

Internship Handbook

**UNIVERSITY OF KENTUCKY
INTERNSHIP CONSORTIUM PROGRAM**

2011 - 2012

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APA Documents

[APA Ethical Principles and Code of Conduct](#) (2002, Amended June 1, 2010)

[APA Practice Guidelines](#)

Consortium Documents

Evaluation Forms

[Intern Competency Rating Scale](#) (completed by Supervisor)

[Internship Site and Supervisor Evaluation Form](#) (completed by Intern and Interns’ Supervisees)

[Overall Internship Evaluation Form](#) (completed by Intern)

[Intern Resources](#)

Postdoctoral and Licensure Information

[Association of State and Provincial Psychology Boards](#)

This intern handbook describes the training program at the University of Kentucky Internship Consortium. Questions about the program are encouraged. This information is current and accurate at the time of printing but may be subject to revision.

Accreditation Disclosure Statement

Though we are currently developing an application for APA accreditation, this internship program is not accredited. There is no guarantee that this program will become accredited. However, our program strives to provide the best training possible and, in keeping with this goal, follows the guidelines set forth by the APA's Commission on Accreditation. Students will be informed of our accreditation application status as it develops.

For questions regarding the Consortium's APA accreditation status, contact:

Office of Program Consultation and Accreditation

American Psychological Association

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Washington, DC 20002-4242

(202) 336-5979

www.apa.org/ed/accreditation

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Non-Discrimination Statement

The University of Kentucky is committed to a policy of providing educational opportunities to all qualified students regardless of economic or social status, and will not discriminate on the basis of race, color, religion, sex, marital status, beliefs, age, national origin, sexual orientation, or physical or mental disability. Compliance with Title IX of the Educational Amendments of 1972, which prohibits sex discrimination, and with Title VI of the Civil Rights Act of 1964 is coordinated by Mr. Terry Allen, Affirmative Action Office, 8 Administration Building, 606-257-8927. Efforts to comply with the laws and regulations applicable to people with disabilities are also coordinated by the Affirmative Action Office, as required by Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990. Questions concerning compliance with regulations may be directed to the UK's Affirmative Action Office, or to the Director of the Office of Civil Rights, U.S. Department of Education, Washington, D.C. The University is in compliance with the Drug-Free Workplace Act of 1988 and the Drug-Free Schools and Communities Act Amendment of 1989. Questions may be directed to the Vice Chancellor for Student Affairs or the Human Resource Services Director's Office. Questions about admission to the University should be directed to the appropriate admissions office.

Acknowledgements

Appreciation is due to Dr. Jennifer Cornish and the University of Denver Graduate School of Professional Psychology Internship Consortium who graciously allowed us to use their training manual as a guide to create this handbook. I would also like to thank Dr. Diane Sobel, Dr. John Yozwiak, and Dr. David Susman for their help in collecting information about their internship sites and supervisors. Many others deserve thanks for their editorial assistance, particularly Maryanne Edmundson and all the supervisors and interns at the Consortium sites.

Charles R. Carlson, Spring 2012

OVERVIEW

Introduction

The University of Kentucky (UK) is located in Lexington, Kentucky, the second largest city in Kentucky and the "Horse Capital of the World." Founded in 1865, UK is Kentucky's flagship institution and one of two land-grant universities in the state of Kentucky. It is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools. Located in Kentucky's "Bluegrass Region," the University is within walking distance of downtown Lexington, an hour and a half away from Louisville, KY and Cincinnati, OH, and an hour from the Red River Gorge and the mountainous region of eastern Kentucky.

UK's doctoral program in psychology granted its first Ph.D. in 1917, received its initial American Psychological Association (APA) accreditation for its clinical program in 1970 and its Psychological Clinical Science Accreditation System accreditation in 2010, and is a member of the Academy of Psychological Clinical Science. The University of Kentucky Internship Consortium Program was established in 2011.

The UK Internship Consortium Program consists of five sites in the Lexington area, operating together under the direction of the Internship Program Director. The Consortium is exclusively affiliated with UK's Clinical Psychology Doctoral (Ph.D.) Program, so that only students from the academic program are eligible to apply to the Consortium. Interns in the Consortium spend 20 hours per week engaged in internship activities, including clinical work at their internship site and attendance of Consortium-wide and site-specific seminars and training programs.

Training Philosophy

The Internship Consortium seeks to train interns to become scientific clinical psychologists. Our philosophy is three-fold: (1) that clinical psychology is a science-based discipline, (2) that training in clinical psychology is a continual developmental process, and (3) that a consortium approach provides unique training opportunities for developing psychologists.

First, our philosophy is that clinical psychology must be a science-based discipline; thus, to train clinical psychologists is to train scientists with expertise in clinical psychology. We seek to provide our interns with high quality, science-centered education and training, and require a scientific approach to both research and practice from our interns. Each of our interns develops the capacity to function independently as research scientists and clinicians. All interns are trained to conduct research, practice competently, and use scientific methods and evidence in all phases of developing and applying clinical services.

Second, our philosophy emphasizes the continual professional development of our interns. The Internship Consortium seeks to build on the skills developed during the doctoral education and training in the UK Clinical Psychology Doctoral Program. Consortium-wide and site-specific training seminars provide discussion of practice-oriented information that can help interns develop existing skills and learn new methods (e.g., specific empirically-based treatments). As interns progress through Internship Consortium rotations, they are given more and more complex cases and build up to a full caseload. By formally evaluating interns' competence biannually, Consortium supervisors can ensure that interns' skills are developing appropriately over the course of their internship experience. By the end of the two-year internship, interns should graduate as competent entry-level scientific clinical psychologists who can function in a variety of settings and continue to develop professionally throughout their careers. Thus, our developmental approach ensures that training for practice in clinical psychology is sequential, cumulative, and graded in complexity.

Third, our philosophy emphasizes a consortium approach. The consortium approach means that interns will benefit from shared resources and will be trained in a broad range of fundamental skills, with specialization areas available at the different sites. Within our consortium, interns will work in four different clinical settings, giving them a diverse set of clinical experiences and preparing them for work in a variety of jobs.

Goals, Objectives, and Competencies

In order to train scientific clinical psychologists, the Consortium has identified three goals:

Interns will acquire and demonstrate...

- (1) knowledge of the broad base of psychological theory and research related to the field of clinical psychology, as well as the knowledge and skill required to conduct and evaluate empirical research in areas of importance within clinical psychology
- (2) knowledge of the theoretical bases and empirical support for current methods of clinical practice, and the skills required to implement theory-based, scientifically supported methods
- (3) the skills necessary to conduct themselves ethically and professionally.

Each of these goals will be achieved through focus on 13 specific objectives and the development of 13 specific related competencies. (Note that competencies consist of knowledge, skills, and attitudes/values. Competencies in the Consortium build on and extend those in the UK Clinical Psychology Doctoral Program. Each of the competencies listed will be evaluated twice yearly using the [Intern Competency Rating Scale](#).)

Goal #1: Interns will acquire and demonstrate knowledge of the broad base of psychological theory and research related to the field of clinical psychology, as well as the knowledge and skill required to conduct and evaluate empirical research in areas of importance within clinical psychology.

Objectives:

- (1) To produce entry-level clinical psychologists who have *scientific knowledge*, are competent in *scientific methods*, and *apply the scientific method to the practice* of clinical psychology.

Competencies:

Scientific Knowledge, Methods, and Application

- ***Scientific Mindedness:*** Uses systematic approaches to gathering data to inform clinical decision making; Self-appraises performance; Has good critical thinking and analytic skills; Applies scientific knowledge and skills appropriately and habitually to the solution of problems; Readily presents own work for the scrutiny of others; Is committed to lifelong learning
- ***Scientific Foundation of Professional Practice:*** Uses resources to promote effective practice; Demonstrates willingness and motivation to develop his/her knowledge of the empirical literature relevant to clinical work at his/her current internship site; Recognizes ethical or legal issues; Analyzes ethical or legal issues
- ***Application of Scientific Method to Practice:*** Demonstrates the integration of science in professional practice; Selects assessment tools with appropriate empirical basis, reliability, and validity; Selects assessment tools with characteristics appropriate to the intended use (e.g., sensitivity, specificity, and positive and negative predictive powers); Implements a systematic approach to data collection in a consultation role; Develops treatment plans based on empirical literature; Implements treatment plans with fidelity to empirical models; Is able to apply specific empirically supported treatment methods; Effectively utilizes client outcome measures; Self-appraises performance; Uses information gathered from self-appraisal to improve his/her effectiveness; Demonstrates knowledge of models, theories, and research relevant to providing supervision to others; Considers current empirical literature, audience needs, and diversity variables when developing programs

Goal #2: Interns will acquire and demonstrate knowledge of the theoretical bases and empirical support for current methods of clinical practice, and the skills required to implement theory-based, scientifically supported methods.

Objectives:

- (1) To produce entry-level clinical psychologists who are competent in *assessment and consultation skills*.
- (2) To produce entry-level clinical psychologists who are competent in *intervention skills*.
- (3) To produce entry-level clinical psychologists who are able to utilize *supervision* of their own practice.
- (4) To produce entry-level clinical psychologists who are able to *supervise others*.

- (5) To produce entry-level clinical psychologists who are competent in *outreach*.
- (6) To produce entry-level clinical psychologists who are competent in *crisis assessment and intervention skills*.
- (7) To produce entry-level clinical psychologists who are competent in *group therapy skills*.

