Comments:**

**B: Demonstrates ability to effectively use supervision**

Rating: \_\_\_\_\_

1. Demonstrates effective preparation for supervision \_\_\_\_\_
2. Demonstrates receptiveness to new ideas and approaches \_\_\_\_\_
3. Actively seeks and demonstrates openness to/in supervision \_\_\_\_\_
4. Demonstrates receptiveness to feedback about professional deficits/strengths \_\_\_\_\_
5. Demonstrates effective use of what is learned in future sessions \_\_\_\_\_
6. Demonstrates openness to looking at own issues \_\_\_\_\_
7. Demonstrates awareness of multicultural issues within the supervisory relationship \_\_\_\_\_

- Demonstrates ability to seek supervisory help resulting from a self-perceived need \_\_\_\_\_

**Summary Comments:**

## **V. COMMUNICATION AND INTERPERSONAL SKILLS**

Rating: \_\_\_\_\_

- Develops and maintains effective relationships with a wide range of individuals including colleagues, peers, supervisors, supervisees, other staff/professionals, parents, communities, organizations, and those receiving professional services \_\_\_\_\_
- Produces and comprehends oral, nonverbal, and written communications, demonstrating knowledge and understanding of professional language and concepts \_\_\_\_\_
- Demonstrates effective communication and interpersonal skills, understanding the impact of their interpersonal and communication practices \_\_\_\_\_
- Demonstrates effective communication and interpersonal skills being sensitive to issues of power and privilege \_\_\_\_\_
- Demonstrates ability to manage difficult communication well \_\_\_\_\_
- Appropriately manages emotional reactions while communicating/interacting with others \_\_\_\_\_

**Summary Comments:**

## **VI. ASSESSMENT**

**Demonstrates competence in conducting intake and objective assessment consistent with the scope of Health Service Psychology.**

Rating: \_\_\_\_\_

- Demonstrates ability to conduct initial assessments, write comprehensive intake reports, and make appropriate treatment recommendations and referrals based on client's clinical needs, diversity characteristics, and contextual variables \_\_\_\_\_
- Considers the biological, cognitive, behavioral, developmental, and sociocultural components of health and illness in initial and other assessments \_\_\_\_\_
- Demonstrates ability to appropriately select assessment instruments and interpret test results based on clients' clinical needs and diversity characteristics \_\_\_\_\_
- Demonstrates ability to collect relevant data using multiple sources and methods appropriate to the goals and questions of the assessment \_\_\_\_\_
- Demonstrates ability to accurately interpret assessment data according to professional standards and guidelines \_\_\_\_\_
- Demonstrates ability to use assessment data to inform case conceptualization, intervention, and recommendations \_\_\_\_\_
- Demonstrates ability to use assessment instruments and interpret assessment data being sensitive to clients' cultural identities \_\_\_\_\_
- Demonstrates ability to integrate assessment data into comprehensive, culturally sensitive reports \_\_\_\_\_

9. Accurately, effectively, timely, and sensitively communicates (orally and in writing) the results and implications of the assessment \_\_\_\_\_
10. Demonstrates ability to utilize case formulation and diagnosis for intervention planning in the context of human development and diversity \_\_\_\_\_

**Summary Comments:**

**VII. INTERVENTION (Sections A-B)**

**Demonstrates knowledge and skill in implementing interventions for prevention and treatment consistent with the scope of Health Service Psychology. The level of intervention includes those directed at an individual, a group, an organization, a community, or other systems level**

Overall Rating: \_\_\_\_\_

**A: Demonstrates ability to provide effective services to a wide range of individual clients with diverse presenting concerns**

Rating: \_\_\_\_\_

1. Demonstrates ability to establish and maintain an effective therapeutic relationship with diverse clients presenting with different type of concerns. \_\_\_\_\_
2. Demonstrates ability to gather data and to facilitate exploration \_\_\_\_\_
3. Demonstrates ability to integrate data into meaningful conceptualizations \_\_\_\_\_
4. Demonstrates ability to conceptualize using different theoretical orientations \_\_\_\_\_
5. Demonstrates ability to formulate treatment strategies that integrate theory, current evidence-based information, assessment findings, diversity and contextual variables \_\_\_\_\_
6. Demonstrates sensitivity, awareness, and skills regarding diversity issues in clinical work \_\_\_\_\_
7. Demonstrates ability to integrate issues of identity into their case conceptualization, treatment planning, and interventions \_\_\_\_\_
8. Appropriately utilizes complementary approaches/services based on client need and diversity/cultural/contextual variables \_\_\_\_\_
9. Utilizes multicultural guidelines to inform all aspects of the intervention process \_\_\_\_\_
10. Demonstrates ability to handle theirs and their client's affect \_\_\_\_\_
11. Demonstrates ability to use the self as a therapeutic tool \_\_\_\_\_
12. Demonstrates effective timing of interventions with their individual clients \_\_\_\_\_
13. Demonstrates ability to use Empirically-Validated treatments \_\_\_\_\_
14. Demonstrates flexibility in therapeutic techniques, including the ability to adapt evidence-based approaches, based on assessment data, treatment goals, diversity and contextual variables, and evaluation of intervention effectiveness \_\_\_\_\_
15. Demonstrates ability to accurately diagnose clients \_\_\_\_\_
16. Demonstrates ability to handle termination issues \_\_\_\_\_
17. Maintains accurate documentation records \_\_\_\_\_

**Summary Comments:**

**B: Demonstrates ability to assess crisis situations and provide effective interventions**

Rating \_\_\_\_\_

1. Demonstrates ability to assess the intensity/magnitude of clients' crisis situation \_\_\_\_\_
2. Demonstrates ability to use evidence-based methodology to conduct suicide risk assessment \_\_\_\_\_
3. Demonstrates ability to use appropriate interventions in crisis situations according to best practices and evidence-based information \_\_\_\_\_
4. Demonstrates ability to adapt intervention strategies evaluating effectiveness, issues of diversity, and contextual variables \_\_\_\_\_
5. Demonstrates ability to handle their affect in response to the client's affect or the nature of the crisis presented \_\_\_\_\_
6. Demonstrates ability to appropriately consult while assessing and responding to crises \_\_\_\_\_
7. Maintains accurate documentation records \_\_\_\_\_

**Summary Comments:**

**Demonstrates knowledge and skill in group therapy work: Please refer to Group Therapy Skills Evaluation**

**Demonstrates ability to plan and conduct outreach programs that are culturally and developmentally appropriate: Please refer to Outreach Presentation Evaluation**

**VIII. CLINICAL SUPERVISION**

**Demonstrates ability to establish a supervisory relationship that has the purpose of enhancing the professional functioning of a practicum student and monitoring the quality of the professional services offered by this trainee: Please refer to Supervisory Skills Evaluation**

**IX. CONSULTATION AND INTERPROFESSIONAL/INTERDISCIPLINARY SKILLS**  
**Collaborates with others to address a problem, seek or share knowledge, or promote effectiveness in professional activities.**

Rating: \_\_\_\_\_

1. Demonstrates knowledge and respect for the roles and perspectives of other professions and professionals \_\_\_\_\_

2. Applies knowledge about other professions in consultation with other health care professionals, inter-professional groups, and/or systems \_\_\_\_\_
3. Appropriately consults with peers/other trainees and senior staff \_\_\_\_\_
4. Demonstrates ability to effectively communicate and consult with parents/family members while respecting client's confidentiality/scope of signed releases of information \_\_\_\_\_
5. Demonstrates sensitivity, awareness, and skills regarding diversity in their provision of consultation services \_\_\_\_\_

---

**Supervisor**

---

**Date**

**Intern's Comments:**

---

**Psychology Intern**

---

**Date**



# Evaluation of Psychology Interns by Supervisors

## Group Skills

### College of William and Mary Counseling Center

Intern: \_\_\_\_\_  
Group Supervisor: \_\_\_\_\_  
Evaluation Period: \_\_\_\_\_  
Date of Evaluation: \_\_\_\_\_

The goal of this evaluation is primarily that of stimulating feedback regarding the perceived status and progress of the intern being evaluated. As such, the ratings should be reflective of the expected developmental progress at the time of the evaluation; at the beginning of the year, interns are evaluated according to what the profession describes as “readiness to enter internship” and at the end of year based on the competencies expected for “entry level practice.” Given this framework, interns could make progress on any given aim/competency and receive the same score on two different evaluation periods considering what is developmentally expected at that point in the internship year. It is hoped that the written evaluation will promote meaningful discussion concerning specific areas of the trainee’s training, progress, and how skills can be acquired or improved.

A score of 1 or 2 on any given item should be accompanied by specific data or description in the narrative/comment section addressing why the intern is receiving such rating for that competency.

Passing Criteria: An average score of 4 is required on each of the overall nine professional competencies and a minimum score of 3 on any given item within each competency area by the last evaluation of the competency area during the internship.

#### **Please rate trainee using the following 5-point scale:**

- Level 1.** Inadequate Performance: The intern performs inadequately for a psychology intern in this area. The intern exhibits behaviors indicating lack of readiness for the work that is required in the internship setting. Requires significant and close supervision and monitoring of basic tasks in this area. Remediation plan required to provide the intern immediate augmented supervision or structured training opportunities.
- Level 2.** Limited knowledge and skill: The intern is moving towards acquiring ability in the competency being measured. Requires frequent supervision and close monitoring. Remediation may be considered or recommended or is available by intern request.
- Level 3.** Emerging Competence: The intern uses the skill being evaluated intermittently. The intern may still need some assistance from didactic training and/or supervisory activities to further develop the knowledge, awareness, and skill in the competency being evaluated.
- Level 4.** Competent: The intern performs at the level expected for entry level practice. Demonstrates the ability to consistently utilize the knowledge, awareness or skill with minimum structured assistance. The intern is generally self-sufficient; exhibits the ability to generalize knowledge and skills to new situations and is able to appropriately self-assess when further assistance/supervision is needed, such as in non-routine cases.

**Level 5.** Advanced Competence: The intern demonstrates mastery of the competency being evaluated. Routinely performs at or beyond levels expected for an early career professional. Consistently uses the skill independently; this is the case even in complex cases.

**N/A.** Not enough information obtained at this time to provide an evaluation of competency.

Mark the work that you supervised	Mark the methods used to supervise/evaluate
<input type="radio"/> Group	<input type="radio"/> Video Recording & Supervision Discussion
	<input type="radio"/> Other (Please describe) _____

**C: Demonstrates knowledge and skill in group therapy work**

Rating: \_\_\_\_\_

1. Demonstrates ability to refer appropriate clients to groups \_\_\_\_\_
2. Demonstrates effective use of pre-group interviews \_\_\_\_\_
3. Builds rapport and cohesion in group work \_ \_\_\_\_\_
4. Demonstrates ability to integrate data into meaningful conceptualizations for group members and for the group as a whole \_\_\_\_\_
5. Demonstrates ability to integrate theory and practice of group work \_ \_\_\_\_\_
6. Demonstrates effective timing of interventions according to the group stage \_ \_\_\_\_\_
7. Demonstrates ability to integrate diversity issues into their conceptualization, treatment planning, and interventions in group \_\_\_\_\_
8. Demonstrates ability to formulate treatment strategies based on group dynamics \_\_ \_\_\_\_\_
9. Implements interventions informed by current group therapy scientific literature/ evidence-based treatment\_\_ \_\_\_\_\_
10. Demonstrates collaboration and effective communication with group co-leader \_\_\_\_\_
11. Demonstrates receptiveness to feedback about group counseling skills and ability to implement feedback and new ideas into group therapy practice \_\_\_\_\_
12. Demonstrates ability to handle their own and the group's affect \_\_ \_\_\_\_\_
13. Maintains accurate documentation records \_\_\_\_\_
14. Demonstrates ability to handle termination issues of group work \_\_\_\_\_

**Summary Comments:**

\_\_\_\_\_  
**Supervisor**

\_\_\_\_\_  
**Date**

**Intern's Comments:**

---

**Psychology Intern**

---

**Date**

## Group Therapy Internship Training Track Evaluation

The goal of this evaluation is primarily that of stimulating feedback regarding the perceived status and progress of the intern being evaluated. As such, the ratings should be reflective of the expected developmental progress at the time of the evaluation; at the beginning of the year, interns are evaluated according to what the profession describes as “readiness to enter internship” and at the end of year based on the competencies expected for “entry level practice.” Given this framework, interns could make progress on any given aim/competency and receive the same score on two different evaluation periods considering what is developmentally expected at that point in the internship year. It is hoped that the written evaluation will promote meaningful discussion concerning specific areas of the trainee’s training, progress, and how skills can be acquired or improved.

