

Nebraska Mental Health Centers **Psychology Internship Program**



Intern Manual

2013-2014

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Welcome to your Internship at NMHC

Thank you for your interest in Nebraska Mental Health Center's Psychology Internship Program (NMHC-PIP). NMHC-PIP offers an excellent opportunity to develop skills in an outpatient program. Intern applicants should have knowledge in general practice skills and abilities in applied psychology. Additionally, intern applicants should have an interest in working with a wide variety of presenting problems (depression, anxiety, substance abuse, parent-child problems etc.) and populations (child/adolescent, adults, couples, older adults, etc.)

NMHC –PIP is an APPIC accredited internship site. The internship program is designed as a 12-month learning experience with 40 to 50 hours per week for a total of at least 2,000 hours, beginning the last week in August and ending the first week of September the following year, unless there is a written agreement between the parties involved for alternative dates. NMHC and many licensing boards require interns to spend at least 50% of their time involved in direct, face-to-face service delivery.

Mission

The mission of the NMHC-PIP is to provide a comprehensive, organized and sequenced training experience. The mission is accomplished by training future generations of mental health professionals in an open learning environment, building upon individual values and strengths, instilling an understanding of personal infinite potential within each individual, inviting and embracing the inevitability of change, keeping abreast of the latest scientific discoveries, and striving for excellence in meeting the dynamic health care needs of a diverse society.

Director of Intern Training

The NMHC clinical director, Dr. Lee C. Zlomke, serves as the Director of Intern Training and is responsible for coordinating and directing all activities of the internship program and resources, including intern supervision, evaluation of program goals and activities, and documentation and maintenance of intern records.

In addition to Dr. Zlomke, two (2) additional licensed psychologists participate in the training committee processes, such as monitoring the progression of each intern toward training goals, determining appropriate policies and procedures, and in the recruitment and selection of future interns.

Training Model

The training model used to achieve the mission most closely fits the practitioner model, with the emphasis on clinical practice and service delivery, as well as supervised and supported learning by doing. Elements of the scientist-practitioner and scholarship-practitioner models are also evident, but less prominent in the training program.

Consistent with the practitioner model, interns are treated as professional colleagues who are expected to function as "primary" clinical therapists. They are guided and supported throughout their internship year by intensive supervision, mentoring and a planned sequence of relevant training activities. Interns are exposed to the role of psychologist as scientist-practitioner through their involvement researching literature to aid in treatment design and in the completion of at least one (1) scholarly project involving writing and/or presenting.

Program Goals and Objectives

- **Assessment:** to produce entry level psychologists who are (1) proficient in initial assessments/diagnostic interviewing skills, (2) have knowledge, skills and abilities to utilize psychological test results in their clinical work, (3) proficient in designing psychological evaluation batteries to address referral questions, being able to administer and interpret basic and specialized psychological test instruments, and (4) able to communicate orally and in writing professionally useful information gathered from assessments, including diagnosis, case conceptualization, test results, and targeted recommendations.
- **Treatment Intervention:** to produce entry level psychologists who (1) have the necessary knowledge and skills to develop appropriate, collaborative treatment plans, (2) provide effective psychotherapeutic interventions to diverse clients presenting with a range of significant psychological problems within an outpatient treatment setting, and (3) have the skills to function as a member of a treatment team while advocating for the best interests of their client.
- **Consultation/Supervision:** to prepare graduates with the necessary knowledge and skills for entry level professional roles of consultants and supervisors.
- **Diversity:** to produce graduates who demonstrate an awareness of and sensitivity in working professionally with diverse individuals, groups, and communities, and utilize that to provide effective interactions and interventions.
- **Scholar-Practitioner:** to produce graduates interested in and able to incorporate relevant research findings into their clinical practice and contribute to the literature/knowledge of the field.
- **Ethical and Legal Practice:** to produce graduates who demonstrate clear knowledge of relevant ethical and legal guidelines, laws, and codes as well as professional boundaries, and who routinely apply these in everyday clinical practice.
- **Self Awareness and Professionalism:** to produce entry level psychologists who are open to new learning about themselves within the professional practice of psychology, who demonstrate effective and meaningful professional working relationships, who are aware of and manage their emotional reactions/stressors, and who demonstrate increasing confidence and self-reliance as it is appropriate to their developing skill and knowledge.

The overarching goal is to prepare pre-doctoral candidates for the next step on their career path, whether the goal is licensure and professional practice, or utilizing a clinical foundation to launch into research or academia. To meet the program goals and objectives, interns will be supported to gain and demonstrate essential competencies prior to the completion of the internship year.

Core Competencies

- **Competencies in Psychological Intake, Evaluation and Assessment**

Interns will be able to independently and proficiently gather and organize clinical material and formulate accurate diagnoses, conceptualize problems within theoretical framework, and develop relevant treatment plans based on initial reviews. Interns will be able to evaluate dangerousness, suicide, abuse and other reporting concerns. Interns will demonstrate consideration of cultural/ethnic context in evaluating and assessing clients. Interns will be able to independently

and proficiently administer, interpret and synthesize data from psychological assessments and prepare written reports effectively and with high quality. Interns will engage in providing appropriate feedback to clients based on evaluation and assessment.

- **Competencies in Clinical Intervention**

Interns will be able to independently establish therapeutic alliances with a wide range of clients, communicate empathy, warmth and genuineness, and demonstrate understanding and skill in working with diverse clients (e.g., gender, ethnicity, disability, sexual orientation, class, and lifestyle). Interns will be able to apply theoretical/ conceptual understanding to interventions, identify therapeutic problems and work toward their resolution, and show flexibility and creativity in clinical work. Interns will demonstrate understanding and management of professional boundaries with clients and be able to provide appropriate help to clients under their care. Interns will demonstrate ability to terminate therapy appropriately and effectively. Interns will perform effectively in crisis situations.

