

JEWISH CHILD AND FAMILY SERVICES (JCFS) – APA Accredited*

Elaine Kersten Children's Center
255 Revere Dr. Suite 200
Northbrook, Illinois 60062

Department of Psychological Services

**PRE-DOCTORAL PSYCHOLOGY INTERNSHIP:
PROGRAM DESCRIPTION & OVERVIEW**

Program Purpose

Jewish Child and Family Services(JCFS), offers an 1850-hour (minimum), one-year, pre-doctoral internship in professional psychology to qualified graduate students from clinical or counseling psychology programs. The primary goal of the JCFS internship program is to prepare interns for future clinical practice as entry-level professional psychologists who can work competently with children, adolescents, and families.

Agency Overview

The mission of Jewish Child and Family Services is to enable individuals, children and families to grow and develop positively throughout their lives, by providing a continuum of quality services and resources that assist and support them and the community in the context of Jewish tradition calling upon us to care for those in need regardless of religion or heritage.

Programs and services of JCFS can be described as follows:

Therapeutic Services -- are geared toward helping children, adults, families and couples reach their fullest potential. Through application of theory and evidence-based practices, this array of services engages clients through compassion and care. *Individual, Family and Group Counseling* is available for clients of all ages struggling with a variety of lifecycle, mental health or personal crises. Our *Psychological Services* provide high quality, individualized assessments and consultations including autism spectrum consultations, parenting capacity assessments and psychological evaluations. The *System of Care* Program provides services to emotionally and behaviorally disturbed youth who are wards of the State of Illinois, from assessment to intensive therapy. The *Response Center* gives adolescents and their families the educational, psychological and medical services needed to enable them to make healthy life choices.

Therapeutic Education Services -- combine the latest innovative educational and therapeutic methods. Our programs enhance each child's ability to communicate and learn effectively and to build each child's sense of independence. Our highly trained professional staff include speech pathologists, occupational therapists, social workers, special education teachers and teachers that work together to give each child the most integrated and comprehensive treatment possible. The *Therapeutic Day School & Yeshiva* serves students in Grades 1-12 with emotional and behavioral disorders who have difficulties thriving in traditional education settings. The *Virginia Frank Child Development Center* provides a network of preventive and therapeutic services to parents and their young children, including a therapeutic nursery and kindergarten, counseling, workshops and groups addressing developmental issues and parenting.

Community Services -- promote awareness, support and education regarding emotional, psychological and developmental issues among community members. Services include: Holocaust Community Services for Holocaust survivors and their families; Family Life Education, The Jewish Healing Network for those

dealing with illness or loss, Refugee Resettlement, Keshev, serving the deaf and hard of hearing community, Organizational Consultation, Professional Clinical Training and Education through the Center for Practice Excellence, Referral and Information Services related to domestic abuse, Jewish adoption and legal services and Volunteer Services.

Caregiving Services -- provide short-term relief, residential support and substitute parenting for children and adults in the form of residential group homes and foster care, childcare services and community respite support.

The Center for Practice Excellence (CPE) -- located in JCFS's Elaine Kersten Children's Center, The Center for Practice Excellence was established in 1996 as an educational center committed to the development, research, and study of advanced clinical practice with children and their families. The CPE plans and implements professional conferences for agency staff and clinicians in the community. Training is offered on-site in the Kersten Center's state of the art facility, which includes a 70-seat auditorium, several conference rooms, and many treatment rooms equipped with video cameras and one-way mirrors.

JCFS is a partner in serving the community, supported by the Jewish United Fund/Jewish Federation, United Way, direct contributions, grants, bequests, income from legacies, and fees for services from individuals and government agencies. JCFS is a charter member of the Child Welfare League of America, licensed by the Illinois Department of Children and Family Services, approved by the Illinois State Board of Education and the Illinois Department of Mental Health, and accredited by the Council of Accreditation of Services for Families and Children (COA). In addition, JCFS is a member of the Child Care Association of Illinois, the Illinois Foster Parent Association, and the American Association of Children's Residential Centers. Serving over 3000 children, adolescents, and families annually, JCFS has an annual budget of over \$30 million dollars and a staff of approximately 600.

Historically, JCFS has demonstrated a budgetary commitment to the psychology program. Over the past several years JCFS has maintained a successful psychology practicum program, paid for post-doctoral training positions at the agency, supported the psychology staff and current interns to attend the APA Conference in 2002, and numerous outside training workshops for staff members. Additionally, JCFS has made a budgetary commitment to fund two paid intern positions. The budget also includes a benefit package, necessary supplies, time allotment for staff to supervise interns and facilitate seminars, time allotment for intern and supervisor training, and necessary space/administrative/office support. JCFS is also committed to providing the necessary financial support to obtain and maintain relevant accreditation status with APPIC and APA.

One-Year Full Time Requirement

The JCFS internship is a full-time (40 hours per week), 12-month program. To successfully complete the program, interns are required to complete a minimum of 1850 hours of work. The program begins on July 15th and ends July 14th (with necessary adjustments made if these days fall on a weekend). If an intern is unable to complete the required program hours due to illness or some other unexpected circumstance, he or she may petition for an extension of the training experience beyond the scheduled completion date. The training committee will make decisions regarding extensions of the training year on a case-by-case basis.

Respect for Cultural and Individual Differences

JCFS is committed to a policy of equal opportunity for all applicants for employment and/or training in a manner that is consistent with applicable local, state, and federal laws. In addition, the JCFS Internship Program is committed to promoting respect for and understanding of cultural and individual diversity. This is achieved through the agency's personnel policies, the internship and agency's didactic programming, the issues discussed and processed in supervision and training seminars, and the experience of working with the agency's client population which represents a diverse population.

JCFS makes every effort to recruit intern candidates, graduate trainees, and staff from a diverse background. Position openings are posted at local graduate programs that have a diverse student body. In addition, JCFS has budgetary allowances for outside clinical consultation on cases that may require additional information on a range of topics including diversity issues. Understanding human diversity issues is an integral part of the training program provided to interns. Competency in this area is one of the core goals of the internship program.

Program Philosophy, Objectives, and Training Model

Educational Philosophy and Training Model

The educational philosophy of the JCFS psychology internship program is based on a Practitioner-Developmental-Apprentice model. This model is based on a training mission emphasizing direct clinical practice consistent with the tradition of professional psychology training in the United States (practitioner), facilitating the transition from intern to professional psychologist (developmental), and providing consistent guidance for quality clinical service delivery, as well as, personal and professional growth (apprentice). Taken together, each of these categories builds upon an intern's prior training in psychology and provides a training experience that is sequential, cumulative, and graded in complexity.

