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A. Psychology Internship Training Model

The Children’s Hospital Psychology Internship Training program is derived from an integration of the values of the scientist-practitioner and practitioner-scientist models. The focus of our internship is to provide a clinically intensive training year within the context of encouraging and modeling practice that meets the broader definition of evidence-based practice adopted by the Institute of Medicine (IOM, 2001). The IOM definition attaches equal weight to three core values: best research evidence, clinical expertise, and patient values. We affirm that the greatest mutual benefit derives from the professional practice of health service psychology in which clinical and research expertise mutually influence each other. Additionally, as a family centered care organization, we share the value of tailoring treatment to take into account patient and family values.

The integration of clinical practice and science is achieved through direct clinical experience; supervision and mentorship by clinicians who advocate evidence-based and empirically-supported practices; didactic instruction in seminars and conferences; and assigned and self-directed reading materials. These separate veins of experience are woven together through supervision, individual reflection, and discussion with mentors, peers, and colleagues. They are most clearly integrated within clinical practice. In the clinical environment, interns must expand their knowledge base, their skill repertoire, and their understanding of system dynamics in ways that greatly enhance their awareness, competence and confidence. In the face of the demand to provide meaningful assistance to their patients and families, the interns rapidly acquire and internalize information about what has been found to work in both the clinical and research spheres of health service psychology.
B. Aims of the Training Program
The overarching aims of the Psychology Internship Training Program are to prepare trainees for the professional practice of health service psychology in all its aspects. The specific aims are:

1. To train psychology interns to become competent *child clinical psychologists* with expertise in therapy, assessment, and consultation
2. To train psychology interns who will become competent *pediatric psychologists* with expertise in therapy, assessment, and consultation.

To enhance their clinical knowledge and experience, interns are exposed to a variety of treatment approaches, interventions, and modalities through instruction, observation, and direct experience to augment their previous clinical training. These activities are the mechanisms through which interns gain the experience to achieve the above stated aims. The learning elements provided to assist interns to accomplish these aims are:

1. In Child Clinical Psychology, provide interns with
   a) direct *clinical experience* in the full continuum of care in psychiatric settings
   b) supervision, didactic training, and supplementary readings in *clinical practice* which include focus on research findings, best practices in clinical interventions, legal/ethical practice standards, and sensitivity to diversity
   c) *assessment* experience in the full continuum of care in psychiatric settings
   d) supervision, didactic training, and supplementary readings in *assessment* which include focus on research findings, best practices in assessment, legal/ethical practice standards, and sensitivity to diversity
   e) *consultation* experience in the full continuum of care in psychiatric settings
   f) supervision, didactic training, and supplementary readings in *consultation* which include focus on research findings, best practices in assessment, legal/ethical practice standards, and sensitivity to diversity

2. In Pediatric Psychology, provide interns with
   a) direct *clinical experience* in multidisciplinary medical settings
   b) supervision, didactic training, and supplementary readings in *clinical practice* which include focus on research findings, best practices in assessment, legal/ethical practice standards, and sensitivity to diversity
   c) *assessment* experience in multidisciplinary medical settings
   d) supervision, didactic training, and supplementary readings in *assessment* which include focus on research findings, best practices in assessment, legal/ethical practice standards, and sensitivity to diversity
   e) *consultation* experience in multidisciplinary medical settings
   f) supervision, didactic training, and supplementary readings in *consultation* which include focus on research findings, best practices in assessment, legal/ethical practice standards, and sensitivity to diversity
C. Profession-Wide Competencies
   a) Psychology interns are expected to develop skills in the profession wide competencies of health service psychology. Each core competency domain is defined by several component abilities, which are individually assessed. Competency in each domain is evaluated by the intern’s supervisors on the Intern Competency Evaluation form at the end of each trimester (every 4 months).

   b) By the completion of an intern’s internship training one is expected to reach competency in the following domains (as outlined in Intern Competency Evaluation form):
      a. Research  
      b. Ethical and legal standards  
      c. Individual and cultural diversity  
      d. Professional values, attitudes, and behaviors  
      e. Communication and interpersonal skills  
      f. Assessment  
      g. Intervention  
      h. Supervision  
      i. Consultation and interprofessional/interdisciplinary skills

D. Supervision Requirements
   Interns are required to complete 4 hours of supervision a week during their internship year, although, interns will likely receive more than 4 hours of supervision throughout their rotations. Required supervision activities include 1 hour with primary supervisors, 1 hour of with group therapy supervisor, 1 hour with specialty supervisors, 1 hour with training director for group supervision related to professionalism, ethics, and diversity.

