The South Florida Consortium Internship Program Handbook

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INTRODUCTION

The South Florida Consortium Internship Program (SFCIP) was developed by the Center for Psychological Studies of Nova Southeastern University (NSU). It is a collaborative effort of Nova Southeastern University and cooperating agencies whose mission is to offer a 2000-hour doctoral internship for qualified psychology doctoral students. Nova Southeastern University's South Florida Consortium Internship Program (SFCIP) is a member in good standing in the Association of Psychology and Postdoctoral Internship Centers (APPIC). The SFCIP is not accredited by the American Psychological Association, but has submitted its application for initial review: http://www.apa.org/ed/accreditation/programs/initial-accred.aspx. The SFCIP is exclusively affiliated with the NSU Center for Psychological Studies (CPS) doctoral programs, meaning it only accepts applications from student enrolled in the NSU CPS doctoral programs.

ORGANIZATION AND STRUCTURE

The Center for Psychological Studies (CPS) is housed in the Division of Applied Interdisciplinary Studies (DAIS). The DAIS mission is to engage the best minds across disciplines to seek solutions to contemporary and emerging challenges in the global community through research, training and practice. CPS is one of four DAIS units; the others include the following: Graduate School of Humanities and Social Sciences, Mailman Segal Center, and the Institute for the Study of Human Services, Health, and Justice.

CPS is committed to providing the highest quality educational experience to current and future psychologists and mental health and counseling professionals. This training experience provides students with a sophisticated understanding of psychological research and the delivery of superior mental health care. CPS is located on the main campus of Nova Southeastern University. The Center has 42 full-time faculty and offers two APA-accredited doctoral programs in clinical psychology (Ph.D. and Psy. D.), as well as a doctoral program in school psychology. Master’s programs in counseling (online), general psychology, mental health counseling, and school counseling, and a specialist program in school psychology are also offered. CPS offers a Continuing Education program series approved by APA, the National Association of School Psychologists, and the Florida Boards of Licensed Clinical Social Workers, Marriage and Family Therapy, and Mental Health Counseling. CPS is also approved to offer continuing education by the State of Florida Board of Medical Therapies/Psychology, Office of School Psychology and is an NBCC-Approved Continuing Education Provider (ACEPTM).

The SFCIP is governed through an Executive Board (EB) which is chaired by the Internship Director of Training and its members include the Dean of the Center for Psychological Studies (CPS), the SFCIP Chief Psychologist, and the Coordinator of Internship Training and Liaison Services. The EB has the authority and responsibility for maintaining SFCIP compliance with the guidelines of the Association of Psychology
Postdoctoral and Internship Centers (APPIC) and with the criteria for accreditation of the American Psychological Association (APA) in preparation for application submission for initial review. The Executive Board maintains SFCIP resources, evaluates prospective partner sites for new or continued participation in the SFCIP, and ensures the quality of the clinical supervision within the internship. The Executive Board also has supervision, control and direction over the property, business and affairs of the SFCIP and determines its standards, policies, and procedures, and any changes to these. An Operations Board also chaired by the Internship Director of Training and comprised of one representative from each Member site (usually a primary supervisor), the SFCIP chief psychologist and the Coordinator of Internship Training and Liaison Services, as well as an intern representative serves as the management arm of the Executive Board. This committee has the authority and responsibility for insuring the quality of the SFCIP training program. The Operations Board meets at least quarterly to assist the Internship Director of Training with intern selection, intern training and evaluation, and program monitoring, evaluation, and improvement.

PHILOSOPHY AND GOALS

The SFCIP follows the Practitioner Informed by Science Model of training, which adheres to a philosophy of training geared toward preparing interns to enter careers concerned primarily with direct service delivery as lifelong consumers of research. The SFCIP encourages the acquisition of “generalist” skills rather than narrowly defined specialties with an understanding that general professional psychology competencies may be attained in specialized settings. The program is designed to provide experiential training and supervision focused on attainment of core psychological competencies. These are balanced with formal instruction and mentoring in a broad base of clinical knowledge and skills during supervision and weekly training activities throughout the internship year. The SFCIP seeks to develop strong mentoring relationships between supervisors and interns. These relationships enhance the intern’s personal and professional growth by fostering the development of competencies in scientific thinking, ethical decision making, and professional practice.

The SFCIP is a post-practicum, post-coursework, intensive clinical training program designed as the capstone experience for doctoral psychology students as they move toward greater autonomy in practicing professional psychology. The goal of the SFCIP is to assist interns in developing the foundational and functional competencies expected of a doctoral level psychologist at the entry level. To this end, all SFCIP interns will develop proficiency in the execution of a broad range of clinical, assessment, consultation, program evaluation, and supervision skills in community settings. The internship training goals and objective are consistent across all sites:

Goal #1: Interns will be prepared to competently practice professional psychology.

Objective A: Interns will demonstrate active participation in the program training activities.
Objective B: Interns will follow APA ethical code of conduct and applicable laws.

Objective C: Interns will routinely use the scholarly/professional literature to guide their clinical work.

Goal #2: Interns will develop proficiency in evaluation, diagnostic, and general assessment skills.

Objective A: Interns will be proficient in completing written clinical evaluations of patients.

Objective B: Interns will be able to use DSM and/or ICD systems to diagnose and provide a multi-axial assessment for patients.

Objective C: Interns will take cultural and ethnic diversity into consideration in developing an appropriate assessment strategy for each client.

Goal #3: Interns will develop proficiency in providing clinical interventions.

Objective A: Interns will be able to develop an appropriate treatment plan based upon conceptualization, theoretical understanding, and empirical support for each client’s presenting problem.

Objective B: Interns will take into account implications of diversity in relation to conceptualization, treatment planning, and therapist/client interaction.

Objective C: Interns will identify and discuss alternative theoretically-based methods of treating cases.

Objective D: Interns will demonstrate the ability to consistently establish strong therapy alliances and effectively implement an array of psychotherapeutic interventions.

Goal #4: Interns will develop basic proficiency in consultation, program evaluation, and supervision.

Objective A: Interns will be able to provide appropriate in-service training sessions.

Objective B: Intern will effectively participate in a multi-disciplinary team.

Objective C: Intern will participate in program evaluation activities.

Objective D: Intern will seek consultation or supervision as needed and use it productively.
Objective E: Intern will be able to understand how to use, and/or provide competent developmentally appropriate supervision.

The SFCIP training curriculum is designed to develop intern competencies utilizing the following training methods, and meet minimum competencies as follows:

1. To prepare SFCIP interns for competent professional practice (Goal 1), at the start of the training year, interns are provided with an orientation to both the SFCIP internship program and to their respective sites. These orientation sessions address expectations for professional dress and comportment in the workplace, ethical behavior, grievance and due process policies, and administrative/documentation requirements. NSU and site supervisors and administrators continue to provide on-going mentoring and direct supervision around these and other professional practice issues throughout the year as well both on the job and during individual and group supervision. In addition, clinical supervision routinely includes discussions of interventions supported by the current scientific literature when cases are presented, in keeping with the SFCIP’s model of developing “practitioners informed by science.” All SFCIP interns will also complete one presentation per year for their fellow interns on a topic of clinical interest to them, developed from reviews of the research literature, as another method of keeping current with the scientific base. Moreover, a least twice a month, interns attend Professional Development didactic workshops that provide instruction on a range of professional practice issues, including ethics, cultural competence, and evidence-based assessment and intervention approaches (see Appendix A for a schedule of weekly seminars). It is expected that by the end of the training year, all SFCIP interns will meet minimum competencies within the area of professional practice by participating in all required training activities and submitting relevant documentation, consistently recognizing ethical issues and seeking out supervision to resolve issues, and identifying areas of knowledge that need enhancement and making attempts to apply relevant knowledge to clinical work. Ratings of “meets” or “exceeds” expectations on the final intern evaluation will determine whether minimum competencies were attained.

2. All SFCIP interns are trained to develop proficiency in evaluation, diagnostic, and general assessment skills (Goal 2) primarily through direct service delivery. All SFCIP interns complete weekly intakes at their respective sites as a means of refining diagnostic and treatment planning skills. All SFCIP interns are required to complete 6 psychological evaluations under the direct supervision of a licensed psychologist during the training year. While the evaluation type, instruments, and report length may vary across sites depending upon the needs of the populations served, all SFCIP interns’ evaluations must include, at minimum, the following: history, direct observation, formal assessment instruments and integration of all individual components to yield diagnostic impressions and recommendations. Weekly seminars (i.e., Professional Development didactics, Grand Rounds, and Intern Presentations; see Appendix A for a schedule of weekly seminars) include training in assessment instruments, report writing, and diagnostic considerations.
In addition, interns discuss assessment cases during weekly individual and group supervision sessions. At the SFCIP sites with practicum students, interns also provide mentoring to practicum students, including supervision of test administration, scoring, report writing, and feedback under the supervision of a licensed psychologist. At all SFCIP sites, interns provide consultation, under direct supervision from a licensed psychologist, to other professionals and/or families regarding the results of psychological evaluations and any implications and/or recommendations for intervention/referral yielded from psychological reports. In addition, most SFCIP sites also provide additional population-specific didactic training and/or clinical meetings, which cover specific assessments for their clients (i.e., psychoeducational testing within schools, performing bed-side assessments within a hospital setting, etc.). It is expected that by the end of the training year, all SFCIP become proficient in evaluation, diagnostic and general assessment skills, and meet minimum competencies within this area by receiving ratings of “meets” or “exceeds” expectations on the final intern evaluation, including: readily completing written evaluations with minimal supervisory input; accurately using the DSM-5/ICD-9 or 10 to diagnose clients, and taking cultural and ethnic diversity into consideration in developing an appropriate assessment strategy for each client.

3. All SFCIP interns are trained to develop proficiency in providing clinical interventions (Goal 3) through (a) experiential training, (b) supervision, and (c) training seminars. All SFCIP interns are assigned a diverse clinical case load that includes individual, family and/or group therapy, and diverse clients with a range of presenting problems. All interns receive weekly individual and group supervision during which case conceptualization, diagnostic impressions, treatment plans, intervention models and techniques, and client progress are discussed with their licensed psychologist supervisors. Weekly SFCIP seminars (i.e., Professional Development didactics, Grand Rounds, and intern presentations; see Appendix A for a schedule of weekly seminars) include training in various service delivery models, multicultural competence, diagnostic considerations, treatment planning, and therapeutic alliance issues. In addition, most SFCIP sites also provide additional population-specific didactic training and/or clinical meetings, which cover specific interventions for their settings (i.e., interventions for clients with eating disorders, treatments for sexually abused children, etc.). By the end of the training year, all SFCIP are expected to become proficient in providing clinical interventions, and meeting minimum competencies within this area by receiving ratings of “meets” or “exceeds” expectations on the final intern evaluation, including: developing appropriate treatment plans based upon sound conceptualization, theoretical understanding, and empirical support for each client’s presenting problem, taking into account implications of diversity in relation to conceptualization, treatment planning, and therapist/client interaction, identifying alternative theoretically-based methods of treating cases, and demonstrating the ability to consistently establish strong therapy alliances and effectively implementing an array of psychotherapeutic interventions.
4. All SFCIP interns are trained to develop basic proficiency in consultation, program evaluation, and supervision (Goal 4). All SFCIP interns are placed within interdisciplinary settings providing the interns an opportunity to develop individual relationships and collaborations with professionals from a variety of disciplines at their respective sites, including: psychologists, teachers, physicians, speech-language pathologists, administrators, case managers, and other professionals. All SFCIP interns work as part of interdisciplinary teams and often work closely and consult with other professionals in serving clients. Additionally, all SFCIP interns are required to provide formal training, including lectures or staff in-services, to colleagues at both their sites and at NSU during the intern presentations scheduled once a month. At their sites, all SFCIP interns also provide mentoring to practicum students or other mental health staff, including supervision of assessment and intervention services under the supervision of a licensed psychologist. They receive supervision of supervision during weekly group supervision sessions with the SFCIP training director. Weekly SFCIP training activities (i.e., Professional Development didactic seminars, Grand Rounds, and Intern Presentation; see Appendix A for a schedule of weekly seminars) include trainings (e.g., didactics, discussions, readings, etc.) on supervision, consultation, and program evaluation. Interns are provided with program evaluation training on the use of a logic model and are required to complete a group project using a logic model (see Appendix D). By the end of the training year, all SFCIP are expected to receive ratings of “meets” or “exceeds” expectations on the final intern evaluation, and demonstrate competencies including: providing appropriate in-service training sessions, effectively participating in a multi-disciplinary team, participating in program evaluation activities, seeking consultation or supervision as needed and using it productively, and understanding how to, and/or providing competent developmentally appropriate supervision.

PROGRAM DESCRIPTION

The South Florida Consortium Internship Program (SFCIP) is a collaborative effort of Nova Southeastern University and cooperating agencies whose mission is to offer a 2000-hour doctoral internship for qualified doctoral students in clinical psychology. The goal of the SFCIP is to train and educate interns to competently practice professional psychology following the Practitioner Informed by Science model of training. This model adheres to a philosophy of training geared toward preparing interns to provide direct services with an understanding that science informs sound practice. Interns are prepared to be lifelong consumers of research. Upon completion of the internship, the intern will have acquired the knowledge, skills and professionalism to move to the postdoctoral resident level.

SFCIP members are committed to a philosophy of providing interns with the opportunity to acquire “generalist” skills through the provision of instruction, supervision, and experience in a wide spectrum of functions engaged in by a professional psychologist.
Therefore, at all training sites, each intern will be provided with supervised training experiences in the direct provision of assessment/evaluation and psychotherapy services to clinical populations, as well as with consultation and supervision activities. Training in a breadth of clinical issues and ethical and legal professional standards will be incorporated into supervision and seminars (Appendix A) to further prepare interns for generalist practice and the highest standards of professional conduct.

The SFCIP’s primary training method is experiential. Interns spend 40 hours per week in training of which a minimum of 25% (ten hours) to a maximum of 24 hours of the intern's time is dedicated to direct clinical services. At times, because of special circumstances, the maximum number of hours may be increased with the written approval of the Director of Training. Interns are responsible for documenting their direct and indirect services monthly by completing the Intern Activity Log (Appendix B), obtaining supervisor’s signature, and submitting the log to the Internship Director of Training monthly.

