



University of Dayton Doctoral Internship

Program Handbook

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# I. The Setting

## **Dayton, OH**

All modesty aside, Dayton is among the most underrated cities in the United States. It's a hidden gem rich in history, culture and recreation.

Brown Street offers an eclectic row of restaurants and coffeehouses. Check out an array of nightlife options in the historic Oregon District. Catch some late-night jazz at Gilly's. View an art house flick at the Neon Movies. Hop through galleries of local artists, take in exhibits at the Dayton Art Institute and the Dayton Visual Arts Center, or experience world-class concerts, plays and Broadway musicals at the Schuster Performing Arts Center and Victoria Theatre. Take off with the story of flight at the National Museum of the United States Air Force. After all, Dayton is where the Wright Brothers and aviation were born.

For the outdoor enthusiast, Dayton's beautiful river bikeways, recreation trails and parks provide miles and acres of exhilaration. Root, root, root for the Dayton Dragons, the local minor league affiliate of the Cincinnati Reds. That is if you can get tickets — the Dragons have sold out every game since 2000, the longest active sold-out streak in all of U.S. pro sports. And if you have a fix for MLB baseball, NFL football, NHL hockey, MLS soccer and just about anything else, Cincinnati and Columbus are both just an hour away.

## **The University of Dayton**

The University of Dayton is a top-tier Catholic research university with offerings from the undergraduate to the doctoral levels. We are a diverse community committed, in the Marianist tradition, to educating the whole person and linking learning and scholarship with leadership and service.

## **University of Dayton Counseling Center**

Although college is a time of learning and exploration, there is also the inevitable stress of college life. The University of Dayton Counseling Center seeks to provide opportunities for students to work towards a more balanced life style. As a result, students are freed to pursue a fuller and richer expression of their educational experience.

At the Counseling Center we realize anxiety, depression, and a host of other personal struggles can often prevent students from obtaining their full potential. To help students overcome obstacles and achieve a healthy well-being, the Counseling Center provides individual and group counseling for personal and career related concerns.

## Counseling Center Staff

The Counseling Center consists of seven licensed therapists and three administrative staff. The clinical staff is diverse in background and in theoretical orientation. A core value of the Counseling Center is that there are many legitimate and effective ways to help a student in need.

### Staff Profiles

**Name:** Steven D. Mueller, Ed.D.

**Degrees:** BA University of Dayton – 1974

MA University of Dayton – 1976

Ed.D. University of Cincinnati - 1987

**CC Roles:** Assistant Vice President of Student Development

Executive Director

**Professional interests:** Career counseling, wellness issues, humor and stress management

**Theoretical Orientation(s):** Cognitive Behavioral, eclectic

**Personal interests:** Married; 3 boys ; wife works in Admissions office; play softball and enjoy sports in general; love ice cream; active at Ascension catholic church; enjoy positive people; love to travel as I get a chance

\*\*\*\*\*

**Name:** Rebecca A. Cook

**Degrees:** Ph.D., Counseling Psychology, University of Memphis, 2002

M.S., Counseling & Guidance, Indiana University, 1990

B.S., Dietetics, Purdue University, 1976

**CC Roles:** Associate Director

Staff Psychologist

**Professional interests:** Eating disorders, women's issues, career counseling, sport psychology

**Theoretical Orientation(s):** Cognitive-behavioral, Feminist, Interpersonal process, Personal construct

**Personal interests:** Personal interests include animals, nature, travel, music, and sports.

\*\*\*\*\*

**Name:** Erin Walsh Shiner

**Degree:** Ph.D. in Clinical Psychology from Bowling Green State University, 1987

**CC Roles:** Assistant Director

Staff Psychologist, primarily focusing on clinical work and supervision

**Professional interests:** eating disorders, couples, survivors of sexual abuse, adult children of alcoholics, family therapy

**Theoretical Orientation(s):** I tend to be fairly eclectic, drawing from CBT, systems theory, and psychodynamic thinking

**Personal interests:** Married with two children, Caitlyn and Patrick. Enjoy reading contemporary fiction, movies and hanging out with my kids.

\*\*\*\*\*

**Name:** Linda Rodgers

**Degrees:** Ph.D. Counseling Psychology, University of Wisconsin-Milwaukee

MS Rehabilitation Counseling, University of Wisconsin-Milwaukee

Certified Rehabilitation Counselor

**CC Roles:** Staff Therapist

**Professional interests:** Women issues, sexual abuse, career development, diversity issues, disability-related issues

**Theoretical Orientation(s):** Cognitive Behavioral, Rogerian

**Personal interests:** Performing various forms of dance, i.e., West African dance; enjoys listening and collecting jazz and blues; reading both fiction and nonfiction books; going to movies and plays; and tae bo.

\*\*\*\*\*

**Name:** Matthew Heiner

**Degrees:** Ph.D. Counseling Psychology, Tennessee State University

M.Ed. Community Counseling, University of Georgia

**CC Roles:** Psychologist, Coordinator of Training

**Professional Interests:** Men's issues, Spirituality, Anxiety/Mood Disorders

**Theoretical Orientation(s):** Existential-Humanistic/Psychodynamic

**Personal interests:** I have three children who keep me on my toes. In my free time I am a sports enthusiast (baseball and the Atlanta Braves are my favorites). I also love music, reading, and video games.