Competencies:

Assessment and Consultation Skills

- **Measurement and Psychometrics:** Selects and implements multiple methods and means of evaluation in ways that are responsive to and respectful of diversity; Selects assessment tools with appropriate empirical basis, reliability, and validity; Selects assessment tools with characteristics appropriate to the intended use (e.g., sensitivity, specificity, and positive and negative predictive powers) and referral questions to be answered
- **Evaluation Methods:** Understands the strengths and limitations of diagnostic approaches and interpretation of results from multiple measures for diagnosis and treatment planning
- **Application of Methods:** Utilizes systematic approaches to gathering data to inform clinical decision making; Chooses appropriate means of assessment to answer referral questions; Implements a systematic approach to data collection in a consultation role; Interprets assessment results accurately taking into account limitations of the evaluation method(s); Produces consultative reports that are well organized, succinct, and provide useful and relevant recommendations; Provides effective feedback to clients and consultees (e.g., presents assessment results in a clear manner, uses lay language, answers clients'/consultees' questions appropriately); When repeated assessment occurs, systematically and effectively integrates prior and current knowledge of the client
- **Diagnosis:** Demonstrates knowledge of DSM; Integrates assessment data from different sources for diagnostic purposes; When repeated assessment occurs, revises diagnostic impressions when applicable
- **Role of Consultant:** Has an understanding of the consultant's role as an information provider to another professional who will ultimately be the patient care decision maker
- **Supervision:** Effectively uses supervision to enhance assessment skills; Is able to learn effectively from supervisor's role modeling of assessment procedures

Intervention Skills

- **Planning and Case Conceptualization:** Is able to formulate and conceptualize cases; Develops treatment plans based on empirical literature
- **Implementation:** Implements treatment plans with fidelity to empirical models and flexibility to adapt where appropriate; Applies specific empirically supported treatment methods; Manages cases effectively; Manages crises effectively; Writes clear intervention progress notes; Discontinues treatment in an ethical and effective manner
- **Progress Evaluation:** Assesses treatment progress and outcome; Effectively uses client outcome measures; Links concepts of therapeutic process and change to intervention strategies; Self-appraises own performance; Uses information gathered from self-appraisal to improve his/her effectiveness
- **Supervision:** Effectively uses supervision to enhance intervention skills; Is able to learn effectively from supervisor's role modeling of assessment procedures

Supervision (of Intern)

- **Skill Development:** Self-reflects and self-evaluates clinical skills and use of supervision
- **Participation in Supervision Process:** Prepares effectively for supervision; Works collaboratively with supervisor(s); Is able and willing to accept supervisory input; Follows through on supervisory directions and recommendations; Negotiates needs for autonomy from supervisors

Supervision of Others

- **Knowledge:** Demonstrates knowledge of models, theories, and research relevant to providing supervision to others
- **Relationship with Supervisee:** Establishes a climate of trust, support, and understanding of supervisee; Constructively works toward conflict resolution between self and supervisee; Communicates effectively in giving suggestions and feedback to supervisee

- **Goal Setting:** Sets effective goals for supervision in collaboration with supervisee; Provides information and teaches counseling skills appropriately
- **Structure and Plans:** Assists in case conceptualization and understanding of client dynamics; Explores various therapeutic processes such as confrontation, support, timing, and their uses; Assists supervisee with case management; Views recordings provided by trainee on a regular basis; Uses appropriate books, articles, and other references; Knows campus and community resources and helps supervisee refer clients to resources
- **Evaluation:** Demonstrates the ability to assess skill level of supervisee; Demonstrates ability to formulate and carry out evaluations and to manage the evaluative role, balancing support and challenge
- **Diversity:** Models respect, openness, and awareness towards all aspects of diversity and its impact on both the therapeutic and supervisory process
- **Supervision of Supervision:** Effectively uses supervision of supervision to enhance skills as a supervisor
- **Ethics/Professional Issues:** Promotes awareness of ethical and legal issues; Monitors and provides guidance regarding ethical and legal issues; Addresses supervisee's professional and personal issues and behaviors relevant to professional goals; Encourages and responds to feedback made by supervisee

Outreach

- **Program Development:** Demonstrates the ability to design and professionally present outreach programming; Demonstrates the ability to create learning objectives for outreach programming and evaluate the efficacy of the program in meeting those objectives; Considers current empirical literature, audience needs, and diversity variables when developing programs
- **Implementation:** Demonstrates ability to implement a variety of teaching methods (e.g., lecture, experiential activities, facilitating discussion) to engage the audience, and to professionally and meaningfully achieve the learning objectives for the program
- **Professional and Ethical Skills:** Demonstrates the ability to work with various members of the university community to accurately assess programming needs; Demonstrates professionalism and adherence to ethical and legal standards in all facets of outreach programming
- **Diversity:** Demonstrates sensitivity to diversity issues in all facets of outreach programming

Crisis Assessment and Intervention

- **Assessment:** Recognizes the need for crisis intervention and intervenes effectively; Follows the internship site's crisis intervention protocols; Can conduct a lethality assessment and knows the actions to take when confronted with a client who is a danger to self or others
- **Intervention:** Makes appropriate recommendations regarding referrals, including psychiatric evaluations; Follows ethical and legal guidelines for crisis intervention
- **Supervision:** Seeks consultation and supervision as needed; Is able to learn effectively from supervisor's role modeling of crisis intervention procedures

Group Therapy Skills

- **Planning and Conceptualization:** Demonstrates effective group screening skills; Conceptualizes group process by articulating group dynamics, phases of group development, and appropriate interventions
- **Implementation:** Displays competence in group facilitation and co-facilitation; Implements appropriate group interventions, including establishing rapport, facilitating group cohesion, confronting resistance, and making appropriate self-disclosures and process comments about group functioning; Shows group leadership abilities by demonstrating awareness of client/counselor roles and responsibilities for change; Identifies and articulates co-leadership issues; Writes clear and effective group case notes in a timely manner
- **Diversity and Ethics:** Addresses diversity issues as they affect group processes; Demonstrates knowledge of ethical principles and state law relevant to group therapy, and consistently applies these appropriately, seeking consultation as needed
- **Supervision:** Seeks and integrates supervisory feedback

Goal #3: Interns will acquire and demonstrate the skills necessary to conduct themselves ethically and professionally.

Objectives:

- (1) To produce entry-level clinical psychologists who behave as *ethical* clinical psychologists.
- (2) To produce entry-level clinical psychologists who are actively engaged in their own *professional development*.
- (3) To produce entry-level clinical psychologists who develop and use effective *relationship and interpersonal skills*.
- (4) To produce entry-level clinical psychologists who are competent in *multicultural diversity*.
- (5) To produce entry-level clinical psychologists who are competent in evaluating and developing their own competence (*meta-competency*).

Competencies:

Ethics

- **Knowledge:** Demonstrates knowledge of the APA Ethical Principles and Code of Conduct and other ethical, legal, and professional standards and guidelines relevant to the profession of psychology; Able to recognize ethical or legal issues
- **Ethical Conduct:** Able to analyze ethical or legal issues; Able to self-reflect on the possible ethical or legal implications of his/her actions; Has honesty, integrity, and a sense of personal responsibility; Able to seek consultation or help for ethical problems in supervision; Practices appropriate professional assertiveness related to ethical issues; Is committed to ethical practice

Professional Development

- **Integrity:** Able to use resources to promote effective practice; Is responsible and accountable relative to her/his level of training; Is willing to acknowledge and correct errors
- **Deportment:** Completes professional tasks in allotted/appropriate time and arrives promptly at meetings and appointments; Has developed an organized, disciplined approach to writing and maintaining notes and records; Has developed skills to handle payment-related issues with clients; Able to organize and present case material; Has good day-to-day organizational skills; Has good critical thinking and analysis skills; Able to manage his/her time; Able to interact collaboratively and respectfully with other colleagues; Able to create and conduct an effective presentation
- **Professional Identity:** Demonstrates willingness and motivation to develop his/her knowledge of the empirical literature relevant to clinical work at his/her current internship site; Demonstrates integration of science in professional practice
- **Self Care and Self-Awareness:** Able to self-identify personal distress as it relates to clinical work; Able to seek and use resources that support healthy functioning when experiencing personal distress; Demonstrates self-awareness, understanding, and reflection; Has adequate self-care; Has awareness of her/his personal identity; Has awareness of his/her own beliefs and values as they relate to and influence professional practice and activity; Self-appraises performance; Uses information gathered from self-appraisal to improve his/her effectiveness

Relationship/Interpersonal Skills

- **Rapport and the Therapeutic Alliance:** Takes a respectful, helpful, professional approach to clients; Is able to form working alliances; Is able to deal with conflict and negotiate differences; Understands and maintains appropriate boundaries
- **Professional Relationships:** Is able to deal with conflict and negotiate differences; Understands and maintains appropriate boundaries; Works collegially with fellow professionals; Supports others in their work and gains support for their own work; Provides helpful feedback to peers and receive such feedback non-defensively from peers; Is respectful to support staff roles and persons; Communicates professionally and works collaboratively with community professionals; Is able to observe agency operating procedures; Contributes in ways that will enrich the site experience of future interns; Is knowledgeable of the unique patient care roles of other professionals; Effectively relates to other professionals in accordance with their unique patient care roles; Has the capacity for dialogue with other professionals in a manner that avoids use of psychological jargon

Diversity

- **Individual:** Has knowledge of self in the context of diversity, as he/she operates in the clinical setting with diverse others
- **Applications:** Able to work effectively with diverse others in assessment, treatment, and consultation; Able to select and implement multiple methods and means of evaluation in ways that are responsive to and respectful of diversity; Demonstrates sensitivity to diversity issues in all facets of outreach programming; Addresses diversity issues as they affect group processes

Meta-Competencies

- Knows the extent and limit of her/his skills; Has developed the habit and skills for self-evaluation of clinical skills; Has knowledge of the process for extending current skills into new areas; Is able to use supervision, consultation, and other resources to improve and extend skills; Is committed to lifelong learning

Processes

To develop the competencies listed above, interns receive training in these area at their sites (through supervised clinical experience) and in Consortium-wide training seminars.

