**PSYCHOLOGY Internship training Manual**

**2022-2023**

Stanford University Counseling and Psychological Services

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**COUNSELING AND PSYCHOLOGICAL SERVICES**

**STANFORD UNIVERSITY**

**PSYCHOLOGY INTERNSHIP TRAINING PROGRAM**

**IN HEALTH SERVICE PSYCHOLOGY**

**I. Counseling and Psychological Services (CAPS)**

# **Setting**

Stanford University is nestled among California’s rolling hills, just 30 miles south of San Francisco, a remarkably diverse and vibrant urban city.  This backdrop sets a larger context for the diversity of the Stanford community. Recognized as one of the world's leading research and teaching institutions, Stanford University is located on the ancestral land of the Muwekma Ohlone Tribe and offers its students a remarkable and diverse range of academic student life. Stanford attracts some of the brightest and gifted students from around the world. Stanford is a global educational institution for 16,937 students from all 50 states and approximately 117 countries that make up our diverse geographic and international undergraduate and graduate student body.

# **Mission, Vision, and Values of Stanford University**

Education, Research, Community, and Engagement Beyond the University are key elements of Stanford University’s mission. Stanford University’s vision arose out of the ideas of community members, who proposed innovative ways the university could achieve the founding purpose of promoting the welfare of people everywhere and is inspired by four key values:

1) Sustaining Life on Earth

2) Accelerating Solutions for Humanity

3) Catalyzing Discovery in Every Field

4) Preparing Citizens and Leaders

Woven throughout the key values “is a commitment to ensuring equity and inclusion in our research and on our campus, embedding ethics across research and education and engaging with partners beyond our walls to learn from and give back to our local and global community”. Inclusion, Diversity, Equity, and Access in a Learning Environment ([IDEAL](https://ideal.stanford.edu/)) is a Stanford initiative to create an inclusive, accessible, diverse, and equitable university for all.

Consistent with the mission of the university, Student Affairs is committed to educating students to make meaningful contributions as citizens of a complex world and this work is guided by [Our Most Important Work (OMIW)](https://studentaffairs.stanford.edu/about-vice-provost/our-most-important-work#:~:text=Our%20Goal%3A%20Foster%20experiences%2C%20relationships,belonging%20within%20the%20Stanford%20community) priorities:

* Community and Belonging
* Equity and Inclusion
* House in Order
* Integrative Learning
* Mental Health and Well-being
* Supporting Academics

Vaden Health Center is instrumental in upholding the mission and values of Student Affairs OMIW through their dedication to providing exceptional care to support student health and well-being. CAPS is one of five health related services offered through Vaden Health Center that provides a full range of mental health services to support our diverse student community’s educational, emotional, and personal success. CAPS accomplishes this with access to high quality assessment, counseling, referral, consultation, care management, psychiatric evaluations and medication management, outreach, groups, and workshops. CAPS staff are a diverse range of cross-disciplinary licensed mental health professionals who are personally and ethically committed to providing care that is rooted in cultural humility and social justice values.

Because living and learning are intimately intertwined, Stanford provides its student body a unique and supportive environment in which to learn and grow. Largely a residential university, Stanford’s mission is to provide an accessible, equitable, diverse, inclusive, caring, and supportive campus environment for the development of a student’s academic, personal, civic, and professional growth and development. CAPS plays an integral role in Stanford’s commitment to providing a supportive and educational environment by providing high quality, confidential care for students who experience a range of personal, academic, and psychological problems. In addition to direct clinical services, CAPS engages in collaborative educational efforts that focus on prevention and risk reduction.

# **Commitment to Anti-racism, Social Justice, Diversity, Equity, and Inclusion**

Stanford is a global university that attracts students from all over the world and is situated in the San Francisco Bay Area, one of the most diverse places in the country. The summer of 2020 catapulted Stanford’s efforts to create a more equitable and just learning and work environment as a result of the social and racial injustice. Stanford University has made concerted efforts to recognize that systemic inequalities exists and result in differential access to and distribution of power. Stanford has made attempts to address bias, oppression, and hate crimes on campus and strives to challenge injustice.

CAPS upholds the profession and university values of diversity, equity, inclusion, and cultural humility and CAPS affirms this commitment. CAPS intentionally recruits diverse individuals and CAPS staff is a collective of interdisciplinary mental health providers with intersecting identities that represent a range of diversity and are committed to their personal journey of cultural humility and lifelong learning. Diversity is woven through all aspects of the training program with the goal to move beyond multiculturalism, to action in the areas of intersectionality, social justice advocacy, decolonizing mental health, liberation psychology, anti-racism, and the dismantling of white nationalism.

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.

<http://www.apa.org/ed/graduate/diversity-preparation.aspx>

# **Equal Opportunity and Discrimination Policy**

At Stanford, we strive to ensure that a diversity of cultures, races and ethnicities, genders, political and religious beliefs, physical and learning differences, sexual orientations and identities is thriving on our campus. Such diversity will inspire new angles of inquiry, new modes of analysis, new discoveries, and new solutions.

Stanford University does not discriminate on the basis of race, religious creed, color, national origin, ancestry, physical or mental disability, medical condition, genetic information, marital status, age, sex, sexual orientation, gender, gender identity, gender expression, military status, veteran status, or any other characteristic protected by law, in connection with any aspect of employment at Stanford.

<https://adminguide.stanford.edu/chapter-1/subchapter-7/policy-1-7-4>

# **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.

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# **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).