\*\*\*\*\*

**Name:** Terri Pelley

**Degrees:** Ph.D., Clinical Psychology, University of Cincinnati

M.A., Clinical Psychology, University of Dayton

B.A., Psychology, University of Dayton

**CC Roles:** Psychology Resident, Outreach Coordinator

**Professional Interests:** Mindfulness, spirituality, assessment, outreach, and professional development.

**Theoretical Orientation(s):** Dialectical Behavior Therapy (DBT) with influences from Systems Theory and Feminist Therapy.

**Personal interests:** In her free time, Terri enjoys traveling, boating, and hiking with her family.

### **Student Development**

The Division of Student Development is a community of professionals, called to serve as a resource and partner for student learning in the Catholic and Marianist tradition. We challenge students to construct communities of purpose, exhibit practical wisdom and practice servant leadership as they integrate personal and social responsibility with academics and faith formation. We support students by assisting in the co-creation of a safe and healthy environment where differences are respected and celebrated. We encourage students to discover their vocation as they develop the skills needed to contribute as members of a global society.

## **II. Accreditation Status**

The University of Dayton Internship Program is in its first year of existence. Application for APPIC membership has been submitted and a decision is being awaited.

## **III. Philosophy and Goals of the Internship Program**

The University of Dayton Internship Program is a 2000-hour program that is designed to be completed in 12 months. The program strives to provide burgeoning psychologists with training that will help them become competent, caring professionals. We provide generalist training that will facilitate having a breadth and depth of experience with numerous clinical issues and types of services provided. We support our interns in their growth to one day become independent practitioners. We honor diverse theoretical orientations and recognize that there are many valid and productive ways to perform the tasks of a psychologist. We aspire to provide an internship experience that will enrich the field of psychology by having well-trained practitioners and scholars contribute to it.

The model from which we base the program is that of practitioner-scholar. Experience by doing is informed by research that informs best practices in the field. One's own experience, in conjunction

with sound clinical knowledge and judgment, makes for an effective practitioner. We incorporate research into our didactic activities and case conference discussions. Interns are supported in building on their base of knowledge by having access to our professional library, as well as having funds allotted for professional development. Furthermore, leave time is granted for training opportunities.

As a Marianist institution within the Catholic faith, matters of social justice are strongly attended to at the University of Dayton. Respect for cultural differences (including religious diversity) is a core value of the university and of the Counseling Center. With a growing international student population, the students served by the Counseling Center become more diverse each year.

Respect for differences and appreciation for clinical research will help interns ready themselves to become independent. Interns are expected and allowed more autonomy as the training year progresses as it pertains to the intervention areas of assessment, treatment, and consultation. Interns' needs will be addressed by the Training Director and their supervisors.

Finally, specific domains will be addressed and interns will be encouraged to progress in these areas. These include professionalism, in order to prepare the interns to represent the field of psychology well. Ethical decision-making and practiced is key to this professionalism and will be expected of interns. Interns will have opportunities to engage in self-care, in particular as it pertains to adjustment to the internship program and planning for life post-internship. Interns will also be expected to engage in the University of Dayton system and to provide feedback regarding the system they inhabit.

### **University of Dayton Statement on Diversity**

The University of Dayton holds that the diversity of human perspectives and capabilities is essential to the fostering of educational excellence in the 21st century and beyond. As a Catholic and Marianist community, this commitment to the multiplicity of human ability and experience stands as a firm declaration of love for God's creative and bountiful handiwork. Devoted to inclusion of diversity, the University calls all of its faculty, student and staff to intentionally honor the dignity of all persons, and to treat each other with the respect to which each is entitled. This institutional mission to value and promote human dignity and respect shapes education inside and outside the classroom, influences the demographic composition of our academic community, and sustains the educational and professional climate in the classroom and workplaces. The University welcomes you to join us in the building of a progressively more diverse, inclusive and robust learning and living environment.

# IV. Intern Activities at the University of Dayton Counseling Center

## Individual Counseling

Interns will be responsible for both initial interviews (intakes) and ongoing therapy sessions. An intern will typically have 10-15 hours of individual therapy on their schedule each week. There is a case assignment process that is designed to keep interns' caseloads balanced and challenging without being overwhelming.

## Group Counseling

Interns will be expected to co-facilitate one group per semester. Typical groups running at the Counseling Center include:

- Anxiety and Stress Management
- Understanding Self & Others (interpersonal process group)
- Eating Issues Support Group
- Survivors of Sexual Abuse Support Group
- LGBTQ+ Support Group
- Interns will also have the freedom to create and design groups based on their interests.

## Supervision

Each intern will have the opportunity to supervise a doctoral or Masters-level trainee over the course of one semester. The intern will meet individually on a weekly basis with this trainee and receive supervision of supervision from one of the licensed psychologists on staff.

## Outreach

Interns will have the opportunity to provide educational and preventive mental health programming across campus.

## Consultation

Interns will consult with university faculty and staff regarding mental health concerns of students. Consultation with students' families and other treatment providers will also be part of the intern's responsibilities.

## Crisis Response

Interns will be scheduled to be available for crisis response and consultation services both during business hours and after hours. Interns will be able to consult with Counseling Center for support and more information as needed.



## Assessment

The Counseling Center uses assessment in three primary functions:

- To inform the treatment of a client
- To provide accommodations for students with mental health disorders
- To provide clarification and discernment within the context of career counseling

Interns will provide assessment services within this framework.