E. Evaluation Process
   The Psychology Internship Program continually assesses each intern’s performance and conduct. Feedback from the assessments assists in the development and professional growth of an intern by acknowledging strengths and identifying areas for improvement. Interns are evaluated throughout the year by their individual supervisors’ in both informal and formal settings. At specified intervals, supervisors provide written evaluations using the Intern Competency Evaluation (ICE) and any other appropriate materials. The supervisors will provide face-to-face feedback where the supervisors’ appraisals are expected to surface and in most cases are resolved. Once the supervisor and intern sign the ICE it will be forwarded to the Training Director.
   
   The Training Director also consults with supervisors as well as with other professional staff who have significant contact with interns. It is the Training Director’s responsibility to monitor an intern’s progress and to provide interns with information that will assist with their growth and development as a professional Psychologist. Based on all data available the Training Director, along with the intern’s primary supervisor and the intern, may modify the intern’s training plan to better meet his or her training needs and/or the program’s requirements.
Communication with interns’ home graduate program

The Training Director is responsible for communicating with each intern’s home graduate program about the intern’s progress throughout the training year. Each program will receive formal feedback about intern three times a year when the ICE will be submitted. We request that all of the home programs use our evaluation materials in place of their own program materials.

Intern Self-evaluation

1. At the beginning of the training year, each intern completes the Psychology Intern: Internship Goals form and the Orientation ICE. On these forms, the intern is asked to detail his/her personal training goals in each of the profession wide competencies.
   a) The training director will meet with the intern to review the goals, and to clarify the intern’s training expectations.
   b) At four months, eight months, and at twelve months, the intern will review and update his/her training goals, indicating the degree to which s/he believes s/he has met the goals. Interns may modify and formulate new goals as appropriate. The intern will meet with the training director to review their goal completion progress at four, eight, and twelve month marks, and additionally as needed or requested.

Supervisor Evaluation of Psychology Intern

1. The interns are formally evaluated in oral and written form.
   a) The training committee meets to review the performance of each intern three times during the training year (October, February, July). During each evaluation, the supervisory team completes the ICE. All intern supervisors are required to attend. If for some reason a supervisor cannot attend, the supervisor is required to provide verbal or written feedback about the intern’s performance to the training director before the meeting so it can be shared with the committee. The purpose of the joint meeting is to create a comprehensive picture of the intern’s performance in all areas. This enables the committee to evaluate if the intern is performing consistently across service settings, or if there are areas where the intern needs additional supervision and support.
   b) The primary supervisor meets with the intern to review and discuss the written document completed by the supervisory team. The intern is encouraged to provide written comments in response. Both the supervisor and intern will sign the evaluation. The signed document is provided to the training director to review and sign. The final copy of the evaluation is placed in the intern’s file.
      i) Supervisors are expected to share information they present in the meeting with the intern so the intern is aware of their assessment. If areas of concern are identified, a Plan of Action or A Plan for Improvement may be developed as defined in the Remediation Process section below, as deemed necessary.
      ii) The training director will meet with each intern after the meeting to share the collective assessment of the committee and to review any items of concern.
iii) At the twelve-month meeting, the intern’s areas of strength and continuing development are identified. The intern is assessed to determine if s/he has successfully completed the training program. The feedback is communicated to the intern by the supervisors and the training director.