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**II. Psychology Internship Training Program**

# **Training Philosophy, Program Aim, and Competencies**

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. Our goal is for interns to achieve intermediate to advanced levels of competency with intake interviewing, clinical assessment, crisis intervention, on-call services, individual brief therapy, group therapy, structured workshops, outreach programming, consultation, professional ethics, cultural humility, 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. In 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.

The specific aims of the training program are:

1. To recruit and train ethical, clinically skilled, and culturally humble psychologists who will be prepared for entry level practice in health service psychology
2. To foster attitudes and behaviors that promote a professional identity as a psychologist through didactic education, experiential learning, mentorship, and supervision.

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

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.

# **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 in September and are 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 but not limited to: psychodiagnostic interviewing, crisis intervention, suicide assessment, brief psychotherapy, social justice outreach and programming, psychiatry and medication referrals, law and ethics, and sexual harassment. In addition, interns attend the Eating Disorders Rotation.

**Winter**

Winter quarter brings experience from the completion of one quarter (with three to go) and a sense of rejuvenation after winter break. It also brings postdoctoral fellowship applications and interviews.

The emphasis winter quarter is on professional development as the program supports interns’ interview and postdoctoral decision-making process. Interns participate in facilitating a discussion at the Internship Open House with Internship Applicants. Interns also begin to acquire more advanced clinical skills, see more complexity on their caseloads, and begin to take on more responsivity during their on-call shifts. Interns attend the Substance Use Rotation and lead a scholarly discussion in Journal Club.

**Spring**

The focus of spring quarter is to prepare interns for multiple terminations with their clinical work as the academic year comes to an end. At this point in their development, some have defended their dissertations and will participate in their own graduation.

Interns demonstrate an increased clinical autonomy, complete their social justice projects which they present to staff, complete their queering projects, lead a professional development discussion, and attend the Big Gay Field Trip. Didactic topics covered include grief and bereavement, supervision, discussion of boundaries, licensing tips, and termination. In addition, interns attend the Gender and Sexual Identity Rotation.

**Summer**

Summer quarter welcomes more space to slow down and transition/terminate from CAPS. Interns complete a summer video project (Tips for the Incoming Cohort and CAPS Tour for Open House). Diversity Book Club is a summer specific seminar where interns select a novel with a diversity theme to read and lead a discussion. Interns participate in a termination retreat and attend their graduation luncheon having successfully completed their internship.

**III. Training Program Activities**

# **Weekly Clinical Activities**

Interns manage up to 22 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 CAPS Connects (triage), intakes, brief therapy, longer term therapy, group therapy, workshops, and outreach programming.

# **Direct Service**

Interns provide initial assessments and brief therapy for registered 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 three specialty tracks where they gain assessment skills with eating disorders (fall quarter), substance use where they develop motivational interviewing skills (winter 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. Student may also be seen in-person. Face coverings are required for all in-person sessions. Informed consent and parameters for telehealth 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, meetings, including supervision and seminars may be conducted virtually, in-person, or hybrid. 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. An initial consultation is a 30–45-minute visit to assess a student’s 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 CAPS Connects visit 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 for complex care or 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). Please note since the pandemic all workshops have been virtual. 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 Directors (RD) to consult, triage, or assess for safety issues. In addition, interns may take phone calls and provide referrals or consultations 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 socio-political crisis, 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 biweekly 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 alternates between outreach and social justice. The goal is to learn about 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 spring quarter.

# **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 CEs 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**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **INTERN SAMPLE SCHEDULE** | | | | | |
| **Direct Services Activities** | **Fall** | **Winter** | **Spring** | **Summer** |
| CAPS Connects (Triage) | 1.5 | 1.5 | 1.5 | 1.5 |
| Intakes | 2 | 2 | 2 | 2 |
| Individual therapy/Let’s Talk | 12 | 12 | 12 | 12 |
| \*Group therapy/Workshops | 0 – 2 | 0 – 2 | 0 – 2 | 0 – 2 |
| Outreach | 2 – 4 | 2 – 4 | 2 – 4 | 2 – 4 |
| On call emergency coverage (4.5 hrs.) | Varies | Varies | Varies | Varies |
| **Training Activities** | | | | | |
| Clinical Supervision | 2 | 2 | 2 | 2 |
| ED/SU/GSI Rotation | 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 |
| Outreach/Social Justice Seminar | 1 | 1 | 1 | 1 |
| GSI Case Conference/Workshop Consultation | 1 | 1 | 1 | 1 |
| **Administrative Activities** | | | | | |
| Team Meeting | 1 | 1 | 1 | 1 |
| Staff Meeting | 1 | 1 | 1 | 1 |
| \*\*Administrative Time | 8 | 8 | 8 | 8 |
| **Average Estimated Total Hours Per week** | 40 – 44 | 40 – 44 | 40 – 44 | 1. – 44 |

**Supervision**

Interns 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 supervisor’s absence due to scheduled time off or illness. In addition, interns meet weekly in a group format with a Case Consultation Supervisor for one hour. The individual clinical supervisor co-signs all case notes and has the final and legal responsibility for all their supervisee’s therapy cases.

# **Supervision Agreement**

All interns are 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.

# **Responsibilities of Supervisors**

It is the responsibility of supervisor 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, California Board of Psychology Supervision Guidelines, 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 intern’s responsibility to review all cases with their supervisor. 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 is required to inform the client that they are an intern and are being supervised by a CA licensed psychologist at CAPS.

Supervisees are also responsible for informing their the supervisor of all at-risk clients, all new clients, and update the 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 concern that a client may be a danger to self or others and/or indicates inability to care for themselves.  The supervisee is required to track their 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 quarter seminar evaluations.
* 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 as well. Formal written evaluations occur twice a year. 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.