## Population Served

Counseling Center services are utilized by University of Dayton students. Graduate students and undergraduate are represented in proportion with their presence on campus. This is true of other demographic variables as well. The majority of students are between the ages of 18 and 25. The case assignment process is designed to provide for diversity in an intern's caseload.

### ***Breakdown of Training Activities:***

#### **Clinical Activities:**

Provision of individual supervision to practicum student	1 hr
Provision of group therapy*	0-1.5 hrs
Afternoon on-call/screening hours	1.5 hrs
General Clinical Contact Hours ( <i>Individual/Couples counseling &amp; Intakes</i> )	10-15 hrs
After-hours crisis/on-call	(2 shifts/month)
Outreach presentations	(2/semester)
<i>Total:</i>	<i>25 hrs/week</i>

#### **Educational/Support Activities:**

Individual supervision	2 hrs
Supervision of supervision	1 hr
Supervision of group therapy	0-.5 hr
Case Conference/ Mtg with DOT	1 hr
Intern Meeting	0.5 hr
Training Seminar	2 hrs
<i>Total:</i>	<i>7.5 hrs/wk**</i>

#### **Administrative Activities:**

Staff Meeting	1.5 hrs
Intern Research Project	1 hr
Administrative hours	5 hours/week
<i>Total:</i>	<i>7.5 hrs/week</i>

*\* If an intern conducts multiple groups, the additional clinical time and time for supervision of group is subtracted from General Clinical Services hours.*

*\*\* If an intern chooses not to do a group and/or not to do a rotation, the designated supervision time reverts to General Clinical Services hours.*

## ***Procedures for Assisting Interns Not Performing at the Training Program's Expected Level of Competence:***

### **Definition of Inadequate or Problematic Performance**

Inadequate or problematic trainee performance is defined broadly as interference in professional functioning which is reflected in one or more of the following ways:

- a) An inability and/or unwillingness to acquire and integrate professional behaviors,
- b) An inability and/or unwillingness to integrate ethical standards,
- c) An inability to acquire the level of professional skills necessary to reach an acceptable level of competency, and
- d) An inability to manage personal stress, psychological problems, and/or excessive emotional reactions which interfere with professional functioning.

Criteria which link this definition of problematic particular professional behaviors and attitudes are incorporated into the program's evaluation procedures.

Problems typically identified as problematic are those which include one or more of the following characteristics:

1. The intern does not acknowledge, understand, or address the problem when it is identified.
2. The problem is not merely a reflection of a skill deficit which can be rectified by further academic or didactic training,
3. The quality of the intern's service delivery is negatively affected and may be considered to be destructive to clients,
4. The problem is not restricted to one area of professional functioning,
5. The identified aspect of professional functioning is linked to a clear pattern and not based on an isolated incident,
6. Multiple and similar observations are made by more than one supervisor,
7. A disproportionate amount of attention by training personnel is required, compared to other interns in the group, and/or
8. The trainee's behavior does not change as a function of feedback, remediation efforts, and/or time.

The training committee determines when an intern's performance shifts from inadequacy and/or deficiency to problematic. It becomes a matter of professional judgment as to when a trainee's behavior has reached a point of being problematic rather than being inadequate or deficient.

### **Procedures**

It is imperative to have a meaningful course of action to address professional problematic behaviors. In implementing remediation or sanction alternatives, staff will diligently balance the needs of the intern, the clients involved, the intern cohort, the training committee, and others affected by the behavior(s). The following procedures are followed in cases of inadequate or problematic trainee performance.

- I. Problem Recognized: A problem is recognized by the primary supervisor or another staff member. The problem falls into one or more of the following basic categories: competence, professional issues, psychological adjustment, and organizational behavior.
- II. Problem Defined by supervisory staff: The staff member that recognized the problem will bring it to the attention of the supervisory staff in the weekly supervisors' meetings. The staff will work together to define the problem very specifically, using terminology that is as concrete and behavioral as possible. The problem will then be label as typical or atypical.
- III. Typical Problem: A typical problem is defined as one that is believed to be modifiable to an acceptable level through the cooperative efforts of the primary supervisor and intern, with the support from the training program and other staff members. Examples of typical problems include difficulty in reflecting feelings with clients, lack of awareness of some confidentiality issues, initial stress in adjusting to the internship, etc.
  - a. Plan of Change Generated: The primary supervisor discusses the problem area with the intern. Both work together to generate a plan for change. The primary supervisor utilizes other supervisory staff for consultation in this process. Plans of change might include additional supervision, adjunct supervision, temporary screening of clients, reduction of the intern's duties, addition of special academic coursework, etc.
  - b. Plan Put into Action: The primary supervisor is seen as the individual both responsible for and competent to carry out the plan, and thus becomes a facilitator and monitor of change. Communication between the primary supervisor and intern regarding this problem area is regular and frequent.
  - c. Sufficient Positive Change: The primary supervisor is satisfied that sufficient positive change has taken or is taking place.
  - d. Letter to Academic Department: The training director sends a letter of evaluation to the intern's Director of Training. In this letter the problem area is appropriately discussed in the context of the entire rotation evaluation.
  - e. Insufficient Positive Change: The primary supervisor is not satisfied that an appropriate level of change is taking place. The problem returns to the supervisory staff for redefinition.
- IV. Atypical Problem: An atypical problem is recognized by the primary supervisor, another staff member, or through the procedures just described in III as one that

appears to be more serious in nature and to require much greater effort to modify than a typical problem. Examples of atypical problems include (a) lack of awareness of clients' feelings, (b) a blatant breach of confidentiality, (c) chronic stress affecting mental and physical functioning, etc.

