Psychology Internship Training Program

Brochure 2017-2018 Training Year
1. **The Mission, Vision and Aims of the Psychology Internship Training Program**

**Mission Statement:**

The mission of the Aurora Behavioral Health Services (ABHS) Psychology Internship Training Program is to provide high quality, intensive training in the roles, duties, and responsibilities of the health service psychologist functioning in a large multi-site health care system. The major area of education and training is clinical psychology, with an emphasis in clinical health psychology. Additional education and training is provided in the focus areas of low socio-economic populations as well as in specialty medical clinics. Psychology interns receive education, training, and supervision in multiple areas including direct service provision to patients, integrative services with other health professionals, program development, consultative services, outcome research, and community outreach services. A scholar-practitioner model is utilized in which clinical services are based on scientifically sound clinical research and evidence-based practice that incorporates biological, psychological, social, systemic, economic, and cultural factors. Psychology interns receive mentoring from the psychologist supervisors so as to become secure in their professional identity, able to work collaboratively with other disciplines, and competent to provide clinical care in an ethical and professional manner.

**Vision Statement:**

The vision of the Psychology Internship Training Program is to provide education and training consistent with the professional development of health service psychologists. Interns function as a member of a multi-disciplinary team and interface with medical providers and other behavioral health and healthcare providers, including students, residents, and trainees in other health professions. This inter-professional model is designed to allow for a delineation of the role of the psychologist on the health care team, as well as an appreciation of the unique contributions of the other members of the integrated treatment team. This patient-centered care model allows interns to provide valued services throughout Aurora Health Care and enhance the quality of the clinical services available to the patients served by the health care system. Graduates of the training program will be able to meet the demands of an integrative healthcare system as psychologists and other behavioral health professionals become integral members of the treatment team.
Aims of the Training Program:

The first aim of the training program is to provide training, supervision and clinical experiences that facilitate the development of the competencies, skills and knowledge base to allow for entry-level functioning as a health service psychologist in a large health care system. The second aim of the program is to provide training, supervision and clinical experience in the utilization of evidenced-based therapies in an outpatient behavioral health clinic which primarily serves a low socio-economic level population.

2. History and Organization of the Training Program

History:

The Department of Psychiatry was established at Mount Sinai Hospital in the early 1970s, and between 1975 and 1980 two psychology interns completed their training in the program. An academic Department of Psychiatry was established in 1980 as part of the Milwaukee Clinical Campus of the University of Wisconsin Medical School. Two additional psychology interns were trained in the program between 1980 and 1985. In 1985 the Department of Psychiatry established a goal of creating a formal Psychology Internship Training Program to complement the Psychiatry Residency Program, which had been started in that year. In 1987 Mount Sinai Hospital merged with Good Samaritan Medical Center, and this action provided the stability needed for further program development. The program has consistently trained between two and four interns per year since that time. In 1988 the internship program was formally recognized by the medical center as being a valuable component of the overall teaching mission of the institution. In 1995 the program underwent the initial site visit from the Commission on Accreditation of the American Psychological Association and was granted accredited status. The program received re-accreditation in 1998, 2001, and 2006. The academic Department of Psychiatry was closed in 1999, and the Psychiatry Residency Program was ended at that time. The Internship program continues to be sponsored by Aurora Health Care and Aurora Behavioral Health Services.

Organization:

Aurora Health Care. Aurora Health Care is Wisconsin’s largest not-for-profit health care system and includes multiple major medical centers and numerous clinics located throughout the eastern portion of the state of Wisconsin. Aurora is divided into several administrative regions, and the Milwaukee area facilities fall within the Greater Milwaukee East and Greater Milwaukee South regions. The interns are employees of Aurora Health Care and are required to adhere to all policies and procedures of Aurora Health Care. Please note that Aurora Health Care terminology designates the interns as “residents” due to an internal policy regarding nomenclature designations for different levels of trainees in the system.

Aurora Behavioral Health Services. Aurora Behavioral Health Services (ABHS) provides the administrative structure for all mental health and substance abuse services
within the Aurora Health Care system. It is the official institutional sponsor of the internship program and provides for the administrative needs of the program. The interns are credentialed as providers of care through ABHS.

*University of Wisconsin School of Medicine and Public Health.* The University of Wisconsin School of Medicine and Public Health has residency programs located at Aurora Sinai Medical Center and Aurora St. Luke’s Medical Center, with training in internal medicine, obstetrics/gynecology, family practice medicine, cardiology, gastroenterology, geriatric medicine, pharmacy, and other specialties. Interns have opportunities to interact with residents and physicians in other disciplines during the course of their training.

*Faculty.* The faculty involved in the training program come from a variety of backgrounds and include PhD, PsyD, and MD/DO practitioners. The faculty are employed by Aurora Behavioral Health Services and are located at several sites including Aurora Sinai Medical Center, Aurora St. Luke’s Medical Center, and Aurora West Allis Memorial Hospital.

*Training Facilities.* Aurora Health Care consists of multiple facilities, and opportunities for training are available at several sites. Aurora Sinai Medical Center is located in downtown Milwaukee and primarily serves an urban population. Aurora St. Luke’s Medical Center and Aurora West Allis Memorial Hospital provide many specialty medical services such as cardiology, oncology, consultation/liaison psychiatry, consultation/liaison psychology, physical medicine and rehabilitation, and women’s health.

3. **General Goals and Objectives of the Psychology Internship Training Program**

The aims of the training program are to provide the interns with education and training experiences sufficient to prepare them for the professional practice of health service psychology in a large multi-faceted system of health care. The professional practice of psychology is considered to include multiple competencies, including provision of direct clinical service, assessment, intervention, design and implementation of outcome research, development of practice initiatives, education of staff, supervision of providers, and working within integrated systems of care. Competencies which cross all of these areas include knowledge of methods of scholarly inquiry, the scientific basis of interventions, professionalism, an understanding of individual and cultural diversity, ethical practice, and regulatory/legal requirements. The objectives of the internship are that the interns become proficient in all aspects of these areas as defined below.

*Clinical Service.* The interns provide direct clinical services to patients who evidence a wide range of psychological and medical disorders. The clinical service components include:
1. Assessment of psychological and behavioral components of physical and mental health to determine problems and strengths so as to plan prevention and/or treatment strategies. The assessment utilizes data from biological, psychological, social, systemic, developmental, and cultural aspects of health. Assessment also includes the use of standard psychometric instruments relevant to the health field. The results of the assessment are communicated effectively to the patient, family, social support system, and other health care professionals.

2. Provision of evidenced-based psychological approaches for the prevention and treatment of common health and mental health problems. These interventions include individual and group therapy approaches as well as family, caregiver and community education regarding prevention and health promotion.

3. Provision of consultation services to other team members regarding specific aspects of patient care, assisting with the psychological and behavioral aspects of presenting problems. Interns seek consultation from other health service providers to become familiar with common medical and pharmacologic treatments, as well as complementary and alternative treatments. Consultation can also include those conducted at wider organizational levels as well.

Scientific Knowledge, Outcome Evaluation, and Practice Initiatives. The interns review and adapt the empirical literature to meet the needs of our patient populations and enhance the effectiveness of clinical interventions. A scholarly approach is applied in clinical practice, and the interns function in a local clinical scientist model of practice. This is accomplished through:

1. Knowledge of the literature on evidenced based treatments and a critical adaptation of that literature to our setting, as well as a variety of professional issues related to the practice of health service psychology. Interns must be knowledgeable about the biological, psychological, social, cultural, and developmental aspects of behavior and how these factors affect health and behavior, disease progression, treatment outcomes, and wellness.

2. The interns participate in the program’s formal didactic sequence covering such topics as the effects of poverty and racism on mental health, the integration of mental health and physical health, trauma-informed care, the recovery model of mental illness and substance abuse, ethical issues, and supervision.

3. The interns participate in the formal educational offerings sponsored by ABHS, including the monthly Evidenced-Based Behavioral Health Series as well as various full day workshops offered throughout the year. Interns are also able to participate in formal educational offerings from other disciplines in primary care and specialty medical care settings.

4. The interns assist in the development of new services according to the needs of the patient population. This service development is based on an examination of
the empirical literature pertaining to the particular disorder and/or treatment modality as well as local population based data.

5. The interns incorporate quantitative outcome evaluation methods into service delivery models, so as to obtain relevant data regarding treatment effectiveness including psychological, affective, behavioral, and medical measures. Outcome measures also examine cost-effectiveness and medical-cost offset.

**Education and Teaching.** The interns are involved in representing the practice of psychology to various groups including other behavioral health and medical caregivers, patients, and the public at large. Such education concerns the practice of psychology, the relation of psychology to other disciplines, and material regarding psychological disorders and their treatment. Education is provided through a variety of means, including:

1. Dissemination of the literature to other caregivers in both formal and informal settings. The interns present formal seminars to caregivers, engage in case conceptualizations in team meetings, and meet with caregivers informally for consultation regarding issues related to assessment and treatment of patients. The interns relate current developments in the field and model an evidenced-based approach to treatment by presentations of their own research, as available.

2. Interns perform an educational function when engaged in co-therapy with other interns, caregivers, or practicum students. The interns work collaboratively with other caregivers in the development and delivery of services, and are able to perform an educational function in the course of this development.

3. The interns provide education to the community and larger population based groups, particularly as regards health, mental health, prevention, and wellness.

**Supervision of Other Mental Health Caregivers.** The interns may gain experience in the supervision of Master's or Doctoral level students by participating in the training opportunities provided to students from local university training programs in psychology and social work. They may also gain supervision experience with Qualified Treatment Trainees (QTTs), defined by the state of Wisconsin as those individuals who have obtained their Master’s degree and are now accumulating the 3000 hours of post-Master’s experience required for licensure. Such supervisory activities may include:

1. Didactic seminars regarding supervision, as well as supervision of supervision opportunities. Interns become knowledgeable about the theories and models of supervision.

2. Regularly scheduled supervision of Master's level or Doctoral level practicum students, or QTTs including individual supervision and group supervision formats as available.
3. Interns may also have the opportunity to supervise practicum students or QTTs in a co-therapy context, in the course of providing group therapy services.

*Working Within Integrated Systems of Care.* The interns are expected to fully participate in the activities of the treatment team as outlined above. The interns also gain experience with the role of health service psychologists within the larger context of the Aurora Health Care system. Such integration includes:

1. An understanding of the complexity of the current health care delivery system, including managed care, participation in provider networks, treatment plan requirements, and patient billing. The interns are expected to meet the same productivity standards as other clinic therapists, pro-rated to account for the time allocated for other training activities.