- **Competency in Professional Roles and Behavior**

Interns will execute duties and responsibilities in a professional and conscientious manner and demonstrate appropriate professional demeanor. Interns will interact and communicate effectively with administrative staff and proficiently fulfill all required administrative duties. Interns will maintain cooperative working relationships with peers. Interns will engage in active and helpful participation in training and case conferences, and provide organized and quality presentations. Finally, interns will demonstrate responsible handling of ethical and legal issues in accordance with ethical standards of psychologists.

- **Competency in Self Examination and Development**

Interns will demonstrate openness to new learning about the professional practice of psychology and to continue to develop a professional identity. Interns will be able to engage in self-reflection and self-examination regarding clinical work. Interns will demonstrate awareness of personal issues which could interfere with professional roles and to manage/make use of personal reactions to clinical work. Interns will be able to examine and utilize personal reactions to multicultural differences. Finally, interns will be able to assess and address limits of their own skills and abilities, and develop increasing independence as their skills and knowledge increase over the internship year.

- **Competency in Supervision**

Interns will engage in supervision that is open and collaborative and take initiative in developing the content of supervisory sessions. Interns will demonstrate ability to use supervision feedback to improve clinical effectiveness and actively seek out clinical and professional consultation when appropriate. Interns will examine and demonstrate the ability to attend to multicultural issues in supervision. Finally, if intern is supervising others, demonstrate effectiveness as a supervisor.

Range of Training Opportunities

There is a combination of training opportunities during the internship year that provide a vast array of experiences for interns in order to sequentially and thoroughly train him or her for the delivery of psychological services beyond the level achieved as a practicum student. All interns must complete

training opportunities in general outpatient diagnostic interviewing, psychological/psychometric assessment and general outpatient psychotherapy. In addition, interns will experience training opportunities in children, adolescent and family specialization, substance abuse assessment, diagnosis and treatment, rural behavioral health practice, geriatric mental health, developmental disabilities, and domestic violence treatment. Other specialized training opportunities such as neuropsychology, forensic psychology, mental health administration and supervision are offered and available to all interns. The Director of Intern Training meets with each intern to devise a sequential training plan at the beginning of the program.

The objectives for each training opportunity are described below and are designed to work in conjunction with the overarching objectives described above:

General Psychological/Psychometric Assessment and Diagnostic Interviewing Objectives

- To enhance skills in utilizing and understanding various tests, test battery selection, and writing skills
- To gain an interactive grasp and appreciation for the assessment mentality which characterizes clinical psychology
- To develop an ability to utilize the information generated by testing for specific requested purposes
- To develop and enhance familiarity with a variety of assessment instruments, processes, and applications
- Applying assessment findings to assign accurate diagnoses

Interns will conduct and interpret a wide array of psychological assessments for all ages and the entire range of psychological presenting problems.

Outpatient Psychotherapy Objectives

- To develop and enhance skills in rapport building, psychotherapy, consultation, emergency intervention, and supervision
- To continue the development of the intern in the knowledge and application of theoretical, scientifically validated models of treatment
- To familiarize the psychological intern with the outpatient population and their needs
- To prepare the psychological intern for practice in an outpatient setting
- To develop attitudes, behaviors, and skills which enhance private practice activity/clinic activity

Under sequentially reduced supervision the interns will manage a patient caseload throughout the entirety of the internship. The patients will present with a wide array of psychological disorders.

Child, Adolescent and Family Specialization Objectives

- To develop an understanding of accurate diagnosis of children within the influence of a dynamic family structure
- To gain an appreciation for the complexities of psychological assessment with children
- To understand the intergenerational nature of family behavior and functioning
- To identify family life cycle issues that may be blocking healthy individual and family development
- To identify the sequence of behaviors in individual and family functioning and intervene for therapeutic change

Interns will involve themselves in behavioral interventions, psychotherapy, school involvement, and family therapeutic interventions through the Fremont pediatric office. Also, they will complete the administration of neuropsychological, psychoeducational and psychological assessments of children and adolescents.

Alcohol and Substance Abuse Assessment, Diagnosis and Treatment Objectives

- To develop an understanding of dual diagnosis patients and underlying pathology that serves to maintain substance abuse disorders
- To refine skills of group psychotherapy
- To learn effective strategies of intervention for substance abusing patients, which can be much different than other outpatient cases
- To practice teaching patients about the medical, psychological, and social implications of substance abuse

Interns will be able to participate in chemical dependency evaluations, drug/alcohol education classes, as well as outpatient and intensive outpatient substance abuse programs.

Rural Behavioral Health Practice Objectives

- To develop an appreciation for the diversity of culture in rural populations
- To gain an understanding of ethical principles of practice that may differ from traditional outpatient practice
- To produce aware and empathetic practitioners that will be devoted to improving the lives of the underserved populations of our nation
- To learn typical modifications of intervention that are common to rural practice
- To develop the ability to deliver psychological services in nontraditional settings

Interns will participate in the administration of mental health services including therapeutic interventions, psychological assessments, and community based interventions throughout the duration of the internship year.

Geriatric Mental Health Objectives

- To develop an understanding of the common concerns and symptoms of the geriatric population
- To gain an understanding of the specific needs of geriatric individuals and facilities and to plan effective strategies for intervention
- To further knowledge of degenerative brain diseases commonly found in long term care populations
- To learn more about psychotropic medication commonly used with the elderly

Interns will interact with geriatric individuals in all phases of life including short-term rehabilitation to long-term care. Interns will provide therapeutic interventions throughout the duration of the training year and will complete assessments to identify appropriate level of care, consultations, behavior plans, medication recommendations and staff development starting the third quarter of the internship.