A score of 1 or 2 on any given item should be accompanied by specific data or description in the narrative/comment section addressing why the intern is receiving such rating for that competency.

Passing Criteria: An average score of 4 is required on each of the overall nine professional competencies and a minimum score of 3 on any given item within each competency area by the last evaluation of the competency area during the internship.

**Please rate trainee using the following 5-point scale:**

- Level 1.** Inadequate Performance: The intern performs inadequately for a psychology intern in this area. The intern exhibits behaviors indicating lack of readiness for the work that is required in the internship setting. Requires significant and close supervision and monitoring of basic tasks in this area. Remediation plan required to provide the intern immediate augmented supervision or structured training opportunities.
  
- Level 2.** Limited knowledge and skill: The intern is moving towards acquiring ability in the competency being measured. Requires frequent supervision and close monitoring. Remediation may be considered or recommended or is available by intern request.
  
- Level 3.** Emerging Competence: The intern uses the skill being evaluated intermittently. The intern may still need some assistance from didactic training and/or supervisory activities to further develop the knowledge, awareness, and skill in the competency being evaluated.
  
- Level 4.** Competent: The intern performs at the level expected for entry level practice. Demonstrates the ability to consistently utilize the knowledge, awareness or skill with minimum structured assistance. The intern is generally self-sufficient; exhibits the ability to generalize knowledge and skills to new situations and is able to appropriately self-assess when further assistance/supervision is needed, such as in non-routine cases.

**Level 5.** Advanced Competence: The intern demonstrates mastery of the competency being evaluated. Routinely performs at or beyond levels expected for an early career professional. Consistently uses the skill independently; this is the case even in complex cases.

**N/A.** Not enough information obtained at this time to provide an evaluation of competency.

### **Integration of Science and Practice**

- |  |   |   |   |   |   |     |
|--|---|---|---|---|---|-----|
| 1. Demonstrates the use of evidence-based knowledge and interventions for planning and facilitating groups.          | 1 | 2 | 3 | 4 | 5 | N/A |
| 2. Conducts effective group organization practices such as screening, orientation, and group process commentary.     | 1 | 2 | 3 | 4 | 5 | N/A |
| 3. Applies the scientific principles from current research findings to group members' problems, issues and concerns. | 1 | 2 | 3 | 4 | 5 | N/A |

### **Ethical and Legal Standards/Policy**

- |   |   |   |   |   |   |     |
|---|---|---|---|---|---|-----|
| 4. Recognizes ethical dilemmas and concerns related to group psychotherapy and uses an ethical decision making model when ethical dilemmas arise in groups. | 1 | 2 | 3 | 4 | 5 | N/A |
|---|---|---|---|---|---|-----|

### **Consultation and Evaluation**

- |  |   |   |   |   |   |     |
|--|---|---|---|---|---|-----|
| 5. Demonstrates an ability to work constructively with interdisciplinary mental health professional teams. | 1 | 2 | 3 | 4 | 5 | N/A |
| 6. Engages in evaluative practices as applied to groups such as cohesion, group progress, and the like.    | 1 | 2 | 3 | 4 | 5 | N/A |

### **Supervision and Teaching**

- |   |   |   |   |   |   |     |
|---|---|---|---|---|---|-----|
| 7. Applies a supervision model when working with mental health professionals in training, such as in practicum and internship.                | 1 | 2 | 3 | 4 | 5 | N/A |
| 8. Presents information relative to group psychology and group psychotherapy in venues such as case presentations, grand rounds and the like. | 1 | 2 | 3 | 4 | 5 | N/A |

### **Assessment**

9. Demonstrates an ability to evaluate the group's and group members' needs and progress. 1 2 3 4 5 N/A

10. Uses appropriate assessment measures and instruments for screening and progress. 1 2 3 4 5 N/A

### **Professional Values, Attitudes and Behaviors**

11. Demonstrates an awareness of personal values, attitudes and behaviors that have the potential to affect the therapeutic process. 1 2 3 4 5 N/A

12. Conceptualizes and implements a self-reflective process related to group facilitation. 1 2 3 4 5 N/A

### **Intervention**

13. Facilitates the emergence of group therapeutic factors such as universality, hope, catharsis and cohesion. 1 2 3 4 5 N/A

14. Effectively intervenes to prevent and/or address problematic group member behaviors, such as monopolizing, story-telling, and help-rejecting. 1 2 3 4 5 N/A

15. Effectively and safely manages members' expression of difficult emotions such as anger, fear, guilt and shame. 1 2 3 4 5 N/A

### **Individual and Cultural Diversity**

16. Facilitates the therapeutic experience for groups composed of diverse individuals. 1 2 3 4 5 N/A

17. Conceptualizes the role of power dynamics in groups. 1 2 3 4 5 N/A

18. Demonstrates an ability to intervene effectively when issues such as marginalization and microaggressions occur in groups. 1 2 3 4 5 N/A

Source: The APA Division 49 Group Specialty Council's *Educational and Training Guidelines Postdoctoral Residency Programs* at <https://www.apadivisions.org/division-49/leadership/committees/group-specialty>

# Evaluation of Psychology Interns by Supervisors

## Supervisory Skills

College of William and Mary Counseling Center

Intern: \_\_\_\_\_  
Supervisor of Supervision: \_\_\_\_\_  
Evaluation Period: \_\_\_\_\_ Date: \_\_\_\_

The goal of this evaluation is primarily that of stimulating feedback regarding the perceived status and progress of the intern being evaluated. As such, the ratings should be reflective of the expected developmental progress at the time of the evaluation; at the beginning of the year, interns are evaluated according to what the profession describes as “readiness to enter internship” and at the end of year based on the competencies expected for “entry level practice.” Given this framework, interns could make progress on any given aim/competency and receive the same score on two different evaluation periods considering what is developmentally expected at that point in the internship year. It is hoped that the written evaluation will promote meaningful discussion concerning specific areas of the trainee’s training, progress, and how skills can be acquired or improved.

A score of 1 or 2 on any given item should be accompanied by specific data or description in the narrative/comment section addressing why the intern is receiving such rating for that competency.

Passing Criteria: An average score of 4 is required on each of the overall nine professional competencies and a minimum score of 3 on any given item within each competency area by the last evaluation of the competency area during the internship.

**Please rate trainee using the following 5-point scale:**

- Level 1.** Inadequate Performance: The intern performs inadequately for a psychology intern in this area. The intern exhibits behaviors indicating lack of readiness for the work that is required in the internship setting. Requires significant and close supervision and monitoring of basic tasks in this area. Remediation plan required to provide the intern immediate augmented supervision or structured training opportunities.
- Level 2.** Limited knowledge and skill: The intern is moving towards acquiring ability in the competency being measured. Requires frequent supervision and close monitoring. Remediation may be considered or recommended or is available by intern request.
- Level 3.** Emerging Competence: The intern uses the skill being evaluated intermittently. The intern may still need some assistance from didactic training and/or supervisory activities to further develop the knowledge, awareness, and skill in the competency being evaluated.
- Level 4.** Competent: The intern performs at the level expected for entry level practice. Demonstrates the ability to consistently utilize the knowledge, awareness or skill with minimum structured assistance. The intern is generally self-sufficient; exhibits the ability to generalize knowledge and skills to new situations and is able to appropriately self-assess when further assistance/supervision is needed, such as in non-routine cases.

**Level 5.** Advanced Competence: The intern demonstrates mastery of the competency being evaluated. Routinely performs at or beyond levels expected for an early career professional. Consistently uses the skill independently; this is the case even in complex cases.

**N/A.** Not enough information obtained at this time to provide an evaluation of competency.

Work supervised	Methods used to supervise/evaluate
○	○
	○

**I. RESEARCH**  
**Demonstrates knowledge, skills, and competence in Research**  
 Rating: \_\_\_\_

1. Demonstrates knowledge, skills, and competence to critically evaluate supervision research according to methods, procedures, practices, and attention to diversity and contextual variables  
 \_\_\_\_
2. Demonstrates knowledge, skills, and competence to use existing knowledge in the role of supervisor \_\_\_\_
3. Demonstrates ability to locate, appraise, and assimilate scientific evidence in regard to the practice of clinical supervision \_\_\_\_
4. Appropriately utilizes scholarly work and applies existing evidence in the role of supervisor  
 \_\_\_\_
5. Appropriately disseminates research information in supervision presentation. \_\_\_\_

**Summary Comments:**

**II. ETHICAL AND LEGAL STANDARDS**  
**Demonstrates knowledge, skills, and competence in Ethical and Legal Standards**  
 Rating: \_\_\_\_

1. Demonstrates ability to monitor their behavior to conduct themselves following the APA Ethical Principles and Code of Conduct as well as APA Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change of the American Psychological Association \_\_\_\_



2. Demonstrates knowledge and ability to follow the Virginia Law regarding the ethical practice of Psychologists \_\_\_\_
3. Demonstrates knowledge regarding the relevant laws, regulations, rules, policies, standards and guidelines governing health service psychology \_\_\_\_
4. Understands and follows the Center's policies and procedures and is able to guide and monitor supervisee in this regard \_\_\_\_
5. Recognized ethical dilemmas and apply ethical decision-making processes as a supervisor \_\_\_\_
6. Appropriately seeks consultation when ethical or legal issues require resolution \_\_\_\_
7. Behaves in an ethical manner as a supervisor; serves as a role model regarding ethical behavior for supervisee. \_\_\_\_
8. Maintains documentation of supervision \_\_\_\_

**Summary Comments:**

**III. INDIVIDUAL AND CULTURAL DIVERSITY**

**Demonstrates knowledge, skills, and competence as it relates to addressing diversity in in role of supervisor**

Rating: \_\_\_\_

1. Incorporates theoretical and research knowledge on multiculturalism \_\_\_\_
2. Demonstrates sensitivity of how self and others are shaped by individual and cultural diversity and the cultural context and sub-cultures in which people function. \_\_\_\_
3. Integrates knowledge of self and others as cultural beings across professional roles and functions \_\_\_\_
4. Demonstrates an understanding of how their own personal/cultural history, attitudes, and biases affect how they understand and interact with people different from themselves \_\_\_\_
5. Demonstrates awareness of own and others' multiple identities and the intersection of these identities \_\_\_\_
6. Demonstrates sensitivity to issues of power and privilege as they interact with others \_\_\_\_
7. Demonstrates an understanding of the manner in which people of diverse cultures and belief systems perceive mental health issues and interventions and is able to utilize this knowledge as a supervisor. \_\_\_\_
8. Understands oppression and discrimination in society and other environments including university settings, and understands how these environments are microcosms for the larger society \_\_\_\_