Psychology Intern Evaluation of Supervisor

1. The intern completes the Minnesota Supervisory Inventory (MSI) Intern Evaluation of Supervisor form at the end of each trimester (every 4 months). The evaluation form is devised to assess the degree to which the intern believes the supervisor has assisted him/her to develop increased competence in achieving program aims and professional wide competencies.
   a) The intern meets with the supervisor to review and discuss the written document. The supervisor is encouraged to provide written comments in response. Both the supervisor and intern sign the evaluation. The signed document is provided to the training director to review and sign. The final copy of the evaluation is placed in the intern’s file.
   b) The supervisor keeps a copy of the evaluation and includes it with his/her self-evaluation at the time of his/her employee performance evaluation.

Internship Training Program Evaluation

1. The internship is informally evaluated by the interns when they provide feedback and recommendations during the course of routine interactions.
   a) The psychology interns communicate and meet routinely with the training director. The interns are invited to provide feedback and recommendations regarding the administrative operation of the training program.
   b) In the course of supervision, the interns provide feedback about the individual rotations and the training program.

2. The internship program is formally evaluated in oral and written form using proscribed procedures.
   a) At six months and the end of the training year a written program evaluation is sent to the intern to complete.
   b) At the end of the training year, the psychology interns each meet individually with the training director to complete a semi-structured exit interview.
   c) At various intervals, the training director will request former interns to complete a follow-up survey. The purpose of the survey is for intern’s to retrospectively evaluate their training experiences in light of how the internship prepared them for their professional careers.

F. Successful Completion of Internship

1. It is expected that interns will progress from a rating of 2 – 3 on the ICE over the course of the training year. Interns are expected to have a 2 or better on 100% of ratings on the ICE evaluation of the first trimester, a 2.5 or better on 100% of ratings on the ICE at the second trimester, and a 3 or better on 100% of ratings on the ICE at the third trimester. In order to complete the internship,
the intern must be rated at the 3 or above in all ratings on the ICE (single exception described below in section F. Remediation Process).

2. Interns must have documented a minimum of 2,092 hours of activity over the course of the year on their weekly activity logs.

3. Interns who successfully complete the training program will receive a signed certificate of completion suitable for framing.

G. Remediation Process

Growth and Development

The internship year is a period of accelerated growth and identity consolidation for most interns. It is expected that even the most competent interns are still relatively early in their professional development, and that the internship experiences will challenge them to grow personally and professionally. Therefore, the evaluation process is designed to identify both areas of strength and areas needing further development. The training staff and director endeavor to create a safe environment in which self-reflection, and appropriate assistance seeking, are encouraged and supported. It is also expected that through the process of supervision, opportunities for growth will be identified and addressed for all interns. This identification process is intended as growth supporting, and is viewed as a vital component of professional development.

1. If an intern area of growth and development is addressed through the usual supervisory process, then the training director is so informed, the training committee may also be so informed, and the written evaluation at the end of the trimester will reflect the progress made by the intern.

2. If an intern area of growth and development is not addressed sufficiently through the usual supervisory process, and it becomes identified as a problem area needing improvement, then the training director is informed, the training committee may also be informed, and a Plan for Improvement is developed.

Problem Area Needing Improvement and Remedial Action

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 and/or unwillingness to acquire professional skills in order to reach an acceptable level of competency
3. An inability and/or unwillingness 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 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

It is important to have meaningful ways to address problematic behavior once it has been identified. In implementing remediation or sanction interventions, the training committee must be mindful and balance the needs of the impaired or problematic intern, the clients involved, members of the intern training committee, the training staff, and other agency personnel. In order to provide the most appropriate match of intern need to intervention, multiple levels of response have been developed. In most cases, the more informal methods are employed first, unless the situation calls for a more intensive response from the onset. The levels of intervention are described below and include:

1. Enhanced supervision
2. Plan of Action
3. Plan for Improvement
4. Limitation on Scope of Practice
5. Probation with Probation Status Plan for Improvement
6. Suspension
7. Dismissal

Self-awareness is an essential component of personal development and good clinical work. The ability to draw on personal resources is essential to professional self-care. Likewise, the ability to take the initiative to seek information and assistance from others when needed is vital to growth and ethical professional conduct. Therefore, interns are encouraged to take action and seek assistance when they are aware they need it.