The community-based training sites that form the SFCIP provide an array of clinically and culturally diverse populations that offer our interns supervised clinical training and experience during a one-year placement at one of the consortium partner sites, supplemented by weekly training activities at NSU. Nevertheless, all SFCIP interns are expected to develop proficiency in the execution of a broad range of clinical, assessment, consultation, program evaluation, and supervision skills within community settings (i.e., Consortium partner sites). While some sites serve special populations (e.g., clients with primary diagnoses of eating disorders) allowing the interns exposure to specialist skills, the SFCIP program as a whole is organized to provide generalist training through (a) experiential training, (b) supervision, and (c) training seminars; therefore, all SFCIP interns are required to gain experience in the following areas:

1. **Clinical Evaluation:** Interns generally complete one clinical interview per week to provide a means of refining diagnostic and treatment planning skills.

2. **Psychological Testing:** Interns perform psychological tests based on intern interests, patient's need and site requirements. Interns complete a minimum of 6 psychological evaluations during the year under the supervision of a licensed psychologist. Interns will document each completed evaluation by entering the date of the evaluation and obtaining their supervisor’s signature of the Documentation of Completed Reports form (Appendix C). While the evaluation type, instruments, and report length may vary across sites, all SFCIP interns’ evaluations must include, at minimum, the following: history, direct observation, formal assessment instruments and integration of all individual components to yield diagnostic impressions and recommendations. Also, there are opportunities for consultation with multiple supervisors regarding assessment and report writing and exposure to a broad range of assessment instruments and report writing skills from weekly seminars.

3. **Psychotherapy:** All SFCIP interns are assigned a diverse clinical case load and required to work in a variety of modalities (e.g., individual, marital, family, and group therapy), as well as exposure to clients of diverse socioeconomic
backgrounds, ethnic groups, and ranges of pathology. During individual and group supervision and weekly seminars, interns are exposed to a broad base of knowledge and skills including a variety of intervention models and techniques, service delivery approaches, and culturally competent interventions.

4. **Consultation/Program Evaluation:** Interns participate in supervised consultation/education projects based on site needs and trainee interest. This may include program development/evaluation activities, lectures, staff in-service training, and consultation within multidisciplinary settings. Consortium-wide, interns participate in Program Evaluation didactics and a Logic Model group project to enhance their knowledge and skills in this area (see Appendix D).

5. **Clinical Supervision:** Interns have the opportunity to provide individual and group supervision to practicum students, who are in turn, supervised by the psychology training staff. This activity typically occurs in the latter half of the internship year. In sites where there are no practicum students, interns provide supervision/mentoring and/or training to other staff at their site.

A. **Consortium Partner Sites:**

**Broward Health Medical Center (BHMC) – Micah Price, Psy.D.**

A respected leader in healthcare since its founding in 1938, Broward Health Medical Center's mission has remained constant over the decades: to provide all the people of Broward County with the best possible medical care. BHMC continues to deliver on that promise through its commitment to physician excellence, technological advancement and academic affiliation. Caring for our community goes far beyond the walls of the medical center. Each year, BHMC admits approximately 24,000 patients, delivers 4000 babies and handles more than 75,000 emergencies. BHMC is also one of only three Level 1 trauma facilities in South Florida and it is JCAHO accredited by the Joint Commission.

This internship will train interns in the areas of both Clinical and Medical Psychology as discussed in Caccavale’s (2013) article in Medical Psychology Practice and Policy Perspectives. As such, an intern will in addition to psychology, gain knowledge in organ systems, disease processes, laboratory results, and medications, along with how those impact and are impacted by mental health. Interns will also have broad clinical experiences in trauma services, pediatrics, behavioral health, emergency medicine, family medicine, oncology, organ transplantation, palliative care, and cardiac & pulmonary rehabilitation programs. Additionally, Interns will, as part of the transplant and other programs, complete at least 6 psychological batteries, which include full reports with recommendations to psychologically clear or not clear patients for organ transplantation. Interns will be required to be on-call 24/7 at least 1 week/weekend a month. Interns will be trained in and must provide services to patients who are dying, in medical isolation, and undergoing invasive medical procedures. Depending on availability, interns may be able to view a liver transplant or other surgeries.
Interns will also have opportunities to participate in community related mental health support activities, psycho-medical research, grant writing, programmatic development, and the training of medical students and residents.

Over the course of the year, Interns, with the assistance of Practicum Students, will conduct over 600 psychological consults, engage in over 1000 follow-up sessions, conduct more than 150 mental health screenings, carry 20 psychotherapy cases, engage in 75 group therapy sessions, and attend more than 75 medical rounds. Interns will be integral in the co-supervision of four practicum students by shadowing them during psychology consults, regularly listening to audio-recordings of psychotherapy sessions, providing on-going feedback, conducting in-service trainings, and participating in their formal evaluation process.

The patient population is richly diverse with respect to age, race, ethnicity, cultural background, sexual orientation, socioeconomic status, medical conditions, and psychopathology. Interns will work with a variety of multidisciplinary teams throughout the medical center and across programs, and will attend weekly trauma rounds for 6 months and weekly pediatric rounds for 6 months.

BHMC offers weekly lectures, presentations, and Grand Rounds, which Interns are encouraged to attend. Interns will also attend a weekly two-hour group supervision meeting; attend two-hours of weekly individual supervision by a licensed psychologist; provide leadership in the coordination and smooth operation of the psychology service delivered by the NSU Psychology Team at BHMC.

Accommodations include an assigned desk, storage space, computer with internet access, a telephone, and often free food from the cafeteria during weekly hospital sponsored training activities. The interns’ supervisor is on-site, part-time and in an adjacent office so that access and support can occur with great ease. When not on-site, the supervisor is readily available via phone to assist with more challenging situations. Prior to beginning the internship, Intern’s will be send information about suggestions (e.g., various readings related to medical psychology and an invitation to shadow out-going Interns) and requirements (e.g., vita, background check, drug screening, proof of immunization, and proof of health insurance coverage).

Intern Applicant Requirements:

Previous medical experience is a necessity; this experience can be practicum, work, shadowing, or volunteer related. This experience should be clearly noted in your application cover letter/vita. Preference will be given to those in the health concentration or that have health/medical related coursework. Those seeking primarily psychiatric in-patient experiences or who are not highly motivated to work in a medical setting should not apply.

All interns will be required to complete a 10 Panel Drug Test and Level II Background Check prior to starting. All interns will also be required to have a Flu Vaccination prior to
starting, unless intern has a religious or medical exemption. In the event of an exemption, the intern will be required to wear a mask during Flu Season while at the hospital. Given that flu vaccinations are given only during a limited time frame, applicants interested in BHMC should obtain their immunization during the internship application process and maintain documentation showing proof of immunization, which will be required at the start of internship.

**Broward Sheriff’s Office (BSO) - Timothy Ludwig, Ph.D.**

**About Broward Sheriff’s Office:**

The Broward Sheriff’s Office Department of Detention operates the twelfth largest local jail system in the nation, with four facilities fully accredited by the American Correctional Association and the National Commission on Correctional Health Care. The average daily population exceeds 4500 inmates, of which approximately 32% are receiving some form of mental health services. One facility, the North Broward Detention Center, operates a 340-bed Mental Health Unit for inmates experiencing acute symptoms of their mental illness and who may require specialized housing and treatment services. The In-Custody Behavioral Services Division (ICBSD) is responsible for providing psychological services to the inmates housed on the Mental Health Unit.

**About the In-Custody Behavioral Services Division:**

**Philosophy/Mission**

The Broward Sheriff's Office In-Custody Behavioral Service Division believes that all inmates should be treated as individuals and with dignity, respect, and understanding. As such, the ICBSD’s mental health services focus on assessing the needs of the individual based on their current level of functioning while seeking to maximize opportunities for success in the completion of their identified treatment goals.

It is the mission of the In-Custody Behavioral Service Division to provide a safe and secure environment that will enable special needs inmates, who have emotional and behavioral difficulties and/or co-occurring disorders, an opportunity to successfully adjust within the correctional setting. In addition, these special needs inmates are afforded the supports and services necessary for recovery and successful community integration.

**Psychology Internship with BSO’s ICBSD:**

**Objectives and Philosophy**

The primary objective of BSO’s Psychology Internship program is to provide an integrated, flexible, and diverse learning experience necessary for the emergence of a competent professional psychologist. The ICBSD provides a comprehensive learning experience in a multidisciplinary institutional setting emphasizing correctional and forensic work. Interns will have an opportunity to practice and enhance previously
acquired skills, develop new skills, and develop competence in psychological assessment, intervention, and consultation.

In addition, interns will have an opportunity to conduct individual and group therapy, psycho-educational programs, and crisis-intervention. The interns will work with a broad range of disorders and challenging behavior management issues. Outside of their clinical work, interns will have the opportunity to engage in curriculum development and program evaluation activities. Additionally, interns will have the opportunity to provide mental health education and training for Department of Detention and Community Program staff.

**Internship Training Environment**
Interns are expected to work a 40-hour work week, Monday through Thursday from 8:00am to 4:30pm. There are no expectations for after-hours or on-call. Each intern is provided their own work station and computer at the North Broward Detention Center. The interns become a valued member of the treatment team which is comprised of two psychologists, three master’s level clinicians, and one or two practicum students. On Friday’s the interns will be at NSU for weekly Professional Development (PD) seminars, Group Supervision, and/ or Supervision with a Post-Doctoral Student.

**Supervision and Training**
Each week the interns will receive two hours of individual supervision by a licensed psychologist, two hours of group supervision and training, and 15 to 20 hours of direct clinical service. Interns are also afforded the opportunity to supervise practicum students throughout their internship year. This opportunity provides them with the experience of supervising students with curriculum development, behavior management and treatment planning, and involves co-facilitation of mental health programming.

**Assessment**
Each intern will complete a minimum of 6 psychological assessments. These psychological assessments involve the administration of a full battery of tests, and typically include assessments of intelligence, personality, and malingering in order to help clarify diagnostic questions or to help guide treatment recommendations. Additional instruments may be incorporated into the battery based on the referral question.

**Treatment**
Each intern will maintain a minimum individual therapy caseload of 5-10 clients. Given the transitory nature of the jail population, individual therapy may be provided on a brief or long-term basis. The internship provides exposure to a full spectrum of diagnoses, symptom presentations and severity, cultural backgrounds, and presenting problems. Interns will conduct approximately two groups per day and have the opportunity to co-facilitate groups with other treatment team members.

**Program Development**
Interns will participate in on-going curriculum development for daily group programs offered to the inmates housed on the mental health units. Typical curriculum topics
include understanding mental illness, substance abuse, relapse prevention, criminal and addictive thinking, trauma, domestic violence, stress management, anger management, and additional topics of interest to the inmate population.

Additionally, the interns are responsible for the operation of the Mental Health Unit’s Transitional Program Unit. The mission of this special treatment milieu is to provide supportive and rehabilitative experiences that assist inmates in developing the behaviors and skills needed for transition from segregated housing to less restrictive housing alternatives. Individuals who voluntarily participate in this program receive more intensive individual and group counseling focused on effective coping skills in the areas of socialization, communication, conflict resolution, anger management, stress management, as well as any mental health or substance abuse issues they may have.

Training
During the course of the year, the interns will have the opportunity to assist in the development of continuing education training curriculums on various topics related to mental health and in presenting these trainings to Department of Detention and Community Program’s staff.

Professional Development
In accordance with South Florida Consortium Internship Program requirements, each intern will attend weekly professional development seminars offered by Nova Southeastern University. Additionally, interns will further their knowledge on issues related to forensic and correctional psychology by reading books and articles provided by the training site supervisor. Seminars and monthly meetings focusing on clinical, ethical, and forensic issues will also be provided to afford the intern an opportunity for networking and development of professional contacts.

Research
The value of research is recognized as an important professional developmental tool. Participation in research is encouraged at BSO and numerous opportunities and resources are available for interns interested in pursuing these interests.

Leave Policy
While interns are considered employees of Nova Southeastern University and follow the specified guidelines allotted to the university’s employees, there is a pre-hiring clearance process that each prospective intern must successfully complete with the Broward Sheriff’s Office. This clearance/background process typically will be initiated in April or May to ensure the prospective intern may begin internship on September 1st. In accordance with Nova Southeastern University policies interns receive three weeks vacation and a total of eleven days sick time. Holiday leave follows the holiday schedule of the training site.
Chrysalis Health – Dr. Brooke Foris, Psy.D.

Chrysalis Health is an organization that provides mental health and support services to children, adolescents, adults, and families of Broward, Dade, and Palm Beach counties, with new expansions to the Tampa and Orlando area. Services are provided to clients who are experiencing an array of needs including those that are emotional, social, cognitive, behavioral, and psychiatric in nature. Comprehensive services are offered including psychiatric evaluation and treatment, psychological/psychosexual assessments, outpatient and on-site counseling services, residential group homes, substance use evaluation and treatment, psychosocial rehabilitation, and case management, to name a few. Chrysalis Health is well-known for providing therapeutic services to children and adolescents who exhibit problematic sexual behaviors and, most recently, in working with minor victims of domestic sex trafficking. Within each program, Chrysalis Health provides evidence based treatment to ensure the most favorable outcome possible, and is further individualized to the needs of each client.

Program Description:

The internship program at Chrysalis Health is intended to provide doctoral interns with dynamic experiences in working with diverse populations in the Broward County location. This goal is fulfilled by providing the intern with five separate and unique experiences. One aspect of the internship program involves the continued development, coordination, and leading of sexual specific groups for both children and adolescents at our Broward office. These groups will be held weekly for the population we are currently serving within the outpatient department, and additional referrals could eventually come from partner agencies within the county. The second aspect of the intern’s training experience involves participation in monthly domestic minor sex trafficking (DMST) and quarterly (4 months in total) involvement with Multidisciplinary Assessment Team (MAT) staffings involving child-on-child sexual abuse cases reported in Broward County. Each staffing consists of various professionals in the field of sexual abuse, focusing on providing comprehensive recommendations related to the child/youth’s mental health, education, family, and legal functioning. A third facet involves providing intensive on-site therapeutic services to children, adolescents, and/or adults with various clinical presentations. Comprehensive mental health and substance abuse services are provided in the natural environments of the child served, including the home, school and after-care programs, as well as the traditional office setting. The fourth aspect includes conducting various psychological and psycho-educational evaluations to assess cognitive, emotional, and personality functioning. Additionally, psychosexual evaluations aimed at determining treatment and service needs, assessing risk, determining safety needs, and making specific recommendations regarding placement and future considerations are provided. Lastly, the intern is assigned to one doctoral level practicum student and is responsible to provide weekly individual supervision, as well as to provide group/didactic monthly supervision with all interns and practicum students. In addition to the five core components of the program, interns will rotate in attending monthly Broward Sexual Abuse Intervention Network (BSAIN) meetings, will have opportunities.
to provide trainings to other therapists/counselors within the interns’ area of interest and the program’s needs, and participate in program development.

