



WILLIAM & MARY
Counseling Center
Internship in Health Service
Psychology
Manual
2026-2027



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Psychology
Manual
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WILLIAM & MARY

CHARTERED 1693

Counseling Center
McLeod Tyler Wellness Center
Post Office Box 8795
240 Gooch Drive, 2nd 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 the 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, 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)

(<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 2026-2027

Source: <https://www.wm.edu/offices/registrar/catalogs-calendars-exams/ugcalendar/26-27/>

Fall 2026

Date	Event
August 25	Final add/drop period begins at 1:00 p.m.
August 26	First day of classes Non-degree seeking registration begins
September 4	Last day to add/drop Deadline for January graduates to declare a minor or a changed/second major
September 5	Withdrawal period begins
September 7	Labor Day (offices closed, no classes)
September 8	UG pass/fail election form opens for social class juniors and seniors
October 1	Deadline to apply for January, May, or August 2027 graduation Deadline for 2027 graduates to have social class changed before Spring 2027 registration
October 5-25	Midterm grading period
October 8-11	Fall Break
October 12	Classes resume from Fall Break
October 19-30	Advising period
October 26	Last day to withdraw Last day for social class juniors and seniors to elect pass/fail
November 3	Election Day (offices closed, no classes)

November 25-29	Thanksgiving Break (offices closed, no classes)
November 30	Classes resume from Thanksgiving Break
December 4	Last day of classes
December 5-6, 12-13	Reading periods
December 7-11, 14-15	Final exam periods
January 4, 2027	Fall final grades due by 9 a.m.
January 22, 2027	Winter degree conferral (no ceremony)

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Spring 2027

Dates will be added as they become available

A two column table with Spring 2027 undergraduate academic calendar dates

Date	Event
January 27	First day of classes
March 13-21	Spring Break
March 22	Classes resume from Spring Break
May 7	Last day of classes
May 8-9, 15-16	Reading periods
May 10-14, 17-18	Final exam periods
May 20-22	Commencement Weekend

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Summer 2027

Dates will be added as they become available

Summer Session One (S1)

A two column table with 2027 Summer Session One (S1) undergraduate academic calendar dates

Date	Event
June 1	First day of classes
July 2	Last day of classes

Summer Session Two (S2)

2027 Summer Session Two (S2) undergraduate academic calendar dates

Date	Event
July 6	First day of classes
August 6	Last day of classes

Summer Session Three (S3)

A two column table with 2027 Summer Session Three (S3) undergraduate academic calendar dates

Date	Event
June 1	First day of classes
August 6	Last day of classes

Commonwealth of Virginia 2026 Pay and Holiday Calendar

State Holidays

January 1

New Year's Day

January 19

Martin Luther King, Jr. Day

February 16

George Washington Day

May 25

Memorial Day

June 19

Juneteenth

July 4 (Observed on 3rd)

Independence Day

September 7

Labor Day

October 12

Columbus Day & Yorktown

Victory Day

November 3

Election Day

November 11

Veterans Day

November 25

4 hours additional holiday time

November 26

Thanksgiving

November 27

Day After Thanksgiving

December 24

8 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

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An equal opportunity employer.

Published by Commonwealth of Virginia
July 2025



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

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March

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29	30	31				

April

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May

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31						

June

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July

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August

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30	31					

September

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October

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18	19	20	21	22	23	24
25	26	27	28	29	30	31

November

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8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

December

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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		



COMMONWEALTH of VIRGINIA

SARA REDDING WILSON
DIRECTOR

Department of Human Resource Management

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Dear Employee:

This *Employee Handbook* has been designed to serve as a quick reference for many issues relating to your employment with the Commonwealth of Virginia. **It is not a contract, nor is it an invitation to contract.**

In order to remain current, the *Handbook* treats most topics briefly and provides links to the Department of Human Resource Management's *Policies and Procedures Manual* and other sources of information. This *Manual* is updated as official policies change. The *Policies and Procedures Manual* is the authority in case of a disparity between the *Manual* and the *Employee Handbook*.

It is important for you to be familiar with the information in this *Handbook*. Please review it carefully. If you need to refer to the *Handbook* in the future, remember that the most recent version will be available on the DHRM Web site, where the links can also be used. In addition, your agency Human Resources office can provide assistance with questions relating to your employment.

Please sign below to indicate that you have seen and read this *Handbook*, and give the signed page to your agency Human Resource office. This page will be kept in your file.

We hope you will enjoy a rewarding career with the Commonwealth.

Department of Human Resource Management

Signature: _____

Printed name: _____

Agency: _____ Date: _____

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NOTICE

This handbook contains general information about your employment with the Commonwealth and outlines policies and procedures that affect your daily work. It does not include specific provisions of the policies and procedures, nor does it create any employee rights or benefits. **The handbook is not a contract, nor is it an invitation to contract. Nothing in this handbook is intended to create or imply any contract rights.**

Discrimination on the basis of race, sex, color, national origin, religion, age, or political affiliation, or against otherwise qualified persons with disabilities is prohibited in all aspects of employment with the Commonwealth of Virginia.

INTRODUCTION TO EMPLOYEE HANDBOOK

Whether you are new to the Commonwealth of Virginia or are a continuing employee, this Employee Handbook is written to help you develop a satisfying career in service to Virginia by outlining the basic elements of the employment relationship between you and the Commonwealth.

This Handbook is designed for you as a classified employee of the Commonwealth. (Classified employees are salaried employees whose positions are subject to the Virginia Personnel Act.) The Employee Handbook contains basic information related to your employment and refers you to Department of Human Resource Management policies for specific details. These policies are found at the Web Site of the Department of Human Resource Management (DHRM), www.dhrm.virginia.gov. Supervisors, managers, and Human Resource staff will also find information here that is useful to their work with employees.

This handbook does not include all information that may apply specifically to your agency because of the flexibility that agencies have to tailor policies to meet their management needs. Other specific information is available from your supervisor or your Human Resource office.

The official policies of the Department of Human Resource Management, some of which are discussed in this handbook, are revised frequently as the need arises. If any statements in this handbook differ from policy as contained in the *Policies and Procedures Manual*, the *Manual* governs.

QUICK REFERENCE TO KEY WEBSITES

http://www.dhrm.virginia.gov/	Department of Human Resource Management (DHRM) home page
http://www.dhrm.virginia.gov/hrpolicy/policy.html	Human Resource Policy
http://www.dhrm.virginia.gov/employeebenefits.html	Employee Benefits
http://www.dhrm.virginia.gov/compensation.html	Employee Compensation
http://www.dhrm.virginia.gov/programs.html	Employee Programs
http://www.dhrm.virginia.gov/employeerelations.html	Employee Relations
http://www.dhrm.virginia.gov/employmentandcareers.html	Employment and Careers
https://secure.doa.virginia.gov/payline/	Department of Accounts Payline
http://www.edr.virginia.gov/index.htm	Department of Employment Dispute Resolution
http://www.varetire.org/	Virginia Retirement System
http://www.gwr.com	Great West Retirement

GENERAL CONDITIONS OF EMPLOYMENT

A. Hours Of Work – See Policy 1.25, *Hours of Work*, at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

A full-time classified employee works a schedule of 40 hours per week (“F” status) or 32 to 39 hours per week (“Q” status). Classified employees working a schedule of 20-31 hours per week are part-time (“P” status). There is no classified employment for a schedule of less than 20 hours per week.

For most jobs, an unpaid lunch break of 30 to 60 minutes (45 minutes is typical) is required. Your supervisor will schedule this for you. In addition, agencies may provide two 15-minute breaks, one morning and one afternoon, which are part of the paid day. These breaks are optional and may not be used to cover missed time or to extend the lunch period.

The standard workday is 8 hours. Unless otherwise indicated, official statements including policy and handbook references to “workday” mean an 8-hour period. If you work an alternate schedule, remember that official statements generally assume 8-hour days.

1. Some agencies have established flexible work hours to better meet their business needs. Normally, administrative offices must ensure adequate coverage during core business hours. In most cases, flexible schedules maintain a 40-hour workweek. Ask your supervisor if one of these schedules applies to you or is an option available to you.
2. Your agency may permit alternate work schedules in some cases. An example of an alternate schedule is four 10-hour days per week. Based on its business needs, an agency or work unit may decide not to permit alternate schedules, or may decide to discontinue them at any time.

Most *non-exempt* employees (those covered by the Fair Labor Standards Act) may work only those schedules that maintain a 40-hour workweek. For certain employees in law enforcement and health care delivery, the Fair Labor Standards Act (FLSA) permits arrangements, such as 28-day cycles, which do not require a 40-hour workweek. In these cases, the calculation of overtime is based on the alternative work cycle.

With agency approval, *exempt* employees (those not covered by the FLSA) may work a two-week schedule that results in 80 work hours in two weeks.

B. Attendance – See Policy 1.60, *Standards of Conduct*, and Policy 1.25, *Hours of Work*, at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

You are expected to report to work in accordance with the work schedule assigned by your supervisor, and you are responsible for letting your supervisor know as soon as possible if you expect to be late or absent. Ask your supervisor about your agency's procedure for reporting absences. Failure to notify your supervisor appropriately may result in disciplinary action including termination.

C. Hiring Requirements – See Policy 2.10, at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

Employees hired into certain positions must complete a Statement of Personal Economic Interests as required by the Code of Virginia (§ 2.2-3100). Your Human Resource office will know whether you need to complete this statement.

All employees must meet certain conditions of employment. Additionally, agencies may require a background check which could include pre-employment tests and/or drug tests.

Certain state jobs are designated by agencies as “sensitive” according to the definition in the Code of Virginia, §2.2-1201.1. Final candidates for these positions are subject to a fingerprint-based background check, including current employees who apply for a sensitive position.

D. Information About Your Paycheck

1. Standard pay periods for classified employees are the 10th through 24th of a month and the 25th through the 9th of a month. Most classified employees are paid twice a month, on the 1st and 16th following the end of the pay period. When paydays fall on weekends or holidays, paychecks normally are distributed and direct deposits normally are made the last workday before the regular pay date. Ask your supervisor about your agency pay schedule. New state employees generally are required to participate in direct deposit.
2. Tax liens and garnishments are honored as directed by state and federal law. An employee will be charged a fee for processing certain garnishments. See the Commonwealth Accounting Policies and Procedures (CAPP) Manual <http://www.doa.state.va.us/procedures/AdminServices/capp/summary.htm> Topic 50405.

E. Probationary Period – See Policy 1.45, at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

Classified state employees serve a probationary period of one year from their employment or re-employment date. This is a trial period during which the agency and employee learn whether the employee is suited for the job. This time may be extended if the employee experiences absence(s) of more than 14 consecutive days and for certain other reasons. Except to make up for the employee's absence, the probationary period may not be extended for more than six additional months. If you are selected for a

position that requires certification following completion of a prescribed training program, you must complete a new probationary period.

The state's grievance procedure is not available to probationary employees. However, if you believe you have been discriminated against in any condition of employment based on race, color, religion, national origin, sex, age, disability, or political affiliation, you may file a discrimination complaint through your agency's human resource department, with the Office of Equal Employment Services section of DHRM, or with the federal Equal Employment Opportunity Commission, <http://www.dhrm.virginia.gov/employeerelations.html>.