1. When an intern self-identifies an area needing improvement, and s/he is aware that s/he needs greater assistance to address the need, then the intern must approach his/her direct supervisor(s) to ask for additional or focused supervisory time, resources, direction, instruction, etc. as may be deemed useful. The intern may also inform or consult with the training director regarding the concern and to seek guidance.

2. The supervisor is expected to respond in a timely and helpful manner.
   a) The response may be informal, consisting simply of providing Enhanced Supervision. Enhanced supervision may consist of any of the following or other interventions, including: increased time or focus of attention in supervision on areas of concern; more explicit instruction; direct observation of the intern’s provision of services; co-therapy or other form of modeling by the supervisor; books, articles or other resource and reference materials; process and/or solution focused problem solving discussion.
   i) If this is sufficient, then the training director should be notified, and the intern’s progress should be documented in the written evaluation at the end of the rotation.
ii) The response may also be more formal leading to development of a Plan of Action (see description of process below in 4(b)i).

3. Any staff member who experiences concerns about an intern’s performance and behavior is expected to discuss that concern directly with the intern, and to inform the intern’s supervisor about the discussion. If the staff member is dissatisfied with the outcome of the discussion, deems the concern to be of significant magnitude, or is aware of multiple examples of the concern, the concern should be brought to the attention of the training director.

4. When an intern’s supervisor identifies a deficit in the intern’s knowledge, skill, ability, performance, and/or behavior in a particular area or areas which negatively impacts the intern’s performance of his/her role, then steps will be taken to remedy the deficit by a progression of informal to formal courses of action. Any supervisor who experiences concern about an intern’s performance and behavior is expected to discuss that concern directly with the intern as soon as possible.
   a) The response may be informal, consisting simply of providing enhanced supervision. If this is sufficient, then the training director should be notified, and the intern’s progress should be documented in the written evaluation at the end of the rotation.
   b) The response may also be more formal leading to development of a Plan of Action or a Plan for Improvement.
   i) A Plan of Action includes: written identification of the problem, goals to be achieved, action steps to be taken by both the intern and supervisor, a timeline for follow-up review, and criteria to determine when the intern has met the goals of the plan so that it may be discontinued. The intent of the plan is to provide the intern with the additional structure and resources s/he needs to address the problem and develop competence. Interns who view the plan as a genuine opportunity for growth, and who take advantage of the increased supervision and training experiences offered by the supervisor, are most likely to benefit from these plans.
   (1) A Plan of Action may be negotiated between the supervisor and intern, or the process of development may include the training director, at the discretion of the intern and supervisor preference. The intern will be an active participant in development of the plan, helping to identify methods of learning which are most beneficial to him/her.
   (2) Each party to development of the plan will be provided with a written copy of the plan any revisions to the plan, written updates regarding adherence to the plan, and the intern’s progress toward meeting the identified goals for improvement. A copy will also be placed in the intern’s personnel file. The interns’ progress should also be documented in the written evaluation at the end of the rotation.
   (3) If not involved in the plan development process, the training director will be notified regarding its development plan by the intern and supervisor. The intern and supervisor will also provide the training director with oral and written
updates regarding adherence to the plan, and the intern’s progress toward meeting the identified goals for improvement.

(4) The training committee members may be informed of the area needing improvement and Plan of Action during the course of intern review meetings.

(5) The training director may consult with the interns’ graduate training director regarding previous performance and problems in this area, and actions taken by the graduate program which were successful/unsuccessful in producing positive change for the intern. If this internship training director consults with the graduate training director, then the intern will be informed that this communication took place, and a written note will be placed in the intern’s personnel file.

(6) Failure to make sufficient improvement may lead to development of a Plan for Improvement.

ii) A Plan for Improvement includes the same components as a Plan of Action, but is implemented for an intern who demonstrates significant concerns, which have become problematic on either a single rotation, or across rotations; or an intern who is identified as impaired.