**Target Populations:**

Children, adolescents, adults, and families residing in Broward County (including qualified Medicaid and Medicaid HMO clients) in need of psychological services in order to achieve emotional and behavioral stabilization. Referrals for services come from parents, school guidance counselors and/or teachers, self-referrals (adults), law enforcement, ChildNet (foster care agency), a court appointed entity (e.g., Judge, lawyer, etc.), and other local provider agencies (e.g., Henderson Behavioral Health, Smith Community Mental Health, etc.).

**Pre-employment Requirements:**

As a prerequisite, interns obtain a background check (city and county), complete a drug screen, FBI fingerprints, and complete a physical exam and TB test. A copy of their Auto Declaration Page/Proof of Insurance, I-9 documentation indicating that they are legal to work in the United States, and References need to be submitted to the HR Department prior to beginning internship. It is also required that Interns participate in a 40-hour orientation training prior to starting their internship experience. Qualifying interns need to have experience with administering full psychological assessment batteries and writing comprehensive reports.

**Intern Responsibilities:**

Interns are expected to work a 40-hour work week, Monday through Friday, with flexibility in scheduling as they are responsible for coordinating weekly appointments with their clients. Each intern is provided their own laptop for work-related activities, including, but not limited to: Completion of bio-psychosocial assessments, writing progress notes, developing treatment plans and reviews, devising safety plans, and psychological, psychosexual and/or substance abuse evaluation report writing. Interns will receive 2 hours of weekly individual supervision on site by a licensed psychologist, 1-2 hours of weekly group supervision and/or training, and 15-20 hours of direct clinical service. Additionally, each intern will be given the opportunity to supervise a practicum student for at least 1 hour per week throughout the internship year. Each intern will complete a minimum of 4 psychological assessments (which could include substance abuse evaluations) and 4 psychosexual evaluations during the course of the internship year. Additionally, they will attend child-on-child MAT staffings at BSO for 1 full quarter, attend at least 4 DMST MAT staffings for victims of minor sex trafficking in addition to attending 2 BSAIN meetings. Chrysalis Health offers frequent on site trainings in order to assist with the intern’s continued development of clinical skills, knowledge of different theoretical orientations, assessment and treatment of a multitude of mental health diagnoses, and clinical documentation that they will be encouraged to attend in order to broaden their clinical experience at the agency as well as within the community mental health field.
Benefits:

Interns are considered employees of Chrysalis Health and are, therefore, required to follow the specified guidelines allotted to the agency’s employees, including the 40-hour, week long, orientation training to be completed prior to beginning the internship year. Health insurance will be provided to the interns through the agency’s current provider beginning the first day of internship. In accordance to policy, interns will earn 6 hours of paid time off (PTO) per pay period (biweekly), which equates to approximately 4 weeks of PTO for the year. PTO may NOT be taken in advance of actual hours earned, and planned leave requests (e.g., vacation, personal days, etc.) need to be submitted in writing to the supervisor for approval at least 2 weeks prior to the start of the requested time off. Approval (or denial) is based on departmental needs in addition to individual circumstances and performance. There are 11 holidays that are observed by the agency in which the office is closed; however, if the intern decides to take the day off they will need to use their accrued PTO. Please see list of holidays below:

- Martin Luther King Day
- Good Friday
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving
- Day After Thanksgiving (1/2 day)
- Christmas Eve (1/2 day)
- Christmas
- New Year’s Eve (1/2 day)
- New Year’s Day

Henderson Behavioral Health (HBH) – Carol Bakwin, Psy.D.

Henderson Behavioral Health is a private, not for profit behavioral healthcare system providing comprehensive recovery-focused services to nearly 17,000 people annually, of which 5,000 are youth. The center provides a continuum of high quality, community-based prevention, education, treatment and rehabilitation services by utilizing best practice and evidence-based treatment models. With 15 facilities throughout Broward and Palm Beach counties, the organization offers over 30 different children and adult programs which are fully accredited by the Commission on Accreditation of Rehabilitation Facilities (C.A.R.F).

The internship program at Henderson Behavioral Health is intended to provide doctoral interns with dynamic experiences in working with a diverse population of clients. Through the internship program, interns will have the opportunity to provide individual, group and family counseling, crisis counseling, psychological testing and evaluation. In addition, interns are trained in the evaluation of psychological disorders using diagnostic interviewing and behavioral assessments and observation methods. Training in a broad
array of therapeutic intervention methods with emphasis on evidence-based treatment approaches is provided. Interns learn to develop and monitor measurable treatment goals and assess treatment outcomes. During the course of the Internship year, interns are encouraged to develop their own interpersonal and intrapersonal skills while providing services in a culturally sensitive manner. They will work with a broad range of disorders. Additionally, interns will have the opportunity to provide education and training to healthcare staff. Interns are at liberty to construct testing batteries based on client need. Have opportunity to sit in for Baker Act Court and exposed to MH Court.

Crisis Stabilization Unit - Major Rotation/Adult Inpatient (12 months):
Supervisor: Carol Bakwin, Psy. D.

Crisis Services provides assistance to individuals suffering from co-occurring disorders including mental health, substance abuse, and developmental disabilities. We strive to ensure that these individuals are provided with integrated services so recommendations for further services include all of their specific needs relative to these disorders and are not limited to mental health. Crisis Services recognizes that psychiatric crises can occur in individuals of all populations and special accommodations are made to ensure individualized treatment. Given the transitory nature of the crisis stabilization unit, individual therapy may be provided on a brief or long-term basis. The internship provides exposure to a full spectrum of diagnoses, symptom presentations and severity, cultural backgrounds, and presenting problems. Interns will conduct approximately two groups per day and have the opportunity to co-facilitate groups with other treatment team members.

Program Description
The CSU is a 23-bed licensed psychiatric inpatient stabilization unit that provides screening, assessment, treatment and stabilization of those individuals experiencing a severe emotional or psychiatric crisis who require a more restrictive setting. Individuals participate in treatment and medication management to help them return to pre-crisis level of functioning.

Target Population
Indigent persons, including qualified Medicaid HMO clients, in Broward County aged 18 and older who are in need of psychiatric hospitalization to achieve immediate stabilization.

- Provide individual, group and family therapy to a culturally diverse adult population with acute severe and persistent mental illness – psychotic, affective disordered & dually diagnosed individuals in a DCF licensed Baker Act Receiving Facility.
- Utilize cognitive-behavioral, skills-based and supportive therapeutic approaches in both individual and group modalities.
- Provide psychological testing, crisis counseling and suicide assessment.
- Participate in a grant funded study as a research clinician implementing psycho-education and group therapy to enhance quality of life among the severe and persistent mental health population.
Opportunity to observe &/or participate in Baker Act Court Hearing(s)

Member of an interdisciplinary team consisting of psychiatrists, psychologist, master’s level mental health clinicians, nurses, social worker, behavioral health technicians and support staff.

Outpatient Branch (South) - Minor Rotation / Adult Outpatient (12 months):
Supervisors: Jennifer Davidtz, Ph. D. and Nina Nix, Ph.D., LCSW

Program Description
Outpatient therapy consists of time limited, structured face-to-face therapy sessions, either individually or in groups, at various levels of intensity and frequency such that the persons served will achieve the goals identified in their individual treatment plans. The Adult Outpatient Therapy Program delivers services to adults who meet the admission criteria and reside in Broward County. Each intern will maintain a minimum individual therapy caseload of 5-6 clients.

Population served
The Adult Outpatient Therapy Program delivers services to persons served by the agency who are at least 18 years old and who reside in Broward County. All persons served must meet the Department of Children and Family Services definition of priority. This priority group includes all individuals with a major psychiatric disability who are at risk for more intensive services.

Therapy Services
The Adult Outpatient Therapy Program provides clinical and educational individual, family, and group therapy utilizing industry standard treatment interventions such as cognitive/behavioral, solutions-focused, etc. A dual diagnosis group (mental health/substance abuse) is also offered at each Branch. Individual psychotherapy is generally delivered on a short-term basis and group therapy is usually on a longer term basis. The actual length, frequency and duration are determined individually with each person served to best meet their needs and is reviewed and revised on a regular basis. The groups are generally open-ended allowing individuals to join at any juncture.

- Provide individual psychotherapy and psychological testing / assessment to adults within an outpatient community mental health center setting.
- Utilize both psychodynamic, humanistic, and cognitive-behavioral therapeutic approaches for case conceptualization and intervention.
- Opportunities for couples and family therapy
- Provide weekly supervision to Master's level practicum students.

Benefits:
Interns are considered employees of Henderson and therefore are required to follow the specified guidelines allotted to the agency’s employees, including attending the 4 days orientation. In accordance to policy, during the 1st three months of employment, personnel do not earn leave time, however upon completion of the 3 month waiting
period, Paid Time Off (PTO) which would have been earned shall be credited. PTO may not be taken in advance of actual hours earned. Employees accrue each payday based on years of employment. Employees with 0-2 years of service will accrue 20 days annually, and will not be able to cash out their PTO hours at termination. This will be displayed on the Employee’s bi-weekly pay advice. 9 Paid Holidays are observed and NOT charged as PTO. The only other Time Off not charged to PTO is Jury Duty. ALL requests should be turned in as early as possible to allow for proper planning and approval. As always ALL “Planned Leave” requests must have Prior Supervisory Approval. Approval (or denial) is based on Departmental needs, and your individual circumstances and performance. (Unpaid Leave is not permitted for any employee. More than 2 consecutive unscheduled days off require a Doctor’s note to return).

The following are the observed holidays for HBH:
New Year
Martin Luther King President’s Day
Memorial Day Independence Day
Labor Day
Thanksgiving
Friday after Thanksgiving
Christmas Day

Additional benefits include:
403(B) Plan: An employee only contributed Retirement Plan - date of hire.
Employee directed pre-tax sheltered annuities (Mutual Fund families.)
Flexible Benefits Plan:
Pre-Tax payment of Group Health & Dental Insurance Premiums-3 months from date of hire.
Pre-Tax payment of Child Care Reimbursement – 3 months from date of hire.
Pre-Tax payment on Medical Reimbursement – 3 months from date of hire.

Interns are expected to work a 40-hour work week, Monday through Friday. There are no expectations for after-hours or on-call. Each intern is provided their own laptop to be used between the 2 sites. Each week the interns will receive two hours of individual supervision by a licensed psychologist, two hours of group supervision and training, and 15 to 20 hours of direct clinical service. Interns are also afforded the opportunity to supervise practicum students throughout their internship year. This opportunity provides them with the experience of supervising students with curriculum development, behavior management and treatment planning, and involves co-facilitation of mental health programming. Each intern will complete a minimum of 6 psychological assessments. These psychological assessments involve the administration of a full battery of tests, and typically include assessments of intelligence, personality, and malingering in order to help clarify diagnostic questions or to help guide treatment recommendations. Additional instruments may be incorporated into the battery based on the referral question.
Memorial Regional Hospital – Marcy G. Smith, Psy.D.

Memorial Health Care system is the fifth largest public healthcare system in the nation. Its largest hospital, Memorial Regional Hospital is a 713 bed facility and is frequently recognized by national associations and local publications for its unsurpassed commitment for providing high-quality healthcare to the South Florida community. In addition, Joe DiMaggio’s Children’s Hospital provides a wide scope of comprehensive inpatient and outpatient pediatric services as well as community education and child safety programs. Both Memorial Regional and Joe DiMaggio’s Children’s hospitals practice the patient & family centered care in that both the needs of the patients as well of their families are addressed at each visit.

Memorial Regional Hospital’s Center for Behavioral Health provides treatment for patients who are in acute crisis and who have psychiatric, substance abuse and/or co-occurring disorders. The inpatient units include two 20-bed adult units and a 12-bed child/adolescent psychiatric treatment unit. Treatment modalities include psychiatric, psychological, group, family and individual therapy. Each patient is provided with individualized aftercare planning to ensure quality and safe discharges back to the community.

Under the Psychology Department, there are two services which are provided to the patients at Memorial Regional Hospital and Joe DiMaggio Children’s Hospital. The first service is Neuropsychology and the other is Pediatric Psychology.

Neuropsychology:

The focus of this service is to provide neuropsychology screenings, psychotherapy and psycho-education to patients seen & followed by Neurosurgery, Trauma or Cardiac Transplant surgeons. The patient’s family is also integrated in treatment using the Model of Patient & Family Centered Care.

Pediatric Psychology:

This service provides assessments, therapy and psycho-education to children who are at the Joe DiMaggio Children’s Hospital. The programs where children are seen and followed by Pediatric Psychology include: Hematology/Oncology, Cardiac Transplant, Dialysis, ICU, Palliative Care, Pediatric Rehabilitation & Endocrinology.

Two internship positions are available at this site:

The Psychology position: The intern at this position will work primarily with both adult and adolescents who have psychiatric or co-occurring disorders. The Behavioral Health Department is comprised of the following:

1. The Mood Disorder Unit: 20 bed unit with adult patients who have primarily Mood Disorders but can also have co-occurring disorders.
2. The Thought Disorder Unit: 20 bed unit with adult patients who have primarily thought disorders but can also have co-occurring disorders.
3. Child & Adolescent Unit: 12 bed unit with children and adolescents who present with psychiatric, psychological, behavioral and/or substance abuse issues.

*The Neuropsychology position:* This position involves working with patients from our trauma, neurosurgery, cardiac transplant and pediatric rehabilitation.