During your probationary period and throughout your employment with the Commonwealth, you should consult your agency Human Resource office for assistance with workplace issues of all kinds. This office can provide guidance and referral to other resources as needed.

F. Overtime – See *Policy 3.15, Overtime Leave, and Policy 1.25, Hours of Work*, at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

Some positions involve occasional or periodic overtime work; employees must work overtime as required by their supervisors. Employees are designated as covered by the federal Fair Labor Standards Act (“non-exempt”) or not covered (“exempt”). Agencies determine the exempt or non-exempt status of each employee using FLSA guidelines and based on the type of work done. For non-exempt employees, payment of overtime hours worked must comply with the Act.

Non-exempt employees are normally paid overtime at time and one-half their regular rate for hours worked over 40 during a workweek. Agencies may elect to grant overtime leave instead of overtime pay. In this case, the employee must be notified in advance. Overtime leave hours do not expire, and there is a maximum number of overtime leave hours an employee may accrue. Thus, an employee must take paid time off to avoid exceeding his or her agency limit. Employees receive pay for accrued overtime hours when leaving state service and at certain other times specified in policy.

Exempt employees typically are not compensated for working overtime. However, in unusual circumstances, agencies may choose to provide straight-time compensatory leave or pay.

G. Office Closings – See *Policy 1.35, Emergency Closings*, at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

When weather conditions or an emergency situation forces late openings, early closings, or full-day closings of state agencies, classified employees may be paid for these periods. Decisions regarding such closings are made by the following authorities:

- For administrative agencies in the city of Richmond and in Chesterfield, Henrico, and Hanover counties – the Governor;

- For state colleges and universities – the college or university president; and
- For state operations or branch offices of administrative agencies outside of Richmond – the responsible agency head or appropriate facility or operations director.

Closing decisions normally are announced on local radio and television stations.

Be sure you know the radio or television stations that will announce closings in your area. Closing announcements also appear on the DHRM web site, <http://www.dhrm.virginia.gov/>. You are responsible for knowing this information and for acting accordingly.

Certain personnel may be “designated” by their agencies as being required to work during authorized closings. They may earn compensatory leave or pay for hours worked during periods of closing.

H. Telecommuting – See Policy 1.61 at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

Agencies may designate certain positions and certain employees for telecommuting (teleworking). This practice enables employees to conduct some of their work from their homes or from another site other than the central workplace.

State agencies are encouraged to develop telecommuting and alternative work schedule arrangements where high standards of employee performance and service delivery can be maintained.

I. Outside Employment – See Policy 1.60, *Standards of Conduct*, at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

As a state employee, your obligation to your state job is considered to be your primary duty. An employee must receive approval from his or her agency *before* taking on an additional job, including self-employment. An employee who already has other employment when he or she enters state service or moves from one agency to another must inform the hiring manager and seek approval to continue the other employment. An employee may be disciplined for outside employment that occurs during work hours or that is deemed to affect work performance.

J. Alcohol And Other Drugs – See Policy 1.05 at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

The Commonwealth intends to maintain a workplace free from the adverse effects of alcohol and other drugs. Employees are forbidden to use these substances at the workplace or to come to the workplace while under the influence of these substances. In addition, employees are expected to notify their supervisors if they are convicted of violating any criminal drug law, either within or outside the work place, or if they are convicted of violating any alcohol beverage control law or law that governs driving while

intoxicated, based on conduct occurring in the workplace. Violation of policies related to these matters can result in serious disciplinary action including termination.

Because of the nature of the work, some agencies require drug testing before a final employment offer is made. Some positions may also require ongoing random drug testing and/or as-needed drug or alcohol testing.

K. Safety And Security In The Workplace – *See Policies 1.80, Workplace Violence, and 2.30, Workplace Harassment, at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.*

As an employer, the Commonwealth of Virginia makes every effort to ensure a safe and healthy workplace for its employees as well as for customers, patients, business colleagues, and visitors. Harassment (sexual or other), threats of violence, and violent acts will not be tolerated in the state workplace. Policy 1.80 provides guidance regarding the kinds of actions which will not be tolerated in the workplace, and describes the responsibility of state agencies to take certain measures to promote safety and security in the work environment. Violation of policies related to these matters can result in serious disciplinary action including termination.

All state employees are covered by the Virginia Workers' Compensation Act. In addition, the Workers' Compensation section of the Department of Human Resource Management offers services such as training and consultation in workplace safety and loss control.

You should consult your Human Resource office if you have concerns in this area. Incidents of workplace violence should be reported immediately through appropriate channels in your agency.

L. Layoff And Severance – *See Policies 1.30, Layoff; 1.57, Severance Benefits; and 1.65 Temporary Work Force Reduction, at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.*

Business needs, including economic constraints, may require an agency to re-configure or reduce its workforce. Policy 1.30 (Layoff), Policy 1.57 (Severance Benefits), and Policy 1.65 (Temporary Work Force Reduction) outline procedures for agencies to follow and rights of employees in these situations.

Employees may be identified for layoff using a number of factors, including business needs, job functions, and employees' length of continuous state service. Severance benefits are based on salary and length of continuous state service and may sometimes be used by eligible employees for enhanced retirement. Restricted employees (those paid from non-continuing sources of funds) and part-time employees should check these policies and consult their Human Resource offices to find out whether they are eligible for layoff and/or severance benefits.

Your agency may experience variations in work flow which make temporary staff reductions advisable. Policy 1.65, Temporary Work Force Reduction, explains how

agencies should implement these short-term reductions and defines the rights of employees during such actions.

M. Statement of Public Accountability

State agencies are public institutions supported by the Commonwealth of Virginia, a public employer committed to serving the interests of the taxpayers and accountable to them for the effective use of public funds. Therefore, it is the policy of the Commonwealth that employees are not paid for time that they do not work, unless they use leave time, such as annual leave or sick leave, accrued under human resource policies. You will be placed on Leave Without Pay, and your paycheck for that pay period will be reduced, if you are absent from work for personal reasons or because of illness or injury, even for periods of less than one day, if you do not use accrued leave because (1) you do not request use of accrued leave or your request is denied, (2) your accrued leave has been exhausted, or (3) you request leave without pay.

If your position is exempt from the overtime provisions of the Fair Labor Standards Act (FLSA), there will be no deductions from your compensation for periods of absence from work of less than one day, except for the reasons and circumstances specifically described in the preceding paragraph or for infractions of safety rules of major significance.

COMPENSATION

See Policy 3.05, at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

Your total compensation includes both your salary and the state's benefits package. In addition to salary, classified employees are eligible to receive several kinds of paid time off, group health insurance (with a state contribution to the premiums for full-time employees), state-supported membership in the Virginia Retirement System, life insurance, short- and long-term disability coverage (for VSDP participants) and others. Many of these benefits are explained in this Handbook, and the Benefits Administrator in your agency's Human Resource office can give you detailed information.

Classified positions are assigned to approximately 300 roles (titles) within about 60 career groups and seven occupational families. Each role is assigned to one of nine pay bands. Both the employee and the job are assessed for pay purposes using specified factors. Various pay practices are used to establish your original salary and to guide the movement of your salary during your career. Agencies retain some latitude to develop their own salary administration plans within the broad framework set by DHRM policies.

The state does not guarantee any specific pay increases or any certain timetable for pay increases. Funds to support employee pay increases may be provided and earmarked by the Governor or the legislature, or may be identified by the agencies within their own budgets. The legislature and Governor may provide for general pay increases in some years. These typically are linked to the employee's satisfactory job performance.

In addition to Policy 3.05, the Human Resource Management Manual provides information about compensation practices. You may refer to this manual at <http://www.dhrm.virginia.gov/resources/manuals.html>.

PERFORMANCE MANAGEMENT AND EVALUATION

See Policy 1.40, Performance Planning and Evaluation, and Policy 1.45, Probationary Period, at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>

It is important for you to clearly understand what you will be expected to do in your job. One way to get this information is through the Employee Work Profile (EWP), a description of the work you will be assigned to do and the level of performance you are expected to achieve. You will receive an EWP shortly after you begin work, and it will be reviewed annually thereafter. The EWP may be revised as needed.

The EWP may also include a Development Plan that describes specific steps you should take to improve job-related competencies (behaviors, knowledge, and skills) during the coming performance evaluation period.

During an employee's probationary period, the supervisor prepares reports on the new employee's progress. After probation, employees receive an annual performance review. You may also receive ongoing feedback concerning your performance during the performance cycle.

Along with pay practices mentioned in Policy 3.05, your performance rating may affect your salary increases.

BENEFITS AND PROGRAMS

A. Insurance Coverage and Income Replacement Programs

1. Group Life Insurance – See the VRS web site at www.varetire.org.

All classified state employees are enrolled in the group life insurance plan administered by the Virginia Retirement System (VRS) at no cost to the employee. This plan provides life insurance and accidental death and dismemberment insurance during your employment.

The amount of your life insurance coverage for death from natural causes is your annual salary rounded to the next highest thousand, then doubled. The benefit for accidental death is double the natural death benefit.

Through a plan also administered by VRS, active insured employees may purchase optional life insurance for themselves, their spouses, and their minor children. Premiums are paid through payroll deduction. In some cases, some coverage may be continued into retirement. Your agency's Benefits Administrator can provide additional information on Optional Life Insurance.

2. Health Benefits – See <http://www.dhrm.virginia.gov/employeebenefits.html>.

When an employee is hired, he or she has a specified length of time to decide whether to enroll in the State Health Benefits Program or to waive coverage. Your agency Benefits Administrator will let you know about important deadlines. The state's program, administered by the Department of Human Resource Management, includes medical, behavioral health, dental, and prescription drug coverage. An employee may choose membership for employee only, membership for employee and one dependent or family membership for the employee and two or more dependents. The employee's portion of the premium is paid by payroll deduction. The state contributes a monthly amount toward the cost of this benefit for employees in full-time status (F or Q). Part-time classified employees (P status) may participate in the State Health Benefits Program but do not receive a state contribution to their premium costs.

3. Employee Assistance Program

The Employee Assistance Program (EAP) offers help to employees and their family members who need counseling and treatment referrals for alcohol and substance abuse problems and for various personal difficulties including legal, financial, and relationship concerns. The employee or family member may seek these services directly, or a supervisor may encourage an employee to use EAP resources because of employment issues that may be adversely affecting work performance. All services are provided under strict guidelines of confidentiality.

EAP services are available for all state employees enrolled in the Commonwealth's health care plan and their covered family members. For additional information, ask your agency Benefits Administrator or your insurance carrier for contact information.

4. Virginia Sickness and Disability Program (VSDP) – *See Policy 4.57, at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.*

All classified employees hired on or after January 1, 1999, are enrolled in VSDP; many employees already working at that time have made the choice to join the program. The chief purpose of this program is to provide income replacement to employees when they are unable to work because of short-term (up to 125 workdays) or long-term illness or disability. The program also provides:

- return-to-work services,
- paid sick leave time of up to 80 hours per year, based on months of state service, to be used for the employee's own short occasions of sickness/injury or for personal doctor visits,
- paid leave time of up to 40 hours per year for other family and personal reasons, and
- a long-term care component.

