Stanford University
Counseling and Psychological Services

Mary Mendoza Newman, Ph.D., Senior Assistant Director for Training
Table of Contents

I. Counseling & Psychological Services at Vaden Health Center
   1 Primary Mission of Student Affairs
   1 Primary Mission of Vaden Student Health Center
   1 Primary Mission of CAPS
   2 CAPS Staff
   3 Accreditation

II. The Psychology Internship Training Program
   3 Training Philosophy
   4 Profession Wide Competencies
   5 Overview of Training Year
      5 Orientation
      5 Fall
      6 Winter
      6 Spring
      6 Summer

III. Training Program Activities
   6 Weekly Activities
   6 Direct Service
   7 Telehealth
   7 Access Coordination
   7 Initial Assessments
   8 Referrals
   8 Wellness Workshops
   8 On-Call
   8 Crisis Intervention
   8 Outreach
   9 Consultation
   9 Supervision
   9 Specialty Rotations
   9 Didactic Seminars
   10 Case Conference
   10 Outreach and Social Justice Seminar
   10 Diversity Seminar
   10 Intern Group Meeting
   10 Professional Development Seminar
   10 Team Meeting
   11 Friday Staff Meeting
   11 Sample Weekly Schedule

IV. Operations in the Office
   11 Managing Schedules
   12 Request for Leave
   12 Calling in Sick
   12 Security and Privacy Policies
Mailboxes and Messages
Phones
Computer
Panic Buttons
Webcams
Recycling
Office Supplies

V. Mechanics of Therapy Sessions
Scheduling Clients
Electronic Charts
Session in Progress
Starting Sessions
Treatment Information and Disclosures Statement
Referrals

VI. Policies and Procedures
Dress Code
Training Staff
Training Committee
Supervisors Meeting
Supervision Agreement
Supervision
Responsibilities of Supervisors
Responsibilities of Supervisees
Evaluation and Feedback
Professional Courtesy
Cell Phone Courtesy
Fragrance Courtesy
Bicycles
Self-Disclosure
Diversity
Conscious Clause
Ethical and Professional Conduct
Social Media Guidelines
Student Affairs Communication Protocol
Outside Employment Policy
Due Process Procedures
Self-care
The Help Center
Completion of Internship
I. Counseling and Psychological Services at Vaden Student Health Center

Primary Mission for Student Affairs (SA)

Stanford’s commitment to learning is inherently linked to every aspect of student life. Drawing upon a community passionate to meet students’ needs in an individualized way, the extraordinary resources at Stanford University provide the support, services, and tools in order to create a fulfilling college experience. CAPS is an essential resource to the development of student life.

CAPS is an integral part of Vaden Student Health Center at Stanford University, which functions under the administration of the Student Affairs (SA). CAPS primary function is the provision of mental health services to the student community. In addition, to its collaborative efforts in health care services within Vaden Student Health Center, CAPS provides psychological consultation to and collaborates with staff in all departments within Student Affairs, faculty, parents, and off campus providers. CAPS is an essential resource to the development of student life. Therefore, the Internship Training Program is a valued component of CAPS, Vaden Student Health Center, Student Affairs, and the campus at large.

The department of Student Affairs is a diverse organization of professionals dedicated to the ethical, cognitive, psychological, and social development of its students in collaboration with faculty to support of the university’s educational and research mission. The three guiding principles of Student Affairs are to Educate, Serve, and Learn.

Primary Mission of Vaden Student Health Center

The mission of Vaden Student Health Center upholds the mission of the University and the SA office of creating a caring, supportive, educational environment for students. Vaden works in partnership with students to obtain optimal health and promote well-being while honoring the rich diversity of its student population. Vaden offers easy access to the highest quality and compassionate medical, psychological counseling, and health education. Vaden assists students in a respectful manner to make informed choices about their health care and lifestyle. Vaden upholds strong ethics, confidentiality and privacy, and encourages feedback to best meet student’s needs.

Primary Mission of CAPS

The primary mission of CAPS is to support the University’s academic mission by providing comprehensive mental health services and programs to a diverse student body. CAPS promotes the academic, personal, civic and professional growth and development
of Stanford students. CAPS is committed to providing high quality, confidential, care for students who experience a range of personal, academic, and relationship problems common to college populations. Also, we provide assessment and referrals to students with more acute or chronic psychological problems. In addition to direct clinical services to meet the mental health needs of students, CAPS engages in educational efforts focusing on prevention and skill building through outreach and programming and through the establishment of collaborative liaison relationships to Student Affairs.

**CAPS Staff**

Counseling and Psychological Services is part of the Stanford University's Division of Student Affairs. CAPS staff includes psychiatrists, psychologists, clinical social workers, and marriage and family therapists. All senior clinical staff are licensed in the state of California. CAPS also employs two support staff members who are responsible for assisting with the organization and administrative operation of the center. In addition to the senior or CAPS staff includes three psychology interns, two postdoctoral fellows, and three psychiatry residents.