**Intern expectations:**

1. Completion of neuropsychological screenings with patients in ICU and medical floors
2. Completion of bio-psychosocial evaluations to patients in ICU and medical floors
3. Conducting support & education groups to patients with adult ICU, Adult cardiac and pediatric rehab patients
4. Conducting patient & family psycho-education and psychotherapy
5. Assisting in the Coordination of the neuropsychology service
6. Conducting seminars for staff education
7. Psychological consultations on medical floors

**Clinical Team:**
Marcy G. Smith, Psy.D., Neuropsychologist & Director of Psychological Services
Gloria Chiang, Ph.D., Pediatric Psychologist
Michelle Einson, Psy.D., Pediatric Psychologist
Troy Bushkin, Psy.D., Clinical Therapist
Ime Ekong, PsyD., Clinical Therapist

**Medical Staff:**
Neil Edison, MD, Medical Director/Adults &
Marioam Lazar, MD., Medical Director/Children

**Clinical Site Supervisors:**
Lisa Wasserman, Psy.D., Clinical Therapist
Kurt Keotsier, LCSW
Nancy Carranza, LCSW
Peter Genardo, LMHC
Cynthia Sanon, LMHC

**Psychiatric Pharmacists:**
Dr. Alberto Augsten
Dr. Leonard Rappa
Dr. Maria Venti
The Renfrew Center – Deborah Radzwill, Psy.D.

The Renfrew Center is the first residential facility that specialized in the treatment of eating disorders for women. More than 50,000 patients have been treated in more than 10 locations throughout the United States. The Renfrew Center of Florida is a 40-bed facility that offers residential, partial hospitalization (PHP), intensive outpatient (IOP), and outpatient services. Treatment at The Renfrew Center is designed to be empowering, collaborative, interactive, and personal. Individual supervision is provided by Licensed Psychologists. At Renfrew, the Doctoral Internship offers a specialized and comprehensive year of learning and growth that incorporates the below-listed training opportunities:

- Work within all levels of care, including Residential, Partial Hospitalization, and Intensive Outpatient (IOP).
- Provide individual, couples, and family therapy to female patients of all ages who are diagnosed with eating disorders, as well as with other co-morbid pathologies such as mood disorders, substance abuse, self-harm, trauma, obsessive compulsive disorder, and personality disorders.
- Facilitate approximately 6-8 therapy groups per week; an example of groups include psycho-educational, dialectical behavioral therapy, cognitive behavioral, and process.
- Complete a minimum of 6 psychological evaluations.
- Work on a multi-disciplinary treatment team that includes psychiatry, nursing, nutrition, and aftercare; participate in team rounds, a weekly 3-hour meeting.
- Develop patient treatment plans with attainable goals, objectives, and interventions.
- Participate in individual and group supervision; present seminars to Practicum Students.
- Provide milieu management support; eat meals with patients, assure that patients are following structure/policy/procedure, and manage crises.
- Requirements: 40 hour work week; evening and/or weekend hours included, specialize in the treatment of eating disorders.
- Perks: free meals, not on-call, 15 vacation days, 11 sick days, and 3 personal days, stay in sunny South Florida.

B. Supervision

The SFCIP seeks to develop strong mentoring relationships between SFCIP supervisors and interns, which will serve as one of the primary methods for achieving training goals and objectives. These relationships enhance the intern’s personal and professional growth by fostering the development of competencies in scientific thinking, ethical decision making, and professional practice. All SFCIP interns received at least four hours of face-to-face supervision, and are exposure to at least two licensed psychologists during the training year. Interns meet with at least one licensed psychologist at their sites for a minimum of two hours of weekly individual supervision and with the SFCIP internship director of training weekly for one hour of group supervision. The additional hour of
supervision may be individual or group supervision, depending on the site. All SFCIP interns also receive one hour of group supervision with a psychology postdoctoral resident at NSU. Interns are responsible for completing the Monthly Supervision Attendance Record (Appendix E), obtaining their primary supervisor’s signature on this form, and submitting it to the Internship Director of Training each month.

Individual supervision is provided to SFCIP interns by licensed psychologists who take responsibility for the psychological services rendered by interns. Hence, individual supervision is focused on reviews of case assessment, conceptualization, treatment planning and interventions, client progress, recommendations, collaborations with other professionals in serving clients, supervision of intern supervision provided to practicum students or other staff, and general professional development issues. Supervision may also include live supervision, reviews of audio or video tapes, documentation reviews, intensive electronic reviews of de-identified psychological evaluations, and assigned readings. Weekly group supervision with the SFCIP Director of Training and focuses on case discussions, supervision of supervision provided to practicum students and others, as well as other professional development issues. The interns also utilize this time to discuss their experience of the program and their individual progress, and evaluate how successfully the program is addressing their needs. In addition, it provides interns access to the Internship Director of Training and additional time to interact with interns from other sites since groups are made up of interns from 3-4 different sites. All SFCIP interns are also assigned to an NSU postdoctoral resident at the outset of the training year and meet with their assigned resident biweekly or more frequently if schedules permit. While postdoctoral residents are not licensed, they provide the interns with additional mentoring and exposure to alternative supervisory styles. Interns are required to document all supervision activities on the Supervision Attendance Record (Appendix E), and return these to the Internship Director of Training monthly.

All SFCIP supervisors follow a developmental approach to supervision and training. This approach is based on the philosophy that interns will require more guidance and direction in the beginning of the internship year while progressing towards more professional autonomy as the year progresses. At the outset of the training year, the intern meets with his/her supervisors and they collaboratively develop a personalized training plan, the SFCIP Intern Training Agreement (see Appendix F), based on the following: the intern’s present level of competence, theoretical orientation, personality and background, and the sites’ requirements/client populations. While the plan allows for individual customization of intern clinical experiences and supervision, it is structured around the SFCIP training goals and objectives (i.e., core competencies; see above) that all SFCIP intern will be expected to meet by the end of internship year, providing the intern and supervisor with clear benchmarks for basing subsequent, quarterly intern performance evaluations. It also establishes the methods by which the SFCIP training goals and objectives will be met for the intern both at the consortium partner site and consortium wide, highlighting the importance of prioritizing attendance at all training activities and establishing clear expectations for interns and supervisors as partners in training.
C. Weekly Seminars

All SFCIP interns are provided with at minimum two hours of formal instruction weekly to supplement their “on-the-job” experiential and supervision training experiences. In addition, these Consortium-wide seminars provide interns with an opportunity for weekly peer interaction.

Intern attendance is mandatory at all weekly seminars. Each intern is responsible for signing the attendance sheet for these trainings as records of attendance/absence are kept on file. Interns may be excused from two seminars per quarter for illness or with advanced approval from the Internship Director of Training. If more than 2 training activities are missed in any quarter, the intern must make up the absence by one of the following means: (a) presenting an additional didactic to fellow interns or (b) providing proper documentation of attendance at an outside workshop relevant to professional psychology during the same quarter. If four (4) or more training activities within the same quarter are missed, the intern must present an additional didactic to make up for the excessive absence and the intern’s poor attendance will be reflected on that quarter’s performance evaluation. No more than eight (8) missed training activities per year will be acceptable unless under very serious circumstances.

Interns spend at minimum 2-3 hours per week in one of three types of weekly seminar training activities that all SFCIP interns are required to participate in (see Appendix A for schedule):

1. **Professional Development Seminars:** Interns attend a series of formal three-hour didactic seminars at Nova Southeastern University (NSU) conducted by Center for Psychological Services (CPS) faculty, SFCIP partner site supervisors, community clinical psychologists, psychiatrists, or other guest presenters. The Professional Development series covers broad areas including: ethics and professional behavior, assessment approaches, psychopathology and treatment interventions for adults and youth, cultural & individual differences, psychopharmacology, and professional development. The Professional Development seminar series is scheduled in collaboration with the NSU CPS Continuing Education program, broadening the score of presenters to include nationally and internationally known professionals who will expose all SFCIP interns to a broad base of knowledge and skills.

2. **Grand Rounds:** Each consortium partner site and the NSU clinics host all the SFCIP interns once a year for a two-hour presentations including didactic and case discussions. Didactic material and cases presented are usually representative of the theoretical models, assessment and intervention approaches, and clients served at the host site. Thus, attending grand rounds exposes all SFCIP interns to a broad base of knowledge and skills.

3. **Intern Presentations:** Each SFCIP intern facilitates at least one didactic presentation per year on a topic of clinical interest developed from reviews of the
research literature. Interns provide the presentation title, learning objectives, and at minimum 2 peer-reviewed journal articles referenced in the presentation to the Internship Director of Training prior to presenting. In keeping with the SFCIP’s “practitioner informed by science” model of training, interns are required to incorporate discussion of the empirical support for the clinical information presented. Interns typically cover a range of clinical topics including assessments, theoretical models/approaches, and child and adult psychopathology and interventions; thus, exposing fellow interns to a broad base of knowledge and skills. Interns are provided with feedback about their presentation skills and ability to critically discuss the literature supporting their presentation using the Intern Presentation Ratings form (see Appendix G) and a summary of their fellow intern’s ratings of their presentation using the Professional Development Evaluation Survey (see Appendix H). These ratings are also shared with the intern’s site supervisors.

Intern feedback is crucial to ensuring the quality of SFCIP training activities. Interns are asked to complete Professional Development Evaluation Survey (see Appendix H) forms after each Professional and intern didactic presentation. This information is used to make improvements to training activities yearly. For instance, intern feedback about the quality of presentations is taken into account when considering which presenters to invite back for the next training years’ Professional Development seminars. It is also used to provide formative feedback to follow interns regarding their professional presentation skills as detailed in the section above. At mid-year and again at the end of the training year, interns are asked to provide feedback about the training program (see Appendix I) and supervisor performance (see Appendix J). The Internship Director of Training summarizes this information as group data and presents it to the site supervisors during quarterly meetings. Care is taken to protect the anonymity of the interns providing the feedback. The aim of sharing this information with site supervisors is twofold: first, to increase awareness of program strengths and areas in need of improvement and second, to inform the development of plans to improve the quality of the training program.

PERFORMANCE EVALUATIONS

Site supervisors are responsible for providing interns with quarterly written feedback (see Appendix K) regarding their clinical functioning and progress toward meeting training goals. At the three month evaluation, each intern must receive a rating of “needs regular supervision”, “meets expectations”, or “exceeds expectations” in all goal areas and objectives assessed, to demonstrate satisfactory competency achievement at this point in the training year. Any rating of “needs remedial work” triggers the formulation of a performance improvement plan. At the six month evaluation, each intern must receive a rating of “needs regular supervision”, “meets expectations”, or “exceeds expectations” in all goal areas and objectives assessed. Any rating of “needs remedial work” will require the generation of a performance improvement plan to assist the intern in improving the particular issue. The standards are raised as the intern progresses toward completion of the internship year. At the nine month evaluation, each intern must receive a rating of “meets expectations” or “exceeds expectations”. Any rating of “needs regular
supervision” or “needs remedial work” will be addressed via a performance improvement plan. At 12 months, during the final evaluation, each intern is required to receive ratings of “meets expectations” or “exceeds expectations” in all areas assessed in order to successfully complete the training program. At the end of the training year, all interns who display full competency in all of the specified goal areas will be deemed ready to move on to postdoctoral level training.

DUE PROCESS AND GRIEVANCE PROCEDURES

It is the policy of the South Florida Consortium Internship Program (SFCIP) that interns are assured due process regarding concerns which might arise over their performance and functioning. The policy is guided by principles to ensure that interns receive ongoing constructive feedback about their performance, opportunities and support for remediation if needed, and advisement of intern rights and responsibilities and processes to address concerns or grievances. This policy is enacted with respect for intern diversity in areas of professional functioning; therefore, SFCIP supervisors are expected to adapt the supervisory style, focus, and expectations for each intern based on the intern’s professional developmental level, theoretical orientation, personality and cultural background. The SFCIP Intern Training Agreement (Appendix F), developed with the interns at the outset of training, should establish individually customized training plan for the intern, as well as training objectives and methods within the specified SFCIP training goal areas forming the basis for evaluation of the intern’s performance.

Since the SFCIP accepts only NSU students as interns, all student grievance and due process policies outlined in the Center for Psychological Studies Doctoral Programs in Clinical Psychology Handbook may also apply.

Intern Performance

Interns are evaluated and provided with both formative and summative feedback on an ongoing basis through weekly individual supervision and formal quarterly performance evaluations (see Appendix K).

If at any time there are deficiencies in an intern’s performance or professionalism, the intern’s site supervisor will provide constructive verbal feedback to the intern and document in writing any discussions related to the problem area(s). While it is difficult to operationally define all characteristics associated with quality professionalism, broad areas include: (a) adherence to the APA Ethical Code of Conduct for Psychologists, institution policies and procedures, and applicable state of Florida laws, clinical competence (as defined above under performance evaluations); (b) professional comportment, including: dependability; accepting responsibility for own work; professional grooming, attire, and demeanor; and demonstrating maturity, discretion, sound professional judgment and a respectful/non-hostile attitude, and developing self assessment skills; and (c) a positive attitude toward others, including: cooperating and
respecting others, giving, accepting, and utilizing constructive feedback, and developing and maintaining positive working relationships with peers, supervisors, and others.

**Step 1:** If the intern continues to struggle with the problem areas and or the intern’s performance competencies are rated below satisfactory levels during quarterly evaluations, a performance improvement plan will be developed using the NSU a Performance Planning Worksheet (Appendix L) to remediate any deficient areas. The performance improvement plan must be signed by the intern and primary supervisor, and a copy forwarded to the Internship Director of Training. The performance improvement plan will focus on improving minimum competencies and or professionalism within a clearly defined timeframe. Remediation strategies may include increased supervision, additional readings, increased opportunities to practice, additional coursework, etc.

**Step 2:** If the site supervisor and intern cannot reach an agreement about the performance improvement plan, the Internship Director of Training would mediate the situation.

**Step 3:** If the Internship Director of Training was unable to resolve the situation, consultation would be requested from the CPS doctoral programs Director of Clinical Training to aid with the resolution of the problem, and development of performance improvement plan. Decisions regarding problem resolution are individual and specific to the facts related to each intern.