Eligible employees may use up to 33% of their available sick leave balance for absences for family illness or disability that are covered by the Family and Medical Leave Act (FMLA).

Details about VSDP are available in the VSDP Handbook and under Benefits at <http://www.dhrm.virginia.gov/compandbenefits.html>.

5. Long-Term Care Insurance

The Commonwealth of Virginia offers long-term care insurance to eligible state employees, retirees, and certain family members under a contract awarded to a third-party vendor. Long-term care typically provides assistance when necessary to accomplish normal activities of daily living, such as eating, dressing, and getting in and out of bed. This is an optional benefit which you may choose to purchase through payroll deduction.

6. Workers' Compensation – *See Policies 4.60, Workers' Compensation, and 4.57, Virginia Sickness and Disability Program Leave, at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.*

If you incur a work-related injury or illness, you may be eligible for benefits under the Workers' Compensation Act. In addition, the Commonwealth provides employees covered by the Virginia Personnel Act benefits to replace lost income and to compensate for certain permanent losses to the body. Workers'

Compensation benefits include a return-to-work program to help employees resume productive activity. Procedures and benefits may vary depending on whether you are in the Traditional Sick Leave program or in the Virginia Sickness and Disability Program (VSDP). Your agency Human Resource office can provide more detailed information.

It is important to report a work-related injury as soon as possible. Your Human Resource office can help you with this process.

B. Time-Off Benefits, Paid and Unpaid

The Commonwealth provides paid leave time to employees for a variety of reasons. The various types of leave are outlined below. Refer to the specific policy for more detailed information. In general, all leave must be scheduled in advance and approved by your supervisor. Ask your supervisor about your agency policies and procedures for scheduling, taking, and reporting leave.

1. Annual Leave – See Policy 4.10 at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

Annual Leave is earned (accrued) at the end of each completed pay period, at a rate set according to your total amount of state salaried service; new full-time employees start by accruing four hours per pay period. Classified employees who work less than 100% but at least 50% accrue at a rate proportionate to the percentage worked.

You can carry accrued annual leave hours forward from one leave year to the next up to the carryover limits, which are also based on state service. When you separate from state service or experience certain other status changes, you will receive payment for unused annual leave, up to established payout limits. Annual Leave is available for personal uses such as vacation. Ask your supervisor for approval to use this leave ahead of time.

2. Sick Leave – See Policy 4.55 at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

Traditional Sick Leave is not available to employees hired on January 1, 1999, or later. Traditional Sick Leave is granted at the rate of five hours per completed pay period regardless of length of service. Payout limits and other provisions are explained in Policy 4.55.

Eligible employees may use up to 33% of their available sick leave balance for absences for family illness or disability that are covered by FMLA.

3. VSDP Leave – See Policy 4.57 at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

VSDP Family and Personal Leave and VSDP Sick Leave amounts are granted to participants in the Virginia Sickness and Disability Program upon hire and at the beginning of the leave year, January 10. Hours remaining from the previous year do not carry over. Length of state service (shown in months) determines the amount of these types of leave. The VSDP Employee Manual at <http://www.varetire.org/Members/BenefitPlans/Disability.html> provides further information.

4. Leave Sharing – See Policy 4.35 at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

Employees may donate annual leave hours they have accrued to help other employees who are eligible to receive the leave and who are experiencing Leave Without Pay. Employees covered by the Traditional Sick Leave policy may request to receive Leave Sharing donations when they are in a Leave Without Pay status because of their own personal illness or injury or because of the illness or injury of a family member for which the employee is using Family and Medical Leave (FMLA). Employees covered by the Virginia Sickness and Disability Program may request to receive Leave Sharing donations when they are in a Leave Without Pay status because of a *family member's* illness or injury for which the employee is using Family and Medical Leave. The agency continues to make its contribution to the health care premium for the time covered by FMLA leave.

If you want to donate leave or request to use donated leave, you should consult your agency Human Resource office.

5. Family and Medical Leave Act – See Policy 4.20 at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

The Commonwealth complies with the federal Family and Medical Leave Act (FMLA) in providing leave with or without pay to eligible employees for situations defined in that Act. State policies and procedures apply to many situations covered by FMLA. Because FMLA is a designation rather than a separate type of leave, an employee may also use other kinds of leave while in FMLA leave status. An eligible employee on FMLA leave continues to receive the state contribution to health insurance, and FMLA provides reemployment rights to employees under certain conditions. Employees may use up to 33% of their traditional sick leave or available VSDP sick leave to cover absences for family illness or disability covered by FMLA.

6. Compensatory and Overtime Leave – See Policies 3.10 and 3.15 at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

Some employees may be eligible to earn paid leave for work performed overtime or during non-scheduled work times. The Fair Labor Standards Act (FLSA) governs application of these leave types for employees covered by the Act (non-exempt).

7. Civil and Work Related Leave – See Policy 4.05 at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

The Commonwealth grants employees paid time off for certain reasons related to court proceedings (including jury duty); for some kinds of service to official state councils, boards, etc; for some activities related to employee relations processes; and reasonable time to interview for state positions. Eligibility criteria and specific conditions are explained in Policy 4.05.

8. School Assistance and Volunteer Services Leave – See Policy 4.40 at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

As an employer, the Commonwealth supports employees' responsibilities to their children and communities. This policy permits agencies to grant employees up to 16 hours of time off with pay per leave calendar year to provide volunteer services through eligible non-profit organizations within or outside their communities. Such service may be provided as a member of a service organization or through authorized school assistance. Read the policy to learn how this leave type may apply to you.

9. Military Leave – See Policy 4.50 at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

Employees who are members of the Commonwealth's militia (including National Guard) are granted paid military leave while providing military service when called forth by the Governor. Employees who serve in the National Guard, Naval Militia, or in a branch of the military reserve are entitled to as much as 15 days of paid military leave for federally funded training or active duty per federal fiscal year. Employees called for more than 15 days of active federal duty in a federal fiscal year may use accrued leave balances in order to remain on the state payroll. Employees who exhaust their leave balances or who choose not to use them for military duty may be placed on Military Leave Without Pay.

In compliance with federal requirements, employees are guaranteed reinstatement to their original position or a comparable position for up to five years of cumulative military service, with certain exemptions to the five-year cap. If you are a member of the National Guard or a military reserve unit, you may want to review your benefits under the Uniformed Services Employment and Reemployment Act (USERRA). Some state benefits continue for all or part of a term of military leave, as detailed in Policy 4.50.

10. Emergency/Disaster Leave – See Policy 4.17 at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

Employees with specific, needed skills may receive up to 80 hours of paid leave to give requested assistance in officially-declared disaster areas, typically in cases of large-scale flood, fire, ice storm, or a similarly destructive natural event. To qualify for this leave, the services provided must not be within the regular job duties of the called employees. In addition, employees who are the *victims* of major disastrous events, such as destruction of their primary residence, are sometimes eligible for paid leave under this policy. Employees called to provide emergency service through active duty in the military or National Guard are covered by the Military Leave policy, #4.50.

11. Educational Leave and Educational Assistance – See Policy 4.15 and Policy 5.10 at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

Employees may be allowed leave time to take courses related to their work. This may be with full, partial, or no pay, and/or tuition payment. Financial assistance for costs related to such courses is sometimes available from the employee's agency. Educational Assistance Agreements often include work obligations. Agencies develop the details of their own policies in this area, so consult with your agency Human Resource office and see your agency's policies for further explanation of these programs.

12. Leave to Donate Bone Marrow or Organs – See Policy 4.37 at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

Employees may use up to 30 workdays in a calendar year to donate their bone marrow or an organ and to recover from the procedure.

13. Leave Without Pay – See Policy 4.45 at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

In certain situations, you may ask for or need to be placed in a Leave Without Pay (LWOP) status. This status preserves some benefits of employment and permits reinstatement of other benefits if you return to paid status. LWOP does not separate you from state service, and many benefits are not affected, especially if the period of LWOP is not long. In order to avoid unintentional LWOP, you should learn to manage your paid leave carefully. Employee-initiated LWOP must be approved by your agency.

Leave Without Pay may be Unconditional (reinstatement to the pre-leave position is guaranteed) or Conditional (reinstatement will occur only if the pre-leave position remains available).

C. Holidays – *See Policy 4.25 at*
<http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

As mandated by state law, the following days are generally observed as paid holidays for state employees:

New Year's Day (January 1)
Lee-Jackson Day (Friday before the third Monday in January)
Martin Luther King Day (third Monday in January)
George Washington Day (third Monday in February)
Memorial Day (last Monday in May)
Independence Day (July 4)
Labor Day (first Monday in September)
Columbus Day and Yorktown Victory Day (second Monday in October)
Veterans Day (November 11)
Thanksgiving Day (fourth Thursday in November)
The day after Thanksgiving Day
Christmas Day (December 25)

The Governor or the President of the United States may designate additional holiday time.

When a holiday falls on Saturday, it will be observed on the preceding Friday; when a holiday falls on Sunday, it will be observed on the next Monday. If a holiday falls on an employee's scheduled day off, other than a weekend, the employee will be granted up to 8 hours of compensatory leave. If an employee is required to work on a holiday, the employee may be eligible for pay plus compensatory leave.

Some agencies observe a different holiday schedule, but the number of paid holidays is the same for all agencies. Regardless of the schedule worked, full-time (F) classified employees receive 8 hours of Holiday Leave for a full-day state holiday. If you work an alternate work schedule, talk with your supervisor or Human Resource office about holiday leave. Holiday leave is prorated for classified employees who work less than a 40-hour schedule ("Q" and "P" status employees).

D. Employee Service and Recognition Programs

Employee Service and Recognition Programs – *See Policy 1.10, Service Recognition, and Policy 1.20, Employee Recognition Programs, at*
<http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

If you make State employment your career, you may receive periodic Service Awards for your years of service. Policy 1.10, Service Recognition, describes the general state policy. Some agencies have developed their own Service Awards program. Your Human Resource office will have information about your agency's program.

Policy 1.20 directs agencies to develop programs to recognize employees for their contributions to agency objectives and to state government, and outlines requirements for the program. A Handbook following the policy contains detailed information to help agencies develop programs that suit their objectives and culture. Awards to employees may include money, non-monetary items, or paid leave time. Ask your supervisor or Human Resource office about your agency's program.

E. Employee Suggestion Program

Employee Suggestion Program – See <http://esp.dhrm.virginia.gov/>.

The Employee Suggestion Program (ESP) was created to recognize and reward employees for ideas that improve the efficiency or effectiveness of the Commonwealth. If you make a suggestion through ESP that saves time, money, or resources, or will improve productivity or safety, and that is outside of your ability to implement in the normal course of your job, you may be eligible for an award. If your suggestion is adopted, you may receive a certificate and either cash or paid leave time. The ESP Procedures Manual and Suggestion Evaluation Form can be found following Policy 1.21 on the Web. Forms and additional information are available at <http://esp.dhrm.virginia.gov/>. Your Agency ESP Coordinator can give you more information about this program.