**Summary Comments:**

**IV. PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS (Sections A-B)**

**Demonstrates the development of a professional identity congruent with Health Service Psychology**

Rating: \_\_\_\_

**A: Behaves in ways that reflect the values and attitudes of Health Service psychology.**

Rating: \_\_\_\_

1. Demonstrates integrity, accountability, a professional demeanor, eagerness/readiness to learn, and concern for others, in the role of supervisor\_\_
2. Engages in self-reflection regarding personal and professional functioning \_\_
3. Demonstrates ability to monitor their reactions and behaviors \_\_
4. Demonstrates ability to recognize areas of strength and areas of growth \_\_\_\_
5. Seeks the means to ameliorate the impact of potential problems on the delivery of services, including engagement in activities to maintain and improve performance, well-being, and professional effectiveness \_\_
6. Uses diverse resources for professional development including staff resources (supervision and consultation), workshops, conferences, and/or professional organizations \_\_
7. Responds professionally in increasingly complex situations with a greater degree of independence as the internship year progresses \_\_

**Summary Comments:**

**B: Demonstrates ability to effectively use supervision**

Rating: \_\_\_\_

1. Demonstrates effective preparation for supervision \_\_
2. Demonstrates receptiveness to new ideas and approaches \_\_\_\_
3. Actively seeks and demonstrates openness to/in supervision \_\_
4. Demonstrates receptiveness to feedback about professional deficits/strengths \_\_
5. Demonstrates effective use of what is learned in future sessions \_\_
6. Demonstrates openness to looking at own issues \_\_
7. Demonstrates awareness of multicultural issues within the supervisory relationship  
\_\_\_\_
8. Demonstrates ability to seek supervisory help resulting from a self-perceived need  
\_\_\_\_

**Summary Comments:**

## **V. COMMUNICATION AND INTERPERSONAL SKILLS**

Rating: \_\_\_\_

1. Develops and maintains effective relationships with a wide range of individuals including colleagues, peers, supervisors, supervisees, other staff/professionals, parents, communities, organizations, and those receiving professional services, \_\_\_\_
2. Produces and comprehends oral, nonverbal, and written communications, demonstrating knowledge and understanding of professional language and concepts \_\_\_\_
3. Demonstrates effective communication and interpersonal skills, understanding the impact of their interpersonal and communication practices \_\_\_\_
4. Demonstrates effective communication and interpersonal skills being sensitive to issues of power and privilege \_\_\_\_
5. Demonstrates ability to manage difficult communication well \_\_\_\_
6. Appropriately manages emotional reactions while communicating/interacting with others \_\_\_\_

**Summary Comments:**

## **VIII. CLINICAL SUPERVISION**

**Demonstrates ability to establish a supervisory relationship that has the purpose of enhancing the professional functioning of a practicum student and monitoring the quality of the professional services offered by this trainee**

Rating: \_\_\_\_

1. Demonstrates knowledge of supervision models and practices \_\_\_\_
2. Applies knowledge scientific/scholarly work in the supervision of a practicum trainee \_\_\_\_
3. Demonstrates commitment to supervision \_\_\_\_
4. Demonstrates ability to establish and maintain a safe and supportive supervisory relationship \_\_\_\_
5. Demonstrates respect and offers support for their supervisee \_\_\_\_
6. Demonstrates sensitivity to issues of power/privilege \_\_\_\_
7. Demonstrates ability to monitor their supervisee professional functioning and quality of services provided \_\_\_\_
8. Demonstrates ability to offer ongoing/formative feedback and suggestions about their supervisees' clinical work \_\_\_\_
9. Provides support for the development of case conceptualizations \_\_\_\_
10. Demonstrates ability to provide effective formative and summative feedback through mid and end of semester evaluations of their supervisees' professional functioning \_\_\_\_
11. Demonstrates cultural sensitivity in the supervisory relationship with their supervisees \_\_\_\_

**Summary Comments:**

\_\_\_\_\_  
**Supervisor**

\_\_\_\_\_  
**Date**

**Intern's Comments:**

\_\_\_\_\_  
**Psychology Intern**

\_\_\_\_\_  
**Date**

# INTERN PERFORMANCE IN SEMINAR

Intern \_\_\_\_\_  
Seminar \_\_\_\_\_  
Date \_\_\_\_\_  
Evaluator(s) \_\_\_\_\_

The goal of this evaluation form is to stimulate feedback regarding the intern performance in the seminar. As such, the assessment should be reflective of the expected developmental progress at the time of the evaluation. Using the scale below, evaluate the different aspects of the intern's work as well as the overall performance in the seminar.

## **Please rate trainee using the following 5-point scale:**

- Level 1.** Inadequate Performance: The intern performs inadequately for a psychology intern in this area. The intern exhibits behaviors indicating lack of readiness for the work that is required in the internship setting. Requires significant and close supervision and monitoring of basic tasks in this area. Remediation plan required to provide the intern immediate augmented supervision or structured training opportunities.
- Level 2.** Limited knowledge and skill: The intern is moving towards acquiring ability in the competency being measured. Requires frequent supervision and close monitoring. Remediation may be considered or recommended or is available by intern request.
- Level 3.** Emerging Competence: The intern uses the skill being evaluated intermittently. The intern may still need some assistance from didactic training and/or supervisory activities to further develop the knowledge, awareness, and skill in the competency being evaluated.
- Level 4.** Competent: The intern performs at the level expected for entry level practice. Demonstrates the ability to consistently utilize the knowledge, awareness or skill with minimum structured assistance. The intern is generally self-sufficient; exhibits the ability to generalize knowledge and skills to new situations and is able to appropriately self-assess when further assistance/supervision is needed, such as in non-routine cases.
- Level 5.** Advanced Competence: The intern demonstrates mastery of the competency being evaluated. Routinely performs at or beyond levels expected for an early career professional. Consistently uses the skill independently; this is the case even in complex cases.
- N/A.** Not enough information obtained at this time to provide an evaluation of competency.



# Evaluation of Intern Clinical Case Presentation

## College of William & Mary Counseling Center

Intern: \_\_\_\_\_

Date \_\_\_\_\_

Evaluated by: \_\_\_\_\_

The goal of this evaluation is provide feedback related to the interns' professional functioning as a Health Service Provider in the context of a college mental health agency. This evaluation is typically completed upon observing the intern's formal presentation of their work with a current individual client.

### Please rate trainee using the following 5-point scale:

- Level 1.** Inadequate Performance: The intern performs inadequately for a psychology intern in this area. The intern exhibits behaviors indicating lack of readiness for the work that is required in the internship setting. Requires significant and close supervision and monitoring of basic tasks in this area. Remediation plan required to provide the intern immediate augmented supervision or structured training opportunities.
- Level 2.** Limited knowledge and skill: The intern is moving towards acquiring ability in the competency being measured. Requires frequent supervision and close monitoring. Remediation may be considered or recommended or is available by intern request.
- Level 3.** Emerging Competence: The intern uses the skill being evaluated intermittently. The intern may still need some assistance from didactic training and/or supervisory activities to further develop the knowledge, awareness, and skill in the competency being evaluated.
- Level 4.** Competent: The intern performs at the level expected for entry level practice. Demonstrates the ability to consistently utilize the knowledge, awareness or skill with minimum structured assistance. The intern is generally self-sufficient; exhibits the ability to generalize knowledge and skills to new situations and is able to appropriately self-assess when further assistance/supervision is needed, such as in non-routine cases.
- Level 5.** Advanced Competence: The intern demonstrates mastery of the competency being evaluated. Routinely performs at or beyond levels expected for an early career professional. Consistently uses the skill independently; this is the case even in complex cases.
- N/A.** Not enough information obtained at this time to provide an evaluation of competency.

I. RESEARCH	<ol style="list-style-type: none"> <li>1. Demonstrates flexibility in therapeutic techniques, including the ability to use and adapt evidence-based approaches, based on assessment data, treatment goals, diversity and contextual variables, and evaluation of intervention effectiveness _____</li> <li>2. Demonstrates ability to use evidence based methodology to conduct suicide risk assessment _____</li> </ol>
II. ETHICAL AND LEGAL STANDARDS	<ol style="list-style-type: none"> <li>1. Demonstrates attention to ethical and legal concerns _____</li> </ol>
III. INDIVIDUAL AND CULTURAL DIVERSITY	<ol style="list-style-type: none"> <li>1. Demonstrates ability to integrate issues of identity into their case conceptualization, treatment planning, and interventions _____</li> <li>2. Demonstrates sensitivity of how self and client are shaped by individual and cultural diversity and the cultural context and sub-cultures in which they function _____</li> <li>3. Demonstrates sensitivity to issues of power and privilege as they interact with client _____</li> </ol>
IV. PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS	<ol style="list-style-type: none"> <li>1. Demonstrates integrity and a professional demeanor in the interaction with the client _____</li> <li>2. Demonstrates concern for the client's welfare _____</li> <li>3. Demonstrates ability to monitor their reactions and behaviors _____</li> <li>4. Demonstrates receptiveness to feedback _____</li> </ol>
V. COMMUNICATION AND INTERPERSONAL SKILLS	<ol style="list-style-type: none"> <li>1. Provides clear, succinct, and comprehensive written case presentation report _____</li> <li>2. Presents in a clear, succinct, and comprehensive manner which aids the audience in understanding the therapeutic work _____</li> <li>3. Demonstrates ability to present the case taking in consideration the allotted schedule, allowing time for questions and feedback _____</li> <li>4. Demonstrates effective use of technology and/or visual aids to provide understanding of the work being presented _____</li> </ol>
VI. ASSESSMENT	<ol style="list-style-type: none"> <li>1. Demonstrates understanding of human behavior within its context (e.g., family, social, societal and cultural). _____</li> <li>2. Demonstrates ability to select, use and interpret assessment data being sensitive to clients' cultural identity(ies) _____</li> </ol>



	<ol style="list-style-type: none"> <li>3. Demonstrates ability to collect relevant data using multiple sources and methods appropriate to the goals and questions of the assessment _____</li> <li>4. Demonstrates ability to accurately interpret assessment data according to professional standards and guidelines _____</li> <li>5. Demonstrates the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process. _____</li> <li>6. Demonstrates ability to make appropriate diagnostic impressions based on assessment data _____</li> <li>7. Demonstrates current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology. _____</li> <li>8. Demonstrates ability to use assessment data to inform case conceptualization, intervention, and recommendations _____</li> </ol>
<p><b>VII. INTERVENTION</b></p>	<ol style="list-style-type: none"> <li>1. Demonstrates appropriate level of rapport with client _____</li> <li>2. Demonstrates ability to gather data and to facilitate exploration _____</li> <li>3. Demonstrates ability to integrate data into meaningful conceptualizations _____</li> <li>4. Demonstrates ability to conceptualize according to an identified theoretical orientation _____</li> <li>5. Demonstrates ability to formulate treatment strategies that integrate theory, current evidence-based information, assessment findings, diversity and contextual variables _____</li> <li>6. Appropriately utilizes complementary approaches/services based on client need and diversity/cultural/contextual variables _____</li> <li>7. Demonstrates use of self as a therapeutic tool in treatment planning and intervention _____</li> <li>8. Helps client identify and understand appropriate goal for therapeutic work _____</li> <li>9. Demonstrates ability to handle theirs and their client's affect _____</li> <li>10. Demonstrates effective timing of interventions _____</li> <li>11. Demonstrates ability to expand own skills in order to benefit the client _____</li> </ol>
<p><b>IX. CONSULTATION AND INTERPROFESSIONAL/ INTERDISCIPLINARY SKILLS</b></p>	<ol style="list-style-type: none"> <li>1. Demonstrates willingness to consult with other professionals to provide the most effective treatment for the client _____</li> </ol>



# Evaluation of Intern Supervision Presentation

## College of William & Mary Counseling Center

Intern: \_\_\_\_\_

Date \_\_\_\_\_

Evaluated by: \_\_\_\_\_

The goal of this evaluation is to provide feedback related to the interns' presentation of their work in supervision of a practicum student. This presentation is typically conducted in Supervision of Supervision Seminar. The focus of this evaluation should be the intern's demonstration of their ability to a) provide an effective environment and intervention(s) according to the practicum student's developmental skill, training goals, and necessary areas of support b) monitor the quality of the professional services offered by this trainee.