# **Profession Wide Competencies**

Interns are evaluated on the following Profession Wide Competencies and related elements:

**1. ETHICS AND LEGAL MATTERS**

* Intern demonstrates competence with their knowledge and acts in accordance with APA ethical principles and code of conduct, CA laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels, and relevant professional standards and guidelines.
* Intern demonstrates competence in their understanding and adherence to CAPS clinical and administrative policies.
* Intern demonstrates competence in the ability to recognize ethical dilemmas as they arise and apply ethical decision-making processes in order to resolve the dilemmas.
* Intern demonstrates competence in conducting self in an ethical manner in all professional activities.

**2. WORKING WITH INDIVIDUAL AND CULTURAL DIVERSITY**

* Intern demonstrates competence in understanding how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with those who are different from themselves.
* Intern demonstrates competence in their knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision/consultation, and direct clinical service.
* Intern demonstrates competence in the ability to integrate knowledge and understanding of diversity and culture into assessment, case formulation, treatment planning, and interventions.
* Intern demonstrates competence in the ability to integrate awareness and knowledge of individual and cultural differences in the conduct of all professional roles.
* Intern demonstrates competence in the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered over the course of their careers.
* Intern demonstrates competence the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during internship.
* Intern demonstrates competence in the ability to engage in diversity dialogues professionally and respectfully with others.
* Intern demonstrates commitment to the ongoing development of multicultural and diversity competence by engaging in self-examination to increase awareness of beliefs, attitudes, and biases that may impact their professional work.

**3. PROFESSIONAL VALUES, ATTITUDES AND BEHAVIORS**

* Intern demonstrates competence in behaving in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others.
* Intern demonstrates competence in the ability to engage in reflective practice regarding one’s personal and professional functioning; engage in activities to maintain and improve performance, well-being, and professional effectiveness.
* Intern demonstrates competence in actively seeking and demonstrates openness and responsiveness to interpersonal feedback and supervision.
* Intern demonstrates competence in responding professionally to increasingly complex situations with greater degree of independence.
* Intern demonstrates competence in the ability to connect with other interns and to be an integrated member of the internship.
* Intern demonstrates competence in time management skills.
* Intern demonstrates competence in accurately evaluating own level of clinical judgment and competency.
* Intern demonstrates competence in the ability to maintain good working relationships with professional and support staff.
* Intern demonstrates competence in utilizing positive coping strategies with personal and professional stressors and challenges and is able to minimize their impact on clinical care.
* Intern demonstrates competence in the ability to provide constructive feedback to supervisor and training staff.

**4. COMMUNICATION & INTERPERSONAL SKILLS**

* Intern demonstrates competence in developing and maintaining effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services.
* Intern demonstrates competence in producing and comprehending oral, nonverbal, and written communications that are informative and well-integrated and demonstrates a thorough grasp of professional language and concepts.
* Intern demonstrates competence in effective interpersonal skills and the ability to manage difficult communication well.
* Intern demonstrates competence in handling differences openly, tactfully, professionally, and effectively.
* Intern demonstrates competence in the ability to navigate family professionally and effectively, social, academic, medical, and/or other environmental support systems for the benefit of the client.

**5. ASSESSMENT SKILLS**

* Intern demonstrates competence in the use of current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client’s strengths and psychopathology.
* Intern demonstrates competence in understanding human behavior within its context (e.g., family, social, societal, and cultural).
* Intern demonstrates competence in the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process.
* Intern demonstrates competence in the ability to select and apply assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collect relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient.
* Intern demonstrates competence in the interpretation of assessment results, following current research and professional standards and guidelines to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective.
* Intern demonstrates competence in the oral communication and in written documentation of findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.
* Intern demonstrates competence in the ability to assess for a range of safety issues, including but not limited to child abuse, danger to self, danger to others, grave disability, and self-harm.

**6. INTERVENTION SKILLS**

* Intern demonstrates competence in the ability to establish and maintain effective relationships with recipients of psychological services.
* Intern demonstrates competence in the ability to develop evidence based intervention plans specific to the service delivery goals.
* Intern demonstrates competence in their ability to implement interventions informed by the current scientific literature, assessment finding, diversity characteristics, and contextual variables.
* Intern demonstrates competence in the ability to apply the relevant research literature to clinical decision making.
* Intern demonstrates competence in the ability to modify and adapt evidence-based approaches effectively when a clear evidence-base is lacking.
* Intern demonstrates competence in the ability to evaluate intervention effectiveness and adapt intervention goals and methods consistent with ongoing evaluation.
* Intern demonstrates competence in the ability to provide services in a variety of modalities which may include brief, long-term, individual, couples, group, crisis intervention, and outreach programming.
* Intern demonstrates competence in the ability to work with a range of presentations from developmental issues to more acute psychiatric conditions.
* Intern demonstrates competence in the ability effectively manage the termination phase of therapy.
* Intern demonstrates competence in the ability to utilize resources and facilitate referrals.
* Intern demonstrates competence the ability to direct care, when appropriate, to a higher level of care.