2. The interns become knowledgeable about the core competencies for interprofessional practice. These include an understanding of the values and ethics of other health professions, the roles and responsibilities of the different disciplines, and the development of skills in interprofessional communication and team integration. The interns gain experience in working with other health care providers and become knowledgeable regarding the benefits of such collaboration to the patients and to the health care system as a whole.

The overall allocation of the interns’ time is as follows, based on a 40 hour week:

<table>
<thead>
<tr>
<th>Billable Clinical Time</th>
<th>Non-Billable Clinical Time</th>
<th>Training Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>20 hours scheduled per week, primarily at the Behavioral Health Clinic. Some rotations may provide for scheduled billable time at other facilities as well.</td>
<td>12 hours per week are available to engage in clinical activities which are not billed for by the intern. These activities include participation in the focus areas of specialty medical clinics.</td>
<td>4 hours per week supervision 2 hours per week didactic seminar 2 hours per week of professional development time (assigned readings, attending additional educational opportunities)</td>
</tr>
</tbody>
</table>

4. **Description of the Behavioral Health Clinic and the Emphasis of Training**

The Internship is designed to make maximal use of the resources available to Aurora Behavioral Health Services. The interns are assigned to the ABHS clinic at Aurora Sinai Medical Center as their primary practice setting and provide care to patients within that clinic. They receive administrative and clerical support as a provider in the clinic. The major area of training is clinical psychology, with an emphasis in clinical health psychology. The training is based on experiences that provide a focus on low socioeconomic populations and on specialty medical clinics.
The Outpatient Behavioral Health Clinic Setting. The outpatient ABHS clinic primarily serves a low socioeconomic level population, where multiple factors often combine to influence the patient’s psychological and physical well-being. The interns provide treatment addressing the psychological and medical aspects of the patient’s difficulties, and collaborate with other medical caregivers to provide integrated care. Treatment interventions include assessment, crisis intervention, individual therapy, and group therapy. Therapy modalities include cognitive, cognitive-behavioral, trauma focused, exposure, behavioral activation, acceptance and commitment, and elements of dialectical behavior therapy. Evidenced-based interventions are emphasized and taught through supervision and didactics. The services provided are reflective of trauma-informed care as well as the recovery model of mental illness and substance abuse. The characteristics of the patient population reflect a wide range of presenting issues and psychological disorders. The interns function as a member of the treatment team and participate in all clinic functions such as team meetings and clinic staff meetings.

The treatment provided in the outpatient mental health clinic is designed to address the psychological, medical, social, cultural, and developmental aspects of behavior. The training model is consistent with the health service psychologist model, which is applicable across different treatment settings ranging from primary care medical clinics to specialty medical clinics to traditional mental health clinics. Interventions also include primary prevention targeting lifestyle aspects such as diet, exercise, tobacco use, and substance use. Education of wider audiences, such as community organizations, forms a basis for interventions as well.

Focus Areas of Training in Primary Care and Specialty Medical Clinics. The training emphasis in clinical health psychology includes experiences in several focus areas throughout the training year. These areas include cardiology services, oncology services, women’s health, transplant services, bariatric surgery, consultation/liaison, physical medicine and rehabilitation, and neuropsychology. Interns will rotate through four different services on a three-month basis to obtain an experience in the unique characteristics of each treatment setting so as to complement the characteristics of providing psychological services common to all medical settings. Please see the Rotation descriptions in Appendix A for more detail regarding the various rotations.

5. Supervision, Evaluation, and Competency Assessment

Supervision. Individual supervision is considered to be essential to the development of the clinician, and a minimum of two hours per week of regularly scheduled individual supervision is provided by licensed psychologists. Interns are assigned to their supervisors based on their specialty medical rotations. Interns typically spend three-month intervals with their supervisors, allowing for formal supervisory contact with several of the psychologist supervisors throughout the internship year. Supervisors adopt a mentoring model, in which the supervisor and intern together develop goals for the rotation and update those goals periodically as the training proceeds, based on the competencies for education and training of health service psychologists. The interns are
expected to assume increasing independence as the training year proceeds, and training experiences tend to be graded in complexity and degree of independence.

Supervision is also conducted in group formats and with practitioners of different disciplines. Interprofessional education and training allow the interns to increase their understanding of the roles and responsibilities of other disciplines, while helping to delineate the unique role played by psychology in the multi-disciplinary setting.

Practicum students and QTTs may also participate in supervisory experiences, and the interns may be able to supervise the practicum students and/or QTTs throughout the training year. Supervision of supervision is available in these instances.

Evaluation and Outcome Assessment. The program utilizes both formative and summative evaluations to provide timely feedback to the interns regarding their performance and development as health service psychologists. The formative evaluations are completed mid-rotation and require that the supervisor directly observe the intern for one assessment session and for one intervention session. The supervisor provides immediate verbal feedback and also completes the written evaluations for each type of session, utilizing a five-point Likert scale. Please see Appendix B, Supervisor Evaluation of Resident Assessment and Supervisor Evaluation of Resident Intervention for the forms utilized in these formative evaluations.

The summative evaluations are completed at the end of each quarter. These written evaluations include ten competencies, with behavioral anchors for each competency rated on a five-point Likert scale. The competency areas evaluated are as follows: Professional Values, Attitudes and Behaviors; Ethical and Legal Standards; Assessment Skills; Intervention Skills; Supervision; Consultation Skills; Clinical Research, Education and Scholarly Inquiry; Program Evaluation; Communication and Interpersonal Skills; and Individual and Cultural Diversity. Please see Appendix B, Supervisor Evaluation of Resident for the form utilized in this summative evaluation.

The interns in turn evaluate their supervisors on a variety of scales related to the quality of the supervisory experience. See Appendix B, Resident Evaluation of Supervisor for the form utilized in this evaluation. The interns also evaluate the practicum students and/or QTTs and in turn are evaluated by those students, as available.

The interns evaluate the rotation experiences in terms of the physical setting, team membership, and adequacy to the patient population to meet the training goals. See Appendix B, Resident Evaluation of Rotation for the form utilized in this evaluation. The interns are also asked to rate the quality of the program as a whole, and are encouraged to provide suggestions for improvement in the training program at the monthly Psychology Internship Steering Committee meetings. Graduates of the program are asked to evaluated the education and training provided to them in respect to their professional activities approximately one year after graduation.
6. **Psychology Internship Steering Committee and Program Policies and Procedures**

The education and training aspects of the program are under the direction of the Internship Steering Committee. The committee meets monthly and is composed of the Education Supervisor, the primary psychologists providing supervision and rotation experiences, and the psychology interns. The committee plans, develops and implements rotation experiences in the health psychology areas. The committee also develops, implements and amends the policies and procedures relevant to the education and training of the interns. See Appendix C for the description of the Steering Committee.

The Policies and Procedures that have been developed encompass the activity of the education program. These include the following: Communication with Graduate program; Complaint, Grievance and Due Process; Ethics Code; Evaluation of Interns, Supervisors and the Program; Formal Didactic Seminars; Maintenance of Education Files; Non Discrimination; Program Self-Evaluation and Quality Improvement; remedial Education; requirements for Successful Completion of the Program; Scope of Education Policies and Procedures; Selection, Retention and Dismissal; and Supervision. See Appendix D for the complete policies.

Please note that as employees of Aurora Health Care the interns are subject to the policies and procedures of Aurora Health Care as these relate to their employment with the organization. The education policies and procedures presented in Appendix D are relevant only to the education and training aspects of the program and do not supersede the policies and procedures of Aurora Health Care.

7. **Trainee Admissions, Support and Outcome Data**

**Date Program Tables are updated: July 2017**

**Internship Program Admissions:** We are particularly interested in applicants who display evidence of a strong interest in professional practice as a health service psychologist. For example, successful applicants have been enrolled in a Health Psychology track in school, have completed elective courses in health related topics, have obtained practicum placements in medical settings, and have completed a dissertation or participated in research related to behavioral health and health related topics. In addition, such applicants express an intention to practice in medical settings following internship or to pursue post-doctoral training in clinical health psychology.

Does the program require that applicants have received a minimum number of hours of the following at the time of application? If Yes, indicate how many:

- Total Direct Contact Intervention Hours: Yes Amount: 1200
- Total Direct Contact Assessment Hours: Yes Amount: 450
Financial and Other Benefit Support for Upcoming Training Year*

- **Annual Stipend/Salary for Full-time Interns**: $44,700
- **Annual Stipend/Salary for Half-time Interns**: N/A
- Program provides access to medical insurance for intern? Yes

- **Trainee contribution to cost required?**: Yes
- **Coverage of family member(s) available?**: Yes
- **Coverage of legally married partner available?**: Yes
- **Coverage of domestic partner available?**: No

- **Hours of Annual Paid Personal Time Off (PTO and/or Vacation)**: 152
- **Hours of Annual Paid Sick Leave**: Sick pay included in PTO

In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave? Yes

- **Other Benefits (please describe)**: Access to full library services

Initial Post-Internship Positions

(Provide an Aggregated Tally for the Preceding 2 Cohorts) **2015-2017**

- **Total # of interns who were in the 2 cohorts**: 7
- **Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree**: 1 (returned to Graduate Program)
- **PD**: obtained formal post-doctoral fellowships
  - 3
- **EP**: obtained formal post-doctoral fellowships
  - 1

- **Community mental health center**
- **Federally qualified health center**
- **Independent primary care facility/clinic**
- **University counseling center**
- **Veterans Affairs medical center**
- **Military health center**
- **Academic health center**: 1
- **Other medical center or hospital**: 2
- **Psychiatric hospital**: 2
- **Academic university/department**
- **Community college or other teaching setting**
- **Independent research institution**
- **Correctional facility**
- **School district/system**
- **Independent practice setting**: 1
- **Not currently employed**
- **Changed to another field**
8. **Application Procedure**

Applicants. We are particularly interested in applicants who display evidence of a strong interest in professional practice as a health service psychologist. Such evidence may include enrollment in a specialty training track in their graduate school, selection of practicum experiences related to that area, and selection of dissertation or research topics related to that area. For example, successful applicants have been enrolled in a Health Psychology track in school, have completed elective courses in health related topics, have obtained practicum placements in medical settings, and have completed a dissertation or participated in research related to behavioral health and health related topics. In addition, such applicants express an intention to practice in medical settings following internship or to pursue post-doctoral training in clinical health psychology. The overall goal of the search process, then, is to obtain congruence between the intern's training needs, the resources of the program, and the needs of the behavioral health clinic so as to maximize the benefits of training for all participants.