Developmental Disabilities Objectives

- To learn about the symptoms, diagnosis and treatment of common developmental disorders

- To learn effective treatment plan strategies utilizing residential staff and professionals of other disciplines

Interns will provide services to a wide variety of ages of individuals with diverse developmental disabilities. Psychological services provided are coordinated with the rehabilitative services provided by local residential and day treatment service programs.

Domestic Violence Treatment Objectives

- To learn the history of domestic violence and the Duluth Model of Training and Intervention
- To refine skills of group psychotherapy and communicating psychoeducational information

Interns will lead psychoeducational groups through a program of domestic violence intervention based upon the Duluth Model. The Family Violence Council, a division of the Lincoln Medical Education Foundation, accredits the Domestic Violence Program of NMHC.

Additional Training Opportunities

Neuropsychology/Rehabilitation Objectives

Includes outpatient and inpatient assessments in all NMHC clinics in addition to long term care facilities, and area hospitals.

- To learn the intricacies of neuropsychological tests and psychometric properties and including their limitations
- To formulate an understanding of neuroanatomy, neuropathology, and neurotransmitter function
- To gain knowledge regarding the most common neuropsychological symptoms associated with traumatic brain injury, neurodegenerative disorders, neurotoxic exposure, developmental disorders and more

Forensic Psychology Objectives

Includes involvement with court ordered evaluations, child custody, commitment, parental assessments, competency to stand trial, mediation, risk assessments and other forensic services.

- To learn the use and psychometrics of assessment instruments of forensic psychology
- To gain an understanding of how to format evaluations to be used in the court system
- To begin a knowledge base of case law
- To learn fundamentals of expert witness testimony

Mental Health Administration Objectives

Includes involvement in the day-to-day operations, policy and procedure development, budget planning, program/service development, and staff oversight.

- To develop leadership skills
- To gain an understanding of management/clinical structures
- To develop skills in relation to employee development, enhancement, and management
- To gain a global understanding of how departments work together for the common good of the organization
- To prepare interns for the idiosyncrasies of administrating a mental health practice

- To engage in a scheduled and consistent community outreach program

Supervision Objectives

Includes involvement in both group and individual supervisory roles as their skills develop over the course of the internship year.

- To learn how to assess the developmental levels of supervisees and determination of what they require
- To further knowledge of transference and counter-transference issues
- To further leadership skills
- To understand and practice effective communication skills when problems arise with supervisees or within the supervisor/supervisee relationship

Research Objectives

In addition to the training described above, all interns will be required to complete at least one of the following: (1) identify and establish an advocacy relationship with a local agency servicing underserved populations, (2) present a poster at the Nebraska Psychological Association's Spring conference, (3) contribute to the NMHC newsletter, (4) make a publication or presentation at a community or professional event, or (5) provide training to professional group.

Training Resources

Lee Zlomke, Ph.D. is a licensed psychologist and serves as the NMHC Clinical Director, Director of Intern Training and one of the primary supervisors for the NMHC-PIP Program. He received his doctorate from the University of Nebraska-Lincoln. He has 25-plus years of experience in the provision of psychological services and providing professional leadership and training. Dr. Zlomke specializes in behavioral psychology and interventions for a wide array of clinical presentations and has specialty in child/family, developmental disabilities and forensic psychology.

Lisa Logsdon, Psy.D. is a licensed psychologist and serves as a primary supervisor. Dr. Logsdon completed her doctorate at California School of Professional Psychology at Alliant International University in San Francisco. She provides treatment and psychological evaluations at both the Lincoln and Fremont offices. She specializes in children and families, adolescents, autism spectrum disorders (particularly Asperger's Disorder), severe and persistent mental illness, and substance abuse treatment. Dr. Logsdon coordinates the services provided at the Fremont office.

Sean Thomas, Psy.D. is a licensed psychologist with several years of experience assessing and treating persons with sexual offending behaviors and dangerous aggressive behaviors. He has expertise and interests in neuropsychological assessment and treatment planning for persons with cognitive impairments. Dr. Thomas serves as a secondary supervisor with the NMHC-PIP.

Natalie Swift, Psy.D. is a provisionally licensed psychologist. She has expertise in developing helping relationships and specialized interventions with culturally diverse clients. Dr. Swift currently works with persons with developmental disabilities and co-occurring mental health challenges and forensic assessments of patient's with behavioral health disabilities.

Cindy Miller, Psy.D., is a provisionally licensed mental health practitioner (anticipated provisional licensed psychologist license in March 2013) who served her internship at NMHC during the 2011-2012 year and is in her first year in the NMHC residency program. She received her doctoral degree in clinical

psychology from Marshall University in Huntington, WV in December 2012. Her doctoral program emphasized training generalist practitioners equipped to deal with the unique challenges facing rural and under-served populations. Ms. Miller coordinates the services provided at the Beatrice office and also sees patients in the Lincoln and Fremont offices. Ms. Miller has previous specialized experience in the diagnosis and treatment of traumatic brain injury and other neurologically based disorders. She has a specific research interests related to traumatic brain injury, non-epileptic seizures, and other neurological impairments.