Outcomes

Proximal

- Outcomes for interns are measured by formal written evaluations two times per year (at the end of each rotation; completed by supervisors with input from relevant staff and interns' practicum supervisees).
- Outcomes for the program are measured by formal evaluations provided by the interns at the end of each rotation; these evaluations focus on performance of the interns' supervisors and the internship sites.

Distal

- Outcomes for interns are measured by licensure rates and employment data.
- Outcomes for the program are measured by formal evaluations of the program as a whole provided by the interns at the end of the two-year internship.

Internship Sites

University of Kentucky Counseling Center

The University of Kentucky Counseling Center (UKCC) provides free confidential psychological services to currently enrolled UK students, UK faculty and staff, and caregivers. It serves approximately 1200-1300 individuals every year with diverse issues, including depression, anxiety, eating disorders, substance abuse, obsessive-compulsive disorder, posttraumatic stress, bereavement, learning disabilities, social skills deficits, adjustment disorders, and problems with relationships, academic functioning, career goals, concentration, and body image. The UKCC provides academic, career, and personal counseling, outreach programs, consultation, training, and community service to help all students succeed academically, develop and make progress toward life goals, and be productive members of the university and society. The UKCC regularly works in conjunction with the UK Psychology Department, UK Medical Center, Behavioral Health in the University Health Service, Dean of Students and other Student Affairs offices, and all faculty, staff, and administrators on UK's campus. The UKCC is located in Frazee Hall, approximately two blocks from the UK Psychology Department.

The UKCC was founded in 1956. Its mission is to be a national leader among university counseling centers and promote the psychological, educational, and social well-being of students and prepares them to be productive members of the global society. In the service of this mission and the mission of the University of Kentucky, the UKCC promotes the psychological, interpersonal, academic, and vocational development of students, and provides mental health consultation to the campus community. In collaboration with students, schools, colleges, and other units, the UKCC strives to develop a diverse, inclusive, and multicultural community.

The UKCC offers one half-time internship position per rotation. The UKCC provides training to UK clinical and counseling psychology doctoral students and UK clinical psychology interns. Interns at the UKCC will gain experience in empirically-supported treatments, including interpersonal psychotherapy, exposure-response prevention, motivational interviewing, cognitive processing therapy, mindfulness, interpersonal process group therapy, cognitive-behavioral therapies, and prolonged exposure treatment, among others. Additionally, interns will be trained in psychoeducation and outreach programming, relaxation techniques, and crisis assessment and intervention. Interns will regularly work with psychologists, psychiatrists, and clinical nurse specialists. The internship site's Training Director is Diane Sobel, Ph.D.

Eastern State Hospital

Eastern State Hospital provides inpatient care for adults with acute disorders, persistent mental illness, and dual diagnoses; inpatient care for psychiatric evaluation; nursing and social work assessments; psychological assessments; treatment and recovery services; psychiatric rehabilitation; outpatient referrals; discharge placements and case management referral; and consultation. It serves approximately 2200 patients with serious mental illness (e.g., depression, schizophrenia, bipolar disorder) and substance abuse/dependence per year. The Hospital regularly works in conjunction with the UK Psychology Department and various hospital units and departments. Eastern State Hospital is located at 627 West 4th St., Lexington, KY 40508, approximately four miles from the UK Psychology Department.

Eastern State Hospital was founded in 1824 for the purpose of helping people with behavioral health needs grow and recover to live meaningful lives. In the service of this mission and the mission of the University of Kentucky, the Hospital engages in education and the provision of health care services. Additionally, Eastern State Hospital employs a Diversity Work Group, a subcommittee of the hospital Ethics Committee, that works to ensure the provision of a multiculturally-sensitive environment.

Eastern State Hospital offers one half-time internship position per rotation. The program at the Hospital is actively involved with the UK Psychology Department in providing clinical training for doctoral students and interns; additionally, the Hospital trains students from UK counseling psychology and area universities in nursing, psychiatry, occupational therapy, social work, pharmacy, and rehabilitation counseling. Interns at Eastern State Hospital will gain experience in empirically-supported techniques, including motivational interviewing, dialectical behavior therapy, stages of change, cognitive-behavioral therapy, SAMHSA toolkits for serious mental illness, recovery model therapy, psychiatric rehabilitation, social skills training, illness management, and family psychoeducation. Additionally, interns will be trained in forensic evaluation (i.e., civil commitment, competency to stand trial, criminal responsibility, and guardianship), risk assessment for suicide and violence, mental health advocacy, ethics, and consumer-based programs (e.g., NAMI and peer support). Interns will regularly work with psychologists, psychiatrists, social workers, nurses, behavior analysts, occupational therapists, and rehabilitation services staff. The internship site's Training Director is David T. Susman, Ph.D.

Center for the Advancement of Women's Health

The Center for the Advancement of Women's Health serves three primary purposes: to provide high-quality comprehensive medical services for women in a clinical facility located on the second floor of the Kentucky Clinic; to educate patients and the community overall about women's health through educational and community outreach programs; and to expand medical research opportunities for women that encourage advancements in the field of women's health through the Kentucky Women's Health Research Registry and clinical trials. The Center holds regular multidisciplinary clinics where clinical psychology services, including cognitive-behavior therapies and physical self-regulation training, are provided on an as needed basis. It serves approximately 7,800 women per year with a variety of psychological issues, including depression, psychological factors affecting physical conditions, anxiety disorders, and adjustment disorders, as well as a variety of medical conditions amenable to self regulation skills training (e.g., hypertension, pain, stress, and irritable bowel). Women's Health regularly works in conjunction with the UK Psychology Department and the UK Health Enterprise, including Psychiatry, Internal Medicine, Cardiology, Surgery, ENT, OB-GYN, Anesthesiology, Neurology, and Physical Medicine and Rehabilitation. Women's Health, a UK HealthCare site, is located on the second floor of the Kentucky Clinic, approximately two blocks from the UK Psychology Department.

The mission of the Center for the Advancement of Women's Health is to provide high-quality comprehensive medical services, patient and community education about women's health, and expand medical research opportunities for women. In the service of this mission and the mission of the University of Kentucky, Women's Health engages in education, research, and the provision of health care services. Additionally, Women's Health seeks to provide a multiculturally-sensitive environment through active recruitment of diverse health providers and integrating diversity issues into its regular case conference series.

Women's Health offers one half-time internship position per rotation. It has provided training to UK clinical psychology doctoral students since 2009 and internship training since 2011. Interns at the Center will gain broad-based experience in delivering empirically supported cognitive behavioral therapy within a primary care setting. Additionally, interns will be taught skills training for self-regulation, including relaxation training (postural, abbreviated progressive, and stretch-based), diaphragmatic breathing entrainment, and proprioceptive re-education. Interns will regularly work with nurse practitioners, physicians, social workers. The internship site's Training Director is Charles R. Carlson, Ph.D., ABPP.

Adolescent Medicine Clinic

The Adolescent Medicine Clinic is a multidisciplinary clinic where physicians, nurses, social workers, dietitians, medical students and residents, and psychologists engage in the treatment of a wide range of adolescent concerns. Adolescent Medicine is committed to treating every patient as a unique person with unique emotional, physical, and psychological needs. It serves approximately 2,158 adolescents (aged 10 to 21) per year. Its psychological services include the treatment of mood, learning, attention-deficit, disruptive behavior, and eating disorders. Adolescent Medicine regularly works in conjunction with the UK Psychology Department and the UK Division of General Pediatrics, Lincoln County School System, and UK Psychiatry. Adolescent Medicine, a UK HealthCare site, is located on the second floor of the Kentucky Clinic, approximately two blocks from the UK Psychology Department.

The Adolescent Medicine Clinic was founded in 1998 to give adolescents the specialized, comprehensive care they need. In the service of this mission and the mission of the University of Kentucky, Adolescent Medicine engages in education, research, and the provision of health care services. Additionally, Adolescent Medicine seeks to provide a multiculturally-sensitive environment through regular discussion of diversity issues in supervision.

The Adolescent Medicine Clinic offers one half-time internship position per rotation. Adolescent Medicine provides training to psychology graduate students, social work students, medical students, and medical residents; it has provided internship training to UK clinical psychology doctoral students since 2011. Interns at Adolescent Medicine will gain broad-based experience in delivering empirically supported cognitive behavioral therapy for anxiety and mood disorders within a primary care setting. Additionally, interns will be taught parent training for disruptive behavior disorders, engage in consultation with other providers, and provide outreach services (e.g., traveling to a school system in a rural part of Kentucky twice a month). There are occasionally opportunities to write a chapter or article and to present at a conference. The internship site's Training Director is John A. Yozwiak, Ph.D.