<table>
<thead>
<tr>
<th><strong>Leadership Team</strong></th>
<th><strong>E-Mail</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Bina Patel, MD</td>
<td><a href="mailto:bppatel@stanford.edu">bppatel@stanford.edu</a></td>
</tr>
<tr>
<td>Amy Wilkinson, LCSW</td>
<td><a href="mailto:amyw11@stanford.edu">amyw11@stanford.edu</a></td>
</tr>
<tr>
<td>Mary Mendoza-Newman, Ph.D.</td>
<td><a href="mailto:marymn@stanford.edu">marymn@stanford.edu</a></td>
</tr>
<tr>
<td>Julie Tinklenberg, MD</td>
<td><a href="mailto:juliet1@stanford.edu">juliet1@stanford.edu</a></td>
</tr>
<tr>
<td>Oliver Lin, Ph.D.</td>
<td><a href="mailto:oliverl@stanford.edu">oliverl@stanford.edu</a></td>
</tr>
<tr>
<td>Kevin Lee, MD</td>
<td><a href="mailto:kevinbrianlee@stanford.edu">kevinbrianlee@stanford.edu</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Senior Clinical Staff</strong></th>
<th><strong>E-Mail</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Ron Albucher, MD</td>
<td><a href="mailto:albucher@stanford.edu">albucher@stanford.edu</a></td>
</tr>
<tr>
<td>James Bae, MD</td>
<td><a href="mailto:jamesbae@stanford.edu">jamesbae@stanford.edu</a></td>
</tr>
<tr>
<td>Laurel Banks, Psy.D.</td>
<td><a href="mailto:laurelz@stanford.edu">laurelz@stanford.edu</a></td>
</tr>
<tr>
<td>Emily Caruthers, LMFT</td>
<td><a href="mailto:ecaruth@stanford.edu">ecaruth@stanford.edu</a></td>
</tr>
<tr>
<td>Riley Cropper, Ph.D.</td>
<td><a href="mailto:rcropper@stanford.edu">rcropper@stanford.edu</a></td>
</tr>
<tr>
<td>Enas Dakwar, Psy.D.</td>
<td><a href="mailto:edakwar@stanford.edu">edakwar@stanford.edu</a></td>
</tr>
<tr>
<td>Ariana Davidson, LCSW</td>
<td><a href="mailto:ariana2@stanford.edu">ariana2@stanford.edu</a></td>
</tr>
<tr>
<td>Tom Ellis, Psy.D.</td>
<td><a href="mailto:tsellis@stanford.edu">tsellis@stanford.edu</a></td>
</tr>
<tr>
<td>Isela Garcia-White, LCSW</td>
<td><a href="mailto:iselaq@stanford.edu">iselaq@stanford.edu</a></td>
</tr>
<tr>
<td>Michael Haberecht, M.D.</td>
<td><a href="mailto:mhaber1@stanford.edu">mhaber1@stanford.edu</a></td>
</tr>
<tr>
<td>Helen Hsu, Psy.D.</td>
<td><a href="mailto:helenhsu@stanford.edu">helenhsu@stanford.edu</a></td>
</tr>
<tr>
<td>Tovah Krokoszynski, Psy.D.</td>
<td><a href="mailto:tovah@stanford.edu">tovah@stanford.edu</a></td>
</tr>
<tr>
<td>Sheila Levin, LMFT</td>
<td><a href="mailto:shlevin@stanford.edu">shlevin@stanford.edu</a></td>
</tr>
<tr>
<td>Sophia Lu, LMFT</td>
<td><a href="mailto:sophhlu@stanford.edu">sophhlu@stanford.edu</a></td>
</tr>
<tr>
<td>Jennifer Maldonado, LCSW</td>
<td><a href="mailto:jennifer.maldonado@stanford.edu">jennifer.maldonado@stanford.edu</a></td>
</tr>
<tr>
<td>RosaMaria Oceguera</td>
<td><a href="mailto:rmosu3@stanford.edu">rmosu3@stanford.edu</a></td>
</tr>
<tr>
<td>Meag-gan O’Reilly, Ph.D.</td>
<td><a href="mailto:mwalter3@stanford.edu">mwalter3@stanford.edu</a></td>
</tr>
<tr>
<td>Meredith Parker, Psy.D.</td>
<td><a href="mailto:mparker2@stanford.edu">mparker2@stanford.edu</a></td>
</tr>
<tr>
<td>Sujata Patel, MD</td>
<td><a href="mailto:sujata.patel@stanford.edu">sujata.patel@stanford.edu</a></td>
</tr>
<tr>
<td>Stephanie Ruiz, LCSW</td>
<td><a href="mailto:stephanie.ruiz@stanford.edu">stephanie.ruiz@stanford.edu</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Admin Support Staff</strong></th>
<th><strong>E-Mail</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Rowena Shaw</td>
<td><a href="mailto:rshaw05@stanford.edu">rshaw05@stanford.edu</a></td>
</tr>
</tbody>
</table>
Accreditation

Vaden is nationally accredited by the Accreditation Association of Ambulatory Health Care (AAAHC) and is an American College Health Association (ACHA) member. The Psychology Internship Training Program is a member of Association of Postdoctoral and Internship Centers (APPIC) and fully accredited by the American Psychological Association (APA).

II. Psychology Internship Training Program

Training Philosophy

The Internship Training Program at Counseling and Psychological Services (CAPS) at Stanford University offers interns training opportunities in Health Service Psychology (HSP). More specifically, the training program prepares interns for professional practice in a variety of areas within an interdisciplinary context. The goal over the course of the year is for interns to achieve Profession Wide Competencies (PWC) to practice independently and operate as professional and ethical psychologists. To accomplish this goal, the training program utilizes a Scholar-Practitioner training model that combines experiential and didactic learning. The training staff at CAPS supports the development of psychologists by integrating psychological theory and research with practice. We believe that learning happens through experience, supervision and mentorship, and is informed by the science of psychology. Our goal is for interns to achieve intermediate to advanced levels of competency with intake interviewing, clinical assessment, crisis intervention, on-call services, individual psychotherapy, couples, group, structured workshops and outreach programming, consultation, professional ethics, and counseling a diverse and gifted student population.

In addition, CAPS offers interns an opportunity to broaden their knowledge and skill base by exposure to a variety of theoretical perspectives and intervention approaches that other interns and our interdisciplinary staff bring to the program. An integrated health service context, we foster professional respect and the building of professional cohesiveness within CAPS staff and across disciplines. In the spirit of HSP, the program operates under the principle that early career professionals need to develop a strong professional identity within their own discipline and an ability to work collaboratively with other mental health care and medical professionals.

Throughout the training year, experiential learning is informed by the theory and science of psychology in supervision and didactic training seminars. The internship follows a sequential, developmental training process, building upon the knowledge and skills that each intern already possesses and offering opportunities for developing and refining additional clinical skills. The goal for our interns is to facilitate their professional development from graduate student to skilled early career psychologist.

Upon arrival, interns begin to assess their professional goals for their training year with guidance from the Training Director and supervisors. Interns have the opportunity to
identify clinical interests and theoretical models as training foci and are given training and supervision opportunities in identified areas. The training year provides ample opportunities for interns to apply theory to practice. Supervision is regarded as a supportive, mentoring relationship enabling interns to develop professional autonomy and competence. The evaluation process plays an essential role in the professional development of interns throughout the year. In addition, interns broaden their knowledge and skill base by exposure to the variety of theoretical perspectives and intervention approaches that our multidisciplinary staff brings to the program. Lastly, CAPS offers opportunities for interns to gain experience with a diverse range of students within a multicultural and diverse organization.