- a. Recommendation for Termination: (see footnote): Termination at this point in only extreme circumstances. An example of such a circumstance is an act of physical aggression against a client or staff member.
- b. Plan Generated: The supervisory staff works together to generate an appropriate plan and to appoint a staff member who will serve as facilitator and monitor of change. The staff member will be chosen with the belief that he or she might work best with the intern regarding the target problem. The staff person may or may not be the intern's primary supervisor. Plans of change can include a change of primary supervisor, mental health treatment, screening of clients, etc.
- c. Plan Activated: The appointed staff member will facilitate and monitor change. Communication between this staff member and both the intern and supervisory staff will be regular and frequent.
- d. Sufficient Positive Change: The appointed staff member and the supervisory staff are satisfied that sufficient positive change has taken place.
- e. Letter to Academic Department: Same as in III. E.
- f. Insufficient Positive Change: The supervisory staff is not satisfied that sufficient positive change has taken place.
- g. Review by Training Committee: The training committee reviews the problem, utilizing any and all appropriate staff for consultation.
  - i. Recommended for Termination: The training committee concludes that the problem is considered to be too serious and resistant to change that termination is recommended.
  - ii. New Plan Generated: The training committee feels that a recommendation for termination is not appropriate at this time. A new plan is generated in attempt to promote change. This plan may consist of the following directives: psychological/psychiatric treatment, very careful screening of clients, more intense individual supervision, etc.
  - iii. Sufficient Positive Change: The training committee is satisfied that sufficient positive change has taken place.
  - iv. End of Formal Evaluation: Same as III.D.
  - v. Letter to Academic Department: Same as III. E.
  - vi. Insufficient Positive Change: The training committee is not satisfied that sufficient positive change has taken place.
  - vii. Review by Training Committee: Same as IV. h.
  - viii. New Plan Generated: Same as in IV.b.
  - ix. Recommendation for Termination: Same as in IV. a.

*Footnote: Psychology Interns at University of Dayton Counseling Center are employees of the University of Dayton. They are subject to the rules and expectations found in the Employee*

*Handbook. The handbook can be found at*

<https://www.udayton.edu/hr/resources/documents/handbooks/Pol-ProcHdbk1-2015-05-21.pdf>

All of the aforementioned steps are to be appropriately documented and implemented in a manner consistent with due process procedures. The trainee is notified of the final decision and, at any time, the intern may appeal the decision. If the intern accepts the decision, his/her academic program and other appropriate individuals are notified. If the intern chooses to appeal, these individuals will be notified of the final decision at the conclusion of the appeal process.

### **Procedures for an Intern Appeal**

An intern has the right to appeal the actions taken by the program in regards to identified problem behavior. The following are guidelines for an intern to respond to remediation-oriented actions, including timeline for actions:

1. An intern may, within ten (10) days of the communication submit a letter to the Training Director requesting an appeal. An appeal may be requested on the following grounds:
  - a. Denial of the described due process granted to the intern as outlined in the Internship Training Manual;
  - b. Denial of the opportunity to fairly present data to refute conclusions drawn in the evaluation process.
2. Within five (5) working days of the receipt of the appeal request, the Training Director will convene an Appeals Committee consisting of one UDCC staff member selected by the Training Director and one UDCC staff member selected by the intern. The composition of the committee should exclude the Director, the Training Director, the primary supervisor or any staff member in question and other current interns.

The procedures invoked for a special fact-finding review by this committee are as follows:

1. The intern and his or her supervisor or the staff member involved will be notified that a special review meeting will be held.
2. The Appeals Committee may request the presence of or a written statement from individuals as it deems appropriate.
3. The intern may submit to the Appeals Committee any written statements he or she believes appropriate. The intern may request a personal interview, and/or may request that the Committee interview other individuals who

might have relevant information. The supervisor or staff member involved will also be afforded the same opportunity.

4. Following the fact-finding review, the Appeals Committee or designated member will communicate the summary of their findings and any recommendations to the Training Director within two (2) working days of the end of their deliberation.
5. Following the review by the Appeals Committee, the Training Director takes appropriate action. Such action is not limited to, but may take the form of any of the following:
  - a. Accept the supervisor's or staff member's report of the behavior(s) and recommend a program remediation.
  - b. Request a new report to be written to include specific changes in the statement of problem or recommendations by the supervisor or staff member involved.
  - c. Request that the Appeals Committee re-write the evaluation, or request that the Training Director re-write the evaluation or add an addendum to the report of the supervisor or staff member.
  - d. Place the intern on probation for a specific time period, during which time changes in the intern's professional functioning, according to an identified remediation program are to be implemented.
  - e. Recommend to the UDCC Director the dismissal of the intern from the training program.
6. In the event that the Training Director is the supervisor or the staff member involved in the appeal, the review will go directly to the UDCC Director.

