



WAYNE STATE UNIVERSITY

Counseling and Psychological Services

Psychology Internship

Program Policies

Table of Contents

Policies and Procedures Specific to PI Trainees	4
<i>Internship Program Structure</i>	4
<i>Program Goals, Objectives, and Competencies</i>	4
Competency 1: Research	4
Competency 2: Ethical and Legal Standards	4
Competency 3: Individual and Cultural Diversity	5
Competency 4: Professional values, attitudes, and behaviors	5
Competency 5: Communication and Interpersonal Skills.....	5
Competency 6: Assessment.....	5
Competency 7: Intervention.....	6
Competency 8: Supervision.....	6
Competency 9: Consultation and Interprofessional/Interdisciplinary Skills	7
<i>Supervision Requirements</i>	8
Individual Supervision (2 hours per week)	8
Trainee Team Supervision (1 hour per week)	8
Group Therapy Supervision (1 hour per month).....	8
Assessment Supervision (1 hour per week).....	8
Supervision of Supervision (1 hour per week during winter semester only)	8
Clinical Review Team (CRT) (30 to 60 minutes per week)	9
<i>Administrative Procedures</i>	9
Observation of Clinical Activities.....	9
Informed Consent for Audio-Visual Recordings and Live Observation Form	9
Titanium Schedule	9
Documentation.....	9
<i>Training Program Diversity and Non-Discrimination Policy</i>	10
Wayne State University Non-Discrimination/Affirmative Action Policy.....	11
<i>Evaluation, Retention, and Termination Policy</i>	12

Training Program Maintenance of Trainee Records	13
Communication with Home Doctoral Program.....	13
<i>Intern Selection and Academic Preparation Requirements Policy.....</i>	14
Application Process.....	14
Application Review and Interview Process	14
Participation in the APPIC Match.....	15
<i>Stipends, Benefits, and Resources Policy</i>	15
Stipends and Benefits.....	15
Reporting Absence due to Illness, Vacation, and Managing Internship Requirements.....	18
Training Program Resources.....	18
<i>RIGHTS AND RESPONSIBILITIES</i>	19
Psychology Interns	19
CAPS Psychology Internship Program	19
<i>Due Process, Appeal, and Grievance Procedures Policy for Psychology Interns</i>	20
General Guidelines for Due Process.....	20
EXPECTATIONS OF PSYCHOLOGY INTERNS.....	21
Deviation from Standard Training Practices.....	21
Due Process Procedures	22
Informal Review Procedures	23
Formal Review Procedures	23
<i>Procedures for Appeal.....</i>	26
<i>INTERN GRIEVANCE PROCEDURE</i>	27
<i>Intern Grievance Form.....</i>	31
<i>Psychology Intern Remediation/Suspension Form.....</i>	32

POLICIES AND PROCEDURES SPECIFIC TO PI TRAINEES

INTERNSHIP PROGRAM STRUCTURE

The internship program is based on a full-time schedule for twelve months, with University holidays, benefits, and vacation. Interns are considered employees of Wayne State University and as such are held to the policies and procedures of the university as well as CAPS. The program begins the first full week of August and is completed one year later. It includes time outside the regular agency hours that may be needed for outreach activities, program planning, research and preparation for services, and writing of reports and other documents. Thus, the actual workweek of an intern is typically 40 – 45 hours per week. The total training comprises at least 2000 hours of supervised experience. The arrangements for supervision meet the supervisory requirements of the Michigan Department of Licensing and Regulatory Affairs.

PROGRAM GOALS, OBJECTIVES, AND COMPETENCIES

The aim of our internship program is to create competent and ethical entry-level psychologists who value interdisciplinary collaboration, and demonstrate the skills needed to evaluate empirical knowledge and consider individual differences and diverse identities in their clinical practice.

WSU Counseling and Psychological Services is rooted in the Practitioner-Scholar Model of training and is committed to the training and development of PI Trainees. This program is designed to prepare Psychology Interns across the nine profession wide competencies defined by APA Standards of Accreditation (SoA). Each competency will be achieved by participation in a range of training activities and supervised direct service delivery activities. Performance across these competencies will be assessed at two points (6 months and completion) during internship. The goal of the internship is for interns to perform at the intermediate to advanced level of functioning across each of these competencies and aims by the end of internship.

COMPETENCY 1: RESEARCH

1. Demonstrates the ability to critically evaluate and disseminate relevant research or other scholarship activities at the local (including the host institution), regional or national level
2. Integrates relevant theory and empirical knowledge into clinical practice
3. Demonstrates substantial knowledge and appreciation of evidence-based practice.

COMPETENCY 2: ETHICAL AND LEGAL STANDARDS

1. Demonstrates knowledge of and acts in accordance with the *APA Ethical Principles of Psychologists and Code of Conduct* and the local, state, and federal laws governing health care practice.
2. Recognizes ethical dilemmas as they arise and applies ethical decision making processes to resolve dilemmas in collaboration with others.
3. Consults appropriately with peers, staff, and supervisors regarding ethical issues and dilemmas.

COMPETENCY 3: INDIVIDUAL AND CULTURAL DIVERSITY

1. Demonstrates awareness, sensitivity, and respect for diversity and individual differences.
2. Demonstrates an understanding of how one's own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves.
3. Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities.
4. Integrates knowledge and awareness of individual and cultural differences in the conduct of professional roles (e.g., clinical services and all other professional activities) to work effectively with the range of diverse individuals and groups encountered during internship.
5. Consults appropriately about issues of difference.

COMPETENCY 4: PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS

1. Behaves in ways that reflect the values and attitudes of psychology, including integrity, accountability, lifelong learning, and concern for the welfare of others.
2. Demonstrates a willingness to perform duties with flexibility and adaptability.
3. Actively seeks and demonstrates openness and responsiveness to feedback and supervision.
4. Engages in self-reflection regarding one's personal and professional functioning, and strives for professional growth.
5. Engages in activities to maintain and improve performance, well-being, and professional effectiveness.
6. Responds professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.

COMPETENCY 5: COMMUNICATION AND INTERPERSONAL SKILLS

1. Develops and maintains effective relationships with a wide range of individuals, including colleagues, supervisors, supervisees, university community members, and clients.
2. Produces and comprehends oral, nonverbal, and written communications that are informative and well-integrated; demonstrate a thorough grasp of professional language and concepts.
3. Demonstrates effective interpersonal skills and the ability to manage difficult communication with skill.

COMPETENCY 6: ASSESSMENT

1. Demonstrates current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology.

2. Demonstrates understanding of human behavior within its context.
3. Demonstrates the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process.
4. Selects and applies assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collects relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the client.
5. Interprets assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective.
6. Communicates orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.
7. Demonstrates knowledge of the empirical information related to risk assessment methods and intervention as well as in assessing for risk of harm to self and others and employing safety planning and crisis intervention appropriately.