Orofacial Pain Center

The Orofacial Pain Center is a multidisciplinary training clinic where dentists, clinical psychologists, physicians, and physical therapists are engaged in the treatment of patients with complex orofacial pain using cognitive-behavior therapies and physical self-regulation training. It serves approximately 450 patients per year; these patients are drawn from a broad geographical area and on average have had pain conditions for over four years. The Center regularly works in conjunction with the UK Psychology Department and the UK Health Enterprise, including Psychiatry, Internal Medicine, Cardiology, Surgery, ENT, OB-GYN, Anesthesiology, Neurology, and Physical Medicine and Rehabilitation. The Center is located in Room D-530 in the UK College of Dentistry, approximately three blocks from the UK Psychology Department.

The Orofacial Pain Center was founded in 1977 for the purpose of helping patients suffering with various temporomandibular disorders. In the service of this mission and the mission of the University of Kentucky, the Center engages in education, research, and the provision of health care services. Additionally, the Center seeks to provide a multiculturally-sensitive environment through active recruitment of diverse health providers and integrating diversity issues into its regular case conference series.

The Orofacial Pain Center offers one half-time internship position per rotation. The Center has provided training to psychology graduate students and post doctoral fellows since 1989 and internship training to UK clinical psychology doctoral students since 2011. Interns at the Center will gain broad-based experience in delivering empirically supported cognitive behavioral therapy within a primary care setting. Additionally, interns will be taught skills training for self-regulation, including relaxation training (postural, abbreviated progressive, and stretch-based), diaphragmatic breathing entrainment, and proprioceptive re-education. The internship site's Training Director is Charles R. Carlson, Ph.D., ABPP.

Training Staff

Training Directors

Note: All Training Directors are supervisors at their specific internship site.

Charles R. Carlson, Ph.D., ABPP

1. Director, Internship Consortium Program; Chair, Internship Training Committee; Department of Psychology, University of Kentucky
2. Clinical Health Psychologist, Center for the Advancement of Women's Health, UK HealthCare, University of Kentucky
3. Director of Behavioral Medicine and Research, Orofacial Pain Center, UK College of Dentistry, University of Kentucky

Vanderbilt University, 1983

Theoretical orientation: Social learning theory

Interests: Self-regulatory control, relaxation training, trigeminal pain management, behavioral health interventions

Diane Sobel, Ph.D.

1. Training Director, Internship Consortium Program, University of Kentucky Counseling Center
2. Senior Staff Psychologist and Coordinator of Training, University of Kentucky Counseling Center University at Buffalo, 1992

Theoretical Orientation: Interpersonal, psychodynamic, feminist, multicultural

Interests: Training and education in professional psychology, trauma therapy, sexual trauma, group therapy, grief counseling, multiculturalism, LGBTQ issues

David T. Susman, Ph.D.

1. Training Director, Internship Consortium Program, Eastern State Hospital
2. Recovery Mall Director and Psychology Services Coordinator, Eastern State Hospital University of Kentucky, 1992

Theoretical Orientation: Integrative

Interests: Recovery-based services for serious mental illness and substance abuse/dependence, ethics, mentoring, behavioral emergencies, advocacy, psychotherapy supervision

John A. Yozwiak, Ph.D.

1. Training Director, Internship Consortium Program, Adolescent Medicine Clinic, UK HealthCare, University of Kentucky
2. Assistant Professor, Department of Pediatrics, Division of Adolescent Medicine, University of Kentucky College of Medicine, Adolescent Medicine Clinic University of Kentucky, 2003

Theoretical Orientation: Cognitive behavioral

Interests: Adolescent mental health

Additional Supervisors

Linda K. Hellmich, Ph.D.

Senior Staff Psychologist and Coordinator of Clinical Services, University of Kentucky Counseling Center

University of Florida, 1995

Theoretical Orientation: Eclectic with a strong psychodynamic and interpersonal foundation

Interests: Holistic integrative counseling and health care, trauma therapy, women's issues, sexual assault policy development

Tina C. Bryant, Ph.D.

Senior Staff Psychologist and Coordinator of Outreach, University of Kentucky Counseling Center
University of Georgia, 2002
Theoretical Orientation: Person-centered, interpersonal, psychodynamic, multicultural
Interests: Multicultural and women's issues, outreach, career exploration

Jamie Lynn Hopkins, Ph.D.

Staff Psychologist, University of Kentucky Counseling Center
University of Calgary, 2003
Theoretical orientation: Cognitive-behavioral and interpersonal fusion
Interests: Depression, anxiety, graduate students, international students, couples, relaxation, mindfulness, exercise and mental health

Nathaniel Hopkins, Ph.D., HSPP

Staff Psychologist, University of Kentucky Counseling Center
University of Illinois, 2003
Theoretical Orientation: Existential, interpersonal, cognitive-behavioral
Interests: Identity development, grief and loss, performance enhancement

Margaret M. Marks, Ph.D.

Staff Psychologist, University of Kentucky Counseling Center
Pennsylvania State University, 2011
Theoretical Orientation: Humanistic, interpersonal
Interests: Training and education in professional psychology, career development, suicide prevention, veteran issues, trauma

Federico "Felito" Aldarondo, Ph.D.

Associate Director and Licensed Psychologist, University of Kentucky Counseling Center
Indiana University, 1998
Theoretical Orientation: Interpersonal, integrative
Interests: Substance abuse and addictive behavior treatment, healthy lifestyle change, motivational interviewing, diversity, group therapy, assessment, mindfulness, interpersonal process in psychotherapy, therapy supervision

John D. Scanish, PsyD

Licensed Psychologist, Eastern State Hospital
Wheaton College, 1998
Theoretical Orientation: Eclectic, cognitive, existential
Interests: Sex offenders/forensic psychology, integration of psychology with religion and spirituality

Rebecca L. Asher, Psy.D.

Licensed Psychologist and Forensic Evaluator, Psychology Department, Eastern State Hospital
Spalding University, 2008
Theoretical Orientation: Cognitive-behavioral
Interests: Forensic evaluation, malingering, severe and persistent mental illness

Donald V. Crowe, Ph.D.

Licensed Psychologist, Eastern State Hospital
University of Kentucky, 1995
Theoretical orientation: Interpersonal, cognitive-behavioral, eclectic
Interests: Severe and persistent mental illnesses, dialectical behavior therapy, treatment of psychological conditions associated with medical illness (particularly chronic pain)

Compensation and Benefits

Each intern is expected to complete 2000 total hours of clinical work during their internship. Interns' clinical work will require 20 hours per week. Each intern is formally titled "Psychology Intern." Due to the nature of the internship program, interns are not allowed to have outside employment (Note: Leisure

activities, such as hobbies, non-clinical volunteer work, church activities, and the like, are not covered by this policy).

Funding Source and Stipend

Interns will be funded through teaching assistantships (TAs), research assistantships (RAs), or fellowships for which they will receive a stipend of \$14,500.00 per year. Interns' specific TA positions will depend on the classes offered during a given semester and may include assisting for undergraduate- or graduate-level psychology courses. RA positions may be offered through the interns' UK Clinical Psychology mentor if funding is available. TA and RA positions require 20 hours per week (Note. This hour-per-week requirement is in addition to the 20 hours per week of clinical work) and include the benefits listed below:

Benefits

- **Tuition Reimbursement:** Interns who have not yet defended their dissertation and, thus, must register for the 2-credit-hour course PSY 767 will have their tuition covered by the Graduate School.
- **Holidays:** Interns have 9 regularly scheduled UK holidays: Labor Day, Thanksgiving Day and the day after Thanksgiving, Christmas Day, New Year's Day, Martin Luther King Jr. Day, Memorial Day, Independence Day, and Presidential Election Day (every four years).
- **Vacation:** Interns receive 2 weeks of vacation time in addition to the regularly scheduled UK holidays listed above. The site supervisors must be notified in advance of vacation plans.
- **Sick Leave:** Sick leave will be dealt with on an individual basis. In the event of an intern's illness, the intern should discuss their options with their supervisor; the intern and supervisor will collaboratively develop a plan to ensure the intern meets their total hour requirement (2000 hours) for the internship.
- **Parental Leave:** Interns, as funded students, will be entitled to up to two weeks of parental leave without loss of stipend immediately following the birth of a child or upon either the initial placement or the legal adoption of a child under eighteen years of age. They are also entitled to unpaid parental leave, up to a maximum total period of leave (paid and unpaid) of twelve weeks. When possible, notice should be provided to interns' supervisors and the Director of Graduate Studies a minimum of 30 days prior to anticipated parental leave.
- **Professional Leave:** Professional leave will be granted for interns to attend professional conferences, workshops, job interviews, doctoral paper defenses, or appropriate professional development activities. Interns must notify their supervisor at least two weeks prior to the anticipated leave. **Note: Interns will not be reimbursed for expenses associated with professional leave activities.**
- **Research:** Interns will have the opportunity to engage in research at individual internship sites. All on-site research should be negotiated with that site's Training Director. Research time will be included in interns' 20-hour-per-week schedule.
- **Health Care:** Interns who pay the University Student Health fee are eligible for medical care through the UK University Health Service. Benefits include: No charge for unlimited primary care, women's care, and behavioral health office visits, as well as health education and urgent care; Some laboratory services and x-rays ordered by the health service clinician as part of an evaluation for illness or injury; Some medications, allergy shots, and immunizations; Access to the Kentucky Clinic Pharmacy. As UK employees, interns may receive free required immunization and TB skin tests through Employee Health.
 - Note. Appointments are required for personal and most employee health visits; appointments may be made by calling 859-323-APPT [2778]. No appointment is required for TS skin tests; however, TB skin tests are not given on Thursdays. Interns must have their UK ID cards for all visits to the UK University Health Service and employee badges for all Employee Health visits.
- **Health Insurance:** As funded students, interns are provided health insurance, through the graduate student insurance plan, at no charge. This insurance plan, administered through the Graduate School Funding Office, is a preferred provider organization (PPO); UK Hospital and UK College of Medicine physicians are the in-area preferred providers. When receiving treatment away from UK, interns can expect higher out-of-pocket costs. Additionally, the plan is an illness and injury plan only; it does not provide for preventive care or coverage of treatment in the absence of illness or injury, except as specifically provided in the policy. The current insurance plan is underwritten by Academic Health Plans/Humana Insurance Company. See the [UK Health Plan](#) and [Frequently Asked Questions](#) websites for more information regarding coverage.