As a social service agency that provides services across the lifespan, JCFS provides a natural setting for a developmental framework for clinical training. The primary mission of JCFS is to provide children, adolescents, adults, and their families with a range of individualized services that are based on assessed needs and strengths. In order to do this, all agency staff must share an appreciation of individual development, recognizing both typical and expected developmental patterns, as well as patterns that appear developmentally off course. This philosophy permeates into the psychology internship training as well. Interns are viewed in terms of their individually assessed needs and strengths, they are provided with training experiences that facilitate the transition from student to professional, and they are evaluated in terms of what would be expected of someone at their level of training. Goals and expectations for the interns change over the course of the training year, as they acquire new clinical skills and professional competencies. The interns' areas of needs and strengths are formally evaluated three times a year in addition to ongoing supervision. Appropriate and realistic goals are then established for the next review period. Expectations for clinical practice may change over the course of the year. For example, the first few times an intern provides testing feedback to a client she may do so with the assistance of a supervisor. As the year progresses, the intern may facilitate the feedback session on her own. Each intern is assigned either therapy or diagnostic externs that the intern is responsible for providing weekly supplemental supervision. This type of training opportunity allows the intern to experience work with trainees at an earlier developmental stage thereby providing the intern with a new perspective on her professional abilities. The intern receives supervision on this supervision that further aids the transition from student to professional. The interns are also active members of the internship selection committee by participating in the interview process alongside the Internship Faculty members. Overall, an intern's level of professional autonomy is hoped to increase as one's confidence level with newly acquired or enhance skills develops.

Strong and consistent relationships established between the intern and her supervisors serve to establish the apprentice aspect of the JCFS internship program. The apprentice relationships become the vehicle to develop clinical and related professional skills in a supportive training environment. Interns sit side-by-side primary supervisors in case-staffings and case reviews. The interns are able to observe firsthand how a professional psychologist conducts herself in such an environment. Interns participate in the Psychology Seminar. Throughout this seminar, the interns are given the opportunity to hear supervisors present their own cases. Interns are given opportunities to observe supervisors engaged in providing therapy or testing. Depending on work setting and case assignments, an intern may also have the opportunity to be a co-therapist with a supervisor or agency clinician. Finally, the JCFS psychology program has a series of videotapes of Internship Faculty members conducting either testing or therapy. These tapes allow further opportunities for the training faculty to model appropriate clinical work. Interns are welcome to view these tapes for training purposes.

The integration of scientific research and clinical practice is emphasized within the psychology department, as well as within the Center for Practice Excellence (CPE), the larger division of JCFS in which the internship program is affiliated. The CPE is committed to quality improvement, grant proposal writing, program planning and development, scientific research informing clinical practice as well public policy, outcome research, and the training of mental health professionals within JCFS and the community. Consistent with the function and purpose of the CPE, interns are exposed to the integration of research and practice through individual and group supervision, assigned case presentations, didactic seminars, assigned readings in professional journals, access to reference materials from area university libraries and online databases, and agency sponsored and co-sponsored professional workshops and seminars.

Education and Training Objectives

By the end of the internship-training year, each intern will be able to demonstrate an intermediate to advanced level of knowledge and competence with children, adolescents, and families in each of the following core areas:

Assessment and Evaluation: Assessment and evaluation competencies involve the ability to provide ongoing client assessment throughout each phase of the treatment process (initial assessment, quarterly case reviews, and termination summaries), as well as the ability to conduct formal psychological evaluations. **Related objectives for this area of competence include:**

1. Demonstrating the ability to engage client or client systems for the purpose of assessment or evaluation.
2. Utilizing appropriate diagnostic interviewing techniques.
3. Demonstrating skills in fact finding (history, family of origin, prior treatment attempts, medical and psychiatric histories, etc), through interviews, record reviews, and collateral contacts.
4. Ability to articulate both on paper and verbally individual and family strengths and deficits, family system dynamics, impact of social environment (for example community, school, peers), diagnostic signs and symptoms, relevant background information, behavioral observations and mental status, and formulation of treatment goals.
5. Completing case documentation (intake assessments, quarterly case reviews, and termination/transfer summaries) that accurately reflects information obtained through client interactions, client progress on treatment goals, and collateral contacts.
6. Effectively selecting, administering, scoring, and interpreting a range of psychological tests consistent with the needs of the client and the intern's level of training.
7. Conceptualizing appropriate diagnoses by demonstrating knowledge and familiarity with using the DSM-IV.
8. Conducting timely and sensitive feedback sessions with the client and or other professionals at the end of an assessment or formal testing.
9. Interns will complete at least one comprehensive psychological evaluation every 4-6 weeks.
10. Writing high quality reports that reflect: the use of "reader friendly" language; the use of theoretical and research knowledge in formulating sensitive and appropriate inferences about the client, his/her background, and diagnoses; and when indicated either realistic, individualized, and well defined treatment goals or recommendations for intervention.

The development of Assessment and Evaluation competencies are observed and measured through individual supervision, the intern seminar, live observation of client feedback sessions, written reports, case reviews, and case-staffings.

Therapeutic Intervention: Therapeutic Intervention competencies relate to demonstrated skills and proficiency in those activities related to direct clinical service for the purpose of treatment for clients and their families. These interventions involve activities that improve client functioning through psycho-education, case management, psychotherapy, and coordination with other service providers. **Related objectives for this area of competence include:**

1. Demonstrating knowledge and competence in the selection and implementation of appropriate therapeutic and psycho-educational techniques within the context of individual, group, and family therapy.
2. Utilizing developmentally appropriate therapeutic techniques within the context of individual, group, and family therapy. Techniques should be developmentally appropriate for client's age, as well as, level intellectual and emotional functioning. Essentially, interns demonstrate the ability to "meet a client" where he or she is.
3. Treating children within the context of their families and when indicated providing supportive and psycho-educational parent guidance.
4. Demonstrating knowledge of specific theories of intervention and their related techniques.
5. Demonstrating the ability to conceptualize cases according to a particular theory or combination of theories that is clinically sound.
6. Providing case management services which demonstrate coordination with other service providers and community resources to meet the needs of the client and his/her family.
7. Formulating realistic and appropriate treatment goals with the client. These goals should be individualized and take into account the client's identified areas of strength as well as weakness.

The development of Therapeutic Intervention competencies are observed and measured through individual supervision, audio and videotapes, live observation of client sessions (when feasible), case reviews, case presentations, and process recording notes.

Establishing and Maintaining Quality Therapeutic Relationships: Although JCFS promotes and supports the use of a range of specific theories of intervention and their related techniques, the establishment and maintenance of quality therapeutic relationships is viewed as the core of meaningful service delivery. **Related objectives for this area of competence include:**

1. Communicating empathy, respect, and warmth to clients for the purpose of establishing rapport and a working therapeutic alliance.
2. Demonstrating the ability to address ruptures and/or strains within the working alliance.
3. Implementing a thoughtful and professional termination process at the conclusion of therapy.
4. Maintaining a collaborative and empathic attitude towards clients and an appreciation for individual differences.
5. Demonstrating the ability to form therapeutic relationships with individuals of various ages, developmental levels, and with a range of presenting problems.