COMPETENCY 7: INTERVENTION

1. Establishes and maintains effective relationships with the recipients of psychological services.
2. Develops evidence-based intervention plans specific to the service delivery goals.
3. Implements interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.
4. Demonstrates the ability to apply the relevant research literature to clinical decision-making.
5. Modifies and adapts evidence-based approaches effectively when a clear evidence-base is lacking.
6. Evaluate intervention effectiveness, and adapts intervention goals and methods consistent with ongoing evaluation.
7. Demonstrates the ability to effectively use a variety of outreach materials, techniques, and methods, as well as consider audience needs and demographics when developing and delivering psycho-educational outreach programming.
8. Demonstrates the ability to implement group therapy interventions including managing group cohesion and responding to individual and cultural differences in group psychotherapy.

COMPETENCY 8: SUPERVISION

1. Demonstrates knowledge about theories, models, and effective practices in supervision.
2. Applies this knowledge to the supervision of direct service delivery by psychology trainees and trainees from other health professions.
3. Effectively establishes rapport and cultivates relationship with supervisee.

COMPETENCY 9: CONSULTATION AND INTERPROFESSIONAL/INTERDISCIPLINARY SKILLS

1. Demonstrates appropriate knowledge, skills, and attitudes regarding inter-professional and interdisciplinary collaboration in relevant professional roles.
2. Applies this knowledge in consultation and collaboration with individuals and their families, other health care professionals, interprofessional groups, or system related to health and behavior.

SUPERVISION REQUIREMENTS

INDIVIDUAL SUPERVISION (2 HOURS PER WEEK)

PIs are expected to attend two hours of individual supervision with fully licensed psychology staff weekly. Interns will obtain supervision, including review of video, on all clinical activities conducted at CAPS. Interns are expected to accept and incorporate feedback provided by supervising staff.

TRAINEE TEAM SUPERVISION (1 HOUR PER WEEK)

PIs are expected to attend one hour of Trainee Team Supervision weekly. This multidisciplinary group supervision is co-facilitated by two members of CAPS staff. Supervisors and possibly advanced trainees from different mental health disciplines will attend and consult together about clinical issues.

GROUP THERAPY SUPERVISION (1 HOUR PER MONTH)

PIs who facilitate a therapy group will receive 30 minutes of scheduled supervision from their staff co-leader for the duration of the group. Interns will also attend a monthly group facilitators meetings with staff and the group coordinator.

ASSESSMENT SUPERVISION (1 HOUR BIWEEKLY)

PIs will be expected to attend one hour of assessment supervision weekly. PIs will be expected to discuss their assessment batteries, interpretation of measures, conclusions, and recommendations during supervision.

SUPERVISION OF SUPERVISION (1 HOUR BIWEEKLY DURING FALL & WINTER SEMESTER ONLY)

PIs are required to gain experience in clinical supervision. Interns will gain direct supervision experience in fall and winter semesters with CAPS MA level trainees. PIs will supervise one-two cases, and will be

expected to review video recordings with their supervisee. Supervision of supervision will meet one hour biweekly for the fall and winter semester.

CLINICAL REVIEW TEAM (CRT) (30 TO 60 MINUTES PER WEEK)

PIs are required to attend CRT to receive supervision with fully licensed staff to determine the disposition of cases presenting for initial consultation and crisis intervention sessions.

ADMINISTRATIVE PROCEDURES

OBSERVATION OF CLINICAL ACTIVITIES

Clinical activities of PIs will be recorded for supervision purposes at least once during each evaluation period.

INFORMED CONSENT FOR AUDIO-VISUAL RECORDINGS AND LIVE OBSERVATION FORM

During the course of your traineeship, your supervisor will require that you video record your sessions with clients. Please familiarize yourself with this additional consent form to address the issue with clients. Your assigned supervisor will discuss this procedure with you further. You will not be permitted to record sessions unless you have obtained written consent from the client. Trainees are asked to delete recordings after they are reviewed in supervision. At the end of your placement at CAPS, the trainee is required to delete all recorded sessions unless there is some legal issue or concern. For a copy of this document see Appendix B.

TITANIUM SCHEDULE

PIs are expected to maintain clinical and non-clinical appointments in our electronic weekly schedule.

DOCUMENTATION

PIs are expected to document all clinical contact in a timely manner. Documentation is expected to be professionally written, complete, and accurate. CAPS Training Program requires the following time periods for completion: crisis intervention: within 24 hours following a session, client contact and

psychotherapy note: within 48 hours following a session, intake: within a week of intake session; additional information can be added to intakes via addendums, discharge summary: within a week of the last session, last phone call or documented reason for closing a chart. If there is an open case with no recent appointments (i.e. 30 days), there should be a notation in the chart about how keeping the chart open is related to the overall treatment plan (i.e. "case management - client is seen one time per month"). Interns must obtain a supervisor's signature on all clinical documentation.

TRAINING PROGRAM DIVERSITY AND NON-DISCRIMINATION POLICY

Diversity is at the heart of the CAPS Training Program. The training program values and respects the diversity of our faculty, staff, trainees, and students. The training program strives to promote equity, inclusivity, and safety for all trainees. The diversity of our trainees and supervisors creates an abundant learning environment that assists in educating trainees about difference and building strong professional connections across areas of difference. The training program actively promotes and facilitates a climate of respect, inclusion, and safety, which in turn allows trainees, especially those with diverse identities, to be successful during their training experience.

As a part of CAPS, the training program acknowledges that oppression, prejudice, privilege, and discrimination impact all of us in detrimental ways. As stated in our diversity statement, CAPS (and the training program) aim to support our students, trainees, and the broader university in understanding the impact of these issues and advocating for social justice. The value of diversity is embedded within the goals of the broader training program and the competencies of the PI program. Specifically, the training program goals include building knowledge related to diversity along with skills to integrate diversity into clinical practice; and the PI program includes a specific profession wide competency in individual and cultural diversity. Together, the program goals and related diversity competency comply with the APA's statement on Preparing Professional Psychologists to Serve a Diverse Public: ". . . professional psychology training programs strive to ensure that psychology trainees demonstrate acceptable levels of knowledge, skills, and awareness to work effectively with diverse individuals." Diversity training is interwoven into all aspects of the training program to ensure that our trainees are adequately trained and supported. To accomplish these goals and build these competencies, the training program offers didactic and experiential education on diversity related topics as well as supervision that incorporates multicultural perspectives. Trainees gain direct experience providing clinical services to diverse individuals as well as the opportunity to collaborate with staff and other trainees from diverse backgrounds. These opportunities assist trainees in building both their knowledge of diversity, and awareness regarding their own bias and privilege as well as systemic bias.