- **ID Badges/Cards:**
 - ID badges are provided for interns (administrative staff will coordinate badge procurement). Each internship site has its own badge. ID badges serve as identification badges and, at certain internship sites (e.g., the Medical Center), provide entry into employee-only areas. ID badges are to be worn at all times during internship work hours.
 - All interns may continue to renew UK Student ID Cards (i.e., the University's photo ID). These cards allow interns to check out materials from the UK Library System, access the University's recreational center, and provide discounted pricing for UK athletic events.

Academic and Religious Accommodations

- **Academic:** Students with documented physical, psychological, learning, or temporary disabilities may receive assistance and support from the [Disability Resource Center](#) (DRC). Students with disabilities should see the DRC's website for specific [documentation guidelines](#) and contact a DRC associate to discuss available accommodations.
- **Religious:** Interns are allowed time off to observe religious holidays. Interns must notify their supervisor of time-off needed for religious purposes within the first two weeks of the rotation.

Facilities

Each intern has her/his own office within the UK Psychology Department and at his/her internship rotation site. UK Psychology Department offices, provided for the purpose of fulfilling teaching assistantship duties, contain a desk, desk chair, lockable file space, and other typical office accessories for each student/intern; some offices contain one computer with internet access. These offices are typically shared by 4-5 interns and/or psychology graduate students. Secretarial support services and office supplies are available as needed. Interns have access to a graduate student computer lab (located in the UK Psychology Department) containing 5 computers with internet access and printing capabilities. Facility keys will be provided as needed.

University of Kentucky Counseling Center

At the UKCC, interns are provided with a private office containing a desk, desk chair, phone, computer with internet access, lockable filing cabinet, and general office supplies. The intern's office may be utilized by UKCC doctoral-level practicum students on days when the intern is not at the UKCC. Additionally, the UKCC is equipped with digital cameras for recording therapy sessions.

Eastern State Hospital

At Eastern State, interns are provided with a private office containing a desk, desk chair, phone, computer with internet access, lockable filing cabinet, and general office supplies. Additionally, Eastern State is equipped with cameras for recording therapy sessions.

Center for the Advancement of Women's Health

At Women's Health, interns are provided with private offices containing a desk, desk chair, phone, computer with internet access, lockable filing cabinet, and general office supplies.

Adolescent Medicine Clinic

At Adolescent Medicine, interns are provided with a private office containing a desk, desk chair, phone, computer with internet access, lockable filing cabinet, and general office supplies. Additionally, Adolescent Medicine is equipped with portable audio recorders for recording therapy sessions.

Orofacial Pain Center

At the Orofacial Pain Center, interns are provided with cubicle office space (offices have 6 cubicles within one room) containing a desk, desk chair, phone, computer with internet access, and general office supplies. There is a medical records file cabinet (not within the office space) available for locking up client files.

By using their UK Student ID Cards, Consortium interns have access to UK's Library System, including a main library, nine specialty libraries (e.g., the Medical Center Library), E-journals, and online databases. UK's Johnson Recreation Center (including facilities for basketball, weight training and conditioning, group fitness classes, climbing, volleyball, badminton, jogging, racquetball, and wallyball) is available to interns who pay the Recreation fee.

SELECTION

Selection Criteria

- **Academic Record:** Satisfactory completion of all doctoral-level coursework (Note. Interns may not take doctoral-level courses during the internship); must be in the 3rd to 5th year of the UK Clinical Psychology Doctoral Program
- **Clinical Experience:** Completion of required clinical hours (minimum of 200 hours) and types of clinical experience (e.g., minimum 4 individual adult clients) at the Jesse G. Harris Psychological Services Center (see the UK Clinical Program Graduate Student Handbook); completion of clinical practicum hours (approx. 1300 hours); successful completion of EPPP is desirable but not required
- **Competency:** Advanced level (score of 6 or 7) on critical items (marked with a Ψ) on the [Intern Competency Rating Scale](#)
- **Scholarship/Research:** Fit with scientist-practitioner model; successful dissertation proposal must be completed prior to the internship; research ability must be at a reasonable level
- **Diversity Experience:** Must have completed the required Multicultural course
- **Match with Site:** Must show evidence of desire to train with site (not just a need to stay in Lexington); preference for previous related experience; preference for desire to work in a related setting
- **Writing Skills:** Preference for candidates who demonstrate good writing skills (professional, organized, articulate)
- **Intangibles:** Demonstrated ability to handle the type of work required of the internship; Preference for candidates who are flexible, team players, mature, and open to feedback
- **Background Check:** All candidates will have undergone a background check as part of the UK Clinical Psychology Doctoral Program requirements. A prerequisite for being selected as a Consortium intern is to have had their background judged as adequate for the Doctoral program. All candidates must be eligible to work in the U.S.

Selection Procedures

Students in the UK Clinical Psychology Doctoral Program who are interested in the Internship Consortium Program should express this interest to the Director of Clinical Training (DCT). The DCT will then meet with the student to evaluate their progress through the graduate program on the criteria listed above. Students who meet the criteria, according to the DCT, will be added to a list of potential internship candidates. The curriculum vitae for potential internship candidates will be sent to the Internship Training Committee (ITC). If the ITC agrees that the potential internship candidate meets the above selection criteria, the Training Directors will schedule interviews with internship candidates who are interested in that Training Director's site's internship rotation. Following all interviews for each site, the ITC will decide which internship candidates will be selected for the Consortium and assign interns to specific rotations. All potential candidates will then be informed of the ITC's decision regarding admission/rejection via formal letter.

The Consortium will make consistent and sincere efforts to recruit, select, and retain diverse intern candidates. The internship is committed to upholding the APA Ethical Principles and Code of Conduct in all intern recruitment and selection procedures.

The internship lasts two full calendar years, beginning July 1st and ending June 30th; thus, interns will begin and end their internship on the same schedule as their colleagues in medical residency programs.

Dual Relationship Guidelines

“Generally, [dual] role relationships arise when an individual participates simultaneously or sequentially in two or more relationships with another person. Harmful [dual] role relationships typically arise when there are substantial differences or conflicts between the two roles.” (Kitchener, 1999, p. 111).

Whenever possible, interns will supervise practicum students who are not from the UK Clinical Psychology Doctoral Program (e.g., they may supervise students from the UK Counseling Psychology program). In the rare cases of a UK Internship Consortium intern supervising a UK Clinical Psychology Doctoral practicum student it will not be permissible for the intern and practicum student to have any social ties with each other (e.g., no friendship, academic relationship, etc.).

Any faculty members or senior staff involved with the Consortium will be clear about their roles. If a faculty member also serves as a senior staff at one of the Consortium sites, they will recuse themselves from internship selection.

Should issues of possible dual relationships regarding interns' supervisees arise, these issues will be handled within the context of interns' supervision.

The Internship Consortium adheres to the APA Ethical Standards as well as all relevant local and national laws regarding dual relationships.

Disclosure Statement

Internship applications may be discussed among the UK Clinical Psychology Doctoral Program faculty and staff as well as various staff members at the internship sites. If selected into the Internship Consortium Program, internship files (including application, written evaluations, etc.) will be shared with APA site visitors during any accreditation visits.

Additional Requirements

Immunization

All interns are required to undergo yearly TB skin tests (or show proof of having undergone a TB skin test), proof of one Measles, Mumps, Rubella (MMR) immunization or Titer test, and proof of Chicken Pox vaccination, physician's documentation of disease, or Varicella Titer. The Hepatitis B vaccine is offered to interns free of charge through UK Employee Health; interns must sign a declaration form stating if they want the vaccine, if they have already had the vaccine, or if they refuse the vaccine. Additionally, the Orofacial Pain Center and Center for the Advancement of Women's Health require an up-to-date tetanus immunization prior to beginning their rotations.

Registration

Interns must register for the PSY 708 "Internship in Clinical Psychology" course (0 credit hours) for each fall and spring semester that they are an intern. Interns who have not yet defended their dissertation must also register for PSY 767 "Dissertation Research Credit" (2 credit hours) during the fall and spring semester up to and including the semester in which they defend their dissertation; interns should register for the section for which their UK Psychology Department research mentor is the instructor. Interns do not need to register to any courses during the summer sessions.

