

CLINICAL TRAINING MANUAL

PhD Counseling Psychology 2022-2023

Table of Contents

| INTRODUCTION | 4 |
|---|----|
| PROGRAM FACULTY | 4 |
| PROGRAM OVERVIEW | 4 |
| THE IMPORTANCE OF ETHICS AND STANDARDS | 4 |
| PROCEDURES FOR RESPONDING TO POSSIBLE VIOLATION OF APA ETHICAL PRINCIPLES | 5 |
| THE CLINICAL PROGRAM | 6 |
| CLINICAL TRAINING OBJECTIVES | 6 |
| CAUSE FOR REMOVAL FROM PRACTICUM/INTERNSHIP SITES | 6 |
| HOME VISITS | 6 |
| COMPLETING FIELDWORK HOURS AT A STUDENT'S PLACE OF WORK | 6 |
| THE ANDREWS COMMUNITY COUNSELING CENTER | 7 |
| CONVICTION CLEARANCE | 7 |
| THE PRACTICUM EXPERIENCE | 8 |
| EXPECTATIONS | 8 |
| RECORDING CLINICAL ACTIVITIES | 8 |
| TIME REQUIREMENTS - PRACTICUM | 8 |
| OFF-SITE PRACTICUM SETTINGS | 9 |
| PRACTICUM EXTERNSHIP | 9 |
| DO'S AND DON'TS FOR STUDENTS IN PRACTICUM | 9 |
| PRACTICUM FORMS | 10 |
| THE INTERNSHIP EXPERIENCE | 11 |
| EXPECTATIONS | 11 |
| INTERNSHIP APPLICATION | 11 |
| PRE-INTERNSHIP GUIDELINES | 12 |
| NON-APA APPROVED INTERNSHIPS | 12 |
| INTERNSHIP ACTIVITIES | 13 |
| PRE-DOCTORAL INTERNSHIP LOCATION | 14 |
| RECORDING CLINICAL ACTIVITIES | 15 |
| COMPLETING THE INTERNSHIP | |
| PROFESSIONAL LICENSURE PROCESS | 15 |
| Competency Benchmarks in Professional Psychology | 20 |
| and Readiness for Internship Rating Form | 20 |
| | |

| This evaluation form is based on the APA's Readiness for Internship Level Rating Form | which is based on |
|---|--------------------|
| This evaluation form is based on the APA's Readiness for Internship Level Rating Form (Competency Benchmarks in Professional Psychology (2012 revisions). The original form http://www.apa.org/ed/graduate/readiness-internship.doc | can be accessed at |
| For more detailed examples for each of the competencies listed below, see http://www.apa.org/ed/graduate/rating-form-appendix.doc | 20 |
| mip.//www.apa.org/ea/gradaate/rating-jorm-appendix.aoc | 20 |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

INTRODUCTION

Congratulations on beginning your clinical training experience. The Counseling Psychology Core Faculty look forward to providing many challenging experiences, along with sound supervision, that will give each of you opportunities to incorporate the clinical theory and knowledge that you have gained into practice working with clients.

The material contained herein is not intended to substitute for or otherwise modify the regulations that are contained in the current Academic Bulletin, the Graduate School Handbook, or in other official University documents. Rather, this document supplements and extends more general University- and Departmental-level requirements as they might apply specifically to the graduate program in counseling psychology. This Clinical Training Manual will be updated periodically, and relevant policy memoranda that appear between publications will be incorporated into subsequent editions.

PROGRAM FACULTY

The Counseling Psychology Core Faculty includes the coordinator and one additional member who are responsible for the leadership of the program, as well as providing clinical training and taking part in the practicum supervision rotation. They were chosen as program core due to their academic training and professional interests and skills. Dr. Woolford-Hunt, Program Coordinator, is responsible for the management of the program, as well as the activities and academic success of the program's students. The other member of the core is Dr. Coffen who additionally serves as Director of the Andrews Community Counseling Center (ACCC).

PROGRAM OVERVIEW

The PhD Counseling Psychology program here at Andrews University is housed in the Department of Graduate Psychology & Counseling within the College of Education & International Services. It prepares students for the practice of psychology in schools, colleges, agencies, hospitals, churches, businesses, industries and private settings. It is the intent to prepare graduates for licensure as professional psychologists in the U.S. and with eligibility to practice internationally. The curriculum required for the program presumes that students have the requisite graduate training including courses in introductory psychology, statistics, general experimental, abnormal psychology, and master's practicum. As such, the clinical core classes includes substantial instruction and practicum components at the doctoral level in the areas of psychological assessment and diagnosis and psychological intervention procedures. Delays in taking certain graduate courses and starting practicum may be experienced if prerequisites have not been met. The design of the program allows students to specialize in one of the following areas of concentration: Adult, Child/Family, Cultural Diversity, or Health Psychology. Specialty concentrations should be developed within a student's course plan in close consultation with their advisor to coincide with the student's dissertation topic.

THE IMPORTANCE OF ETHICS AND STANDARDS

Throughout the doctoral program, all students are expected to become familiar with and behave in accordance with the ethics and standards of state and national associations for counseling psychologists. Clinical experience provides students with the opportunity to work with clients in real-world settings. Students are expected to abide by the American Psychological Association (APA) ethical and legal standards.

These documents are formally reviewed in the introductory courses, and their contents evaluated at different points in the program. Appropriate professional behavior is an important part of satisfactorily completing counseling psychology programs. In order to receive the Program Coordinator's endorsement and recommendation for credentialing and/or employment it is not sufficient to have merely completed the academic requirements; all students are to have additionally demonstrated their knowledge of and conformity with ethics and practice guidelines throughout all aspects of the program.

PROCEDURES FOR RESPONDING TO POSSIBLE VIOLATION OF APA ETHICAL PRINCIPLES

When a student is suspected to have violated an ethical standard, the Advisor, in consultation with other faculty members determines whether the suspected violation is amenable to resolution through informal intervention or whether it may be serious enough to warrant formal review. If the suspected violation appears to be less serious, the student is asked to meet with his or her Advisor who discusses the matter, asks for relevant information, and collaborates with the student to develop a plan for remediation. Documentation of the meeting is placed in the student file and an oral report of the outcome of the meeting is presented to the faculty.

If the violation appears more serious the student receives a written notice of the suspected violation and is asked to meet with his or her Advisor and possibly other faculty members to discuss the alleged misconduct. The student may present any relevant information he or she wishes to bring forward at that meeting, the purpose of which is to ascertain the likelihood that a serious violation occurred and to plan for remediation, suspension, or removal from the program.

The faculty are committed to student success and are prepared to work diligently to help students who have academic and personal obstacles succeed as counseling psychologists. The faculty are optimistic that once identified most problems with academic, personal or interpersonal competencies can be resolved and students can continue their forward progress in the program. However, there is an equal responsibility to ensure that if all efforts at remediation fail, the program does not represent an incompetent professional as competent.

The Counseling Psychology students are expected to abide by the APA codes and guidelines listed below.

- Ethical Principles of Psychologists and Code of Conduct (http://www.apa.org/ethics/code/index.aspx);
- APA Guidelines for Assessment of and Intervention with Persons with Disabilities (http://www.apa.org/pi/disability/resources/assessment-disabilities.aspx);
- APA Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists (http://www.apa.org/pi/oema/resources/policy/multicultural-guidelines.aspx);
- APA Guidelines for Psychological Practice with Girls and Women (http://www.apa.org/practice/guidelines/girls-and-women.pdf);
- APA Guidelines for Psychological Practice with Older Adults (http://www.apa.org/practice/guidelines/older-adults.pdf);
- APA Guidelines for Psychotherapy with Lesbian, Gay, and Bisexual Clients (http://www.apa.org/pi/lgbt/resources/guidelines.aspx).

These standards and guidelines apply to all aspects of professional behavior, including (but not limited to) the practice of counseling and psychotherapy, supervision, teaching, classroom behavior, research, consultation, and collegial relations.

THE CLINICAL PROGRAM

By the end of a student's first year in the program, they may have begun didactic training related to clinical issues, assessment of clinical problems, psychopathology, and the principles of psychotherapy and behavior change. The three semester practicum sequence is in turn followed several years later by a one-year internship.

CLINICAL TRAINING OBJECTIVES

Upon completion of practicum and internship training, students will be able to:

- Demonstrate knowledge and understanding of the ethical and legal principles of psychologists.
- Demonstrate knowledge in core psychological areas (biological, historical, learning theory, social psychology, multi-cultural issues, psychopathology, and personality).
- Demonstrate a knowledge and understanding of vocational psychology/career development.
- Assess and diagnose mental and emotional disorders.
- Integrate research into the therapeutic process.
- Provide psychotherapy services to individuals, couples, families, groups, and organizations.
- Demonstrate a knowledge and understanding of professional issues in counseling psychology.
- Provide supervision for the activities of counseling psychologists.
- Demonstrate a knowledge and understanding of multicultural and ethnic diversity.
- Provide consultation services for clients.
- Demonstrate the ability to integrate a spiritual perspective into their psychotherapy practice.

CAUSE FOR REMOVAL FROM PRACTICUM/INTERNSHIP SITES

Students may be removed from a practicum and/or internship site placement for the following reasons:

- Failure to function in a mature, responsible, and professional manner;
- Failure to follow the ethical guidelines of the counseling profession;
- Dishonesty regarding field placement log or contract, tape recording, and/or obtaining client consent;
- Failure to maintain confidentiality of client records and/or client situations; and
- By request of the site administrator/site supervisor.

HOME VISITS

While completing practicum and internship experiences, it is expected that student safety comes first. Therefore, students are not permitted to make any home visits during their practicum/internship experiences. Students must, at all times, have immediate access to their clinical site supervisor, the site supervisor's representative, or a professional colleague for consultation and support when at their field sites; therefore, students may not work alone at any time while seeing clients.