The development of Therapeutic Relationship competencies is observed and measured through individual supervision, exploration of the interns personal reaction(s) to client, audio and videotapes, live observation of client sessions, case reviews, case presentations, and process recording notes.

Application of Scientific Research to Clinical Practice: The Application of Scientific Research to Clinical Practice competency relates to the interns' ability to pursue and integrate information from the literature that is relevant to their clinical cases and work at JCFS. **Related objectives for this area of competence include:**

1. Pursuing relevant information in professional journals and books.
2. Discussing and exploring with supervisors, colleagues, and peers how newly discovered information could be applied and integrated into clinical practice.
3. Constructively and critically evaluating information in published research articles prior to incorporating the findings into clinical practice.

The development of Application of Scientific Research to Clinical Practice competency is observed and measured through individual supervision, training seminars, case reviews, case presentations, and written reports.

Consultation: Consultation competencies involve planned collaborative interactions with agency colleagues, as well as professionals in the community for the purpose of imparting knowledge and expertise on an identified problem area, topic, or clinical issue. Consultation is considered an intervention process for either identified individual(s) or an organization in which the intern does not have direct responsibility for the outcome or process of change. **Related objectives for this area of competence include:**

1. Pursuing and maintaining areas of specialization and expertise relevant to the needs of the agency. This can be accomplished by consulting experts, supervisors, or the literature.
2. Recognizing personal limitations in regards to knowledge and expertise when consulting.
3. Imparting information in a manner that is user friendly.
4. Appropriately gearing presentations to colleagues or professionals in the community to meet the needs of the audience.
5. Being available and approachable to meet the requests of those requesting consultation.
6. Responding to requests for consultation in a timely and courteous manner.
7. Providing useful, thorough, and thoughtful consultation to colleagues within the agency and/or professionals in the community.

The development of Consultation competencies is observed and measured through individual supervision, staff meetings, and feedback from those parties receiving consultation services.

Professional Conduct: Professional conduct competencies relate to the interns' ability to conduct oneself in a manner conducive to forming and maintaining meaningful working alliances with colleagues, peers, supervisors, service providers within the community, and professionals from other disciplines. In addition, these competencies relate to the interns' ability to conduct oneself in a manner that promotes personal and professional growth. **Related objectives for this area of competence include:**

1. Maintaining an open and committed attitude towards self-evaluation and learning.
2. Recognizing the limits and use of supervision and consultation.
3. Cooperating and collaborating with other professionals and service providers both within and outside JCFS.
4. Respecting client confidentiality.
5. Completing necessary case documentation for the purpose of case management in a timely manner.
6. Conducting professional activities in a conscientious, energetic, and responsible manner.
7. Maintaining a professional and appropriate personal appearance.
8. Remaining open to feedback from peers, colleagues, and supervisors.
9. Incorporating feedback from others in a meaningful and appropriate manner.
10. Utilizing supervision to explore personal reactions to clients and how these reactions may be impacting the treatment and/or therapeutic relationship.
11. Actively and constructively participating in training seminar.
12. Willing to share audiotapes, videotapes, and/or live observation with supervisor(s), peers, and/or other staff members as deemed appropriate and with client consent.
13. Demonstrating knowledge of the APA Code of Ethics and familiarity with state laws regarding mental health and confidentiality.

The development of Professional Conduct competencies is observed and measured through individual supervision, staff meeting, case reviews, training seminars, feedback from agency supervisors and other service providers.

Diversity: Diversity competencies relate to the interns' ability to show respect, appreciation, and understanding for the cultural and/or individual differences of clients, colleagues, and peers. **Related objectives for this area of competence include:**

1. Demonstrating an awareness of personal cultural biases, values, and assumptions and the impact of these on relationships with clients.
2. Demonstrating sensitivity to cultural and individual differences as they impact on outcomes related to assessment, treatment, and consultation.

3. Seeking relevant information and knowledge pertaining to cultural and individual differences as indicated by a particular case.
4. Addressing in supervision any issues and personal reactions to cultural and individual differences that may arise.

The development of Diversity competencies is observed and measured through individual supervision, case reviews, written reports, and training seminars.

Clinical Training: Clinical training competencies relate to the interns' commitment to JCFS's ongoing clinical training services to agency staff and students, as well as service providers from the community. For the interns, these services include the planning and implementation of presentations and providing supplemental supervision of practicum students. **Related objectives for this area of competence include:**

1. Demonstrating a willingness and initiative to facilitate an in-service training presentation for agency clinicians and trainees on a topic of expertise.
2. Conducting presentations in an informed, organized, and professional manner.
3. Adjusting the presentation to the needs and level of understanding of the audience.
4. Establishing a positive working relationship with practicum students.
5. Recognizing and addressing the developmental needs of the practicum student.
6. Balancing support and challenge when providing guidance to practicum students.
7. Advocating for practicum students in terms of assignments, assimilation into placement, and areas for growth.
8. Meeting regularly with practicum students for supervision.
9. Maintaining an available and approachable attitude towards practicum students.
10. Identifying and addressing areas of strength and growth for the practicum student through ongoing feedback.
11. Sharing areas of concern related to trainee supervision with the Director of Training and when appropriate other internship supervisors.
12. Conducting oneself professionally and constructively as a member of the Intern Selection Committee, as well as in the process of selecting and interviewing practicum students.

The development of Clinical Training competencies is observed and measured through individual and group supervision on the planning of presentations, individual and group supervision on the supervision of practicum students, feedback from audience members of presentations, direct observation of presentations, and feedback from practicum students.

In addition to the aforementioned areas of competence, JCFS interns are expected to develop and maintain abilities related to **critical thinking, quality communication, autonomy, and personal initiative**. These abilities are seen as interfacing with each training goal and objective, rather than being isolated skills. Specifically, interns are expected to: produce quality written and verbal communications and reports, formulate logical inferences and hypotheses to guide work, evaluate own thinking process, reflect before taking professional action, pursue relevant information in the literature, recognize personal capabilities for independent work versus need for guidance, and take initiative on case assignments and special projects.

Program Structure and Training Methods

Sequence, Intensity, Duration, and Frequency of Training Activities

JCFS's Practitioner-Developmental-Apprentice model of training is accomplished through a variety of carefully planned and sequenced activities related to the practice of professional psychology. In order for each intern to experience a degree of depth and intensity in their time at JCFS, training activities run concurrently for the entire training year. Interns are oriented to JCFS during their first two weeks at JCFS. During this time, interns have: frequent orientation meetings with the Director of Training; initial meetings with each supervisor; meetings with various program directors and specialists within the agency; orientation with human resources; and training on agency documentation and forms. These meetings

assist in the interns' assimilation into the agency. The mid-summer starting date for interns is intentionally scheduled to fall during a time of year when agency activities are "quieter." This allows for a gradual introduction into the agency, an increase in availability of staff agency-wide, and for the interns to become acclimated before the practicum students begin in the fall.