(1) Development of A Plan for Improvement is negotiated between the supervisor, intern, and training director, at a minimum. Other primary supervisors, and members of the training committee may also participate in the development process. If the problematic or impaired behavior is observed in multiple rotation areas, then supervisors from each rotation must participate in development of the plan and its implementation. The intern will be an active participant in development of the plan, helping to identify methods of learning which are most beneficial to him/her.

(2) Each party to development of the plan will be provided with a written copy of the plan, any revisions to the plan, written updates regarding adherence to the plan, and the intern’s progress toward meeting the identified goals for improvement. A copy will also be placed in the intern’s personnel file. The interns’ progress should also be documented in the written evaluation at the end of the rotation.

(3) The training director may consult with the interns’ graduate training director regarding previous performance and problems in this area, and actions taken by the graduate program which were successful/unsuccessful in producing positive change for the intern. If this internship training director consults with the graduate training director, then the intern will be informed that this communication took place, and a written note will be placed in the intern’s personnel file.

(4) Intern failure to make sufficient improvement may lead to revision of the plan, and to the intern being placed on probation (see Section G. Probation).

iii) A Plan of Action or A Plan for Improvement will be developed for an intern who receives a rating less than 2 on a profession wide competency item assessed by the ICE at the end of the first trimester, and/or a rating of less than 2.5 on a profession wide competency item assessed by the ICE at the end of the second trimester, depending upon the significance of the failure to perform adequately. The plan will be developed between the previous and
future rotation supervisors and the training director to formalize communication, and to enhance the intern’s possibility of successful development of the necessary knowledge and/or skills.

i) If the area of competence where an intern received a rating less than 2 at the end of the first trimester, and/or 2.5 at the end of the second trimester, is specific to a particular patient population or intervention which the intern will not have access to on the next rotation, and it concerns a specialty population or intervention which can be excluded from the intern’s scope of practice, then the intern will be informed that they have a **Limitation on Scope of Practice**. In compliance with APA ethical standards regarding practicing within one’s scope of competence (standard 2.01), the intern will be informed that s/he must receive additional training and experience following internship before working independently in that area.

H. Probation Process
Probation is a time limited, remediation-oriented, more closely supervised training period. Its purpose is to assess the ability of the intern to complete the internship and to return the intern to a more fully functioning state. As a result, the trainee is placed on probation for a specified period of time during which his/her behavior will be closely monitored by his/her primary supervisor(s) in consultation with the training director and training committee.

1. An intern may be placed on probation when s/he demonstrates more than one area of deficiency in the profession wide competencies, or if one area is sufficiently deficient to warrant it resulting in the deficit being defined as a significant problem; when the intern has failed to make sufficient improvement on a Plan of Action or Plan for Improvement; when the intern is determined to be impaired, or when serious concerns emerge about the intern’s competence, professionalism, emotional stability, ethics, and/or compliance with state and/or national laws.

   a) The need to place an intern on probation will be decided upon by the training committee after a review meeting where the intern was present and had opportunity to provide input and participate in the process.

   b) A written **Probation Status Plan for Improvement** will be developed as described above in the section F. Remedial Action. If a previous plan is in place, it will be reviewed and revised as needed in order to set clear expectations, and to provide the intern with the information, instruction, resources, and support s/he needs to optimize his/her ability to make the necessary changes. The intern will be an active participant in development of the plan, helping to identify methods of learning which are most beneficial to him/her.

      i) The plan will include enhanced monitoring of the intern’s performance.

      ii) The intern may be required to increase participation in some activities and services, and may be restricted from participating in others based on the training committee members’ assessment of the intern’s deficits, consideration of client’s needs, and determination as to the most appropriate means to provide opportunities for improvement.

      iii) The plan will include regular review dates to evaluate the intern’s progress.
d) The training director will notify and consult with the interns’ graduate training director regarding previous performance and problems in this area, and actions taken by the graduate program which were successful/unsuccessful in producing positive change for the intern. The intern will be informed that this communication took place, and a written note will be placed in the intern’s personnel file.