COMPLETING FIELDWORK HOURS AT A STUDENT'S PLACE OF WORK

Once the 3 semesters of the practicum sequence have been completed, students may use their regular employment as a clinical placement site under the following conditions: Students must perform clinical duties that are different from duties performed on the basis of a master's degree; student's clinical site supervisor must be different from their current work supervisor; students must obtain a letter from their clinical site supervisor and complete the Contract for Off-Campus Practicum Continuation/Externship documenting how these conditions will be met; the documentation letter must be delivered to the Director of Clinical Training prior to the beginning of any practicum/internship semester.

Please note: Solo practice placements (i.e., private psychologist, etc.) are not appropriate practicum / internship sites.

THE ANDREWS COMMUNITY COUNSELING CENTER

The Andrews Community Counseling Center (ACCC) provides mental health services to children, adolescents, and adults who reside in the Michiana area, or who are members of the community near the University. Services are provided to persons regardless of race, gender, religious affiliation, culture, or other status or worldview. It also serves as an on-campus training clinic, allowing master's and doctoral students to obtain intensive and personalized supervision, while at the same time providing needed counseling services to members of the community. The ACCC has five counseling rooms, one of which is a room for using play in therapy. All work in the clinic is supervised by full time faculty, as well as adjunct faculty from the community. Due to the importance of students abiding by the clinic's policies and procedures, all students are required to read the ACCC Counselor Handbook and have a firm understanding of its content. Students must receive a score of 100% on the handbook quiz before being placed for practicum.

CONVICTION CLEARANCE

Students entering the Counseling Psychology program may receive training in settings where vulnerable populations are served. Instances where this may occur are course assignments, and practicum/ internship experiences either within schools or in a counseling setting. It is the department's responsibility to help protect the safety of children and clients. Certain convictions may prevent future licensure/certification eligibility.

This department utilizes two methods to validate and track applicant and student criminal backgrounds: a Conviction Clearance Form and a formal Background Check conducted by an outside agency. Registration holds may be placed on a student's account until proper documentation has been received.

A Conviction Clearance form is used as a self-report of criminal activity. Students are required to sign an updated copy at key points throughout their program.

The formal Background Check is required of each student prior to initial registration and/or participation in fieldwork and clinical experiences. Using the link below, all students must pay for a criminal background check. Results will be kept confidential and reviewed by Department Chair and relevant Program Coordinators to ensure students are eligible to continue in their chosen program.

http://www.coeusglobal.com/andrewsu_gpc.html

Failure to provide complete and accurate information on the Conviction Clearance form or on the Background Check will constitute grounds for immediate denial of admission, withdrawal of admission, and/or withdrawal of enrollment.

THE PRACTICUM EXPERIENCE

The purpose of practicum is to help students bridge the gap between the theory and practice of counseling psychology. Counseling theory is based on psychological models and personality theory. Students learn how to assess and diagnose mental disorders using the DSM-5 classification system, develop treatment plans, and use therapeutic procedures.

EXPECTATIONS

Students entering the program with necessary prerequisites, begin clinical practicum at the ACCC their first semester at the ACCC. GDPC745, considered Practicum I, introduces the practice of counseling psychology, and gives students experience with clients from the general population. Typical client concerns are those with developmental or adjustment type situations. This broad exposure helps to develop clinical skills and cultivate areas of interests. For Practicum II and III, students work specifically with clients within their emphasis area and develop the competencies needed to integrate assessment into client evaluations. Students take 3 credits of practicum each semester which includes 1 hour of individual supervision and 1½ hours of group supervision each week. During this time, the supervisor reviews clinical cases, views recorded sessions, and provides feedback for the supervisee. Students are encouraged to discuss cases and issues that have arisen. This dialogue encourages experiential learning through progress monitoring and case evaluation. Progression through the practicum sequence increases the complexity of what is expected from therapy sessions.

RECORDING CLINICAL ACTIVITIES

It is important that students develop and maintain a semester-by-semester account of the hours expended in the following: direct patient contact, formal supervision, and specific tests or assessment procedures. The process of calculating training hours retroactively, at the time of applying for internship, will likely be inaccurate and overwhelming for students who have not been maintaining their records on a weekly basis throughout each year. The Association of Psychology and Postdoctoral Internship Centers (APPIC) provides written guidelines that will be helpful in monitoring accumulating clinical practicum hours. Students are required to use Time2Track to keep track of training hours. There is no cost to students to use Time2Track as long as the student is registered for fieldwork in the program.

TIME REQUIREMENTS - PRACTICUM

Students must complete supervised practicum experiences over the course of three consecutive semesters (Fall, Spring, and Summer). For each semester of practicum, students will be expected to complete 250 hours with 60% of that indirect, and 40% direct client service hours. Students who are not able to meet the 750 hours within three semesters, have not completed all of the practicum requirements (e.g., 3 assessment battery reports), or have competencies below the expected level must secure their own practicum continuation site outside of the ACCC to complete the missing requirements. One credit of GDPC878 Doctoral Practicum Continuation is required for each semester the student is actively engaged in fieldwork to complete the practicum requirements. The requirement to go off campus is necessary to allow the next cohort of practicum students to see clients, time constraints of the university practicum supervisor, and a restricted client load at the ACCC given the relatively small community served. Each student's practicum must include the following:

- Over the course of three semesters, at least 300 clock hours of direct service with actual clients that contribute to the development of counseling skills.
- Weekly interaction that averages one hour per week of individual supervision throughout the practicum with a licensed psychologist who is a program faculty member or approved off-site supervisor.
- An average of 1½ hours per week of group supervision that is provided on a regular schedule throughout the practicum by a faculty member in the supervision rotation or site supervisor.
- Three supervised psychological assessment batteries with associated written reports used for treatment planning or to address a client's referral question and which results are reviewed with the client.
- The development of program-appropriate audio/video recordings for use in supervision or live supervision of the student's interactions with clients.
- Evaluation of the student's counseling performance by documented formal evaluations after the student completes each practicum semester.
- The remaining 450 hours are to include weekly on-site supervision and a variety of professional activities (i.e., record keeping, supervision, information and referral, in-service and staff meetings, etc.). These hours must be evenly accrued over the course of the semesters.

OFF-SITE PRACTICUM SETTINGS

Students must complete all three semesters of practicum at the ACCC. If the ACCC is unable to provide clients with presenting problems that are congruent with the student's program emphasis, the emphasis practicum in the 2nd and 3rd semesters can be completed at an approved off-site location, but must still register for practicum classes. If an off-campus placement is necessary, the student must meet with the Director of Clinical Training and receive pre-approval for the site by completing the *Contract for Off-Campus Practicum Continuation/Externship* in advance. Students performing clinical services required as part of an academic program are covered under Andrews' professional liability insurance when they have registered for the relevant fieldwork course.

PRACTICUM EXTERNSHIP

Students wishing to complete additional practicum hours beyond the 750 accumulated in the 3-semester practicum sequence may do so if they have met the following requirements.

- Have completed all hours required for GDPC745 plus the two semesters of Emphasis Practicum.
- Completed the Contract for Off-Campus Practicum Continuation/Externship for an approved site and received approval from the Director of Clinical Training and the practicum instructor-of-record for the semester.
- Registered for 1 credit of GDPC850 Doctoral Field Externship each semester.

DO'S AND DON'TS FOR STUDENTS IN PRACTICUM

- Be on time for each client and supervision appointment. In case of bad weather, leave home earlier, and if you are not able to make it to your appointment, contact the desk monitor at the ACCC and convey your message to them. Be sure to offer your client a rescheduled date and time. Your supervision hours are scheduled into the professor's day—if you won't make it, let the professor know so it frees up their time for other tasks.
- Dress appropriately, wear neat pants/skirt/dress (no jeans or running shoes). You are representing not

- only yourself as a professional, but the University as well when you meet with clients. Your time in the program should be a training ground for when you graduate.
- Be prepared for your client appointments. For new clients, review their intake form so you have an understanding of their concerns. For existing clients, review prior notes to remind you of what was discussed in prior appointments.
- Supervision appointments are set aside specifically for your benefit. Come prepared with necessary client files and recorded sessions. Write down any concerns or questions you may have had with any of your clients. Being prepared means you make the most out of your time with your supervisor.
- Student must at all times maintain a professional demeanor at the clinic, and respect the confidentiality of the clinic's/client's records and the privacy of the desk monitor's area.
- Be open-minded about learning experiences offered, including those you may not be particularly interested in. You may be surprised! And many skills will generalize to other clinical settings, populations and communication disorders.
- If you have been assigned a client that has concerns you aren't yet trained on, speak up prior to the first appointment. Your supervision can make the determination whether you are trained to handle that client.
- If you will be administering any kind of assessment tests during your client session, be prepared by checking out the kit from the Department Admin far enough in advance that you can review it. Also, make sure a test will be available for you before scheduling the client. Alternative tests may be available to you, and this can be a good real-life example of a workplace.

PRACTICUM FORMS

Below is a listing of the forms which will be used as part of the Practicum experience.

- Practicum Student Evaluation (one per semester)
- Evaluation of Clinical Supervision (one per semester)
- Contract for Off-Campus Practicum Continuation/Externship (if an off-campus placement is needed)

Students are responsible for ensuring that forms are obtained and completed. Original forms should be returned to the supervisor or Department Admin if appropriate. These will be kept in the student's practicum/internship file. Copies should be made of all forms and kept as backup. This can be done by the Department Admin if desired. Practicum and internship grades will be kept as Deferred Grades (DGs) until documentation that all hours have been done has been submitted.

THE INTERNSHIP EXPERIENCE

The internship is the capstone of the Counseling Psychology program. It provides a systematic program of supervised, professional training in an applied setting, while integrating scientific, professional, and ethical knowledge in a way that will permit the student to demonstrate autonomous and responsible functioning as a practicing psychologist.

EXPECTATIONS

Every student is required to complete an APPIC approved 2000-hour professional practice internship in a healthcare setting prior to graduation. Students are required to apply for an internship through APPIC and are strongly encouraged to obtain an APA-approved internship if possible. Exceptions to internships outside of the APPIC system must be pre-approved in writing and will only be allowed under certain circumstances. In order to be eligible to apply though, students must have completed practicum, comprehensive exams, and defended their dissertation proposal.