### ***Please rate trainee using the following 5-point scale.***

- Level 1.** Inadequate Performance: The intern performs inadequately for a psychology intern in this area. The intern exhibits behaviors indicating lack of readiness for the work that is required in the internship setting. Requires significant and close supervision and monitoring of basic tasks in this area. Remediation plan required to provide the intern immediate augmented supervision or structured training opportunities.
- Level 2.** Limited knowledge and skill: The intern is moving towards acquiring ability in the competency being measured. Requires frequent supervision and close monitoring. Remediation may be considered or recommended or is available by intern request.
- Level 3.** Emerging Competence: The intern uses the skill being evaluated intermittently. The intern may still need some assistance from didactic training and/or supervisory activities to further develop the knowledge, awareness, and skill in the competency being evaluated.
- Level 4.** Competent: The intern performs at the level expected for entry level practice. Demonstrates the ability to consistently utilize the knowledge, awareness or skill with minimum structured assistance. The intern is generally self-sufficient; exhibits the ability to generalize knowledge and skills to new situations and is able to appropriately self-assess when further assistance/supervision is needed, such as in non-routine cases.
- Level 5.** Advanced Competence: The intern demonstrates mastery of the competency being evaluated. Routinely performs at or beyond levels expected for an early career professional. Consistently uses the skill independently; this is the case even in complex cases.
- N/A.** Not enough information obtained at this time to provide an evaluation of competency.

I. RESEARCH	1. Demonstrates ability to evaluate and apply supervision research in the supervision of practicum student _____
II. ETHICAL AND LEGAL STANDARDS	1. Demonstrates ability to manage ethical and/or legal issues relevant to supervisory work _____
III. INDIVIDUAL AND CULTURAL DIVERSITY	<ol style="list-style-type: none"> <li>1. Demonstrates cultural sensitivity in the supervisory relationship with their supervisees _____</li> <li>2. Demonstrates sensitivity to issues of power and privilege as they interact with supervisee _____</li> </ol>
IV. PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS	<ol style="list-style-type: none"> <li>1. Demonstrates integrity, commitment, and a professional demeanor in the supervisory role _____</li> <li>2. Demonstrates ability to monitor their reactions and behaviors as a supervisor _____</li> <li>3. Demonstrates receptiveness to feedback _____</li> </ol>
V. COMMUNICATION AND INTERPERSONAL SKILLS	<ol style="list-style-type: none"> <li>1. Provides clear, succinct, and comprehensive written presentation report _____</li> <li>2. Presents in a clear, succinct, and comprehensive manner which aids the audience in understanding the supervisory work _____</li> <li>3. Demonstrates ability to present taking in consideration the allotted schedule, allowing time for questions and feedback _____</li> <li>4. Demonstrates effective use of technology and/or visual aids to provide understanding of the work being presented _____</li> </ol>
VI. SUPERVISION	<ol style="list-style-type: none"> <li>1. Demonstrates ability to establish and maintain a safe and supportive supervisory relationship _____</li> <li>2. Demonstrates respect and offers support for their supervisee _____</li> <li>3. Assists trainee in identifying appropriate goal for supervision _____</li> <li>4. Demonstrates appropriate use of role as supervisor and supervisory task(s) _____</li> <li>5. Appropriately selects and utilizes a theoretical model of supervision _____</li> <li>6. Demonstrates clarity and theoretical soundness related to conceptualization of supervision work _____</li> <li>7. Supports trainee's use of self as a therapeutic tool _____</li> <li>8. Demonstrates awareness of self and utilizes this awareness to support trainee development _____</li> <li>9. Demonstrates ability to monitor their supervisee professional functioning and quality of services provided _____</li> </ol>



# Evaluation of Intern Outreach Presentation

## William and Mary Counseling Center

### College of William and Mary

Intern: \_\_\_\_\_

Observer: \_\_\_\_\_

Presentation Title: \_\_\_\_\_

Date of Presentation: \_\_\_\_\_ Location: \_\_\_\_\_

Audience/# of Participants \_\_\_\_\_

The goal of this evaluation is primarily that of stimulating feedback regarding the perceived status and progress of the intern being evaluated. As such, the ratings should be reflective of the expected developmental progress at the time of the evaluation; at the beginning of the year, interns are evaluated according to what the profession describes as “readiness to enter internship” and at the end of year based on the competencies expected for “entry level practice.” Given this framework, interns could make progress on any given aim/competency and receive the same score on two different evaluation periods considering what is developmentally expected at that point in the internship year. It is hoped that the written evaluation will promote meaningful discussion concerning specific areas of the trainee’s training, progress, and how skills can be acquired or improved.

A score of 1 or 2 on any given item should be accompanied by specific data or description in the narrative/comment section addressing why the intern is receiving such rating for that competency.

Passing Criteria: An average score of 4 is required on each of the overall nine professional competencies and a minimum score of 3 on any given item within each competency area by the last evaluation of the competency area during the internship.

#### **Please rate trainee using the following 5-point scale:**

- Level 1.** Inadequate Performance: The intern performs inadequately for a psychology intern in this area. The intern exhibits behaviors indicating lack of readiness for the work that is required in the internship setting. Requires significant and close supervision and monitoring of basic tasks in this area. Remediation plan required to provide the intern immediate augmented supervision or structured training opportunities.
- Level 2.** Limited knowledge and skill: The intern is moving towards acquiring ability in the competency being measured. Requires frequent supervision and close monitoring. Remediation may be considered or recommended or is available by intern request.
- Level 3.** Emerging Competence: The intern uses the skill being evaluated intermittently. The intern may still need some assistance from didactic training and/or supervisory activities to further develop the knowledge, awareness, and skill in the competency being evaluated.

**Level 4.** Competent: The intern performs at the level expected for entry level practice. Demonstrates the ability to consistently utilize the knowledge, awareness or skill with minimum structured assistance. The intern is generally self-sufficient; exhibits the ability to generalize knowledge and skills to new situations and is able to appropriately self-assess when further assistance/supervision is needed, such as in non-routine cases.

**Level 5.** Advanced Competence: The intern demonstrates mastery of the competency being evaluated. Routinely performs at or beyond levels expected for an early career professional. Consistently uses the skill independently; this is the case even in complex cases.

**N/A.** Not enough information obtained at this time to provide an evaluation of competency.

I. RESEARCH	<ol style="list-style-type: none"> <li>1. Demonstrates thorough literature review ____</li> <li>2. Demonstrates ability to include up to date research information about the content area ____</li> </ol>
II. ETHICAL AND LEGAL STANDARDS	<ol style="list-style-type: none"> <li>1. Demonstrates attention to ethical and legal concerns as relevant ____</li> </ol>
III. INDIVIDUAL AND CULTURAL DIVERSITY	<ol style="list-style-type: none"> <li>1. Presents in a manner that is inclusive and/or affirming of issues of diversity ____</li> </ol>
IV. PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS	<ol style="list-style-type: none"> <li>1. Demonstrates integrity and a professional demeanor during the presentation _____</li> <li>2. Demonstrates knowledge about the content area _____</li> <li>3. Demonstrates receptiveness to feedback _____</li> </ol>
V. COMMUNICATION AND INTERPERSONAL SKILLS	<ol style="list-style-type: none"> <li>1. Demonstrated consideration of needs of the target audience (academic calendar, student’s schedules, etc.) _____</li> <li>2. Developed an appropriate outline for the time allotted _____</li> <li>3. Developed a marketing plan for this presentation if necessary/indicated _____</li> <li>4. Demonstrated consideration of logistics (room size, AV needs, etc.) _____</li> <li>5. Provided an introduction to the program _____</li> <li>6. Facilitator was knowledgeable about the content area _____</li> <li>7. Material was presented in a clear, understandable manner _____</li> <li>8. Transitions between topics were managed in a smooth manner _____</li> <li>9. Engaged the audience in an effective manner (e.g. used interactive strategies, activities from different modalities) _____</li> <li>10. Facilitator was responsive to the needs of the audience throughout the presentation (e.g. answered questions effectively, handled disruptive participants) _____</li> <li>11. Demonstrated effective use of time allotted, including enough time for questions _____</li> <li>12. Handouts/worksheets given to the participants were useful _____</li> <li>13. Provided a closing summary of the program _____</li> <li>14. Provided accurate information about the Counseling Center _____</li> </ol>







## EVALUATION OF TEACHING IN SEMINAR

Intern: \_\_\_\_\_ Evaluator: \_\_\_\_\_ Date: \_\_\_\_\_

Presentation Title: \_\_\_\_\_

The goal of this evaluation form is primarily that of stimulating feedback regarding the perceived status and progress of the intern being rated in regards to teaching/presentation skills. As such, the ratings should be reflective of the expected developmental progress at the time of the evaluation. It is hoped that the written evaluation will promote meaningful discussion concerning specific areas of the trainee's training, progress, and the means by which skills can be acquired or improved.

### **Please rate trainee using the following 5-point scale:**

- Level 1.** Inadequate Performance: The intern performs inadequately for a psychology intern in this area. The intern exhibits behaviors indicating lack of readiness for the work that is required in the internship setting. Requires significant and close supervision and monitoring of basic tasks in this area. Remediation plan required to provide the intern immediate augmented supervision or structured training opportunities.
- Level 2.** Limited knowledge and skill: The intern is moving towards acquiring ability in the competency being measured. Requires frequent supervision and close monitoring. Remediation may be considered or recommended or is available by intern request.
- Level 3.** Emerging Competence: The intern uses the skill being evaluated intermittently. The intern may still need some assistance from didactic training and/or supervisory activities to further develop the knowledge, awareness, and skill in the competency being evaluated.
- Level 4.** Competent: The intern performs at the level expected for entry level practice. Demonstrates the ability to consistently utilize the knowledge, awareness or skill with minimum structured assistance. The intern is generally self-sufficient; exhibits the ability to generalize knowledge and skills to new situations and is able to appropriately self-assess when further assistance/supervision is needed, such as in non-routine cases.
- Level 5.** Advanced Competence: The intern demonstrates mastery of the competency being evaluated. Routinely performs at or beyond levels expected for an early career professional. Consistently uses the skill independently; this is the case even in complex cases.