TRAINING AND SUPERVISION

Orientation

Internship begins with one week of training and activities designed to introduce the Consortium, our various service delivery areas, and to outline the internship expectations. Modules reviewing crisis assessment/intervention and emergency procedures, the *Diagnostic and Statistical Manual of Mental Disorders* (4th edition, text revision; DSM-IV-TR), and professional ethics are provided. Training in group processes and workshop design begins during orientation. Additionally, each site is responsible for orienting its interns to site-specific practices within the first two weeks of the rotation.

Supervision

The UK Internship Consortium Program takes a developmental approach to training and supervision. Interns are viewed as colleagues-in-training, with consideration for each intern's individual needs and skill level. The internship is viewed as a transitional period in which interns move from the role of student to that of a professional. Faculty and staff members are committed to helping that transition be as stress-free as possible. Interns are encouraged to use the internship period to challenge themselves in the supportive environment of the training program.

The Consortium supports variety in therapeutic approaches within a framework that maintains the therapist-client relationship as central to effective intervention. Similarly, the supervisor-intern relationship is central to effective supervision. If the intern and the supervisor are to grow professionally and personally, this relationship must be one of mutual trust, respect, honesty, and commitment to sustaining the relationship.

Interns receive a minimum of two hours per week of individual supervision from a licensed psychologist at their internship site. Interns will receive more than two weekly hours of supervision as needed to provide adequate supervision for interns' case load. Interns are matched with individual supervisors at the beginning of internship training based on site and rotation; interns will have a different supervisor for every internship rotation. The supervisor for each intern is a licensed psychologist who carries clinical responsibility for the intern's cases. One major training role of the supervisor is to insure quality of care in service delivery. Individual and group supervision focus principally on developing understanding and competence in formulating and implementing intervention strategies; this is accomplished through close reporting and discussion of case material and supplemented by audio and video tape recordings. All areas of the interns' work are discussed in supervision, including intakes, interventions, consultation/outreach, assessment, ethics, the therapeutic relationship, work with diverse populations, applied research, and paperwork, as well as supervision of others, crisis assessment and intervention, and group intervention where applicable. Additional supervision time is typically offered for all specialty activities (e.g., group interventions, crisis assessment and intervention). Individual supervisors work as part of collaborative staff teams to help interns develop mastery of the various types of clinical work. The supervisor also serves as an advocate and consultant and assists the intern in decisions related to professional development.

Cases are assigned slowly in the initial months of training. Initial cases, as much as possible, are selected as being the most appropriate for beginning work and will receive close and extensive supervision. Supervisors may join with interns in clinical activities, as needed. Cases continue to be assigned with a goal of a full caseload by the end of the rotation. As the rotation progresses, interns are assigned cases that are more diverse, complex, and challenging. Interns are expected to be able complete all of their assignments with increasing levels of independence; supervision time, however, is never reduced.

It is also expected that interns will interact with the other training staff members at their site on a regular basis. For instance, interns may co-lead a therapy group with another staff member. Interns are exposed on a regular basis to a range of theoretical orientations and role models from various health care and mental health care fields. This encourages interns to expand their perspectives and to better define the conceptualizations that fit for them. Faculty and staff members are encouraged to challenge interns' assumptions, promote creativity, and provide the enrichment of new perspectives.

At the Orofacial Pain Center and the UK Counseling Center, interns provide supervision to practicum students. Since many practicum students at the Consortium sites are from the same academic programs as the interns, particular attention is given to potentially problematic dual roles. It is preferred that interns not supervise practicum students from the UK Clinical Psychology Doctoral Program, but rather students from other programs (e.g., the UK Counseling Psychology program). Interns may not supervise practicum students with whom they have had or are likely to have any personal or social relationship.

Ongoing Supervisory Responsibilities

- Monitor scheduling of new cases.
- Co-sign all documentation of clinical work.
- Review audio/video tapes or participate in live observation of clinical work.
- Supervise all clinical and nonclinical work.
- Monitor use of vacation time, sick days, and professional leave.
- Ensure that all evaluations are completed in a timely manner.
- Track progress of interns' clinical skill and competency.

Training Seminars

Consortium-Wide Seminars

One-hour Consortium-wide training seminars are held every other Wednesday in 209 Kastle Hall. These seminars are lead and coordinated by the Internship Program Director. This ongoing seminar series is designed to focus attention on important issues in clinical work for entry-level therapists. They are planned and scheduled in a cumulative, graded fashion to meet the needs of entry-level clinicians as they learn to do and think about diagnosis and treatment.

Topics

Orientation: Internship begins with one week of training and activities designed to introduce the Consortium and our various service delivery areas, and to outline the internship expectations. Modules reviewing crisis assessment/intervention and emergency procedures, the *Diagnostic and Statistical Manual of Mental Disorders* (4th edition, text revision; DSM-IV-TR), and professional ethics are provided. Training in group processes and workshop design begins during orientation.

Subsequent Consortium-wide training seminars cover various topics, including:

- **Professional Ethics:** APA ethical guidelines; Kentucky and federal statutes; explanation of ethical issues through case examples.
- **Supervision of Others:** How to be a good supervisor.
- **Cultivating Diversity:** Primarily experiential format; will discuss experiences, issues, concepts, and skills relevant to being a diversity-sensitive practitioner and individual.
- **Professional Development:** Evidence-based practice; Short-term treatment; Assessment/Consultation; Outreach; Developing a professional identity (subtopics: goal setting, decision making, doing your best); Ethics and professional relationships; Managing professional relationships; Planning and organization; Negotiation; Navigating challenging professional environments and interpersonal differences; Transference, countertransference interpretation, and boundaries; Financial management; Insurance.
- **Career Advancement:** Inter-professional networking; EPPP and licensure; Curriculum vitae; Job talks; Job letter and letters of recommendation; Traditional and non-traditional career paths; Professional meetings - the abstract; State, national, and international professional societies; Career decisions (subtopics: timing, opportunity, team building); Alternatives to a first job (subtopic: post-doctoral training).
- **Organizational Citizenship:** How to be a good departmental citizen (subtopics: politics of organizations and working with others, lines of responsibility, professional deportment, informal and formal communication, organizational values).

Bimonthly, seminar sessions will be used for intern feedback, in which interns may bring in topics that concern them and their clinical work (e.g., current client issues; issues related to how their internship site is run).

Site-Specific Seminars

Some internship sites require additional site-specific training. The scheduled time and location of these seminars is at the discretion of the Internship Site Training Directors. These seminars are led by Internship Site Training Directors and supervisors at specific Consortium sites. Some site-specific training seminars are led by professionals from the Lexington community and/or held on an as-needed basis only.

Topics

UK Counseling Center

- **Site-Specific Didactic Training (called “Inservice seminar”):** Topics depend on availability; may include working with clients with attention deficit hyperactivity disorder beyond assessment, working with clients with Asperger’s disorder, disability laws and their impact on students, and programs for sexual abuse perpetrators.

Eastern State Hospital

- **Site-Specific Didactic Training:** Interns spend the first week of the rotation in required hospital orientation classes. Thereafter, interns attend didactic seminars whose topics vary; topics may include ethics, forensics, dialectical behavior therapy, serious mental illness, psychopharmacology, pain management, depression/suicide, and applied behavior analysis.

Center for the Advancement of Women's Health

- **Training in Site-Specific Interventions:** Skills training for self-regulation, including relaxation training (postural, abbreviated progressive, and stretch-based), diaphragmatic breathing entrainment, and proprioceptive re-education.

Orofacial Pain Center

- **Orientation and Training in Site-Specific Interventions:** Includes observation of Orofacial Pain staff working with clients, introductions to Orofacial Pain Center clinical treatment protocol, administrative forms, and examination procedures, case conferences on orofacial pain cases, training in skill-based interventions, and lectures on varying topics. Skills training is for self-regulation techniques, including relaxation training (postural, abbreviated progressive, and stretch-based), diaphragmatic breathing entrainment, and proprioceptive re-education. Lecture topics depend on availability and may include introduction to orofacial pain and related conditions (e.g., intra-oral lesions and fungal infection); CPR; treatment appliances (e.g., for occlusal and sleep disorders); and the roles of clinical psychology, physical therapy, and pharmacology in orofacial pain.

Case Presentations

The sites at the UK Counseling Center and the Orofacial Pain Center require formal case presentations. General requirements of these case presentations are listed below:

UK Counseling Center

- Requires two formal case presentations: one presented to practicum students mid-way through the rotation and one presented at the staff training meeting on a topic of the intern's choice. For formal case presentations, interns must be prepared to discuss cases, including relevant symptoms and social history, case conceptualization, diagnosis, synopsis of and goals for the treatment, and questions for discussion, using a powerpoint presentation. Informal case consultations for clients who may need extended services may be presented at staff meetings on an as-needed basis.

Orofacial Pain Center

- Requires weekly presentation of new client cases seen by the intern. Interns should be prepared to formally discuss their case conceptualization, diagnoses, and planned treatment for any new client.

Supervision of Others

All interns will engage in supervision of others during one or more internship rotations. Supervision of others is an available clinical experience at the Orofacial Pain Center and UK Counseling Center rotations. The number of supervisees and amount of time spent supervising others will vary from site to site.

Research

The Consortium stresses science-based practice. To further the science of psychology, interns will have the opportunity to engage in research at individual internship sites. All on-site research should be negotiated with that site's Training Director. Research time will be included in interns' 20-hour-per-week clinical work schedule.