Most internships affiliated with the Association of Psychology Postdoctoral and Internship Centers (APPIC) require 700 to 1200 hours of practicum experience prior to the internship. Some require more and some less. Generally, the more hours of experience, the better. It is the student's responsibility to keep a record of practicum experiences, and to have obtained the levels of experience required by the internship programs to which application is desired. To assist with this record keeping, it is recommended that the student downloads a current sample of the APPIC standard application form to use as a guide (http://www.mypsychtrack.com).

Comprehensive examinations in the major field must be successfully completed before a student is eligible to apply for internship sites. Not only is this a department policy, but prospective internship sites want to see that the student has passed comprehensive exams as well. Students should make arrangements to take their comprehensive exams no later than June of the year they are planning to apply, as all three sections of the exam must be passed prior to the application process in the fall.

Students are also strongly encouraged to complete their dissertations prior to commencing internship. At minimum, it is required that students obtain committee approval of their dissertation proposal. Students who have completed their dissertations are more attractive to internship sites.

Request for approval to formally seek an internship should be submitted to the student's academic adviser who will recommend readiness for internship.

INTERNSHIP APPLICATION

Application deadlines for APPIC internships usually begins in October of the year the internship starts. Early applications are sometimes given more favorable consideration. The Director of Clinical Training will assist students with the application process as needed. Be sure and follow the directions on the APPIC site regarding rank-orders and only rank for sites that are desired. It is ethically unacceptable to not accept a site's match once the match has been announced. The Program encourages students though to remember that the application process can have implications beyond the student's future. The Program's reputation and consideration for accreditation can be impacted by repeated applications and/or numerous placements in non-APPIC or non-APA sites. Students are encouraged to only apply when they are ready, and make the maximum effort to ensure success. Using the approach of applying, and if not matched, applying the following year can adversely affect

the Program. Please talk with the Director of Clinical Training or Program Coordinator if you have any questions about your readiness for the match process.

PRE-INTERNSHIP GUIDELINES

Prior to internship students should take the following steps:

- Confer with advisor to determine readiness for internship. Visit the APPIC web site for downloading appropriate forms and applications.
- Be sure and give yourself enough time to work on your internship applications and tailor your application for each site you apply for.
- Confer with the Director of Clinical Training regarding internship sites and application process.
- Apply for an approved internship with appropriate forms and recommendation letters.
- Accept an approved internship.
- File a copy of the internship contract with the Director of Clinical Training. Retain one copy for personal records.
- Register for GDPC820 Internship in Counseling Psychology during the semesters of internship.

The internship experience is normally full-time (40 hours per week for 50 weeks) or half-time (20 hours per week for 100 weeks). In the case of a full-time internship, the student will register for GDPC820 for one credit hour per semester for the 3 semesters of the internship. In case of a half-time internship, the student will register for .5 credits each semester until the 3 credits are completed (6 semesters).

NON-APA APPROVED INTERNSHIPS

Students are strongly encouraged to seek out internship sites that are APA accredited. As this is not always possible though due to availability of sites, and individual student needs, there may be situations where students wish to create their own internship site or choose an internship at a location that is not yet accredited by APA. Such requests are discouraged, however, and will only be considered if situations are such that options are limited for the student and an APA site cannot be obtained which meets special and personal circumstances of the student. Such circumstances for example, may be more common with international students who will be returning to live and practice in their countries of origin, or students with extraordinary hardship issues arising during the student's doctoral program. If a non-APA internship is required, the following steps *must* be taken in order for approval to be given by the Director of Clinical Training. The application and petition process below allows the Director of Clinical Training and Counseling Psychology core faculty to properly evaluate the proposed site and quality of the internship experience. Petitions without the inclusions indicated below will not be accepted. Internship sites that are listed as APPIC member locations are expected to provide a level of quality and experiences so these are more strongly encouraged than sites who do not have a prior practice of conforming to APPIC's standards. Care is taken in both situations though to ensure that sites are providing services and availability of experiences to the student that will allow for hours to be accumulated that meet all the guidelines of the program.

Application Step One: Located in the appendix of this manual is a Graduate Petition that must be completed by a student considering a non-APA internship experience. Attach this to the Internship Application form.

Application Step Two: This petition must include 1) a detailed Internship Experience Training Plan following APPIC Internship Guidelines (appendix) which is to be developed in a collaboration between the student and internship supervisor. 2) The proposed supervisor must submit documentation explaining how each APPIC Internship Guideline will be fulfilled by the site, the supervisor, and the intern. 3) It is the responsibility of the student to prospectively develop this training plan in advance of an internship application, with the proposed site and to collect the required documentation demonstrating how the internship site will meet the internship experience standards detailed in the APPIC Internship Guidelines. The one significant allowance to the APPIC Guidelines would be guideline #9 regarding minimum number of interns participating in the training plan. It is understood that most non-APA sites, even when they are able to meet the other Internship Guidelines may not be able to support and provide experiences for more than one intern.

Application Step Three: This petition must also include 1) information about the proposed internship site: location, general demographics of clientele served, the interdisciplinary composition of facility staffing, official title of the student while serving as internship, details regarding stipend, vacation days, time allowed for doctoral research and dissertation defense. Please use the guidelines detailed in the section below entitled, "Pre-Doctoral Internship Location" when compiling this information. 2) Copy of proposed supervisor's state license and contact information. 3) Web links and/or other publications describing the proposed internship site including those published or distributed by the facility.

Application Step Four: The Director of Clinical Training will review these documents along with the Core Faculty. After initial review, the DOT will advise the student to arrange a phone interview with the proposed supervisor. After application and documents are reviewed, a determination will be made regarding the site's ability to meet the requirements and the application will be approved or denied.

On-Going Requirements for Approved Non-APA Internship Sites: At the end of each semester, an End of Semester Review of Interns in non-APA Sites must be completed by the Site Supervisor and given to the Director of Clinical Training to ensure that 1) hours are being met, 2) supervision requirements are being met, 3) intern is continuing to be given proper facilities and recording devices for supervision. The Site Supervisor and the Intern must sign this document as the means to safeguard that the approved Training Plan is being followed by all parties involved in the Internship Contract.

Very important: If an unaccredited internship is chosen by the student, the jurisdiction in which licensure is sought may ask for additional documents. It is vital to track hours as was done in practicum (face-to-face, type of client, supervision, etc). Remember also that some employers, such as the VA, *require* an APA internship, so if this is a career goal, keep that in mind if you choose a non-APA site. No contract may be signed with a proposed internship site until all documents have been received by the Director of Clinical Training and approval given as to the adequacy of the site.

INTERNSHIP ACTIVITIES

The internship experience is a cooperative effort on the part of the student, the agency, the supervisor, and the University Director of Clinical Training. As part of the student's professional practice, the internship experience in direct client services should include: intake interviews, psychological assessments, treatment planning, psychological counseling, case conferences, and seminars. Whenever possible, some research experience and community outreach is highly desirable. It is also desirable for the student to gain experience in the organization and management of professional practice whether it be a private of public agency.

PRE-DOCTORAL INTERNSHIP LOCATION

The following will be used to identify organized health service training programs for predoctoral internships in psychology. Internships that are accredited by the American Psychological Association are recognized as meeting the definition, and criteria, 1 through 10. An organized training program, in contrast to supervised experience or on-the-job training, is designed to provide the intern with a planned, programmed sequence of training experiences. The primary focus and purpose is assuring breadth and quality of training.

- 1. The internship agency had a clearly designated staff psychologist who was responsible for the integrity and quality of the training program and who was actively licensed/certified by the State Board of Examiners in Psychology.
- 2. The internship agency had a clearly designated staff psychologist who was responsible to the State Board of Examiners in Psychology.
- 3. Internship supervision was provided by a staff member of the internship agency or by an affiliate of that agency who carried clinical responsibility for the cases being supervised. At least half of the internship supervision was provided by one or more psychologists.
- 4. The internship provided training in a range of assessment and treatment activities conducted directly with patients seeking health services.
- 5. At least 25% of trainee's time was indirect patient contact (minimum 375 hours).
- 6. The internship included a minimum of two hours per week (regardless of whether the internship was completed in one year or two) of regularly scheduled, formal, face-to-face individual supervision with the specific intent of dealing with health services rendered directly by the intern. There must also have been at least two additional hours per week in learning activities such as case conferences involving a case in which the intern was actively involved; seminars dealing with clinical issues; co-therapy with a staff person including discussion; group supervision; additional individual supervision.
- 7. Training was post-practicum and post-externship level.
- 8. The internship agency had a minimum of two interns at the internship level of training during the applicant's training period.
- 9. Trainee had title such as intern, resident, fellow, or other designation of trainee status.
- 10. The internship agency had a written statement or brochure which described the goals and content of the internship, stated clear expectations for quantity and quality of trainee's work and was made available to prospective interns. The internship experience (minimum 2000 hours) was completed within 24 months.

Note

APPIC member programs are required to issue a certificate of internship completion to all interns who have successfully completed the program. These guidelines are based on or derived from several sources, including the Directory of the Association of Psychology Postdoctoral and Internship Centers (APPIC), the Criteria for Accreditation of Internship Programs (APA), and applications for listing in the National Register of Health Care Providers.

RECORDING CLINICAL ACTIVITIES

Internship requires students to maintain an orderly well documented hourly log of activities, which make up the 2000-hour internship. These hours consist of observation hours, client service hours, record keeping time, professional readings, research, staff development and any other activities included as part of the time spent on site or related to client services. Client service hours should specify type of service (i.e., assessment, family therapy, individual therapy). Such documentation may be necessary when applying for state licensure.