During the initial phase of the training year interns are oriented to the agency and are closely guided through their case assignments and activities. Throughout this phase, supervisors are available to observe through a one-way mirror, join live sessions, or review audio/videotapes of sessions. In some situations, like consultation to an organization, the intern may shadow a supervisor for a period of time. Training tapes are available that demonstrate various members of the Internship Faculty administering psychological tests or conducting therapy. The interns' caseloads are built gradually during this period until at least 40% of their time is spent in direct service delivery. Program assignments are structured to provide direct clinical experiences that are graded in terms of case complexity, variety of presenting problems, and number of clients served. During the middle phase of the training year interns continue to be closely supervised through the use of audio and videotapes, written case reports, process notes, and verbal reports of clinical activity. As the year progresses, interns are expected to balance their need for close guidance with a developing sense of confidence and competence in the decisions they make and services they provide. Interns should come to feel integrated into the agency in a manner consistent with staff clinicians. During the final phase of internship, the interns' role at JCFS should be almost indistinguishable from that of a staff member. The input and feedback provided by interns on cases should be valued and respected enough by colleagues, that as the interns approach the end of the year, their absence will be noticed and presence missed.

Training Methods and Experiential Professional Activities

Each intern is assigned clinical and direct service responsibilities within the following areas at JCFS. Assignments are for 12 months and run concurrently.

Community Counseling Centers

The Community Counseling Centers of JCFS are community based offices that provide an array of outpatient services including: individual psychotherapy, play therapy, parent guidance, family therapy, group therapy, therapeutic family day care, and consultation to organizations in the community. JCFS has five outpatient counseling centers in the Chicago metropolitan area. One intern is placed at the Chicago Community Counseling Office located in the Rogers Park area of Chicago, and one intern is placed at the North Suburban Counseling Center located in Northbrook, a northern suburb of Chicago. The populations served by the Regional Child and Family Centers represent a wide range of cultures, presenting problems, diagnoses, family structures, and socio-economic levels. Each intern is assigned a caseload of at least six cases. Depending upon the needs of each case, the intern may provide several modalities of treatment to the same case. For example, an intern may see the child in weekly play therapy, meet with the parents weekly for parent guidance, and do family therapy once every two weeks. Every effort is made to give each intern at least one experience as a group therapy co-therapist during the training year. JCFS offers a variety of time-limited groups for children and parents. **Intern activities in the Community Counseling Centers include but are not limited to: child/adolescent individual psychotherapy, parent guidance, family therapy, group therapy, psycho-education, development of treatment plans, intake assessments, termination summaries, case reviews, staff meetings, consultation with colleagues, collaboration with service providers in the community, crisis intervention, and case management.**

Psychological Services: Testing and Evaluation

The Department of Psychological Services provides psychological testing, evaluation, and consultation agency-wide. All requests for psychological services are directed to the Director of Psychological Services who in turn makes case assignments to interns, psychology staff members, or practicum students. Specific psychological services include: full battery psychological assessment, assessment of intellectual/cognitive functioning, assessment of emotional functioning, psycho-educational testing, early childhood assessment, differential diagnostic assessment, assessment of autism spectrum disorders, and consultation on assessments done previously by professionals in the community. Assessments are requested for clients who present with a wide range of presenting problems and symptoms. In addition,

assessments are completed on clients referred through JCFS outpatient counseling centers, clients who are in foster care or residential treatment and wards of the Illinois Department of Children and Family Services, and outpatient clients referred from the community. The interns are trained in the administration, scoring, and interpretation of a variety of testing instruments while at JCFS. Each evaluation is individualized based on the reason for referral. Interns are expected to write comprehensive reports and provide feedback to the client and/or family as a part of the evaluation process. Finally, interns may have the opportunity to be assessment team members for parenting capacity assessments and assessment of autism spectrum disorders. Given the highly specialized nature of these assessments, the interns would primarily be active observers on the assessment team. In some cases, they may be qualified to do a portion of the assessment. **Intern activities in this area include: the administration, scoring, and interpreting of psychological tests, report writing, and feedback sessions.**

Consultation

Each intern functions as a consultant to either an agency program or an organization in the community. One intern is assigned as a consultant to the System of Care (SOC) program at JCFS. This program serves clients who are at high risk for rupturing their foster care placement. The SOC staff is comprised of social workers and/or master level clinicians in counseling psychology. They work hard to provide intensive therapy, as well as linkage to community resources to maintain their clients in their current foster home. The intern assigned to SOC spends between 3-5 hours per week in formal consultation to this program. The intern attends the weekly SOC staff meeting and is available for individually scheduled consultations. The intern provides input, feedback, and guidance on treatment goals, assessment needs, and previously completed psychological evaluations. One intern is assigned as a consultant to the Integrated Pediatric Interventions (IPI) program at JCFS. This program serves children from birth to age nine with developmental delays. The IPI staff is comprised of speech, occupational and developmental therapists who, along with social workers and psychologists, assess and address each child's developmental needs. IPI's comprehensive services include evaluations, developmental therapy, speech and language therapy, occupational therapy and social skills development. The intern assigned to IPI spends 3 hours biweekly in a formal consultation, wherein he/she attends staff meetings to discuss clinical cases. Additionally, the intern provides individually scheduled consultations and observations of client sessions to provide feedback and guidance on treatment goals and progress. At times, an intern may be requested to do a topic-related presentation to the group in which they consult. Finally, interns provide consultation on psychology-related matters to colleagues within each of their assigned programs. These consultations may be formally requested or occur informally. Intern activities in this area include but are not limited to: providing input, feedback and guidance on identified client issues, reviewing previously completed evaluations, imparting knowledge and information, screening and/or observing children who have been identified as presenting with some type of concern, collaborating with other service providers and professionals, and doing topic-related presentations.

Supervision, Training Seminars, and Professional Activities

Individual Supervision

Each intern receives at least three hours of weekly scheduled supervision from a licensed clinical psychologist who is a member of the Internship Faculty. Two hours of supervision are for treatment cases and one hour is for assessment cases. Supplemental supervision may be provided by additional Internship Faculty members or other agency supervisors who are licensed clinical social workers.

Staff Meetings

Each intern attends the weekly ninety-minute multi-disciplinary staff meeting held in the Regional Mental Health offices. These meetings are led by a licensed clinical social worker. One of the intern's primary supervisors is also in attendance at these meetings. The purpose of these meeting is to discuss and review outpatient treatment cases and discuss office and/or agency related agenda items.