By the end of the training year, interns will have developed advanced levels of competence in the required

**Profession Wide Competencies.**

1. Ethical and Legal Standards
2. Individual and Cultural Diversity
3. Professional Values, Attitudes, and Behaviors
4. Communication and Interpersonal Skills
5. Assessment
6. Intervention
7. Supervision
8. Consultation and Interprofessional/Interdisciplinary Skills
9. Research

Interns will demonstrate the ability to participate in community activities and establish relationships with other university colleagues. The Internship Training Program is sequential, cumulative, and graded in complexity. The training year follows a developmental model that supports and builds on the knowledge interns bring, and it provides opportunities to gain experience and training in multiple professional capacities. Interns build competencies, confidence, and skills throughout the year. Training and supervision are more structured and focused at the onset of the internship year. Quarterly evaluations with supervisors monitor the development and readiness of interns. Supervisors provide ongoing feedback on interns’ strengths and areas of growth.

Expected ratings are as follows:

3 **Emerging Competence:** While still a growth area, the intern demonstrates a basic foundation in the knowledge, awareness, and skill and is approaching a developmental appropriate level of competency. *This is a common rating at mid-year of the internship.*

4 **Competence:** The intern demonstrates a level of competence appropriate for entry-level practice in health service psychology and is actively working to further enhance competence in the knowledge, awareness or skill area being evaluated. *This is the expected level of competence at completion of the training program.*
The ongoing evaluation process provides regular feedback and evaluation of goals set for the training year. When an intern is not meeting performance standards, a specific training plan is developed for the intern in consultation with the primary supervisor and Training Director as guided by our Due Process Guidelines. It is our goal that professional autonomy increases and interns graduate with developed competencies to practice as professional, ethical psychologists.

**Overview of Training Year**

**Orientation**

The first few weeks of orientation are designed so that interns will familiarize themselves with the operations at CAPS. The orientation program is intended to provide interns with an overview of CAPS mission and values, structure, functions, and processes. Additionally, the orientation period serves to clarify expectations, to learn about the history of CAPS and its administrative and clinical policies and procedures, to learn about other campus agencies, to facilitate team building, and to set goals for the internship year. To accomplish this, orientation begins with activities to get acquainted and to develop teamwork, camaraderie, and the skills for self-care. In addition, interns read literature, discuss the stages of the internship year, and explore the developmental challenges that interns may experience during the training year. Interns become acquainted with their supervisors and begin to set goals for the year. A current orientation schedule can be found in the Internship Orientation Binder.

All interns begin their clinical work (initial consultations, intakes, follow-up consultation, brief therapy, and on-call) mid-September and it is monitored through direct observation or videotaped. With supervisor or senior staff feedback and support, as the intern grows more confident and comfortable with our service delivery model, the intern may take on a greater number of clinical work to meet expectations and of greater complexity to develop competency. This allows interns to ease into their clinical work and to gradually learn CAPS policy and procedures while also receiving feedback. Again, it is our goal that professional autonomy increases over time and support is provided to the trainees early in the year to develop competencies to practice as professional, ethical psychologists.

**Fall**

Interns participate in a sequence of seminars during orientation and fall quarter to prepare them for clinical work at CAPS. The didactic component of the internship supports interns becoming familiar with interventions supported by theory and research.

Fall quarter seminars are designed to orient interns to the clinical work at CAPS. Seminars include psychodiagnostic interviewing, crisis intervention, suicide assessment, brief psychotherapy, social justice outreach and programming, psychiatry and medication referrals, law and ethics, sexual harassment, and motivational interviewing for substance abuse/use. In addition, interns attend the Eating Disorders Rotation.

**Winter**
Diversity is woven through all aspects of the internship training experience through direct clinical experience, in supervision, and seminars throughout the year. However, the emphasis during winter quarter is an examination of multicultural and diversity issues through a more experiential process. Interns participate in a six hour seminar that provides the opportunity to examine how their own cultural beliefs and values may impact interactions with one another and their clients.

**Spring**

The focus of spring quarter is professional development. As interns prepare for exiting Stanford and the next phase of their professional development, topics covered include grief and bereavement, supervision, discussion of boundaries, licensing tips, and termination. In addition, interns attend the Gender and Sexual Identity Rotation. Interns also present their social justice outreach project to staff.

**Summer**

Summer quarter is much slower clinically. The seminar revives a diversity focus through our Diversity Book Club. Trainees select a novel to read and meet weekly to discuss the diversity themes.

### III. Training Program Activities

**Weekly Clinical Activities**

Interns manage 16-18 hours of clinical work per week. This includes two weekly initial consultations, one weekly 4.5 hour shift of on-call coverage that includes walk-ins, on-call emergency appointments, consultations, and referrals, and additional clinical work consisting of access coordination (winter/spring), consultation follow-up, intakes, brief therapy, longer term therapy, group therapy, workshops, and outreach programming.

**Direct Service**

Interns provide brief and more in depth initial assessments and brief therapy for registered Stanford University undergraduate and graduate students. In addition, interns gain experience with groups, and referring students for medication or to outside therapists for ongoing therapy. Interns interface with other staff on and off campus regarding student mental health care. Interns also discuss their treatment plans in ongoing supervision and team meetings or case conference to gain greater experience and competence in their clinical conceptualizations and interventions.

The goal for interns is to quickly establish a therapeutic relationship and assess the appropriateness of the student’s presenting problem to a brief treatment model versus longer-term therapy. Interns develop skills conducting assessments for a range of presenting issues, providing crisis intervention, solution focused brief counseling, developing differential diagnosis, referring for medication evaluation, and engaging in collaboration with other resources. Interns also rotate through two specialty tracks where
they gain assessment skills with eating disorders and develop motivational interviewing skills (fall quarter) and working with gender and sexual identity (spring quarter).

**Telehealth**

CAPS quickly moved to providing telehealth in response to the urgent need to adapt service delivery to the COVID-19 Pandemic. Trainees are able to provide remote virtual sessions to students who reside in the state of California. Informed consent and parameters for this service will be reviewed during Orientation and amended as needed. Specific online trainings and webinars on the ethics of telehealth will also be covered in orientation and throughout the year. In addition, all meetings, including supervision and seminars are conducted virtually. Please note the accuracy of the training plan outlined in this document may not reflect the quick and continuous changes required to ensure the health and safety of our staff while maintaining the ethical and professional standards of clinical service delivery. The Training Director in consultation with professional training councils, management team, and the training committee will make necessary changes as needed.