If an intern is dissatisfied with the decision of the Training Director, he/she may request a second and final review. This request must be submitted in writing within five (5) days after the intern has been notified of the training director's decision. The review will be conducted by the UDCC Director.

## ***Procedures for Assisting Interns with a Grievance Against a Professional Staff Member:***

The UDCC staff strives to create a warm and collegial working environment for all staff members. One component of this effort involves dealing with conflict in an open, direct, and timely fashion. We strongly recommend that when a conflict occurs, staff members approach each other directly to resolve the conflict. Thus, if an intern has a conflict with a staff member (which includes other interns) or concerns regarding a staff member's behavior, the best course of action is to discuss it directly with that staff member. However, the training staff acknowledges that the power differential between trainees and supervising staff can make this process difficult and anxiety provoking for the intern. In those situations where the intern feels that he/she needs consultation and support in order to deal with the conflict, the following steps are recommended:

1. If the conflict is with the intern's primary supervisor, the intern should seek consult with the Training Director.
2. If the conflict is with any staff member other than the intern's primary supervisor, the intern should first consult with his/her supervisor. If suitable resolution is not reached, the intern should then consult with the Training Director.
3. If the conflict is with the Training Director, the intern should first consult with his/her supervisor. If suitable resolution is not reached, the intern should then consult with the Director of the Counseling Center.

In those rare instances where informal means are unsuccessful in rectifying the issue, the Training Director is the final arbiter; if the Training Director is involved in the conflict, the Director will be the final arbiter. In the case of legal or harassment concerns, the intern is entitled to pursue the University of Dayton's Staff Dispute Resolution Policy (see appendix).



VI. Expected Competencies (from COMPETENCY BENCHMARKS IN PROFESSIONAL PSYCHOLOGY, APA, 2011)

1. Professional Values & Attitudes
  - a. Monitors and independently resolves situations that challenge professional values and integrity
  - b. Conducts self in a professional manner across settings and situations
  - c. Independently accepts personal responsibility across settings and contexts
  - d. Independently acts to safeguard the welfare of others
  - e. Displays consolidation of professional identity as a psychologist; demonstrates knowledge about issues central to the field; integrates science and practice
2. Individual and Cultural Diversity
  - a. Independently monitors and applies knowledge of self as a cultural being in assessment, treatment, and consultation
  - b. Independently monitors and applies knowledge of others as cultural beings in assessment, treatment, and consultation
  - c. Independently monitors and applies knowledge of diversity in others as cultural beings in assessment, treatment, and consultation
  - d. Applies knowledge, skills, and attitudes regarding dimensions of diversity to professional work
3. Ethical Standards & Policy
  - a. Demonstrates advanced knowledge and application of the APA Ethical Principles and Code of Conduct and other relevant ethical, legal and professional standards and guidelines
  - b. Independently utilizes an ethical decision-making model in professional work
  - c. Independently integrates ethical and legal standards with all competencies
4. Reflective Practice/Self-Assessment/Self-Care
  - a. Demonstrates reflectivity both during and after professional activity; acts upon reflection; uses self as a therapeutic tool
  - b. Accurately self-assesses competence in all competency domains; integrates self-assessment in practice; recognizes limits of knowledge/skills and acts to address them; has extended plan to enhance knowledge/skills
  - c. Self-monitors issues related to self-care and promptly intervenes when disruptions occur
  - d. Independently seeks supervision when needed
5. Relationships
  - a. Develops and maintains effective relationships with a wide range of clients, colleagues, organizations and communities
  - b. Manages difficult communication; possesses advanced interpersonal skills
  - c. Verbal, nonverbal, and written communications are informative, articulate, succinct, sophisticated, and well-integrated; demonstrate thorough grasp of professional language and concepts

6. Scientific Knowledge and Methods
  - a. Independently applies scientific methods to practice
  - b. Demonstrates advanced level knowledge of core science (i.e., scientific bases of behavior)
  - c. Independently applies knowledge and understanding of scientific foundations independently applied to practice
7. Research/Evaluation
  - a. Generates knowledge
  - b. Applies scientific methods of evaluating practices, interventions, and programs
8. Evidence-Based Practice
  - a. Independently applies knowledge of evidence-based practice, including empirical bases of assessment, intervention, and other psychological applications, clinical expertise, and client preferences
9. Assessment
  - a. Independently selects and implements multiple methods and means of evaluation in ways that are responsive to and respectful of diverse individuals, couples, families, and groups and context
  - b. Independently understands the strengths and limitations of diagnostic approaches and interpretation of results from multiple measures for diagnosis and treatment planning
  - c. Independently selects and administers a variety of assessment tools and integrates results to accurately evaluate presenting question appropriate to the practice site and broad area of practice
  - d. Utilizes case formulation and diagnosis for intervention planning in the context of stages of human development and diversity
  - e. Independently and accurately conceptualizes the multiple dimensions of the case based on the results of assessment
  - f. Communicates results in written and verbal form clearly, constructively, and accurately in a conceptually appropriate manner
10. Intervention
  - a. Independently plans interventions; case conceptualizations and intervention plans are specific to case and context
  - b. Displays clinical skills with a wide variety of clients and uses good judgment even in unexpected or difficult situations
  - c. Implements interventions with fidelity to empirical models and flexibility to adapt where appropriate
  - d. Independently evaluates treatment progress and modifies planning as indicated, even in the absence of established outcome measures
11. Consultation
  - a. Determines situations that require different role functions and shifts roles accordingly to meet referral needs
  - b. Demonstrates knowledge of and ability to select appropriate and contextually sensitive means of assessment/data gathering that answers consultation referral question