WSU CAPS welcomes trainees from diverse backgrounds, and seeks to support them in their professional pursuits. WSU CAPS provides equality opportunity to all trainees and does not discriminate because of a person's race, color, religion, sex, national origin, age, disability, or any other factor that is irrelevant to success as a trainee. Applicants to the training program are evaluated in terms of their previous training in mental health, practicum experiences, references, and fit with the site and training program goals and aims. Applicants and interns who wish to seek accommodations should inform the Training Director. The Training Director and the intern will work with the Office of Equal Opportunity to develop and monitor a plan that is in compliance with the American Disabilities Act.

WAYNE STATE UNIVERSITY NON-DISCRIMINATION/AFFIRMATIVE ACTION POLICY

Wayne State University is committed to a policy of non-discrimination and equal opportunity in all of its operations, employment opportunities, educational programs, and related activities.

This policy embraces all persons regardless of race, color, sex (including gender identity), national origin, religion, age, sexual orientation, familial status, marital status, height, weight, disability, or veteran status, and expressly forbids sexual harassment and discrimination in hiring, terms of employment, tenure, promotion, placement and discharge of employees, admission, training and treatment of students, extra-curricular activities, the use of University services, facilities, and the awarding of contracts. This policy also forbids retaliation and/or any form of harassment against an individual as a result of filing a complaint of discrimination or harassment, or participating in an investigation of a complaint of discrimination or harassment. It shall not preclude the University from implementing those affirmative action measures which are designed to achieve full equity for minorities and women.

The University, as an equal opportunity/affirmative action employer, complies with all applicable federal and state laws regarding non-discrimination and affirmative action. In furtherance of this policy, the University is also committed to promoting institutional diversity to achieve full equity in all areas of University life and service and in those private clubs and accommodations that are used by University personnel. No off-campus activities sponsored by or on behalf of Wayne State University shall be held in private club facilities or accommodations which operate from an established policy barring membership or participation on the basis of race, color, sex (including gender identity), national origin, religion, age, sexual orientation, familial status, marital status, height, weight, disability, or veteran status. Affirmative action procedures, measures, and programs may be used to the extent permitted by law to establish, monitor and implement affirmative action plans for all budgetary units and the University as a whole.

The affirmative action plans and programs of the University may include the participation of minority- and female-owned businesses, institutions and firms in the awarding of contracts for consulting, management, construction projects, maintenance, and vendor services.

Implementation of the University's Non-Discrimination/ Affirmative Action Policy shall include, but is not limited to, the following:

1. a) Review by the President or his/her designee of all proposed academic and non-academic appointments for compliance with this statute;
2. b) Review by the President or his/her designee of all proposed contractual commitments by the University with external construction contractors,

Non-Discrimination/Affirmative Action Policy 2

Vendors, consulting, and professional service firms and organizations, for compliance with this statute;

c) Maintenance of University Affirmative Action Plans consistent with existing law and this statute;

4. d) The posting of job openings as provided by Executive Order;
5. e) Procedures for the investigation and timely resolution of complaints alleging sexual harassment or discrimination due to race, color, sex (including gender identity), national origin, religion, age, sexual orientation, familial status, marital status, height, weight, disability, or veteran status;
6. f) Development of recruitment programs designed to attract minority and female job applicants and students;
7. g) Annual reports to the Board of Governors describing the status of minorities and women, areas of non-compliance or weak performance, and the University's progress in achieving established goals.

Overall responsibility for implementation of the Non-Discrimination/Affirmative Action Policy, as declared herein, and University compliance with all applicable federal, state and local laws and regulations rests with the President. Day-to-day administrative responsibility shall be carried by other executive officers as assigned by the President. Such officers shall provide periodic reports to the Board of Governors on the status of the University's Affirmative Action Program, and its record of compliance under this policy.

Adopted February 14, 1986 Revised March 24, 2010

EVALUATION, RETENTION, AND TERMINATION POLICY

PIs will be evaluated across the nine profession wide competencies defined by APA Standards of Accreditation (SoA). Each competency will be achieved by participation in a range of training activities and supervised direct service delivery activities. Performance across these competencies will be assessed at two points (6 months and completion) during internship. Evaluation will be conducted using a standard form, which includes written feedback regarding intern's areas of strength and areas that require additional training. Intern's three primary psychologist supervisors will provide ratings for the areas they supervise (i.e. individual therapy, assessment, and supervision). Primary supervisors will gather information from staff and staff supervisors from other mental health disciplines (i.e. Trainee Team, Group Therapy, and Outreach) and incorporate it into the intern's evaluation. Supervising staff will meet once a semester to discuss PI evaluations and finalize ratings. Evaluations will then be discussed with PIs during individual supervision with the Training Director. The goal of the internship is for interns to perform at the intermediate to advanced level of functioning across each of these competencies and aims by the end of internship. Performing below expectations or failing to meet expectations will trigger due process procedures outlined in this manual. Interns will receive ongoing evaluation and feedback throughout training, on a fairly frequent basis, both formally and informally. The evaluation form can be found in this manual.

Criteria which link this definition of inadequate performance are incorporated into the training program's evaluation procedures. The PI evaluation rating scale ranges from 1 to 5. Scores are defined as follows: 1 = Performs significantly below the average level of expected competency for a psychology intern; 2 = Performs below the average level of expected competency for psychology intern; 3= Performs at the average level of expected competency for a beginning psychology intern; 4= Performs at a

satisfactory level of expected competency for entry-level health service psychologists 5= Performs at an exceptional level of the expected competency; N/A = Not Applicable. The minimum level of achievement required across each domain by the conclusion of internship is a score of (3). Receiving a rating of “Significantly Below (1)” or “Below Average (2)” in any criteria on the Psychology Intern Evaluation will automatically trigger due process procedures. However, since evaluations occur only two times a year, supervisors do not need to wait until they have completed PI evaluation to recognize a problem and start due process procedures. Supervisors are expected to continuously track PI performance across the evaluation domains, and recognize and communicate about problems as they arise. Areas of performance that are below expectations should be communicated to an intern in an informal discussion during weekly supervision. If informal discussion fails to result in sufficient change on the part of the intern, the supervisor will notify the intern in writing and begin due process procedures. Interns must receive at least a rating of a 3 on all competency domains, no ratings below a 3 on all training elements to successfully complete the program.

In addition to meeting profession wide competencies, interns are required to complete 2000 hours of training during the internship year, and 500 of those hours should be direct client contact. To successfully complete the internship program interns must complete both the hours requirement and obtain the minimum level of achievement on the intern evaluation form.