Interns funded through research assistantships will be engaged in research for 20 hours per week. Interns who wish to work on their doctoral research and/or participate in research projects in addition to those provided by their internship rotation site (and/or research assistantship, if applicable) may do so provided it does not (1) interfere with their performance in internship clinical work or (2) infringe on completion of their internship clinical hours (20 hours per week) or completion of teaching/research assistantship hours (20 hours per week). Interns are encouraged to attend professional conferences during their internship and will be provided professional leave for this purpose.

Interns engaged in research activities must have an up-to-date [CITI Human Subjects Protection Training](#) certificate on file with UK's Office of Research Integrity (must be updated every three years).

Evaluation

General Procedures

Evaluation in the Consortium is to be a collaborative process designed to facilitate growth, to pinpoint areas of strength and difficulty, and to refine goals. It is a tool for performance evaluation and a vehicle for change.

Interns are formally evaluated two times per year (at the end of each rotation) by supervisors (with input from relevant staff and interns' practicum supervisees) using the "[Intern Competency Rating Scale](#)." Evaluation is based on a variety of staff experiences with the intern, including: direct observation of service delivery; review of audio/video tapes; review of client records and clinical reports; discussions in supervision and seminars; and/or case and assessment presentations. Interns will be given written and verbal feedback regarding their performance following each formal evaluation. It should be noted, however, that supervisors will be informally tracking interns' progress on competency areas throughout each rotation to ensure that interns are making good progress.

Interns will also be evaluated by supervisees at the end of rotations in which they supervised others. Supervisees will evaluate interns using the "[Internship Site and Supervisor Evaluation Form](#)."

Supervisors and internship sites are also formally evaluated by interns at the end of each intern's rotation using the "[Internship Site and Supervisor Evaluation Form](#)," though interns may give verbal feedback to the Internship Program Director at any point during the internship. Interns will evaluate their overall internship experience with the "[Overall Internship Evaluation Form](#)" at the conclusion of the internship. Revisions to the training program are constantly being made on the basis of this feedback.

Program Completion Requirements

At the end of the two-year internship period, the Internship Program Director will write a formal letter summarizing an intern's performance, including information from formal evaluations and anecdotal information from supervisors and internship site staff; copies of this letter will be given to the intern and the Director of Clinical Training. For interns to graduate from the Consortium, they must complete 2000 clinical hours and receive a "6" or "7" on the [Intern Competency Rating Scale](#) in the following areas: assessment, intervention, outreach, supervision of others, consultation, and professional practice (including relationship and interpersonal skills, diversity, ethics, professional development, and meta-competencies). Interns who attend rotations with ancillary skill training (i.e., crisis assessment and intervention, and group therapy) should receive a "6" or "7" on the [Intern Competency Rating Scale](#) in these skill domains upon graduation. In addition, completion of the requirements in any developmental or probation plan (see Remediation and Disciplinary Procedures section below) must be met prior to graduation.

Upon graduation, interns will receive a certificate of completion, indicating they have completed all requirements of the UK Internship Consortium Program. Though interns are expected to have defended their dissertations by the end of the internship, the Internship Certificate of Completion will not indicate the completion of their doctoral training; instead, completion of doctoral training will be certified by receipt of the diploma.

Ethical Standards

The Consortium adheres to ethical and legal standards in all areas including direct service, training, and research. This commitment is woven into every aspect of the training program. All site staff members are expected to be thoroughly familiar with the APA Ethical Principles of Psychologists and Code of Conduct, related professional guidelines, and Kentucky and Federal Statutes (including HIPAA) which apply to the practice of psychology.

Familiarity with codes of ethics and statutes is not enough to insure ethical behavior by psychotherapists. Kitchener (1986) stated counselors should be equipped with the cognitive tools that allow them to critically evaluate and interpret codes to which they have agreed to adhere. They must also be able to evaluate their feelings as appropriate or inappropriate for ethical behavior.

Based on Kitchener's recommendation to learn about ethics on an on-going basis, the Consortium members are dedicated to helping interns to recognize and grapple with ethical dilemmas related to their clients. Ethical issues, principles, and standards, and Kentucky and federal statutes are directly addressed in training seminars and throughout the internship training years. During individual and group supervision, ethical principles and behaviors are frequently reviewed as they relate to the intern's caseload. Group discussion of ethical and legal issues encourages the consideration of different perspectives and helps generate creative and ethically defensible solutions to ethical dilemmas.

The UK Institutional Review Board (IRB) must approve any research conducted by the Consortium.

Interns are expected to:

1. Form an awareness and understanding of the following codes of ethics and professional guidelines:

- [APA Ethical Principles and Code of Conduct](#) (2002, Amended June 1, 2010)
- [APA Practice Guidelines](#)

Including:

[Guidelines for the Practice of Parenting Coordination](#)
[Record Keeping Guidelines](#)
[Guidelines for Child Custody Evaluations in Family Law Proceedings](#)
[Guidelines for Psychological Practice with Girls and Women](#)
[Guidelines for Psychological Practice with Older Adults](#)
[Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists](#)
[Practice Guidelines Regarding Psychologists' Involvement in Psychopharmacological Issues](#)
[Guidelines for Psychological Evaluations in Child Protection Matters](#)
[Guidelines for Psychological Practice in Health Care Delivery Systems](#)
[Practice Parameters: Screening and Diagnosis of Autism](#)
[Guidelines for Test User Qualifications](#)
[Guidelines for Psychological Practice with Lesbian, Gay, and Bisexual Clients](#)
[Guidelines for Assessment of and Intervention with Persons with Disabilities](#)
[Guidelines for the Evaluation of Dementia and Cognitive Change](#)

2. Form an awareness and understanding of the following statutes and legal decisions:

- Regulations of the Kentucky Board of Examiners of Psychology

Especially:

[Kentucky Administrative Regulations](#)
[Kentucky Revised Statutes 319](#)
Declaratory Rulings:
[Regarding 202A Evaluations](#)
[Regarding Release of Raw Test Data](#)
[Regarding the Employment of Psychology Students](#)

- [Kentucky Revised Statutes regarding involuntary commitment](#)

Especially:

KRS 202A.011	KRS 202A.028	KRS 202A.096
KRS 202A.014	KRS 202A.031	KRS 202A.151
KRS 202A.021	KRS 202A.051	KRS 202A.191
KRS 202A.026	KRS 202A.091	KRS 202A.400

- [Tarasoff v. Regents of University of California, 17 Cal. 3d 425, 551 P.2d 334, 131 Cal. Rptr. 14 \(Cal. 1976\)](#)
- [HIPAA](#) (Health Insurance Privacy and Portability Act)

3. Demonstrate appropriate concern and advocacy for client welfare and conduct themselves in an ethical manner at all times.

DUE PROCESS

“Problem Behaviors” vs. “Impairment”

Interns experience significant developmental transitions during the training period. One aspect of the training process involves the identification of growth and/or problem areas of the intern. 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, D. H., Baker, J. M., Jennings, M.I. & Yarris, E., 1983). Problems are typically amenable to management procedures or amelioration. While professional judgment is involved in deciding the difference between impaired and problem behavior, impairment can be broadly defined as interference in professional functioning which is reflected in one or more of the following ways: 1) an inability or unwillingness to acquire and integrate professional standards into one's repertoire of professional behaviors; 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 dysfunction, and/or strong emotional reactions which interfere with professional functioning.

More specifically, problems will typically become identified as impairments if they include one or more of the following characteristics (Lamb et al., 1987):

- The intern does not acknowledge, understand, or address the problem when it is identified.
- The problem is not merely a reflection of a skill deficit that can be rectified by academic or didactic training.
- The quality of services is sufficiently negatively affected.
- The problem is not restricted to one area of professional functioning.
- A disproportionate amount of attention by training staff is required, and/or;
- The intern's behavior does not change as a function of feedback, remediation efforts, and/or time.

General Procedure

At any time during the internship a supervisor or site staff member may designate some aspect of an intern's performance as inadequate or problematic. By the same token an intern may take issue with a staff member regarding a particular behavior or pattern of behaviors or with the entire staff or Consortium regarding policy or procedure.

It is expected that in either case, the complainant will first take the issue directly to the person(s) with whom they take issue and that the parties will work to resolve the issue in a manner satisfactory to both.

In the event that either party feels dissatisfied with the outcome, the following remediation, disciplinary, and grievance procedures are established to aid in the resolution of problems.

Remediation/Disciplinary Procedures (initiated by a staff member toward an intern)

Should an internship staff member (i.e., supervisor and/or site staff person) feel that an intern is not performing in an appropriate/professional manner or if a supervisor feels an intern is not performing to a sufficient level of competence/skill, it is the staff person's responsibility to provide feedback to the intern. If the problem is not resolved, the clinical supervisor shall be informed and shall discuss the concern with the intern in a supervisory session. The supervisor and intern will work collaboratively to develop a plan for remediation. The intern will be provided a time frame for problem remediation as well as potential consequences if unresolved. Should the problem persist, the Chair of the Internship Training Committee will work with the site to develop a written (developmental or probation) plan. Written documentation of unprofessional behaviors will be provided, as well as conditions that must be met for the intern to resume normal status. A time period for further remediation will be given, as well as the date for future review by the staff, and consequences for failure to remediate. The intern, supervisor, and the Internship Program

Director will sign and date the document, with copies given to the intern. The UK Clinical Psychology Doctoral Program will also be given a copy of any written plan. Upon review of planned remediation, the intern will receive written feedback regarding whether he/she has completed the remediation or is making good progress (in the case of the latter, an additional date for future review will be given). Should an intern commit a felony, have sexual contact with a client, or perform any other serious violation of ethical conduct, he/she will be placed on suspension immediately, with further disposition determined by the Internship Program Director and Consortium staff, which may include reporting the incident to outside agencies.