**7. CONSULTATION INTERPROFESSIONAL INTERDISCIPLINARY SKILLS**

* Intern demonstrates competence in their ability to apply knowledge of consultation models and practices with individuals, other healthcare professionals, interprofessional groups or systems related to health and behavior.
* Intern demonstrates competence in understanding the difference between their clinical and consultative roles
* Intern demonstrates competence in knowing when consultation/collaboration with others may be appropriate and/or needed.
* Intern demonstrates competence in responding in a timely fashion to phone, email, or in person requests for consultation.
* Intern demonstrates competence and respect in working with psychiatrists, clinical social workers, marriage and family therapists, case managers, other medical staff at Vaden Student Health Center and Stanford Medical Center.
* Intern demonstrates competence in the ability to actively seek consultation when treating complex cases or working with unfamiliar symptoms, presenting concerns, crisis situations, and populations.
* Intern demonstrates competence in actively participating in discussion of consultation related topics during team meetings and in case conference.
* Intern demonstrates competence in effectively managing confidentiality issues during consultation.
* Intern demonstrates competence in working collaboratively and communicating effectively with the consultee.

**8. RESEARCH SKILLS**

* Intern demonstrates competence in the ability to critically evaluate and disseminate research or other scholarly activities at the local (seminars, case conference, supervision) or national level.
* Intern develops and executes a program evaluation project (Social Justice Project) that assesses a specific need or service on campus and presents findings at a staff meeting.
* Intern demonstrates competence in the ability to discuss how psychological theory and research apply to clinical practice in supervision.

**9. SUPERVISION**

* Intern demonstrates competence in their knowledge of supervision models and practices.
* Intern demonstrates competence in their ability to apply knowledge of supervision models and practice through roles plays or peer supervision in case conference.

# **Required Minimum Level of Achievement**

The following scale is used to rate interns’ level of achievement mid-year and end-of-year. It is expected that in intern will receive a minimum rating of 3 (Emerging Competence) on all elements of competence mid-year and a minimum rating of 4 (Competence) on all elements at the end of the year for successful completion of internship.

**7 Mastery**: The intern demonstrates an exceptional strength in this area. The knowledge, awareness or skill is consistently incorporated and evident in daily professional practice as an emerging psychologist.

**6** **Significant Strength**: The intern demonstrates a significant strength well above their developmental level. The knowledge, awareness or skill is frequently applied to their practice with minimum structured assistance.

**5** **Strength**: The intern demonstrates a strength pertaining to the knowledge, awareness or skill being evaluated and is slightly above their developmental level.

**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.*

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

**2** **Significant Growth Area**: The knowledge, awareness or skill should be a major focus of development for the intern. Specialized attention should be provided in supervision and remedial work may be required for the intern to achieve competence. *(If a rating of 2 is given on any element in any competency area of the final evaluation, the intern does not successfully complete their internship).*

**1 Remedial**: The intern lacks understanding and demonstrates minimal evidence of the knowledge, awareness, or skill. A specific remediation plan is required with increased supervision and careful monitoring to help intern achieve competence. *(If a rating of 1 is given on any element in any competency area of the final evaluation, the intern does not successfully complete their internship).*

**NA**-Not applicable

**U**-Unable to Evaluate (Supervisor has not been able to assess this competency)

Written evaluations are reviewed by the Training Director and shared with appropriate training staff at our weekly Training Committee Meetings and monthly Supervisors meetings. Mid-year and end of year evaluations are shared with Intern’s Director of Clinical Training from their doctoral program. 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.

# **Evaluation of Supervisors**

Interns have the opportunity to provide feedback to supervisors informally throughout the year and formally biannually. Interns complete a Supervisor Evaluation form mid-year and end-of-year. In addition, intern’s complete quarterly seminar evaluations.

# **Training Program Evaluation**

Interns have the opportunity to complete an end-of-year evaluation of their training experience. This feedback is used to evaluate training aims and goals and refine the program on an annual basis.

**Problem Resolution**

# **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. The Training Director may consult with Stanford University Human Resources as needed.

Most problems that arise during an internship are a normal part of the training process and will be handled informally during supervisory sessions. The discussion and resolution of these problems are seen as opportunities for each intern’s professional growth. Similarly, grievance procedures and due process are envisioned as opportunities to collaborate in the remediation and/or resolution of problems or concerns regarding an intern’s competence or progress.

The Psychology Internship Training Program will provide all interns with information relevant to professional standards, legal and ethical regulations, and guidelines, and offer opportunities to discuss the implementation of such standards.

# **Overview**

The Psychology Internship Training Program at Counseling and Psychological Services at Vaden Health Center, Stanford University is based upon a Scholar-Practitioner training model that incorporates current psychological theory and science with experiential learning. It is intended to help interns grow and develop as generalist psychologists. At CAPS, interns gain extensive clinical experience with a diverse range of students and presenting problems.

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 psychologist.

Upon arrival, interns begin to assess their professional goals for their training year with guidance from the Senior Psychology Training Director and Clinical Supervisors. Interns can 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 to enable interns to develop professional autonomy and competence. The evaluation process thus plays an essential role in the professional development of interns throughout the year. In addition, interns can broaden their knowledge and skill base by exposure to the variety of theoretical perspectives and intervention approaches that our multidisciplinary staff bring to the program. Lastly, CAPS offers opportunities for interns to gain experience with a diverse range of students within a multicultural and diverse organization.

It is expected that by the end of the training year, interns will have developed competence with profession wide competencies including but not limited to intake interviewing, clinical assessment, crisis intervention, on-call services, brief and long-term therapy, individual psychotherapy, assessment, case management, brief treatment and management of eating disorders, substance use assessment through motivational interviewing, and ability to work with gender and sexual identities, conduct outreach programming, provide consultation, practice with professional ethics, and counsel a diverse and gifted student population.

# **Evaluation**

The Psychology Internship Training Program 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. This model supports interns to build competencies, confidence, and skills throughout the year and graduate ready for entry level positions.