F. Savings Programs

1. The Flexible Benefits Program is subject to regulations established by the Internal Revenue Service (IRS). You will find more detailed information from your agency Benefits Administrator and at the Health Benefits web site at <http://www.dhrm.virginia.gov/employeebenefits.html>.

- a. Premium Conversion

This feature reduces your net cost because you pay your portion of your health benefit premium with pre-tax salary.

- b. Medical and Dependent Reimbursement Accounts

Employees are eligible to enroll in the medical and/or dependent care reimbursement program, which allows payment of certain out-of-pocket expenses with pre-tax dollars. Talk with your agency Benefits Administrator about eligibility requirements.

2. Deferred Compensation Plan (DCP) – See <http://www.varetire.org/Members/BenefitPlans/DefComp.html>.

Through this program, you may direct a portion of your salary into an investment program by payroll deduction **before** state and federal taxes are applied. Typically, employees choose to receive the deferred income after retirement when they are likely to be in a lower tax bracket. A third-party administrator (TPA) manages the program, including the investments, and will help you select from a

variety of investment options. Further information is available from this TPA and from the Virginia Retirement System, which administers the program. Your Benefits Administrator will be able to provide phone numbers for reaching them.

The Commonwealth supports employee participation in this plan by offering a Cash Match Program. Deferred Comp participants who sign up for Cash Match will receive a contribution to their accounts each pay period of an amount equal to one-half of the employee's own contribution, up to an established maximum. The maximum matching amount is set by the legislature.

G. Wellness Program

CommonHealth is the state's wellness program for employees, families, and retirees offering a range of health-related activities and resources at participating agencies. Information about CommonHealth is available on the Web at <http://www.commonhealthva.com>.

H. Work/Life Programs – See <http://www.dhrm.virginia.gov/worklife/worklifetoc.html>.

Work/Life Programs are designed to improve balance between work and personal life. The state offers a number of Work/Life programs to state employees. These services and programs may vary by agency. Contact your Human Resource office for additional information.

I. Retirement Benefits

Retirement Program - See www.varetire.org.

Classified employees are covered by the state's defined-benefit retirement program. Upon retirement, the Virginia Retirement System (VRS) provides monthly retirement benefits for eligible, qualifying employees, who may choose among a variety of retirement options. In addition, VRS administers other programs, including short-term and long-term disability programs (through the Virginia Sickness and Disability Program), life insurance, and deferred compensation. For more information, contact your Benefits Administrator or VRS.

EQUAL EMPLOYMENT OPPORTUNITY (EEO)

See Policies 2.05, *Equal Employment Opportunity*, 2.10, *Hiring*, and 2.30, *Workplace Harassment* at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>

- A. The Commonwealth is committed to providing **equal employment opportunity** for all employees and job applicants regardless of their race, color, religion, sex, age, national origin, disability, and political affiliation. Employment discrimination based upon these traits is unlawful under both state and federal law. Equal opportunity extends to all aspects of employment including hiring, transfers, promotions, training, termination, working conditions, compensation, benefits, and other terms and conditions of employment. The Commonwealth complies with federal and state equal employment opportunity laws and strives to keep the workplace free from all forms of unlawful discrimination, including harassment and retaliation.
- B. **Harassment** is any unwelcome verbal, written, or physical conduct that either denigrates or shows hostility or aversion towards a person on the basis of race, color, national origin, age, religion, disability, marital status, or pregnancy that (1) has the purpose or effect of creating an intimidating, hostile, or offensive working environment; (2) has the purpose or effect of unreasonably interfering with an employee's work performance; or (3) affects an employee's employment opportunities or compensation.
- C. **Retaliation** is any overt or covert act of reprisal, interference, restraint, penalty, discrimination, intimidation, or harassment against one or more individuals for exercising their rights (or supporting others for exercising their rights) under the Commonwealth's EEO policies.
- D. **Violations and Enforcement**
Unlawful discrimination in any form is a serious offense that will not be tolerated in state employment. The Department of Human Resource Management's *Policies and Procedures Manual* sets forth the relevant policies of the Commonwealth. If you believe you are a victim of unlawful discrimination, several avenues of redress are available to you, including processes within your agency, the grievance procedure, and the state and federal discrimination complaint processes.

Supervisors or employees found to have engaged in unlawful discriminatory conduct are subject to disciplinary action, including termination.

DHRM's Office of Equal Employment Services (OEES) is responsible for enforcing policies concerning equal employment opportunity. This office investigates and resolves complaints of unlawful employment discrimination. If you wish to submit a complaint or allegation, you may obtain the needed forms from your agency's Human Resource office, by contacting the OEES, or from the DHRM web site. Employees may also file complaints under the Grievance Procedure or directly with the federal Equal Employment Opportunity Commission.

DISCIPLINARY PROCESS

See Policy 1.60, Standards of Conduct at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>

Policy 1.60, Standards of Conduct, provides guidance to employees and supervisors by outlining (1) standards of appropriate conduct; (2) behavior that is unacceptable; and (3) corrective actions that agencies may take to address behavior and employment problems. The standards apply to full-time and part-time classified and non-probationary employees (generally, those covered by the Personnel Act). In addition, agencies may refer to the Standards of Conduct in evaluating the behavior of employees not covered by the Personnel Act. The Standards of Conduct also explain procedures for imposing suspensions either during investigation of employee behavior or as part of the discipline.

The Standards of Conduct policy addresses workplace conduct or behavior and outlines a three-tier system based on the seriousness of the behavior and the corresponding agency response. While discipline or even termination may be required, the goal of the Commonwealth is always for the employee to be a constructive, contributing member of the work force. Therefore, **progressive discipline** is recommended, so that minor and/or first offenses generally receive such corrective actions as counseling or low-level disciplinary action. Major and/or repeated offenses generally should result in more severe consequences, including an official Written Notice and, in the most serious cases, termination. The policy explains the importance of **due process** and how it is applied, especially when suspension, termination, disciplinary demotion, or disciplinary transfer may result. Due process gives the employee an opportunity to respond to the allegations before discipline is imposed.

Note that although Policy 1.60 describes a variety of actions that may be addressed through the disciplinary process, the list of actions in the policy is not all-inclusive. Listed actions are intended as examples of the levels of severity of possible infractions. Supervisors and managers should become familiar with the Standards of Conduct, and should review them carefully when applying any disciplinary action. Policy 1.60, Standards of Conduct, can be found in its entirety in DHRM's on-line policy manual at <http://www.dhrm.virginia.gov/hrpolicy/policy.html>.

As with all workplace issues, you should refer to your Human Resource office if you have questions or concerns about the Standards of Conduct, or about specific situations.

Non-probationary employees may challenge disciplinary actions through the Employee Grievance Procedure, which is administered by the Department of Employment Dispute Resolution (DEDR). Detailed information on these procedures is available from DEDR.

EMPLOYEE RELATIONS ISSUES

The Department of Employment Dispute Resolution (EDR) is available to advise employees on work-related problems, use of the grievance procedure, and mediation. It also assists employees and managers in exploring options for resolving work-related conflicts. See <http://www.edr.virginia.gov/>.

As a classified employee, you will have access to the State Grievance Procedure after you have completed your Probationary Period. This procedure allows you to bring your concerns to the attention of upper management. For example, you may believe that a policy was misapplied, or there may be a dispute between you and a co-worker or supervisor.

Before seeking dispute resolution through the Grievance Procedure, you may choose the less formal alternative of mediation. The Commonwealth Mediation Program for state employees is a voluntary process whereby trained mediators work with the parties in strict confidentiality to resolve work-related conflicts. You may learn if your agency utilizes this program by calling your Human Resource staff or DEDR.

Policy 4.05, Civil and Work-Related Leave provides for employees to use a reasonable amount of work time to pursue these remedies. Resolution step meetings, grievance hearings, and meetings with DEDR counselors may generally be charged to Civil and Work-Related Leave.

MISCELLANEOUS TOPICS

A. **Commonwealth of Virginia Campaign**

The Commonwealth of Virginia Campaign is the voluntary employee charitable giving program that raises funds for numerous non-profit health and humanitarian organizations throughout the state, the nation, and the world. Contributions are tax deductible and can be made in lump sum or by payroll deduction. Each agency has a CVC Coordinator who can provide further information. This is the only charitable giving program authorized by the Commonwealth to operate within the state workplace.

B. **Electronic mail, computer, and telephone use**

Many jobs provide access to computer equipment and the Internet so that employees can perform their work tasks. Policy #1.75, Use of Internet and Electronic Communications Systems, expresses the general guidelines for use of these systems and provides for agencies to adopt more specific guidelines that may be suitable to their needs. In general, the equipment and systems should be used for business purposes. Personal use should be limited to minor occasions. Users should expect their system use to be monitored. Certain specified Internet uses, such as transmitting obscene, discriminatory, or fraudulent material, are strictly forbidden at all times.

Telephone use should follow a similar pattern. The telephone is provided so that employees can conduct state business. Personal use should be limited and does not include long distance calls. Lengthy or frequent personal phone calls may constitute an abuse of work time and may result in disciplinary action under the Standards of Conduct.

C. **Gifts, Gratuities, and Rewards**

As a state employee, you are in a position of public trust. Therefore, you may not accept gifts, gratuities, favors, or rewards for any services you perform in connection with state employment other than from the agency where you work. Likewise, it is unlawful for employees to solicit, offer, or accept money or any thing of value in exchange for appointment or selection to a position at a higher salary, or for special privilege with any state agency. Violation of this policy will be handled through the Standards of Conduct.

D. **Intellectual Properties**

While employed by the state, many employees work on projects or develop materials that also have worth outside of state government. The Code of Virginia (§ 2.2-2822) and policies developed by institutions of higher education also address these matters. You may obtain information and guidance related to intellectual property from your agency Human Resource staff.

E. Nepotism

The Code of Virginia (§ 2.2-3106) prohibits (as a conflict of interests) supervision by an employee of a member of his or her immediate family. Immediate family includes the spouse and any other person residing in the same household as the employee who is a dependent of the employee or of whom the employee is a dependent. (See the Conflict of Interests Act in the Code of Virginia, § 2.2-3100 and following.)

F. Personal Appearance

As an employee of the Commonwealth, you should come to work dressed and groomed appropriately for your working conditions. Your agency may apply more specific requirements for dress and grooming based on their business needs.

G. Political Activity

State employees may not campaign for themselves or for anyone else during work hours, nor can they use state equipment or resources for political activities. Further, no employee is to be rewarded or discriminated against in any way for participating or not participating in political activities outside of the workday and work place. Before beginning any political activity, you should determine whether such activity violates the Virginia Conflict of Interests Act.

The political activities of employees in state agencies that are funded in whole or in part by federal loans or grants are subject to the conditions of the Hatch Act, a federal law limiting political activities of government employees. (<http://www.osc.gov/hatchact.htm>) If you are in a position that receives any federal funds, you may not:

1. stand as a candidate for any public or political party elective office in a partisan election (one in which any candidate runs as representative of a political party whose presidential candidate received electoral votes in the preceding presidential election);
2. directly or indirectly coerce, attempt to coerce, command, or advise a state or local officer or employee to pay, lend, or contribute anything of value for political purposes; or
3. use official authority or influence to interfere with, or to influence, the results of an election or nomination for office.