COMPLETING THE INTERNSHIP

All students will receive a DG grade for each semester until the internship is completed. To receive credit and a grade for all the semesters of the internship, the following documents must be on file with the department, having been submitted to the Director of Clinical Training:

- 1. Contract signed by the internship site supervisors, student, and program representatives.
- 2. Internship Training Plan (if appropriate)
- 3. Semester Monitoring Documents (if appropriate)
- 4. Evaluations of a student's progress during internship. Minimum of two, with first received midinternship and second at the end of the internship experience.
- 5. Copy of the Certificate of Internship Completion provided by the internship program

If the student is completing the internship during the last semester before graduation, the above documents must be received two weeks prior to the end of the semester in order to clear the student for graduation. All documents submitted during the internship become part of the student's permanent record of internship experience kept by the Department.

The student should have the internship site provide a Certificate of Internship at the end of the experience. This document should verify the type and length of internship and should be signed by the head of the agency and the supervisor. This document will be of future benefit when applying for licensure to many State Boards of Psychology.

PROFESSIONAL LICENSURE PROCESS

Requirements for psychology licensure vary according to the state or country. After graduation, at least one year of professional experience in a health care setting working under the supervision of a fully licensed psychologist (two years in Michigan) must be completed. Graduates must also pass the Examination for Professional Practice in Psychology (EPPP) which is administered by the various states. The required score for passing the examination varies by state. In addition, some states also have additional requirements (like an oral exam) which is specific to its own needs and requirements. Some states require both an oral and a written examination. Since each state has slightly different requirements, it is important to check with the states in which licensure is desired to be sure the program met its requirements or if additional course electives may be necessary. The Counseling Psychology program currently meets Michigan State licensure requirements.

The department does not keep information about requirements for licensure in other states or countries. It is advised that the student contact the licensing boards in the states or countries in which there is an interest in practicing and request the latest information about licensure requirements. It is the student's responsibility to be sure the program includes the course work required for licensure in the locality where practice is intended.

Licensing boards may require documentation to verify that the program meets its requirements. To provide this documentation students generally need to have the following documents:

- Copy of the Andrews University General Information Bulletin under which student graduated.
- Copy of this Counseling Psychology Program Handbook and Clinical Training Manual.
- Copy of the outline/syllabus for each course taken as part of the program, including the qualifications (degree and license) of the instructor.
- Description of internship experience including agency, experiences, length, and supervisor and Certification of Completion of internship. Be sure to know which individual in the agency will verify the internship, should this be necessary, and that internship and practicum records at Andrews are complete.
 Keep a copy of all summary forms and logs for practicum and internship experiences as well as the Certificate of Completion.
- Transcripts will be sent directly from the Registrar's Office to the licensing board.

Appendix PRACTICUM & INTERNSHIP FORMS

Andrews University - Department of Graduate Psychology and Counseling Ph.D. in Counseling Psychology

Contract for Off-Campus Practicum Continuation/Externship

Doctoral Level Practicum Continuation: GDPC878; Externship: GDPC850

| Student's Area of Emphasis: | □Adult | □Child/Family | □Diversity | ☐Health Psychology |
|--|-------------------|-------------------------|---------------------|---|
| Off Campus Agency Name: | | | | |
| Agency Address: | | | | |
| Agency Phone/s: | | | | |
| Name of Supervisor:(Please attach photocopy of | supervisor's stat | e license which must be | at that state's hig | hest level of practice.) |
| Supervisor Emergency Phon | e: | | | |
| Total Contract Hours Per W | eek (estimated): | (Include | de all agency acti | vities) |
| Total Direct Service Hours I | Per Week (estima | ted):(Include | de client contact a | activities only) |
| Hours of Supervision Per W | eek: | (Indivi | | |
| Contract Dates: | | (Group | | (Ending date) |
| Experiences and Activities a | vailable (check a | ıll that apply): | | |
| □Individual Adult Psychoth | erapy □Individu | al Child Psychotherapy | □Psychologi | ical Assessment |
| □Crisis Intervention | □Group P | sychotherapy | □Psycho/Ed | ucational Consultation |
| □Other | | | | |
| □Practicum Continuation is most recent evaluation with | | | wth areas. | |
| | | | 00 | site Supervisor's Signature <u>ONLY IF</u> the Practicum Continuation |

Continued on next page...

Contract for Off-Campus Practicum/Externship (cont.)

| Description of the clinical setting (private pr Type of clients student is likely to work with | actice, CMHC, etc.): (diagnostic groups, | ages, therapy approaches, cultural groups, etc.): |
|---|---|---|
| Requirements the Counseling Psychology p | program has of the si | te: |
| 1. A minimum of 1 hour of individual s IMPORTANT: Supervision must be | | an once per week. a private, professional counseling/clinical setting. |
| Location where supervision will <u>alway</u> 2. Preferably group supervision/weekly | ys occur: case staffing experie | Days/times:ences if possible. |
| Off-site Agency Supervisor's Signature com | nitting to following t | the requirements |
| Expectations/requirements the site has of stu | dent (if the site has a | a contract, that may be attached instead): |
| | | |
| | | |
| | | |
| | | |
| | - | |
| Student's Signature committing to following | the site's expectation | ns/requirements |
| Director of Clinical Training Signature | Date | |
| Director of Clinical Training Signature | Date | |
| Andrews Instructor's Signature | Date | ☐Student has completed 3 semesters of on-campus practicum. List school year below when those were |
| Off-site Agency Supervisor's Signature | Date | completed (e.g., 2019-2020): |
| Student's Signature | Date | |
| ake copies for 1) Department Student Folder, 2) Off-sit | e Agency Supervisor 3) | Student |

Andrews University - Department of Graduate Psychology and Counseling Ph.D. in Counseling Psychology

Doctoral Practicum Student Evaluation

Competency Benchmarks in Professional Psychology and Readiness for Internship Rating Form

| Note: This form ma | y be filled out us | sing Microsoft Word to | fill in values a | nd click the chec | kboxes and then printed or em | ailed. | | |
|--|--|---|--|---|---|----------------------------|--|--|
| School Year: | | Semester: | □Fall | □Spring | □Summer | | | |
| Dates of Training Ex | perience this | Eval Covers: | | | | | | |
| Trainee Name: | | | Date E | val Completed: | · | | | |
| Area of Emphasis: | □Adult | □Child/Family | □Cultural | Diversity | □Health Psych | | | |
| Supervisor Name: _ | | | License | d Psychologist: | □Yes □No | | | |
| Did supervision involv (e.g., review of video/audio | | | | | □Yes □No | | | |
| Next Semester's Sup | ervisor Name | : | | | | | | |
| CHECK ONE: Type of Review / Training Level of Person Being Assessed—End of: □ 1st semester of Practicum (GDPC745; expect behavior ratings of 1*) □ 2nd semester of Practicum (GDPC846, 847, 848, 849; expect behavior ratings of 2*) □ 3rd semester of Practicum (GDPC846, 847, 848, 849; expect behavior ratings of 3*) □ Practicum Continuation to complete required hours (GDPC878; expect behavior ratings of 3*) □ Practicum Continuation to address competencies (GDPC878; expect behavior ratings of 3*) □ Externship (GDPC850; expect behavior ratings of 3*) *IMPORTANT: A rating of 1 at the end of 1st semester or 2 at the end of 2nd semester is not a "bad" rating—it is the expected rating. Ratings may be decreased if there are specific instances of behavior that fell below the level | | | | | | | | |
| behavior that a one has had su readiness for i Continuation | are clearly abo ipervised expe nternship is in until competen | ve the level expected rience in the field pri dicated by ratings of cies in all areas meet | for the traini or to Practicu 3; ratings bel the expected | ng semester (what im). By the end ow 3 will generalle level of 3. | d if there are specific instantich is most likely to occur of the 3 rd semester of Pracally indicate the need for Pracally | when ticum, racticur | | |
| This evaluation form is based on the APA's Readiness for Internship Level Rating Form which is based on Competency Benchmarks in Professional Psychology (2012 revisions). The original form can be accessed at http://www.apa.org/ed/graduate/readiness-internship.doc For more detailed examples for each of the competencies listed below, see http://www.apa.org/ed/graduate/rating-form-appendix.doc | | | | | | | | |

HOW CHARACTERISTIC OF THE TRAINEE'S BEHAVIOR IS THIS COMPETENCY DESCRIPTION?

| Not at All/Slightly | Somewhat | Moderately | Mostly | Very |
|----------------------|-----------------------------|-----------------------------|------------------------------------|------------------------------------|
| 0 | 1 | 2 | 3 | 4 |
| Expected pre- | Expected by end of | Expected by end of | Expected by end of 3 rd | Exceeds expectations for |
| Practicum (i.e., end | 1 st semester of | 2 nd semester of | semester of Practicum | end of 3 rd semester of |
| of MA-Practicum) | Practicum* | Practicum* | (ready for Internship) | Practicum |

If you have not had the opportunity to observe a behavior in question, mark: N/O: No opportunity to observe