Quarterly evaluations with supervisors monitor the developmental progress and readiness of interns. A minimum rating of 3 (emerging competence) on supervisor evaluations demonstrates adequate progression through the training program mid-year and a minimum rating of 4 (competence) demonstrates successful completion of the training program. In supervision, supervisors provide ongoing feedback to interns on their areas of strengths and areas for growth. The ongoing evaluation process provides regular feedback and evaluation of goals set for the training year. It is expected that professional autonomy increases as the year progresses and interns graduate with developed competencies to practice as postdoctoral Intern s.

# **Definition of Problematic Behavior**

Problematic behavior is defined broadly as an interference in professional functioning which is reflected in one or more of the following ways: 1) an inability and/or unwillingness to acquire and integrate professional standards into one's repertoire of professional behavior; 2) an inability to acquire professional skills in order to reach an acceptable level of competency; and/or 3) an inability to control personal stress, strong emotional reactions, and/or psychological dysfunction which interfere with professional functioning.

It is a professional judgment as to when an intern’s behavior becomes problematic rather than of concern. Trainees may exhibit behaviors, attitudes or characteristics which, while of concern and requiring remediation, are not unexpected or excessive for professionals in training. Problems typically become identified when they include one or more of the following characteristics:

1. The intern does not acknowledge, understand, or address the problem when it is identified.
2. The problem is not merely a reflection of a skill deficit that can be rectified by academic or didactic training.
3. The quality of services delivered by the intern is sufficiently negatively affected.
4. The problem is not restricted to one area of professional functioning.
5. A disproportionate amount of attention by training personnel is required.
6. The intern’s behavior does not change as a function of feedback, remediation efforts, and/or time.
7. The problematic behavior has potential for ethical or legal ramifications if not addressed.
8. The intern’s behavior negatively impacts the public view of the agency.
9. The problematic behavior negatively impacts other trainees.
10. The problematic behavior potentially causes harm to a patient.
11. The problematic behavior violates appropriate interpersonal communication with agency staff.

# **Procedures for Responding to Inadequate Performance by an Intern**

If an intern receives an "unacceptable rating" (a rating of 2 – significant growth area or 1 – remedial) from any of their supervisors in any of the major domains of evaluation, or if a staff member has concerns about an intern’s behavior (ethical or legal violations or professional incompetence) the following procedures will be initiated:

1. The staff member will consult with the Senior Psychology Training Director to determine how to proceed (for example provide feedback and discuss with intern in supervision or write a remediation plan) and continue to assess behavior in question for improvement.
2. If the staff member who brings the concern to the Senior Psychology Training Director is not the intern's clinical supervisor, the Senior Psychology Training Director and/or person with the concerns will discuss their concern with the intern's clinical supervisor to determine how to proceed.
3. If the Senior Psychology Training Director and clinical supervisor determine that the alleged behavior in the complaint, if proven, would constitute a serious ethical, legal, or clinical violation, the Senior Psychology Training Director will inform the person who initially brought the complaint.
4. The Senior Psychology Training Director will meet with the Training Committee to discuss the performance rating or the behavior concern and possible courses of action to be taken to address the issues.
5. The Senior Psychology Training Director, Training Committee, and clinical supervisor may meet to discuss possible course of actions.
6. Whenever a decision has been made by the Senior Psychology Training Director about an intern's status at CAPS, the Senior Psychology Training Director will inform the intern in writing and upon notice, will convene a hearing for the intern to review the decision. This meeting may include the clinical supervisor.
7. The intern may choose to accept the conditions, or they may choose to appear the decision.

# **Guidelines for Addressing Problematic Behaviors**

It is important to have meaningful ways to address problematic behavior once it has been identified. In implementing remediation or sanction interventions, the training staff must be mindful and balance the needs of the intern, the clients involved, and members of the training group, the training staff, and other CAPS staff. The following is a list of remediation and sanction alternatives to be considered in addressing problematic behaviors. One or more of the following actions may be taken. The Psychology Intern’s Director of Clinical Training from their doctoral program may be contacted at any time.

1. **Verbal warning** to the Intern by the Clinical Supervisor or Senior Psychology Training Director emphasizes the need to improve the rating or discontinue the behavior under discussion. No record of this action is kept.

2. **Notice of Formal Review.** The Intern will be notified in writing that an issue has been raised to a formal level of review, and a hearing will be held.

3. **Hearing** The supervisor or staff member will hold a hearing with the Senior Psychology Training Director and Intern within 10 working days of issuing a Notice of Formal Review to discuss the problem and determine what action needs to be taken to address the issue. If the Senior Psychology Training Director is the supervisor who is raising the issue, an additional staff member who works directly with the Intern will be included at the hearing. The Intern will have the opportunity to present their perspective at the hearing and/or to provide a written statement related to their response to the problem.

**Hearing Outcome and Next Steps:**

The result of the hearing will be any of the following options (listed below), to be determined by the Training Director and other faculty/staff member who was present at the hearing. This outcome will be communicated to the Intern in writing within 5 working days of the hearing:

**1. Written acknowledgment** to the Intern formally acknowledges:

a) That the Senior Psychology Training Director is aware of and concerned with the performance rating or behavior concern,

b) That the concern has been brought to the attention of the Intern,

c) That the Senior Psychology Training Director will work with the Intern to rectify the problem or skill deficits, and

d) That the behaviors associated with the rating are not significant enough to warrant more serious action at the present time.

The written acknowledgment may be removed from the Intern file when the Intern responds to the concerns and successfully and completes the Intern ship.