TRAINING PROGRAM MAINTENANCE OF TRAINEE RECORDS

Evaluation and Supervision files will be created for each PI supervisee and retained by Training Director in a secure and private location. This file may include copies of liability insurance, CAPS Confidentiality Agreement, evaluation forms, all due process and grievance information, supervision feedback and evaluation forms, record of hours (timesheets), and other documentation. The Training Director permanently maintains intern evaluations and certificates of completion in a secure digital file.

Documentation of grievances and complaints will be retained indefinitely in a secure and confidential file by the Training Director.

COMMUNICATION WITH HOME DOCTORAL PROGRAM

Upon matching with an intern, a letter is sent by the Director of Training to the intern’s home program verifying the match and inviting communication with the internship program throughout the year. At the end of each evaluation period of internship (6 months and 12 months), a letter stating the intern’s progress and standing in the program, along with the intern’s evaluation, is sent to home doctoral programs. At the end of the internship, a letter indicating whether the intern successfully completed the internship, along with their final evaluation, is sent to the intern’s home doctoral program. Any formal remediation plan or grievance filed by an intern would also be sent to home doctoral programs. The doctoral program will be notified in writing if the intern is terminated from the internship.

INTERN SELECTION AND ACADEMIC PREPARATION REQUIREMENTS POLICY

APPLICATION PROCESS

WSU CAPS' Psychology Internship (PI) currently offers three full-time internship positions. WSU CAPS is a member of Association of Psychology Postdoctoral and Internship Centers (APPIC) and participates in the APPIC National Match. Interested applicants should submit their application materials through the APPI Online Applicant Portal (accessed at www.appic.org).

The following five items are required to apply:

1. Online AAPI application
2. Letter of interest (as a part of the APPI)
3. Curriculum vitae (as a part of the APPI)
4. 3 recommendation letters (Use the Standard Reference Form, a part of the APPI)
5. Official graduate school transcripts

Prior to application, candidates must be enrolled and in good standing in a doctoral program in clinical or counseling psychology, and must have completed their Master's degree (or program equivalent), and completed qualifying exams (or program equivalent).

All application materials must be received by the date noted in the current APPIC directory listing to be considered.

APPLICATION REVIEW AND INTERVIEW PROCESS

WSU CAPS will base the applicant selection process on the package of materials outlined above; however, applicants with the following qualifications will be considered preferred.

1. Current enrollment and good standing in an APA –or – CPA accredited doctoral program;
2. A minimum of 300 intervention hours;
3. A minimum of 25 assessment hours;
4. Dissertation proposal defended;
5. Experience working with diverse populations;
6. Practicum experience working at a University Counseling Center or similar setting.

The CAPS Training Selection Committee reviews all applications for fit with our center and training program using a standard application review form. The Selection Committee typically consists of the Training Director and 2-4 senior staff members. The Selection Committee confers to recommend top candidates for an interview. All interviews are conducted via Zoom or telephone. Interviews are scheduled on a first come, first served basis. All interviews will be scheduled for December and/or early January and are approximately one hour in length. Interviews are conducted using a standard set of interview questions, although members of the Selection Committee may ask additional questions as appropriate. Top candidates will also be given information on how to get further information from current interns.

Wayne State University is an equal opportunity employer. No person will be discriminated against or harassed in employment because of race, color, religion, gender, national origin, age, disability, familial status, marital status, arrest record, height, weight, sexual orientation, qualified Vietnam era veterans, qualified special disabled veterans, recently separated veterans and other protected veterans, or any other characteristic protected by applicable federal or state law.

PARTICIPATION IN THE APPIC MATCH

The Training Selection Committee holds a meeting within two weeks of our final interviews to determine applicant rankings. All application materials and interview content is considered in determining applicant rankings. As APPIC members, we abide by APPIC's match policies. Our site submits our applicant rankings to the National Matching Service by the prescribed deadline. WSU CAPS PI agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

For questions regarding our selection process or additional information please contact our Training Director, Kristie Van de Laar, Ph.D. at eg5637@wayne.edu.

After matching but before securing employment, interns must pass a criminal background check conducted by the university at no charge to the intern. The history of a felony or misdemeanor may result in termination from the applicant pool and prevent the intern from beginning internship at WSU CAPS.

STIPENDS, BENEFITS, AND RESOURCES POLICY

For more information about Employee Policies and Procedures including compensation please review the Personal Manual for Non-Represented Employees (<https://policies.wayne.edu/non-rep>) and Wayne State University Policies <https://policies.wayne.edu/university-policies>

STIPENDS AND BENEFITS

The annual stipend for all interns at WSU CAPS is \$35,568. As an employee of WSU, interns receive comprehensive health benefits, generous paid time off, and time off for university closures and holidays. See below for additional information.

BENEFIT PROGRAMS

The Wayne State University (WSU) benefit programs you receive while you are a member of our staff are administered by the department of Benefits and Wellness. Please visit their website (<https://hr.wayne.edu/tcw/benefits>) for additional information about benefits included with your employment.

VACATION TIME

Full-time professional and administrative staff members, including interns, accrue 6.35 hours of vacation per pay period for an annual accrual of 165 hours (22 days). A full day of vacation is equivalent to 7.5 hours. Salaried staff members with appointment of half-time or more are entitled to vacation in proportion to the fraction of time worked, e.g., a person with a 4/5 time appointment accrues/earns vacation time at 80% of the full time rate. Paid holidays occurring within an authorized vacation period are not counted as part of the vacation leave. Vacation time must be approved by the unit administrator in accordance with the operational needs of the unit.

When a pay day occurs during a staff member's vacation period of ten days or more, an advance check may be requested in writing from the Payroll Office. Such a request will be honored if submitted at least ten working days prior to scheduled issuance of advance check and there is a sufficient vacation bank as of the last pay period prior to the date of request to cover the amount of advance payment requested.

Effective October 1, 2000 vacation time is accrued from the first full pay period following the date of employment and may be used following four months of active University service. Vacation may be accrued up to a maximum of 172.5 hours (23 days). Vacation time is accrued from the first full pay period following the date of employment and may be used following four months of active University service. Vacation may be accumulated up to a maximum of 172.5 hours (23 days).

Vacation time does not accrue during any pay period in which a staff member is absent without earnings for ten days. Non-represented faculty and academic staff, including interns, with term appointments must use all vacation prior to the expiration of the term of appointment or it will be forfeited.