The internship program adheres to the Equal Employment Opportunity statement of Aurora Behavioral Health Services and Aurora Health Care. Training and development are enhanced in a setting where faculty, students, and staff represent a wide range of diversity in such areas as race, national origin, ethnicity, culture, gender, gender identity, age, sexual orientation, and religious background, among others.

Application Procedures. Participants in the psychology internship program of Aurora Behavioral Health Services are employees of Aurora Health Care, Inc. Employment with Aurora Health Care is conditional upon successful completion of the pre-employment drug test, criminal background check, and physical assessment to be performed by a designee of Aurora Health Care to certify that the individual is able to undertake the job duties of the position.

If the result of a post-offer drug screen shows a positive level of any non-prescribed controlled substance, the individual will be considered unqualified for employment. If the result of the criminal background check shows that a candidate falsified their record at any point during the process or has a conviction for a crime deemed “substantially related” to the position, the offer of employment may be rescinded. If the new hire is unable to pass the pre-employment physical, and reasonable accommodation cannot be made for the new hire, the offer of employment may be withdrawn.

In addition, individuals accepted into the program must meet the minimum requirements of the Psychology Resident job description. These requirements in part include:
• Master’s degree in clinical psychology, clinical social work, counseling psychology, guidance, mental health nursing, or other related area.

• The program prefers interns who have independent provider status in the State of Wisconsin. Prior to their first day of employment psychology interns who have such status must provide documentation from the State of Wisconsin Department of Safety and Professional Services confirming their status as a Licensed Professional Counselor (LPC), Licensed Clinical Social Worker (LCSW) or Licensed Marriage and Family Therapist (LMFT) in the State of Wisconsin.

• Interns who are not license eligible in the State of Wisconsin will obtain certification as a Qualified Treatment Trainee (QTT) from the State. Note that QTT status restricts outpatients to those who have Wisconsin Medicaid and some managed care Medicaid carriers.

• Must be actively enrolled and maintain satisfactory standing in a recognized and approved professional psychology program.

• Must have successfully completed the required psychology coursework from an accredited college or university.

This site utilizes the Association of Psychology Postdoctoral and Internship Centers (APPIC) uniform application. That application can be obtained at the APPIC website (www.appic.org). The APPIC regulations for selection are also available at that website. This internship abides by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant prior to Uniform Notification Day.

In addition to the Uniform Application, please include all graduate transcripts, a curriculum Vita, and three letters of recommendation with your application.

The program is accredited by the American Psychological Association. Accreditation status can be obtained by contacting the APA at:

American Psychological Association
Commission on Accreditation
750 First Street, NE
Washington, DC 20002-4242
(202) 336-5979

9. Training Supervisors

Betsy Blair, PsyD

Julie Bryson, PhD
10. References


Appendix A Rotation Descriptions

Cardiac Psychology
Consultation/Liaison Psychiatry
Consultation/Liaison Psychology
Endocrine/Diabetes Clinic
Inpatient Physical Medicine and Rehabilitation
Neuropsychology
Oncology
Outpatient Neurorehabilitation
Outpatient Psychotherapy
Women’s Clinic
Aurora Behavioral Health Services

Psychology Internship Training Program

Rotation Description

**Rotation:** Cardiac Psychology  
**Supervisor:** Jeff Lauzon, PhD  
**Location:** Aurora St. Luke’s Medical Center  
**Hours per week:** Twelve  
**Length of Rotation:** Three months  
**Supervision:** Weekly individual supervision

Rotation Description:

The population served includes cardiac patients, pre- and post-advanced heart failure patients including those with left ventricular assist device, heart transplant, post-myocardial infarction, and implantable cardioverter defibrillator/ defibrillator patients. The major duties include outpatient assessment and therapy, assessment and bedside therapy in inpatient settings, coordination of care with medical providers, and consultation and participation with the multidisciplinary heart transplant team and advanced heart failure treatment team.

Educational Goals:

- Gain knowledge regarding anxiety, trauma and stress following cardiac events.
- Become familiar with the role of the sympathetic nervous system as well as non-cardiac chest pain.
- Able to identify the critical components of a pre-transplant psychosocial evaluation
- Complete readings as assigned
- Attend relevant Grand Rounds
Rotation: Consultation/Liaison Psychiatry
Supervisor: Dr. Ray
Location: Aurora St. Luke’s Medical Center
Hours per week: Twelve
Length of Rotation: Three months
Supervision: Group

Rotation Description:

The population consists of patients with acute medical conditions requiring inpatient hospitalization on a medical unit. Patient diagnoses include delirium, dementia, depression, anxiety, psychosis, and substance abuse. The C/L team is led by a psychiatrist and includes other learner such as internal medicine residents and family practice residents. Team members perform brief assessments and round on patients as a team.

Educational Goals:

- Learn to function on a team of medical providers addressing psychiatric concerns in an acute medical setting
- Become familiar with common acute medical conditions, medical terminology, and psychotropic medications
- Develop report writing skills consistent with those utilized in medical settings
Aurora Behavioral Health Services
Psychology Internship Training Program

Rotation Description

Rotation: Consultation/Liaison Psychology  
Supervisor: Drs. Blair, Bryson, Bukhari and Lauzon  
Location: Aurora St. Luke’s Medical Center  
Hours per week: Twelve  
Length of Rotation: Six months  
Supervision: Individual

Rotation Description:

The population consists of patients with acute medical conditions requiring inpatient hospitalization on a medical unit. Patient diagnoses include those with acute onset of new conditions or exacerbation of existing conditions. Team members perform brief assessments and recommendations. Consults also include those related to competency and brief assessments related to competency are included.

Educational Goals:

- Learn to function as a health psychologist addressing mental health and substance use concerns in an acute medical setting
- Become familiar with common acute medical conditions, medical terminology, and psychotropic medications
- Develop skills in the assessment of competency
- Develop report writing skills consistent with those utilized in medical settings
Aurora Behavioral Health Services
Psychology Internship Training Program

Rotation Description

Rotation: Endocrine/Diabetes Clinic Program
Supervisor: Dr. Hanson
Location: Aurora St. Luke’s Medical Center
Hours per week: Twelve
Length of Rotation: Three months
Supervision: Individual

Rotation Description:

The population includes those individuals diagnosed with diabetes attending outpatient treatment with endocrine providers. Services include assessment and group interventions.

Educational Goals:

- Learn to function as a psychologist on an interdisciplinary team including endocrinologists, physician assistants, nurse practitioners, diabetes educators, registered nurses, ultrasound technicians, podiatrists, and surgeons
- Gain skills related to brief assessments to evaluate patients for involvement in group interventions
- Provide psychotherapy/health psychology groups that include topics relevant to people with diabetes, such as depression and diabetes, overcoming emotional eating to promote weight loss, acceptance of newly diagnosed diabetes, and so on
Aurora Behavioral Health Services

Psychology Internship Training Program

Rotation Description

Rotation: Inpatient Physical Medicine and Rehabilitation
Supervisor: Dr. Geigel
Location: Aurora St. Luke’s Medical Center
Hours per week: Twelve
Length of Rotation: Three months
Supervision: Individual

Rotation Description:

The population includes those individuals admitted to inpatient physical medicine and rehabilitation, which includes physical therapy, occupational therapy, and speech therapy. Patients receive inpatient rehabilitation for a variety of conditions, including acute onset of neurological disorders, exacerbation of existing neurological disorders, orthopedic injuries or procedures, or general deconditioning. Services include assessment, brief interventions, and psychoeducation.

Educational Goals:

- Learn to function as a psychologist on an interdisciplinary team including physiatrists, physical therapists, occupational therapists and speech therapists
- Gain skills related to brief assessments to evaluate psychosocial aspects of recovery
- Provide brief health psychology interventions, including addressing thoughts and beliefs associated with illness/recovery, increase acceptance of functional losses associated with the condition, teach stress/mood/pain management strategies, and assess/enhance social support system
Aurora Behavioral Health Services

Psychology Internship Training Program

Rotation Description

Rotation: Neuropsychology
Supervisor: Dr. Cunningham
Location: Aurora St. Luke’s Medical Center
Hours per week: Twelve
Length of Rotation: Six months
Supervision: Individual

Rotation Description:

The population includes those patients with known or suspected brain dysfunction referred for outpatient neuropsychological assessment. The population is primarily adult and geriatric, who are administered an extensive battery of neuropsychological assessment instruments.

Educational Goals:

- Gain experience in the standardized administration of a battery of neuropsychological assessment instruments
- Gain knowledge of scoring and interpreting the test instruments
- Develop skills in concise report writing and recommendations
- Increase knowledge of brain-behavior relationships
Aurora Behavioral Health Services

Psychology Internship Training Program

Rotation Description

Rotation: Oncology
Supervisor: Julie Bryson, PhD
Location: Aurora St. Luke’s Medical Center
Hours per week: Twelve
Length of Rotation: Three months
Supervision: Individual

Rotation Description:

The population includes adult cancer patients and their families in both outpatient and inpatient settings. The services provided include assessment, psychotherapy, and consultation with medical staff. There are opportunities to provide input during case discussions with the multidisciplinary team. The intern has opportunities to attend tumor board presentations each month.

Educational Goals:

- Gain knowledge of the emotional issues cancer patients often face at the various stages of their treatment, as well as issues specific to the type of cancer
- Become knowledgeable about the basic types of cancer and their treatments
- Develop evidenced-based approaches to treatment including cognitive therapy, mindfulness, and meaning-based approaches
- Develop skills in communicating with the patient’s care providers regarding current status and treatment recommendations
- Be able to articulate differences in approaching an inpatient consultation versus and outpatient initial contact
Aurora Behavioral Health Services

Psychology Internship Training Program

Rotation Description

Rotation: Outpatient Neurorehabilitation Program
Supervisor: Dr. Hanson
Location: Aurora West Allis Medical Center
Hours per week: Twelve
Length of Rotation: Three months
Supervision: Individual

Rotation Description:

The population includes those individuals participating in outpatient physical medicine and rehabilitation, which includes physical therapy, occupational therapy, and speech therapy. Patients attend therapy following a vascular brain event or other neurological disorders. Services include assessment, brief interventions, and psychoeducation.