- c. Applies knowledge to provide effective assessment feedback and to articulate appropriate recommendations
- d. Applies knowledge to provide effective assessment feedback and to articulate appropriate recommendations

12. Supervision

- a. Understands the ethical, legal, and contextual issues of the supervisor role
- b. Demonstrates knowledge of supervision models and practices; demonstrates knowledge of and effectively addresses limits of competency to supervise
- c. Engages in professional reflection about one's clinical relationships with supervisees, as well as supervisees' relationships with their clients
- d. Provides effective supervised supervision to less advanced students, peers, or other service providers in typical cases appropriate to the service setting

13. Interdisciplinary Systems

- a. Demonstrates awareness of multiple and differing worldviews, roles, professional standards, and contributions across contexts and systems; demonstrates intermediate level knowledge of common and distinctive roles of other professionals
- b. Demonstrates beginning, basic knowledge of and ability to display the skills that support effective interdisciplinary team functioning
- c. Participates in and initiates interdisciplinary collaboration/consultation directed toward shared goals
- d. Develops and maintains collaborative relationships over time despite differences

14. Advocacy

- a. Participates in system change and management structure
- b. Promotes change at the level of institutions, community, or society

# Intern Evaluation

## Competency Benchmarks in Professional Psychology

### Readiness for Entry to Practice Level Rating Form

Trainee Name:

Name of Placement:

Date Evaluation Completed:

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

Licensed Psychologist: Yes No

Was this trainee supervised by individuals also under your supervision? Yes No

Type of Review:

Initial Review

Mid-placement  
review

Final Review

Other (please describe):

Dates of Training Experience this Review Covers: \_\_\_\_\_

Training Level of Person Being Assessed: Year in Doctoral Program:

Intern:

Rate each item by responding to the following question using the scale below:

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

Not at All/Slightly	Somewhat	Moderately	Mostly	Very
0	1	2	3	4

If you have not had the opportunity to observe a behavior in question, please indicate this by circling "No Opportunity to Observe" [N/O].

Near the end of the rating form, you will have the opportunity to provide a narrative evaluation of the trainee's current level of competence.

Please note: This evaluation will be reviewed with the intern to promote strong communication between supervisor and intern.

This evaluation will be shared with the intern's graduate training director in order to provide feedback to the academic program regarding the intern's progress.

## **FOUNDATIONAL COMPETENCIES**

### **I. PROFESSIONALISM**

<b>1. Professionalism:</b> as evidenced in behavior and comportment that reflects the values and attitudes of psychology.							
<b>1A. Integrity</b> - Honesty, personal responsibility and adherence to professional values							
Monitors and independently resolves situations that challenge professional values and integrity	0	1	2	3	4	[N/O]	
<b>1B. Deportment</b>							

Conducts self in a professional manner across settings and situations	0	1	2	3	4	[N/O]
<b>1C. Accountability</b>						
Independently accepts personal responsibility across settings and contexts	0	1	2	3	4	[N/O]
<b>1D. Concern for the welfare of others</b>						
Independently acts to safeguard the welfare of others	0	1	2	3	4	[N/O]
<b>1E. Professional Identity</b>						
Displays consolidation of professional identity as a psychologist; demonstrates knowledge about issues central to the field; integrates science and practice	0	1	2	3	4	[N/O]
<b>2. Individual and Cultural Diversity:</b> Awareness, sensitivity and skills in working professionally with diverse individuals, groups and communities who represent various cultural and personal background and characteristics defined broadly and consistent with APA policy.						
<b>2A. Self as Shaped by Individual and Cultural Diversity</b> (e.g., cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status) <b>and Context</b>						
Independently monitors and applies knowledge of self as a cultural being in assessment, treatment, and consultation	0	1	2	3	4	[N/O]
<b>2B. Others as Shaped by Individual and Cultural Diversity and Context</b>						
Independently monitors and applies knowledge of others as cultural beings in assessment, treatment, and consultation	0	1	2	3	4	[N/O]
<b>2C. Interaction of Self and Others as Shaped by Individual and Cultural Diversity and Context</b>						
Independently monitors and applies knowledge of diversity in others as cultural beings in assessment, treatment, and consultation	0	1	2	3	4	[N/O]
<b>2D. Applications based on Individual and Cultural Context</b>						
Applies knowledge, skills, and attitudes regarding dimensions of diversity to professional work	0	1	2	3	4	[N/O]
<b>3. Ethical Legal Standards and Policy:</b> Application of ethical concepts and awareness of legal issues regarding professional activities with individuals, groups, and organizations.						
<b>3A. Knowledge of Ethical, Legal and Professional Standards and Guidelines</b>						