N/A. Not enough information obtained at this time to provide an evaluation of competency.

You are asked to evaluate the intern's teaching skills considering the following area.

I. RESEARCH	1. Demonstrates thorough literature review ____ 2. Demonstrates ability to include up to date research information about the content area ____
II. ETHICAL AND LEGAL STANDARDS	1. Demonstrates attention to ethical and legal concerns as relevant____
III. INDIVIDUAL AND CULTURAL DIVERSITY	1. Presents in a manner that is inclusive and/or affirming of issues of diversity ____
IV. PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS	1. Demonstrates integrity and a professional demeanor during the presentation ____ 2. Demonstrates knowledge about the content area ____ 3. Demonstrates receptiveness to feedback ____
V. COMMUNICATION AND INTERPERSONAL SKILLS	1. Demonstrates consideration of needs of the target audience. ____ 2. Integrates the necessary information for a clear understanding of the topic____ 3. Presents in a clear, succinct, and comprehensive manner which aids the audience in understanding content area____ 4. Demonstrates ability to respond to the needs of the audience throughout the presentation and engages the audience in an effective manner ____ 5. Demonstrates ability to present the information taking in consideration the allotted schedule, allowing time for questions and feedback ____ 6. Demonstrates effective use of technology, handouts, and/or visual aids ____
VI. CONSULTATION AND INTERPROFESSIONAL/ INTERDISCIPLINARY SKILLS	1. Demonstrates willingness to consult with other professionals to present the most accurate information ____

**Overall Rating** \_\_\_\_\_

**COMMENTS including particular strengths and areas for further growth:**

---

---

---

---

---

---

---

# Evaluation of Intern Research Presentation

## College of William & Mary Counseling Center

Intern: \_\_\_\_\_

Date \_\_\_\_\_

Evaluated by: \_\_\_\_\_

The goal of this evaluation is provide feedback related to the interns' professional functioning as a consumer, contributor, and disseminator of research and evidence base of the field of psychology. This evaluation is typically completed upon observance of the intern's formal presentation of original research or a selected topic under review by them.

### Please rate trainee using the following 5-point scale:

- Level 1.** Inadequate Performance: The intern performs inadequately for a psychology intern in this area. The intern exhibits behaviors indicating lack of readiness for the work that is required in the internship setting. Requires significant and close supervision and monitoring of basic tasks in this area. Remediation plan required to provide the intern immediate augmented supervision or structured training opportunities.
- Level 2.** Limited knowledge and skill: The intern is moving towards acquiring ability in the competency being measured. Requires frequent supervision and close monitoring. Remediation may be considered or recommended or is available by intern request.
- Level 3.** Emerging Competence: The intern uses the skill being evaluated intermittently. The intern may still need some assistance from didactic training and/or supervisory activities to further develop the knowledge, awareness, and skill in the competency being evaluated.
- Level 4.** Competent: The intern performs at the level expected for entry level practice. Demonstrates the ability to consistently utilize the knowledge, awareness or skill with minimum structured assistance. The intern is generally self-sufficient; exhibits the ability to generalize knowledge and skills to new situations and is able to appropriately self-assess when further assistance/supervision is needed, such as in non-routine cases.
- Level 5.** Advanced Competence: The intern demonstrates mastery of the competency being evaluated. Routinely performs at or beyond levels expected for an early career professional. Consistently uses the skill independently; this is the case even in complex cases.
- N/A.** Not enough information obtained at this time to provide an evaluation of competency.

<p>I. RESEARCH</p>	<ol style="list-style-type: none"> <li>1. Demonstrates theoretical rationale for their selected research question or review approach _____</li> <li>2. Demonstrates a thorough understanding of the existing evidence base and literature in their area of focus _____</li> <li>3. Demonstrates appropriate use of research design and methodology _____</li> <li>4. Identifies appropriate directions for future research based on current findings or status of evidence base _____</li> </ol>
<p>II. ETHICAL AND LEGAL STANDARDS</p>	<ol style="list-style-type: none"> <li>1. Demonstrates attention to legal and ethical issues related to the conduct of research _____</li> </ol>
<p>III. INDIVIDUAL AND CULTURAL DIVERSITY</p>	<ol style="list-style-type: none"> <li>1. Demonstrates knowledge, skills, and competence to attend to issues of diversity and contextual variables in the design, methodology, and discussion of research findings _____</li> </ol>
<p>IV. PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS</p>	<ol style="list-style-type: none"> <li>1. Strives to promote accuracy/Demonstrates integrity regarding the science of psychology _____</li> <li>2. Demonstrates awareness of their professional and scientific responsibility to society and the communities potentially impacted by the research study _____</li> <li>3. Demonstrates receptiveness to feedback _____</li> </ol>
<p>V. COMMUNICATION AND INTERPERSONAL SKILLS</p>	<ol style="list-style-type: none"> <li>1. Presents in a clear, succinct, and comprehensive manner which aids the audience in understanding the study _____</li> <li>2. Communicates research findings with clarity while identifying any relevant limitations to conclusions and implications of practical use of findings _____</li> <li>3. Demonstrates ability to present the study taking in consideration the allotted schedule, allowing time for questions and feedback _____</li> <li>4. Demonstrates effective use of technology and/or visual aids to provide understanding of the research being presented _____</li> </ol>

**Overall Rating** \_\_\_\_\_

**COMMENTS including particular strengths and areas for further development:**

---



---



---



---



---

## ***EVALUATION OF SUPERVISION***

Name of Supervisor: \_\_\_\_\_

Name of Supervisee: \_\_\_\_\_

Period Covered: \_\_\_\_\_ to \_\_\_\_\_

**Rating Scale: 1 = Strongly Disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly Agree**

1. \_\_\_\_\_ Concrete feedback was provided.
2. \_\_\_\_\_ Feedback and evaluation were based on adequate observation of my counseling.
3. \_\_\_\_\_ Alternative ways to handle specific client situations were provided.
4. \_\_\_\_\_ Adequate time was allocated for supervision.
5. \_\_\_\_\_ My supervisor was prompt for supervision sessions.
6. \_\_\_\_\_ Questions and suggestions regarding clients were helpful in conceptualizing cases and developing treatment plans.
7. \_\_\_\_\_ Treatment models were discussed that were different from my supervisor's.
8. \_\_\_\_\_ I was provided with helpful suggestions when at an impasse with a client.
9. \_\_\_\_\_ Concern was shown for me as a person.
10. \_\_\_\_\_ I was provided feedback about personal behaviors and characteristics that might aid or interfere with my effectiveness.
11. \_\_\_\_\_ I was treated with respect.
12. \_\_\_\_\_ Disagreements with my supervisor were supported and discussed openly.
13. \_\_\_\_\_ My feelings of inadequacy generated by cases were explored.
14. \_\_\_\_\_ The interaction between my supervisor and me was used as a medium for understanding my work with clients.
15. \_\_\_\_\_ My supervisor acknowledged his/her limitations.
16. \_\_\_\_\_ Assistance was given in identifying my personal strengths which increased my confidence as a helping professional.
17. \_\_\_\_\_ My supervisor was available to give help outside of our regular supervision time.

18. \_\_\_\_ My ideas and concerns were respected.
19. \_\_\_\_ Personal goals were established and periodically renegotiated with my supervisor.
20. \_\_\_\_ Assistance was given in understanding the implications of counseling approaches I used.
21. \_\_\_\_ Discussion of problems I encountered in the training setting was facilitated by my supervisor.
22. \_\_\_\_ Supervision emphasized verbal and nonverbal behavior of my clients and myself.
23. \_\_\_\_ Supervision helped me define and maintain ethical behavior in counseling and case management.
24. \_\_\_\_ Supervision focused on both content (e.g. client concerns, counseling interventions) and affect (e.g. client's and therapist's emotional reactions).
25. \_\_\_\_ Assistance was given in identifying important case data for planning goals and strategies with my clients.
26. \_\_\_\_ Resource information was provided when I requested it.
27. \_\_\_\_ Supervision helped me develop increased skill in critiquing and gaining insight from my counseling tapes.
28. \_\_\_\_ The criteria for evaluation was explained clearly by my supervisor.
29. \_\_\_\_ The criteria for evaluation was applied fairly in evaluating my counseling performance.
30. \_\_\_\_ Supervisor attended to individual and cultural diversity issues of clients.
31. \_\_\_\_ Supervision attended to my individual and cultural diversity as it relates to clinical work.
32. \_\_\_\_ Overall rating of the supervision experience.

***Other comments:***

\_\_\_\_\_  
Supervisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisee

\_\_\_\_\_  
Date



**Seminar Evaluation**  
**(SEMINAR- e.g. supervision seminar, assessment seminar, etc)**  
**College of William and Mary Counseling Center**  
**Pre-doctoral Internship**

Title: \_\_\_\_\_

Presenter(s): \_\_\_\_\_

Date: \_\_\_\_\_

*Please use the scale below to answer the following questions.*

Strongly Agree	Agree	Unsure	Disagree	Strongly Disagree
5	4	3	2	1

- \_\_\_1. The topic was relevant to my training and thoroughly covered.
- \_\_\_2. The presentation was congruent with the objectives of the clinical/professional issues seminar.
- \_\_\_3. There was enough time allotted to answer questions.
- \_\_\_4. The presenter(s) was/were knowledgeable.
- \_\_\_5. The presenter(s) spoke in a clear and understandable manner.
- \_\_\_6. The presentation was organized in a logical sequence.
- \_\_\_7. The handouts/audio-visual aids were helpful.
- \_\_\_8. This presentation has improved my understanding of the topic.
- \_\_\_9. I have a better understanding of how I can use what I learned in my counseling center work.
- \_\_\_10. The presentation included information based on current literature, theory and/or research.

The most helpful part of the program was:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The least helpful part of the program was:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Suggestions:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Self-Assessment: End of Internship

William and Mary Counseling Center

College of William and Mary

Intern: \_\_\_\_\_

Date: \_\_\_\_\_

Please use this evaluation form to assess your skill in the following aims and competencies. The goal of this self-assessment is to help you engage in self-reflection, appreciate your growth during the internship year, and contemplate your strengths and areas of further growth.

**Please rate trainee using the following 5-point scale:**

- Level 1.** Inadequate Performance: The intern performs inadequately for a psychology intern in this area. The intern exhibits behaviors indicating lack of readiness for the work that is required in the internship setting. Requires significant and close supervision and monitoring of basic tasks in this area. Remediation plan required to provide the intern immediate augmented supervision or structured training opportunities.
- Level 2.** Limited knowledge and skill: The intern is moving towards acquiring ability in the competency being measured. Requires frequent supervision and close monitoring. Remediation may be considered or recommended or is available by intern request.
- Level 3.** Emerging Competence: The intern uses the skill being evaluated intermittently. The intern may still need some assistance from didactic training and/or supervisory activities to further develop the knowledge, awareness, and skill in the competency being evaluated.
- Level 4.** Competent: The intern performs at the level expected for entry level practice. Demonstrates the ability to consistently utilize the knowledge, awareness or skill with minimum structured assistance. The intern is generally self-sufficient; exhibits the ability to generalize knowledge and skills to new situations and is able to appropriately self-assess when further assistance/supervision is needed, such as in non-routine cases.
- Level 5.** Advanced Competence: The intern demonstrates mastery of the competency being evaluated. Routinely performs at or beyond levels expected for an early career professional. Consistently uses the skill independently; this is the case even in complex cases.
- N/A.** Not enough information obtained at this time to provide an evaluation of competency.