Educational Goals:

- Learn to function as a psychologist on an interdisciplinary team including physiatrists, physical therapists, occupational therapists and speech therapists
- Gain skills related to brief assessments to evaluate psychosocial aspects of recovery
- Provide brief health psychology interventions, including addressing thoughts and beliefs associated with illness/recovery, increase acceptance of functional losses associated with the neurological condition, teach stress/mood/pain management strategies, and assess/enhance social support system
Aurora Behavioral Health Services

Psychology Internship Training Program

Rotation Description

Rotation: Outpatient Psychotherapy
Supervisor: Dr. Chrostowski
Location: Aurora Sinai Medical Center
Hours per week: Twenty
Length of Rotation: Twelve months
Supervision: Individual and group

Rotation Description:

The population of the outpatient Behavioral Health clinic is diverse, with approximately 60% of the patients being African-American and 30% being European-American. They present with a wide range of diagnoses including affective disorders, anxiety disorders, post-traumatic stress disorder and severe and persistent mental illness. The population is primarily low income and the majority of patients have Medicaid as their insurance carrier. Therapy is provided in individual and group formats. Treatment is coordinated with the patient’s medical providers, and health behavior concerns are addressed in therapy as well. Supervision may be available with Qualified Treatment Trainees in the clinic.

Educational Goals:

- Become knowledgeable about Trauma-Informed Care and how that is incorporated into treatment
- Become knowledgeable about the Recovery model of mental illness and utilize that model to guide treatment with patients presenting with severe and persistent mental illness
- Be able to address chronic health issues requiring health behavior change in addition to addressing mental health concerns
- Become familiar with the supervisory process
Aurora Behavioral Health Services

Psychology Internship Training Program

Rotation Description

Rotation: Women’s Clinic
Supervisor: Dr. Chrostowski
Location: Aurora Sinai Medical Center
Hours per week: Five
Length of Rotation: Twelve
Supervision: Individual

Rotation Description:

The population consists of perinatal women who are predominantly African-American and of lower socioeconomic status reflective of the central city population. Diagnoses include post-partum depression, anxiety, major depressive disorder, and post-traumatic stress disorder. Assessment and brief interventions are provided in the Women’s Clinic setting, with those requiring more extensive or longer-term therapy being transferred to the outpatient Behavioral Health Clinic.

Educational Goals:

- Become familiar with the interaction between psychological conditions, medical conditions, and pregnancy
- Be able to provide brief, focused interventions targeting psychological symptoms
- Become knowledgeable about post-partum depression
- Become knowledgeable about Trauma-Informed Care and the application of trauma-focused techniques in the outpatient medical clinic setting
Aurora Behavioral Health Services

Psychology Internship Training Program

Rotation Description

Rotation: Work Specialty Rehabilitation
Supervisor: Dr. Hanson
Location: Aurora RiverCenter Clinic, Aurora Layton Clinic
Hours per week: Twelve
Length of Rotation: Three months
Supervision: Individual

Rotation Description:

The population includes individuals with worker compensation claims participating in physical therapy and occupational therapy as part of their recovery from a work-related injury. Services include assessment, brief interventions, and psychoeducation.

Educational Goals:

- Learn to function as a psychologist on an interdisciplinary team including physiatrists, physical therapists, occupational therapists and vocational counselors
- Gain skills related to brief assessments to evaluate psychosocial aspects of recovery
- Provide brief interventions, including addressing thoughts and beliefs associated with pain/injury/recovery, teach stress/mood/pain management strategies, improve sleep hygiene, and identify inappropriate use of prescription medication and other substances
- Provide psychoeducational groups to current patients
- Attend weekly team meetings which include the interdisciplinary team and patient
Appendix B Evaluation Forms

Supervisor Evaluation of Resident Assessment
Supervisor Evaluation of Resident Intervention
Supervisor Evaluation of Resident
Resident Evaluation of Supervisor
Resident Evaluation of Rotation
Aurora Behavioral Health Services

Psychology Internship Training Program

Supervisor Evaluation of Resident Assessment

Resident: _________________________    Quarter: _________

Supervisor: _____________________    Rotation: _________

Please rate the intern according to the following numerical scale. If the area does not apply, please check “NA”. Every intern is not expected to have advanced competency in every rotation, and ratings of 2 or 3 may be appropriate for some aspects of a rotation at the beginning of the internship year. Please add additional written comments for ratings below 3 to address such situations.

5  **Excellent.** The intern functions at a level appropriate to an entry-level professional psychologist. The intern displays a fairly complete understanding of the area and requires no supervision to complete the required professional tasks. The intern appropriately consults with supervisors and peers when needed.

4  **Above Average.** The intern functions at an advanced trainee level. The intern displays a good understanding of the area and the supervisor makes minimal suggestions for further investigation and study. The intern requires minimal supervision to complete the required professional tasks. The intern usually consults with supervisors on a regular basis.

3  **Average.** The intern functions at an expected level given their training to date. The intern displays an adequate understanding of the area and completes additional research and reading as assigned by the supervisor. The intern requires regularly scheduled supervision to complete the required professional tasks. The intern is expected to consult with supervisors on a regular basis.

2  **Below Average.** The intern functions at a level expected of an advanced graduate student. The intern displays minimal understanding of the area and requires basic knowledge of the area prior to more advanced study. The intern may require observation of the supervisor in addition to regularly scheduled supervision. The intern is closely monitored by the supervisor at regular intervals and may require direct observation.

1  **Unacceptable.** The intern functions at the level of a beginning graduate student. The intern displays no knowledge base regarding the area and requires introductory teaching. The intern needs to observe the supervisor directly throughout the rotation. The intern may attempt practice in the area only under direct observation by the supervisor.
Rating Scale:  5  4  3  2  1
   Excellent  Above Ave.  Average  Below Ave.  Unacceptable

_____ Ability to establish rapport (engage the patient in conversation, elicit information regarding potentially sensitive topics, overall patient willingness to disclose)

_____ Ability to guide the conversation in a clinically appropriate manner (maintain focus on relevant information)

_____ Ability to ask additional questions as follow-up to clinically significant responses (collects comprehensive, relevant data)

_____ Ability to evaluate medical aspects and chronic medical conditions

_____ Ability to synthesize information into a comprehensive case formulation, including individual differences and diversity, developmental level, and medical conditions

_____ Ability to select appropriate diagnosis/diagnoses based on collected data

_____ Ability to clinically utilize the DSM-5

_____ Ability to develop a preliminary treatment plan, consistent with theoretical orientation and evidenced-based practice

_____ Ability to communicate preliminary treatment plan to patient and work collaboratively to refine the treatment plan

_____ Ability to assess the patient’s strengths and incorporate those into treatment plan

_____ Ability to accurately communicate potential risks and benefits, estimated course of treatment, and estimated outcomes so as to obtain informed consent
_____ Completes comprehensive evaluation in the electronic medical record, including appropriate level of detail related to the shared electronic medical record

_____ Ability to communicate assessment results and treatment recommendations to other members of the patient’s care team, including primary care providers

_____ Ability to self-reflect on their assessment skills and identify strengths and opportunities for improvement

Comments:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

The above evaluation has been reviewed in supervision, and remedial activities have been discussed regarding any training concerns for this assessment.

_________________________________  ____________________________
Intern Signature                  Supervisor Signature
_____/_____/_____                 _____/_____/_____
Aurora Behavioral Health Services

Psychology Internship Training Program

Supervisor Evaluation of Resident Intervention

Resident: _________________________    Quarter: _________

Supervisor: _____________________    Rotation: _________

Please rate the intern according to the following numerical scale. If the area does not apply, please check “NA”. Every intern is not expected to have advanced competency in every rotation, and ratings of 2 or 3 may be appropriate for some aspects of a rotation at the beginning of the internship year. Please add additional written comments for ratings below 3 to address such situations.

5   **Excellent.** The intern functions at a level appropriate to an entry-level professional psychologist. The intern displays a fairly complete understanding of the area and requires no supervision to complete the required professional tasks. The intern appropriately consults with supervisors and peers when needed.

4   **Above Average.** The intern functions at an advanced trainee level. The intern displays a good understanding of the area and the supervisor makes minimal suggestions for further investigation and study. The intern requires minimal supervision to complete the required professional tasks. The intern usually consults with supervisors on a regular basis.

3   **Average.** The intern functions at an expected level given their training to date. The intern displays an adequate understanding of the area and completes additional research and reading as assigned by the supervisor. The intern requires regularly scheduled supervision to complete the required professional tasks. The intern is expected to consult with supervisors on a regular basis.

2   **Below Average.** The intern functions at a level expected of an advanced graduate student. The intern displays minimal understanding of the area and requires basic knowledge of the area prior to more advanced study. The intern may require observation of the supervisor in addition to regularly scheduled supervision. The intern is closely monitored by the supervisor at regular intervals and may require direct observation.

1   **Unacceptable.** The intern functions at the level of a beginning graduate student. The intern displays no knowledge base regarding the area and requires introductory teaching. The intern needs to observe the supervisor directly throughout the rotation. The intern may attempt practice in the area only under direct observation by the supervisor.
Rating Scale:  5    4    3    2    1
Excellent   Above Ave.    Average    Below Ave.    Unacceptable

______ Level of rapport is appropriate to the current point in treatment

______ Ability to elicit information from the patient related to progress on treatment goals

______ Ability to clinically use quantitative outcome data (assessment instruments, measurable goals from treatment plan)

______ Ability to modify treatment based on outcome data

______ Ability to recognize factors interfering with achievement of treatment goals (environmental, resistance to change, etc.)

______ Ability to apply motivational interviewing techniques as needed

______ Use of evidenced-based practices

______ Adherence to selected treatment approach (for example, Cognitive-Behavioral, Behavioral Activation)

______ Ability to engage in shared decision making with patient regarding treatment goals

______ Ability to modify treatment plan and to communicate this effectively to the patient to arrive at shared behavioral goals

______ Ability to incorporate patient strengths and build on those strengths in treatment

______ Ability to utilize health behavior change as needed to address medical conditions
Rating Scale:  5  4  3  2  1
         Excellent  Above Ave.  Average  Below Ave.  Unacceptable

_____ Ability to assess for changes in medical conditions

_____ Demonstrates relationship with other caregivers including primary care providers

_____ Ability to self-reflect on the session and identify strengths and opportunities for improvement

_____ Demonstrates knowledge of when to consult with supervisor regarding the case

_____ Quality of treatment plans including the use of specific, attainable, and measurable goals

_____ Quality of progress notes, including appropriate level of detail

Comments:

_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

The above evaluation has been reviewed in supervision, and remedial activities have been discussed regarding any training concerns for this intervention session.