ABSENCE DUE TO ILLNESS COMPENSATION

Full-time staff members, including interns, receive 165 hours of illness pay upon appointment. On each anniversary date of the original appointment to the eligible classification, the staff member will be granted an additional 165 hours, up to a maximum of 990 hours. During any twelve consecutive months, employees are eligible to receive continued earnings during absences due to illness/injury up to the maximum number of hours granted prior to the beginning of the period of absence. No additional hours are granted while illness hours are being used or during approved leaves of absence without pay. Staff members may use illness days for their own illness or injury and, in addition, are eligible to charge the following absences occurring within any fiscal year period to their accrued illness day bank:

ANY PURPOSE

Up to a total of 15 hours within a fiscal year period following completion of six months of service. Such hours should be reported as "Any Purpose" (earnings code AP). Any purpose time can be used following 6 months of active University service.

FUNERAL NOT IN THE IMMEDIATE FAMILY

Attendance at the funeral of a person not in the immediate family (up to 7.5 hours per occurrence). Such hours should be reported as "Funeral Not in the Immediate Family" (earnings code FN).

DEATH IN THE IMMEDIATE FAMILY

Up to a total of 37.5 consecutive hours per each death of a member of the immediate family. Such hours should be reported as "Death in the Immediate Family" (earnings code DF).

SPECIAL NEEDS

Care of member of the immediate family (up to 15 consecutive hours per occurrence). "Special Needs" (earnings code SN). (An immediate family member is generally defined as husband, wife, father, mother, brother, sister, son, daughter, grandmother, grandfather, mother-in-law, father-in-law, daughter-in-law, and son-in-law. The University recognizes other than the traditional family relationships as equally significant.). The time period for reporting all Special Needs (earnings code SN) absence is defined as a fiscal year, beginning October 1 and ending September 30.

CHRISTMAS/NEW YEAR'S CLOSURE

Staff members are given time off with pay between Christmas Day and New Year's Day, except in operational units where it is determined that services must be continued during this closure period. Staff members who are required to work during the Christmas/New Year closure are given compensatory time off at a later date, except Public Safety sergeants and lieutenants working in a uniformed capacity, who will receive overtime pay (time and a half). Except in the case of retirement, employees must be paid for the day prior to closure and the day after closure in order to receive pay for closure. Staff members retiring during closure or January 1 will be paid for all days prior to retirement and need not return to receive closure pay.

HOLIDAYS

Staff members are eligible for nine Holidays per calendar year: New Year's Day, Dr. Martin Luther King Jr.'s Birthday, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, Friday following Thanksgiving Day, Christmas Day, and a Floating Holiday. A Floating Holiday is scheduled at the option of the employee with the approval of the appropriate unit administrator. To qualify for holiday pay, an employee must be eligible to receive earnings (including pay for illness leave, vacation pay, compensatory time off, and related provisions) on the regularly scheduled work day immediately preceding and immediately following the holiday. Employees retiring January 1 need not work following the holidays to receive pay for Christmas Day and the Christmas/New Year closure period.

When a designated University holiday falls on Sunday, the following Monday is observed as a holiday; when the holiday falls on Saturday, the preceding Friday is observed as a holiday.

EMPLOYEE ASSISTANCE PROGRAM

Wayne State University has developed an Employee Assistance Program which provides mental health assessment and referral. This service is delivered at no charge by mental health professionals who are not Counseling and Psychological Services staff. Interns are eligible for this service.

REPORTING ABSENCE DUE TO ILLNESS, VACATION, AND MANAGING INTERNSHIP REQUIREMENTS

An employee is to report absence due to illness to his/her supervisor as soon as possible within the scheduled work period of the first day of absence. To report absence due to illness please call the CAPS front desk and leave a message. Be sure to specify how the front desk should handle the appointments you have scheduled that day. Interns can also notify supervisors via email if they are absent due to illness.

Failure to report absence due to illness on each day is considered unauthorized absence and can result in loss of pay for the day. Longer intervals between calls may be established by the supervisor if it is determined that the employee will be off for an extended period. Absence due to illness may require verification by medical authorization including one designated by the HR Client Services department, if is requested by the Administrative Head of the unit. Notification of a requirement of medical verification will be given to the employee in written form. Such notification will state the reason(s) for requiring medical verification.

Vacation time must be scheduled in advance with approval of the CAPS Training Director or designee and shall be approved in accordance with hours needed for internship. To request vacation time should be requested in writing on the CAPS Request for Time Away form. Staff and trainees are expected to call 313-577-3398 to notify the office if they will be arriving 15 minutes or more late for a scheduled workday.

It is important to note that the generous allocation of vacation time, sick time, holidays, and closures is in conflict with the 2,000 clock hours required for internship by the State of Michigan Department of Licensing and Regulatory Affairs. Interns will be expected to work with the Training Director to create a plan to complete the required 2,000 clock hours within the one year period that accounts for personal time used. The Training Director is available for any questions related to personal time.

TRAINING PROGRAM RESOURCES

Psychology Interns have access to numerous resources. PIs are assigned their own offices within the CAPS suite with a desktop computer equipped with a webcam to record clinical sessions. Interns have access to all university systems including library databases for reviewing empirical literature, C&IT, and discounted software and hardware. PIs also have access to the CAPS library, and can request additional books be ordered for the library as needed. PIs can also utilize the wide array of training materials stored

on the shared drive, including psycho-educational materials, presentations, and handouts for clients. PIs are also provided unlimited copying and office supplies, and can request additional supplies as needed. CAPS front office staff will provide clerical support to PIs including scheduling and checking in clients and clerical tasks such as making copies.

RIGHTS AND RESPONSIBILITIES

PSYCHOLOGY INTERNS

Psychology interns are expected to learn psychological skills and the ethics of practice, as well as to do much self-examination, focusing on their intra- and interpersonal processes. At all stages of training, Counseling and Psychological Services assumes responsibility for assessment and continual feedback to trainees in order to improve skills, remediate problem areas, and/or to prevent individuals, unsuited in either skills or interpersonal difficulties, from entering the field. Supervisors, then, are responsible for monitoring trainee progress to benefit and protect the public and the profession, as well as the trainee.

The interns have access to clear statements of the standards and expectations by which they are evaluated at 6 months, and 12 months. Throughout the year, interns receive two hours of individual clinical supervision weekly when they will be given informal verbal feedback on their performance. They have the opportunity to ameliorate deficiencies or misconduct prior to the evaluation and/or special review, unless continuation of service delivery would be to the detriment of clients.

Interns have opportunities to provide input and suggest changes and modifications regarding the training program. Regular meetings of interns and the training director will provide interns direct access to center administration and enable the training director to assess the progress and problems confronted by the interns and to discuss their developmental tasks and issues.

Interns have the right to activate a formal review when they believe that their rights have been infringed upon. When the evaluation process is completed at the end of the semester, interns have the right to contest criticisms in the evaluation, to disagree with the primary supervisor's summary evaluation, and to request an appeal.