**Step 4:** If minimum competencies are not attained within the established timeframe of the performance improvement plan, disciplinary action (including dismissal from the internship program) in keeping with rules and regulations covering disciplinary actions outlined by NSU’s Office of Human Resources may be warranted. NSU’s Office of Human Resources will be consulted via the CPS representative for approval prior to administering disciplinary action beyond a verbal warning.

The Internship Director of Training investigates any behaviors that may warrant disciplinary action and is consulted prior to the recommendation of any disciplinary action. The intern would meet with the Internship Director of Training, including a representative from the university community of his/her choosing if desired. The Internship Director of Training would present the results of the investigation and make a recommendation to the Dean of the CPS and the SFCIP Executive Board, with whom the intern could also meet, and a decision would be made regarding any further action. The Director of Clinical Training for the CPS doctoral programs would be kept apprised of the progress. The SFCIP site supervisor(s) would be informed about any decisions or actions taken by the university. The intern could appeal any disciplinary action affecting employment to the NSU Office of Human Resources or to the Dean of CPS for disciplinary actions affecting academic standing.
Appeals

Interns wishing to contest disciplinary decisions with the NSU Office of Human Resources must follow NSU’s Formal Grievance Hearing Policy: http://www.nova.edu/cwis/hrd/emphanbk/hearing.html.

Interns who wish to contest disciplinary decisions affecting academic standing must submit a written appeal with the Dean of CPS within 30 working days of the decision. Additional steps to be taken by the Dean are outlined in the CPS Doctoral Handbook.

Intern Grievances

The CPS, SFCIP Executive Board, and supervisors value professionalism, honesty, and ethical conduct in the handling of intern concerns. At all times, matters are handled in the spirit of education and development. The purpose of the intern grievance and appeals process is to allow for the orderly resolution of intern grievances. At all times, the respect and protection of interns is of utmost concern. In keeping with the policy of NSU’s Office of Human Resources, interns who file a grievance will not be retaliated against through any adverse action by their supervisor or any NSU representative. If an intern has a grievance about his/her training, the following steps should be taken:

Step 1: The intern should work with his/her supervisor to resolve the issue.

Step 2: If a resolution is not achieved, the intern should advise the Internship Director of Training, who would attempt to mediate or resolve the concern. Should the issue involve the Internship Director of Training, the intern would advise the SFCIP Chief Psychologist who would attempt to mediate or resolve the situation.

Step 3: If the intern believes that the informal process above is unsuccessful in resolving the issue, the intern may file a written grievance with the Internship Director of Training (or Chief Psychologist, if grievance involves the Internship Director of Training), including a concise statement of the particular manner of harm, along with all relevant facts and compelling supporting evidence.

a) The Internship Director of Training (or Chief Psychologist, if grievance involves the Internship Director of Training) will review the written document to determine if the complaint warrants further review. If the no further review is warranted, the formal grievance will be terminated and the intern will be provided with a brief written explanation. If further review is warranted, the grievance will be forwarded to the SFCIP Executive Board (EB).

b) The EB will conduct a substantive review of all facts it deems pertinent to the grievance and, at its discretion, may interview the intern or any other pertinent person that it judges has the information relevant to the review.

c) The EB will file a written recommendation, with justification, to the Dean of the CPS. Recommendations of the EB will also be forwarded to the
appropriate site supervisor(s)/administrator(s) for review and response. The decision of the EB is final.

It is the responsibility of the Internship Director of Training to follow-up on the response to these recommendations by ensuring that site supervisors or others implicated in the intern grievance submit responses to the EB and that all EB decisions are implemented by the training sites or the program.

APPLICATION PROCESS

The South Florida Consortium Internship Program is fully affiliated with the NSU Center for Psychological Studies (CPS) psychology doctoral programs. Applicants must be enrolled in one of the Center for Psychological Studies APA-accredited doctoral programs at Nova Southeastern University. In addition, they must have completed a minimum of two years of residential doctoral-level training, including at least 600 hours of supervised clinical practicum experience. Approval of a dissertation proposal or final research project by the time of acceptance of an internship is preferred.

The SFCIP participates in the APPIC Match. Internship offers are made in compliance with APPIC guidelines. This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

Application materials should be submitted to the APPIC online application system (Please, do not forward any materials directly to the program), and the following is required:

1. Cover letter – must identify at least two sites of interest
2. A completed APPI form.
3. A curriculum vitae.
4. Official transcripts of all graduate work.
5. Three (3) letters of recommendation from faculty and supervisors.

The deadline for receipt of all application materials is November 1 of each year.

Any questions regarding applying to the SFCIP should be directed to:

Barbara Garcia-Lavin, Ph.D.
Interim Director of Division Internships and Training Programs
Nova Southeastern University
Center for Psychological Studies
3301 College Avenue, Ft. Lauderdale, FL 33314
(954) 262-7917, Email: garciala@nova.edu
Selection Priorities

The SFCIP is fully affiliated with the NSU CPS clinical psychology doctoral programs and will only accept applications from students at Nova Southeastern University.

Site Assignment

Applicant’s cover letters should identify those SFCIP sites for which they are most interested in being considered (please, list at least 2 sites). The quality of each applicant’s candidacy is assessed on the basis of review of the completed application materials and a personal interview by three or more evaluators. All applicants invited for interviews must attend Interview Day (usually scheduled for all day on the second or third Friday in January) in order to be considered for an internship position.

Applicants invited for interviews should make every effort to attend interview day in January where they will be provided the opportunity to meet with the site representatives, current interns, the site supervising psychologists and the DOT. Additional interviews at SFCIP partner sites may also be arranged.

Each SFCIP Member site has their own match number, giving the applicant the opportunity to match with their preferred site. There is no limit to the number of SFCIP sites applicants may rank.

Prior to beginning internship and depending on the internship site’s requirements, interns may be subject to criminal background check, drug screening, and/or health screening. The offer for intern placement is contingent upon passing one or all of these screenings. Should an intern match with SFCIP and not pass any of the required screenings, the guarantee of an internship position may no longer be binding.

STIPEND/BENEFITS

The stipend for all SFCIP interns is $16,000 for a 12-month period. The university libraries, computer labs, and fitness centers are available to all SFCIP interns.

Interns who match to Henderson Behavioral Health and Chrysalis Health will be employees of their site, and will receive leave time and benefits, including health and dental insurance, provided by the site to its other employees (see site descriptions above for details).

Interns who match to the Broward Health Medical Center, the Broward Sheriff’s Office, Renfrew Center, and Memorial Regional Hospital will be employees of NSU-CPS. These interns will receive all benefits accorded to NSU-CPS employees, including medical and dental insurance options, 15 days paid vacation, 11 sick days, 3 personal days, and all university holidays. Tuition reimbursement is also available after 6 months of employment.
RESOURCES

Interns receive administrative support from the internship program Graduate Assistants. Interns also have access to all of the CPS and University resources which include a fully stocked psychological testing library on the second floor of the Maltz Psychology Building, campus-wide computer labs, and state-of-the art University libraries: http://www.nova.edu/community/libraries.html, including the extensive full-text electronic journal holdings at the Alvin Sherman Library: http://www.nova.edu/library/main/.

THE REGION

The Nova Southeastern University's Center for Psychological Studies is located in Fort Lauderdale, Florida. The area is noted for its rich cultural diversity, year-round mild climate, beaches, resorts, and outdoor recreational activities. With easy accessibility to downtown Fort Lauderdale and Miami, there are many cultural resources including libraries and philharmonics, ballet, and theatrical companies.

There are several universities and colleges in the Dade, Broward, and Palm Beach County area. Lectures and workshops by visiting scholars from a wide range of fields are frequent. Living expenses are relatively reasonable, and one can choose from living situations ranging from rural to suburban to beachfront. All of this makes for an excellent environment within which to spend a year of training.

NOTICE OF NONDISCRIMINATION

NSU admits students of any race, color, religion or creed, sex, pregnancy status, national or ethnic origin, nondisqualifying disability, age, ancestry, marital status, sexual orientation, unfavorable discharge from the military, status as a disabled veteran, or political beliefs to all the rights, privileges, programs, and activities generally accorded or made available to students at NSU, and does not discriminate in the administration of its educational policies, admission policies, scholarship and loan programs, and athletic and other school-administered programs.

Nova Southeastern University is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools (1866 Southern Lane, Decatur, Georgia 30033-4097: Telephone number 404-679-4501) to award bachelors, masters educational specialist, and doctoral degrees. The University is chartered by the State of Florida.
### Appendix A
South Florida Consortium Internship Program

**2014-2015**

**SCHEDULE OF DIDACTIC TRAINING SEMINARS & ACTIVITIES**

<table>
<thead>
<tr>
<th>Date and Location</th>
<th>Title</th>
<th>Presenter(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/5/14 Room 2055/57 9:00 am – 10:30 am</td>
<td>SFCIP Orientation</td>
<td>Barbara Garcia-Lavin, Ph.D.</td>
</tr>
<tr>
<td>9/5/14 Room 2055/57 10:30 am – 12:00 pm</td>
<td>Intern Presentations: why we do them, what we’ve learned, and strategies to get better</td>
<td>Barbara Garcia-Lavin, Ph.D.</td>
</tr>
<tr>
<td>9/5/14 Room 2055/57 12:00 pm – 2:00 pm</td>
<td>Welcome Luncheon – All Programs</td>
<td>Barbara Garcia-Lavin, Ph.D.</td>
</tr>
<tr>
<td>9/12/14 Room 2050 9:00 – 11:00 am</td>
<td>Supervision of Supervision * supervision Starts this week</td>
<td>Barbara Garcia-Lavin, Ph.D.</td>
</tr>
<tr>
<td>9/19/14 Room 2055 9:00 am – 12:00 pm</td>
<td>Understanding Substance Use</td>
<td>Deborah Lynskey-Lake, LCSW</td>
</tr>
<tr>
<td>9/26/14 Room TBA 10:00 am – 12:00 pm</td>
<td>Grand Rounds</td>
<td>Broward Health Medical Center</td>
</tr>
<tr>
<td>10/3/14 Carl DeSantis Building Knight Auditorium – Room 1124 9:00 am – 12:00 pm</td>
<td>Motivational Interviewing</td>
<td>Linda Sobell, Ph.D.</td>
</tr>
<tr>
<td>10/10/14 Room 2045 9:00 am – 12:00 pm</td>
<td>Program Evaluation Part 1</td>
<td>Angela Yehl, Psy.D.</td>
</tr>
<tr>
<td>10/17/14 Room 2050 9:00 am – 12:00 pm</td>
<td>Dissociation, Mindfulness and Interpersonal Connection in Therapeutic Outcome</td>
<td>Steve Gold, Ph.D.</td>
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<tr>
<td>10/24/14 Room TBA 10:00 am – 12:00 pm</td>
<td>Grand Rounds</td>
<td>Henderson</td>
</tr>
<tr>
<td>10/31/14 Room TBA 9:00 am – 12:00 pm</td>
<td>The Wechsler Intelligence Scales for Children, Fifth Edition (WISC-V): An Overview of the Revised Test and Q-Interactive</td>
<td>Maggie Kerr, Ph.D.</td>
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<tr>
<td>11/7/14 Room 2045 9:00 am – 12:00 pm</td>
<td><em>Topic TBD</em></td>
<td>Barry Nierenberg, Ph.D., ABPP</td>
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<td>Time</td>
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<tr>
<td>11/14/14</td>
<td>9:00 am – 12:00 pm</td>
<td>Room 2050</td>
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<tr>
<td>11/21/14</td>
<td>9:00 am – 12:00 pm</td>
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<tr>
<td><strong>11/28/14</strong></td>
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<tr>
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<td>Room TBA</td>
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<tr>
<td>12/12/14</td>
<td>9:00 am – 12:00 pm</td>
<td>Room 2045</td>
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<tr>
<td>12/19/14</td>
<td>9:00 am – 12:00 pm</td>
<td>Room 2045</td>
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<td>1/30/15</td>
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<td>8:00 am – 5:00 pm</td>
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<td>4/3/15</td>
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<td>9:00 am – 4:30 pm</td>
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<td>5/8/15</td>
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<td>9:00 am – 12:00 pm</td>
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<td>10:00 am – 11:00 am</td>
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<td>5/22/15</td>
<td>9:00 am – 12:00 pm</td>
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<td>Date</td>
<td>Time</td>
<td>Event</td>
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<tr>
<td>5/29/15</td>
<td>10:00 am – 12:00 pm</td>
<td>Grand Rounds</td>
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<td>6/5/15</td>
<td>9:00 am – 10:00 am</td>
<td>Sexual Orientation and Eating Disorders</td>
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<tr>
<td>6/5/15</td>
<td>10:00 am – 11:00 am</td>
<td>When Religion and Psychotherapy Collide</td>
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<tr>
<td>6/5/15</td>
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<td>Cultural Considerations for the Treatment of Eating Disorders in Hispanic Women</td>
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<td>GRADUATION WEEKEND</td>
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<td>6/19/15</td>
<td>9:00 am – 12:00 pm</td>
<td>Psychopharmacology</td>
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<tr>
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<td>10:00 am – 12:00 pm</td>
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<td>7/3/15</td>
<td>9:00 am – 12:00 pm</td>
<td>Dialectical Behavioral Therapy</td>
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<tr>
<td>7/10/15</td>
<td>9:00 am – 10:00 am</td>
<td>Psychological Assessment in the Medical Setting</td>
</tr>
<tr>
<td>7/10/15</td>
<td>10:00 am – 11:00 am</td>
<td>Incorporating Positive Psychology into Treatment Approaches When Working with Acute Mental Illness</td>
</tr>
<tr>
<td>7/10/15</td>
<td>11:00 am – 12:00 pm</td>
<td>Construct, Strengths, and Limitations of the MMPI-2-RF</td>
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<tr>
<td>7/17/15</td>
<td>9:00 am – 10:00 am</td>
<td>Trauma Focused Cognitive Behavioral Therapy (TF-CBT) for Child and Adolescent Victims of Sexual Abuse</td>
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<tr>
<td>7/17/15</td>
<td>10:00 am – 11:00 am</td>
<td>Psychodynamic Approaches to the Treatment of Anxiety</td>
</tr>
<tr>
<td>7/17/15</td>
<td>11:00 am – 12:00 pm</td>
<td>Mindfulness-Based Interventions for Children, Adolescents, and Their Parents</td>
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<tr>
<td>7/24/15</td>
<td>9:00 am – 10:00 am</td>
<td>Working with Male Survivors of Sexual Abuse</td>
</tr>
<tr>
<td>7/24/15</td>
<td>10:00 am – 11:00 am</td>
<td>Sexual Abuse Evaluations with Haitian-American Adolescents</td>
</tr>
<tr>
<td>7/24/15</td>
<td>11:00 am – 12:00 pm</td>
<td>Eating Disorders Among Jewish Women: Cultural and Ethical Factors</td>
</tr>
<tr>
<td>Date</td>
<td>Time</td>
<td>Event</td>
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<tr>
<td>7/31/15</td>
<td>11:00 am – 12:00 pm</td>
<td>Grand Rounds</td>
</tr>
<tr>
<td>8/7/15</td>
<td>10:00 am – 12:00 pm</td>
<td>Gender and Orientation</td>
</tr>
<tr>
<td>8/14/15</td>
<td>9:00 am – 12:00 pm</td>
<td>Exploring Telehealth in Clinical Psychology</td>
</tr>
<tr>
<td>8/21/15</td>
<td>9:00 am – 12:00 pm</td>
<td>Intern Presentations- make ups</td>
</tr>
<tr>
<td>8/28/15</td>
<td></td>
<td>Last Day!</td>
</tr>
</tbody>
</table>
### Appendix B