**CAPS Connects**

Interns gain experience with access coordination, which is generally the first point of contact for a student seeking services at CAPS. This appointment allows for the student to meet with a CAPS clinician in person or over the phone for approximately 20 minutes to determine the most appropriate resources and services.

**Initial Assessments**

**Initial Consultation:**
Interns provide two initial consultations fall quarter, and three beginning winter quarter. An initial consultation is a 30-45 minute visit to assess students’ presenting concerns and develop a support plan. The intern gains competency with conducting brief and quick assessments, interventions, and disposition.

**Intakes:**
Interns gain experience with discerning when a more comprehensive assessment is indicated in supervision and consultation. Interns gain competency in gathering additional psychosocial, mental health, and other contextual history to assist with differential diagnosis and brief treatment planning.

**Let’s Talk:** Interns may gain experience with providing one-time consultations at a community center or other liaison location. Similar to an Initial Consultation, Community Connects visits are generally a single, 30-minute session for a brief and quick assessment and disposition. Students are able to schedule such sessions online.

**Referrals**

Throughout the year, interns gain experience with facilitating the referral process. This may happen at any time in the course of the clinical work with a student beginning with access coordination or during the course of brief therapy. There are a number of
resources for students from supplemental skill building workshops, to medication evaluation, or higher levels of care. The interns gain competency with the range of resources on and off campus and proficiency with directing and supporting the student to other resources. In addition, interns may work with Care Managers and Referral Coordination when facilitating referrals.

**Wellness Workshops/Groups**

Interns are expected to run a minimum of two Anxiety Toolbox workshops per quarter. Workshops are generally 3-4 session skill building workshops (Mindful Strategies for Stress, Anxiety Toolbox). In the fall, interns co-lead a workshop with a senior staff and must meet minimum competency before leading workshops on their own. Interns may propose additional workshops or variations of workshops with approval by their supervisor/workshop co-coordinators. For process/interpersonal groups, interns need to be paired with a senior staff for co-facilitation support and supervision.

Interns meet biweekly (EOW) with Wellness Workshop Co-coordinators for consultation and support during fall quarter and monthly in the winter and spring quarters. Interns will have an opportunity to select an exercise from one of the wellness workshops and lead their peers in the exercise during this seminar. Supervisors will attend at least one session per quarter to fulfill live observation requirement. Workshop evals will be shared with trainees for review and discussion in supervision.

**On-call**

All interns provide one, 4.5 hour shift of on-call crisis service per week. During on-call, interns may meet with students, professors, Resident Advisors (RA), Resident Fellows (RF) or Resident Deans (RD) to consult, triage, or assess for safety issues. In addition, interns may take phone calls and provide referrals or consultation over the phone. In the case of a crisis involving potential harm to self or others, interns consult with a senior staff back up. Interns gain experience with crisis assessment, management, and hospitalizations.

**Crisis Intervention**

Interns have a range of opportunities to manage a range of crises in the course of their ongoing clinical work with students. Interns consult with staff if a student presents as a danger to self or others or is gravely disabled. In addition, interns may join staff in speaking to various academic departments or resident halls when critical incidents arise.

**Outreach**

Interns participate in various types of outreach to the Stanford community during their internship year. Outreach encompasses liaison building, education, program development, and other preventative work with a social justice focus. Outreach may also include responding to an event on-campus. Interns present to student groups on particular topics (e.g. depression, anxiety, or stress management) or they may go and speak to an on-campus group to help students to deal with the effects of a suicide, a sexual assault, or a national disaster.
Consultation

Interns provide consultation to faculty, staff, Resident/Graduate Deans, or students. This consultation may occur over the phone or in person. Interns also participate in community activities and establish relationships with other university colleagues.

Supervision

Interns attend two hours of weekly clinical supervision. In individual supervision, interns are encouraged to develop reflective, introspective clinical and case conceptualization skills that aid in their development as professional psychologists in health service psychology. Interns are given an opportunity prior to the beginning of the internship to request their supervision preferences and needs. An attempt is made to match interns to supervisors based upon these preferences. The supervisor carries the responsibility for case management, acquainting the intern with the operations of the agency, training requirements, mentoring, and moral support. Feedback is ongoing but an official evaluation occurs mid-year when there is a supervision switch to diversify the supervision experience. Interns again request their supervision preferences and establish new goals for the second half of the year. A formal evaluation occurs at the end of the year. Direct observation of clinical work such as viewing videotaped session with supervisor is required in supervision.

Specialty Rotations

CAPS offers specialized training in the assessment and management of eating disorders, substance use/abuse, and working with gender and sexual identity. Each rotation meets for approximately 10 weeks and rotates quarterly, for both a didactic component and experiential component. Interns also participate in case conference in these specialty areas during the rotation (Eating Disorder Consultation and GSI Consultation Team). Interns are expected to present cases and incorporate scholarship into their presentation for each rotation.

Didactic Seminars

Didactic seminars meet weekly for two hours. The clinical seminars focus on topics that are particularly relevant to the practice of counseling in a student health center at university setting. Individual seminars are organized around clinical, cultural, pharmacological and treatment model themes.

Case Conference

Each week, interns attend a one-hour case consultation. This is an opportunity for group and peer supervision and facilitated by a licensed CAPS staff.

Outreach and Social Justice Seminar
This seminar meets weekly in the fall. It meets biweekly in winter and spring to support the opportunity to provide services beyond traditional clinical services and more multicultural consultation, education, liaison, advocacy, and outreach programming to the Stanford community with the goal of systemic change as the outcome to breaking down barriers to access and create a culture of inclusivity for diverse and marginalized student communities at Stanford. All interns are expected to gain competency in this area by creating and executing educational programming, liaison relationships, and outreach services to the Stanford community with a social justice focus.

**Intern Group Meeting**

The Intern Group Meeting is run by the interns themselves. It provides opportunities for interns to form bonds with each other, set their own agenda for the meetings, process their training experience, and provide mutual support.

**Professional Development Seminar**

This seminar meets weekly and is facilitated by the Training Director. Both interns and postdoctoral fellows attend this meeting. This meeting is intended to provide a weekly check-in with the Training Director and a venue for trainees to support and learn from each other. Trainees may seek support for applications, review each other’s CVs, do mock interviews, process challenges, ask questions, celebrate professional success, and provide each other feedback to support each other’s professional development. Weekly, an assigned trainee brings a professional development topic for discussion after check in.