Violations of intern's rights include, but are not limited to, exploitation, sexual harassment, arbitrary, capricious or discriminatory treatment, unfair evaluation criteria, inappropriate or inadequate supervision or training, and violation of due process.

CAPS PSYCHOLOGY INTERNSHIP PROGRAM

The CAPS PI Program has the right to implement these Due Process procedures as described below. The program and its staff have the right to be treated in a fair, respectful, professional, and ethical manner. The program and its staff have the right to make decisions related to due process and remediation for an intern, including probation, suspension, and termination, within the limits of this policy. The responsibilities of the program include engaging with the intern in a respectful, professional, and ethical manner, as well as making every reasonable attempt to support interns in the completion of their internship requirements.

DUE PROCESS, APPEAL, AND GRIEVANCE PROCEDURES POLICY FOR PSYCHOLOGY INTERNS

GENERAL GUIDELINES FOR DUE PROCESS

Due process insures that judgments or decisions made by the internship program about interns are not arbitrary or personally biased. The training program has adopted specific evaluation procedures which are applied to all interns. The appeals procedures presented below are available to the intern so that he/she may challenge the training program's action.

General due process guidelines include:

Presenting to interns, in writing, the training program's expectations in regards to professional functioning at the outset of training;

Stipulating the procedures for evaluation, including when, how, and by whom evaluations will be conducted;

Using input from multiple professional sources when making decisions or recommendations regarding the intern's performance;

Articulating the various procedures and actions involved in making decisions regarding inadequate performance;

Communicating, early and often, with graduate programs about any suspected difficulties with interns;

Instituting, with the input and knowledge of the intern's graduate program, a remediation plan for identified inadequacies, including a time frame for expected remediation and consequences of not rectifying the inadequacies;

Providing the intern with a written statement of procedural policy describing how the intern may appeal the program's actions or decisions;

Insuring that interns have a reasonable amount of time to respond to any action(s) taken by the program; and

Documenting, in writing and to all relevant parties (e.g., the intern's academic advisor or Training Director, internship supervisor), the action(s) taken by the program and the rationale.

EXPECTATIONS OF PSYCHOLOGY INTERNS

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

Practice within the bounds of the APA Ethical Code of Conduct (www.apa.org/ethics/) and Michigan Department of Licensing and Regulatory Affairs Board of Psychology Rules and Regulations (https://www.michigan.gov/lara/0,4601,7-154-72600_72603_27529_27552-59190--00.html) (printed copy available upon request)

Practice within the bounds of the laws and regulations of the Mental Health Code of the State of Michigan; <http://legislature.mi.gov/doc.aspx?mcl-368-1978-15-182>

Practice in a manner that conforms to the professional standards of Wayne State University and Counseling and Psychological Services.

Interns are responsible for maintaining standards of conduct appropriate to their work environment and mandated for all employees of Wayne State University. Please see: Wayne State University Policies <https://policies.wayne.edu/university-policies> and <https://policies.wayne.edu/non-rep> (printed copies available upon request).

DEVIATION FROM STANDARD TRAINING PRACTICES

Wayne State University is committed to a policy of non-discrimination and equal opportunity in all of its operations, employment opportunities, educational programs, and related activities. As a part of this policy Wayne State University is committed to upholding the civil rights protections described in The Americans with Disabilities Act (ADA). ADA gives civil rights protection to individuals with disabilities. It guarantees equal opportunity for individuals with disabilities in public accommodations, employment, transportation, and government services. If you are a qualified individual with a disability, the ADA protects you from discrimination and requires employers to make reasonable accommodations for employees. Reasonable accommodation is any change or adjustment to a job or work environment that permits a qualified applicant or employee with a disability to participate in the job application process, to

perform the essential functions of a job, or to enjoy benefits and privileges of employment equal to those enjoyed by employees without disabilities. Interns with disabilities who wish to seek accommodations should inform the Training Director. The Training Director and the intern will work with the Office of Equal Opportunity to develop and monitor a plan that is in compliance with ADA.

DUE PROCESS PROCEDURES

DEFINITION OF INADEQUATE PERFORMANCE

For the purposes of procedural policy, inadequate trainee performance is defined broadly as interference in professional functioning which is reflected in one or more of the following ways: (a) an inability and/or unwillingness to acquire and integrate professional behaviors and ethical standards, (b) an inability to acquire the level of professional skills necessary to reach an acceptable level of competency, and (c) an inability to manage personal stress, psychological problems, and/or excessive emotional reactions which interfere with professional functioning.

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

The intern does not acknowledge, understand, or address the problem when it is identified,

The problem is not merely a reflection of a skill deficit which can be rectified by further academic or didactic training,

The quality of the intern's service delivery is negatively affected and may be considered to be destructive to clients,

The problem is not restricted to one area of professional functioning,

A disproportionate amount of attention by training personnel is required, compared to other interns in the group, and/or

The trainee's behavior does not change as a function of feedback, remediation efforts, and/or time.

Criteria which link this definition of inadequate performance are incorporated into the training program's evaluation procedures. Specifically, receiving a rating of "Fails to Meet Expectations (1)" or "Below Expectations (2)" in any criteria on the Psychology Intern Evaluation will automatically trigger due process procedures. However, since evaluations occur only two times a year, supervisors do not need to wait until they have completed PI evaluation to recognize a problem and start due process procedures. Supervisors are expected to continuously track PI performance across the evaluation domains, and recognize and

communicate about problems as they arise. Areas of performance that are below expectations should be communicated to an intern in an informal discussion during weekly supervision. If informal discussion fails to result in sufficient change on the part of the intern, the supervisor will notify the intern in writing and begin due process procedures.

INFORMAL REVIEW PROCEDURES

When a primary supervisor or another staff member recognizes that an intern's behavior is becoming problematic or they are struggling to meet expected levels of competence, the first step is to raise the issue with the intern directly as soon as is feasibly possible in an attempt to informally resolve the problem. The staff member that has recognized the problem will also bring it to the attention of supervisory staff in the weekly staff or monthly supervisor meetings. The supervisor and intern will work together to define the problem very specifically, using terminology that is as concrete and behavioral as possible. Recommendations for resolution of the problem may include increased supervision, specific didactic training, and/or additional readings. The supervisor who recognizes the concern should continue to monitor the behavior and outcome. If the supervisor is satisfied that sufficient positive change has taken or is taking place the intern will not move on to formal review procedures. If the supervisor is not satisfied that an appropriate level of change has taken place, the formal review procedures will begin.

FORMAL REVIEW PROCEDURES

If an intern's behavior persists following an attempt to resolve the behavior informally, or if an intern receives a rating below a "3" on any competency on the PI Evaluation, the following formal process is initiated. If a conflict of interest exists for any member of staff (including the Training Director and Director) related to the due process proceeding, that individual will recuse himself or herself from due process and related appeal proceedings.