FOUNDATIONAL COMPETENCIES

Supervisor: Rate each item by responding to the following question using the scale below: I. PROFESSIONALISM

| 1. Professionalism: As evidenced in behavior and comportment that reflect the | ne value | es and | attitud | les of p | sycholo | ogy. |
|---|----------|--------|---------|----------|---------|------|
| 1A. Integrity - Honesty, personal responsibility and adherence to professional value | S | | | | | |
| Adherence to professional values infuses work; honest even in difficult situations; takes responsibility for own actions; recognizes situations that challenge adherence to professional values; can discuss failures and lapses with supervisors | □0 | □1 | □2 | □3 | □4 | □N/O |
| 1B. Deportment | | | | | | |
| Communication (choice of words) & physical conduct (attire, hygiene, etc.) are professional across different settings; recognizes impact of behavior on client | □0 | □1 | □2 | □3 | □4 | □N/O |
| 1C. Accountability | | | | | | |
| Completes tasks and documentation in accordance with established deadlines; follows policies and procedures; follows through on commitments; organization skills; plans ahead; takes responsibility for own actions; acknowledges errors | □0 | □1 | □2 | □3 | □4 | □N/O |
| 1D. Concern for the welfare of others | | | | | | |
| Articulates importance of concepts of confidentiality, privacy, and informed consent; shows awareness of suffering and the wish to relieve it for others; respects individuals from divergent perspectives or backgrounds | □0 | □1 | □2 | □3 | □4 | □N/O |
| 1E. Professional Identity | | | | | | |
| Displays emerging professional identity as psychologist; uses resources (e.g., supervision, literature) for professional development; seeks new experiences | □0 | □1 | □2 | □3 | □4 | □N/O |
| 2. Individual and Cultural Diversity (ICD): Awareness, sensitivity and skill individuals, groups and communities who represent various cultural and person broadly and consistent with APA policy. | | | | | | |
| 2A. Self as Shaped by Individual and Cultural Diversity (e.g., cultural, individual age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual socioeconomic status) and Context | | | | | | |
| Monitors and applies knowledge of self as a cultural being in assessment, treatment, and consultation | □0 | □1 | □2 | □3 | □4 | □N/O |
| 2B. Others as Shaped by Individual and Cultural Diversity and Context | | | | | | |
| Applies knowledge of others as cultural beings in assessment, treatment, and consultation; understands that others may have multiple cultural identities | □0 | □1 | □2 | □3 | □4 | □N/O |
| 2C. Interaction of Self and Others as Shaped by Individual and Cultural Diversi | ity and | Conte | xt | | | |
| Applies knowledge of the role of culture in interactions in assessment, treatment, and consultation of diverse others | □0 | □1 | □2 | □3 | □4 | □N/O |
| 2D. Applications based on Individual and Cultural Context | | | | | | |
| Applies knowledge, sensitivity, and understanding regarding ICD issues to work effectively with diverse others in assessment, treatment, and consultation; engages | □0 | □1 | □2 | □3 | □4 | □N/O |

| literature about ICD when interacting with groups not previously experienced | | | | | | |
|--|----------|------------|---------|---------|---------|--------|
| 3. Ethical Legal Standards and Policy: Application of ethical concepts and a professional activities with individuals, groups, and organizations. | awaren | ess of | legal i | ssues r | egardin | g |
| 3A. Knowledge of Ethical, Legal and Professional Standards and Guidelines | | | | | | |
| Locates documents relevant to ethical and legal issues as needed; Demonstrates knowledge and understanding of <i>APA Ethical Principles and Code of Conduct</i> and other relevant professional codes, standards, guidelines, laws, and regulations—e.g., child and elder abuse reporting, confidentiality, informed consent | □0 | □ 1 | □2 | □3 | □4 | □N/O |
| 3B. Awareness and Application of Ethical Decision Making | | | | | | |
| Demonstrates knowledge and application of an ethical decision-making model; applies relevant elements of ethical decision making to a dilemma | □0 | □1 | □2 | □3 | □4 | □N/O |
| 3C. Ethical Conduct | | | | | | |
| Displays appropriate boundary management; integrates own moral principles/ethical values in professional conduct | □0 | □1 | □2 | □3 | □4 | □N/O |
| 4. Reflective Practice/Self-Assessment/Self-Care: Practice conducted with p and reflection; with awareness of competencies; with appropriate self-care. | ersona | l and p | orofess | ional s | elf-awa | reness |
| 4A. Reflective Practice | | | | | | |
| Displays broadened self-awareness; reflects on professional practice; uses video to review professional performance; recognizes impact of self on others; adjusts actions in real time as situations require | □0 | □1 | □2 | □3 | □4 | □N/O |
| 4B. Self-Assessment | | | | | | |
| Demonstrates broad, accurate self-assessment of competence; consistently monitors and evaluates practice activities; recognizes limits of knowledge/skills and seeks means to enhance knowledge/skills; identifies and pursues growth areas | □0 | □1 | □2 | □3 | □4 | □N/O |
| 4C. Self-Care (attention to personal health and well-being to assure effective profess | ional fu | nctioni | ing) | | | |
| Monitors issues related to self-care with supervisor; understands the central role of self-care to effective practice; initiates or follows self-care action plan | □0 | □1 | □2 | □3 | □4 | □N/O |
| 4D. Participation in Supervision Process | | | | | | |
| Comes to supervision with video clips to watch, paperwork completed, & specific questions; is prepared to talk in detail about 1 or 2 cases but with brief information about all cases; examines own process & reactions; follows through on recs | □0 | □1 | □2 | □3 | □4 | □N/O |
| II. RELATIONAL | | | | | | |
| 5. Relationships: Relate effectively and meaningfully with individuals, group | s, and/o | or com | munit | ies. | | |
| 5A. Interpersonal Relationships | | | | | | |
| Forms and maintains productive and respectful relationships with clients, peers/colleagues, supervisors, and professionals from other disciplines and from diverse backgrounds; shows empathy and interest in others' cultures, experiences, values, points of view, goals and desires, etc.; uses appropriate verbal and nonverbal interpersonal skills; maintains collegiality in spite of differences | □0 | □1 | □2 | □3 | □4 | □N/O |
| 5B. Affective Skills | | | | | | |
| Negotiates differences satisfactorily; provides effective feedback to others; receives feedback nondefensively; displays appropriate level of distress tolerance; notices and expresses feelings; affect does not overwhelm judgment; maintains affective equilibrium and focus on therapeutic task when facing client distress | □0 | □1 | □2 | □3 | □4 | □N/O |
| 5C. Expressive Skills | | | | | | |
| Communicates clearly using verbal, nonverbal, and written skills in a professional | □0 | □1 | □2 | □3 | □4 | □N/O |