Internship Seminar

The Internship seminar meets weekly for one hour. Seminar leadership rotates approximately every 6-12 weeks between members of the Internship Faculty. The seminar is primarily didactic, however, a portion

of seminar time is allotted for discussion and group supervision of cases as they pertain to the topic. The Internship Seminar is broken down into segments reflecting areas of expertise of each staff member within the Department of Psychological Services. Previous segments have included such areas as: Anxiety Disorders, Stress Management Techniques, and Clinician Self-Care; Trauma and Attachment Theory; Art & Play Therapy with Children; Professional Development & Life Beyond Internship, Use Evidence Based Practices, Consultation & Supervision, the Significance of Mindfulness in Psychotherapy, and Complex Factors Underlying Resistance to Treatment.

Psychology Seminar

This seminar meets at least every two weeks for 90 minutes and follows the agency-wide in-service training schedule calendar. Psychology staff members, consultants, interns, and externs attend this seminar. This seminar focuses on case presentations, live clinical work, presentations of empirically supported treatments, and relevant topic presentations. Each segment of the seminar is related to a broad theme such as: loss, developmental disabilities, serious mental illness, poverty, parenting, families, community, executive functioning disorders, or a particular theoretical orientation. In addition, issues related to cultural diversity are integrated into each broad theme. Broad themes are identified based on the types of clients being seen in therapy and being tested during the year. Interns are required to present at least one therapy case that reflects evidenced based practice, as well as one testing case. Externs are required to present either a testing case or therapy case. Staff members are expected to present either a testing case or a therapy case reflecting an evidenced based practice and/or a videotape of a therapy session. All case presentations should have accompanying readings, including a piece of evidenced based practice that has been rated using the Quality of Study Rating Form (QSRF). Whenever possible, seminar participants are strongly encouraged to present live clinical work utilizing one-way mirrors or audio/video samples of work. Finally, guest speakers from the community may be invited to present as indicated throughout the year. Facilitation of this seminar will rotate between the psychology staff members.

Supervision of Practicum Students

Each intern is assigned either a diagnostic or therapy practicum student in which to supervise. The intern is responsible for meeting weekly for one hour with her student. Supervision of this supervision is incorporated into the interns' individual supervision and group supervision with the Director of Training. In addition, once the intern seminar segment on Supervision & Consultation ends, the facilitator for that segment continues to meet with the interns monthly for one-hour to discuss any emerging issues related to supervision or consultation.

Student Group Work Clinic [optional]

All JCFS externs and interns are invited to participate in a twice per month training clinic devoted to group therapy. The group work clinic is co-facilitated by a licensed clinical social worker that specializes in group therapy, and a staff member from the Department of Psychological Services. During this clinic, trainees are given the opportunity to discuss issues related to preparing for an upcoming group they will lead, ongoing issues in a group they are currently leading, and/or terminating a group. In addition, the group work clinic facilitators provide a didactic component to this training seminar through assigned readings and lectures.

Agency Wide In-Service Training

JCFS places considerable value on in-service training and has a well-established ongoing Friday morning in-service training program. Interns are invited and encouraged to attend agency-wide options seminars, workshops, and conferences. These in-services are aimed to both enhance the skills and clinical understanding of staff and trainees and to benefit the clients that JCFS serves. The training curriculum offers sessions on selected topics in working with children, adolescents, and families. Options seminar is seventy-five minutes in length and may be on one topic for one-session or a series of sessions. The topics offered are intended to meet the varying needs and special interests of agency clinicians. Options seminar is offered at least once per month. Workshops are three hours long and held once every two months for agency clinicians. Options seminars and workshops may be facilitated by an agency staff member or professional from the community with a particular area of expertise. At least once per year, JCFS hosts an all-day conference open to professionals in the community. These conferences feature

nationally and regionally recognized experts on the topic(s) being presented. Given the cost and public attendance associated with these conferences, agency clinicians and interns may attend these conferences at the discretion of their supervisor and pending space at the conference. Finally, JCFS hosts the ongoing workshop series sponsored by the Illinois Association for Infant Mental Health. Agency clinicians and trainees are invited to attend these workshops at no charge.

Director of Training (group supervision 30 min. per week)

The interns meet once a week for thirty minutes with the Director of Training to discuss training, administrative, research, and clinical issues of the interns' choosing. This time may be spent on group supervision of a particular case. In addition, this time is utilized to obtain feedback from the interns on their training experiences at JCFS. When indicated, the meeting time will be lengthened. During the first six weeks of the internship-training year, this meeting is ninety minutes long during which time the emphasis is acclimating the interns to JCFS.

Dissertation Time and Supervision

Interns are allowed to schedule up to four hours per month of dissertation time. This is to be arranged with the Director of Training.

APPLICATION PROCESS

The following documents should be included in the application packet:

1. Resume/Curriculum Vitae
2. Two writing samples of psychological reports. These samples, if possible, should reflect at least assessments completed on children and/or adolescents ages 4-18 years. Please be sure to change all identifying information.
3. Three letters of recommendation. These letters should reflect an applicant's clinical experience, and preferably be written by previous clinical supervisors.
4. Graduate transcripts.
5. APPIC Application Packet with match number.

APPLICATION PACKETS MUST BE RECEIVED BY November 5th.

Applicants will be notified by Email as to whether or not they will be invited to interview. Applicants will be notified of interview status by December 15th. The Intern Selection Committee will review application packets, and selected applicants will be contacted by Email to schedule an interview.

PLEASE NOTE: A CAR IS REQUIRED FOR THIS INTERNSHIP SITE

INTERVIEW PROCESS

JCFS will host at least 2 different interview days for intern candidates. The interview day will consist of a rotating interviews with different members of the department, as well as current interviews. The on-site interview process will take approximately 2.5 hours. Once the interview process is complete, the Intern Selection Committee will rank order intern candidates.

Applicants will be ranked and notified of internship offers in accordance with the APPIC guidelines.

Stipend and Benefits

Stipend: \$20,000.00 annual + an additional one-time only payment of \$830.00 added to the intern's final paycheck for 12 days of Paid Personal Time which they are not allowed to use in order to meet the minimum number of hours worked for a full-time internship.