H. Privacy of Records – See Policy 6.05 at
<http://www.dhrm.virginia.gov/hrpolicy/policy.html>

Your personnel record, maintained by your employing agency, is the property of the Commonwealth.

The Virginia Freedom of Information Act (FOIA) provides that an employee may have access to information contained in his or her personnel records with the exception of reference letters and mental and medical records when the treating physician has

indicated that a review of such records might be injurious to the employee's health. The contents of an employee's personnel file may be disclosed to third parties only as provided in the Virginia Freedom of Information Act, the Privacy Protection Act, and Policy 6.05, Personnel Records Disclosure.

If you apply for credit of any kind that will require a credit check or other investigation, you may give written authorization to the Human Resource office to release the needed information.

I. Smoking

The Commonwealth of Virginia promotes a productive and cooperative working environment. No special rights are granted to smokers or nonsmokers. Employees must strive to assure that any personal habits do not interfere with the effective production of work, and must adhere to regular break times.

Smoking is banned in offices occupied and/or operated by executive branch agencies and institutions, including institutions of higher education. Please ask your Human Resource office for information regarding guidelines for smoking outside on state-owned property,

WMCC Office Spaces

All offices in the Center should have a minimum of the following:

Furniture:
--2 therapy chairs
--1 white side table
--1 standing desk
--1 file cabinet/shelving unit
Technology:
--1 computer
--1 computer monitor
--1 keyboard
--1 mouse
-- 1 panic button
--*Trainee Offices—1 camera for recording
--* Trainee Offices—1 external microphone

* Please do not take extras for your office before checking that all occupied offices have the minimums noted above*

Moving In:

While we want you to feel comfortable and as though the office space is personalized, please consider how clients of all cultures and identities may feel in the space and work to make it as inclusive as possible.

Please refrain from decorating with the following:

1. Any adhesives (this will rip up paint and drywall)
2. No candles/flammable objects
3. No strong scents, as some individuals may have sensory sensitivity

Checking Out/Moving Offices

1. Please wipe down and dust all surfaces including desks, shelves, table tops, window ledges
2. Please vacuum the office floors (moving chairs and small furniture)
3. Please report any damages/missing items to WMCC front office as soon as possible

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

William & Mary Division of Student Affairs Strategic Plan 2022-2027

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.

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

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

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

Land Acknowledgment

William & Mary acknowledges the Indigenous peoples who are the original inhabitants of the lands our campus is on today – the Cheroenhaka (Nottoway), Chickahominy, Eastern Chickahominy, Mattaponi, Monacan, Nansemond, Nottoway, Pamunkey, Patowomeck, Upper Mattaponi, and Rappahannock tribes – and pay our respect to their tribal members past and present.

For more information or to hear the reading of the Land Acknowledgement, please visit the [American Indian Resource Center](#).

-September 2021

Labor Acknowledgment

The Board of Visitors acknowledges that William & Mary enslaved people, exploited them and their labor, and perpetuated the legacies of racial discrimination. The Board profoundly regrets these activities, apologizes for them, expresses its deep appreciation for the contributions made by the African and African American members of its community to the vitality of William & Mary then, now, and for all time coming, and commits to continue our efforts to remedy the lingering effects of past injustices.

-February 2021

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:

- o 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:
 - o Effectively communicate information across the division, university, and community through increased collaboration and technology integration
- Objective B:
 - o Ensure all communication reflects our ethic of care with sensitivity to impact
- Objective C:
 - o 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:
 - o Take an equity centered approach to openly address the impacts of power and privilege on individuals and communities at William & Mary
- Objective B:
 - o Integrate restorative practices into our work
- Objective C:
 - o 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:
 - o Amplify and enhance student leadership outcomes
- Objective B:
 - o Leverage campus engagement experiences for whole-person development
- Objective C:
 - o Implement credentialing opportunities for co-curricular development
- Objective D:
 - o 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:
 - o Assess and evaluate departmental budget and programmatic goals to identify critical needs
- Objective B:
 - o Develop support based upon each departments budget and fundraising goals
- Objective C:

- o Boldly embrace the story of the impact Student Affairs has across campus to advance funding
- Objective D:
 - o 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:
 - o Reinforce the paradigm of integrative wellness at the individual and community levels
- Objective B:
 - o Develop relevant and inclusive wellness programs that meet the pressing needs of our students
- Objective C:
 - o Support a work culture that prioritizes wellbeing

Student Affairs Diversity Statement

The Division of Student Affairs promotes a welcoming and affirming environment in which diverse identities and perspectives are embraced and where members experience a sense of belonging. We respect the inherent dignity, wellbeing, and healthy authentic expression of all in our community. We are committed to cultivating an environment where meaningful dialogue is valued and practiced, knowing a strong community is built upon commonalities and differences. We are centered on developing genuine connections, where diversity flourishes in our programs, policies, and services.

WMCC Internship Policies & Procedures

WMCC Mission Statement

The William & 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 & 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

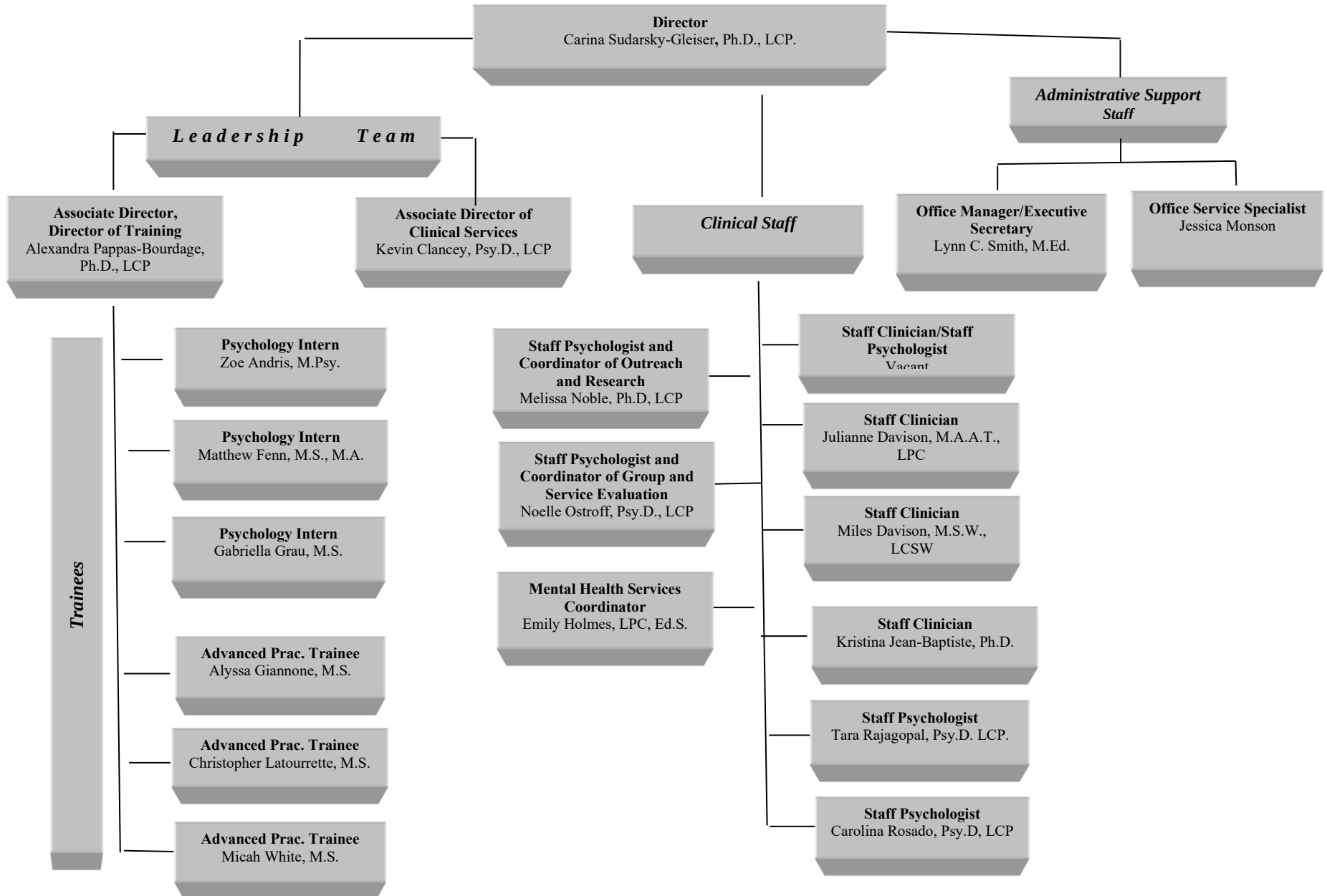
The Counseling Center is designed to provide short-term, time-limited counseling, in order to offer services to as many students as possible. In keeping with the mission of the Division, the Counseling Center strives to provide brief treatment to facilitate adjustment, improve functioning, achieve resolution 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
-

In the event a client presents to WMCC who is outside of the typical scope of services, but there is lack of access to services external to WMCC, providers should request to review the case with the clinical committee to determine if an exception to the scope of services at WMCC is appropriate.

**William & Mary Counseling Center
Organizational Chart
2026-2027**





WILLIAM & MARY

CHARTERED 1693

Counseling Center
McLeod Tyler Wellness Center
Post Office Box 8795
240 Gooch Drive, 2nd 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/fac-staff/>

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 are university-approved accommodations 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. Log in to Workday
2. Select "Personal" → "Request Absence" from the menu on the left of the screen

3. Once the “Request Absence” window pops up, select the day(s) where you wish to take leave and click “Continue”. Note: If you are using the same amount of leave over multiple days (e.g., 8 hours/day for an entire week), you can select all the days and then enter the hours and type of leave at once. If using a different amount of leave per day, submit separate requests.
4. Select the “Type of Absence” (e.g., “sick time off”, “annual time off”, etc.)
5. Enter the number of hours you are requesting off (a full day= 8 hours)
6. Submit request

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.

You can view your leave balance in Workday by selecting “Personal”→”Absence”—“View Absence Balance”

Recording Leave Taken:

Interns are classified as exempt employees, and therefore, only record leave when taken. Leave is recorded by submitting absence requests through the Workday 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 time by the appropriate deadlines. 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.

Wellness Hours/Flex Time/Intern Bonding Hours

Wellness Hours: Per the Vice President of Student Affairs, employees are afforded a weekly “Wellness Hour” to enhance one’s professional wellbeing. The Wellness Hour is intended for use during the workday. It should not be used in place of or as a supplement to one’s university leave benefits. Additionally, this hour should not be prioritized over clinical and/or training responsibilities. Interns are discouraged from using Wellness Hours when the Center may be observing more flexible operating hours. Abuse of these expectations may be cause for loss of such privileges and/or disciplinary action.