#### The South Florida Consortium Internship Program

**INTERN ACTIVITY LOG**

<table>
<thead>
<tr>
<th>NAME:</th>
<th>SITE:</th>
<th>SUPERVISOR SIG.</th>
<th>MONTH/YEAR:</th>
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<th><strong>Direct Services</strong></th>
<th><strong>Type</strong></th>
<th><strong>Hours</strong></th>
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<td>Therapy</td>
<td>Individual</td>
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</tr>
<tr>
<td></td>
<td>Group</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Family</td>
<td></td>
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<tr>
<td></td>
<td>Marital</td>
<td></td>
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<tr>
<td></td>
<td>Other:</td>
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<table>
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<tr>
<th><strong>Intakes</strong></th>
<th><strong>Assessment/reports</strong> (Attach Documentation of Completed Reports Form)</th>
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<tr>
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<td><strong>TOTAL DIRECT SERVICES HOURS:</strong></td>
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<tr>
<td></td>
<td><strong>Indirect Services</strong></td>
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<tr>
<td></td>
<td>Charting</td>
<td></td>
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<td></td>
<td>Treatment Planning</td>
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<td></td>
<td>Case Consultation with other professionals</td>
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<tr>
<td></td>
<td>Other:</td>
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<tr>
<td></td>
<td><strong>TOTAL INDIRECT SERVICE HOURS:</strong></td>
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<tr>
<th><strong>Training Activities</strong></th>
<th><strong>Explanation (if necessary)</strong></th>
<th><strong>Hours</strong></th>
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<td>Professional Development</td>
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<tr>
<td>Grand Rounds</td>
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<td></td>
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<tr>
<td>Supervision of Practicum Students</td>
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<tr>
<td>Multidisciplinary Teams</td>
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<tr>
<td>In-service Trainings</td>
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<tr>
<td>Other:</td>
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<tr>
<td><strong>TOTAL MONTHLY TRAINING HOURS:</strong></td>
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<table>
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<td>White:</td>
<td>Adolescent:</td>
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<td>Biracial:</td>
<td>Adult:</td>
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<td>Asian:</td>
<td>Older Adult:</td>
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<td>GLBT:</td>
<td>Other:</td>
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<td>Disabled:</td>
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</table>

Revised 9/14
Appendix C
South Florida Consortium Internship Program
DOCUMENTATION OF COMPLETED REPORTS

NAME: ___________________ TRAINING YEAR: ___________________

SITE: __________________________

<table>
<thead>
<tr>
<th>Date of Report</th>
<th>Supervisor Signature</th>
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<td>4.</td>
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<td>5.</td>
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</tbody>
</table>
Appendix D

PROGRAM EVALUATION Curriculum

Description:
This three-part training activity involves: 1) assessment of Intern knowledge of Program Evaluation both prior to (pre-test) and following (post-test) didactic instruction, 2) Two didactic training sessions focused on theories and methods of Program Evaluation, and 3) a Logic Model group activity carried by the interns. Interns will gain knowledge of theories and methods of Program Evaluation during two didactic sessions. After the first didactic, they will collaborate with their site supervisors on carrying out a program evaluation, applying the Logic Model method. During the second didactic, interns’ group project will be reviewed and they will be trained on delivering program evaluation feedback to stakeholders.

Rationale:
It is important that Psychology interns understand and are able to apply Program Evaluation theories and methods in their future work as Psychologists. Given that psychologists should demonstrate clear evidence of effectiveness in achieving desired goals, conducting formal program evaluations is one way to be rigorous in this endeavor. This three-part training activity will expose interns to various theories and methods of program evaluation and gauge learning with pre-and post-tests. In addition, interns will have the opportunity to apply these new skills through a small-group Logic Model exercise.

Learning Objectives and Outcomes:
Interns will demonstrate intermediate to advanced levels of competency in program evaluation knowledge and skills. Interns who successfully complete this training will be able to:

1) Demonstrate knowledge of the theories and methods of Program Evaluation.
2) Demonstrate the ability to develop a logic model that is relevant to their current work.
3) List 1-2 ways in which a logic model may be helpful.

Activities:
• Interns will complete the Program Evaluation Pre-test
• Interns will attend two Program Evaluation didactic presentations
• Interns will complete the Program Evaluation Post-test.
• Interns will plan and execute a small-group program evaluation, using a Logic Model.

Outcome Measures:
• Pre and Post tests
• Evaluation of Intern competencies in program evaluation using the Program Evaluation Knowledge and Skills Rating Form
• Evaluation by the Intern’s supervisors of Intern competencies in program evaluation using the Intern Quarterly Evaluation based on feedback from the Program Evaluation Knowledge and Skills Rating Form as well as any other available evidence from site-based program evaluation activities.

Resources:
Webinar on LOGIC model at:
http://www.uwex.edu/ces/lmcourse/interface/coop_M1_Overview.htm
Helpful Worksheets:
http://www.uwex.edu/ces/pdande/evaluation/evallogicmodelworksheets.html
Templates and Examples: http://www.uwex.edu/ces/pdande/evaluation/evallogicmodel.html
Appendix E
South Florida Consortium Internship Program
Monthly Supervision Attendance Record

Supervisee Name ________________________________
Supervisor Name ________________________________
Month ________________________________
Supervisor Signature ________________________________

Supervision Type
Individual = I  Group = G  Postdoc=P

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<th>Time (hrs.)</th>
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<th>√ If you provided supervision to someone</th>
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Total hours INDIVIDUAL SUPERVISION (licensed psychologist only) = ___________

Total hours of GROUP SUPERVISION (licensed psychologist only) = ___________
Appendix F
Nova Southeastern University Center for Psychological Studies
South Florida Consortium Internship Program

Intern Training Agreement

Name of Intern: ______________________________________________________

Site: ______________________________________________________________

Site Supervisor: ____________________________________________________

Internship Year: ________________   Date of Agreement: ________________

Instructions:
At the beginning of the internship discuss and establish with the intern the major activities in which he/she is expected to engage and list them below. In addition, list and identify training objectives and methods within specified goal areas. These constitute a contract and should be considered to form part of the basis for evaluation of the intern’s performance.

A. Major Activities

1) Direct Clinical Contact (specify # of hours [a minimum of 25% or 10 hours per week is required] and type of contact, e.g., individual, group, family, psychotherapy, testing, consultation, etc.)

   • A minimum of 10 hours (25%) to a maximum of twenty-four (24) hours per week of direct, face-to-face, client/patient contact, to include the following approximate percentages for each type of intervention contact:

   ______%  Individual Therapy

   ______%  Group Therapy

   ______%  Family Therapy

   ______%  Other Therapy, Please specify: ________________

   ______%  Consultation with other professionals or others involved in client/patient care

   • Six (6) psychological evaluations for the year
2) **Supervision** (specify # of hours [at minimum four hours total required: at least two hours of individual supervision from licensed psychologist required], with whom (name of supervisor, postdoc, etc.), and type- group, individual, case conference, etc.)
   
   a) Individual Supervision:
   
      •
      
      •

   b) Group Supervision:
      
      • One hour per week of group supervision with Dr. Garcia-Lavin, SFCIP Director of Training
      • One hour biweekly of group supervision with NSU Postdoc under the supervision of Drs. Nguyen and Garcia-Lavin.
      
      •

   c) Additional supervision (if any):

3) **Training, Lecture Seminars & Educational Activities**

      • 3 hours of Professional Development seminars bimonthly on Fridays 9am-12pm required; there will also be a few full-day trainings offered throughout the year per training calendar.
      • 2 hours of Grand Rounds at local agencies and NSU clinics once a month
      • 2 hours of Intern Presentations monthly
      • 1 hour of Orientation with DOT once per year

B. **Schedule of Time Spent** (Monthly):

1) At Internship Site:

2) Grand Rounds: 2 hours of Grand Rounds at local agencies and NSU clinics once a month on specified Fridays 10am – 12pm. Interns will assist with
coordinating and planning Grand Rounds when it is their site’s turn to host the event.

3) Professional Development: 3 hours of Professional Development seminars bimonthly on Fridays 9am-12pm required; there will also be some full day trainings offered throughout the year.

4) Other (specify: NSU supervision with training director or Postdoc, conferences, agency/community meetings, etc.):
   - 2-3 hours of Intern Presentations monthly on specified Fridays 9am – 12pm
   - 1 hour/week of group supervision with Dr. Garcia-Lavin on Friday afternoons
   - 1 hour of group supervision with NSU postdoc bimonthly

C. Training Goals:
   Within each goal/objective area, indicate specific training methods that will be used onsite (e.g., experiential learning, observation, supervision, in-service trainings, etc.) and at NSU (e.g., attendance/presenting at PD, Grand Rounds and other didactics on campus, group supervision, library research, etc.) for achieving these goals/objectives.

Goal #1: Interns will be prepared to competently practice professional psychology.

Objective A: Interns will demonstrate active participate in the program training activities.

Methods: Interns will receive an orientation session to acquaint them to all required internship documentation and activities reminders about attendance at required events and submitting required documentation. They will be given opportunities to provide objective formal and informal feedback about training program and/or serve as an intern representative to the training committee. Additional methods include:

Objective B: Interns will follow APA ethical code of conduct and applicable laws.
Methods: Ethical issues will be discussed regularly during individual and group supervision with an emphasis on developing greater autonomy in appropriate management of ethical/legal matters as the year progresses. Interns will attend didactics focused on ethical and legal issues. Additional methods include:

Objective C: Interns will routinely use scholarly material to guide their clinical work.

Methods: Individual and group supervision will regularly include discussions about the empirical support for an array of assessment and intervention approaches used with clients, as well as the current scientific knowledge about specific psychiatric diagnoses encountered. Interns will attend internship training activities (e.g., PD, Grand Rounds and intern presentations) exposing them to a broad array of clinical/scientific knowledge from NSU faculty and other experts. During the training year, interns will present one 1-hour workshop, on a topic of interest, to fellow interns based on a review of the relevant empirical literature in the chosen area. Additional methods include:

Goal #2: Interns will develop proficiency in evaluation, diagnostic, and general assessment skills.

Objective A: Interns will be proficient in completing written clinical evaluations of patients.

Methods: Interns will be regularly assigned intake assessments and at least six comprehensive evaluations during the training year. Supervision will include reviews of all written evaluations. Additional methods include:

Objective B: Interns will be able to use DSM and/or ICD systems to diagnose and provide a multi-axial assessment for patients.

Methods: Diagnostic issues will be discussed regularly during individual and group supervision. Interns will attend internship training activities (e.g., PD, Grand Rounds and intern presentations) exposing them to the current scientific knowledge and a variety of perspectives about specific psychiatric diagnoses. Additional methods include:
Objective C: Interns will take cultural and ethnic diversity into consideration in developing an appropriate assessment strategy for each client.

**Methods:** Interns will be assigned a diverse assessment case load. Individual and group supervision will regularly include discussions about cultural and individual factors relevant to assessment. In addition, interns will attend didactic trainings focused on cultural and individual differences. Additional methods include:

---

Objective D: Interns will be able to effectively administer, interpret, and write integrated psychological reports.

**Methods:** Supervision will cover assessment instrument selection, administration and interpretation, as well as reviews of written reports. Interns will attend seminars focused on increasing assessment knowledge and competencies, and Grand Rounds at community agencies where they will learn about possible community referral resources to inform report recommendations. Opportunities to consult with NSU faculty regarding assessment/report writing issues will be made available throughout the year. Assessment instruments will be available from the CPS academic program as needed. Additional methods include:

---

Goal #3: Interns will develop proficiency in providing clinical interventions.

Objective A: Interns will be able to develop an appropriate treatment plan based upon conceptualization, theoretical understanding, and empirical support for each client’s presenting problem.

**Methods:** Individual and group supervision will regularly include reviews of client/patient histories, case conceptualization, current scientific knowledge relevant to cases, treatment planning and client progress, and termination/transfer issues. Interns will attend didactic trainings focused on psychopathology and treatment interventions for adults and youth. Additional methods include:

---

Objective B: Interns will take into account implications of diversity in relation to conceptualization, treatment planning, and therapist/client interaction.

**Methods:** Interns will be assigned a diverse intervention case load. Individual and group supervision will regularly include discussions about important cultural and individual considerations for establishing/maintaining rapport, conceptualizing cases, and treatment planning. Interns will attend didactic trainings focused on cultural and individual differences. Additional methods
Objective C: Interns will identify and discuss alternative theoretically-based methods of treating cases.

**Methods:** Individual and group supervision will regularly include discussions about the empirical support for an array of intervention approaches used with clients. Interns will attend internship training activities (e.g., PD, Grand Rounds and intern presentations) exposing them to a broad array of clinical/scientific intervention knowledge from NSU faculty and other experts. During the training year, interns will present one 1-hour workshop on a topic of interest, to fellow interns based on a review of the relevant empirical literature in the chosen area. Additional methods include:

Objective D: Interns will demonstrate the ability to consistently establish strong therapy alliances and effectively implement an array of psychotherapeutic interventions.