## **I. RESEARCH**

### **Demonstrates knowledge, skills, and competence in Research**

Rating: \_\_\_\_\_

1. Demonstrates knowledge, skills, and competence to critically evaluate research according to methods, procedures, practices, and attention to diversity and contextual variables \_\_\_\_\_
2. Demonstrates knowledge, skills, and competence to use existing knowledge in clinical practice and other professional activities, taking into consideration issues of diversity \_\_\_\_\_
3. Demonstrates ability to locate, appraise, and assimilate evidence from scientific studies on college mental health and local clinical data (trends in mental health issues in college populations, results from research comparing W&M students health related issues/needs to those of students in other universities, etc.) \_\_\_\_\_
4. Appropriately utilizes scholarly work and applies scientific knowledge in the different roles assumed at the agency \_\_\_\_\_
5. Appropriately disseminates research information in presentations (case presentation, supervision presentation, research presentation), outreach events, seminars, consultation, teaching in practicum student seminar, etc.

#### **Summary Comments:**

## **II. ETHICAL AND LEGAL STANDARDS**

### **Demonstrates knowledge, skills, and competence in Ethical and Legal Standards**

Rating: \_\_\_\_\_

1. Demonstrates ability to monitor their behavior to conduct themselves following the APA Ethical Principles and Code of Conduct as well as APA Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change of the American Psychological Association \_\_\_\_\_
2. Demonstrates knowledge and ability to follow the Virginia Law regarding the ethical practice of Psychologists \_\_\_\_\_

3. Demonstrates knowledge regarding the relevant laws, regulations, rules, policies, standards and guidelines governing health service psychology \_\_\_\_\_
4. Understands and follows the Center's policies and procedures \_\_\_\_\_
5. Recognized ethical dilemmas and apply ethical decision-making processes \_\_\_\_\_
6. Appropriately seeks consultation when ethical or legal issues require resolution
7. Behaves in an ethical manner in all professional activities \_\_\_\_\_
8. Maintains accurate documentation records \_\_\_\_\_

**Summary Comments:**

### **III. INDIVIDUAL AND CULTURAL DIVERSITY**

**Demonstrates knowledge, skills, and competence as it relates to addressing diversity in all professional activities**

Rating: \_\_\_\_\_

1. Incorporates theoretical and research knowledge on multiculturalism \_\_\_\_\_
2. Demonstrates sensitivity of how self and others are shaped by individual and cultural diversity and the cultural context and sub-cultures in which people function.
3. Integrates knowledge of self and others as cultural beings across professional roles and functions \_\_\_\_\_
4. Demonstrates an understanding of how their own personal/cultural history, attitudes, and biases affect how they understand and interact with people different from themselves \_\_\_\_
5. Demonstrates awareness of own and others' multiple identities and the intersection of these identities \_\_\_\_\_
6. Demonstrates sensitivity to issues of power and privilege as they interact with others \_\_\_\_\_
7. Demonstrates an understanding of the manner in which people of diverse cultures and belief systems perceive mental health issues and interventions \_\_\_\_\_
8. Understands oppression and discrimination in society and other environments including university settings, and understands how these environments are microcosms for the larger society \_\_\_\_\_

**Summary Comments:**

**IV. PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS (Sections A-B)**  
**Demonstrates the development of a professional identity congruent with Health Service Psychology**  
Rating: \_\_\_\_\_

**A: Behaves in ways that reflect the values and attitudes of Health Service psychology.**  
Rating: \_\_\_\_\_

1. Demonstrates integrity, accountability, a professional demeanor, eagerness/readiness to learn, and concern for others, across the different roles assumed at the agency \_\_\_\_\_
2. Engages in self-reflection regarding personal and professional functioning \_\_\_\_\_
3. Demonstrates ability to monitor their reactions and behaviors \_\_\_\_\_
4. Demonstrates ability to recognize areas of strength and areas of growth \_\_\_\_\_
5. Seeks the means to ameliorate the impact of potential problems on the delivery of services, including engagement in activities to maintain and improve performance, well-being, and professional effectiveness \_\_\_\_\_
6. Uses diverse resources for professional development including staff resources (supervision and consultation), workshops, conferences, and/or professional organizations \_\_\_\_\_
7. Responds professionally in increasingly complex situations with a greater degree of independence as the internship year progresses \_\_\_\_\_

**Summary Comments:**

**B: Demonstrates ability to effectively use supervision**  
Rating: \_\_\_\_\_

1. Demonstrates effective preparation for supervision \_\_\_\_\_
2. Demonstrates receptiveness to new ideas and approaches \_\_\_\_\_
3. Actively seeks and demonstrates openness to/in supervision \_\_\_\_\_
4. Demonstrates receptiveness to feedback about counseling deficits/strengths \_\_\_\_\_
5. Demonstrates effective use of what is learned in future sessions \_\_\_\_\_

6. Demonstrates openness to looking at own issues \_\_\_\_\_
7. Demonstrates awareness of multicultural issues within the supervisory relationship \_\_\_\_\_
8. Demonstrates ability to seek supervisory help resulting from a self-perceived need \_\_\_\_\_

**Summary Comments:**

## **V. COMMUNICATION AND INTERPERSONAL SKILLS**

Rating: \_\_\_\_\_

1. Develops and maintains effective relationships with a wide range of individuals including colleagues, peers, supervisors, supervisees, other staff/professionals, parents, communities, organizations, and those receiving professional services, \_\_\_\_\_
2. Produces and comprehends oral, nonverbal, and written communications, demonstrating knowledge and understanding of professional language and concepts \_\_\_\_\_
3. Demonstrates effective communication and interpersonal skills, understanding the impact of their interpersonal and communication practices \_\_\_\_\_
4. Demonstrates effective communication and interpersonal skills being sensitive to issues of power and privilege \_\_\_\_\_
5. Demonstrates ability to manage difficult communication well \_\_\_\_\_
6. Appropriately manages emotional reactions while communicating/interacting with others \_\_\_\_\_

**Summary Comments:**

## **VI. ASSESSMENT**

**Demonstrates competence in conducting intake and objective assessment consistent with the scope of Health Service Psychology.**

Rating: \_\_\_\_\_

1. Demonstrates ability to conduct initial assessments, write comprehensive intake reports, and make appropriate treatment recommendations and referrals based on client's clinical needs, diversity characteristics, and contextual variables \_\_\_\_\_
2. Considers the biological, cognitive, behavioral, developmental, and sociocultural components of health and illness in initial and other assessments \_\_\_\_\_
3. Demonstrates ability to appropriately select assessment instruments and interpret test results based on clients' clinical needs and diversity characteristics \_\_\_\_\_
4. Demonstrates ability to collect relevant data using multiple sources and methods appropriate to the goals and questions of the assessment \_\_\_\_\_

5. Demonstrates ability to accurately interpret assessment data according to professional standards and guidelines \_\_\_\_\_
6. Demonstrates ability to use assessment data to inform case conceptualization, intervention, and recommendations \_\_\_\_\_
7. Demonstrates ability to use assessment instruments and interpret assessment data being sensitive to clients' cultural identity(ies) \_\_\_\_\_
8. Demonstrates ability to integrate assessment data into comprehensive, culturally sensitive reports \_\_\_\_\_
9. Accurately, effectively, timely, and sensitively communicates (orally and/or in writing) the results and implications of the assessment \_\_\_\_\_

**Summary Comments:**

**VII. INTERVENTION (Sections A-D)**

**Demonstrates knowledge and skill in implementing interventions for prevention and treatment consistent with the scope of Health Service Psychology. The level of intervention includes those directed at an individual, a group, an organization, a community, or other systems level**

Overall Rating: \_\_\_\_\_

**A: Demonstrates ability to provide effective services to a wide range of individual clients with diverse presenting concerns**

Rating: \_\_\_\_\_

1. Demonstrates ability to establish and maintain an effective therapeutic relationship with diverse clients presenting with different type of concerns. \_\_\_\_\_
2. Demonstrates ability to gather data and to facilitate exploration \_\_\_\_\_
3. Demonstrates ability to integrate data into meaningful conceptualizations \_\_\_\_\_
4. Demonstrates ability to conceptualize using different theoretical orientations \_\_\_\_\_
5. Demonstrates ability to formulate treatment strategies that integrate theory, current scientific literature, assessment findings, diversity and contextual variables \_\_\_\_\_
6. Demonstrates sensitivity, awareness, and skills regarding diversity issues in clinical work \_\_\_\_\_
7. Demonstrates ability to integrate diversity issues into their case conceptualization, treatment planning, and interventions \_\_\_\_\_
8. Appropriately utilizes complementary approaches/services based on client need and diversity/cultural/contextual variables \_\_\_\_\_
9. Utilizes multicultural guidelines to inform all aspects of the intervention process \_\_\_\_\_
10. Demonstrates ability to handle theirs and their client's affect \_\_\_\_\_
11. Demonstrates ability to use the self as a therapeutic tool \_\_\_\_\_
12. Demonstrates effective timing of interventions with their individual clients \_\_\_\_\_
13. Demonstrates ability to use Empirically-Validated treatments \_\_\_\_\_

14. Demonstrates flexibility in therapeutic techniques, including the ability to adapt evidence-based approaches, based on assessment data, treatment goals, diversity and contextual variables, and evaluation of intervention effectiveness \_\_\_\_\_
15. Demonstrates ability to accurately diagnose clients \_\_\_\_\_
16. Demonstrates ability to handle termination issues \_\_\_\_\_
17. Maintains accurate documentation records \_\_\_\_\_

**Summary Comments:**

**B: Demonstrates ability to assess crisis situations and provide effective interventions**

Rating \_\_\_\_\_

1. Demonstrates ability to assess the intensity/magnitude of clients' crisis situation \_\_\_\_\_
2. Demonstrates ability to thoroughly assess suicidality; this assessment is informed by the scientific literature in regards to safety assessment \_\_\_\_\_
3. Demonstrates ability to use appropriate interventions in crisis situations according to best practices and the scientific literature \_\_\_\_\_
4. Demonstrates ability to adapt intervention strategies evaluating effectiveness, issues of diversity, and contextual variables \_\_\_\_\_
5. Demonstrates ability to handle their affect in response to the client's affect or the nature of the crisis presented \_\_\_\_\_
6. Demonstrates ability to appropriately consult while assessing and responding to crises \_\_\_\_\_
7. Maintains accurate documentation records \_\_\_\_\_

**Summary Comments:**

**C: Demonstrates knowledge and skill in group therapy work**

Rating: \_\_\_\_\_

1. Demonstrates ability to refer appropriate clients to groups \_\_\_\_\_
2. Demonstrates effective use of pre-group interviews \_\_\_\_\_
3. Builds rapport and cohesion in group work \_\_\_\_\_
4. Demonstrates ability to integrate data into meaningful conceptualizations for group members and for the group as a whole \_\_\_\_\_



5. Demonstrates ability to integrate theory and practice of group work \_\_\_\_\_
6. Demonstrates effective timing of interventions according to the group stage \_\_\_\_\_
7. Demonstrates ability to integrate diversity issues into their conceptualization, treatment planning, and interventions in group \_\_\_\_\_
8. Demonstrates ability to formulate treatment strategies based on group dynamics \_\_\_\_\_
9. Implements interventions informed by current group therapy scientific literature/ evidence-based treatment \_\_\_\_\_
10. Demonstrates collaboration and effective communication with group co-leader \_\_\_\_\_
11. Demonstrates receptiveness to feedback about group counseling skills and ability to implement feedback and new ideas into group therapy practice \_\_\_\_\_
12. Demonstrates ability to handle their own and the group's affect \_\_\_\_\_
13. Maintains accurate documentation records \_\_\_\_\_
14. Demonstrates ability to handle termination issues of group work \_\_\_\_\_