Overview of Benefits:

- 10 days Paid Personal Time
- up to 12 paid Sick Days
- 6 National Holidays and up to 13 Jewish Holidays per year
- Medical/Health Insurance Choice of 4 HMO plans or 1 fee for Service Plan
- Tax Deferred Annuity Account 403-B Several plans available
- Direct Deposit
- Transit/Parking Voucher
- Flexible Dollars for Pre-tax Insurance Premiums, Dependent Child Care, and Medical Spending Account
- Dental Insurance (after 6 months)
- Vision Insurance (after 6 months)

Examples of Previous In-Serving Training Presentations

Workshop: Children and Adolescents with Bi-Polar Disorder

Presenters: Josselyn Center Staff: Steve Vogelsteis, LCSW, Director of Child and Adolescent Sustaining Cae and Rena Good friend-Leve, M.D., Child Psychiatrist

Presentation: A Multi-Disciplinary Approach to Treating Pregnant and Parenting Teens

Presenter: Various JCFS staff

Presentation: Investigative Interviews of Child Sexual Abuse

Presenters: Children's Advocacy Center Staff, Marc Parr, LCSW Executive Director and Cathy LeVan, MSW, Family Support Services Coordinator

Workshop: A Review of the Dynamics of Sexual Abuse

Presenter: Steve Spaccarelli, Ph.D., Clinical Director of Causes

Presentation: Learning Disabilities: Types of Disabilities, Assessment, Who Gets Services, and Expected Outcome for Students."

Presenter: Betsy Turovitz, MA, JCFS Therapeutic Day School

Presentation: Supporting the Family When a Parent Has a Cognitive Disability

Presenter: Susan Kaplan, LCSW and Nancy Mork, LCSW

Ongoing Clinician Self-Care series including Yoga, Massage, and Time Management

Presentation: Domestic Violence: Diagnosis, Treatment, and Collaboration

Presenters: Shalva Staff

Workshop: Turning Children on their Heads: Cognitive Therapy of Behavioral and Emotional Problems during Childhood and Adolescence

Presenter: Mark Rieneke, Ph.D., University of Chicago, Department of Psychiatry

Presentation: The Mirror Has Many Faces: Issues of Cultural Identity and the Role in Treatment

Presenter: Tatyana Fertelmeyster, LCPC

Presentation: Clinical Issues in the Development of Body Image

Presenters: Graciela Val, Psy.D. and David Reisberg, D.D.S., UIC

Presentation: Divorce Mediator: Conflict Resolution with Divorcing Parents
Presenter: Lynn Shyman, LCSW

Presentation: Personal Safety and Self Defense: An Introductory Workshop on Workplace Safety for Clinicians
Presenter: Margaret Vimont, LCSW

Jewish Child and Family Services
PREDOCTORAL INTERNSHIP IN CLINICAL PSYCHOLOGY
DUE PROCESS GUIDELINES

DEFINITION OF PROBLEM

For purposes of this document intern problem 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, psychological dysfunctions, and/or excessive emotional reactions which interfere with professional functioning.

While it is a professional judgment as to when an intern's behavior becomes more serious (i.e., problematic) rather than just of concern, for purposes of this document a concern refers to a trainees' behaviors, attitudes, or characteristics which, while of concern and which may require remediation, are perceived to be not unexpected or excessive for professionals in training. Problems typically become identified as problems 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 which 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 trainee'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 the intern class

The Pre-Doctoral Internship in Clinical Psychology at Jewish Child and Family Services
General Guidelines for Intern and Training Program Responsibilities

The Psychology Predoctoral Internship is designed as a General Internship and is seen as a component of the doctoral training process in Clinical Psychology. The goal of the JCFS internship program is to prepare interns for future independent practice. This internship assists interns in developing a variety of skills related to being a professional psychologist. These skills include clinical work, as well as, program planning and development, consultation, supervision, and research. JCFS's goal is for each intern to complete internship with a sense of confidence and competence in each of these areas.

I. Training Program's Expectation of Interns

The expectations of interns are divided into three areas:

- 1) knowledge of and conformity to relevant professional standards,
- 2) acquisition of appropriate professional skills, and
- 3) appropriate management of personal concerns and issues as they relate to professional functioning.

Each of these areas is described below:

A. Professional Standards

Interns are expected to:

1. Be cognizant of and abide by the guidelines as stated in the APA Ethical Principles of Psychologists and Code of Conduct, Standards for Providers of Speciality Guidelines, and any other relevant, professional documents or standards which address psychologists' ethical, personal and/or legal responsibilities.
2. Be cognizant of and abide by the laws and regulations governing the practice of psychology in the state of Illinois as included in appropriate legal documents.

It is recognized by the training program that mere knowledge of and exposure to the above guidelines and standards are not sufficient. Interns need to demonstrate the ability to integrate relevant professional standards into their own repertoire of professional and personal behavior. Examples of such integration include a demonstrated awareness of ethical issues when they arise in work with clients, appropriate decision-making in other ethical situations, and awareness of ethical considerations in their own and other's professional work.

B. Professional Competency

By the time the internship is complete, interns are expected to have:

1. Demonstrate knowledge of psychopathology and of developmental, psychosocial and psychological problems.
2. Demonstrate knowledge of the special issues involved in working with children, adolescents, and families.
3. Demonstrate comprehensive assessment skills including the ability to make appropriate diagnoses, utilize a range of assessment procedures, write thorough and "reader friendly" reports, and conduct sensitive feedback sessions with the client(s).
4. Demonstrate knowledge and skills in therapeutic treatment, including psychotherapy (various modalities), case management, family therapy, group psychotherapy, parent guidance, and crisis intervention.
5. Demonstrate skills in the cooperation and collaboration with peers and professionals.

The minimum requirement for successful completion of internship is an average rating of at least Adequate across each area of competency listed above.

C. Personal Functioning

It is recognized by the training program that there is a relationship between level of personal functioning and effectiveness as a professional psychologist, most notably in one's role delivering direct services to clients. Physical, emotional and/or educational problems may interfere with the quality of an intern's professional work. Such problems include but are not limited to a) educational or academic deficiencies,

b) psychological adjustment problems and/or inappropriate emotional responses, c) inappropriate management of personal stress, d) inadequate level of self-directed professional development, and e) inappropriate use of and/or response to supervision.

When such problems significantly interfere with an intern's professional functioning, such problems will be communicated in writing to the intern. The training program, in conjunction with the intern, will formulate strategies for ameliorating such problems and will implement such strategies and procedures. If such attempts do not restore the intern to an acceptable level of professional functioning within a reasonable period of time, discontinuation in the program may result.

II General Responsibilities of the Intern Program

A major focus of internship is to assist interns in integrating their personal values, attitudes and functioning as individuals with their professional functioning. The training program is committed to providing the type of learning environment in which an intern can meaningfully explore personal issues which relate to his/her professional functioning. In response to the above intern expectations, the training program assumes a number of general responsibilities. The responsibilities correspond to the three general expectation areas (Professional Standards, Professional Competency, Personal Functioning) and are described below:

A. The Training Program

1. The training program will provide interns with information regarding relevant professional standards and guidelines as well as providing appropriate forums to discuss the implementations of such standards.
2. The training program will provide interns with information regarding relevant legal regulations which govern the practice of psychology as well as providing appropriate forums to discuss the implementations of such guidelines.
3. The training program will provide written evaluations of the intern's progress with the timing and content of such evaluations designed to facilitate interns' change and growth as professionals. Evaluations will address the interns' knowledge of and adherence to professional standards, their professional skill competency, and their personal functioning as it relates to the delivery of professional services.