_________________________  _________________________
Intern Signature    Supervisor Signature

_____/_____/_____    _____/_____/_____
Date      Date
Aurora Behavioral Health Services

Psychology Internship Training Program

Supervisor Evaluation of Resident

Resident: _________________________    Quarter: _________
Supervisor: _____________________    Rotation: _________

Please rate the intern according to the following numerical scale. If the area does not apply, please check “NA”. Every intern is not expected to have advanced competency in every rotation, and ratings of 2 or 3 may be appropriate for some aspects of a rotation at the beginning of the internship year. Please add additional written comments for ratings below 3 to address such situations.

5 Excellent. The intern functions at a level appropriate to an entry-level professional psychologist. The intern displays a fairly complete understanding of the area and requires no supervision to complete the required professional tasks. The intern appropriately consults with supervisors and peers when needed.

4 Above Average. The intern functions at an advanced trainee level. The intern displays a good understanding of the area and the supervisor makes minimal suggestions for further investigation and study. The intern requires minimal supervision to complete the required professional tasks. The intern usually consults with supervisors on a regular basis.

3 Average. The intern functions at an expected level given their training to date. The intern displays an adequate understanding of the area and completes additional research and reading as assigned by the supervisor. The intern requires regularly scheduled supervision to complete the required professional tasks. The intern is expected to consult with supervisors on a regular basis.

2 Below Average. The intern functions at a level expected of an advanced graduate student. The intern displays minimal understanding of the area and requires basic knowledge of the area prior to more advanced study. The intern may require observation of the supervisor in addition to regularly scheduled supervision. The intern is closely monitored by the supervisor at regular intervals and may require direct observation.

1 Unacceptable. The intern functions at the level of a beginning graduate student. The intern displays no knowledge base regarding the area and requires introductory teaching. The intern needs to observe the supervisor directly throughout the rotation. The intern may attempt practice in the area only under direct observation by the supervisor.
A: Professional Values, Attitudes and Behaviors

**Competency Goal:** The intern is expected to function in a professional manner at all times, appropriate to the professional practice of psychology. They are able to articulate their professional identity and role as a psychologist. They display behaviors consistent with the values and attitudes of a professional psychologist. They act in ways that assist to safeguard the welfare of others. They demonstrate a concern for others and a desire to apply their professional skills to alleviate suffering and maximize potential.

- Ability to articulate their reasons for pursuing training in professional psychology
- Ability to reflect on their professional development
- Commitment to life-long learning and professional growth
- Able to articulate issues central to the field of professional psychology
- Demonstrates concern for the welfare of others
- Acts in ways to assist in the alleviation of suffering
- Acts in ways to promote patient growth and potential
- Advocates for patients and for the field of psychology as well as mental health in general
- Demonstrates professional demeanor across settings and situations
- Dress is appropriate for the professional setting
- Prompt for appointments
- Maintains consistent work hours
- Paperwork and documentation is completed in a timely fashion
- Maintains an appropriate patient caseload for the rotation
- Interacts well with staff including support staff and other providers in the Medical Center
Professional Values, Attitudes and Behaviors (continued):

______ Accepts responsibility for their own actions

Comments:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

B: Ethical and Legal Standards

Competency Goal: The intern will display a high level of ethical behavior and is sensitive to ethical issues as they pertain to patients, other professionals, staff, and the public in general. They are able to articulate ethical aspects of professional relationships and conduct an appropriate analysis of all ethical principles involved. They maintain awareness of their own behavior and are able to identify potential ethical concerns in a timely manner. They take appropriate steps to avoid or remediate breaches of ethical standards. They seek consultation on ethical issues and display self-awareness of their role in the situation. They display awareness of laws, statutes and regulations pertaining to the practice of psychology in the State of Wisconsin in Health Service Psychology.

______ Knowledge of APA Code of Ethics

______ Familiar with ethics codes of other behavioral health professions

______ Ability to apply the ethical principles in clinical situations utilizing a structured approach

______ Knowledge of Wisconsin State Statutes applicable to the mental health Code and Health Service Psychology

______ Knowledge of Federal statutes applicable to mental health and substance abuse treatment, and Health Service Psychology

______ Consults with other professionals when appropriate

______ Documents the ethical concerns and results of consultations (if necessary) in a complete manner
Ethical and Legal Standards (continued):

____ Displays an awareness of their own professional limitations

____ Displays an awareness of their personal limitations

____ Seeks additional training, supervision, and/or education when necessary

Comments:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

C: Assessment Skills

**Competency Goal:** The intern will display proficiency in diagnosis and case conceptualization. They are able to efficiently conduct a comprehensive evaluation using appropriate interviewing techniques and assessment measures where appropriate. They utilize all data to develop an accurate conceptualization and diagnosis which leads directly to the treatment plan.

1. **General Assessment Skills:**

____ Displays appropriate interviewing skills to establish and maintain rapport and obtain clinically relevant information from the patient

____ Ability to discern the salient and important information in the clinical case

____ Awareness of subjective biases that may effect interpretation

____ Ability to synthesize the information with other sources to produce an appropriate diagnostic formulation

____ Ability to assess salient medical components and integrate these into the conceptualization

____ Displays a working knowledge of the DSM system and is able to apply this diagnostic system appropriately
Rating Scale:  5  4  3  2  1
Excellent        Above Ave.       Average     Below Ave.    Unacceptable

_____ Ability to translate the results of the assessment into an initial treatment plan

_____ Ability to select, administer, score and interpret brief screening measures as appropriate

_____ Ability to communicate orally and in written reports the findings/implications of assessment in an accurate and effective manner for a wide range of audiences

2. Psychological Testing:  _____ NA

_____ Ability to define referral question

_____ Appreciation of cultural factors affecting testing

_____ Test selection relevant to referral question

_____ Test administration and scoring

_____ Test interpretation

_____ Assessment reports

_____ Feedback to referral source/patient

Comments:
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

3. Neuropsychological Testing:  _____ NA

_____ Ability to define referral question

_____ Appreciation of cultural factors affecting testing

_____ Test selection relevant to referral question

_____ Test administration and scoring
3. **Neuropsychological Testing (continued):**

   _____ Test interpretation
   _____ Assessment reports
   _____ Feedback to referral source/patient
   _____ Knowledge base regarding brain/behavior relationships
   _____ Knowledge base regarding different neurological conditions

**Comments:**
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

**D: Intervention Skills**

**Competency Goal:** The intern will be able to translate the diagnostic assessment and case conceptualization into therapeutic goals working collaboratively with the patient. Therapy skills display a theory-based approach, with incorporation of relevant information from the clinical literature. The intern engages in the use of evidenced-based treatments. The intern displays an understanding of patient factors (including cultural factors) as well as their own reactions to the therapy process. The intern displays appropriate clinical skills throughout all phases of the therapy process. The intern monitors progress towards goals and alters the treatment plan as needed working collaboratively with the patient.

   _____ Ability to translate diagnostic assessment and case conceptualization into treatment goals
   _____ Treatment planning completed in collaboration with the patient
   _____ Ability to develop specific, measureable, and attainable treatment goals
   _____ Ability to apply evidenced-based treatment(s) to achieve treatment goals
   _____ Ability to identify patient strengths and incorporate these into treatment
   _____ Awareness of the impact of environmental factors on attainment of treatment goals, including environmental strengths
**Intervention Skills (continued):**

- Awareness of cultural factors and individual diversity factors of the patient affecting treatment, and incorporation of these factors into treatment planning
- Awareness of their own cultural factors and individual diversity factors affecting treatment, and incorporation of these factors into treatment planning
- Awareness of medical conditions and incorporation into treatment plan
- Awareness of empirical literature regarding psychotherapeutic approaches
- Utilizes evidence-based treatments adapted to the individual case
- Awareness of alternative models of conceptualization
- Utilization of health behavior change techniques related to medical conditions
- Ability to establish rapport and working alliance with patients
- Ability to manage patient reactions to the therapist and incorporate these into treatment
- Ability to introspect regarding their own reactions to the patient and incorporate into treatment
- Initiates crisis intervention measures when necessary
- Timing of interventions with patients is appropriate
- Seeks consultation when necessary
- Awareness of the achievement of therapeutic goals
- Alters treatment goals in collaboration with the patient
- Terminates therapy appropriately
- Awareness of group/family dynamics in treatment (if appropriate)
Intervention Skills (continued):

_____ Ability to work effectively with co-therapist (if appropriate)

Comments:
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

E: Supervision

Competency Goal: The intern will make effective use of supervision to assist in their professional development. The supervisor will mentor and monitor trainees in the development of competencies and clinical skills, and will evaluate those competencies and skills. The intern will develop skills in peer consultation. The intern understands theories of supervision and competency development and applies these consistently and appropriately in the supervisory relationship. The intern displays a high level of awareness of their own contribution to the supervisory relationship and the ways in which they influence that relationship. They are able to engage the supervisee and elicit appropriate self-reflection and professional development.

_____ Displays familiarity with theories of supervision

_____ Displays knowledge of the ethical and legal aspects of the supervisory relationship

_____ Is prepared for supervision and sets an agenda for sessions

_____ Remains focused on training needs and professional development

_____ Ability to identify their professional strengths and weaknesses and seek experiences appropriate to their skill development

_____ Ability to accept feedback in a positive, non-defensive manner

_____ Seeks multiple supervisor input on select cases, if appropriate

_____ Interacts with supervisor in a professional manner
Rating Scale:  5  4  3  2  1  
Excellent  Above Ave.  Average  Below Ave.  Unacceptable

Supervision (continued):

_____ Ability to provide education and constructive feedback to supervisee

_____ Ability to engage the supervisee in the supervisory relationship

_____ Ability to elicit self-reflection by the supervisee

Comments:
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

F: Consultation Skills

Competency Goal: The intern will be able to consult with other health care professionals in an efficient manner which assists all providers in the delivery of high quality services, consistent with the skills of a Health Service Psychologist. The intern displays the ability to function effectively in the medical center setting and understands the roles of the various providers in that setting. They are able to provide high-quality consultation to other providers by appropriately defining referral questions, obtaining information and data relevant to the referral question, developing a clinical case conceptualization, diagnosis, and treatment recommendations and effectively and efficiently communicating all information to the referring provider in a collaborative manner.