| Supervisor: Rate each item by responding to the following question using the scale below: III. SCIENCE Scientific Knowledge and Methods: 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. 4. Scientific Mindedness Values and applies scientific methods to professional practice; formulates appropriate questions and hypotheses regarding case conceptualizations 00 | context; demonstrates clear understanding and use of professional language | | | | | | | |
|--|---|-------------|------------|---------|----------|------------|------|--|
| and analysis, biological bases of behavior, cognitive-affective bases of behavior, and development across the lifespan. Respect for scientific Mindedness Values and applies scientific methods to professional practice; formulates appropriate questions and hypotheses regarding case conceptualizations By Cale Scientific Foundation of Psychology Demonstrates knowledge of core scientific conceptualizations of behavior Coc. Scientific Foundation of Professional Practice Demonstrates knowledge, understanding, and application of evidence-based practice; reviews scholarly literature related to clinical cases FUNCTIONAL COMPETENCIES IV. APPLICATION 8. Evidence-Based Practice (EBP): Integration of research and clinical expertise in the context of client factors. 8. Knowledge and Application of Evidence-Based Practice (EBP) Applies knowledge of EBP, including empirical bases of assessment, intervention, and other psychological applications, clinical expertise, and client preferences; applies scholarly literature related to clinical cases 9. Assessment: Assessment and diagnosis of problems, capabilities, and issues associated with individuals, groups, and/or organizations. 9. Assessment: Assessment and Bychometrics Sclects assessment measures with attention to issues of reliability and validity 9. B. Knowledge of Assessment Methods Demonstrates wareness of the strengths and limitations of administration, scoring, and interpretation of traditional assessment measures as well as related electhological advances Sclects appropriate assessment measures to answer diagnostic question; collects appropriate assessment the context of stages of development and diversity 9. Diagnosis 9. Communication of Assessment Findings With additi | | | | | | | | |
| Values and applies scientific methods to professional practice; formulates appropriate questions and hypotheses regarding case conceptualizations 0 | and analysis, biological bases of behavior, cognitive-affective bases of behavior, and development across the lifespan. | | | | | | | |
| appropriate questions and hypotheses regarding case conceptualizations | 6A. Scientific Mindedness | | | | | | | |
| 6B. Scientific Foundation of Psychology Demonstrates knowledge of core scientific conceptualizations of behavior 0 | | □0 | □1 | □2 | □3 | □4 | □N/O | |
| Demonstrates knowledge of core scientific conceptualizations of behavior | 6B. Scientific Foundation of Psychology | | | | | | | |
| ### Demonstrates knowledge, understanding, and application of evidence-based practice; reviews scholarly literature related to clinical cases Columbia Columbia | | □0 | □1 | □2 | □3 | □4 | □N/O | |
| ### Demonstrates knowledge, understanding, and application of evidence-based practice; reviews scholarly literature related to clinical cases Punctional Competencies | 6C. Scientific Foundation of Professional Practice | | | | | | | |
| 8. Evidence-Based Practice (EBP): Integration of research and clinical expertise in the context of client factors. 8. Evidence-Based Practice (EBP): Integration of research and clinical expertise in the context of client factors. 8. Knowledge and Application of Evidence-Based Practice (EBP) Applies knowledge of EBP, including empirical bases of assessment, intervention, and other psychological applications, clinical expertise, and client preferences; applies scholarly literature related to clinical cases 9. Assessment: Assessment and diagnosis of problems, capabilities, and issues associated with individuals, groups, and/or organizations. 9. Assessment: Assessment and Psychometrics 9. Assessment measures with attention to issues of reliability and validity 9. B. Knowledge of Measurement and Psychometrics Selects assessment measures with attention to issue of reliability and validity 9. B. Knowledge of Assessment Methods Demonstrates awareness of the strengths and limitations of administration, scoring, and interpretation of traditional assessment measures as well as related technological advances 9. C. Application of Assessment Methods Selects appropriate assessment measures to answer diagnostic question; collects accurate and relevant data by interviewing clients; accurately selects, administers, scores, and interprets assessment tools with clients 90. □1 □2 □3 □4 □N/O 9D. Diagnosis DSM competence; applies concepts of normal/abnormal behavior to case formulation and diagnosis in the context of stages of development and diversity □0 □1 □2 □3 □4 □N/O 9F. Conceptualization and Recommendations Utilizes systematic approaches of gathering data to inform case conceptualization and clinical decision-making 9F. Communication of Assessment Findings Writes adequate assessment reports and progress notes and communicates | Demonstrates knowledge, understanding, and application of evidence-based | □0 | □1 | □2 | □3 | □4 | □N/O | |
| Ask. Knowledge and Application of Evidence-Based Practice (EBP) Applies knowledge of EBP, including empirical bases of assessment, intervention, and other psychological applications, clinical expertise, and client preferences; applies scholarly literature related to clinical cases 9. Assessment: Assessment and diagnosis of problems, capabilities, and issues associated with individuals, groups, and/or organizations. 9A. Knowledge of Measurement and Psychometrics Selects assessment measures with attention to issues of reliability and validity 9B. Knowledge of Assessment Methods Demonstrates awareness of the strengths and limitations of administration, scoring, and interpretation of traditional assessment measures as well as related technological advances 9C. Application of Assessment Methods Selects appropriate assessment measures to answer diagnostic question; collects accurate and relevant data by interviewing clients; accurately selects, administers, scores, and interpretas assessment tools with clients DSM competence; applies concepts of normal/abnormal behavior to case formulation and diagnosis in the context of stages of development and diversity DF. Conceptualization and Recommendations Utilizes systematic approaches of gathering data to inform case conceptualization and clinical decision-making Writes adequate assessment reports and progress notes and communicates | | <u>NCIE</u> | <u>S</u> | | | | | |
| Applies knowledge of EBP, including empirical bases of assessment, intervention, and other psychological applications, clinical expertise, and client preferences; applies scholarly literature related to clinical cases 9. Assessment: Assessment and diagnosis of problems, capabilities, and issues associated with individuals, groups, and/or organizations. 9. Assessment: Assessment and Psychometrics Selects assessment measures with attention to issues of reliability and validity 9. Capability and validity and validity and validity 9. Capability and validity and validity and validity 9. Capability and validity an | 8. Evidence-Based Practice (EBP): Integration of research and clinical expe | ertise in | the co | ntext o | of clien | t factor | s. | |
| and other psychological applications, clinical expertise, and client preferences; applies scholarly literature related to clinical cases 9. Assessment: Assessment and diagnosis of problems, capabilities, and issues associated with individuals, groups, and/or organizations. 9. Assessment: Assessment and Baychometrics Selects assessment measures with attention to issues of reliability and validity 9. B. Knowledge of Measurement and Psychometrics Selects assessment measures with attention to issues of reliability and validity 9. B. Knowledge of Assessment Methods Demonstrates awareness of the strengths and limitations of administration, scoring, and interpretation of traditional assessment measures as well as related technological advances 9. C. Application of Assessment Methods Selects appropriate assessment measures to answer diagnostic question; collects accurate and relevant data by interviewing clients; accurately selects, administers, scores, and interprets assessment tools with clients 9. Diagnosis DSM competence; applies concepts of normal/abnormal behavior to case formulation and diagnosis in the context of stages of development and diversity 9. Diagnosis DEM. Conceptualization and Recommendations Utilizes systematic approaches of gathering data to inform case conceptualization and clinical decision-making 9. Conceptualization of Assessment Findings Writes adequate assessment reports and progress notes and communicates | | | | | | | | |
| and/or organizations. 9A. Knowledge of Measurement and Psychometrics Selects assessment measures with attention to issues of reliability and validity | and other psychological applications, clinical expertise, and client preferences; | □0 | □ 1 | □2 | □3 | □4 | □N/O | |
| Selects assessment measures with attention to issues of reliability and validity | | es assoc | iated v | with in | dividu | als, gro | ups, | |
| 9B. Knowledge of Assessment Methods Demonstrates awareness of the strengths and limitations of administration, scoring, and interpretation of traditional assessment measures as well as related technological advances | 9A. Knowledge of Measurement and Psychometrics | | | | | | | |
| Demonstrates awareness of the strengths and limitations of administration, scoring, and interpretation of traditional assessment measures as well as related technological advances | Selects assessment measures with attention to issues of reliability and validity | □0 | □1 | □2 | □3 | □4 | □N/O | |
| scoring, and interpretation of traditional assessment measures as well as related technological advances | | | | | | | | |
| Selects appropriate assessment measures to answer diagnostic question; collects accurate and relevant data by interviewing clients; accurately selects, administers, scores, and interprets assessment tools with clients DSM competence; applies concepts of normal/abnormal behavior to case formulation and diagnosis in the context of stages of development and diversity DEC Conceptualization and Recommendations Utilizes systematic approaches of gathering data to inform case conceptualization and clinical decision-making DEC Communication of Assessment Findings Writes adequate assessment reports and progress notes and communicates | scoring, and interpretation of traditional assessment measures as well as related | □0 | □ 1 | □2 | □3 | □4 | □N/O | |
| accurate and relevant data by interviewing clients; accurately selects, administers, scores, and interprets assessment tools with clients DSM competence; applies concepts of normal/abnormal behavior to case formulation and diagnosis in the context of stages of development and diversity DE. Conceptualization and Recommendations Utilizes systematic approaches of gathering data to inform case conceptualization and clinical decision-making DF. Communication of Assessment Findings Writes adequate assessment reports and progress notes and communicates | | 1 | | | | | | |
| DSM competence; applies concepts of normal/abnormal behavior to case formulation and diagnosis in the context of stages of development and diversity DEC. Conceptualization and Recommendations Utilizes systematic approaches of gathering data to inform case conceptualization and clinical decision-making DEC. Conceptualization and Recommendations Utilizes systematic approaches of gathering data to inform case conceptualization and clinical decision-making DEC. Conceptualization and Recommendations Utilizes systematic approaches of gathering data to inform case conceptualization and clinical decision-making DEC. Conceptualization and Recommendations Utilizes systematic approaches of gathering data to inform case conceptualization and clinical decision-making DEC. Conceptualization and Recommendations Utilizes systematic approaches of gathering data to inform case conceptualization and clinical decision-making DEC. Conceptualization and Recommendations DEC. Conceptuali | accurate and relevant data by interviewing clients; accurately selects, administers, | □0 | □ 1 | □2 | □3 | □4 | □N/O | |
| formulation and diagnosis in the context of stages of development and diversity 9E. Conceptualization and Recommendations Utilizes systematic approaches of gathering data to inform case conceptualization and clinical decision-making 9F. Communication of Assessment Findings Writes adequate assessment reports and progress notes and communicates | | | | | | | | |
| Utilizes systematic approaches of gathering data to inform case conceptualization and clinical decision-making Description: Description: | | □0 | □1 | □2 | □3 | □4 | □N/O | |
| Utilizes systematic approaches of gathering data to inform case conceptualization and clinical decision-making Description: Description: | 9E. Conceptualization and Recommendations | | | | | | | |
| Writes adequate assessment reports and progress notes and communicates | Utilizes systematic approaches of gathering data to inform case conceptualization | □0 | □1 | □2 | □3 | □4 | □N/O | |
| | 9F. Communication of Assessment Findings | | | | | | | |
| | Writes adequate assessment reports and progress notes and communicates | □0 | □1 | □2 | □3 | □ 4 | □N/O | |

| Supervisor: Rate each item by responding to the following question using the scale below: | | | | | | | |
|---|----|------------|----|----|----|------|--|
| 10. Intervention: Interventions designed to alleviate suffering and to promote health and well-being of individuals, groups, and/or organizations. | | | | | | | |
| 10A. Intervention planning | | | | | | | |
| Conceptualizes cases and plans interventions utilizing at least one consistent theoretical orientation; develops appropriate treatment plans; links intervention choices to assessment (e.g., clinical intake, testing, etc.) | □0 | □ 1 | □2 | □3 | □4 | □N/O | |
| 10B. Skills | | | | | | | |
| Demonstrates helping skills (empathic listening, etc.); uses nonverbals to establish interest and concern; develops rapport with a wide variety of: | | | | | | | |
| ADULT clients | □0 | □1 | □2 | □3 | □4 | □N/O | |
| CHILD/ADOLESCENT clients | □0 | □1 | □2 | □3 | □4 | □N/O | |
| COUPLES clients | □0 | □1 | □2 | □3 | □4 | □N/O | |
| FAMILY clients | □0 | □1 | □2 | □3 | □4 | □N/O | |
| Implements evidence-based interventions; implements a range of intervention strategies appropriate to clients' presenting problems; addresses treatment goals in each session; manages crises within the context of the overall treatment plan: | | | | | | | |
| With ADULT clients | □0 | □1 | □2 | □3 | □4 | □N/O | |
| With CHILD/ADOLESCENT clients | □0 | □1 | □2 | □3 | □4 | □N/O | |
| With COUPLES clients | □0 | □1 | □2 | □3 | □4 | □N/O | |
| With FAMILY clients | □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 |
| Summarize this trainee's overall clinical/professional strengths: |
| |
| |
| |
| |
| |
| List specific goals for this trainee's clinical/professional growth: |
| |
| |
| |
| |
| |
| If this is the end of the trainee's 3 rd semester of practicum, or, if the trainee is working on Practicum Continuation, please mark all that apply (or mark none if the trainee meets minimum Practicum requirements): □ Practicum Continuation needed to meet the required number of hours (750 hrs total; 300 hrs direct svc). □ Direct service hrs needed (a minimum of 300 hrs is required) |
| Indirect service hrs needed (usually 450 hrs are needed if 300 direct svc hours are accumulated) |
| □ Practicum Continuation needed to meet competency requirements (i.e., any rating on any item ≤ 2) NOTE: Next supervisor must receive a copy of this evaluation to ensure progress on relevant competencies (i.e., those rated ≤ 2). |
| Signature of Trainee / Date Signature of Supervisor / Date |
| Documentation routing: 1 paper copy of this document is given to the trainee (supervisor may also wish to keep a copy) Original then goes to the Accreditation Coordinator: Scan a copy for the student's Permanent File Scan a copy and email it to the next supervisor |
| 25 P a g e Andrews University – Counseling Psychology Clinical Training Manual 2022-2023 |

Andrews University - Department of Graduate Psychology and Counseling Ph.D. in Counseling Psychology