In accepting the above responsibilities, the internship program will maintain ongoing communications with the intern's graduate department regarding the trainee's progress during the internship year. The training program will provide appropriate mechanisms by which inappropriate intern behavior effecting professional functioning is brought to the attention of the intern. The training program will also maintain intern procedures, including grievance and due process guidelines, to address and remediate perceived problems as they relate to professional standards, professional competency and/or professional functioning.

INTERN EVALUATION, REVIEW AND DUE PROCESS PROCEDURES

I The Evaluation Process

Interns are evaluated and given feedback throughout the year by their individual supervision in both formal and informal settings. Each supervisor evaluates the interns' performance every six months. Additionally, at the end of each review period, the staff evaluates interns' performance and makes recommendations for the next review period as well as future needs the intern may experience. The Trainee Evaluation Form is completed by supervisors at the end of the review period. This evaluation is discussed with the intern and then given to the Training Director. The TD at the end of each review period, meets with the interns individually and gives them an

integrated report of the evaluations of their performance and makes those recommendations and suggestions which are relevant.

Thus, the TD receives information from all supervisors, her own impressions and those of others who have had significant contact with the intern. This process is viewed as an opportunity for the TD to provide integrative feedback regarding the collective experience of others who have had significant interactions with the intern. Both parties discuss how the internship experience is progressing, and the intern is provided with the opportunity to give his/her reactions and critiques of supervisors and other aspects of the training experience. It may be in the context of this meeting or whenever during the review period that a problem is identified that the TD and the intern may arrange for a modification of the intern's training program to address his/her training needs and/or the needs of the training program.

It is important that in the course of the internship the sponsoring university is kept apprised of the intern's training experience. The TD communicates with the sponsoring university twice a year or regarding the intern's progress.

II Initial Procedures for Responding to Inadequate Performance by an Intern (i.e.: Intern Problem)

If an intern receives an Overall Rating of "Improvement Needed" or "Inadequate" in a competency area, from any of the evaluation sources, the following procedures will be initiated:

- A. The intern's supervisor will meet with the TD to discuss the rating and determine what action needs to be taken to address the issues reflected by the rating.
- B. The intern will be notified, in writing, that such a review is occurring and will have the opportunity to provide a statement related to his/her response to the rating.
- C. In discussing the inadequate rating and the intern's response, (if available) the TD may adopt any one or more of the following methods or may take any other appropriate action. She may issue a:
 - 1) "Acknowledge Notice" which formally acknowledges a) that the faculty is aware of and concerned with the rating, b) that the rating has been brought to the attention of the intern, c) that the staff will work with the intern to specify the steps necessary to rectify the problem or skill deficits addressed by the rating, and d) that the behaviors associated with the rating are not significant enough to warrant serious action.
 - 2) "Probation" which defines a relationship such that the staff members, through the supervisors and TD, actively and systematically monitor, 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 probation is a written statement to the intern and includes:
 - a) The actual behaviors associated with the inadequate rating,
 - b) The specific recommendations for rectifying the problem,,
 - c) The time frame for the probation during which the problem is expected to be ameliorated, and
 - d) The procedures designed to ascertain whether the problem has been appropriately rectified, or
 - 3) Take no further action.
- D. The TD will then meet with the intern to review the action taken. If "Probation," the intern may choose to accept the conditions or may choose to challenge the action. The procedures for challenging the action are presented in section III of this document.
- E. If either the Acknowledgment Notice or the Probation Action occurs, the TD will inform the intern's sponsoring university, indicating the nature of the inadequate rating, the rationale for the action, and the action taken by the staff. The intern shall receive a copy of the letter to the sponsoring university.

- F. Once the Acknowledgment Notice or Probation is issued by the TD, it is expected that the status of the rating will be reviewed no later than the next formal evaluation period or, in the case of probation, no later than the time limits identified in the probation statement. If the rating has been rectified to the satisfaction of the staff, the intern, sponsoring university and other appropriate individuals will be informed and no further action will be taken.

III. Situations in which Grievance Procedures are Initiated

There are three situations in which grievance procedures can be initiated:

- A. When the intern challenges the action taken by the staff (Intern Challenge),
- B. When the staff is not satisfied with the intern's action in response to the action (Continuation of the Inadequate Rating), or
- C. When a member of the staff initiates action against an intern (Intern Violation).

Each of these situations, and the course of action accompanying them, is described below.

- A. Intern Challenge. If the intern challenges the action taken by the staff as described in II above, s/he must, within 10 days of receipt of the decision, inform the TD, in writing, of such a challenge.
 - 1) The TD will then convene a Review Panel consisting of two staff members selected by the TD and two staff members selected by the intern. The intern retains the right to hear all facts with the opportunity to dispute or explain his or her behavior.
 - 2) A review hearing will be conducted, chaired by the TD, in which the challenge is heard and the evidence presented. Within 15 days of the completion of the review hearing, the Review Panel submits a written report to the Executive Director, including any recommendations for further action. Decisions made by the Review Panel will be made by majority vote. The intern is informed of the recommendations.
 - 3) Within 5 days of receipt of the recommendations, the Executive Director will either accept the Review Panel's action, reject the Review Panel's action and provide an alternative, or refer the matter back to the Review Panel for further deliberation. The Panel then reports back to the Executive Director within 10 days of the receipt of the Executive Director's request for further deliberation. The Executive Director then makes a decision regarding what action is to be taken and that decision is final.
 - 4) Once a decision has been made, the intern, sponsoring university and other appropriate individuals are informed in writing of the action taken.
- B. Continuation of Inadequate Rating. If the staff determines that there has not been sufficient improvement in the intern's behavior to remove the inadequate rating under the conditions stipulated in the probation, then a formal Review Panel will be convened.
 - 1) The TD will communicate, in writing, to the intern that the conditions for revoking the probation have not been met. The staff may then adopt any one of the following methods or take any other appropriate action. It may issue a:
 - a) continuation of the probation for a specific time period,
 - b) suspension whereby the intern is not allowed to continue engaging in certain professional activities until there is evidence that the behavior in question has improved,
 - c) communication which informs the intern the TD is recommending to the Executive Director that the intern will not if the behavior does not change, successfully complete the internship, and/or