Jill Zlomke McPherson, MA, LIMHP, is a Licensed Independent Mental Health Practitioner and graduated with a Masters in Educational Psychology-Community Counseling from the University of Nebraska in 2005. She began her career as a therapist at NMHC before serving as Treatment Coordinator at Excelsior Youth Centers in Aurora, Colorado and later Director of Outpatient Therapy for Pediatric Psychology Associates in Beatrice. Her areas of specialization include cognitive behavioral therapy, interpersonal relationships and healthy communications, PTSD, and general mental health services surrounding issues of depression, anxiety, and adjustment disorders.

Additional Training Resources

The internship program utilizes NMHC's Practice Administrator to ensure all office, information technology, and other administrative responsibilities of the program are met. Additionally, NMHC's Quality Assurance/Credentialing Manager assists in assuring that program documentation and records' requirements are met, and monitoring clinical documentation, patient satisfaction and NMHC QA data

To increase the diversity of professional theoretical orientations and experience, the internship program also employs adjunct faculty to lead didactic interactions and increase the intern's exposure to the complex professional interactions occurring as a full-time clinical psychologist (e.g., medical doctors).

Supervision

The Training Director and Primary Supervisors provide full-time support and supervision. They, as well as adjunct supervisors, are also available on-site for consultation as needed as well as for emergency situations. Interns also can contact supervisors after hours, as needed by the situation. Supervisors assume full legal and ethical responsibility for the entirety of the interns' services.

Interns receive two (2) hours of scheduled, face-to-face individual supervision weekly from their primary supervisors. Additionally, much of the inpatient work is accomplished alongside a supervisor, providing daily contact and overall clinical responsibility for the interns' cases. Such activities as briefing and debriefing therapy, team meetings, treatment and discharge planning conferences provide rich learning and supervisory experiences.

Additionally, interns are provided with one (1) hour of intern group supervision/consultation and one (1) hour of clinical intervention supervision/consultation each week.

Supervision includes discussion of crisis management, ethics, best practices, development as a psychologist, and case consultation. Supervision will be flexible and oriented around the learning interests of the individual intern while ensuring that all basic professional competencies are achieved. The focus of the supervision is to review intern's client caseload, address concerns intern may have regarding client or their work with client, and to offer suggestions and recommendations to the intern. Interns are asked at the onset of internship what areas they would like to strengthen and learn more about and this is incorporated into the supervision.

Didactic Training Activities

Structured training is provided weekly during two (2) sixty minute scheduled trainings: (1) didactic training and (2) psychometric testing supervision/consultation.

Didactic training covers a broad spectrum of topics and serves to refresh interns on already familiar topics of clinical practice, provide new and more in-depth knowledge of material in the intern's repertoire and to furnish important information that is essential to the practice of psychology, but not taught in the traditional graduate program. This material includes understanding managed care, business administration of clinical practice, multicultural issues, functional behavioral assessment, ethical consideration, patient and professional advocacy, etc.

Psychometric testing supervision/consultation covers a broad range of instruments, including neuropsych, cognitive, substance abuse, objective, projective, behavioral, development and adaptive instruments. The instruments will be reviewed at a pace to match the knowledge base and experience of interns. In addition to instrument review, the schedule will include time allotted for review of testing data as needed.

Program Locations

NMHC is a multi-site and multidisciplinary organization. The NMHC clinics (Lincoln, Beatrice and Fremont) are utilized for the internship program that covers eastern and southeastern Nebraska. In addition, the interns will provide services in hospitals, long-term and memory care facilities, residential treatment facilities and day treatment programs. Services are provided under the direction of the NMHC Clinical Director and Director of Intern Training.

A list of long-term and memory care facilities affiliated with NMHC include, but are limited to:

Lancaster Manor - Lincoln, NE	Legacy – Lincoln, NE
The Ambassador - Lincoln, NE	Milder Manor – Lincoln, NE
Wilber Care Center - Wilber, NE	Savannah Pines – Lincoln, NE
Beatrice Manor - Beatrice, NE	Gramercy – Lincoln, NE
Homestead House - Beatrice, NE	Tabitha - Lincoln, NE
Good Samaritan- Beatrice, NE	Tabitha Long Term Care –Crete, NE

Additionally, interns provide services for the following residential treatment facilities and day treatment programs:

Individualized Life Choices (ILC) Residential & Day Treatment Services – Lincoln, NE
Developmental Services of Nebraska (DSN) Residential Facilities – Lincoln, NE
Labor Solutions Day Services – Lincoln, NE

Prerequisites

Applicants must be from a clinical, counseling or school psychology program, hold a Master's degree (or can demonstrate equivalency if from a program that does not confer them), and complete a full application for psychology internship on the APPIC website (APPIC.org) Applicants, like all of our employees, also must pass a criminal background check as a condition of beginning the internship. Minimum requirements for applicants to be considered:

- Have a solid clinical foundation in their graduate training
- Have demonstrated experience and interest in community based general outpatient practice

- Have completed all the doctoral class course work
- Have dissertation proposal defended
- Have provided at least 400 hours of clinical work
- Hold a master's degree or equivalent (with coursework/training content primarily in therapeutic mental health from a Council of Higher Education Accreditation approved institution)
- Be licensed as a Provisionally Licensed Mental Health Practitioner or Licensed Mental Health Practitioner and psychological assistant with the State of Nebraska.
- Graduation from an APA-approved program is approved

How to Apply

Interns interested in the NMHC-PIP should use the APPIC application form (AAPI) that can be directly obtained through <http://www.appic.org>. The NMHC-PIP APPIC program code 178111.

There are no additional forms or attachments required for application. All materials required on the AAPI, including three letters of recommendation, graduate school transcripts, etc., are to be submitted through the AAPI online. Deadline for applications is **December 1st**.