**2. Written warning** to the Intern indicates the need to immediately work on improving the behavior resulting in the poor rating or to discontinue the concerning/problematic behavior. This letter will contain:

a) A description of Intern ’s unsatisfactory performance.

b) Actions needed by the Intern to correct the unsatisfactory behavior.

c) The timeline for correcting the problem.

d) What action will be taken if the problem is not corrected.

e) Notification that the Intern has the right to request an appeal of this action.

A copy of this letter will be kept in the Intern 's file. Consideration may be given to removing this letter at the end of the Internship by the Senior Psychology Training Director in consultation with the Intern 's supervisor and training committee. If the letter is to remain in the file, documentation should contain the position statements of the parties involved in the dispute.

**3. Schedule modification** is a time-limited, remediation-oriented, closely supervised period of training designed to return the Intern to a more fully functioning state. Modifying a Intern 's schedule is an accommodation made to assist the Intern in responding to personal reactions to environmental stress, with the full expectation that the will complete the Intern ship. This period will include more closely scrutinized supervision conducted by the regular clinical supervisor in consultation with the Senior Psychology Training Director. Several possible and perhaps concurrent courses of action may be included in modifying a schedule. These include:

a) Increasing the amount of supervision, either with the same or other supervisors.

b) Change in the format, emphasis, and/or focus of supervision.

c) Recommending personal therapy.

d) Reducing the Intern 's clinical or other workload.

e) Requiring specific academic course work.

The Senior Psychology Training Director in consultation with the clinical supervisor, and the training committee will determine the length of a schedule modification period. The termination of the schedule modification period will be determined, after discussions with the Intern, by the Senior Psychology Training Director in consultation with the primary supervisor.

**4.** **Probation** is also a time limited, remediation-oriented, more closely supervised training period. Its purpose is assessing the ability of the Intern to complete the Intern ship and to return the Intern to a more fully functioning state. Probation defines a relationship that the Senior Psychology Training Director systematically monitors for a specific length of time the degree to which the Intern addresses, changes and/or otherwise improves the behavior associated with the inadequate rating. The Intern is informed of the probation in a written statement that includes:

a) The specific behaviors associated with the unacceptable rating.

b) The recommendations for rectifying the problem.

c) The time frame for the probation during which the problem is expected to be ameliorated.

d) The procedures to ascertain whether the problem has been appropriately rectified.

If the Senior Psychology Training Director determines that there has not been sufficient improvement in the Intern 's behavior to remove the probation or modified schedule, then the Senior Psychology Training Director will discuss with the clinical supervisor, and the training committee possible courses of action to be taken. The Senior Psychology Training Director will communicate in writing to the Intern if the conditions for revoking the probation or modified schedule have not been met. This notice will include the course of action the Senior Psychology Training Director has decided to implement. These may include continuation of the remediation efforts for a specified time period, implementation of another alternative, or dismissal from the Intern ship. The Senior Psychology Training Director may discuss with the Management Team if it appears that the Intern will not successfully complete the Intern ship.

**5. Suspension of direct service activities** requires a determination that the welfare of the Intern 's clients has been jeopardized. Therefore, direct service activities will be suspended for a specified period as determined by the Senior Psychology Training Director in consultation with the training committee. At the end of the suspension period, the Intern 's supervisor in consultation with the Senior Psychology Training Director will assess the Intern 's capacity for effective functioning and determine when direct service can be resumed.

**6. Administrative leave** involves the temporary withdrawal of all responsibilities and privileges at CAPS. If the probation period, suspension of direct service activities, or administrative leave interferes with the successful completion of the training hours needed for completion of the Intern ship, this will be noted in the Intern 's file. The Senior Psychology Training Director will inform the Intern of the effects the administrative leave will have on the Intern 's stipend and benefits.

**7. Dismissal from the Internship** involves the permanent withdrawal of CAPS responsibilities and privileges. When specific interventions do not, after a reasonable time period, rectify the problematic behavior or concerns and the trainee seems unable or unwilling to alter her/his behavior, the Senior Psychology Training Director will consult with Management Team about the possibility of termination from the training program. Either administrative leave or dismissal would be invoked in cases of severe violations of the APA code of ethics, or when imminent physical or psychological harm to a client is a major factor, or major disruption to other people in the training program or CAPS staff, or the Intern is unable to complete the Intern ship due to physical, mental or emotional illness.

# **Due Process: General Guidelines**

Due process ensures that the training program's decisions about Psychology Interns are neither arbitrary nor personally based. Specific evaluative procedures apply to all Psychology Interns, and appeal procedures are available for Psychology Interns who wish to challenge the program's actions. All steps need to be appropriately documented and implemented.

General guidelines are as follows:

1. The training program's expectations related to professional functioning are presented to Psychology Interns in writing and discussed both in group settings and with individual supervisors.
2. Formal evaluations occur with each supervisor at specified times. Evaluation is a mutual process (with Psychology Intern evaluating supervisor and supervisor evaluating Psychology Intern) and meant to be a learning experience for both parties.
3. Problematic behavior or concerns are clearly defined in writing and opportunities for discussion and clarification are provided if necessary.
4. Psychology Interns are informed of due process procedures and written policies for appealing actions of the program when warranted.
5. The training program will institute a remediation plan for identified inadequacies, including a time frame for expected remediation. Consequences of not rectifying the inadequacies are clearly stated in writing.
6. The training program ensures that Psychology Interns have sufficient time to respond to any action taken by the program.
7. The training program considers multiple professional sources when making decisions or recommendations regarding a Psychology Intern's inadequate performance.
8. The training program documents the action taken by the program and its rationale and provides this documentation to all relevant parties.