5. If the intern successfully meets criteria to demonstrate sufficient improvement, as outlined in the written plan, the probation status will be ended.
   a) Written documentation of the intern’s successful remediation through probation will be documented and a copy placed in the intern’s personnel file. It will also be documented in the intern’s written evaluation at the end of the corresponding trimester.
   b) The intern’s graduate training director will also be notified in writing regarding the intern’s positive change in status.
   c) If the intern’s performance and behavior remains at the expected level (3 or higher on all items on the ICE at the end of internship-July) as specified in the Successful Completion of Internship section above, then the intern will be able to successfully complete the internship.

6. If the intern fails to meet the criteria to demonstrate sufficient improvement, which would be rated less than 3-meets expectations on the ICE at the end of internship-July, within the specified time frame, there are five possible outcomes:
   a) The probation period may be extended, if time remains in the internship year. The plan would also be reviewed and could be extended or revised. Clear timelines for the extension would be established.
   b) If time does not remain in the intern year, and it does not create an undue burden on the training program and incoming new intern class, the probation period may be extended. In this case, the intern would be allowed to continue his/her training in adherence with the Plan for Improvement, but without pay.
      i) This option would be exercised only if the training committee determined that the intern was likely to achieve successful performance in the very near future. Clear timelines for the extension would be established.
      ii) If the intern’s performance and behavior reached the 3-meets expectations or higher level, as specified in the Successful Completion of Internship section above, then the intern would be able to successfully complete the internship.
   c) If time does not remain in the intern year, and it does create an undue burden on the training program and incoming new intern class, and the graduate training program could and would provide sufficiently analogous training and supervisory opportunities, the probation period may be extended and completed at the intern’s graduate training program.
      i) This option would be exercised only if the training committee determined that the graduate training program could provide sufficiently analogous training and supervisory opportunities, and the intern was likely to achieve successful performance in the very near future. Clear timelines for the extension would be established.
ii) If the intern’s performance and behavior reached the 3-meets expectations or higher level, as specified in the Successful Completion of Internship section above, then the intern would be able to successfully complete the internship.

d) The intern is **suspended** or **dismissed**.

i) In the case of dismissal, the intern and his/her graduate training program is notified that the intern has not successfully complete the psychology internship training program. At any future date, if asked to verify internship completion by any state licensing board, the jurisdiction would be informed that the intern did **not** successfully complete the training program.

I. **Suspension and Dismissal**

1. In cases involving severe violations of the APA Code of Ethics, where imminent harm to a client is a salient concern, where there is a preponderance of unprofessional behavior, or significant lack of change in behaviors for which an intern has been placed on probation, the intern may be suspended or dismissed from the training program and thus from employment at the hospital.

   a) **Suspension** would result in a required leave of absence from the hospital. Hospital policy would be followed to determine if the suspension would be with or without pay.

   b) **Dismissal** would result in the intern being terminated from the training program, and from employment at the hospital.

2. As hospital employees, interns are subject to the performance standards of the hospital. If an intern fails to meet these standards, e.g., has a felony conviction, has a child abuse record, fails to pass a substance use test, is physically or verbally abusive, fails to meet the performance standards of their position, or any other cause for termination, (see hospital policies), then the intern may be terminated from employment.

3. Decisions to suspend or dismiss an intern are made by the training committee and the Department of Psychiatry and Behavioral Sciences Human Resources representative. The training director, and/or Chief of Psychology, and a majority of the intern’s primary supervisors must be present to make this decision. The intern must be present for at least part of the meeting to provide input.

   a) If the decision is made to suspend the intern, then a time frame for the suspension will be established, and specific criteria will be delineated to state under what circumstances the intern may return to duty and resume providing direct service. See section F. Remediation Plans.

      i) The intern will be informed orally of the decision immediately after it is made, and within 24 hours in writing. A copy of the letter will be placed in the intern’s personnel file.

      ii) The intern will be provided with a copy of the grievance and appeal procedures.

      iii) The internship training director will notify the graduate training director orally and in writing within 48 hours of the decision.

   iv) All hospital procedures will be followed for suspension of an employee.
b) If the decision is made to dismiss the intern, then the intern will be informed orally of the
decision immediately after it is made, and within 24 hours in writing.
i) A copy of the letter will be placed in the intern’s personnel file.
ii) The intern will be provided with a copy of the grievance and appeal procedures.
iii) The internship training director will notify the graduate training director orally and in
writing within 48 hours of the decision.
iv) All hospital procedures will be followed for termination of an employee.