**Methods:** Individual and group supervision will regularly include discussions about rapport and relationships with clients and others. Interns will attend seminars where they will be exposed to a variety of therapeutic intervention approaches. Opportunities to consult with NSU faculty regarding specialized interventions will be made available throughout the year. Additional methods include:

Goal #4: Interns will develop basic proficiency in consultation, program evaluation, and supervision.

Objective A: Interns will be able to provide appropriate in-service training sessions.

**Methods:** Interns will receive mentoring on the development of an hour-long presentation to fellow interns from supervisors, and will be given feedback about their presentation skills following their presentation. Additional methods include:

Objective B: Intern will effectively participate in a multi-disciplinary team.

**Methods:** Interns are considered staff and will regularly consult, in a professional manner, with other site staff, administrators, and supervisors, as well as with families and other professionals. Consultation activities will be discussed during individual and group supervision with a focus on developing greater professional
autonomy in this area as the year progresses. Additional methods include:

Objective C: Intern will participate in program evaluation activities.

**Methods:** Interns will receive training on completing all required internship evaluation documentation and given opportunities to provide objective feedback about the training program both formally and informally throughout the year, including completing weekly surveys about training activities and mid-year and end of year program and supervisor evaluations. Interns will be provided the opportunity to serve as an intern representative to the SFCIP Operations Board to assist with program evaluation efforts. Interns will receive didactic training in program evaluation and complete a program evaluation project. Additional methods include:

Objective D: Intern will seek consultation or supervision as needed and use it productively.

**Methods:** Interns will be provided with regularly scheduled weekly individual and group supervision and will be encouraged to be active participants by arriving to supervision prepared to discuss cases, review work, and actively engage in the learning process, as well as consistently following through on supervisor suggestions in a timely manner. Additional methods include:

Objective E: Intern will be able to understand how to, and/ or provide competent developmentally appropriate supervision.

**Methods:** Weekly group supervision with the DOT will include supervision of the interns’ supervision of practicum students and others, including reviews of supervision models and approaches, supervision session recordings, relevant readings, etc. Additional methods include:

I have read and understand the above statements and agree that they accurately represent the agreement between the site supervisor and myself. I understand that the site supervisor and my site are legally responsible for all clinical work.

School agrees to comply with the applicable provisions of the Federal Privacy Rule promulgated by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) as contained in 45 CFR Parts 160 and 164 (“the HIPAA Privacy Rule”). School agrees not to use or further disclose any protected health information.
(“PHI”), as defined in 45 CFR 164.504, other than as permitted by this Agreement and the requirements of the HIPAA Privacy Rule. School will implement appropriate safeguards to prevent the use or disclosure of PHI other than as provided for by this Agreement. School will promptly report to Facility any use or disclosure of PHI not provided for by this Agreement or in violation of the HIPAA Privacy Rule of which School becomes aware. If School contracts with any agents to whom School provides PHI, School will include provisions in such agreement whereby School and agent agree to the same restrictions and conditions that apply to School with respect to uses and disclosures of PHI. School will make its internal practices, books, and records relating to the use and disclosure of PHI available to the Secretary of the Department of Health and Human Services to the extent required for compliance with the HIPAA Privacy Rule. The parties acknowledge that the PHI, including but not limited to medical records, laboratory tests and radiology films, may be utilized by School for educational purposes upon redaction of patient identifying information, in accordance with the HIPAA de-identification standards. To the extent that information has not been de-identified, School will either return or destroy the information. To the extent that it is not feasible to return or destroy the information, School will continue to safeguard the PHI beyond the termination of this contract and not use or disclose the PHI for purposes other than those which make the return to destruction infeasible. Notwithstanding the foregoing, no attorney-client, accountant-client, risk management, attorney work-product or other legal privilege shall be deemed waived by Faculty or NSU by virtue of this Section.

Signature of Intern: _________________________________________
Date: ____________

Signature of Site Supervisor: _________________________________________
Date: ____________

Signature of SFCIP Director of Training: ______________________________
Date: ____________
## Intern Presentation Ratings

<table>
<thead>
<tr>
<th>Element</th>
<th>Criterion for “target” rating</th>
<th>Not Met</th>
<th>Met</th>
<th>Exceeded</th>
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<tr>
<td>Expressive Skills</td>
<td>Communicates clearly using verbal skills (goes well beyond merely reading directly from slides); holds the attention of the audience (actively engaging the audience would be exceeding expectation); integrates verbal skills with other teaching methods (e.g., PowerPoint presentation, videos, role-plays, etc.)</td>
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<td>Expressive Skills</td>
<td>Responds to the audience by accurately and completely responding to questions <em>and/or</em> modifying presentation style to meet the needs of the participants, <em>and/or</em> introduces innovation/creativity into application of teaching method.</td>
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<td>Scholarly Inquiry</td>
<td>Clearly articulates support for presentation point(s) from the literature (referencing at least 2 peer-reviewed journal articles during presentation).</td>
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<td>Scholarly Inquiry</td>
<td>Demonstrates being a critical consumer of the research (e.g., presents both strengths and shortcoming of the literature reviewed for the presentation; discusses study design; describes how outcomes were measured, etc.).</td>
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<td>Scholarly Inquiry</td>
<td>Provides a thorough enumeration of all relevant points regarding the research literature base for presentation.</td>
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<td>Individual and Cultural Diversity (ICD) - Awareness</td>
<td>Includes a discussion of the effects of diversity in whatever form</td>
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<td>Individual and Cultural Diversity (ICD) - Awareness</td>
<td>Integrates knowledge of APA guidelines regarding working with culturally and linguistically diverse individuals, including recognition of cultural bias, into presentation.</td>
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<td>Ethics</td>
<td>Evaluates the ethical dimensions of the topic(s) discussed, and exhibits a well-developed ability to reason about ethical issues.</td>
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<td>Handouts</td>
<td>Provides any relevant materials (including Power Point handouts) which will help the participants understand and benefit from the presentation.</td>
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Appendix H
NOVA SOUTHEASTERN UNIVERSITY
PROFESSIONAL DEVELOPMENT
Evaluation Survey

Topic Title: ____________________________________________________________

Date: _______________   Presenter(s): _____________________________

We appreciate your help in evaluating this program. Please indicate your rating of the presentation in the categories below by circling the appropriate number, using the following scale:

1 – Deficient   2 – Weak   3 – Adequate   4 – Strong   5 - Outstanding

OBJECTIVES
This program met the stated objectives described:

1  2  3  4  5

SPEAKERS (generally)
1. Knowledgeable in content areas
2. Content consistent with objectives
3. Clarified content in response to questions
4. Prepared to present on topic
5. Able to answer questions

1  2  3  4  5

CONTENT
1. Appropriate for intended audience
2. Consistent with stated objectives

1  2  3  4  5

TEACHING METHODS
1. Visual aids, handouts, and oral presentations clarified content
2. Teaching methods were appropriate for subject matter

1  2  3  4  5

RELEVANCY
1. Information could be applied to practice
2. Information could contribute to achieving personal, professional goals
3. Your interest in the topic being presented

1  2  3  4  5

What is your overall rating of the presentation?
1  2  3  4  5

COMMENTS/PROGRAM IMPROVEMENTS:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please return to Dr. Garcia-Lavin’s Graduate Assistant (PSC Mailbox # 83)
Thank you!

Revised 9/14
Appendix I
South Florida Consortium Internship Program

Evaluation of Training Program

Training Year __________________   ____Mid Year _____End of Year

Site: __________________________________________________________

Use the five point scale below to rate the quality of each of the components of the training program listed, providing comments where relevant. Return the form to the Director of Training.

Rating:

<table>
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<th>1 – Deficient</th>
<th>2 – Weak</th>
<th>3 – Adequate</th>
<th>4 – Strong</th>
<th>5 - Outstanding</th>
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1) Quality and variety of direct service experiences available:
   1   2   3   4          5

   Comments:______________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________

2) Quality and usefulness of special topics seminars (e.g., PD and Grand Rounds):
   1   2   3   4          5

   Comments:______________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________

3) Quality and usefulness of other training experiences (e.g., intern presentations, postdoc supervision, etc.):
   1   2   3   4          5

   Comments:______________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________

4) Use the same **5-point scale** to rate the following aspects of the internship program:
   _______  Acceptance by site staff
5) What do you identify as strengths of this internship?

a) ____________________________________________

b) ____________________________________________

c) ____________________________________________

d) ____________________________________________

6) What do you identify as weaknesses of this internship?

a) ____________________________________________

b) ____________________________________________

c) ____________________________________________

d) ____________________________________________
7) Please give any suggestions that could be used to help next year’s interns and the internship program.

a) ____________________________________________

b) ____________________________________________

c) ____________________________________________

d) ____________________________________________

______________________________
Intern Signature and Date
Appendix J
South Florida Consortium Internship Program
Supervisor Evaluation Form

Circle one:  Mid-Year    End-of-Year    Other:__________
(date)

Please rate your Supervisor on the following areas using the scale below:

1- Unsatisfactory
2- Below Average
3- Satisfactory
4- Above Average
5- Excellent
N/A- Not a focus of supervision

______ 1. Ability to create a supportive supervisory atmosphere.
Comments:_____________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

______ 2. Ability to increase your ability to conceptualize causative and maintaining factors in a
person’s (or system’s) adaptive and maladaptive pattern of functioning
Comments:_____________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

______ 3. Ability to expose you to a variety of assessment strategies.
Comments:_____________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

______ 4. Level of sensitivity displayed in reference to diversity issues.
Comments:_____________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

______ 5. Ability to expose you to different intervention strategies.
6. Ability to increase your knowledge of legal and ethical issues.

Comments:

7. My supervisor was available for scheduled supervision.

Comments:

8. The manner in which my supervisor gave me feedback was respectful and collegial.

Comments:

Any additional comments regarding any other areas of supervision not covered above:

Intern Name: ___________________________ Date: _____________

Intern Signature: ___________________________ 

Supervisor Name: ___________________________

Site: _______________________________________

Revised 9/14
Appendix K
South Florida Consortium Internship Program
INTERN PERFORMANCE EVALUATION FORM

Intern Name:_________________________________ Date:__________________

Term:_______________________________________ Year:__________________

Clinical Supervisor:_____________________________________________________

Quarter: (circle one)    First  Second  Third  Final

I. Goal: The Intern is prepared to competently practice professional psychology

1) Objective A: The intern actively participates in program training activities.

   No Basis for judgment

   Exceeds Expectations / Ready for autonomous practice
   Takes initiative by regularly attending all required training activities (including supervision, site-sponsored training activities, weekly Professional Development/Grand Rounds, etc.) and seeking out and engaging in other professional development activities (e.g., attendance at local, state, or national conferences, university-sponsored events, agency events, etc.) without need for input from supervisors. Correctly and promptly completes all related training documentation.

   Meets Expectations / Needs occasional supervision
   Participates in all required training activities and submits relevant documentation. Promptly responds to supervisor input on rare occasions that does not.

   Needs regular supervision
   Unable to meet participation goal without significant input from supervisors.

   Needs remedial work
   Does not actively participate in training activities despite input from training faculty. Frequently misses training activities or fails to submit accurate or timely documentation.

Additional comments: (optional)
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2) Objective B: The intern follows APA ethical code of conduct and applicable laws.

   No Basis for judgment

   Exceeds Expectations / Ready for autonomous practice
Spontaneously and consistently identifies ethical issues, effectively resolves issues with minimal input.

____ Meets Expectations / Needs occasional supervision
Consistently recognizes ethical issues and seeks out supervision to resolve issues.

____ Needs regular supervision
Generally recognizes situations where ethical issues might be pertinent, but may hesitate or avoid resolving issues. Is using supervision to overcome barriers to resolution.

____ Needs remedial work
Often unaware of important ethical issues or engages in unethical conduct.

Additional comments: (optional)
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

3) Objective C: The intern routinely uses the scholarly/professional literature to guide clinical work

____ No Basis for judgment

____ Exceeds Expectations / Ready for autonomous practice
Actively seeks to increase knowledge and expand range of interventions by routinely reading relevant clinical literature and consulting with professional experts. Successfully applies scholarly knowledge during case conceptualization and treatment planning resulting in improved client outcomes.

____ Meets Expectations / Needs occasional supervision
Intern identifies areas of knowledge that need enhancement with a particular client and asks for suggestions regarding readings, and makes attempts to apply relevant knowledge to clinical work.

____ Needs regular supervision
Intern readily accepts and reads professional writings as assigned by the supervisor, and accepts supervisor guidance to effectively apply knowledge to clinical work and/or identify areas of knowledge requiring enhancement.

____ Needs remedial work
Intern seems unaware of knowledge gaps, and/or procrastinates regarding professional readings assigned by supervisor to learn essential treatment-oriented competencies. Intern has not been able to use supervision to improve knowledge base.

Additional comments: (optional)
________________________________________________________________________
________________________________________________________________________
II. Goal: The Intern is proficient in evaluation, diagnostic and general assessment skills

1) Objective A: The intern proficiently completes written evaluations of patients.

____ No Basis for judgment

____ Exceeds Expectations / Ready for autonomous practice
Gathers relevant information (histories, mental status, observations, etc.), independently selects appropriate tests to answer referral question. Proficiently administers all tests and skillfully administers all tests without errors. Written report is clear and through, follows a coherent outline, is an effective summary of relevant issues, directly addresses the referral question, and discusses strengths and limitations of assessment measures as appropriate. Relevant test results are woven into the report as supportive evidence. Recommendations are related to referral questions.

____ Meets Expectations / Needs occasional supervision
Collects relevant data, but occasionally needs reassurance that selected tests are appropriate. Occasional input needed regarding fine points of test administration and interpretation, but makes no administrative or scoring errors. Report covers essential points without serious error, may need polish in cohesiveness and organization. Readily completes assessments with minimal supervisory input, makes useful and relevant recommendations.

____ Needs regular supervision
Needs continued supervision on frequently administered tests due to occasional administration and/or scoring errors. Needs frequent consultation regarding test selection. Understands basic use of tests, but may occasionally reach inaccurate conclusions or take computer interpretation packages too literally. Intern uses supervision effectively for assistance in determining important points to highlight.