Should the intern have grievance with the processes discussed above, he/she will be directed to pursue it with the Director of Clinical Training, Director of Graduate Studies, Department Chair, Dean of the Graduate School, or the Office of the Academic Ombud, in that order (as described in the Grievance Procedure section of this Handbook).

Levels of Remedial Consequences

Once a problem has been identified in the intern's functioning and/or behavior, it is important to have meaningful ways to remediate the particular difficulty. The following represents several possible levels of consequences in order of the severity of the problem or impairment under consideration.

- **Verbal Warning:** A verbal warning to "cease and desist" the inappropriate behavior represents the lowest level of possible remedial action. This consequence is designed to be primarily educative in nature and typically will occur in the context of the intern's supervision. Depending on the nature of the problem, supervision time might be increased and/or changed in format or focus and case responsibilities may be changed.
- **Developmental Plan:** This written remedial plan will include a list of the competencies under consideration, the date(s) the problem(s) was(were) brought to the intern's attention and by whom, the steps already taken by the intern to rectify the problem(s), the steps already taken by staff/faculty to rectify the problem(s), the expectations required, the intern's responsibilities, the staff/faculty responsibilities, the timeframe for acceptable performance, the assessment methods, the dates of evaluation, and the consequences of unsuccessful remediation.
- **Probation Plan:** If the intern fails to remediate a developmental plan, or if the performance problem is too severe for a developmental plan, a probation plan will be written. This remediation plan is similar to the developmental plan (see above) but failure to remediate may lead to the dismissal from the program.
- **Suspension and Dismissal:** 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 lack of change in behaviors for which an intern has been placed on probation, suspension of agency privileges may be a recommended consequence. The intern will be notified immediately, and will be provided with a copy of the documentation and reminded of grievance and appeal procedures. If the decision is made to suspend the intern, the Internship Program Director will send written notification of this action to the UK Clinical Psychology Doctoral Program within two working days of the decision and also contact the intern's academic advisor. Suspension may take the form of either a required leave of absence from the agency or recommendation that the intern be terminated from the training program. In the latter case, the Consortium will make recommendations to the academic program regarding further remediation and/or a career shift.
- **Temporary Reduction or Removal of Case Privileges:** At any point during this process, if it is determined that the welfare of the intern and/or the client has been jeopardized, the intern's case privileges will either be significantly reduced or removed for a specified period of time. At the end of this time, the intern's supervisor, in consultation with the site training staff, will assess the intern's capacity for effective functioning and determine whether or not the intern's case privileges are to be reinstated. The UK Clinical Psychology Doctoral Program will be notified if such action is taken.

Grievance Procedures (initiated by an intern)

An intern who has a grievance, such as unfair treatment or unethical behavior by one or more site supervisors or staff persons, which he/she has been unable to resolve through discussion with that person

should discuss the matter with their supervisor. Such discussion is confidential and should involve the development of specific plans to resolve the problem (e.g., scheduling a meeting, mediated by an impartial party, between the intern and the individual with whom the intern has a problem). If the supervisor is not impartial, the intern may discuss the matter with the internship site's Training Director. If the site's Training Director is not impartial, the intern may discuss the matter with the Internship Program Director. If the Internship Program Director is not impartial, the intern may discuss the matter with the Director of Clinical Training. If after this discussion the intern wishes to pursue a formal grievance, the intern should submit to the Director of Graduate Studies (DGS) a written document describing the grievance. An impartial three-person committee composed of training staff, two chosen by the DGS and one chosen by the intern, will be assembled. This committee will, in a timely fashion, gather information regarding the grievance, inform the intern of its findings, and offer recommendations to the DGS. The DGS will then make a decision based on all available information and communicate this decision in writing to all concerned parties. If the intern's grievance involves the DGS, the intern may follow the above steps with the Department Chair. If the Department Chair is not impartial, the intern may discuss the matter with the Dean of the Graduate School. The internship will document a summary of each formal grievance, as well as planned remediation of the issue and the outcome of attempted remediation. The Internship Training Committee will be informed of all intern grievances and adjust Consortium procedures, staffing assignments, etc. as needed to assist in planned remediation of intern grievances. An intern who is dissatisfied with the results of these procedures may pursue the grievance procedures of the Office of the Academic Ombud, as described in the University Bulletin.

Rights and Responsibilities

Expectations of Consortium interns include the following:

- To behave according to the APA Ethics Code and other APA practice guidelines.
- To behave in accordance with federal and Kentucky state laws and regulations and with HIPAA.
- To act in a professionally appropriate manner that is congruent with the standards and expectations of each internship site (including a reasonable dress code), and to integrate these standards as a professional psychologist into a repertoire of behaviors, and to be aware of the impact of behaviors upon other colleagues.
- To responsibly meet training expectations by fulfilling goals and exit criteria.
- To make appropriate use of supervision and other training formats (e.g., seminars) through such behaviors as arriving on time and being prepared, taking full advantage of learning opportunities, as well as maintaining an openness to learning and being able to effectively accept and use constructive feedback.
- To be able to manage personal stress, including tending to personal needs, recognizing the possible need for professional help, accepting feedback regarding this, and seeking that help if necessary.
- To give professionally appropriate feedback to peers and training staff regarding the impact of their behaviors, and to the training program regarding the impact of the training experience.
- To actively participate in the training, service, and overall activities of the Consortium, with the end goal of being able to provide services across a range of clinical activities.

In general, the Consortium will provide interns with the opportunity to work in a setting conducive to the acquisition of skills and knowledge required for a beginning professional.

More specifically, the rights of interns will include:

- The right to a clear statement of general rights and responsibilities upon entry into the internship program, including a clear statement of goals of the training experience.
- The right to clear statements of standards upon which the intern is to be formally evaluated two times per year.
- The right to be trained by professionals who behave in accordance with the APA Ethics Code and other APA practice guidelines.
- The right and privilege of being treated with professional respect as well as being recognized for the training and experience attained prior to participation in the Consortium.
- The right to ongoing evaluation that is specific, respectful, and pertinent.
- The right to engage in ongoing evaluation of the training experience.

- The right to initiate an informal resolution of problems that might arise in the training experience through request(s) to the individual concerned, the internship site Training Director, the Internship Program Director, and/or the training staff as a whole.
- The right to due process to deal with problems after informal resolution has failed, or to determine when rights have been infringed upon (see Due Process section in this handbook).
- The right to request assistance in job search and application (for interns).
- The right to privacy and respect of personal life.
- The right to expect that the training staff will try to make accommodations to meet any special training needs.

SOCIAL MEDIA POLICY

The University of Kentucky's (UK) [Social Media Use Policy](#) defines *social media* as “media designed to be disseminated through social interaction, created using highly accessible and scalable publishing techniques online;” examples include but are not limited to LinkedIn, Facebook, Twitter, YouTube, Flickr, iTunes U, Second Life, and MySpace. Interns who use social media and other forms of electronic communication should be mindful of how they interact with and how their communication may be perceived by clients, colleagues, faculty, students, parents, patients, alumni, donors, media, other University constituents, and others. Interns, as UK employees, are expected to follow the same behavioral standards online as they would in the real world. Interns should make every effort to minimize material that may be deemed inappropriate for a psychologist in training or a UK employee. To this end, interns should set all security settings to “private” and should avoid posting information/photos or using any language that could jeopardize their or the University's professional image. Interns should consider limiting the amount of personal information posted on these sites, and should never include clients as part of their social network, or include any information that might lead to the identification of a client, or compromise client confidentiality in any way. Greetings on voicemail services and answering machines used for professional purposes should also be thoughtfully constructed. Interns are reminded that, if they identify themselves as an intern in the program and/or affiliated with UK, the Consortium and UK have some interest in how they are portrayed. If interns report doing, or are depicted on a website or in an email as doing something unethical or illegal, then that information may be used by the Consortium to determine probation or even retention. Use of UK logos, trademarks or other images or any use of social media in which the intern identifies as a representative of UK is subject to University approval *prior to* such use (contact the [Office of Public Relations and Marketing](#) for approval). Interns are accountable for any institutionally related content they post to social media sites, including any remarks made as a University representative on public or personal social media. UK prohibits the use of social media to post confidential or proprietary information about the University; announce UK news; use UK's name to promote a product, cause, or political party or candidate; or post any information that does not comply with University regulations, policies, and procedures and copyright and intellectual property rights. As a preventive measure, the Consortium advises that interns (and faculty) approach social media carefully. Interns may consult the [American Psychological Association's Social Media/Forum Policy](#) and UK's [Social Media Use Policy](#) for best practices and additional guidance.

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- Kitchener, K.S. (1986). Teaching applied ethics in counseling education: An integration of philosophical principles and psychological processes. *Journal of Counseling and Development*, 64(5), 306-310.
- Lamb, D.H., Baker, J.M., Jennings, M.I., & Yarris, E. (1983). Passages of an internship in professional psychology. *Professional Psychology: Research and Practice*, 18(6), 597-603.