Demonstrates advanced knowledge and application of the APA Ethical Principles and Code of Conduct and other relevant ethical, legal and professional standards and guidelines	0	1	2	3	4	[N/O]
<b>3B. Awareness and Application of Ethical Decision Making</b>						
Independently utilizes an ethical decision-making model in professional work	0	1	2	3	4	[N/O]
<b>3C. Ethical Conduct</b>						
Independently integrates ethical and legal standards with all competencies	0	1	2	3	4	[N/O]
<b>4. Reflective Practice/Self-Assessment/Self-Care: Practice conducted with personal and professional self-awareness and reflection; with awareness of competencies; with appropriate self-care.</b>						
<b>4A. Reflective Practice</b>						
Demonstrates reflectivity in context of professional practice (reflection-in-action); acts upon reflection; uses self as a therapeutic tool	0	1	2	3	4	[N/O]
<b>4B. Self-Assessment</b>						
Accurately self-assesses competence in all competency domains; integrates self-assessment in practice; recognizes limits of knowledge/skills and acts to address them; has extended plan to enhance knowledge/skills	0	1	2	3	4	[N/O]
<b>4C. Self-Care (attention to personal health and well-being to assure effective professional functioning)</b>						
Self-monitors issues related to self-care and promptly intervenes when disruptions occur	0	1	2	3	4	[N/O]
<b>4D. Participation in Supervision Process</b>						
Independently seeks supervision when needed	0	1	2	3	4	[N/O]

## II. RELATIONAL

<b>5. Relationships: Relate effectively and meaningfully with individuals, groups, and/or communities.</b>						
<b>5A. Interpersonal Relationships</b>						
Develops and maintains effective relationships with a wide range of clients, colleagues, organizations and communities	0	1	2	3	4	[N/O]
<b>5B. Affective Skills</b>						

Manages difficult communication; possesses advanced interpersonal skills	0	1	2	3	4	[N/O]
<b>5C. Expressive Skills</b>						
Verbal, nonverbal, and written communications are informative, articulate, succinct, sophisticated, and well-integrated; demonstrates thorough grasp of professional language and concepts	0	1	2	3	4	[N/O]

### III. SCIENCE

<b>6. Scientific Knowledge and Methods:</b> Understanding of research, research methodology, techniques of data collection and analysis, biological bases of behavior, cognitive-affective bases of behavior, and development across the lifespan. Respect for scientifically derived knowledge.						
<b>6A. Scientific Mindedness</b>						
Independently applies scientific methods to practice	0	1	2	3	4	[N/O]
<b>6B. Scientific Foundation of Psychology</b>						
Demonstrates advanced level knowledge of core science (i.e., scientific bases of behavior)	0	1	2	3	4	[N/O]
<b>6C. Scientific Foundation of Professional Practice</b>						
Independently applies knowledge and understanding of scientific foundations to practice	0	1	2	3	4	[N/O]
<b>7. Research/Evaluation:</b> Generating research that contributes to the professional knowledge base and/or evaluates the effectiveness of various professional activities.						
<b>7A. Scientific Approach to Knowledge Generation</b>						
Generates knowledge	0	1	2	3	4	[N/O]
<b>7B. Application of Scientific Method to Practice</b>						
Applies scientific methods of evaluating practices, interventions, and programs	0	1	2	3	4	[N/O]

## FUNCTIONAL COMPETENCIES

### IV. APPLICATION



<b>8. Evidence-Based Practice:</b> Integration of research and clinical expertise in the context of patient factors.						
<b>8A. Knowledge and Application of Evidence-Based Practice</b>						
Independently applies knowledge of evidence-based practice, including empirical bases of assessment, intervention, and other psychological applications, clinical expertise, and client preferences	0	1	2	3	4	[N/O]
<b>9. Assessment:</b> Assessment and diagnosis of problems, capabilities and issues associated with individuals, groups, and/or organizations.						
<b>9A. Knowledge of Measurement and Psychometrics</b>						
Independently selects and implements multiple methods and means of evaluation in ways that are responsive to and respectful of diverse individuals, couples, families, and groups and context	0	1	2	3	4	[N/O]
<b>9B. Knowledge of Assessment Methods</b>						
Independently understands the strengths and limitations of diagnostic approaches and interpretation of results from multiple measures for diagnosis and treatment planning	0	1	2	3	4	[N/O]
<b>9C. Application of Assessment Methods</b>						
Independently selects and administers a variety of assessment tools and integrates results to accurately evaluate presenting question appropriate to the practice site and broad area of practice	0	1	2	3	4	[N/O]
<b>9D. Diagnosis</b>						
Utilizes case formulation and diagnosis for intervention planning in the context of stages of human development and diversity	0	1	2	3	4	[N/O]
<b>9E. Conceptualization and Recommendations</b>						
Independently and accurately conceptualizes the multiple dimensions of the case based on the results of assessment	0	1	2	3	4	[N/O]
<b>9F. Communication of Assessment Findings</b>						
Communicates results in written and verbal form clearly, constructively, and accurately in a conceptually appropriate manner	0	1	2	3	4	[N/O]
<b>10. Intervention:</b> Interventions designed to alleviate suffering and to promote health and well-being of individuals, groups, and/or organizations.						