**Team Meeting**

Each intern is a member of a multidisciplinary team that meets weekly for an hour. The meeting functions as a case conference for all staff to check in, discuss and review cases, students of concern, develop treatment plans, seek support and consultation, and review clinical policy/updates.

**Staff Meeting**

This meeting functions as a bi-monthly staff meeting, it has an educational component, and a networking component. Professional Staff receive CE’s to support their professional development at these meetings in addition to continue networking with other departments within Student Affairs, Medical School, and community partners.

**Sample Schedule** (Average hours per week by quarter)

<table>
<thead>
<tr>
<th>Direct Services Activities</th>
<th>Fall</th>
<th>Winter</th>
<th>Spring</th>
<th>Summer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access Coordination, Follow-up Consultation, Intakes, Brief Therapy</td>
<td>14</td>
<td>14</td>
<td>14</td>
<td>14</td>
</tr>
<tr>
<td>Initial Consultation</td>
<td>2 – 3</td>
<td>2 – 3</td>
<td>2 – 3</td>
<td>2 – 3</td>
</tr>
<tr>
<td>Wellness Workshop</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Outreach</td>
<td>Varies</td>
<td>Varies</td>
<td>Varies</td>
<td>Varies</td>
</tr>
<tr>
<td>On call emergency coverage (4.5 hrs/week)</td>
<td>Varies</td>
<td>Varies</td>
<td>Varies</td>
<td>Varies</td>
</tr>
</tbody>
</table>

**Training Activities**

| Clinical Supervision | 2 | 2 | 2 | 2 |
| Specialty Rotations (ED/GSI) | 2 | 2 | 2 | 0 |
| Case Conference (with co-interns) | 1 | 1 | 1 | 1 |
| Intern Meeting | 1 | 1 | 1 | 1 |
| Professional Development Seminar | 1 | 1 | 1 | 1 |
| Didactic Seminar | 2 | 2 | 2 | 2 |
| SJOI Seminar | 1 | 1 | 1 | 1 |
| Wellness Workshop Consultation (1/mos) | 1 | 1 | 1 | 1 |
| GSI Consultation/ED Consultation (EOW) | 1 | 1 | 1 | 1 |

**Administrative Activities**

| Team Meeting | 1 | 1 | 1 | 1 |
| Friday Meeting | 1 | 1 | 1 | 1 |
| Administrative Time | 10 | 10 | 10 | 10 |
| Average Estimated Total Hours Per week | 40 – 44 | 40 – 44 | 40 – 44 | 40 – 44 |

**IV. Operations in the Office**

**Managing Schedules**

Interns are beginning their first experience of full-time clinical work. It is an important component of professional development that an intern learn to manage their administrative, clinical, and personal schedule. Interns are expected to be at CAPS M-F from 8:30 – 5P. For safety and liability reasons, interns are not to see students in the building alone (before 8 or after 5 without prior approval or notification to ensure senior staff is available). Interns are expected to submit schedules approved by the Training Director to the front desk on a quarterly basis. It is important that schedules be accurately posted in the scheduling system (Point and Click).

In addition, interns may not schedule students during training seminars, meetings, supervision, or during on-call shifts. During on-call days, it is important that schedules be kept as clear as possible to manage phone calls and walk-ins during your on-call shift. All of the trainings are scheduled in the mornings to avoid interruptions to your required trainings by clinical work. You must be on-site when you are on-call at all times. If you are not able to manage your on-call duties for the day, you are expected to find coverage. It is also important that you stay in communication with your on-call team throughout the day. If you must leave the building when you are on-call, you must carry a phone and respond immediately to a call, and be able to return to CAPS within 10 minutes.
Interns are discouraged from clumping admin or clinical hours. CAPS believes that effective clinical work and demonstration of self-care requires an equal distribution of clinical work, meeting/supervision, and admin time into one’s daily schedule. Interns are not permitted to work 4/10 (four, 10-hour days). Interns are required to maintain hour logs and obtain supervisor signatures on a monthly basis. The required number of hours for successful completion of the Internship is 2000 hours, 500 of which must be direct clinical hours. Interns submit hour logs at their exit interviews.

**Request for Leave**

Interns must make formal written requests for vacation, expected medical leave/illness, and professional development. The request forms must be submitted to the Training Director as stated in the instructions on the form. A copy of this form may be found in the Internship Orientation Binder.

Interns receive 20 days of vacation/personal time off during the year and do not accrue sick time. Ten of those days are used over winter break (December 20 – December 31). This is a mandatory closure as the university shuts down and we return to CAPS on Monday, January 3, the first day of Winter quarter. Of the additional 10 days, five will be scheduled August 8 – 12, 2022. This leaves a remaining five days to use any other time of year. The earliest you may end your internship is two weeks prior to your scheduled end date which would be July 29, 2022.

In addition to the 20 days off, CAPS is closed for several holidays Labor Day, Thanksgiving and the Friday after, Martin Luther King Day, Presidents’ Day, Memorial Day, and July 4. You will also be provided with 5 professional development days to be used for interviews, dissertation defense, graduation, or attending conferences. Given the amount of time off provided excluding sick days, close attention to hour accrual within a twelve month period is monitored. The expectation is that you acquire 2000 hours in twelve months by the end of your training year, with 500 of those hours being direct clinical service. We will discuss your schedule and hour accrual at orientation and plan accordingly throughout the year. Hour logs are due on a monthly basis and an accounting of your time always is maintained.

**Calling in Sick**

Interns do not accrue sick time. However, if you are not well, have a fever, are contagious, or require medical care, interns must call in sick. The process is to text the Training Director and your Supervisor as soon as you know you will be out of the office. In addition, please email the Front Desk staff with instructions about how to manage your clinical schedule for the day and get well soon.

**Security and Privacy Policies**

Offices not in use are to remain locked for security purposes. You will be issued keys to your office, a keypad code to access CAPS and the file room, and an ID to access the building. Your office key unlocks other offices at CAPS with the exception of management staff offices. You will be provided with an access card that allows you into the building after hours (please see Vaden service hours as they vary).
Please lock your computer(s) whenever you leave your office. To do so, press CTRL-ALT-DLT and click “Lock Workstation”. When you return to your computer you will need to press Ctrl-Alt-Delete and enter your password.