1. **Notice:**

The intern will be notified in writing, as soon as possible, that the problem has been raised to a formal level of review and that a Hearing will be held.

2. **Hearing:**

The supervisor and/or staff will hold a Hearing with the Training Director (TD) and intern within 10 days of informing the intern of the formal review. The Hearing will include a discussion of the problem and determination of actions needed to address the issue. If the TD is the supervisor who is raising the issue, an additional PI supervisor who works directly with the intern will be included in formal review proceedings. During the Hearing, the intern will have the opportunity to

present their perspective on the problem, and/or provide a written statement detailing their response to the problem.

3. **Outcome of Hearing:**

The result of the Hearing will be any of the following options, to be determined by the Training Director and supervisory staff present at the hearing. Intern agreement with the outcome will be sought whenever possible. The outcome of the Hearing will be communicated to the intern in writing within five working days of the Hearing.

4. **Possible Next Steps**

- a. Issue an "Acknowledgement Notice" to the intern regarding the problem. This acknowledgement notice formally acknowledges:
 - i. Supervisory staff is aware of and concerned about the problem;
 - ii. The problem has been brought to the attention of the intern;
 - iii. Supervisory staff will work with the intern to specify the steps necessary to rectify the problem or competency deficits addressed by the inadequate evaluation rating; and
 - iv. The problem is not significant enough to warrant further remediation at this time.

- b. Place the intern on a "Remediation Plan" which defines actions needed to address the problematic behavior, expected timeframe of improvement, and the supervisor assigned to actively and systematically monitor the remediation plan. Remediation plans might include additional supervision, adjunct supervision, temporary screening of clients, etc. The duration of a remediation period will be defined as a function of the nature of the problem and will be defined by the intern's supervisor and the TD. The implementation of a remediation plan represents a probationary status for the intern. A written Remediation Plan will be shared with the intern and the intern's home doctoral program and will include the following:
 - i. A description of the concrete and observable behaviors or skills deficit associated with the problem;
 - ii. The specific actions to be taken to remediate the problem;
 - iii. The expected timeframe during which the problem should be ameliorated; and
 - iv. The procedures designed to ascertain whether the problem has been remediated.

At the conclusion of the identified remediation period the TD, in consultation with the supervisor, will provide the intern with a written statement indicated whether or not the problem has been appropriately remediated. This document will become a part of the intern's permanent file and will be shared with the intern's home doctoral program. If the problem has been remediated the intern exits the remediation process. If the TD and supervisory staff determines that additional remediation is required they may extend the remediation period. If the remediation period is extended this new period will be documented in the new

remediation plan, and this plan will be shared with the intern and their home doctoral program.

- c. Place the intern on suspension, which would remove the intern from all clinical service provision for a specified period of time. During the suspension period, the intern may support the intern through additional supervision, additional didactic training, simulated clinical practice, close mentorship, or engage some other method of remediation. The timeframe of the suspension will be determined based on the nature of the problem, and will be determined by the intern's supervisor and TD. A written Suspension Plan will be shared with the intern and the intern's home doctoral program and will include the following:
 - i. A description of the concrete and observable behaviors or skills deficit associated with the problem;
 - ii. The specific actions to be taken to rectify the problem;
 - iii. The expected timeframe during which the problem should be ameliorated; and
 - iv. The procedures designed to ascertain whether the problem has been remediated.

At the conclusion of the identified suspension period the TD, in consultation with the supervisor, will provide the intern with a written statement indicated whether or not the problem has been appropriately remediated. This document will become a part of the intern's permanent file and will be shared with the intern's home doctoral program. If the problem has been remediated the intern exits the suspension process, and the intern may return to direct clinical activities. The statement may include a recommendation that the intern be placed on probationary status with a remediation plan. In this case, remediation procedures outlined above (item b) should be followed.

- d. If the problem is not remediated through the above processes, or if the problem represents gross misconduct or ethical violation that have the potential to cause harm, the intern's placement within the program may be terminated. The decision to terminate an intern's internship is determined by the PI Training Committee and a representative from Human Resources. Termination would represent a discontinuation from participation in every aspect of the training program. The PI Training Committee would make this determination within 10 days of the conclusion of the suspension period and/or identification of gross misconduct. The TD may decide to suspend the intern's clinical activities during the period prior to the final decision. The internship program will notify APPIC and the intern's home doctoral program of the decision. In this letter the problem area is appropriately discussed, efforts to remediate the problem are outlined, and the reasoning for termination from the internship program is provided. If an intern is recommended for termination they will be required to complete all clinical documentation prior to their departure from CAPS. Interns will be able to receive credit for any training hours completed at CAPS.

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

Note 1: Psychology Interns are employees of the University that serve at the pleasure of the President. Interns are subject to the policies and procedures of non-represented employees of Wayne State University as outlined in the Personal Manual for Non-Represented Employees (<https://policies.wayne.edu/non-rep>).

PROCEDURES FOR APPEAL

If a conflict of interest exists related to the appeal for the Training Director, Director of CAPS, or any member of the Appeals Committee that individual will recuse themselves from appeal proceedings. If the Training Director has recused themselves from appeal proceedings, the Director will serve as Training Director in the procedures described. If the Director has recused themselves from appeal proceedings the matter will be referred to Human Resources.

Within five working days of the communications of (1) inadequate performance, (2) remediation or suspension, (3) outcome of an intern grievance, (4) termination, or (5) any other decision, an intern may submit a letter to the Training Director requesting an appeal. An appeal may be requested on one or both of the following grounds:

Denial of the described due process granted to the intern in any part of the evaluation procedure.

Denial of the opportunity to fairly present data to refute criticisms in the evaluation.

Within five working days of the receipt of the appeal request, the Training Director will request that the Director of CAPS convene an Appeals Committee. A representative from Human Resources will be asked to serve on the Appeals Committee.

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

The intern and his/her supervisor or the staff member(s) involved will be notified that a special review meeting will be held.

The Appeals Committee may request personal interviews and/or written statements from individuals as it deems appropriate.

The trainee may submit to the Appeals Committee any written statements he/she believes to be appropriate, may request a personal interview, and/or may request that the Committee interview other individuals who might have relevant information. The supervisor or staff members involved will also be afforded the same privilege.

The Appeals Committee will have 15 working days to conduct the fact finding review. Following the fact finding review, the Director will communicate a letter of summary of the Appeal Committee's findings and any recommendations to the Training Director, within two working days of the end of their deliberation. The Committee may choose to sustain any previous actions taken or may implement a new course of action as it deems necessary. The Training Director will communicate the results of the appeal in writing to the intern within 3 working days of receipt of the letter of summary. The decision of the Appeals Committee is final.