NMHC-PIP abides by all rules and regulations set forth by APPIC in regard to application for internship as well as the entire conduct of the internship program. Please be aware that all training time credited to internship is post-practicum.

Basic Requirements of the Internship Program

NMHC-PIC requires the interns each internship year to have 50% direct face-to-face clinical service activity. This must equal 1000 hours of direct patient contact at the end of the internship year. Over the course of the internship, interns function in an increasingly independent manner and by the end of the internship, are functioning at a full caseload capacity.

Additionally, interns are required to attend all supervisions, trainings and professional development seminars that are provided by NMHC, complete in a timely fashion psychological testing and assessments with their supervisors, comply with NMHC policies and procedures, provide all clinical services, including accurate and comprehensive clinical record for their patients, and maintain professional behaviors within APA ethical guidelines.

Rights and Responsibilities of Interns

Intern's Rights

1. To expect due process.
2. To expect ongoing feedback regarding performance
3. To expect early identification of deficiencies.
4. To expect cooperative efforts to develop a Deficiency Correction Plan if needed.
5. To consult with the Director of Intern Training or the sponsoring academic program.
6. To expect availability of supervisors and the Director of Intern Training.
7. To expect a clear description of responsibilities, quantitative expectations of performance, and a hierarchy of authority.
8. To expect a clear identification of possible reasons for disciplinary action.
9. To have a representative of his/her sponsoring academic program participate in hearing or appeals meetings concerning intern problematic conduct.

10. To expect an impartial investigation of any reports of rules violation.
11. To have the right to participate at any deliberative forum regarding possible disciplinary action.
12. To expect clear policy regarding grievance procedures
13. To initiate grievances about training or supervision.
14. To expect expeditious efforts at resolution of grievances.
15. The right to be treated with professional respect, that recognizes the training and experience the intern brings with him/her.
16. The right to appeal one time to any disciplinary decisions made upon the intern.

Intern's Responsibilities

1. To abide by the APA Code of Ethics.
2. To demonstrate personal maturity.
3. To become conversant with governing rules, policies and procedures.
4. To become conversant with due process procedure.
5. To participate in the development of a Deficiency Correction Plan if one were needed.
6. To abide by lawful program, office, department, county, and state regulations.
7. To follow grievance procedures if initiated.
8. The responsibility to read, understand and clarify, if necessary, the statement of rights and responsibilities. It is assumed that these responsibilities will be exercised and their implementation is viewed as a function of competence.
9. The responsibility to meet training expectations by developing competency in assessment skills, psychotherapy skills, outreach and consultation skills, and other areas as delineated in the evaluation forms.
10. The responsibility to actively participate in the training, clinical services and the overall activities of the Mental Health Service.
11. The responsibility to give constructive feedback that evaluates the training experience or other experiences at the Mental Health Service.
12. The responsibility to inform the Director of Intern Training of any significant concerns the intern may have regarding the Internship Program.

The Evaluation Process

Formal evaluations will occur quarterly with the first provided in mid-December, for a total of four evaluations during the internship year. Each intern will have two (2) supervisors that split the intern's caseload and quarterly evaluations. It is the responsibility of the supervisors to provide ongoing evaluation and feedback to all of their interns. Both supervisors consult to arrive at a final evaluation of each intern at the end of the internship year. Other supervisors or site directors that spent a significant amount of time with any intern will be expected to submit an evaluation at the discretion of the training director. The intern will meet individually with the primary supervisor to review his or her evaluations. This process is designed to provide both evaluative feedback and suggestions and recommendations for improvement. Assuming that there is no aspect of the intern's performance that has been rated "Needs Substantial Improvement", both supervisors and the intern sign the evaluation indicating that both parties have reviewed it. A copy will be sent to the training director for review. If necessary, the training director will schedule a second meeting with each intern to integrate and discuss the intern's progress through the program noting areas of strength and skills the intern could improve. It is also at this time the intern can discuss their perceptions and any concerns on their experience within the program and to call attention to any problems felt with their supervisors. The training director and intern may modify the intern's program to fulfill the needs of the intern or of the internship program on a case by case basis.

Affirmative Action Policies

NMHC takes affirmative action to assure fair and equitable treatment of all employees and applicants for training without regard to race, color, religion, national origin, age, gender, physical disability, or political affiliation. Affirmative action policies address, but are not limited to: recruitment, training, promotion, and termination.

Diversity Statement

NMHC is sensitive and committed to the importance of diversity and the richness of human diversity. Services and training focus on respectful and non-prejudicial treatment to people of all backgrounds. It is of utmost importance that NMHC promote the value and strength of diversity to all employees, applicants, trainees, and individuals served. As a clinical and training facility, NMHC is motivated to addressing issues of prejudice and discrimination and the influence of those issues on the lives of the individuals that are encountered in practice and training.

Benefits and Stipends

All interns are paid \$24,000 and are provided with malpractice insurance, employee assistance program benefits, and six (6) paid holidays, 8 vacation/personal leave and negotiable paid bereavement leave.

Grievance and Due Process

Communication with Intern's Sponsoring Academic Program

A copy of all evaluations will be sent to the intern's sponsoring academic program upon completion including notice if remediation of the intern's performance is needed. If the intern is not able to comply with the expectations concerning remediation within the specified time frame, the sponsoring academic program will be contacted by phone and by formal letter inviting their participation in any further course of action to be taken. Further course of action is described below in the "Due Process for Responding to Problematic Conduct" section.

Definition of Problematic Conduct

Ultimately, it becomes a matter of professional judgment as to when an intern's behavior is considered to be problematic conduct. However, problems typically become identified as so when they include one or more of the following characteristics.