Flex Time: Flex time is offered for time dedicated to outreach programming after hours and/or on weekends. Outreach during the lunch hour does not count towards flex time, nor does on-call or Team Day responsibilities that may fall outside of business hours. Additionally, flex time is intended to be used in relatively close proximity to the time that it was earned.

Intern Bonding Hours: Interns are afforded 1 hour for bonding time per month. The time is intended to be used together. Clinical and training requirements are prioritized above bonding hours. If interns are unable to find a shared hour of availability, bonding hours can be saved and used at a later time. If interns wish to plan an extended bonding time with accrued hours, this should be planned during quieter times of the semester (e.g., Winter Break, summer, etc.).

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

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. 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. 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 considered 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 to provide support for affected clinicians. 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. 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 Timeline Expectations:

**Business days denote days in the office.*

Appointment Type	Timeline
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 future scheduled appointments

** These expectations are approximations and have occasional flexibility. Sustained inability to meet the proposed documentation timelines may result in remedial actions. Importantly, any safety/risk information should always 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.

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) 221-3620 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://docs.google.com/document/d/10yyqR_EteDUbHFVBp-9HpNMS-2lp2MFprTmA1XdkM2w/edit?tab=t.0
- 3) Click on the Evaluation to be completed
- 4) Complete the evaluation (be sure to type in your e-mail address 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 Front Desk Staff is unable to format the evaluation by the date the supervisory dyad has selected to share evaluations.
- 6) Once submitted, contact Front Desk staff with the number of the evaluation for formatting (e.g. 8—Eval of Intern by Group Supervisor).
- 7) Once formatted, Front Desk staff will print a copy, place the printed evaluation in the writer's mailbox, then notify the writer that the copy is in their mailbox.
- 8) Review evaluation with supervisor/trainee, if relevant. Should any changes be made to the evaluation (quantitative or qualitative), you must inform 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 trainees 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 may still need to submit leave in Banner for any leave taken until the end of your contract, even if you are no longer coming into the office. (Pay periods may not yet be open on Banner to submit time before the last day in office).

EMERGENCY PROCEDURES FOR CLINICIANS IN THEIR OFFICES

General Office Safety Guidelines:

1. Leave office door unlocked.
2. Attempt to arrange office furniture that provides the clinician seating without any barrier between the clinician and the door.
3. Attempt to end sessions on time. Notify the front desk if you are in session and running over.
4. Do not schedule individual or group sessions over the noon hour or after 5:00 PM.
5. During the academic year, if you do schedule sessions over the noon hour, notify the IC counselor for back-up.
6. If you are feeling unsafe, the first priority is to leave your office. In such a case, the best way to help your client will be by seeking consultation. At a minimum, you may choose to stay with the client but open the office door in order to have access to help and for help to have access to you. In some cases, it may be appropriate to request that another staff member join you in the session.

Procedures for calling Campus Police if a clinician is unable to leave her/his office with a potentially dangerous client:

1. All offices and group rooms have a panic button. Hold the button down for approximately three seconds.
2. Kamco security services will immediately call WMPD and dispatch them to the location the panic button was pressed. If you accidentally press your panic button, call Kamco at 757-220-4300 to report that it was a false alarm.
3. After Kamco has dispatched the WMPD, they will call the front-desk to inform them that WMPD has been dispatched. The Front Desk staff will be able to note the location of the event on the security alarm panels and Kamco can provide this information.
6. Once Campus Police have been called, the front desk staff will:
 - a. Clear the reception area.
 - b. Notify the Director who will assist in clearing the office.

- c. Director and available staff will clear other staff members and clients from offices.

7. Campus Police will:

- a. Send two officers.
- b. Approach door of office.

**** If clinician is unable to reach panic button they should make an effort to alert someone there is a problem (e.g. knock phone off the hook, break something, or create a loud disturbance).



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:

- Trainees are to comply with the Center's hours of operation. The Center is typically 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 occasionally be necessary for outreach purposes and/or to respond to crises.
- If you are seeking to take vacation/leave (i.e., being away from the office when the office open for business), please discuss this request with relevant supervisors/the Training Director before making travel plans such as booking flights.
- 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.
- While there is no formal dress code, professional attire is expected while at work. Our 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 may be perceived as overly casual (i.e., shorts, flip flops, etc.), shows midriff, shows undergarments, and/or significant amounts of upper thighs. The Division of Student Affairs has approved jeans (without significant distressing/rips) as acceptable attire while at work; however, it would be important to consider the context of your meetings for the day. For example, if doing a presentation to the faculty or Board of Visitors, we would encourage more formal attire for the day.
- 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!
- Never have a client sign a blank document and fill in information later
- 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

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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

Interns are presented with multiple opportunities to consume research to inform their clinical practice during the training year. Interns will regularly read research articles for seminars, supervision, and are expected to integrate research in presentations. 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

Special Interest Areas/Concentrations:

The training program seeks to offer training experiences and mentorship tailored to interns' specific interests where possible. Opportunities for additional training and mentorship may include, but are not limited to:

- Group Therapy
- Outreach
- Suicide Prevention Coalition
- Multicultural Consultation
- UCC Leadership/Student Affairs
- Program Evaluation
- Specific Clinical Populations

Interns are encouraged to express if they would like to pursue additional training opportunities to the Training Director. The program's Training Committee would meet to determine if offering additional training experiences are feasible. The program does not guarantee that additional training/mentorship in a specific area will be available each year. Special interest areas do not take priority over standard requirements of the internship. There is no consequence to an Intern's standing with the program if they do not express a desire to pursue additional training opportunities beyond the standard requirements of the internship.

Hours¹:

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.²
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 Interns use an hour log provided by the program to record their hours.

² 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).

1. **Individual/Couples Therapy:** Schedule individual/couples for an average of 16 clinical hours/week.^{3,4,5}
2. **Group Therapy:** Co-facilitate one therapy group with a senior staff member during the Fall and Spring semesters.
3. **Initial Consultations:** Schedule three initial consultations per week on Team Day, weekly throughout the Fall and Spring semesters.⁶
4. **Intakes:** Schedule three intake appointments/week in the Fall and Spring semesters.⁷
5. **Urgent/Crisis & Consultation Appointments:** In collaboration with one's teammate, urgent/crisis and consultation appointments are distributed throughout the day.^{8,9}
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:

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 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.

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

⁵ If an intern is pursuing additional group therapy experience (i.e., co-leading more than one group during a semester), adjustments are made to the individual/couples therapy hours expectations (See Weekly Activity Summary for details).

⁶ 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.

⁷ The number of Intakes expected per week may vary if an intern is engaging in additional group therapy experience (see Weekly Activity Summary for details).

⁸ Distribution of appointments between teammates may not be equal, due to the unpredictable nature of such appointments.

⁹ 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.

3. **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).^{10,11}
4. **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.

Assessment ¹²:

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.¹³ 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)¹⁴ including:
 - i. Demographics
 - ii. Relevant Background/History
 - iii. Medical History
 - iv. Presenting Concerns

¹⁰ 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.

¹¹ 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.

¹² Interns who are interested in acquiring additional 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.

¹³ 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.

¹⁴ The case presentation write up should be printed and distributed to staff members at least **24 hours** prior to the presentation.

- v. Assessment data (instruments, rationale, results)
 - vi. Diagnosis
 - vii. Treatment Summary
 - viii. Theoretical Approach & Conceptualization
 - ix. Relevant Research/Literature (include citations)
 - x. Discussion Questions
 - xi. 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:

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 addition 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.¹⁵
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.

¹⁵ Interns may receive additional weekly group therapy supervision if participating in multiple therapy groups.

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.¹⁶

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.¹⁷

Seminars:

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.¹⁸ 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

¹⁶ 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.

¹⁷ 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.

¹⁸ 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.

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.¹⁹

3. **Student Affairs Meetings:** Interns attend all Student Affairs meetings, typically two hours per month, including semester “Kickoffs” and end of semester celebrations.²⁰

Research²¹:

1. **Research Presentation:** Interns present their personal research to the Counseling Center staff. This presentation can be scheduled at any time during the training year.²²

Teaching:

1. **Practicum Seminar Teaching Presentation:** Interns present on a topic of their choice during the practicum seminar (fall or spring semester).²³

Summer Project:

1. **Summer Project:** Interns will complete a summer project of their choosing. Examples include creating psychoeducational brochures, completing a program evaluation using internal data, developing resource guides, developing training resources, improvements to counseling center website, projects identified as Counseling Center needs, etc.²⁴

¹⁹ Interns are always welcome to request an individual meeting with the Training Director outside of these regular meetings.

²⁰ Any absence from a Student Affairs gathering should have prior approval from the Training Director and the intern's individual supervisor.

²¹ It is expected that interns will apply scholarly work and research findings in all activities and roles assumed during the internship year.

²² Interns who decide to present during the academic year (vs. summer) should schedule early in the semester to increase the likelihood for staff availability.

²³ Interns should consult with practicum seminar co-leader(s) and the Training Director before finalizing a presentation topic and to coordinate scheduling.

²⁴ Interns should seek approval of their summer project idea with their primary supervisor(s) and the Training Director before moving forward.

Evaluations²⁵:

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: 1st quarter (approximately October), 2nd quarter (approximately January), 3rd quarter (approximately April), and end of internship/4th quarter (July).
3. **Group Supervisor(s) Evaluations:** Interns receive evaluations from group supervisor(s) at mid-group and end-group.
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 Seminar²⁶:**
 - 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:** Licensed staff member(s) observes and completes the outreach presentation evaluation.²⁷

²⁵ 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.

²⁶ There is no performance evaluation for Integrated Seminar.

²⁷ 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.

9. **Teaching Presentation Evaluation:** Licensed staff member(s) 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 supervision) whenever receiving an evaluation of themselves, except for presentation evaluations.²⁸
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.²⁹
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).

²⁸ Interns should share their evaluation of supervision *after* receiving the supervisor's evaluation to eliminate any concerns of retaliation.

²⁹ 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.

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.



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.