Please keep your office door closed whenever you leave your office. Please do not leave any client identifying information (names, SID, email, phone numbers, etc.) on your computer or visible on your desk. Please do not put client identifying information on your personal computers, phones, appointment books. You will complete a HIPAA privacy online training as part of your onboarding.

Any material that contains client identifying information such as telephone messages, letters, printed emails, etc., must be shredded. The confidential shredder box is located in the file room.

All email correspondence with students must be sent via secure messaging within PnC. If you email PHI, on your regular university email, please begin the email with SECURE: to encrypt. All computers are encrypted and you have been provided with the password. In addition, the Training Director will provide you with instructions for remote access to PnC and how to secure your phones with Mobile Device Management (MDM). If you access PnC or other via your personal computer, your personal computer must be encrypted.

**Mailboxes and Messages**

You will be assigned a mailbox in the file room. Please check regularly. Please keep your mailbox clear by filing or recycling your mail. All student messages will be sent to your Provider Summary via PnC.

**Phones**

All calls will come through the main office and support staff should check to be sure that you do not have a scheduled client before putting a call through to you. To place outgoing calls, dial 9 to secure a line then dial the number. You are not advised to share your direct number with students. Please provide them with the general CAPS phone number. You will not be provided with voicemail.

**Computer**

You will be provided with a laptop computer. Each computer is able to access Point and Click (PnC), our electronic medical record, via a secure connection. You will receive training on how to use PnC after you have completed a HIPAA online training. We have a Manager of Information Technology who provides tech support for PnC. In addition, you will have access to Medicine Box, the PHI safe cloud storage for CAPS. Each staff has a personal drive and access to the shared drive.

**Panic Buttons**
There is a panic button in each office. It should be within reach. Please locate your panic button prior to starting clinical work. The panic button alerts campus police immediately to respond to an emergency in your office. DO NOT TEST unless it is a true emergency.

**Webcams**

You will be assigned a webcam for videotaping sessions for training purposes only. Webcams are to be used with client consent for videotaping sessions for supervision. You will receive training on Taping Guidelines.

**Recycling**

Each office has a small cardboard box to collect paper to be recycled. Additional recycling bins are available in the file room. Garbage is collected once a week (Thursday). Please do not trash perishable items in your garbage. Recycling bins for glass and plastic are available in the staff lounge.

**Office Supplies**

Office supplies are stored in the front desk. Please check with support staff for your office needs.

**V. Mechanics of Therapy Sessions**

**Scheduling Clients**

All students seen are scheduled in Point n Click (PnC). Access Coordinators may schedule you with appointments. Please check your schedule regularly throughout the day. You are responsible for managing your schedule including scheduling students for follow-up sessions and keeping your schedule up to date with training and administrative activities. You will receive further training on the use of PnC and you will receive support and guidance for managing your caseload in supervision. It is recommended that you end sessions on time to allow for administrative business after each session.

**Electronic Charts**

All notes are written electronically as an encounter note in PnC. You will receive further training on the use of PnC. In addition, your clinical notes are co-signed by your supervisor who will provide you with feedback on your documentation (safety assessment and planning, disposition, clinical assessment, diagnosis, and interventions). Clinical documentation is a legal record of your clinical work. Professional documentation is an expected competency. You will become acquainted with other aspects related to documentation (release of records, informed consent) during orientation.

**Session in Progress**
Each office door is equipped with a blue “Session in Progress” sign. It is important that you use it diligently and accurately so that you are not disturbed when you are in session, and available if staff is attempting to reach you when you are not in session.

**Starting Sessions**

Students may check in with the front desk or the Kiosk. When a student has checked in, this is indicated in PnC. You are responsible for checking PnC for your client and greeting them in the waiting area. The support staff will not call you. Sessions can be scheduled from 30-50 minutes. Starting and ending on time is an expected professional competency.

**Treatment Information and Disclosures Statement**

At the beginning of the first session whether it’s an initial consultation, intake, on-call, community connects, with a new client, you are required by the California Board of Psychology to provide all clients with a professional disclosure statement which informs the client of your training status at CAPS, supervisory requirements, qualifications and experience, and the nature of counseling. The disclosure form can be found in the Internship Orientation Binder. In addition, you are required to select that you informed the student of your trainee status on your documentation. This will be reviewed in Orientation.

Please review our Treatment Information and Disclosures form to become familiar with our clinical services. As part of informed consent, please review this information (eligibility of services, confidentiality, cancellation/no-show policy) with each student.

**Referrals**

You will receive further training on referrals to psychiatry within CAPS and referrals to Medical Services, nutrition, and off-campus to other clinicians or clinics. You will also become acquainted with our Mental Health Network (MHN) Provider list and learn more about the role of our Case Managers and our Referral Coordinator.

**V. Additional Policies and Procedures**

Many of the forms and policies listed below may be found in the electronic Internship Orientation Manual. All of the materials are reviewed during the orientation program and interns will sign that they have reviewed the manual at the end of orientation. The intern may reference the manual throughout the year as needed.

**Dress Code**

Staff at CAPS strives to provide a professional and safe environment for clients to explore personal issues in their lives. Interns are encouraged to consider the potential messages being communicated to or interpreted by clients and the professional community through their choice of dress and office décor. If you are uncertain about the appropriateness of your clothing or office décor for the professional work environment, please consult with your supervisor or the Training Director. Staff members who have concerns about an intern’s style of dress or office décor will communicate these concerns directly to the intern. While interns are encouraged to develop their own judgment about what constitutes appropriate
professional attire and office décor, some guidelines about the appropriateness of clothing for the work environment include the following: shorts, jeans, t-shirts, tennis shoes, flip flops, and the exposure of undergarments, cleavage, or midriff is not acceptable. Official dress policy may be found in the Orientation Manual under Administrative Policies.

**Training Staff**

Each intern is assigned a clinical supervisor (CA licensed psychologist) and interns have opportunities to meet and work with a range of additional staff (Social Workers, Marriage and Family Therapists, and Psychiatrists) who provide delegated supervision. Interns may have further opportunities to work with senior staff during on-call shifts and when consulting with psychiatrists. All staff is available for consultation. To maximize your exposure to the range of clinical expertise available at CAPS, we recommend you become acquainted and consult with the available staff.

**Training Committee**

The Training Committee (TC) is chaired by the Training Director and consists of psychology training staff and the resident coordinator. The primary function of the TC is to support the administration of the training program including selection, development of training guidelines and curriculum, evaluation of feedback, APA accreditation, and program planning. In addition, the TC may discuss intern training needs and progress.