- 1) Problematic Conduct is defined as any area of deficiency rated as "Needs Substantial Improvement", indicated by a score of "1" on the supervisor's evaluation.
- 2) Any behavior in violation of the NMHC - PIP Policies and Procedures Handbook.
- 3) An inability/unwillingness or failure to continuously grow, change, and make progress toward acquiring professional skills in order to reach an acceptable level of competencies in all areas including but not limited to provision of quality services, timeliness, professionalism, community outreach, advocacy, interacting with other professionals, and interacting with individuals from culturally diverse backgrounds.
- 4) An inability to control stress or other personal factors that conflict with the intern's ability to reach minimal expectations including but not limited to provision of quality services, timeliness,

professionalism, community outreach, advocacy, interacting with other professionals, and interacting with individuals from culturally diverse backgrounds.

- 5) Repeated negative reports from intern's patients for poor performance/conduct.
- 6) The quality of services is considered not helpful or detrimental to patients.

If an intern engages in behaviors that are in clear violation of the American Psychological Association and Nebraska Psychological Association Code of Ethics or are illegal in nature, the Director of Intern Training will decide determine the necessity to invoke Due Process or may terminate the intern.

Due Process for Responding to Problematic Conduct

Notice

In addition to supervisor quarterly evaluations indicating a deficiency on the intern's behalf, any staff member may file an "Allegation of Problematic Conduct" form when an intern's behavior is thought to be in violation of the six criteria above describing Problematic Conduct.

- If a non-supervising staff member wishes to file an allegation, they must obtain the above-mentioned form from the Director of Intern Training and return it when complete. The Director of Intern Training must schedule a meeting with the intern and their supervisor(s) to determine if the issue does not warrant further attention or if due process is required.
- If a supervisor or the Director of Intern Training wishes to file an Allegation of Problematic Conduct, they may do so at any time. In this case, the same process is followed as when a non-supervising staff files a complaint.

The individual filing the complaint has the right to be debriefed on the findings of the committee concerning the allegations. The corrective actions, if any, shall not be shared with the individual filing the complaint if that person is a non-supervising staff member.

Meetings and Hearing

If remediation is required for identified problematic conduct on the supervisor's evaluations or an Allegation of Problematic Conduct, committee meeting will be scheduled within two (2) weeks of the problematic conduct being formally documented. The committee will be composed of the intern, supervisors, and Director of Intern Training. The purpose of the meeting will be to (1) explicitly identify the problematic behavior and (2) develop a written document called the "Practice Improvement Plan" that will clearly delineate the evidence of problematic conduct, goals and objectives of the improvement plan, and a timeframe in which goals and objectives are expected to be obtained. The improvement plan will be signed and dated by the intern and the Director of Intern Training.

At the end of the timeframe outlined in the improvement plan, the following occurs:

- A hearing will be scheduled determine if the intern has met the expectations laid forth in the improvement plan, or:
- The committee may elect at this time that no further action is needed.

If a hearing is to ensue, it will be scheduled no longer than eight weeks after the date the improvement plan was signed.

At the hearing a decision must be made to determine further action based upon the intern's rectification of the problem or failure to progress. This decision is made with the combined effort of the Director of Intern Training, supervisors and intern. If inadequate progress is found a representative of the intern's sponsoring academic program can be brought into the improvement process. If that representative is unable to make a physical appearance, he or she can provide input through teleconferencing.

A decision must be made during the hearing and will follow one or more of the following courses of action:

- 1.) A decision to elect for no further action may be made if the intern has met all expectations laid forth in the "Practice Improvement Plan".
- 2.) A recommendation to lengthen the time the intern has been given to rectify the problematic conduct through the Practice Improvement Plan.
- 3.) Recommend the intern take a leave of absence from the program in which the length of the absence can be up to three months (extending the allowed time for completion of the Internship Program to 15 months).
- 4.) Recommend increased supervision either with the same or other supervisors.
- 5.) Recommend the intern begin personal therapy in an agency outside of the Internship Program with a clear statement as to how contacts will be used for the intern evaluation process (i.e., attendance to sessions). To ensure the intern is prepared to return to duty, the opinion of a neutral psychologist who is not employed at NMHC-PIP and is not the treating psychologist for the intern may be employed.
- 6.) Dismissal of the intern from the program. The intern may reapply following usual APPIC policy.
- 7.) Other supports as appropriate, by the Director on Intern Training.

The decision(s) made at the hearing will be documented and signed and dated by the intern and the Director of Intern Training.

As many meetings as necessary may be scheduled by the Director of Intern Training to further evaluate the intern's progress in addressing, changing, and/or otherwise improving problematic conduct. However, the intern must complete the Internship Program within the specified (extended) time frame of 15 months. The only exception can be made if the Director of Intern Training agrees to further extend the allowable time for completion of the program upon his/her opinion of the situation. The maximum allowable time for completion of the Internship Program is 24 months, following APPIC and APA internship guidelines.

Intern Appeal

- 1.) An intern may choose to appeal any decision made by the members of the hearing. If this decision is made, it must be presented, in writing, to the Director of Intern Training no longer than 10 days following the date of the hearing.

- 2.) A second hearing must be scheduled and follow within five (5) days of receipt of the written appeal. The second hearing will be composed of two (2) staff members chosen by the intern (one can be from the sponsoring academic program), two (2) staff members chosen by the Director of Intern Training and the Director of Intern Training.
- 3.) The intern reserves the right to present all evidence in his/her case to the committee.
- 4.) Likewise, the supervisor or staff member filing the initial complaint will present their evidence. A decision will be made at the close of the hearing by popular vote to either uphold or abdicate the original decision.
- 5.) Within two (2) days of this decision, the Director of Intern Training may either accept the committee's decision, or provide an alternative solution. This solution must be accepted and signed, with revisions if necessary, by all members of the committee before being put into action.
- 6.) Once a final decision has been made, the intern, sponsoring university, and other appropriate individuals are informed in writing of the action taken.