_____ Understanding of the roles and perspectives of other health care professionals

_____ Understanding the role of the Health Services Psychologist in health care Delivery systems

_____ Ability to review medical records and discern important and relevant materials

_____ Ability to clarify referral question

_____ Interviewing skills in the medical center setting

_____ Selection of appropriate tests, if applicable
Consultation Skills (continued):

_____ Administration/scoring of test instruments

_____ Interpretation of test instruments

_____ Ability to conceptualize case

_____ Ability to develop treatment recommendations

_____ Feedback to team/staffing as well as other health care professionals

_____ Feedback to referral source

_____ Feedback to individuals and their families

_____ Written reports are timely and concise

_____ Professional interactions with other care providers

Comments:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

G:  Clinical Research/Education/ Scholarly Inquiry

Competency Goal: The intern displays the research skills necessary to review the empirical literature and apply those findings to the clinical setting. They are able to define clinical subject for inquiry, effectively search the relevant scientific literature, critically review scientific research and develop an accurate synthesis of the research. They are able to apply that information to the local patient population to enhance interventions. They effectively convey research results to peers and other caregivers.

_____ Ability to define research question

_____ Ability to conduct a concise literature search

_____ Ability to critically review the empirical literature
Clinical Research/Education/ Scholarly Inquiry (continued):

_____ Ability to apply research findings and translate those findings into appropriate clinical care

_____ Ability to effectively convey empirical findings to other providers through formal educational such as case presentations, grand rounds, and didactic seminars

Comments:
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

H: Program Evaluation

**Competency Goal:** The intern is able to define all aspects relevant to a productive program evaluation and the data needed that lead to actionable steps towards program improvement. They select data to be gathered consistent with the goal of program improvement and analyze that data appropriately. They produce a summary report with specific, actionable recommendations for improvement. They assist in implementing changes and further monitoring outcomes.

_____ Active participation in Internship Steering Committee

_____ Knowledge of metrics frequently utilized to assess integrative treatment settings

_____ Ability to design and implement an outcome study

Comments:
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
Rating Scale:  5  4  3  2  1
Excellent  Above Ave.  Average  Below Ave.  Unacceptable

I:  Communication and Interpersonal Skills

Competency Goal: The intern is able to effectively communicate with patients, their families, other caregivers and the public regarding professional matters. They treat others with courtesy and respect. They accept personal responsibility for their own actions.

_____ Treats others with courtesy and respect across settings and situations

_____ develops and maintains effective relationships with colleagues, supervisors, recipients of professional services, organizations, and communities

_____ Effectively communicates verbally with others

_____ Effectively communicates non-verbally with others

_____ Able to maintain effective communication in challenging situations

Comments:
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

J:  Individual and Cultural Diversity

Competency Goal: The intern is able to conduct all professional activities with sensitivity to human diversity, including the ability to deliver high quality Health Service Psychology services to an increasingly diverse population. The intern demonstrates knowledge, awareness, sensitivity and necessary skills when working with diverse individuals and communities. The intern maintains an awareness of differences and diversity including, but not limited to, age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation and socioeconomic status.

_____ Displays an understanding of their own personal and cultural history

_____ Understands their own biases, beliefs and attitudes

_____ Understands how their own biases, attitudes and beliefs can affect how they understand and interact with people different from themselves
J: Individual and Cultural Diversity (continued):

- Knowledge of current theoretical and empirical knowledge base related to diversity in clinical service delivery, consultation, supervision, training and research
- Ability to apply a framework for effectively working with areas of individual and cultural diversity not previously encountered
- Ability to work effectively with individuals whose group membership, demographic characteristics or worldviews create conflict with their own
- Ability to independently apply their knowledge and approach to working effectively with the range of diverse individuals and groups encountered during the internship/rotation

The above evaluation has been reviewed in supervision, and remedial activities have been discussed regarding any training concerns for this rotation.

_____________________________  _________________________
Intern Signature                  Supervisor Signature
_____/_____/____                  _____/_____/____
Date                               Date
Aurora Behavioral Health Services

Psychology Internship Training Program

Resident Evaluation of Supervisor

Resident: _____________________     Quarter: _________

Supervisor: _________________     Rotation: _________

Please rate the supervisor and/or rotation according to the following numerical scale. If an area does not apply, please check "NA". Please add additional written comments as needed, particularly for ratings below 3 (i.e. Below Average or Unacceptable).

5 **Excellent.** The supervisor displays a high level of professional behavior. The supervisor is very knowledgeable regarding the substantive content of the rotation and consistently offers new knowledge and insight to the intern. The supervisor has extensive experience in the area and offers a wealth of clinical information. The supervisor consistently functions as a mentor when appropriate. The rotation is considered to be an excellent learning experience.

4 **Above Average.** The supervisor displays a good level of professional behavior. The supervisor is knowledgeable regarding the substantive content of the rotation and frequently offers new knowledge and insight to the intern. The supervisor has solid experience in the area and offers good clinical information. The supervisor usually functions as a mentor when appropriate. The rotation is considered to be an above average learning experience.

3 **Average.** The supervisor displays an average level of professional behavior. The supervisor has a good working knowledge of the substantive content of the rotation and usually offers new knowledge and insight to the intern. The supervisor has average experience in the area and offers appropriate clinical information. The supervisor generally functions as a mentor when appropriate. The rotation is considered to be an average learning experience.

2 **Below Average.** The supervisor displays a limited level of professional behavior. The supervisor has limited knowledge in the substantive content of the rotation and infrequently offers new knowledge and insight to the intern. The supervisor has limited experience in the area and offers limited clinical information. The supervisor occasionally functions as a mentor when appropriate. The rotation is considered to be a below average learning experience.

1 **Unacceptable.** The supervisor displays a low level of professional behavior. The supervisor has a poor knowledge base in the substantive content of the rotation and rarely offers new knowledge or insight to the intern. The supervisor has virtually no experience in the area and offers little clinical information. The supervisor rarely functions as a mentor when appropriate. The rotation is considered to be a poor learning experience.
A: Professional Values, Attitudes and Behaviors

Competency Goal: The supervisor is expected to function in a professional manner at all times, appropriate to the professional practice of psychology. They are able to articulate their professional identity and role as a psychologist. They display behaviors consistent with the values and attitudes of a professional psychologist. They act in ways that assist to safeguard the welfare of others. They demonstrate a concern for others and a desire to apply their professional skills to alleviate suffering and maximize potential.

_____ Ability to reflect on their professional development

_____ Commitment to life-long learning and professional growth

_____ Able to articulate issues central to the field of professional psychology

_____ Demonstrates concern for the welfare of others

_____ Acts in ways to assist in the alleviation of suffering

_____ Acts in ways to promote patient growth and potential

_____ Advocates for patients and for the field of psychology as well as mental health in general

_____ Demonstrates professional demeanor across settings and situations

_____ Maintains regularly scheduled one-to-one supervision appointments

_____ On-time for supervision and reschedules promptly as needed

_____ Accessible for emergency consultations (if applicable)

_____ Interacts well with all staff, including support staff as well as other providers in the Medical Center

_____ Displays respect for the patients served in the Medical Center

_____ Functions in the role of a mentor in the training process
Rating Scale:  5  4  3  2  1
Excellent    Above Ave.      Average  Below Ave. Unacceptable

Professional Values, Attitudes and Behaviors (continued)

_____ Models the role of a professional psychologist

Comments:

_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

B:  Ethical and Legal Standards

Competency Goal: The supervisor displays a high level of ethical behavior and is sensitive to ethical issues as they pertain to patients, other professionals, staff, and the public in general. They are able to articulate ethical aspects of professional relationships and conduct an appropriate analysis of all ethical principles involved. They maintain awareness of their own behavior and are able to identify potential ethical concerns in a timely manner. They take appropriate steps to avoid or remediate breaches of ethical standards. They seek consultation on ethical issues and displays self-awareness of their role in the situation. They display awareness of laws, statutes and regulations pertaining to the practice of psychology in the State of Wisconsin.

_____ Knowledge of APA Code of Ethics

_____ Familiar with ethics codes of other behavioral health professions

_____ Ability to apply the ethical principles in clinical situations utilizing a structured approach

_____ Knowledge of Wisconsin State Statutes applicable to the mental health code

_____ Knowledge of Federal statutes applicable to mental health and substance abuse treatment

_____ Consults with other professionals as appropriate

_____ Serves as a resource regarding appropriate documentation of ethical concerns and the outcomes of consultations
C: **Supervision**

**Competency Goal:** The supervisor assists in the development and refinement of clinical skills. They select didactic and clinical experience to build upon the intern's existing knowledge and experience so as to assist the intern in attaining entry-level professional skills in that area. They create an open learning atmosphere in which interns can explore their own professional growth and development.

- _____ Assists the intern to identify training needs for the rotation
- _____ Allows the intern to create the agenda for the supervision sessions to best meet their training needs
- _____ Arranges for appropriate cases to enhance the rotation experience (where possible)
- _____ Provides appropriate readings and other didactic material to enhance the clinical activity and expand the intern's knowledge base in that area
- _____ Addresses clinical issues related to the patient population served during the rotation, such as diagnostic issues, treatment issues, cultural aspects, developmental stages, and so on.
- _____ Provides an open atmosphere in which to discuss professional issues
- _____ Provides an open atmosphere to discuss personal issues related to the training experience
Supervision (continued)

_____ The supervisor provides information regarding administrative issues in the Behavioral Health Clinic

_____ The supervisor provides information regarding the functioning of a professional psychologist in the Medical Center setting

Comments:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

The above evaluation has been reviewed in supervision, and remedial activities have been discussed regarding any training concerns for this rotation.

_________________________   _________________________
Intern Signature   Supervisor Signature
_____/_____/_____     _____/_____/_____
Date       Date
Auroa Behavioral Health Services

Psychology Internship Training Program

Resident Evaluation of Rotation

Rating Scale:  5  4  3  2  1
Excellent        Above Ave.       Average     Below Ave.    Unacceptable

A:  Rotation

Goal: The rotation should present the intern with a structured learning setting of increasing complexity over time. The supervisor will provide appropriate didactic components to enhance the learning process and help to integrate science and practice. Clinical experience should be of sufficient amount and type to facilitate professional growth and development with the specific population served.