**Supervisors Meeting**

Supervisors meet once a month to support each other in their role as supervisors. The primary function of this meeting is to provide peer consultation and support for the provision of supervision. Interns training needs and progress are reviewed. In addition, postdoc fellows provide secondary supervision to the interns and attend a bimonthly supervision seminar.

A note on the limits of confidentiality in supervision. Supervisors vary in their emphasis on transference-counter transference issues in supervision. As a result, work with trainees on these issues could involve personal disclosures from the trainee as it relates to their professional work as clinicians. Supervisors work to respect privacy on personal issues, yet retain a responsibility for evaluation of intern performance. Supervisors occasionally may need to consult with their peers on a supervision issue. Supervisors also have opportunities to consult during the supervisor’s meeting. Supervision is not to be confused with a therapy relationship, although there may be aspects of supervision which are therapeutic. Trainees are encouraged to discuss the limits of confidentiality with their supervisors. Privacy on personal issues is respected, and if these issues are affecting work performance, the performance issues will be addressed.

**Supervision Agreement**

All interns will be required to complete the “California Board of Psychology Supervision Agreement for Supervised Professional Experience in Health Services” form at the start of internship. This form will be completed with the Training Director and reviewed with
delegated supervisors. A supervision agreement form can be found in the Internship Orientation Binder.

**Supervision**

Interns will receive two hours of weekly individual supervision with a licensed psychologist on staff. Supervisors switch midyear to expose interns to a range of theoretical orientations and clinical styles. Interns may continue with a clinical supervisor for the entire year under some circumstances. The Training Director and other training staff may provide necessary back-up supervision in the event of a senior staff’s absence due to scheduled time off or illness. In addition, interns will meet weekly in a group format with a Case Consultation Supervisor for one hour. The individual clinical supervisor signing off on case notes, however, has the final and the legal responsibility for all his/her supervisee’s therapy cases. It is the intern’s responsibility to review all cases with their supervisor.

**Responsibilities of Supervisors**

It is the responsibility of supervisors to schedule the appropriate amount of supervision time each week with their supervisee and be available at all times for consultation as needed. Supervisors are expected to abide by the supervisory expectations outlined in the supervisor’s manual, in addition to professional ethics and supervisor competencies. Supervisors need to ensure that their supervisee is providing competent care to all clients and is following the established ethical guidelines of the profession. Supervisors are responsible for providing the trainee with regular feedback of their progress. Supervisors are required to directly observe their supervisee’s clinical work. This may occur live by sitting in during a wellness workshop or session or viewing video of clinical work.

**Responsibilities of Supervisees**

It is the responsibility of supervisees to keep current with documentation on all clients. At the beginning of the first meeting with a client, the supervisee needs to inform the client that he/she is an intern, and is being supervised by a licensed psychologist at CAPS.

Supervisees are also responsible for informing supervisor of at risk clients, all new clients and update status of ongoing clients in supervision. Interns must consult immediately with the on-call clinician or the administrative director immediately and inform their supervisor as soon as possible when there is some concern that a client may be a danger to self or others and/or indicates inability to care for self. The supervisee is required to track his/her hours on a weekly basis to be sure internship hour requirements are being met. This hour log must be signed by all supervisors monthly.

**Evaluation and Feedback**

Interns are encouraged to provide ongoing verbal and written feedback throughout the training year. There are several venues for ongoing feedback:
• Weekly clinical supervision allows for supervisor and intern to engage in an ongoing feedback process.
• Formal written evaluations occur twice a year between intern and supervisor.
• Interns provide weekly evaluations of didactic presenters.
• Interns meet weekly with the Training Director and provide verbal feedback of their training experience.
• Interns complete our Post-Internship Survey at the end of their internship.
• The Training Director conducts exit interviews with each intern at the end of their internship.

It is expected that supervisors provide ongoing feedback to interns. Formal written evaluations occur twice a year with a clinical supervisors. Clinical supervisors complete an Evaluation of Intern Competency Form midyear and end of year. The ongoing evaluation process provides regular feedback and evaluation of goals set for the training year. Supervisors gather feedback from other training staff to include in evaluations. Verbal and written feedback is shared with the intern during supervision. In order to measure minimum level of competency, the following ratings are used:

3  Emerging Competence: While still a growth area, the intern demonstrates a basic foundation in the knowledge, awareness, and skill and is approaching a developmental appropriate level of competency. *This is a common rating at mid-year of the internship.

4  Competence: The intern demonstrates a level of competence appropriate for entry-level practice in health service psychology and is actively working to further enhance competence in the knowledge, awareness or skill area being evaluated. *This is the expected level of competence at completion of the training program.

Written evaluations are reviewed by the Training Director and shared with appropriate training staff at our weekly Training Committee Meetings and monthly Supervisors meetings. Throughout the year, staff is able to review and assess interns’ feedback. The information is utilized to make any necessary changes to the training program that support intern’s professional development and maintains the effectiveness in achieving our goals and objectives. All evaluation forms may be found in the Internship Orientation Binder.

Professional Courtesy

Interns are required to send personal thank you notes to their weekly didactic speakers and be on time to all meetings, seminars, and supervision.

Cell Phone Courtesy

Bringing your phone to meetings and seminars and placing your phone on the table may be distracting by encouraging you to pick up your phone and engage in another task. It also sends a message that you are not engaged with others in learning spaces. Your attention and participation is required and appreciated. The exception to this if you are on-call. However,
many trainings will occur in the morning to avoid interruptions to your training experience. This also applies to smartwatches.

**Fragrance Courtesy**

Recognizing that colleagues and visitors to our offices may have sensitivity and/or allergic reactions to various fragrant products, CAPS encourages you to be mindful of the impact of your own personal fragrant products (fragrances, colognes, lotions, powders and other similar products) that are perceptible to others. Other fragrant products (scented candles, potpourri, and other similar items) are not permitted in the workplace.

**Bicycles**

Bicycles are not allowed in the building (this rule applies to students/patients and staff). Bicycle lockers may be available for rental through Parking and Transportation Services (https://transportation.stanford.edu/sites/default/files/2019-04/2019_bike-locker.pdf). Vaden also provides bicycle racks around the building.