Due Process for Intern Grievance of Supervision or Training

Notice

If the intern perceives any problems with their supervision, training, or any other aspect of the internship experience, they may file a grievance complaint. Such complaints should be made formal by submission of a "Notice of Intern Grievance" document provided by the Director of Intern Training. Contents of the document should include the specific reasons for the grievance and plans for remediation as seen by the intern. The form should be completed in an expedient manner and submitted to the Director of Intern Training. If the Director of Intern Training is the focus of the complaint, the document should be submitted to the intern's supervisor. Within one (1) week of submission, the Director of Intern Training, supervisor and one other psychologist staff member, chosen by the intern, should be notified of the notice of grievance. Notification should include the full report of the intern as well as a date for hearing within one (1) week. The intern's sponsoring academic program will not be allowed formal participation of due process procedures for grievances under this section.

Hearing

A hearing shall be commenced by a committee composed of the Director of Intern Training, supervisor of the intern, and a third staff psychologist chosen by the intern. By close of the hearing, all members must decide upon and agree to a plan for remediation. The plan shall be provided to the intern in writing within 24 hours and discussed with him or her by the Director of Intern Training. The document must be signed and dated by both parties. An original will be placed in the intern's file and a copy provided to the intern. If however, the intern rejects the committee's decisions, an appeal may be submitted following the guidelines below. If remediation is accepted, the Director of Intern Training and intern shall meet once per month for the next three (3) months at a scheduled time to assure the plan for remediation is being adhered to. If problems are still apparent, the intern should file a second notification of grievance and/or can use the resources provided by ASARC of the Association of Psychology Postdoctoral and Internship Centers.

Appeal

If the intern wishes to file an appeal, the Director of Intern Training must be notified immediately. A formal written document must be filed with the Director of Intern Training and should include specific aspects of the plans for remediation that the intern rejects as well as any items the intern feels have been left out. In addition, the document must include an amended plan for remediation as seen fit by the intern. A second hearing shall be scheduled within one (1) week from the date the appeal is submitted. The second hearing shall include the members of the original committee in addition to the intern. A final decision must be made by conclusion of the hearing and shall take one of the following courses of action:

- 1.) Remediation as amended by the intern shall be accepted and instituted.
- 2.) Remediation shall be amended as seen appropriate by the committee, accepted for final approval, and instituted.
- 3.) Remediation as decided upon at the first hearing will be sustained.

Final remediation shall be provided in writing on the same day and signed by the Director of Intern Training and intern. The original copy should be placed in the intern's file and a second copy provided directly to the intern. If however, the intern still rejects the committee's decisions, he or she will be offered elimination from the internship program. If accepted, the intern's sponsoring academic program will be promptly and officially notified.

In the event the focus of the intern's grievance is the current Director of Intern Training, the Lead Supervisor and NMHC Executive Officer will assume the role of the Director of Intern Training in the processes delineated above.

B. Clinical Interventions	circle one
1. Established rapport and therapeutic alliance with clients.	1 2 3 4 5
2. Communicates and demonstrates empathy, warmth, and genuineness with clients.	1 2 3 4 5
3. Provides appropriate help to clients under their care.	1 2 3 4 5
4. Can be relied on to perform effectively in crisis situations.	1 2 3 4 5
5. Applies theoretical/conceptual understanding to interventions.	1 2 3 4 5
6. Understands and manages professional boundaries with clients.	1 2 3 4 5
7. Identifies therapeutic problems and works toward their resolution	1 2 3 4 5
8. Shows flexibility and creativity in clinical work.	1 2 3 4 5
9. Able to terminate therapy appropriately and effectively.	1 2 3 4 5
10. Demonstrates understanding and skill in working with diverse clients (e. g., gender, ethnicity, religion, disability, sexual orientation, class, and lifestyle).	1 2 3 4 5
Overall Rating	1 2 3 4 5

Additional comments optional, comments on scores below 3 required

C. Professional Roles and Behaviors	Circle one
1. Executes duties and responsibilities in a professional and conscientious manner.	1 2 3 4 5
2. Demonstrates appropriate professional demeanor.	1 2 3 4 5
3. Fulfills required administrative duties (progress notes, charting, reports, etc.).	1 2 3 4 5
4. Interacts and communicates effectively with administrative staff.	1 2 3 4 5
5. Maintains cooperative working relationships with peer.	1 2 3 4 5
6. Active and helpful participation in training and case conferences.	1 2 3 4 5
7. Organization and quality of presentations in case conferences and training.	1 2 3 4 5
8. Shows awareness of and sensitivity to multicultural issues in professional roles.	1 2 3 4 5
9. Demonstrates responsible handling of ethical and legal issues in accordance with ethical standards of psychologists.	1 2 3 4 5
Overall Rating	1 2 3 4 5

Additional comments optional, comments on scores below 3 required.

D. Self Examination and Development	Circle one
1. Motivated and takes initiative to learn and grow as a clinician.	1 2 3 4 5
2. Engages in self-reflection & self-examination regarding clinical work.	1 2 3 4 5
3. Recognizes limits of own skills and capabilities.	1 2 3 4 5
4. Effectively manages demands of work and stress.	1 2 3 4 5
5. Aware of personal issues which could interfere with professional roles.	1 2 3 4 5
6. Manages/makes use of personal reactions to clinical work (counter transference).	1 2 3 4 5
7. Examines and utilizes personal reactions to multicultural differences.	1 2 3 4 5
8. Continues to develop a professional identity.	1 2 3 4 5
Overall Rating	1 2 3 4 5

Additional comments optional, comments on scores below 3 required.