Psychology Intern (sign)

Date _____

Psychology Intern (print)

Weekly Activity Summary

Hours denoted are an approximation of average time per week per category	Fall	Fall (w/ 2 groups)	Spring	Spring (w/ 2 groups)	Summer	Summer (w/ group)
Clinical Service						
Individual/Couples Therapy	16	14	14	13	10	9
Group Therapy	1.5	3	1.5	3	0	1.5
Initial Consultations	1.5	1.5	1.5	1.5	1	1
Intake	3	3	3	2	1.5	1.5
Assessment	Varied	Varied	Varied	Varied	Varied	Varied
Crisis	1	1	1.5	1.5	1	1
Consultation & Outreach	Varied	Varied	Varied	Varied	Varied	Varied
Supervision of Practicum Students	0	0	2	2-2.5	0	0
On-Call Response	Varied	Varied	Varied	Varied	Varied	Varied
Subtotal:	23	22.5	23.5	23-23.5	13.5	14
Supervision, Seminar, Research						
Individual Supervision	2	2	2	2	2	2
Group Therapy Supervision	1.5	2	1.5	2-2.5	0	1
Integrative Seminar	2	2	0	0	0	0
Supervision Seminar	0.5	0.5	0.5	0.5	0	0
Diversity Seminar	0.5	0.5	0.5	0.5	0	0
Case Conference	1	1	1	1	2	2
Networking/Professional Development Meetings	Varied	Varied	Varied	Varied	0	0
Prep for Seminars/Readings	1	1	1	1	0	0
Research/Prep for Research Presentation/Program Evaluation/Professional Development	Varied	Varied	Varied	Varied	12	12
Subtotal:	8.5	9	6.5	7-7.5	16	17
Administrative						
Staff Meeting	0.25	0.25	0.25	0.25	0	0
Documentation/Paperwork	5	5	5	5	5	5
Supervision Prep (Self & Practicum Student)	1	1	2	2	1	1
Phone Calls/Email	Varied	Varied	Varied	Varied	Varied	Varied

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
Subtotal:	7	7	8	8	6	6
Other						
Intern Bonding	.25	.25	.25	.25	0	0
Wellness Hour	1	1	1	1	1	1
Summer Project	0	0	0	0	3	3
Subtotal:	1.25	1.25	1.25	1.25	3	3
TOTAL HOURS/WEEK	39.75	39.75	39.25-40.25	41-42.5	38.5	40

INTERN SEMINARS COORDINATORS

SEMINAR	COORDINATOR(S)	FORMAT	FREQUENCY
INTEGRATIVE SEMINAR	Julianne Davison, LPC Mel Noble, Ph.D.	Different Presenters/ Readings +Discussion	1 hr, 2x/week-Fall semester
DIVERSITY SEMINAR	Kevin Clancey, Psy.D. Carolina Rosado, Psy.D.	Readings + Discussion	1 hr every other week- Fall & Spring semesters
SUPERVISION SEMINAR	Tara Rajagopal, Psy.D. Carina Sudarsky- Gleiser, Ph.D.	Readings+ Discussion + Case Presentation	1 hr every other week-Fall & Spring semesters *Seminar leaders may change in Spring per Supervision of Supervision assignments

[illegible]

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 Meeting	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	0.00	0.00	0.00	0.00	0.00
Overall Total Hours	0.00														

REQUIREMENTS CHECKLIST

Case Presentation

Outreach Requirements

___ Orientation 1:

___ Orientation 2:

___ Screening Program:

___ Didactic/Interactive Presentation 1:

___ Didactic/Interactive Presentation 2:

___ Didactic/Interactive Presentation 3:

Outreach Notes:

Outreach must be direct contact with an audience. Screening contact does count, but only the time actually spent with the person you are screening. After the screening outreach, estimate your total time of face to face contact. Outreach prep is any research, planning and organizing you do.

Other

Client Demographics

of clients

[illegible]

Weekly Total Hours		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Overall Total Hours		0.00							

REQUIREMENTS CHECKLIST

Case Presentation _____

Outreach Requirements

____ Didactic/Interactive Presentation 1:	_____
____ Didactic/Interactive Presentation 2:	_____
____ Didactic/Interactive Presentation 3:	_____

Client Demographics

of clients

African-American / Black / African Origin	_____
Asian-American / Asian Origin / Pacific Islander	_____
Latino / a / x / Hispanic	_____
American Indian / Alaska Native / Aboriginal Canadian	_____
European Origin / White	_____
Biracial / Multiracial	_____
No Race Provided	_____
Heterosexual	_____
Gay	_____
Lesbian	_____
Bisexual	_____
Asexual	_____
Queer	_____
Demisexual	_____
Other / Questioning	_____
Male	_____
Female	_____
Transgender	_____
Non-binary	_____
Genderqueer	_____
Questioning Gender	_____
Physical / Orthopedic Disability	_____
Blind / Visually Impaired	_____
Deaf / Hard of Hearing	_____
Learning / Cognitive Disability	_____
Developmental Disability	_____

[illegible]

0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
------	------	------	------	------	------	------	------	------	------	------	------	------



Internship Overall Total

0.00

Intern:

Supervisor(s):

Summer Overall Total:

0.00

Clinical/Direct Hours:

0.00

		5/31	6/7	6/14	6/21	6/28	7/5	7/12	7/19	7/26
<u>ACTIVITY</u>	<u>I</u>	<u>W1</u>	<u>W2</u>	<u>W3</u>	<u>W4</u>	<u>W5</u>	<u>W6</u>	<u>W7</u>	<u>W8</u>	<u>W9</u>
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									

Manual Hours Check

Fall Direct Service Total:

Fall Overall Total:

Spring Direct Service Total:

Spring Overall Total:

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									
<u>Sick Time</u>	0.00									
<u>Vacation</u>	0.00									
Weekly Total Hours	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Overall Total Hours	0.00									

	# 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

Direct Service Overall:

0.00

Overall Internship Total:

0.00

Supervision

**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 30 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: Dr. Melissa Noble Ph.D.

____ Yes, I give my consent to recording of my counseling sessions with: Dominique Toscano M.A.

____ 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)



WILLIAM & MARY

CHARTERED 1693

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:				
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:				

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
Supervisor _____

Supervisee _____

Date _____

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:

Site Supervision Expectations

Supervision Type	Hour Requirements	Evaluation Timeline
Individual Supervision	2 hours/week	Interns: Quarterly (~October; ~January; ~April; End of Internship) Practicum: 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. Provide feedback as relevant on documentation.
- 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>

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://docs.google.com/document/d/10yyqR_EteDUbHFVBp-9HpNMS-2lp2MFprTmA1XdkM2w/edit?tab=t.0
- 3) Click on the Evaluation to be completed
- 4) Complete the evaluation (be sure to type in your e-mail address 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 Front Desk Staff is unable to format the evaluation by the date the supervisory dyad has selected to share evaluations.
- 6) Once submitted, contact Front Desk staff with the number of the evaluation for formatting (e.g. 8—Eval of Intern by Group Supervisor).
- 7) Once formatted, Front Desk staff will print a copy, place the printed evaluation in the writer's mailbox, then notify the writer that the copy is in their mailbox.
- 8) Review evaluation with supervisor/trainee, if relevant. Should any changes be made to the evaluation (quantitative or qualitative), you must inform 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.

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 _____ (supervisee) and _____ (supervisor) at the William & Mary Counseling Center, signed on _____, 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 designated evaluation times

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 2-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 _____ through _____.

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).

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).



WILLIAM & MARY

CHARTERED 1693

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 30 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: Kevin Clancey, PsyD

____ Yes, I give my consent to recording of my counseling sessions with: Nailah Alston-Iszard, MEd
(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)

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	Evaluation of Psychology Interns by Supervisor Form Supervisors integrate information from digital recordings, supervision discussions, case/supervision/outreach presentations, supervisor meetings ' feedback, etc. to complete the evaluation form.	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.	
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/)
- 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

V. COMMUNICATION AND INTERPERSONAL SKILLS

VI. ASSESSMENT

VII. INTERVENTION

- A. Individual Therapy
- B. Crisis Intervention
- C. Group Therapy
- D. Outreach Programming

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VIII. SUPERVISION

[illegible]

IX. CONSULTATION AND INTERPROFESSIONAL/
INTERDISCIPLINARY SKILLS

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
☐ Individual Psychotherapy	☐ Video recordings
☐ Group Psychotherapy	☐ Co-therapy
☐ Day Crisis Intervention	☐ Verbal summary of cases
☐ Intake Assessment	☐ Case documentation/written notes
☐ Objective/Personality Assessment	☐ Assessment data
☐ Symptom Assessment	☐ Written intakes or assessment reports
☐ On-call Crisis Intervention	☐ Case presentations
☐ Outreach	☐ Outreach/Research presentations
☐ Consultation	☐ Case Conference
☐ Supervision Provision	☐ Didactic seminars
☐ Other (Please describe) _____	☐ Feedback provided by other supervisors/senior staff
	☐ 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 _____

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 identities _____
8. 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
☐ Group	☐ Video Recording & Supervision Discussion
	☐ 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

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
0	0
	0

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.

_____ Attendance

Participation

_____Quality of presentation (if applicable)

Preparedness

_____ **Overall Rating:**

Comments:

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper has a slight shadow on its right side, suggesting it's resting on a surface.

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	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 _____ 2. Demonstrates ability to use evidence based methodology to conduct suicide risk assessment _____
II. ETHICAL AND LEGAL STANDARDS	1. Demonstrates attention to ethical and legal concerns _____
III. INDIVIDUAL AND CULTURAL DIVERSITY	1. Demonstrates ability to integrate issues of identity into their case conceptualization, treatment planning, and interventions _____ 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 _____ 3. Demonstrates sensitivity to issues of power and privilege as they interact with client _____
IV. PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS	1. Demonstrates integrity and a professional demeanor in the interaction with the client _____ 2. Demonstrates concern for the client's welfare _____ 3. Demonstrates ability to monitor their reactions and behaviors _____ 4. Demonstrates receptiveness to feedback _____
V. COMMUNICATION AND INTERPERSONAL SKILLS	1. Provides clear, succinct, and comprehensive written case presentation report _____ 2. Presents in a clear, succinct, and comprehensive manner which aids the audience in understanding the therapeutic work _____ 3. Demonstrates ability to present the case taking in consideration the allotted schedule, allowing time for questions and feedback _____ 4. Demonstrates effective use of technology and/or visual aids to provide understanding of the work being presented _____
VI. ASSESSMENT	1. Demonstrates understanding of human behavior within its context (e.g., family, social, societal and cultural). _____ 2. Demonstrates ability to select, use and interpret assessment data being sensitive to clients' cultural identity(ies) _____

	3. Demonstrates ability to collect relevant data using multiple sources and methods appropriate to the goals and questions of the assessment _____ 4. Demonstrates ability to accurately interpret assessment data according to professional standards and guidelines _____ 5. Demonstrates the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process. _____ 6. Demonstrates ability to make appropriate diagnostic impressions based on assessment data _____ 7. Demonstrates current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology. _____ 8. Demonstrates ability to use assessment data to inform case conceptualization, intervention, and recommendations _____
VII. INTERVENTION	1. Demonstrates appropriate level of rapport with client _____ 2. Demonstrates ability to gather data and to facilitate exploration _____ 3. Demonstrates ability to integrate data into meaningful conceptualizations _____ 4. Demonstrates ability to conceptualize according to an identified theoretical orientation _____ 5. Demonstrates ability to formulate treatment strategies that integrate theory, current evidence-based information, assessment findings, diversity and contextual variables _____ 6. Appropriately utilizes complementary approaches/services based on client need and diversity/cultural/contextual variables _____ 7. Demonstrates use of self as a therapeutic tool in treatment planning and intervention _____ 8. Helps client identify and understand appropriate goal for therapeutic work _____ 9. Demonstrates ability to handle theirs and their client's affect _____ 10. Demonstrates effective timing of interventions _____ 11. Demonstrates ability to expand own skills in order to benefit the client _____
IX. CONSULTATION AND INTERPROFESSIONAL/ INTERDISCIPLINARY SKILLS	1. Demonstrates willingness to consult with other professionals to provide the most effective treatment for the client _____