_____ The supervisor and intern work collaboratively to structure the learning experience of the rotation so as to build on and enhance the intern's skills in that area

_____ Learning expectations of the rotation are clearly defined at the outset of the experience, preferably in writing

_____ Rotation includes appropriate and useful didactic readings or other learning tools

_____ Patient population is of an adequate type and amount to insure appropriate clinical experience

_____ Knowledge of assessment techniques unique to the population at end of rotation

_____ Knowledge of evidence-based treatment unique to the population

_____ Setting is conducive to the provision of clinical services
Rotation (continued)

_____ Other staff are respectful and assist in the learning process

Comments:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

_________________________  _________________________
Intern Signature    Supervisor Signature

_____ / _____ / _____    _____ / _____ / _____
Date      Date
Appendix C Psychology Internship Steering Committee

Steering Committee Description
Aurora Behavioral Health Services Psychology Internship Training Program

Internship Training Program Steering Committee

Definition:

The Psychology Internship Training Program Steering Committee provides definition, direction, organization and coordination of educational and training activities related to the psychology interns. The activities of the committee allow for the acculturation of the interns into the profession of psychology by delineating the roles, functions, and competencies of professional psychologists in the Aurora Health Care system.

The Committee engages in continuous program evaluation and makes decisions regarding the continuation, alteration, adaptation or discontinuation of educational or training activities. The Committee evaluates the potential, feasibility, and impact of new educational or training experiences which would further the mission, vision, goals and objectives of the Program. The Committee actively addresses the development and implementation of existing training opportunities as well as exploring new opportunities. The Committee utilizes the current evidence base available through scientific research as the basis for such decisions.

The Committee regularly reviews Educational Policies and Procedures and adds, amends or deletes such Policies and Procedures as necessary. The Committee is responsible for adherence to the American Psychological Association Commission on Accreditation’s Standards of Accreditation, and Committee members maintain familiarity with national standards related to Health Service Psychology.

The Committee addresses any educational concerns, issues, or suggested educational remediation of interns. This is accomplished by the designation of an ad hoc subcommittee limited to the Education Supervisor and psychologist supervisors. Such activity will be consistent with the Program’s Education Remediation Policy. All other concerns, complaints or grievances will be addressed by the Education Supervisor in conjunction with Human Resources representatives consistent with Aurora Health Care policies.

Steering Committee Membership:

1. Education Supervisor (Committee Chair)
2. Training supervisors
3. Psychology interns
Appendix D Internship Program Policies and Procedures

Communications with Graduate Programs
Complaint, Grievance and Due Process
Ethics Code
Evaluation of Interns, Supervisors and the Program
Formal Didactic Seminars
Maintenance of Education Files
Non Discrimination
Program Self-Evaluation and Quality Improvement
Remedial Education
Requirements for Successful Completion of the Program
Scope of Education Policies and Procedures
Selection, Retention and Dismissal
Supervision
Communication between the Psychology Internship Training Program (Program) and the intern’s Doctoral Graduate School program (School) is considered to be an important and valued component of the overall development of competent psychologists. The internship Program is a required part of the training sequence leading to the doctoral degree in psychology and during the internship year the intern remains actively enrolled in their School’s doctoral program. While the internship Program is responsible for evaluating the intern’s performance while they are an intern, the doctoral School is ultimately responsible for the student’s readiness for the doctoral degree and entrance into the profession of psychology. It is therefore expected that evaluative communication between the Program and the School occur throughout the internship training year.

Procedure:

1. The interns will be informed that regular communication will occur between the Education Supervisor as the representative of the Program and the Director of Clinical Training or their designee as representatives of the School.

2. Communication between the Program and the School may include written, telephonic, or electronic methods of communication. Records of such communications will be maintained in the intern’s educational file.

3. Interns will be informed of all contacts between the Program and the School and will be provided with written copies of all such contacts as requested.

4. The Program will contact the School immediately prior to the start of the internship year to determine if the School has specific recommendations regarding competency achievement for the intern. Such recommendations will be incorporated into the intern’s training plan as feasible.

5. Copies of all written evaluations will be made available to the School on a quarterly basis.

6. In the event of the need to provide remedial education with an intern, the Remedial Education policy and procedure will be followed by the Program.
Policy and Procedure Title: Complaint, Grievance, and Due Process

Policy:

The Psychology Internship Training Program (Program) will address any concerns regarding an intern’s academic preparation for entry level internship utilizing the Remedial Education policy. All other concerns, complaints or grievances related to employment by Aurora Health Care (AHC) initiated by the intern, supervisor, or other AHC employee will follow the AHC policies and procedures. In such cases the AHC Human Resources department will be directly involved in the process.

Procedure:

1. Any concern related solely to a deficit in education which would affect the intern’s entry level skills will be addressed using the Remedial Education policy.

2. Any employment concern, complaint, or grievance initiated by the intern, supervisor or other AHC employee will be processed in accordance with AHC Policy 4: Caregiver Accountability; Policy 11: Problem Solving Procedure; and Policy 169: How to File an Employment or Service Delivery Discrimination Complaint, as applicable. The process will have direct involvement of AHC Human Resources.
Policy and Procedure Title: Ethics Code

Policy:

The Psychology Internship Training Program adopts the Ethical Principles of Psychologists and Code of Conduct as promulgated by the American Psychological Association. All interns and psychologists in the Program are expected to be familiar with this document and to consult the document as needed. Interns, supervisors, and other psychologists are expected to consult with other psychologists when an ethical concern has been identified or is suspected. The consultation should be documented appropriately for future reference.

All employees of Aurora Health Care (AHC) are required to adhere to the AHC Code of Ethical Conduct. This Code addresses additional areas such as health care law, safety, employee relations and governmental agencies. All employees are expected to be familiar with this document and to complete annual training on Compliance offered through AHC.

Procedure:

1. Interns, supervisors, and other psychologists involved in the Program have access to the APA Ethical Principles of Psychologists and Code of Conduct and are familiar with the content of that document.

2. Interns, supervisors, and other psychologists involved in the Program have access to the AHC Code of Ethical Conduct and are familiar with the content of that document.

3. Interns, supervisors, and other psychologists involved in the Program have access to the AHC Compliance Department and are aware of the process for interacting with that department in the event of a compliance concern.

References:


Policy and Procedure Title: Evaluation of Interns, Supervisors, and the Program

Policy:

The Psychology Internship Training Program (Program) is designed to provide education and training opportunities sufficient to develop the competencies needed by a psychologist to enter practice as a professional psychologist providing clinical services in a health care system. Such competencies include foundational competencies, which are related to the knowledge, skills, values and attitudes that are the foundation for the functions expected of a psychologist. Such functional competencies include assessment, interventions, consultation, research/evaluation, supervision/teaching and management/administration. The intern competencies are operationalized to be consistent with the training goals and objectives of the Program.

The Program evaluates the competencies of the interns by utilizing a variety of evaluation methods. Formative evaluations assess competence and also provide on-going corrective, developmentally informed feedback to foster growth. Summative evaluations measure outcomes at the end point of a developmental process. The Program evaluates the competencies of the supervisors utilizing summative evaluations completed by the supervisees. The Program engages in on-going evaluation of the education and training experiences offered to interns in each rotation and assesses opportunities for improvement.

Procedure:

1. Program evaluation of intern.

   a. Formative evaluations.

   1. Each supervisor will complete an in-person observation of one assessment session conducted by the intern per quarter, and the supervisor will provide immediate written and oral feedback to the intern. A copy of the written form will be forwarded to the Education Supervisor for review and placement in the intern’s academic file.

   2. Each supervisor will complete an in-person observation of one intervention session conducted by the intern per quarter, and the supervisor will provide immediate written and oral feedback to the intern. A copy of the written form will be forwarded to the Education Supervisor for review and placement in the intern’s academic file.
3. The Education Supervisor will audit 5 intern charts per quarter to assess the quality of documentation including the initial assessment, treatment plan, progress notes, and discharge summary (if applicable). The reviewer will provide immediate written and oral feedback to the intern related to the quality of their documentation.

4. All attendees at a seminar conducted by an intern will complete an evaluation form of the presentation, and evaluation forms will be forwarded to the Education Supervisor. The Education Supervisor will aggregate ratings and comments and provide a written summary to the intern. Copies of all evaluations and aggregate data will be placed in the intern’s academic file.

5. Aurora Health Care (AHC) policy 70: Annual Review/Competency requires that a 90 day review be conducted with each employee following the initiation of their employment. The Education Supervisor will be responsible for completing these 90 day reviews. Such reviews will be kept in the intern’s AHC personnel file (see AHC Policy 6: Caregiver and Physician Employment Files).

b. Summative evaluations.

   1. Each supervisor will complete a quarterly written evaluation for each intern they supervise. This evaluation will include areas related to the foundational and functional competencies as operationalized relative to the specific goals and objectives of the Program. Each supervisor will meet with the supervisee being evaluated to discuss the evaluation and to add information to the evaluation form as appropriate. Both supervisor and supervisee will sign and date the evaluation after the discussion. Copies of the evaluation will be forwarded to the Education Supervisor for inclusion in the intern’s academic file.

2. Intern evaluation of supervisor.

   a. Formative evaluations.

   1. Each intern will complete a seminar evaluation form for each presenter. These forms will be forwarded to the Education Supervisor who will aggregate the ratings and comments and provide a written summary to the presenter. Copies of all ratings and aggregate data will be retained in the supervisor’s or presenter’s academic file.

   b. Summative evaluations.

   1. Each supervisee will complete a quarterly written evaluation for each supervisor. The supervisor and supervisee will meet to discuss the evaluation and to add information to the evaluation form as appropriate. Both supervisor and supervisee will sign and date the evaluation after the discussion. Copies of the
evaluation will be forwarded to the Education Supervisor for inclusion in the supervisor’s academic file.

3. **Intern evaluation of rotation.**

   a. Summative evaluations.

   1. Each intern will evaluate the rotation as to the congruence of the education and training experience with the written description of the rotation. The evaluation will be discussed with the supervisor and addition information will be added to the form as appropriate. Both supervisor and supervisee will sign and date the evaluation after the discussion. Copies of the evaluation will be forwarded to the Education Supervisor. These reviews of the rotations will be reviewed quarterly by the Steering Committee.

4. **Evaluation of the Program.**

   a. Formative evaluations.

   1. The Internship Training Program Steering Committee will evaluate the quality of training during the course of the Committee’s regularly scheduled meetings.

   b. Summative evaluations.