E. Supervision	Circle one
1. Approaches supervision in an open and collaborative manner.	1 2 3 4 5
2. Takes initiative in developing the content of supervisory sessions.	1 2 3 4 5
3. Actively seeks out clinical and professional consultation when appropriate.	1 2 3 4 5
4. Uses supervision feedback to improve clinical effectiveness.	1 2 3 4 5
5. Examines and attends to multicultural issues in supervision.	1 2 3 4 5
6. Effectiveness of intern as a supervisor (if intern is supervising others).	1 2 3 4 5
Overall Rating	1 2 3 4 5

Additional comments optional, comments on scores below 3 required.

F. Overall Evaluation and Comment
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1. **Strengths:** What strengths does the intern bring to their work? Where has the intern particularly demonstrated growth during this course of training?

2. **Areas for Improvement:** What areas need improvement and development? Note any specific concerns about the student progressing to the next level of training. Include attachment if necessary.

3. **Goals for Next Stage of Training:** Please note goals for intern for the next stage of clinical training.

4. **Preparation:** Please indicate your view of the intern's *academic preparation* to successfully complete the duties of this internship (*circle one number*).

1	2	3	4	5
Very Poor	Poor	Adequate	Very Good	Excellent

Please note areas where intern was well prepared by the academic program.

Please address ways the academic program could better prepare students for your training program.

5. **Progress:** Please rate intern's overall improvement during this evaluation period. (circle one number)

1	2	3	4	5
Worsened	Stayed the same	Somewhat improved	Very improved	Greatly improved

6. **SUPERVISOR OVERALL EVALUATION:** Based on the intern's level of training and the above items, please evaluate the intern's overall professional competence during this period?

Please circle one number below:

1	2	3	4	5
Significantly	Below	Meets	Above	Significantly
Below	Expected	Expected	Expected	Above
Expected	Competency	Competency	Competency	Expected
Competency				Competency

PLEASE SIGN:

Primary Supervisor: _____ **Signature:** _____ **Date:** _____

Secondary Supervisor: _____ **Signature:** _____ **Date:** _____

Intern: _____ **Signature:** _____ **Date:** _____

Nebraska Mental Health Centers

SUPERVISION/PROGRAM EVALUATION

Interns: Please do not print your name on this form Date:

It is the goal of this internship program to provide the intern with the knowledge and skills necessary to practice on their own. With this in mind, this evaluation assesses the training opportunities and supervision provided to reach this goal. Please complete this evaluation of the supervision provided at NMHC, circling the most appropriate response. Your closing comments regarding NMHC’s Internship Program are also appreciated. Thank you!

EVALUATION SCALE: Please use the following response scale for this evaluation: *

1	2	3	4	5
Inadequately for Training	Improvement Recommended	Meets Basic Training	Provides Advanced Training	Not Applicable

General Professional Instruction

1. The supervision consists of good knowledge of ethical principles and consistently teaches them whenever a learning experience is available.	1 2 3 4 5
2. The supervision provides adequate time and effective supervision whenever needed.	1 2 3 4 5
3. The supervisor interacts professionally and appropriately with treatment teams, peers and students.	1 2 3 4 5
4. The supervision takes responsibility for key patient care tasks, ensuring interns are able to learn from each case, but not over burdening them with an inappropriate amount of responsibility.	1 2 3 4 5
5. The supervision uses and supports learning of positive coping strategies to manage personal and professional stressors to maintain professional functioning, so that quality patient care continues uninterrupted	1 2 3 4 5
6. The supervision maintains and supports learning of sensitivity to cultural and other individual differences.	1 2 3 4 5
7. The supervision supports learning on how to collect relevant interview data promptly, appropriately evaluating immediate concerns such as suicidality and homicidality as well as how to create plans regarding patient safety issues and confidentiality.	1 2 3 4 5

Instruction in Psychological Assessment

1. The supervision supports learning on how to promptly and proficiently choose, administer and score commonly used psychological tests	1 2 3 4 5
2. The supervision supports learning of writing a well-organized psychological report , answering the referral question clearly and providing the referral source with specific recommendations for patient care.	1 2 3 4 5

Competence in Psychotherapeutic Interventions

1. The supervision supports development of case conceptualization , including both transference issues and dysfunctional cognitions, that draws on theoretical and research knowledge.	1 2 3 4 5
2. The supervision supports learning on how to formulate appropriate therapeutic treatment goals in collaboration with the patient.	1 2 3 4 5
3. The supervision supports learning of interventions that are well-timed, effective and consistent with empirically supported treatments.	1 2 3 4 5

Competence in Group Psychotherapy Skills

1.. The supervision supports learning of effective coping with group therapy challenges and complications such as conflict, scapegoating, premature termination and challenges to leadership.	1 2 3 4 5
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Competence in Professional Consultation

1. The supervision supports learning of best practices in consultation with colleagues, team member, other professionals and staff.	1 2 3 4 5
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Scholarly and Research Competencies

1. The supervision supports learning of creating professional/technical writing in regard to treatment cases, research, and scholarly works.	1 2 3 4 5
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List and explain any supervision recommendations or inadequacies that were indicated.

Describe the most beneficial experiences of this internship.

Describe what aspects of this internship were not useful or that you would like to see changed.

Describe what you liked most about this supervision.

Describe what characteristics of this supervision were not useful in furthering learning your internship.