Overall Average Rating _____

COMMENTS including particular strengths and areas for further growth:

This image shows a full page of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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	1. Demonstrates cultural sensitivity in the supervisory relationship with their supervisees _____ 2. Demonstrates sensitivity to issues of power and privilege as they interact with supervisee _____
IV. PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS	1. Demonstrates integrity, commitment, and a professional demeanor in the supervisory role _____ 2. Demonstrates ability to monitor their reactions and behaviors as a supervisor _____ 3. Demonstrates receptiveness to feedback _____
V. COMMUNICATION AND INTERPERSONAL SKILLS	1. Provides clear, succinct, and comprehensive written presentation report _____ 2. Presents in a clear, succinct, and comprehensive manner which aids the audience in understanding the supervisory work _____ 3. Demonstrates ability to present taking in consideration the allotted schedule, allowing time for questions and feedback _____ 4. Demonstrates effective use of technology and/or visual aids to provide understanding of the work being presented _____
VI. SUPERVISION	1. Demonstrates ability to establish and maintain a safe and supportive supervisory relationship _____ 2. Demonstrates respect and offers support for their supervisee _____ 3. Assists trainee in identifying appropriate goal for supervision _____ 4. Demonstrates appropriate use of role as supervisor and supervisory task(s) _____ 5. Appropriately selects and utilizes a theoretical model of supervision _____ 6. Demonstrates clarity and theoretical soundness related to conceptualization of supervision work _____ 7. Supports trainee's use of self as a therapeutic tool _____ 8. Demonstrates awareness of self and utilizes this awareness to support trainee development _____ 9. Demonstrates ability to monitor their supervisee professional functioning and quality of services provided _____

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	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. Demonstrated consideration of needs of the target audience (academic calendar, student's schedules, etc.) ____ 2. Developed an appropriate outline for the time allotted ____ 3. Developed a marketing plan for this presentation if necessary/indicated ____ 4. Demonstrated consideration of logistics (room size, AV needs, etc.) ____ 5. Provided an introduction to the program ____ 6. Facilitator was knowledgeable about the content area ____ 7. Material was presented in a clear, understandable manner ____ 8. Transitions between topics were managed in a smooth manner ____ 9. Engaged the audience in an effective manner (e.g. used interactive strategies, activities from different modalities) ____ 10. Facilitator was responsive to the needs of the audience throughout the presentation (e.g. answered questions effectively, handled disruptive participants) ____ 11. Demonstrated effective use of time allotted, including enough time for questions ____ 12. Handouts/worksheets given to the participants were useful ____ 13. Provided a closing summary of the program ____

[illegible]

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.

I. RESEARCH	1. Demonstrates theoretical rationale for their selected research question or review approach _____ 2. Demonstrates a thorough understanding of the existing evidence base and literature in their area of focus _____ 3. Demonstrates appropriate use of research design and methodology _____ 4. Identifies appropriate directions for future research based on current findings or status of evidence base _____
II. ETHICAL AND LEGAL STANDARDS	1. Demonstrates attention to legal and ethical issues related to the conduct of research _____
III. INDIVIDUAL AND CULTURAL DIVERSITY	1. Demonstrates knowledge, skills, and competence to attend to issues of diversity and contextual variables in the design, methodology, and discussion of research findings _____
IV. PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS	1. Strives to promote accuracy/Demonstrates integrity regarding the science of psychology _____ 2. Demonstrates awareness of their professional and scientific responsibility to society and the communities potentially impacted by the research study _____ 3. Demonstrates receptiveness to feedback _____
V. COMMUNICATION AND INTERPERSONAL SKILLS	1. Presents in a clear, succinct, and comprehensive manner which aids the audience in understanding the study _____ 2. Communicates research findings with clarity while identifying any relevant limitations to conclusions and implications of practical use of findings _____ 3. Demonstrates ability to present the study taking in consideration the allotted schedule, allowing time for questions and feedback _____ 4. Demonstrates effective use of technology and/or visual aids to provide understanding of the research being presented _____

Overall Average Rating _____

COMMENTS including particular strengths and areas for further development:

TRAINEE EVALUATION OF SUPERVISION

Name of Supervisor: _____

Name of Supervisee: _____

Evaluation Period: _____ to _____

Rating Scale: 1 = Strongly Disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly Agree
ND = No Data

1. _____ Concrete feedback was provided.
2. _____ Questions/suggestions helped me conceptualize cases and develop treatment plans.
3. _____ My supervisor helped me develop clinical interviewing skills to assist with treatment planning.
4. _____ Various ways to handle client situations were provided.
5. _____ Different treatment approaches were discussed.
6. _____ My supervisor assisted me in understanding the implications of using different counseling approaches.
7. _____ I was provided with helpful suggestions when at an impasse with a client.
8. _____ Supervision focused on both content (e.g., client concerns, interventions) and affect (e.g., emotional reactions).
9. _____ Interactions between me and my supervisor were explored as a medium for understanding my work with clients.
10. _____ Personal goals were established and periodically renegotiated with my supervisor.
11. _____ My supervisor helped me identify my strengths.
12. _____ Supervision helped me develop skills and gain insight from my session recordings.
13. _____ Supervision explored verbal and nonverbal behavior in my clinical work.

14. ____ Supervision helped me understand and maintain ethical behavior in various aspects of my work.
15. ____ My supervisor attended to individual and cultural diversity issues of clients.
16. ____ My supervisor attended to my individual and cultural diversity as related to clinical work.
17. ____ Resources were provided when I requested them.
18. ____ I was provided with feedback about attitudes and behaviors that might impact my professional work.
19. ____ Adequate time was allocated for supervision.
20. ____ My supervisor was prompt and for supervision sessions.
21. ____ My supervisor was prepared and engaged during supervision sessions.
22. ____ When needed, my supervisor was available to assist outside of regularly scheduled supervision time.
23. ____ The criteria for evaluation were explained clearly by my supervisor.
24. ____ Feedback and evaluation were based on observation of my work.
25. ____ Concern was shown for me as a person.
26. ____ I felt treated with respect.
27. ____ My ideas and concerns were respected.
28. ____ My supervisor acknowledged their limitations.
29. ____ If relevant, disagreements with my supervisor were supported and discussed openly.
30. ____ My supervisor facilitated support for problems encountered in the training setting.

_____ Overall rating of the supervision experience

Trainee Comments:

Supervisor 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

15. Allowed time address immediate concerns or personal issues.	1	2	3	4	5
16. Was effective as a liaison to other staff in the agency.	1	2	3	4	5
17. Appropriately supported my autonomy.	1	2	3	4	5
18. Was able to appropriately confront	1	2	3	4	5
19. Kept interns apprised of changes within the agency and the university.	1	2	3	4	5
20. Supported me in my professional development.	1	2	3	4	5
21. Was an effective professional mentor.	1	2	3	4	5

Comments

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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
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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
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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

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

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

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:

B: Demonstrates ability to effectively use supervision

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:

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:

VI. ASSESSMENT

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

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

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
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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

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

A. Degree training opportunities were available to meet this objective

	5	4	3	2	1
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Comments:

B. The degree objective was met for you

	5	4	3	2	1
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Comments:

C. Strengths and limitations. The quality of the training in meeting this objective was

	5	4	3	2	1
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Comments:

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

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
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Comments:

B. The degree objective was met for you	5	4	3	2	1
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Comments:

[illegible]

C. Strengths and limitations. The quality of the training in meeting this objective was

Comments:

[illegible]

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

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

A. Degree training opportunities were available to meet this objective

	5	4	3	2	1
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Comments:

B. The degree objective was met for you

	5	4	3	2	1
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Comments:

C. Strengths and limitations. The quality of the training in meeting this objective was

	5	4	3	2	1
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Comments:

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
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Comments:

B. The degree objective was met for you

5	4	3	2	1
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Comments:

C. Strengths and limitations. The quality of the training in meeting this objective was

5	4	3	2	1
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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
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Comments:

B. The degree objective was met for you

5	4	3	2	1
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Comments:

C. Strengths and limitations. The quality of the training in meeting this objective was

5	4	3	2	1
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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

Folder	Check	Item
1. Internship Application & Acceptance Letter	☐	Internship Application
	☐	Acceptance Letter
2. Self-Assessments	☐	Beginning of year
	☐	End of year
3. Evaluation of Intern by Supervisor(s)	Evaluation of Intern by Individual Supervisor	
	☐	1 st quarter
	☐	2 nd quarter
	☐	3 rd quarter
	☐	End of Internship Evaluation
	Group Supervisor(s)	
	☐	Mid-Fall (If applicable second supervisor)
	☐	End Fall (If applicable second supervisor)
	☐	Mid-Spring (If applicable second supervisor)
	☐	End Spring (If applicable second supervisor)
	Diversity Seminar	

4. Evaluations of Seminar Performance	☐	Fall
	☐	Spring
	Supervision Seminar	
	☐	Fall
	☐	Spring
	☐	Supervision Presentation Evaluation
5. Evaluations of Intern in Role of Supervisor	Evaluations by Supervisor of Supervision	
	☐	Mid-Semester Spring Evaluation
	☐	End of Semester Spring Evaluation
	Evaluations of Intern Supervisors by Prac Supervisees	
	☐	Mid-Semester Spring Evaluation
	☐	End of Semester Spring Evaluation
6. Outreach Projects & Evaluations	Outreach Presentation	
	☐	Evaluation of Outreach Presentation
	☐	Copy of Presentation in file
	Program Evaluation	
	☐	Program Evaluation Report
	☐	Program Evaluation Presentation
	Research Presentation	

	☐	Research Presentation Evaluations
7. Presentations	Case presentation reports and Evaluations	
	☐	Fall Evaluation
	☐	Fall Copy of Report
	☐	Spring Evaluation
	☐	Spring Copy of Report
	Practicum Seminar Teaching Presentation	
	☐	Practicum Seminar Teaching Presentation Evaluation
	☐	Practicum Seminar Teaching Presentation Copy of PP
8. Summer Project	☐	Copy of Summer Project
9. Passing Criteria Form	☐	Copy of Passing Criteria Form
10. Hour Log	☐	Copy of Hours Log
11. Evaluation of Internship Training	☐	Evaluation of Internship Training
	☐	Evaluation of the Training Director
	Evaluations of Seminars by Interns	
	☐	Diversity Seminar
	☐	Supervision Seminar
	☐	Integrated Seminar
	Evaluation of Individual Supervisor	

	☐	1 st quarter
	☐	2 nd quarter
	☐	3 rd quarter
	☐	End of Internship Evaluation
	Evaluation of Group Supervisor(s)	
	☐	Mid-Fall (If applicable second supervisor)
	☐	End Fall (If applicable second supervisor)
	☐	Mid-Spring (If applicable second supervisor)
	☐	End Spring (If applicable second supervisor)
	Evaluation of Supervisor of Supervision	
	☐	Mid-Semester
	☐	End of Semester
12. Miscellaneous	☐	Certificate of Completion
	☐	Any Other Documents

Intern Signature

Date

Primary Supervisor Signature

Date

Training Director Signature

Date