# **Due Process and Appeals Procedures**

The primary purpose of due process is to provide a mechanism by which all decisions made by the Senior Psychology Training Director and supervisors regarding remediation and the Intern’s status at CAPS can be fairly reviewed. Due process is a mechanism by which an Intern may appeal any decisions made or bring a specific complaint against a staff member.

# **Appeals Process**

If an Intern is dissatisfied with an evaluation or wishes to challenge any remediation actions taken by members of the training staff, they may request a review of the decision or actions.

1. If the Intern wishes to challenge a decision made at any step in the Due Process procedures, they may request an Appeals Hearing before the Training Committee. This request must be made in writing via email to the Senior Psychology Training Director within 5 working days of notification regarding the decision with which the Intern is dissatisfied.
2. If requested, the Appeals Hearing will be conducted by a review panel convened by the Senior Psychology Training Director and consisting of the Training Director (or another supervisor, if appropriate) and at least two other members of the training staff who work directly with the Intern.
3. The Intern may request a specific member of the training faculty to serve on the review panel. The Appeals Hearing will be held within 10 working days of the Intern’s request.
4. The review panel will review all written materials and have an opportunity to interview the parties involved or any other individuals with relevant information.
5. The review panel may uphold the decisions made previously or may modify them. If the Intern is dissatisfied with the decision of the review panel, they may appeal the decision, in writing, to the Director.
6. If the Intern is dissatisfied with the decision, they may appeal the decision, in writing, to the Executive Director of Vaden Health Center.
7. Each of these levels of appeal must be submitted in writing within 5 working days of the decision being appealed. The Executive Director of Vaden Health Center has final discretion regarding outcome.

# **Grievance Procedures**

An Intern may have a complaint against any element of the training program. This may include but is not limited to a CAPS staff member(s), peers in training, a supervisor, exploitation, harassment, arbitrary, capricious, or discriminatory treatment, unfair evaluation practices, inappropriate or inadequate supervision or training, and violations of due process.

1. Interns should make every effort to resolve their complaints directly with the person who is the subject of the complaint. When such resolution is not practical due to power and authority differences or other factors, Interns are encouraged to seek consultation from a senior staff member to explore ways of reaching resolution.
2. If resolution is not possible directly with the person who is the subject of the complaint, Interns are then expected to discuss the situation with the Senior Psychology Training Director (or the Director if the Senior Psychology Training Director is the subject of the complaint).
3. Discussion with the Senior Psychology Training Director may result in conflict mediation processes being implemented as an initial course of action to assist in resolving the complaint. If the Intern wishes to lodge a formal complaint, then this will need to be submitted in writing to the Senior Psychology Training Director with sufficient details describing the nature of the alleged infractions. The Senior Psychology Training Director will then establish a fact-finding committee to investigate and review the complaint, and to recommend actions. The fact-finding committee will have 10 working days from receipt of the written complaint to issues its recommendations. A written response by the Senior Psychology Training Director shall be issued within 5 working days thereafter.
4. If an Intern is not satisfied with the Senior Psychology Training Director’s response, an appeal can be made to the Director of CAPS within 5 working days of receiving the decision. The Director will then set up an Arbitration Committee at the request of the Intern (following the same procedures outlined above). The Committee will have up to 10 working days to respond.
5. If the Intern wishes to appeal the Committee’s decision, then he or she must file a letter addressed to the Director within 5 working days of receiving the decision. The Director will have the option of upholding the Committee’s decision as being final; or the Director may then implement his or her own fact-finding procedures within an additional 5 working days, with up to 10 working days to respond with a decision. The Director’s decision after this second fact finding will be final within the agency.

**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.

# **Intern Qualifications**

Psychology Interns are graduate students who have advanced to candidacy in their doctoral programs, and who are eligible to accumulate supervised professional experience.

# **Equal Opportunity and Non-Discrimination Policy**

Stanford University does not discriminate on the basis of race, religious creed, color, national origin, ancestry, physical or mental disability, medical condition, genetic information, marital status, age, sex, sexual orientation, gender, gender identity, gender expression, military status, veteran status, or any other characteristic protected by law, in connection with any aspect of employment at Stanford.

# **Length and Hour Accrual**

CAPS is a full-time, 12-month internship from mid-August 2022 through mid-August 2023. Many graduate programs and Boards of Psychology (in states other than California) require 2000 hours of internship training which has become a standard for most 12 month, APA-accredited and APPIC member full-time internships. Hence, we have structured the training schedule to allow for the completion of 2000 hours. The California Board of Psychology permits a maximum of 44 hours of SPE (Supervised Professional Experience) per week. This schedule provides ample opportunity to complete 2000 hours as we expect interns will have sick days, medical appointments, and other limited requests for time off.

Request for time off, including designated time for professional development, must be approved by both the Training Director and your Primary Supervisor. A minimum of 25% of your total hours must be direct service hours per the APPIC requirement. Holidays, vacation, and sick leave are granted with the understanding that the contracted hours will be met. It is the intern’s responsibility to research the requirements for states for which they intend to pursue licensure.

# **Observed Holidays**

Labor Day

Thanksgiving and day after

Christmas Eve and Christmas Day

New Year’s Eve and New Year’s Day

Martin Luther King Jr.

President’s Day

Memorial Day

Juneteenth

Independence Day

Please be mindful that holidays, vacation, and sick leave hours are not included in your contracted “supervised professional experience” hours. The intern has contracted with the CA Board of Psychology and/or their graduate program to complete the contracted hours of training, exclusive of holidays, vacation, or sick leave, and our policies are compatible with that contract.