____ Needs remedial work
Test administration is slow. Often needs to recall patient to further testing sessions due to poor choice of tests administered. Over-reliance on computer interpretation packages for interpretation. Repeatedly makes careless administration or scoring errors, and/or omits significant issues from assessments, and/or reaches inaccurate or insupportable conclusions. Poor grammar interferes with communication. Reports are poorly organized and require major rewrites.

Additional comments: (optional)
2) **Objective B:** The intern uses DSM and/or ICD systems to diagnose and provide a multi-axial assessment for patients.

- **No Basis for judgment**
- **Exceeds Expectations / Ready for autonomous practice**
  
  The intern provides consistent and accurate diagnostic impressions, including careful, independent consideration of all diagnostic criteria and possible differential diagnosis; other factors supporting the clinical presentation, including: personality, cognitive abilities, medical problems, social, cultural, and/or environmental; and the client’s global level of functioning.

- **Meets Expectations / Needs occasional supervision**
  
  The intern provides diagnostic impressions, which fit the client’s presentation, and seeks supervision to clarify and/or streamline diagnostic impressions, other factors contributing to the client’s presentation, and/or the client’s functional status.

- **Needs regular supervision**
  
  The intern is able to discuss relevant symptoms and/or functional difficulties, but occasionally reaches inaccurate diagnostic impressions. Intern uses supervision effectively to hone diagnostic impressions.

- **Needs remedial work**
  
  The intern’s diagnostic impressions are frequently inaccurate and/or unsupported by the client’s presentation, history, etc. Intern has not been able to use supervision to improve diagnostic skills.

**Additional comments:** (optional)

________________________
________________________
________________________

3) **Objective C:** The Intern takes cultural and ethnic diversity into consideration in developing an appropriate assessment strategy for each client.

- **No Basis for judgment**
- **Exceeds Expectations / Ready for autonomous practice**
  
  Independently identifies diversity issues that may impact assessment outcomes and proficiently selects, administers, and interprets tests in a culture-fair manner. Conveys ease in testing diverse clients, demonstrates awareness and sensitivity to individual differences, accurately self-monitors own responses to differences, and effectively adapts testing procedures (e.g., testing limits, etc.) to maximize client performance.

- **Meets Expectations / Needs occasional supervision**
  
  Identifies diversity issues that may impact testing and seeks supervision/consultation to assist with culture-fair test selection, administration, and interpretation.
Needs regular supervision
Requires input from supervisor to identify diversity issues that may impact testing, and needs frequent consultation regarding test selection, administration, and interpretation with diverse clients. Intern uses supervision effectively for assistance in determining important points to highlight.

Needs remedial work
Has difficulty recognizing or working around prejudices, holds some beliefs which limit assessment effectiveness with certain patients, unable to surmount these problems to date in supervision.

Additional comments: (optional)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

III. Goal: The intern proficiency provides clinical interventions.

1) Objective A: The intern is able to develop an appropriate treatment plan based upon conceptualization, theoretical understanding, and empirical support for each client’s presenting problem.

No Basis for judgment
Exceeds Expectations / Ready for autonomous practice
Collaborates with the client in setting appropriate and attainable therapeutic goals. Interventions are accepted by patients and facilitate change. Intern is able to identify and revise treatment plan effectively when these are no longer effective for clients.

Meets Expectations / Needs occasional supervision
Sets appropriate goals. Most interventions are accepted by patients and facilitate change. However, intern requires supervisory assistance with the timing and delivery of more difficult interventions.

Needs regular supervision
Requires ongoing supervision to set therapeutic goals. Many interventions are delivered and timed well. Needs supervision to plan interventions.

Needs remedial work
Fails to set goals. Has frequent difficulty targeting interventions to patients' level of understanding and motivation. Supervision has not improved the intern’s treatment planning skills.

Additional comments: (optional)

________________________________________________________________________
________________________________________________________________________
2) Objective B: The intern takes into account implications of diversity in relation to conceptualization, treatment planning, and therapist/client interaction.

____ No Basis for judgment

____ Exceeds Expectations / Ready for autonomous practice
Spontaneously raises issues relating to individual differences with patients as appropriate, conveys ease in working with a range of backgrounds, aware and sensitive to individual differences, accurately self-monitors own responses to differences, and adapts professional behavior accordingly. Considers individual and cultural factors when conceptualizing cases, incorporates culturally relevant best practices when treating clients, and seeks consultation when needed.

____ Meets Expectations / Needs occasional supervision
Is sensitive and respectful of individual and cultural differences and works effectively with diverse clients. Articulates understanding of cultural factors when conceptualizing cases and treatment planning. Initiates supervisory discussion regarding areas of inexperience when needed.

____ Needs regular supervision
Has discomfort with some patients, resolves such issues effectively through supervision. Does not routinely take cultural factors into consideration when conceptualizing cases and/or formulating treatment plans.

____ Needs remedial work
Has difficulty recognizing or working around prejudices, holds some beliefs which limit effectiveness with certain patients, unable to surmount these problems to date in supervision.

Additional comments: (optional)


3) Objective C: The intern identifies and discusses alternative theoretically-based and research-support methods of treating cases.

____ No Basis for judgment

____ Exceeds Expectations / Ready for autonomous practice
Intern independently produces good case conceptualization within own preferred theoretical orientation and/or review of the clinical literature; can also incorporate some insights/approaches from other orientations to meet clients’ individual needs.

____ Meets Expectations / Needs occasional supervision
Adequately conceptualizes cases but tends to overly rely on one conceptual model and/or inconsistently considers the relevant research literature for all presenting problems and clients.

**Needs regular supervision**
Exhibits difficulty conceptualizing cases, but appears to benefit from supervision.

**Needs remedial work**
Treats without a theoretical/empirical framework to guide the work, and has not responded to supervision in this area.

**Additional comments: (optional)**

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4) **Objective D:** The intern demonstrates the ability to consistently establish strong therapy alliances and effectively implement an array of psychotherapeutic interventions.

**No Basis for judgment**

**Exceeds Expectations / Ready for autonomous practice**
Establishes quality relationships with almost all patients, reliably identifies potentially challenging patients and spontaneously makes adjustments. Independently adapts intervention approach to the individual needs of the clients.

**Meets Expectations / Needs occasional supervision**
Generally comfortable and relaxed with patients, handles anxiety-provoking or awkward situations adequately so that they do not undermine therapeutic success. Seeks input from supervisor when therapeutic intervention does not appear to be effective.

**Needs regular supervision**
Actively developing skills with new patient populations. Relates well when has prior experience with the population. Makes adequate use of supervisory feedback regarding work with new or challenging clients.

**Needs remedial work**
Has difficulty establishing rapport and tends to alienate patients, or as difficulty maintaining appropriate boundaries, or is rigid in psychotherapeutic approach to the detriment of clients, and has not been able to successful overcome these difficulties in supervision to date.

**Additional comments: (optional)**

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IV. Goal: The intern demonstrates basic proficiency in consultation, program evaluation, and supervision.

1) Objective A: Interns is able to provide appropriate in-service training sessions.

- **No Basis for judgment**
- **Exceeds Expectations / Ready for autonomous practice**
  The intern independently plans and prepares presentation, actively engages training participants, spontaneously adapts presentation style to meet the learning needs of the audience, presents concepts creatively and integrates scholarship effortlessly. Seeks feedback from audience to ensure their learning needs have been met and makes changes/additions to presentation based on this.
- **Meets Expectations / Needs occasional supervision**
  The intern demonstrates good oral communication skills during presentations. The content of presentations is relevant to learning objectives, participants’ professional development needs, and the setting.
- **Needs regular supervision**
  Intern provides basic, relevant information in an adequately organized manner, and is able to openly respond to audience questions/comments, but requires input from supervisors to plan, prepare, or deliver presentation.
- **Needs remedial work**
  Intern’s presentation style is flat, disorganized, or poorly articulated. Intern cannot answer audience questions and does not seem to fully understand the presented concepts, or these are irrelevant to the audience or setting.

Additional comments: (optional)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2) Objective B: Intern effectively participates in a multi-disciplinary team.

- **No Basis for judgment**
- **Exceeds Expectations / Ready for autonomous practice**
  Develops collaborative relationships, effectively relates to team members in accordance with their unique roles, effectively uses team format in the service of treatment needs. Develops positive alliances with other interns and colleagues, and handles differences openly.
- **Meets Expectations / Needs occasional supervision**
  Actively participates in team meetings and consults with other team members in service of client. Seeks input from supervisors to cope with rare interpersonal concerns.
- **Needs regular supervision**
Attends team meetings, but rarely provides input. Is aware of benefits of collaboration/consultation on client outcomes, but requires guidance to put this knowledge into practice. Effectively seeks assistance to cope with interpersonal concerns with colleagues.

___ Needs remedial work

Personal characteristics or dysfunctional behaviors significantly limit the intern's ability to participate in team model (e.g. withdrawn, overly confrontational, insensitive). Interactions with colleagues are hostile or otherwise ineffective, and the intern has not made any progress with this in supervision.

Additional comments: (optional)
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

3) Objective C: The intern participates in program evaluation activities.

___ No Basis for judgment

___ Exceeds Expectations / Ready for autonomous practice

The intern critically assesses own performance and independently and proactively takes steps to improve personal training outcomes. Recognizes and engages in opportunities to work collaboratively with training faculty to enhance internship program training outcomes. Provides constructive suggestions to improve program outcomes and assists with monitoring and tracking outcomes by promptly submitting all relevant documentation.

___ Meets Expectations / Needs occasional supervision

The intern regularly assesses and documents personal progress toward meeting training goals, provides objective feedback about training program, and promptly submits all relevant documentation to training faculty.

___ Needs regular supervision

Requires feedback from training faculty to assess personal or program outcomes in a timely and/or efficient manner.

___ Needs remedial work

The intern does not readily engage in program evaluation activities even with prompting from supervisors. Frequently fails to submit outcome tracking documentation in an accurate or timely manner. When feedback about personal or program outcomes is elicited, the intern responds with hostility or in overly negativistic manner.

Additional comments: (optional)
________________________________________________________________________
________________________________________________________________________
4) Objective D: The intern seeks consultation or supervision as needed and uses it productively.

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<thead>
<tr>
<th>No Basis for judgment</th>
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<thead>
<tr>
<th>Exceeds Expectations / Ready for autonomous practice</th>
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<tbody>
<tr>
<td>Actively seeks out professional consultation as needed when treating complex cases. Makes generally accurate self-appraisal, recognizes tendencies to misjudge abilities and shows particular care in those areas. Appropriately balances independence and consultation given current level of training.</td>
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<thead>
<tr>
<th>Meets Expectations / Needs occasional supervision</th>
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<tr>
<td>Open to feedback when offered, tries new ideas and behavior with varying degrees of comfort and success. Shows awareness of strengths and weaknesses, uses supervision well for clarification of areas of uncertainty.</td>
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<tr>
<th>Needs regular supervision</th>
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<td>Accepts supervision in many areas, but occasionally shows defensiveness. Needs supervisory input for determination of readiness to try new skills.</td>
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<tr>
<th>Needs remedial work</th>
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<tr>
<td>Frequently defensive or confused by feedback, resists use of important and necessary feedback, overly dependent on habitual ideas and behavior. Seriously misjudges strengths and/or important limitations.</td>
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Additional comments: (optional)

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5) Objective E: Intern is able to understand how to, and/or provides competent developmentally appropriate supervision.

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<th>No Basis for judgment</th>
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<tr>
<th>Exceeds Expectations / Ready for autonomous practice</th>
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<tr>
<td>The intern is able to establish solid supervisory alliances with supervisees by simultaneously setting appropriate boundaries and promoting a safe learning environment that fosters collaboration. Performs and balances multiple roles in supervision, including teaching and supporting, while evaluating and offering constructive feedback to promote supervisee competence and clinical integrity. Effectively assesses the learning needs of the supervisee and promotes growth and self assessment in supervisee, as well as regularly conducts personal self assessment. Provides supervisees immediate and frequent feedback capitalizing on “teachable moments,” and flexibly adapts the style, focus and expectations for each supervisee based on his/her developmental level, theoretical orientation,</td>
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personality, culture, and client-specific issues. Encourages and uses evaluative feedback from the supervisee, and is able to identify and intervene effectively when supervisees require remediation.

___ Meets Expectations / Needs occasional supervision

The intern is able to maintain a positive supervisory alliance, but requires occasional supervisor input regarding the manner of delivery or type of feedback given to supervisees, and/or addressing supervisee growth, development, or remediation needs.

___ Needs regular supervision

Needs continued guidance in order to carry out clinical supervision. Difficulty relating to supervisees seeking input, or providing developmentally appropriate feedback, support, or remediation to supervisees, but able to benefit from supervision in this area.

___ Needs remedial work

Unable to establish rapport or adequate boundaries with supervisees. Fails to adapt supervision style, focus, or expectations to the supervisees’ developmental level, theoretical orientation, personality, culture, or client-specific issues. Unable or unwilling to address supervisee competency concerns.

Additional comments: (optional)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Intern comments:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

I have reviewed and discussed this evaluation with my supervisor.

Intern Signature ______________________ Date ___________

Supervisor Signature ______________________ Date ___________
Appendix L

Performance Planning Worksheet

Employee's Name: ___________________________ Title: ___________________________
Department: ___________________________ Date: ___________________________
Supervisor’s Name: ___________________________

1. Review employee’s job description. Identify any changes in duties and responsibilities. Update job description as necessary.

2. Discuss how the employee’s position relates to university, center and department mission and goals. How can the employee’s performance enhance these missions/goals? Make mission statements available to the employee.

5. Establish employee goals and objectives for the year and competencies to be developed. (Refer to the most recent performance evaluation form for stated goals)

6. Set a timeline for employee completion of major projects as appropriate. Discuss methods of measurement.

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<thead>
<tr>
<th>GOAL 1</th>
<th>GOAL 2</th>
<th>GOAL 3</th>
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<tbody>
<tr>
<td>Work to be accomplished or competency to be developed</td>
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<td>Time-line</td>
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<td>Action Plan</td>
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<td>Resources needed</td>
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<td>Measures to be used</td>
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Signature of Employee: ___________________________ Date: ___________________________

Signature of Supervisor: ___________________________ Date: ___________________________

*PERF*
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