   1. The Alumni Survey will be sent to all graduates of the Program 12 months after the date of graduation. This will assess the strengths and opportunities for improvement in the education and training relative to preparing the former interns to entering the profession of psychology.

**References:**


Aurora Behavioral Health Services Psychology Internship Training Program

Educational Policies and Procedures

Policy and Procedure Title: Formal Didactic Seminars

Policy:

The selection of topics, speakers, readings, and other materials will be consistent with training goals and objectives of the Psychology Internship Training Program (Program). These goals and objectives will be periodically reviewed and updated by the Psychology Training Program Steering Committee. Formal didactic training regarding evidenced-based treatments will be based on the relevance to the population served by the Program. Formal didactic training in cultural and individual differences will be based on the relevance to the population served by the Program. Formal didactic training will be consistent with the goals and objectives of training in health service psychology. The Steering Committee maintains responsibility for the content of the formal didactic series and will add, delete or otherwise adapt topics as needed.

Procedure:

1. The characteristics of the populations served by the Program include low socioeconomic levels, relatively high percentage of African-American individuals, and individuals with multiple chronic medical conditions. Formal didactic training includes information relevant to these populations, including the Recovery model of mental illness and substance abuse, Trauma-Informed Care, and health-related behaviors which impact chronic medical conditions.

2. The Education Supervisor will monitor current scientific research and conduct a needs assessment based on developments in the profession. The Education Supervisor will identify new or modified evidenced-based assessment, intervention, or treatment models. The Education Supervisor will also track developments in mental health, substance abuse and health care delivery models, economic trends related to such services, and potential implementation of new or modified services by Aurora Health Care (AHC). All members of the Steering Committee shall provide input regarding potential topics and developments in the field as well.
Policy and Procedure Title: Maintenance of Intern Education Files

Policy:

Educational files for each intern are maintained separately from the Human Resources files related to their employment in Aurora Health Care. The educational files contain copies of the application, all written evaluations, work products, certificate of completion and all other documents specific to the educational program.

Procedure:

1. The educational files are maintained by the Education Supervisor. Files are maintained in a locked file cabinet with a locked room.

2. Educational files are maintained indefinitely and are not destroyed. The Education Supervisor continues to add materials to the file after completion of the program if they pertain to the educational experience. This includes copies of licensure applications, copies of references, copies of application materials requiring verification of internship, and other such documents that pertain to the interns’ completion of the training.
Policy and Procedure Title: Nondiscrimination

Policy:

The program does not restrict access based on grounds that are unrelated to success in the program or in the profession of psychology. This includes discrimination on the basis of age, race, color, national origin or ancestry, sex, sexual orientation, sexual identity, religion, age, political belief or affiliation, disability or association with a person with a disability, arrest or conviction record, marital status, pregnancy or childbirth, military participation, genetic testing, or use or non-use of lawful products off the employer’s premises during working hours.

Procedure:

1. The program adheres to Aurora Health Care Policy 168: Equal Opportunity Policy.
Policy and Procedure Title: Program Self-Evaluation and Quality Improvement

Policy:

The Psychology Internship Training Program (Program) will engage in on-going evaluation of outcomes related to the goals and objectives of education and training in professional psychology. Such evaluation will include assessment of the patient population sufficient to achieve the goals and objectives of training, the scientific basis of the formal didactic sequence, the congruence of the stated rotation goals and the interns’ experiences, and potential improvements of alterations to the training experiences. The Program will utilize formative and summative evaluation methods to achieve this goal.

Procedure:

1. Formative evaluations. The Psychology Training Program Steering Committee will meet monthly to address quality issues and to propose and implement changes as needed.

2. Summative evaluations. The Education Supervisor and the Steering Committee will make use of the quarterly written intern evaluation of rotation evaluations and the alumni surveys to assess for potential changes to the program.
Policy and Procedure Title: Remedial Education

Policy:

It is expected that all interns entering the program will have the education, training and skills necessary for functioning at the entry-level internship stage of professional development. In cases where an intern is lacking a particular skill area, or is insufficiently developed, educated or trained in that area, a remedial education plan will be developed in conjunction with the intern’s doctoral program. Regular communication will occur between all concerned parties regarding the intern’s progress, or lack thereof, in remediating the skill deficit.

Procedure:

1. The Program will assemble an ad hoc committee of the Psychology Training Program Steering Committee composed of the Education Supervisor, the immediate supervisor, and a faculty psychologist not directly supervising the intern. Remedial learning plans will be in writing with the specific skills to be learned clearly delineated, along with a proposed timetable for achievement of those goals. The Education Supervisor will be in regular contact with the doctoral program director of training from the initiation of the concern through completion of the remedial learning plan. Such communication may include, but not be limited to, written communication (including e-mail), telephone contact, and face-to-face contact. The learning plan will be communicated with the Human Resources department as well to determine if the intern's skills are sufficient to meet the requirements of the job description and to determine if the conditions required under the remedial learning plan are consistent with Aurora Health Care policy.
Aurora Behavioral Health Services Psychology Internship Training Program

Educational Policies and Procedures

Policy and Procedure Title: Requirements for Successful Completion of the Program

Policy:

Interns are expected to meet the minimum acceptable level of performance on all competencies measured by the formal evaluation methods. The minimal level is defined as “average” ratings in the competencies. Concerns regarding the level of achievement will be considered in conjunction with the Doctoral Program. Successful completion of the program could also be precluded by behaviors or actions on the part of the intern which would call for protection of the public, including professional and personal behaviors or actions. Interns are also subject to the policies of Aurora Health Care and termination of employment could result from a variety of behaviors or actions per those policies.

Procedure:

1. Unacceptable performance in any area of professional competencies will be addressed as per the Policy and Procedure: Remedial Education and the Policy and Procedure: Communication with Graduate Program.

2. Behaviors or actions on the part of an intern will also be considered under Aurora Health Care policies regarding possible termination, as per Policy No. 4: Caregiver Accountability and Policy No. 38: Termination of Employment.
Policy and Procedure Title: Scope of Educational Policies and Procedures

Policy:

The educational policies and procedures adopted by the Aurora Behavioral Health Services (ABHS) Psychology Internship Training Program (Program) are solely intended to address the academic aspects related to education and training in professional psychology provided by the program. They are not intended to replace or supersede any Aurora Health Care (AHC) policies and procedures related to employment by AHC. Supervisors, interns, managers, other caregivers and support staff are all employed by AHC and are subject to all of the policies and procedures promulgated by AHC. The education policies and procedures are only intended to add additional specificity to the operation of the educational program from an academic standpoint.

Procedure:

1. The ABHS Psychology Training Program Steering Committee will be responsible for developing, adopting, amending and revising policies and procedures that are only applicable to the academic, educational, and training aspects of the Program.

2. The Training Program Steering Committee will defer to AHC policies and procedures for any aspects related to employment in AHC that are outside the scope of the academic content of the program.
Aurora Behavioral Health Services Psychology Internship Training Program

Educational Policies and Procedures

Policy and Procedure Title: Selection, Retention, and Dismissal

Policy:

The Aurora Behavioral Health Services (ABHS) Psychology Internship Training Program (Program) participates in the application process and selection process maintained by the Association of Psychology Post-Doctoral and Internship Centers (APPIC) and the National Matching Service (NMS). The selection process includes an assessment of the applicant’s experience, training and interest consistent with a goal of professional practice as a health service psychologist. The goal of the selection process is to obtain as close a congruence as possible between the applicant’s education and training needs and the mission, vision, goals, objectives, and resources of the Program. Following the Match process all interns are subject to the policies and procedures of Aurora Health Care (AHC) regarding the employment process, evaluation, retention, and termination.

Procedure:

1. Applicants apply using the APPIC procedure. The Education Supervisor reviews all applications.

2. Applicants must meet all requirements of the AHC Psychology Resident job description (Job Code 103054) in order to be employed by AHC.

3. Interviews are extended to all qualified applicants. Such interviews may be in-person or telephonic.

4. Feedback on applicants is discussed with the Psychology Training Program Steering Committee.

5. Applicants are rank-ordered according to APPIC and NMS policies and procedures.

6. Following the Match employment is consistent with the policies and procedures of AHC, including Policy 168: Equal Opportunity Policy; Policy 37: Employment/Recruitment; and Policy 127: Criminal Background Checks.

7. Retention and dismissal from the Program are consistent with the policies and procedures of AHC, including Policy 70: Annual Review/Competency Assessment; and Policy 38: Termination of Employment. At the successful completion of the Program the intern is terminated as a Psychology Resident as they no longer meet the definition in the Job Description which states “Incumbents in this position are completing a required pre-doctoral internship.”
Aurora Behavioral Health Services Psychology Internship Training Program

Educational Policies and Procedures

Policy and Procedure Title: Supervision

Policy:

The Psychology Internship Training Program (Program) will provide supervision to each psychology intern consistent with the State of Wisconsin s. Psy 2.09 (3). This requirement includes a minimum of 2 hours per week of regularly scheduled face-to-face supervision with the specific intent of addressing services rendered directly by the intern, as well as acculturation into the profession and overall professional development. Interns must also receive at least 2 additional hours per week in learning activities such as case conferences, seminars addressing practice issues, co-therapy with a staff person which includes discussion of the session, group supervision, or additional individual supervision.

The clinic may also employ psychotherapists who have obtained their Master’s degree and are gaining the 3000 hours of Post-Master’s experience required for licensure at the Master’s level. The State of Wisconsin defines such caregivers as Qualified Treatment Trainees (QTTs) able to provide outpatient psychotherapy consistent with DHS 35.127 (2). The QTTs require a minimum of 1 hour per week of supervision by a licensed provider at the Master’s or Doctoral level, consistent with DHS 35.03 (5) a. The interns may have the opportunity to provide supervision to the QTTs in conjunction with additional supervision provided by other licensed professionals. The interns will receive supervision regarding their supervision.

Procedure:

1. The Education Supervisor will ensure that each intern receives at least two hours of regularly scheduled face-to-face supervision each week. The Education Supervisor will provide two hours and the rotation supervision will provide an additional formal hour of individual supervision. Additional hours of group supervision will be provided in the Outpatient clinic, as well as additional individual supervision in the various rotations. Interns average 5 to 6 hours of supervision per week.

2. The Education Supervisor will provide group supervision regarding the supervision of the QTTs by the interns as available.

3. The formal didactic series will include seminars regarding supervision and related topics.