**Summary Comments:**

**D: Demonstrates ability to plan and conduct outreach programs that are culturally and developmentally appropriate**

Rating: \_\_\_\_\_

1. Demonstrates consideration of needs of the target audience \_\_\_\_\_
2. Demonstrates ability to engage the audience in an effective manner \_\_\_\_\_
3. Demonstrates knowledge about the content area \_\_\_\_\_
4. Demonstrates ability to include up to date research information about the content area \_\_\_\_\_
5. Demonstrates sensitivity, awareness, and skills regarding diversity in their provision of outreach services \_\_\_\_\_
6. Presents in a manner that is inclusive and/or affirming of issues of diversity \_\_\_\_\_
7. Demonstrates flexibility including the ability to adapt the presentation in response to the needs of the audience \_\_\_\_\_

**Summary Comments:**

**VIII. CLINICAL SUPERVISION**

**Demonstrates ability to establish a supervisory relationship that has the purpose of enhancing the professional functioning of a practicum student and monitoring the quality of the professional services offered by this trainee**

Rating: \_\_\_\_\_

1. Demonstrates knowledge of supervision models and practices \_\_\_\_\_
2. Applies knowledge scientific/scholarly work in the supervision of a practicum trainee \_\_\_\_\_
3. Demonstrates commitment to supervision \_\_\_\_\_
4. Demonstrates ability to establish and maintain a safe and supportive supervisory relationship \_\_\_\_\_
5. Demonstrates respect and offers support for their supervisee \_\_\_\_\_
6. Demonstrates ability to monitor their supervisee professional functioning and quality of services provided \_\_\_\_\_
7. Demonstrates ability to offer ongoing/formative feedback and suggestions about their supervisees' clinical work \_\_\_\_\_
8. Assists with case conceptualizations \_\_\_\_\_
9. Demonstrates ability to provide effective formative and summative feedback through mid and end of semester evaluations of their supervisees' professional functioning \_\_\_\_\_
10. Demonstrates cultural sensitivity in the supervisory relationship with their supervisees \_\_\_\_\_

**Summary Comments:**

**IX. CONSULTATION AND INTERPROFESSIONAL/INTERDISCIPLINARY SKILLS**  
**Collaborates with others to address a problem, seek or share knowledge, or promote effectiveness in professional activities.**

Rating: \_\_\_\_\_

1. Demonstrates knowledge and respect for the roles and perspectives of other professions \_\_\_\_\_
2. Applies knowledge about other professions in consultation with other health care professionals, inter-professional groups, and/or systems \_\_\_\_\_
3. Appropriately consults with peers/other trainees and senior staff \_\_\_\_\_
4. Demonstrates ability to effectively communicate and consult with parents/family members while respecting client's confidentiality/scope of signed releases of information \_\_\_\_\_
5. Demonstrates sensitivity, awareness, and skills regarding diversity in their provision of consultation services \_\_\_\_\_



**COLLEGE OF WILLIAM & MARY COUNSELING CENTER**  
**INTERN EVALUATION OF THE TRAINING DIRECTOR**

Please rate the following statements using the scale below:

- 5 = Excellent** – training director performed above and beyond expectations.
- 4 = Very Good**
- 3 = Average** – training director performed at an adequate and expected level.
- 2 = Below Average**
- 1 = Unacceptable** – training director performed insufficiently
- NA**

**The Training Director**

1. Was responsive to the needs of the intern group.	1	2	3	4	5
2. Was available/approachable	1	2	3	4	5
3. Was supportive/encouraging	1	2	3	4	5
4. Was responsive to my needs.	1	2	3	4	5
5. Established a trusting environment	1	2	3	4	5
6. Was clear in communicating expectations and responsibilities of interns.	1	2	3	4	5
7. Presented materials in a timely fashion.	1	2	3	4	5
8. Is knowledgeable about clinical issues	1	2	3	4	5
9. Is knowledgeable about training issues	1	2	3	4	5
10. Is respectful of diversity/ individual differences	1	2	3	4	5
11. Was skilled in dealing with conflicts and disagreements within the intern cohort.	1	2	3	4	5
12. Was skilled in offering me constructive feedback.	1	2	3	4	5
13. Was flexible and open to feedback.	1	2	3	4	5
14. Effectively advocated for trainees/training needs	1	2	3	4	5



# COLLEGE OF WILLIAM & MARY COUNSELING CENTER INTERN EVALUATION OF INTERNSHIP EXPERIENCE

Date \_\_\_\_\_

We would like your feedback on your internship experience. Please review the main goals and objectives of the internship as described below and provide your feedback on A. the degree to which the training opportunity was available, B. the degree you felt the objectives (under each goal) were met for you, C. your comments about the strengths and limitations of the programs and staff relating to each objective under each goal. Please consider the specific competencies under each objective in your rating. Please feel free to use the space for comments to add specific feedback.

Note: Your comments will be used by the CC staff to evaluate the training program. They may be used in agency reports as well as in the self-study for APA accreditation.

**Please use the following scale for your rating:**

*5=excellent*

*4=good*

*3=adequate*

*2=poor*

*1=unsatisfactory*

## GOALS OF THE INTERNSHIP

### I. RESEARCH

1. Demonstrates knowledge, skills, and competence to critically evaluate research according to methods, procedures, practices, and attention to diversity and contextual variables
2. Demonstrates knowledge, skills, and competence to use existing knowledge in clinical practice and other professional activities, taking into consideration issues of diversity
3. Demonstrates ability to locate, appraise, and assimilate scientific evidence on college mental health and local clinical data (trends in mental health issues in college populations, results from research comparing W&M students health related issues/needs to those of students in other universities, etc.)

- 4. Appropriately utilizes scholarly work and applies existing evidence in the different roles assumed at the agency
- 5. Appropriately disseminates research information in presentations (case presentation, supervision presentation, research presentation), outreach events, seminars, consultation, teaching in practicum student seminar, etc.

A. Degree training opportunities were available to meet this objective 5      4      3      2      1

Comments:

---

---

---

---

---

---

---

---

---

---

---

B. The degree objective was met for you 5      4      3      2      1

Comments:

---

---

---

---

---

---

---

---

---

---

---

C. Strengths and limitations. The quality of the training in meeting this objective was 5      4      3      2      1

Comments:

---

---

---

---

---

---

---

---

---

---

---

**II. ETHICAL AND LEGAL STANDARDS**  
**Demonstrates knowledge, skills, and competence in Ethical and Legal Standards**

1. Demonstrates ability to monitor their behavior to conduct themselves following the APA Ethical Principles and Code of Conduct as well as APA Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change of the American Psychological Association
2. Demonstrates knowledge and ability to follow the Virginia Law regarding the ethical practice of Psychologists
3. Demonstrates knowledge regarding the relevant laws, regulations, rules, policies, standards and guidelines governing health service psychology
4. Understands and follows the Center’s policies and procedures
5. Recognized ethical dilemmas and apply ethical decision-making processes
6. Appropriately seeks consultation when ethical or legal issues require resolution
7. Behaves in an ethical manner in all professional activities
8. Maintains accurate documentation records

A. Degree training opportunities were available to meet this objective                    5           4           3           2           1

Comments:

---

---

---

---

---

---

---

---

---

B. The degree objective was met for you                    5           4           3           2           1

Comments:

---

---

---

---



---

---

---

---

C. Strengths and limitations. The quality of the training in meeting this objective was                    5           4           3           2           1

Comments:

---

---

---

---

---

---

---

---

**III. INDIVIDUAL AND CULTURAL DIVERSITY**  
**Demonstrates knowledge, skills, and competence as it relates to addressing diversity in all professional activities**

1. Incorporates theoretical and research knowledge on multiculturalism
2. Demonstrates sensitivity of how self and others are shaped by individual and cultural diversity and the cultural context and sub-cultures in which people function.
3. Integrates knowledge of self and others as cultural beings across professional roles and functions
4. Demonstrates an understanding of how their own personal/cultural history, attitudes, and biases affect how they understand and interact with people different from themselves
5. Demonstrates awareness of own and others' multiple identities and the intersection of these identities
6. Demonstrates sensitivity to issues of power and privilege as they interact with others
7. Demonstrates an understanding of the manner in which people of diverse cultures and belief systems perceive mental health issues and interventions
8. Understands oppression and discrimination in society and other environments including university settings, and understands how these environments are microcosms for the larger society

A. Degree training opportunities were available to meet this objective                    5           4           3           2           1

Comments:

---

---

---

---

---

---

---

---

---

---

B. The degree objective was met for you                    5           4           3           2           1

Comments:

---

---

---

---

---

---

---

---

---

---

C. Strengths and limitations. The quality of  
the training in meeting this objective was                    5           4           3           2           1

Comments:

---

---

---

---

---

---

---

---

---

---

**IV. PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS (Sections A-B)  
Demonstrates the development of a professional identity congruent with  
Health Service Psychology**



---

---

---

---

C. Strengths and limitations. The quality of the training in meeting this objective was                    5           4           3           2           1

Comments:

---

---

---

---

---

---

---

---

<b>B:     <u>Demonstrates ability to effectively use supervision</u></b>
--

1. Demonstrates effective preparation for supervision
2. Demonstrates receptiveness to new ideas and approaches
3. Actively seeks and demonstrates openness to/in supervision
4. Demonstrates receptiveness to feedback about professional deficits/strengths
5. Demonstrates effective use of what is learned in future sessions
6. Demonstrates openness to looking at own issues
7. Demonstrates awareness of multicultural issues within the supervisory relationship
8. Demonstrates ability to seek supervisory help resulting from a self-perceived need

A. Degree training opportunities were available to meet this objective                    5           4           3           2           1

Comments:

---

---

---

---

---

---



---



---



---

B. The degree objective was met for you                      5            4            3            2            1

Comments:

---



---



---



---



---



---



---



---

C. Strengths and limitations. The quality of the training in meeting this objective was                      5            4            3            2            1

Comments:

---



---



---



---



---



---



---



---

**V. COMMUNICATION AND INTERPERSONAL SKILLS**

1. Develops and maintains effective relationships with a wide range of individuals including colleagues, peers, supervisors, supervisees, other staff/professionals, parents, communities, organizations, and those receiving professional services,
2. Produces and comprehends oral, nonverbal, and written communications, demonstrating knowledge and understanding of professional language and concepts
3. Demonstrates effective communication and interpersonal skills, understanding the impact of their interpersonal and communication practices
4. Demonstrates effective communication and interpersonal skills being sensitive to issues of power and privilege

- 5. Demonstrates ability to manage difficult communication well
- 6. Appropriately manages emotional reactions while communicating/interacting with others

A. Degree training opportunities were available to meet this objective 5      4      3      2      1

Comments:

---

---

---

---

---

---

---

---

---

---

B. The degree objective was met for you 5      4      3      2      1

Comments:

---

---

---

---

---

---

---

---

---

---

C. Strengths and limitations. The quality of the training in meeting this objective was 5      4      3      2      1

Comments:

---

---

---

---

---

---

---

---

---

---



---

---

---

---

---

---

C. Strengths and limitations. The quality of the training in meeting this objective was

5	4	3	2	1
---	---	---	---	---

Comments:

---

---

---

---

---

---

---

---

**VII. INTERVENTION (Sections A-D)**

**Demonstrates knowledge and skill in implementing interventions for prevention and treatment consistent with the scope of Health Service Psychology. The level of intervention includes those directed at an individual, a group, an organization, a community, or other systems level**

**A: Demonstrates ability to provide effective services to a wide range of individual clients with diverse presenting concerns**

1. Demonstrates ability to establish and maintain an effective therapeutic relationship with diverse clients presenting with different type of concerns.
2. Demonstrates ability to gather data and to facilitate exploration
3. Demonstrates ability to integrate data into meaningful conceptualizations
4. Demonstrates ability to conceptualize using different theoretical orientations
5. Demonstrates ability to formulate treatment strategies that integrate theory, current evidence-based information, assessment findings, diversity and contextual variables
6. Demonstrates sensitivity, awareness, and skills regarding diversity issues in clinical work
7. Demonstrates ability to integrate issues of identity into their case conceptualization, treatment planning, and interventions





Comments:

---

---

---

---

---

---

---

---

<b>B: Demonstrates ability to assess <u>crisis</u> situations and provide effective interventions</b>
---

1. Demonstrates ability to assess the intensity/magnitude of clients' crisis situation
2. Demonstrates ability to use evidence-based methodology to conduct suicide risk assessment
3. Demonstrates ability to use appropriate interventions in crisis situations according to best practices and evidence-based information
4. Demonstrates ability to adapt intervention strategies evaluating effectiveness, issues of diversity, and contextual variables
5. Demonstrates ability to handle their affect in response to the client's affect or the nature of the crisis presented
6. Demonstrates ability to appropriately consult while assessing and responding to crises
7. Maintains accurate documentation records

A. Degree training opportunities were available to meet this objective

5      4      3      2      1

Comments:

---

---

---

---

---

---

---

---

B. The degree objective was met for you 5 4 3 2 1

Comments:

Horizontal lines for writing comments.

C. Strengths and limitations. The quality of the training in meeting this objective was 5 4 3 2 1

Comments:

Horizontal lines for writing comments.

**C: Demonstrates knowledge and skill in group therapy work**

- 1. Demonstrates ability to refer appropriate clients to groups
2. Demonstrates effective use of pre-group interviews
3. Builds rapport and cohesion in group work
4. Demonstrates ability to integrate data into meaningful conceptualizations for group members and for the group as a whole
5. Demonstrates ability to integrate theory and practice of group work
6. Demonstrates effective timing of interventions according to the group stage
7. Demonstrates ability to integrate diversity issues into their conceptualization, treatment planning, and interventions in group
8. Demonstrates ability to formulate treatment strategies based on group dynamics
9. Implements interventions informed by current group therapy scientific literature/evidence-based treatment
10. Demonstrates collaboration and effective communication with group co-leader



---

---

**D: Demonstrates ability to plan and conduct outreach programs that are culturally and developmentally appropriate**

1. Demonstrates consideration of needs of the target audience
2. Demonstrates ability to engage the audience in an effective manner
3. Demonstrates knowledge about the content area
4. Demonstrates ability to include up to date research information about the content area
5. Presents in a manner that is inclusive and/or affirming of issues of diversity
6. Demonstrates flexibility including the ability to adapt the presentation in response to the needs of the audience

A. Degree training opportunities were available to meet this objective

5	4	3	2	1
---	---	---	---	---

Comments:

---

---

---

---

---

---

---

---

---

---

B. The degree objective was met for you

5	4	3	2	1
---	---	---	---	---

Comments:

---

---

---

---

---

---

---

---

---

---

C. Strengths and limitations. The quality of the training in meeting this objective was

5	4	3	2	1
---	---	---	---	---

Comments:

---

---

---

---

---

---

---

---

**VIII. CLINICAL SUPERVISION**

**Demonstrates ability to establish a supervisory relationship that has the purpose of enhancing the professional functioning of a practicum student and monitoring the quality of the professional services offered by this trainee**

1. Demonstrates knowledge of supervision models and practices
2. Applies knowledge scientific/scholarly work in the supervision of a practicum trainee
3. Demonstrates commitment to supervision
4. Demonstrates ability to establish and maintain a safe and supportive supervisory relationship
5. Demonstrates respect and offers support for their supervisee
6. Demonstrates sensitivity to issues of power/privilege
7. Demonstrates ability to monitor their supervisee professional functioning and quality of services provided
8. Demonstrates ability to offer ongoing/formative feedback and suggestions about their supervisees' clinical work
9. Provides support for the development of case conceptualizations
10. Demonstrates ability to provide effective formative and summative feedback through mid and end of semester evaluations of their supervisees' professional functioning
11. Demonstrates cultural sensitivity in the supervisory relationship with their supervisees

A. Degree training opportunities were available to meet this objective

	5	4	3	2	1
--	---	---	---	---	---

Comments:

---

---

---

---

---



4. Demonstrates ability to effectively communicate and consult with parents/family members while respecting client's confidentiality/scope of signed releases of information
5. Demonstrates sensitivity, awareness, and skills regarding diversity in their provision of consultation services

A. Degree training opportunities were available to meet this objective                                    5            4            3            2            1

Comments:

---

---

---

---

---

---

---

---

---

---

B. The degree objective was met for you                                    5            4            3            2            1

Comments:

---

---

---

---

---

---

---

---

---

---

C. Strengths and limitations. The quality of the training in meeting this objective was                                    5            4            3            2            1

Comments:

---

---

---

---

---

---

---

---

---

---



**In order to evaluate its efforts in recruiting diverse interns and to make changes as appropriate, the program would like to learn more about your experience with recruitment, and the internship as a whole, in regards to issues of diversity.**

1. Do you identify with an underrepresented/marginalized group? \_\_\_\_ Yes \_\_\_\_ No
2. How did you learn about this internship site? (e.g., APPIC Directory on-line search, Listserv e-mail, APA Minority Fellows, etc.)

---

3. I perceived this internship site to be sensitive to issues of social justice, diversity, and inclusion:

*When searching/applying for internship sites:*

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

*When interviewing with this internship site:*

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

*During the internship training as a whole:*

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

---



---



---



---



---



---



---

4. The way in which this internship site advertised its values towards social justice, diversity, and inclusion influenced my decision to apply to the program:

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

5. Which professional organizations for individuals of underrepresented/marginalized groups would you like to see this site advertise the internship program with in the future?

---



---



---

## End of Internship Checklist

1. Internship Application and Acceptance Letter \_\_\_\_\_
2. Self-Assessments:
  - a. Beginning of year \_\_\_\_\_
  - b. End of year \_\_\_\_\_
3. Evaluation of Intern by Supervisor(s):
  - a. Evaluation of Intern by Supervisor:
    - i. 1<sup>st</sup> quarter \_\_\_\_\_
    - ii. 2<sup>nd</sup> quarter \_\_\_\_\_
    - iii. 3<sup>rd</sup> quarter \_\_\_\_\_
    - iv. End of Internship Evaluation \_\_\_\_\_
  - b. Group Supervisor(s)
    - i. Mid-Fall \_\_\_\_\_
      1. If applicable (group track) second supervisor \_\_\_\_\_
      2. Group Track specific eval 1) \_\_\_\_\_ 2) \_\_\_\_\_
    - ii. End Fall \_\_\_\_\_
      1. If applicable (group track) second supervisor \_\_\_\_\_
      2. Group Track specific eval 1) \_\_\_\_\_ 2) \_\_\_\_\_
    - iii. Mid-Spring \_\_\_\_\_
      1. If applicable (group track) second supervisor \_\_\_\_\_
      2. Group Track specific eval 1) \_\_\_\_\_ 2) \_\_\_\_\_
    - iv. End Spring \_\_\_\_\_
      1. If applicable (group track) second supervisor \_\_\_\_\_
      2. Group Track-specific eval 1) \_\_\_\_\_ 2) \_\_\_\_\_
    - v. Mid-summer \_\_\_\_\_
      1. Group track specific eval \_\_\_\_\_
    - vi. End Summer
      1. Group Track specific Eval \_\_\_\_\_

4. Evaluation of Performance in Seminar:
  - a. Diversity Seminar: Fall \_\_\_\_\_ Spring \_\_\_\_\_
  - b. Supervision Seminar: Fall \_\_\_ Spring \_\_\_\_\_
  - c. Supervision Presentation Evaluation \_\_\_\_\_
5. Evaluations of Seminars by Interns:
  - a. Diversity Seminar: \_\_\_\_\_
  - b. Supervision Seminar: \_\_\_\_\_
  - c. Integrated Seminar: \_\_\_\_\_
6. Outreach Presentation:
  - a. Evaluation of Outreach Presentation \_\_\_\_\_
  - b. Copy of Presentation in file \_\_\_\_\_
7. Evaluations by Supervisor of Supervision
  - a. Mid-Semester Spring Evaluation \_\_\_\_\_
  - b. End of Semester Spring Evaluation \_\_\_\_\_
8. Evaluations of Intern Supervisors by Prac Supervisees
  - a. Mid-Semester Evaluation of Intern Supervisor by Supervisee \_\_\_\_\_
  - b. End of Semester Evaluation of Intern Supervisor by Supervisee \_\_\_\_\_
9. Case presentation reports and Evaluations
  - a. Fall presentation \_\_\_\_\_
  - b. Spring presentation \_\_\_\_\_
  - c. Evaluations (Fall & Spring) \_\_\_\_\_
10. Practicum Seminar Teaching Presentation Evaluation \_\_\_\_\_
11. Evaluations of Supervisors by Intern:
  - a. Evaluation of Individual Supervisor by Intern:
    - i. 1<sup>st</sup> quarter \_\_\_\_\_
    - ii. 2<sup>nd</sup> quarter \_\_\_\_\_
    - iii. 3<sup>rd</sup> quarter \_\_\_\_\_
    - iv. End of Internship Evaluation \_\_\_\_\_
  - b. Group Supervisor(s)
    - i. Mid fall \_\_\_\_\_, \_\_\_\_\_ (2<sup>nd</sup> supervisor if applicable)
    - ii. End fall \_\_\_\_\_, \_\_\_\_\_ (2<sup>nd</sup> supervisor if applicable)
    - iii. Mid Spring \_\_\_\_\_, \_\_\_\_\_ (2<sup>nd</sup> supervisor if applicable)
    - iv. End Spring \_\_\_\_\_, \_\_\_\_\_ (2<sup>nd</sup> supervisor if applicable)

- v. Mid Summer\_\_\_\_\_
- vi. End Summer\_\_\_\_\_
- c. Supervisor of Supervision
  - i. Mid-Semester\_\_\_\_\_
  - ii. End of Semester\_\_\_\_\_
- 12. Summer Project\_\_\_\_\_
- 13. Program Evaluation\_\_\_\_\_
- 14. Research Presentation Evaluations\_\_\_\_\_
- 15. Passing Criteria Form \_\_\_\_\_
- 16. Hours log \_\_\_\_\_
- 17. Evaluation of Internship Training\_\_\_\_\_
- 18. Evaluation of the Training Director\_\_\_\_\_
- 19. Miscellaneous \_\_\_\_\_
- 20. Certificate of Completion \_\_\_\_\_

\_\_\_\_\_  
Intern Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Primary Supervisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Training Director Signature

\_\_\_\_\_  
Date