Evaluation of Clinical Supervision

Doctoral Level Practicum: GDPC745, 846-849, GDPC878 Continuation, GDPC850 Externship

| Year: | ☐ Fall Semester ☐ S | ☐ Spring Semester ☐ Summer Semester | | | | | |
|--|--|-------------------------------------|-------------------|---------------------|-----------------|-----------------------|------------------------|
| Couse Number (Gl | DPC745, GDPC 878, etc.) | Supervisor N | Name: | | | | |
| Evaluation Area | | 5 – Exceptional | 4 – Proficient | 3 – Satisfactory | 2 – Emerging | 1 - Unsatisfactory | N/O Not Observed |
| 1. Supervision help | ped me gain insight into client dynamics. | | | | | | |
| 2. Supervision help | ped me gain insight into my own dynamics. | | | | | | |
| 3. Supervision help skills. | ped me to improve my treatment planning | | | | | | |
| | ouraged/increased my awareness and use rature, research, and/or other media. | | | | | | |
| | ouraged/increased my awareness and use servational appraisals of my/other's | | | | | | |
| 6. Supervision incr | reased my competency in report writing. | | | | | | |
| | ped me develop proficiency in the use of s in client assessment. | | | | | | |
| 8. Supervision help therapeutic relation | ped me improve my ability to establish aships with clients. | | | | | | |
| 9. Supervision probalanced support a | vided a positive learning environment that nd confrontation. | | | | | | |
| 10. Supervision he intervention skills. | lped me to develop more effective | | | | | | |
| 11. Supervision inc | creased my multi-cultural sensitivity and | | | | | | |
| | ovided opportunities for developing and for exploring alternative therapy | | | | | | |
| 13. My supervisor | was empathic. | | | | | | |
| 14. My supervisor | acknowledged my competencies. | | | | | | |
| 15. My supervisor action. | encouraged independent thinking and | | | | | | |

| What I valued most about | out this semester's practicum experience: |
|--------------------------|--|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| What I would have cha | anged about this semester's practicum experience: |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| L | |
| | RN THIS FORM TO A DESK MONITOR AND HAVE THE DESK MONITOR SIGN YOUR |

27 | Page

Andrews University – Counseling Psychology Clinical Training Manual 2022-2023

Andrews University - Department of Graduate Psychology and Counseling Ph.D. in Counseling Psychology

Pre-Doctoral Internship Contract

GDPC820 Internship in Counseling Psychology

Internship Training Plan – Non-APA Sites

Internships that are accredited by the American Psychological Association or the Canadian Psychological Association are recognized as meeting APPIC membership criteria and are required to meet APPIC membership criteria at all times. All others must meet all of the following criteria (i.e., 1 through 16 below) and are reviewed for adherence to the criteria every three years.

Additional details for each of the criteria can be found on the APPIC website http://appic.org/Joining-APPIC/Members/Internship-Membership-Criteria. The Internship Supervisor of the non-APPIC site must review each of the 16 areas below and indicate in a Training Plan how all points can be met over the course of three semesters.

EDUCATIONAL NOTE: A program's adherence to APPIC membership criteria does not guarantee that the trainees in the program will meet individual state, provincial, or territorial licensing requirements.

The Ph.D. in Counseling Psychology requires the students to complete a supervised internship which meets the following minimum standards:

- 1. A psychology internship is an organized training program, which in contrast to supervised experience or on-the-job training, is designed to provide the intern with a planned, programmed sequence of training experiences. The primary focus and purpose is assuring breadth and quality of training.
- 2. The internship agency has a clearly designated doctoral level staff psychologist who is responsible for the integrity and quality of the training program. This person is actively licensed, certified, or registered by the State Board of Examiners in the jurisdiction where the program exists, and is present at the training facility for a minimum of 20 hours a week.
- 3. The internship agency training staff consists of at least two full time equivalent doctoral level psychologists who serve as primary supervisors and who are actively licensed, certified, or registered as a psychologist by the Board of Examiners in the jurisdiction where the program exists.
- 4. Intern supervision is provided by staff members of the internship agency or by qualified affiliates of that agency who carry clinical responsibility for the cases being supervised. Regularly scheduled individual supervision is provided by one or more doctoral level licensed psychologists, at a ratio of no less than one hour of supervision for every 20 internship hours. Supervision is provided with the specific intent of dealing with psychological services rendered directly by the intern.
- 5. The internship provides training in a range of psychological assessment and intervention activities conducted directly with recipients of psychological services.
- 6. At least 25% of trainees' time is in face-to-face psychological services to patients/clients.
- 7. The internship must provide at least two hours per week in didactic activities such as case conferences, seminars, in-service training, or grand rounds.

- 8. Internship training is at post-clerkship, post-practicum, and post-externship level, and precedes the granting of the doctoral degree.
- 9. The internship level psychology trainees have a title such as "intern," "resident," "fellow," or other designation of trainee status.
- 10. The internship agency has a written statement or brochure which provides a clear description of the nature of the training program, including the goals and content of the internship and clear expectations for quantity and quality of the trainee's work. It is made available to prospective interns
- 11. Internship programs have documented due process procedures that describe separately how programs deal with (1) concerns about intern performance, and (2) interns' concerns about training. These procedures include the steps of notice, hearing, and appeal, and are given to the interns at the beginning of the training period.
- 12. The internship experience (minimum 1500 hours) must be completed in no less than 9 months and no more than 24 months.
- 13. APPIC member programs are required to issue a certificate of internship completion, which includes the word "Psychology," to all interns who have successfully completed the program.
- 14. At least twice a year the internship program conducts formal written evaluations of each trainee's performance.
- 15. The program has the necessary financial resources to achieve its training goals and objectives. Intern stipends shall be reasonable, fair, and stated clearly in advance. Unfunded internship positions are allowable only in unusual and infrequent circumstances.

Standards of Internship practice which are highly encouraged but not required:

1. The internship agency has a minimum of two interns at the predoctoral level of training during any training year. These interns must be at least half-time (i.e., 20 hours per week). The minimum number of interns must be on site and in training at the time of the initial application for APPIC membership.

Signatures on the following page signifies the internship site's commitment to provide the above listed opportunities for the student

Andrews University - Department of Graduate Psychology and Counseling Ph.D. in Counseling Psychology

Pre-Doctoral Internship Contract

GDPC820 Internship in Counseling Psychology

| Name of Agency: | Phone: | |
|--|---------------|--|
| Address: | | |
| (Signature of Internship Site Director) | (Date) | |
| (Print Name) | (Email/Phone) | |
| (Signature of Internship Clinical Supervisor) | (Date) | |
| (Print Name) | (Email/Phone) | |
| (Signature of Student) | (Date) | |
| (Print Name) | (Email/Phone) | |
| (Signature of Andrews University Clinical Coordinator) | | |
| (Print Name) | (Date) | |
| (Signature of Andrews University PhD Counseling Psych Co | ordinator) | |
| (Print Name) | (Date) | |
| Date of Internship: | то | |

The Petition form below must be completed in order for a student to be considered for placement at a non-APA Internship Site

Andrews **O**University

| Submit by Email | Print Form |
|-----------------|------------|
|-----------------|------------|

GRADUATE PETITION

| FirstName: | LastName: | | | ID#: |
|----------------------------------|-----------|--------|----------------|--|
| E-mail: | | | School: | |
| Address | | | Department: | |
| City | Zip Code | | Bulletin Year: | Degree: |
| Country | | | Major Area: | |
| Telephone: | | | Concentration: | |
| | | | | Date: |
| REQUEST: | | | | |
| REASON: | | | | |
| Student Initial: | | | Date: | |
| RECOMMENDED: | | | Date | *The graduate Dean's signature is needed for any exceptions to |
| Academic Advisor | Approve | Deny | Date: | minimum standards voted by the Graduate Council, including exceptions |
| Department Chair | Approve | ☐ Deny | Date: | to policies for provisional/regular admission (including English Language standards), normal course loads, residency, degree candidacy and deadlines, time |
| Dean, School of Education | ☐ Approve | ☐ Deny | Date: | limitations on degrees, credit transfers, second degrees, updating, grade changes, grade- point average requirements, academic probation, comprehensive examinations, projects/theses/ |
| Dean, School of Graduate Studies | ☐ Approve | ☐ Deny | Date: | dissertations, application for graduation deadlines, etc |



PhD Counseling Psychology Internship Training Plan – Non-APA Sites

Doctoral Psychology Internship Programs

Internships that are accredited by the American Psychological Association or the Canadian Psychological Association are recognized as meeting APPIC membership criteria and are required to meet APPIC membership criteria at all times. All others must meet all of the following criteria (i.e., 1 through 16 below) and are reviewed for adherence to the criteria every three years.

Additional details for each of the criteria can be found on the APPIC website http://appic.org/Joining-APPIC/Members/Internship-Membership-Criteria. The Internship Supervisor of the non-APPIC site must review each of the 16 areas below and indicate in a Training Plan how all points can be met over the course of three semesters.

EDUCATIONAL NOTE: A program's adherence to APPIC membership criteria does not guarantee that the trainees in the program will meet individual state, provincial, or territorial licensing requirements.

- 2. A psychology internship is an organized training program, which in contrast to supervised experience or on-the-job training, is designed to provide the intern with a planned, programmed sequence of training experiences. The primary focus and purpose is assuring breadth and quality of training.
- 3. The internship agency has a clearly designated doctoral level staff psychologist who is responsible for the integrity and quality of the training program. This person is actively licensed, certified, or registered by the State Board of Examiners in the jurisdiction where the program exists, and is present at the training facility for a minimum of 20 hours a week.
- 4. The internship agency training staff consists of at least two full time equivalent doctoral level psychologists who serve as primary supervisors and who are actively licensed, certified, or registered as a psychologist by the Board of Examiners in the jurisdiction where the program exists.
- 5. Intern supervision is provided by staff members of the internship agency or by qualified affiliates of that agency who carry clinical responsibility for the cases being supervised. Regularly scheduled individual supervision is provided by one or more doctoral level licensed psychologists, at a ratio of no less than one hour of supervision for every 20 internship hours. Supervision is provided with the specific intent of dealing with psychological services rendered directly by the intern.
- 6. The internship provides training in a range of psychological assessment and intervention activities conducted directly with recipients of psychological services.
- 7. At least 25% of trainees' time is in face-to-face psychological services to patients/clients.
- 8. The internship must provide at least two hours per week in didactic activities such as case conferences, seminars, inservice training, or grand rounds.
- 9. Internship training is at post-clerkship, post-practicum, and post-externship level, and precedes the granting of the doctoral degree.
- 10. The internship agency has a minimum of two interns at the predoctoral level of training during any training year. These interns must be at least half-time (i.e., 20 hours per week). The minimum number of interns must be on site and in training at the time of the initial application for APPIC membership.
- 11. The internship level psychology trainees have a title such as "intern," "resident," "fellow," or other designation of trainee status.