# **Stipend**

Interns receive $35,000 stipend paid monthly. Interns are not eligible for healthcare benefits. Interns receive a $2000 healthcare stipend for the purchase of a healthcare plan. Interns receive 120 hours of leave time, a $250 educational allowance, and 40 hours of professional development leave to be used for dissertation defense, graduation, or conferences.

# **Record Keeping**

The Training Director permanently maintains a file for each intern over the course of the internship year and thereafter. Intern personnel files contain internship application, match agreement, onboarding documentation, CA Board of Psychology Supervision Agreement and Verification of Experience Forms, certificates of internship completion, hour logs, evaluation forms, and any remediation plan/due process documentation when applicable). Current intern evaluations, as well as all evaluative documentation related to the internship program, are stored in both paper and electronic files. Electronic documentation is stored on the Training Director’s private computer account, which is part of the Stanford’s HIPAA compliant secure server and paper files are stored in a locked file cabinet in the office of the Training Director. Former intern files are maintained and secured in Vaden Administration perpetuity (for the purposes of verifying successful completion of internship, providing future licensure information, etc.).

The California Board of Psychology passed a regulation, effective January 1, 1994, and revised August 27, 2005, requiring that Interns maintain a Weekly Log of Supervised Professional Experience towards licensure (Weekly SPE Log). This log is not to be submitted at the time of application for licensure but should be available in the event the Board requests it. This log is maintained by the intern and submitted for electronic review by the training director on a monthly basis.

**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 learns 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 electronic 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. All the trainings are scheduled in the mornings to avoid interruptions to your required trainings. 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 completed, signed hour logs at their exit interviews.

# **Administrative and Technical Support**

CAPS administrative staff is made up of two individuals (one at 100% FTE and the other at 87.5% FTE) who manage the front desk and overall office administrative functions and operations. Vaden provides additional coverage as needed for unexpected absences that would impact daily front desk office operations.

Vaden has a designated technical support person provided by the University’s Information and Technology Services who is readily available to assist and troubleshoot regarding any technical issues and a designated Manager of Information Technology who primarily assists with technology related to the electronic medical system. Interns receive laptops, webcams, office telephones, and have access to personal and share drives, the electronic medical record, and receive the same clerical support offered to general professional staff.

# **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 15 days (120 hours) of vacation/personal time off during the year and do not accrue sick time. Four of those days are used over winter break. This is a mandatory closure as the university shuts down. Of the additional 11 days, five will be scheduled the final week of your training contract, August 7 – 11, 2023. This leaves a remaining 6 days to use any other time of year. The earliest you may end your internship is two weeks and a day prior to your scheduled end date which would be July 27, 2023.

# **Calling out 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 procedure for calling out sick:

1. text the Training Director and your Supervisor as soon as you know you will be out of the office.
2. cancel your clinical appointments by secure email, if able, and notify seminar leaders you will be absent.
3. email the Front Desk staff with further instructions about how to manage your clinical schedule for the day.
4. get well soon!

For COVID-19 related exposure or illness, interns are required to complete the Stanford Health Check and consult with Occupational Health. Please keep your supervisor and the Training Director informed of your status to return to work. If the intern is feeling able and needs to remain in isolation or quarantine, the intern may continue to work remotely.

# **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, locked 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. In addition, the Training Director will provide you with instructions for remote access to PnC and how to secure your phones. 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 it 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, area code first. You are advised to not share your direct number with students. Please provide them with the general CAPS phone number. You will not be provided with voicemail. You may be reached by phone call or text when on-call.

# **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. Please do not place personal stickers or other information on/in your laptop. Laptops are property of Stanford University.

# **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 and for teletherapy and telesupervision with Zoom. Webcams are to be used with client consent for videotaping sessions for supervision. You will receive training on our 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 daily and all offices are cleaned twice a day with hospital grade cleaning procedures to maintain the health and safety of staff. 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 storage. Please check with support staff for your office needs.

**V. Mechanics of Therapy Sessions**

# **Scheduling Clients**

All students are scheduled in Point n Click (PnC). CAPS Connects Clinicians 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, at the Kiosk, or in the Vaden Student Portal, electronically. 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 or starting the Zoom session. 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, WPO, and other referral resources. You will learn more about the role of our Case Managers and our Referral Coordinator at Orientation.

**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.

# **Recording of Sessions**

Sessions will only be recorded with the written consent of the client. Once a recording is made, it is transferred to the CAPS dedicated secure server. Recordings must be deleted from the secured server by the intern at the end of the month, point of termination, or at the end of the academic year whichever comes First. Interns will be using a HIPAA compliant Zoom Health Platform for their remote clinical work, training, and supervision.

# **Dress Code**

Staff at CAPS strives to provide a welcoming, 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, Licensed Professional Clinical Counselors, and Psychiatrists) who may 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 of 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.

# **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 are 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 and while on Zoom.

# **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).

# **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.

# **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.

# **Criteria for the Successful Completion of Internship**

In order to successfully complete the internship, each intern must meet the following criteria:

1. Successful completion of 2000 hours of Supervised Professional Experience (SPE) over a 12-month period. Interns are responsible for completing administrative paperwork and tracking their accrued hours.

2. No significant ethical violations committed by the intern.

3. Supervisor evaluations indicate the intern’s performance is consistent with the expected minimum level achievement required by end of year.

4. All clinical documentation is completed and co-signed by their supervisor(s).

5. All required evaluations of supervisors, training director, and training program are completed.

6. The intern has received evaluations from all supervisors and has completed the exit interview with the Director of Training

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