J. Intern Problematic Behavior
1. A problem is defined as a behavior, attitude, or other characteristic which, while of concern
and requiring remediation, is not excessive or outside the domain of behaviors for
professionals in training (Lamb, Presser, Post, Baum, Jackson, and Jarvis, 1987). Problems are
typically amenable to intervention.
2. While it is a professional judgment as to when an intern’s behavior becomes impaired rather
than problematic, impairment can be broadly defined as interference in professional
functioning which is reflected in one or more of the following ways:
a) An inability and/or unwillingness to acquire and integrate professional standards into
one’s repertoire of professional behaviors
b) An inability to acquire professional skills in order to reach an acceptable level of
competency
c) An inability to control personal stress, psychological dysfunction, and/or strong emotional
reactions which interfere with professional functioning.
3. Problems will typically become identified as impairments if they include one or more of the
following characteristics (Lamb et al, 1987):
a) The intern does not acknowledge, understand or address the problem when it is identified
b) The problem is not merely a reflection of a skill deficit, which can be rectified by academic
or didactic training
c) The quality of services delivered by the intern is seriously impacted and not at an
acceptable level for the internship
d) The problem is not restricted to one area of professional functioning
e) A disproportionate amount of attention by training staff is required
f) The intern’s behavior does not change as a function of feedback, remediation efforts,
and/or time

K. Intern Appeal Process
An intern may appeal a decision made by a supervisor, the training director, the chief of psychology,
or the training committee. As with the evaluation and remediation processes, there are multiple
levels of intervention, which should be accessed in step-wise progression by the intern, including:
- Problem identification, negotiation and resolution
- Mediation
- Appeal
1. The first course of action in case of disagreement is direct communication between the intern and individual with whom s/he has a dispute. The goal of the communication would be **problem identification, negotiation and resolution**. If both parties can come to an agreement with which they are satisfied, the matter is considered resolved, and no written record is kept.

2. The second course of action in case of disagreement is to seek **mediation** from the training director. Or, if the training director is one of the parties to the dispute, from the chief of psychology. The goal of mediation would be to meet individually and conjointly with the disputing parties to identify the areas of disagreement, and to seek a resolution. If both parties can come to an agreement with which they are satisfied, the matter is considered resolved, and no written record is kept.

3. When the first two alternatives have been attempted without satisfactory resolution, the intern may submit a written appeal to the training director, or if the training director is one of the parties to the dispute, the appeal will be submitted to the chief of psychology. The training director will review the appeal, meet with the intern, and respond in written form within seven days (excluding holidays).

4. The final course of appeal is to the training committee. The intern must submit a written statement of the initial disagreement, summarize the previous steps taken to resolve it, and the outstanding areas of disagreement.
   a) A **committee review panel** will be designated. The review panel must include the training director or chief of psychology, a majority of the intern’s direct supervisors, and at least two committee members who are not direct supervisors of the intern.
   b) The committee review panel will review the intern’s written appeal, and any other written documents which are relevant to the disagreement, e.g., the training director’s reply to written appeal, supervisory evaluations, and any performance improvement plans and updates designed for the intern.
   c) The committee review panel will set a meeting date for within seven days of receipt of the written appeal.
   d) Both parties to the dispute must be present and provide input for at least part of the meeting.
   e) A majority vote will determine the final decision of the committee review panel. The decision and recommendations will be provided to the intern in written form. A copy of the final decision will be placed in the intern’s personnel file.

L. **Intern Grievance Process**

1. In matters of dispute with hospital policies, interns should follow the hospital grievance procedure (see procedure on the CHCO Intranet). When a grievance is filed through the hospital grievance procedure, the decision of the Director of Human Resources is final.