**Self-Disclosure**

Consistent with our training program's goal to train ethical, competent, and professional psychologists, there are opportunities during the year for personal exploration and self-reflection. Interns are encouraged to appropriately explore historical and personal data that may influence their clinical practice and to continue to reflective, introspective skills that aid in their development as professional psychologists. We strive to create an atmosphere in which interns feel safe to explore such issues in training groups and in supervision. Supervisors provide mentorship and consultation to trainees to support their exploration and professional development. Supervisors may consult with one another about trainees when appropriate. CAPS internship program functions in a manner consistent with American Psychological Association (APA) Ethical Standards (7.04 Student Disclosure of Personal Information).

**Diversity**

CAPS has a strong commitment to diversity. As an organization, we work hard to be sure that all members of our diverse staff, including interns, feel fully valued and respected for the diversity they bring to CAPS. Diversity goes beyond this campus community to a larger, global context of various worldviews, life events, and experiences that come together in our campus. All members of our staff have the opportunity to actively contribute to our collective goal of ongoing development of individual and multicultural competencies, how they impact our work, and each other.

We expect our both our staff and interns to be capable of self-examination in order to recognize any prejudices and biases they may have. We strive to create an atmosphere in which interns feel safe to explore these issues, both in training groups, staff meetings, and in supervision. Supervisors and didactic trainers challenge and support our interns to integrate diversity factors into case conceptualizations and delivery of services. For this reason, we also expect our training staff to be committed to lifelong learning related to
cultural competence and to be able to model a genuine desire to examine one’s own attitudes, assumptions, behaviors, and values within a diverse context.

**Conscious Clause**

The CAPS training environment fosters the ability for trainees to provide competent care to the general public. Training staff takes a developmental approach to trainee skill and competency acquisition and supports individual trainees in the process of developing competencies to work with diverse populations across all representations of culture, country of origin, language, ethnicity, gender identity and expression, sexual orientation, social class, ability status, age, religious/faith tradition, political affiliation and age.

Training staff respect the right of trainees to maintain their personal belief systems while acquiring such professional competencies. Trainees are encouraged to seek out supervision and consultation as an integral part of their personal and professional development. Training staff also model the process of personal introspection; the exploration of personal beliefs, attitudes and values; and the development of cognitive flexibility required to serve a wide diversity of clients. If personal values come into conflict with required care for clients, CAPS training staff will provide support to best resolve the situation with no reduction in quality of care for the client and with a focus on growth for the trainee.

Training to work with diverse clients/patients is integral to the curriculum, and consists of both didactic coursework and practical training. The training program is responsible for notifying prospective trainees, current students, and the public that the failure to demonstrate appropriate levels of competence as set forth and assessed by the program could lead to dismissal from the doctoral training program. Thus trainees entering professional psychology training programs should have no reasonable expectation of being exempt from having any particular category of potential clients/patients assigned to them for the duration of training.

This statement was prepared as an educative summary of relevant pedagogical principles applicable to doctoral training of psychologists and is consistent with both the APA Ethics Code (2010) and the Guidelines and Principles for the Accreditation of Professional Psychology Programs of the APA's Commission on Accreditation (APA, 2012). APA’s Ethics Committee and the Commission on Accreditation are responsible for interpreting and adjudicating these standards. This statement supports and is not intended to supersede either of these documents.


**Ethical and Professional Conduct**

Ethical and professional conduct is an expected profession wide competency. CAPS adheres to the ethical standards and practices set forth by the American Psychological Association (APA), the laws and regulations set forth by the California Board of Psychology, and Stanford University policies. APA ethical guidelines, BOP laws and regulations, and Stanford University policies may be found in the Internship Orientation Binder.
Social Media Guidelines

Interns are required to abide by Stanford’s guidelines in making appropriate decisions when managing, developing, or engaging with social media. The guidelines are intended to advise you in managing your institutional affiliation with your personal social media usage. The guidelines can be found here https://ucomm.stanford.edu/policies/social-media-guidelines/

Student Affairs Communication Protocol

The University Communications office is responsible for responding to inquiries from students, professional media, parents, neighbors, family, friends, students, researchers or anyone external to the university. Please consult with your supervisor or administrative manager if you receive an inquiry or request for a statement.

Outside Employment Policy

The internship training program is demanding. It requires approximately 40 – 44 hours per week for one year and an intellectual focus. For this reason, we believe that an intern who spends time engaged in outside professional activities during the internship year may not gain full benefit from the training program. Therefore, it is the policy of the program to not permit employment outside the internship during the internship year.

Certain exceptions to this policy may be requested. An intern who seeks an exception must file a request with the Director of Training. The request will be considered by a committee consisting of the Director of Training, the intern’s primary clinical supervisor, and the Director of the Counseling Center. Requests will be evaluated according to the following criteria:

1. The time commitments required for the outside employment are insubstantial and flexible enough that they will in no way interfere with the intern’s ability to fully function as an intern at the Counseling Center.
2. The physical and / or intellectual requirements of the outside employment are of the nature that they will in no way interfere with the intern’s ability to fully function as an intern at the Counseling Center.
3. The outside employment is adequately supervised.

In the rare case that the committee determines that the outside employment meets all three criteria, the intern will be permitted to pursue the employment according to the specified parameters. To ensure that conditions are clear to all parties, the arrangement will be put in writing.

At any point, any of the three committee members may request a reconvening of the committee to re-evaluate whether the employment continues to meet the three criteria. If at any point, any of the criteria are in question, the committee has the right to require that the intern cease the outside employment as a condition of continuation in the internship.

Due Process and Grievance Procedures
CAPS adheres to the written procedures outlined by our Due Process guidelines for the effective resolution of problems, disputed evaluations, and problematic behavior. All Interns are informed of these procedures during orientation and receive a copy in their Internship Orientation Binder. While interns are not staff, the Training Director may consult with Stanford University Human Resources as needed.

**Self-Care**

Caring for oneself is an ethical responsibility for clinicians. CAPS encourages interns to be mindful of their needs, stressors, and coping skills. Interns may use training spaces to process and find ways manage a work/life balance and consider engaging in their own personal therapy.

**The Help Center**

It is not uncommon during the internship year for the intern to experience personal stress. The Help Center is Stanford University’s employee assistance program equivalent and provides brief, confidential counseling and referrals for ongoing counseling.

**Completion of Internship**

Interns who successfully complete their Internship with CAPS are awarded a Certificate of Completion reflecting their accomplishment.