INTERN GRIEVANCE PROCEDURE

A grievance is a complaint, conflict, or dispute that occurs in the work place.

It is our hope that most work related conflicts and complaints can be managed informally using the conflict resolution protocol outlined in the Conflict Resolution section of this manual. Complaints about CAPS or the Training Program should be first communicated in an informal manner to the Training Director. If a conflict or complaint cannot be managed informally the intern is asked to make a grievance. Grievances should be managed using the steps below. Interns should lodge a grievance within one week of the failure of the informal communication.

It should be noted that in cases of interpersonal conflict at CAPS the intern is asked to work through the grievance with the person in question as their first step. Discussing problems or conflicts allows the intern to build professional communication skills. However, if the matter has resulted in the intern feeling unsafe to communicate with the person, the intern should proceed to Level 2.

All grievances should be resolved in 30 work days from the initial notice of the grievance. It is recommended that the intern devote no more than one working week to each step outlined below. If an intern is not satisfied with the results of the grievance process they may appeal using the appeal processes outlined.

If a conflict of interest exists for any staff member related to the intern grievance that individual will be required to recuse themselves from the grievance process. The Director of CAPS will serve as the Training Director in cases where the Training Director has recused themselves. Human Resources representatives will serve as the Director of CAPS if the director of CAPS has recused themselves.

Grievance regarding an entity outside CAPS or regarding a non-personnel issue within CAPS or CAPS Training Program

Communicate your grievance directly to the Training Director. The Training Director and intern will document the grievance using the "Intern Grievance Form". The Training Director will then consult with CAPS administration, University administration, Human Resources, and any other applicable Wayne State department including the Office of Equal Opportunity to determine appropriate steps to address the grievance. The Training Director will communicate with the intern regarding their progress in addressing the grievance, and document actions on the "Intern Grievance Form." If the intern's grievance has not been fully addressed the matter will be brought before the Director.

Grievance regarding with Another Intern

- Level 1:** Make an attempt to work through the grievance with the other intern (if appropriate).
- Level 2:** Bring matter to the attention of your Primary Supervisor, who will work with the intern to document the grievance using the "Intern Grievance Form." The primary supervisor will then intervene as appropriate.
- Level 3:** Intern(s) and supervisor(s) bring matter to the Training Director, who will intervene as appropriate. Training Director will then document any actions taken on the "Intern Grievance Form."
- Level 4:** Matter is brought before the Director. The Director will intervene as appropriate, and will then document any actions taken on the "Intern Grievance Form."

Grievance regarding a Staff member or an Associate Director

- Level 1:** Make an attempt to work through the grievance with the staff member or an Associate Director (if appropriate).
- Level 2:** Bring matter to the attention of your Primary Supervisor, who will work with the intern to document the grievance using the "Intern Grievance Form." The primary supervisor will then intervene as appropriate, and document actions on the "Intern Grievance Form."

Level 3: Intern(s) and supervisor(s) bring matter to the Training Director, who will intervene as appropriate. Training Director will then document any actions taken on the “Intern Grievance Form.”

Level 4: Matter is brought before the Director. The Director will intervene as appropriate, and will then document any actions taken on the “Intern Grievance Form.”

Grievance regarding a Primary Supervisor

Level 1: Make an attempt to work through the grievance with your Supervisor (if appropriate).

Level 2: Intern brings the matter to the Training Director, who will intervene as appropriate. Training Director will then document any actions taken on the “Intern Grievance Form.”

Level 3: Matter is brought before the Director. The Director will intervene as appropriate, and will then document any actions taken on the “Intern Grievance Form.”

Grievance regarding a Secondary Supervisor

Level 1: Make an attempt to work through the grievance with the Secondary Supervisor (if appropriate).

Level 2: Bring matter to the attention of your Primary Supervisor, who will work with the intern to document the grievance using the “Intern Grievance Form.” The primary supervisor will then intervene as appropriate, and document actions on the “Intern Grievance Form.”

Level 3: Intern(s) and supervisor(s) bring matter to the Training Director, who will intervene as appropriate. Training Director will then document any actions taken on the “Intern Grievance Form.”

Level 4: Matter is brought before the Director. The Director will intervene as appropriate, and will then document any actions taken on the “Intern Grievance Form.”

Grievance regarding the Training Director

Level 1: Make an attempt to work through the grievance with Training Director (if appropriate).

- Level 2:** Bring matter to the attention of your Primary Supervisor, who will work with the intern to document the grievance using the “Intern Grievance Form.” The primary supervisor will then intervene as appropriate, and document actions on the “Intern Grievance Form.”
- Level 3:** Intern and Supervisor attempt to work through conflict with Training Director. Supervisor will document actions taken on the “Intern Grievance Form”
- Level 4:** Matter is brought before the Director. The Director will intervene as appropriate, and will then document any actions taken on the “Intern Grievance Form.”

Grievance regarding the Director

- Level 1:** Make an attempt to work through the grievance with the Director (if appropriate).
- Level 2:** Bring matter to the attention of your Primary Supervisor, who will work with the intern to document the grievance using the “Intern Grievance Form.” The primary supervisor will then intervene as appropriate, and document actions on the “Intern Grievance Form.”
- Level 3:** Intern(s) and supervisor(s) bring matter to the Training Director, who will intervene as appropriate. Training Director will then document any actions taken on the “Intern Grievance Form.”

Grievance regarding a claim of discrimination, sexual harassment, or ADA compliance

Communicate your grievance directly to the Training Director. The Training Director and intern will document the grievance using the “Intern Grievance Form”. The Training Director will then inform the Director of the grievance. The intern will be referred to the Office of Equal Opportunity (OEO) to determine the proper course of action. The Training Director will consult with Human Resources (HR) to determine next steps. The Training Director will document actions of OEO and HR using “Intern Grievance Form.”

INTERN GRIEVANCE FORM

Date of Grievance: _____

Name of Trainee: _____

Primary Supervisor(s): _____

Training Director: _____

Director: _____

Please be thorough and specific in completing this form. Note dates of incidents and name all individuals involved. Make note of meetings and the results of those meetings.

Description of the Grievance:

Description of actions taken by intern (if appropriate):

Description of actions taken by primary supervisor:

Description of actions taken by Training Director:

Description of actions taken by Director:

Additional information:

PSYCHOLOGY INTERN REMEDIATION/SUSPENSION FORM

Date: _____

Name of Intern: _____

Primary Supervisor: _____

Names of All Persons Present at the Hearing: _____

Describe of the concrete and observable behaviors or skills deficit associated with the problem:

Specific actions to be taken to remediate the problem:

The expected timeframe during which the problem should be ameliorated; and

The procedures designed to ascertain whether the problem has been remediated.