- d) communication which informs the intern that the TD is recommending to the Executive Director that the intern be terminated immediately from the internship program.
 - 2) Within 5 working days of receipt of this determination, the intern may respond to the action by a) accepting the action or b) challenging the action.
 - 3) If a challenge is made, the intern must provide the TD, within 10 days, with information as to why the intern believes the action is unwarranted. A lack of reasons by the intern will be interpreted as complying with the sanction.
 - 4) If the intern challenges the action, a Review Panel will be formed consisting of the TD, two staff members selected by the TD, and two staff members selected by the intern.
 - 5) A Review Panel hearing will be conducted chaired by the TD, in which the challenge is heard and the evidence presented. Within 10 days of the completion of the review hearing, the Review Panel shall communicate its recommendation to the intern and to the Executive Director. Decisions by the Review Panel will be made by majority vote.
 - 6) Within 5 days of receipt of the recommendations, the Executive Director will either accept the Review Panel's action, reject the Review Panel's action and provide alternative action, or refer the matter back to the Review Panel for further deliberation. The Panel then reports back to the Executive Director within 10 days of the receipt of the Executive Director's request for further deliberation. The Executive Director then makes a decision regarding what action is to be taken and that decision is final..
 - 7) Once a decision has been made, the intern, sponsoring university and other appropriate individuals are informed in writing of the action taken.
- C. Intern Violation. Any staff member may file, in writing, a grievance against an intern for any of the following reasons: a) unethical or legal violation of professional standards or laws, b) professional incompetence, or c) infringement on the rights, privileges or responsibilities of others.
- 1) The TD will review the grievance with 2 members of the staff and determine if there is reason to proceed and/or if the behavior in question is in the process of being rectified.
 - 2) If the TD and other two members determine that the alleged behavior in the complaint, if proven, would not constitute a serious violation the TD shall inform the staff member who may be allowed to renew the complaint if additional information is provided.
 - 3) When a decision has been made by the TD and the other two staff members that there is probable cause for deliberation by the Review Panel, the TD shall notify the staff member and request permission to inform the intern. The staff member shall have five days to respond to the request and shall be informed that failure to grant permission may preclude further action. If no response is received within 5 days or permission to inform the intern is denied, the TD and the two members shall decide whether to proceed with the matter.
 - 4) If the intern is informed, a Review Panel is convened consisting of the TD, two members selected by the staff member, and two members selected by the intern. The Review Panel receives any relevant information from both the intern or staff member as it bears on its deliberations.

- 5) A review hearing will be conducted, chaired by the TD in which the complaint is heard and the evidence presented. Within 10 days of the completion of the review hearing, the Review Panel shall communicate its recommendation to the intern and to the Executive Director. Decisions by the Review Panel shall be made by majority vote.
- 6) Within 5 days of receipt of the recommendation, the Executive Director will either accept the Review Panel's action, reject the Review Panel's recommendation and provide alternative action, or refer the matter back to the Review Panel for further deliberation. The Panel then reports back to the Executive Director within 10 days of the receipt of the Executive Director's request for further deliberation. The Executive Director then makes a decision regarding what action is to be taken and that decision is final..
- 7) Once a decision has been made the intern, faculty member sponsoring university, and other appropriate individuals are informed in writing of the action taken.

IV. Situations where interns raise a formal complaint or grievance about a supervisor, staff member, trainee, or program.

There may be situations in which the intern has a complaint or grievance against a supervisor, staff member, other trainee, or the program itself and wishes to file a formal grievance. The intern should:

- A) Raise the issue with the supervisor, staff member, other trainee, or Training Director in an effort to resolve the problem.
- B) If the matter cannot be resolved, or it is inappropriate to raise with the other individual, the issue should be raised with the Training Director. If the Training Director is the object of the grievance, or unavailable, the issue should be raised with the Executive Director.
- C) If the Training Director cannot resolve the matter, the Training Director will choose an agreeable staff member acceptable to the intern who will attempt to mediate the matter. Written material will be sought from both parties.
- D) If mediation fails, the Training Director will convene a review panel (except for complaints against staff members where the grievance procedures for that person's discipline will be followed) consisting of the Training Director, the Executive Director and two staff members of the interns choosing. The Review Panel will review all written materials (from the intern, other party, mediation) and have an opportunity at its discretion to interview the parties or other individuals with relevant information. The Review Panel has final discretion regarding outcome.
- E) Nothing here precludes attempted resolution of difficulties by adjudication at a school or university level. These guidelines are intended to provide the psychology intern with a means to resolve perceived conflicts that cannot be resolved by informal means. Interns who pursue grievances in good faith will not experience any adverse personal or professional consequences.

V. Situations where a client files a grievance about an intern. Given that the interns are employees of the agency, client grievances will be handled according to the policies and procedures outlined for JCFS employees. (See Attached Grievance Policy and Form).

REMIEDIATION CONSIDERATIONS

It is important to have meaningful ways to address a problem once it has been identified. Several possible, and perhaps concurrent courses of action designed to remediate problems include but are not limited to:

- 1) increasing supervision, either with the same or other supervisors,
- 2) changing in the format, emphasis, and/or focus of supervision,
- 3) recommending and/or requiring personal therapy in a way that all parties involved have clarified the manner in which therapy contacts will be used in the intern evaluation process.
- 4) reducing the intern's clinical or other workload and/or requiring specific academic coursework, and/or
- 5) recommending, when appropriate, a leave of absence and/or a second internship.

When a combination of the above interventions do not, after a reasonable time period, rectify the problem, or when the trainee seems unable or unwilling to alter his/her behavior, the training program may need to take more formal action, including such actions as:

- 1) giving the intern a limited endorsement, including the specification of those settings in which he/she could function adequately,
- 2) communicating to the intern and academic department/program that the intern has not successfully completed the internship, with the possibility of continuing the year as a practicum placement.
- 3) recommending and assisting in implementing a career shift for the intern, and/or
- 4) terminating the intern from the training program.

All the above steps need to be appropriately documented and implemented in ways that are consistent with due process procedures.

DUE PROCESS: GENERAL GUIDELINES

Due process ensures that decisions made by programs about interns are not arbitrary or personally based, requires that programs identify specific evaluative procedures which are applied to all trainees, and have appropriate appeal procedures available to the intern so he/she may challenge the program's action. General due process guidelines include:

- 1) presenting interns' in writing, with the program's expectations related to professional functioning,
- 2) stipulating the procedures for evaluation, including when and how evaluations will be conducted. Such evaluations should occur at meaningful intervals,
- 3) articulating the various procedures and actions involved in making decisions regarding problem,
- 4) communication, early and often, with graduate programs about any suspected difficulties with interns, seeking input from these academic programs about how to address such difficulties,
- 5) instituting, with the input and knowledge of the graduate program, a remediation plan for identified inadequacies, including a time frame for expected remediation and consequences of not rectifying the inadequacies,
- 6) providing a written procedure to the intern which describes how the intern may appeal the program's action,
- 7) ensuring that interns have sufficient time to respond to any action taken by the program,
- 8) using input from multiple professional sources when making decisions or recommendations regarding the intern's performance, and
- 9) documenting, in writing and to all relevant parties, the action taken by the program and its rationale.