- 12. The internship agency has a written statement or brochure which provides a clear description of the nature of the training program, including the goals and content of the internship and clear expectations for quantity and quality of the trainee's work. It is made available to prospective interns
- 13. Internship programs have documented due process procedures that describe separately how programs deal with (1) concerns about intern performance, and (2) interns' concerns about training. These procedures include the steps of notice, hearing, and appeal, and are given to the interns at the beginning of the training period.
- 14. The internship experience (minimum 1500 hours) must be completed in no less than 9 months and no more than 24 months.
- 15. APPIC member programs are required to issue a certificate of internship completion, which includes the word "Psychology," to all interns who have successfully completed the program.
- 16. At least twice a year the internship program conducts formal written evaluations of each trainee's performance.
- 17. The program has the necessary financial resources to achieve its training goals and objectives. Intern stipends shall be reasonable, fair, and stated clearly in advance. Unfunded internship positions are allowable only in unusual and infrequent circumstances.



PhD Counseling Psychology

End of Semester Review of Interns in non-APA Sites Completed by: Andrews University Director of Clinical Training

| Intern's Name: | Date | : | | | | |
|--|--------------------------------|--------------------------------|-----------|----------|--|--|
| Supervisor's Name: | pervisor's Name: Name of Site: | | | | | |
| In order to monitor the internship experies to ensure suitable progress and experience | es are available each semes | ster. | uestions | below | | |
| □First Semester | ☐ Second Semester | ☐ Third Semester | | | | |
| Please consider whether each of the items semester being evaluated. Enter the number | | | YES | NO | | |
| Daily/Weekly Activity Log signed by superv | | | | | | |
| Semester Intern and Supervision Evaluation | | | | | | |
| - | forms are completed | | | | | |
| On track for total cumulative hours # | | | | | | |
| On track for direct client hours (individuals, couples, families or groups) # | | | | | | |
| On track for indirect client hours # Received minimum individual supervision he | ours # | | | | | |
| (minimum of 1 hour per week individual sup | | | | _ | | |
| Received minimum group supervision hours | (1½ hours per week of group | supervision) # | | | | |
| Please explain if any of the items above ha | ve not been sufficiently met | and identify plans to remed | iate: | | | |
| | | , <u>, ,</u> | | | | |
| | | | | | | |
| | | | | | | |
| Signature of Director of Clinical Training | : | Date | | | | |
| | | | | | | |
| Signature of Program Coordinator: | | Date | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 34 P a g e | Andrews University - Counselin | g Psychology Clinical Training | Manual 20 | 022-2023 | | |



PhD Counseling Psychology

Intern Evaluation Form

Site may use their own evaluation form if one is available

| Intern's Name: | Date: |
|--------------------|--|
| Supervisor's Name: | Name of Site: |
| | □First Evaluation □ Second Evaluation |
| Rating Scale: | |
| 5. Exceptional: | This skill/behavior is considered a major strength which means it is performed consistently at an advanced level. |
| 4. Proficient: | This skill/behavior is considered to be above expected developmental level for the amount of experience, knowledge, and academic training. |
| 3. Satisfactory: | Performance is considered at expected developmental level for the amount of experience, knowledge, and academic training. Intern is "on target" for where they are expected to be for their level of training. |
| 2. Emerging: | Performance is considered below expected developmental level for the amount of experience, knowledge, and academic training. Intern may only have an introductory knowledge of this skill, little experience, or still need to develop these skills to be at expected level. |
| 1. Unsatisfactor | y: Performance is consistently below expected developmental level for the amount of experience, |
| | knowledge, and academic training. Intern may have very little awareness, experience, knowledge or training with this skill/behavior and remediation is needed to work toward expected developmental level. |
| Not Observed: | Not applicable or assessed during this training experience. |

The program seeks to ensure that internship placements provide students with opportunities to put into practice the knowledge and skills learned through coursework and practicum experiences. Three main student learning outcomes or goals help guide the developmental areas in which competent counseling psychologists must become skilled prior to graduation.

Goal #1: To train counseling psychologists who will have the requisite knowledgebase and

therapeutic skills for entry into the practice of professional psychology.

Goal #2: To train counseling psychologists who have the necessary knowledge and skills for

competent practice and research within a multicultural and religiously diverse society.

Goal #3: To train counseling psychologists who will contribute to and apply the scientific

knowledge base of psychology using skills in qualitative and quantitative research

methods.

Supervisors should meet individually with the intern to discuss all ratings. When giving feedback, please provide examples of strengths and areas for improvement. You are encouraged to indicate in the "Comment" area the reason behind any score lower than a 3.



PhD Counseling Psychology

Intern Evaluation Form

| (5) Exceptional (4) Proficient (3) Satisfactory (2) Emerging (1) Unsatisfactory | | | | | | |
|--|---|---|---|---|----|-----|
| Goal #1: To train counseling psychologists who will have the requisite knowledgebase and therapeutic skills for entry into the practice of professional psychology | | | | | ls | |
| Has professional and appropriate interactions with treatment teams, peers and supervisors; seeks supervisor and peer support as needed. | 5 | 4 | 3 | 2 | 1 | n/o |
| Comments: | | | | | | |
| Demonstrates positive coping strategies with personal and professional stressors and challenges. Maintains professional functioning and quality client care. | 5 | 4 | 3 | 2 | 1 | n/o |
| Comments: | | | | | | |
| Responsible for key client care tasks (e.g. phone calls, letters, case management), completes tasks promptly. All client contacts, including scheduled and unscheduled appointments, and phone contacts are well documented. | 5 | 4 | 3 | 2 | 1 | n/o |
| Comments: | | | | | | |
| Efficient and effective time management. Keeps scheduled appointments and meetings on time. Keeps supervisors aware of whereabouts as needed. Minimizes unplanned leave, whenever possible. | 5 | 4 | 3 | 2 | 1 | n/o |
| Comments: | | | | | | |
| 5. Effectively evaluates, manages and documents client risk by assessing immediate concerns such as suicidality, homicidality, and safety issues. Collaborates with clients in crisis to make appropriate short-term safety plans, and intensify treatment as needed. Discusses all applicable confidentiality issues openly with clients. | 5 | 4 | 3 | 2 | 1 | n/o |
| Comments: | | | | | | |
| Demonstrates good knowledge of ethical principles and state law. Consistently applies these appropriately, seeking consultation as needed. | 5 | 4 | 3 | 2 | 1 | n/o |
| Comments: | | | | | | |
| Goal #2: To train counseling psychologists who have the necessary knowledge and skills for competent practice and research within a multicultural and religiously diverse society | | | | | | |
| 7. Spontaneously raises issues relating to individual differences with clients as appropriate, conveys ease in working with a range of backgrounds, is aware and sensitive to individual differences, and accurately self-monitors own responses to differences. | 5 | 4 | 3 | 2 | 1 | n/o |
| Comments: | | | | | | |



PhD Counseling Psychology Intern Evaluation Form

Independently monitors and applies knowledge of self as a cultural being in 5 4 3 2 1 n/o assessment, treatment, and consultation. **Comments:** 9. Independently monitors and applies knowledge of diversity in others as cultural 3 2 4 1 n/o beings in assessment, treatment, and consultation. **Comments:** Goal #3: To train counseling psychologists who will contribute to and apply the scientific knowledge base of psychology using skills in qualitative and quantitative research methods 10. Demonstrates a thorough working knowledge of psychiatric diagnostic nomenclature 5 and diagnostic nomenclature and DSM classification. Utilizes historical, interview 4 3 2 1 n/oand psychometric data to diagnose accurately. **Comments:** 11. Promptly and proficiently administers commonly used tests in his/her area of practice. 5 Appropriately chooses the tests to be administered. Demonstrates competence in 4 2 3 1 n/o administering intelligence and personality tests. **Comments:** 12. Interprets the results of psychological tests used in his/her area of practice. 5 2 n/o Demonstrates competence interpreting intelligence and personality tests. **Comments:** 13. Writes a well-organized psychological report. Answers the referral question clearly 5 4 3 2 1 n/oand provides the referral source with specific recommendations. **Comments:** 14. Plans and carries out a feedback interview. Explains the test results in terms the client and/or caregiver can understand, provides suitable recommendations and responds to 5 4 3 2 1 n/oissues raised by client or caregiver. **Comments:** 15. Formulates a useful case conceptualization that draws on theoretical and research 5 4 3 2 1 n/oknowledge. Collaborates with client to form appropriate treatment goals. **Comments:** 16. Interventions are well-timed, effective and consistent with empirically supported 5 4 2 3 n/o **Comments:**



PhD Counseling Psychology Intern Evaluation Form

Please use the section below to provide the training staff with feedback regarding the strengths and weaknesses of the training programs and describe any suggestions you have for modifying and/or improving the program.

| • 0 | | |
|--------------------------|---|----------------------|
| Strengths: | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Weaknesses: | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Suggestions: | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Signature of Supervisor: | Date | |
| | | |
| | | |
| Signature of Intern: | Date | |
| Signature of Intern. | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| 38 P a g e | Andrews University – Counseling Psychology Clinical Train | ing Manual 2022-2023 |