<b>10A. Intervention planning</b>						
Independently plans interventions; case conceptualizations and intervention plans are specific to case and context	0	1	2	3	4	[N/O]
<b>10B. Skills</b>						
Displays clinical skills with a wide variety of clients and uses good judgment even in unexpected or difficult situations	0	1	2	3	4	[N/O]
<b>10C. Intervention Implementation</b>						
Implements interventions with fidelity to empirical models and flexibility to adapt where appropriate	0	1	2	3	4	[N/O]
<b>10D. Progress Evaluation</b>						
Independently evaluates treatment progress and modifies planning as indicated, even in the absence of established outcome measures	0	1	2	3	4	[N/O]
<b>11. Consultation: The ability to provide expert guidance or professional assistance in response to a client's needs or goals.</b>						
<b>11A. Role of Consultant</b>						
Determines situations that require different role functions and shifts roles accordingly to meet referral needs	0	1	2	3	4	[N/O]
<b>11B. Addressing Referral Question</b>						
Demonstrates knowledge of and ability to select appropriate and contextually sensitive means of assessment/data gathering that answers consultation referral question	0	1	2	3	4	[N/O]
<b>11C. Communication of Consultation Findings</b>						
Applies knowledge to provide effective assessment feedback and to articulate appropriate recommendations	0	1	2	3	4	[N/O]
<b>11D. Application of Consultation Methods</b>						
Applies literature to provide effective consultative services (assessment and intervention) in most routine and some complex cases	0	1	2	3	4	[N/O]

## V. EDUCATION

<b>12. Supervision: Supervision and training in the professional knowledge base of enhancing and monitoring the professional functioning of others.</b>						
<b>12A. Expectations and Roles</b>						
Understands the ethical, legal, and contextual issues of the supervisor role	0	1	2	3	4	[N/O]
<b>12B. Processes and Procedures</b>						
Demonstrates knowledge of supervision models and practices; demonstrates knowledge of and effectively addresses limits of competency to supervise	0	1	2	3	4	[N/O]
<b>12C. Skills Development</b>						
Engages in professional reflection about one's clinical relationships with supervisees, as well as supervisees' relationships with their clients	0	1	2	3	4	[N/O]
<b>12D. Supervisory Practices</b>						
Provides effective supervised supervision to less advanced students, peers, or other service providers in typical cases appropriate to the service setting	0	1	2	3	4	[N/O]

## VI. SYSTEMS

<b>13. Interdisciplinary Systems: Knowledge of key issues and concepts in related disciplines. Identify and interact with professionals in multiple disciplines.</b>						
<b>13A. Knowledge of the Shared and Distinctive Contributions of Other Professions</b>						
Demonstrates awareness of multiple and differing worldviews, roles, professional standards, and contributions across contexts and systems; demonstrates intermediate level knowledge of common and distinctive roles of other professionals	0	1	2	3	4	[N/O]
<b>13B. Functioning in Multidisciplinary and Interdisciplinary Contexts</b>						
Demonstrates beginning, basic knowledge of and ability to display the skills that support effective interdisciplinary team functioning	0	1	2	3	4	[N/O]
<b>13C. Understands how Participation in Interdisciplinary Collaboration/Consultation Enhances Outcomes</b>						

Participates in and initiates interdisciplinary collaboration/consultation directed toward shared goals	0	1	2	3	4	[N/O]
<b>13D. Respectful and Productive Relationships with Individuals from Other Professions</b>						
Develops and maintains collaborative relationships over time despite differences	0	1	2	3	4	[N/O]

<b>14. Advocacy:</b> Actions targeting the impact of social, political, economic or cultural factors to promote change at the individual (client), institutional, and/or systems level.						
<b>14A. Empowerment</b>						
Intervenes with client to promote action on factors impacting development and functioning	0	1	2	3	4	[N/O]
<b>14B. Systems Change</b>						
Promotes change at the level of institutions, community, or society	0	1	2	3	4	[N/O]

### **Overall Assessment of Trainee's Current Level of Competence**

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

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

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Supervisor Signature

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Intern Signature



**Staff Dispute Resolution Policy**

Effective Date:

Approval:

Maintenance of Policy: Vice President, Human Resources

**PURPOSE:** The University has established a Dispute Resolution procedure to facilitate the timely and objective review of information for the purpose of fact-finding, clarification and determination on matters found to be appropriate for review.

**SCOPE:** This policy applies to all University staff and student employees, except bargaining unit employees and members of the faculty having a dispute regarding matters covered by the faculty grievance procedure, as described in the Faculty Handbook. Note that a faculty member acting in an administrative capacity (e.g. department chairperson) may be a party to a grievance brought by a person covered by this procedure (e.g. departmental administrative assistant). Bargaining unit employees address grievances using the process described in their bargaining agreement.

Disputes involving allegations of harassment or discrimination will be referred for investigation and resolution under the procedures outlined in the University's Non-Discrimination and Anti-Harassment Policy.

**POLICY:** Any employee who believes s/he has a valid dispute should advise his/her immediate supervisor of the complaint and discuss the matter fully with him/her. If the discussion does not result in a satisfactory resolution or if the employee is not comfortable going directly to his/her supervisor, the employee may initiate the Dispute Resolution Procedure.

**PROCEDURE:**

- **Step 1:** The employee should submit the dispute in writing to the second-level supervisor within twelve (12) calendar days of knowledge of the facts. The second-level supervisor will hold a meeting with the employee and his/her immediate supervisor within seven (7) calendar days of receipt of the dispute. The second-level supervisor will investigate the matter as appropriate, and provide a written response to the employee within seven (7) calendar days of the meeting. If the employee is satisfied with this

**REFERENCE DOCUMENTS:**

1. Faculty Handbook
2. University Non-Discrimination and Anti-Harassment Policy
3. Grievance Procedure, Agreement between The University of Dayton and DPSU, Local 101 APSCME