2. In matters of dispute with the Psychology Internship Training Program, or with a member of the training program, grievance procedures consist of oral or written complaint through the hierarchy of the training program and the Department of Psychiatry and Behavioral Sciences, with active attempts of resolution at each level.
   i. In accordance with the Ethical Principles of Psychologists, if a psychology intern has a complaint against an individual, the intern should first address his or her
grievance with that individual and attempt to resolve the conflict. If the grievance is resolve in this manner, no written record is kept.

ii. If the direct discussion with the individual is insufficient to resolve the matter, the intern should discuss the situation with the training director. Efforts at mediation will be made to negotiate a resolution between the parties. If the grievance is resolved in this manner, no written record is kept.

iii. If the training director is unable to sufficiently mediate resolution to the grievance, or if the training director is the individual against whom the complaint is lodged, then the issue is brought before the chief of psychology. However, if the chief of psychology is the person against whom the complaint is lodged, then issue brought before the Chair of the Department of Psychiatry and Behavioral Sciences. Efforts will be made to negotiate a resolution between the parties. If the grievance is resolved in this manner, no written record is kept.

iv. If resolution cannot be obtained at the level of the training director or the chief of psychology, then the intern may present his/her complaint to the training committee for review and attempted resolution.

1. The intern filing the complaint must submit a written statement of the grievance, a summary of the steps taken to this point to attempt to resolve it, reasons the previous attempts were insufficient, and the intern’s reason for continuing to assert his/her complaint to the training director or chief of psychology.

2. A training committee review panel will be designated. The review panel must include the training director or chief of psychology, a majority of the intern’s direct supervisors, and at least two committee members who are not direct supervisors of the intern.

3. The training committee review panel will set a meeting date for within seven days of receipt of the written compliant.

4. The training committee review panel will review the intern’s written complaint, and any other written documents which are relevant to the complaint, including but not limited to supervisory evaluations, and any performance improvement plans and updates designed for the intern.

5. Guidance may also be sought from the American Psychological Association (APA), the Committee on Accreditation for Psychology Internships (CoA), the Association of Psychology Postdoctoral and Internship Centers (APPIC).

6. Both parties of the dispute must be present and provide input for at least part of the meeting to personally state their positions and knowledge of the situation.

7. A majority vote will determine the final decision of the training committee review panel. The decision and recommendations will be provided to the intern in written form. A copy of the final decision will be placed in the intern’s and grieved individual’s personnel files.
v. If resolution cannot be obtained at the level of the training committee, then the issue is brought before the Program Director and the Chair of the Department of Psychiatry and Behavioral Sciences, and a representative from the Department of Human Resources. The Senior Vice President of Medical Affairs may be consulted.

1. Guidance may also be sought from the American Psychological Association (APA), the Committee on Accreditation for Psychology Internships (CoA), the Association of Psychology Postdoctoral and Internship Centers (APPIC).

2. The decision of the Chair and the HR representative will be final. The decision and recommendations will be provided to the intern in written form. A copy of the final decision will be placed in the intern’s and grieved individual’s personnel files.

M. Maintenance of Records
A paper training file for each intern is created and relevant documentation for internship experience and completion is maintained in the file (e.g. internship contract, acknowledgement of policy and procedures receipt, evaluations, correspondence, remediation plans). The paper files are kept in a locked file cabinet in the Program Coordinator’s office in and are available by request to interns. Information and records of all formal complaints and grievances filed against the program or individuals in the program are kept until the next site APA accreditation site visit, at a minimum. At the time of resolution of the case all documents are placed in a sealed envelope labeled for authorized personnel only.
Psychology Training Model, Remediation, and Grievance Procedures

I have read and understand the psychology training model, remediation, and grievance procedures. I understand that if I have questions, I can ask the training director for clarification.

____________________________________________________________________________
Printed Name                                           Date

____________________________________________________________________________
Signature

____________________________________________________________________________
Jenna Glover, PhD                                         Date
Director of Training