

PSYCHOLOGY INTERNSHIP

Carl T. Hayden Veterans Administration Medical Center
Phoenix, Arizona

TRAINING MANUAL

I. INTRODUCTION

A. Purpose of the Training Manual

This manual presents the policies and procedures for intern training activities in the Carl T. Hayden VAMC Psychology Internship Program. It is designed to facilitate training by providing guidelines. Unforeseen circumstances may call for exceptions to or changes in guidelines. Problems should be brought to the attention of the Training Director and the Training Committee.

B. Overview of the Program

The internship is designed to train clinical and counseling psychologists for responsible professional work in clinical psychology settings. The requirements of the training program include the performance of basic psychological assessment skills and apprenticeship in applied clinical work. The clinical work is supplemented by a variety of professional seminars and case conferences.

Clinical experience is gained during the rotational placements. Prior to rotation assignments, interns receive current information about the experiences available in each rotation. Interns are aided in reviewing their own individual goals and prior experience in the interest of obtaining a well-rounded internship that will suit their needs.

II. THE INTERNSHIP YEAR

A. Length of Internship

The internship at the Carl T. Hayden VAMC is for one full year, beginning the last Monday in August. The tour of duty is eight hours daily Monday through Friday concurrent with supervisors' hours. There must be a supervisor available concurrent with patient contact.

B. Work Schedules

At the beginning of each rotation, each intern should submit a completed schedule form to the Training Director. New schedules should also be completed whenever significant changes occur. This schedule is used to help locate interns when necessary, as in cases of emergency.

C. Test Materials, Supplies, and Keys

Office keys and supplies will be provided by the department secretary. Testing materials may be requested and checked out. You are financially responsible for all items checked out and you may be required to reimburse the cost of lost or misplaced items.

D. Address, Telephone Changes

Give the Training Director your home address and phone number during the week of orientation. It is also your responsibility to notify the Training Director and department secretary if your address or phone number changes during the year.

E. Work Reports

You will be required to maintain records of work performed for internship requirements. You will be given additional instruction in the preparation of these reports and other internship training documentation during the week of orientation.

F. Dress

Interns are expected to dress in a manner that will convey a professional image. Please refer to VAMC dress code provided during orientation for additional details. Blue Jeans, shorts or cropped pants are not considered professional attire and should not be worn.

G. Conduct

It is important that you conduct yourself in an appropriate and professional manner in your interactions with patients and other staff during this internship. Under no circumstances should you accept gifts from or engage in any monetary transactions with patients.

You are expected to abide by all ethical guidelines as stated in the APA's Ethical Principles of Psychologists and Code of Conduct. A copy of these guidelines is located in your Intern Packet that you received during Orientation Week. Notify your supervisor, Training Director, or a Training Committee Member immediately if you are asked by anyone to engage in unethical behavior or if you have any questions regarding ethics. Serious conduct violations may result in termination of your internship appointment. Substantiated allegations of patient abuse are also grounds for termination.

H. Patient Issues

Your authority to work with patients is maintained through supervision of your work by a psychologist with clinical privileges. All assessment reports and medical chart entries must be co-signed by a licensed doctoral staff psychologist. All patient information must be kept strictly confidential and no patient files or data may be taken from the VAMC without written authorization. This includes raw test data, interview notes, etc. All efforts are made to protect the confidentiality of patients. All patient data must be

stored in a secured area such as a file cabinet or drawer in a locked office. The medical center provides appropriate methods to dispose of waste that could compromise confidential material or patient related materials.

I. Psychological Activities Outside the Internship Program

Activities involving patient contact or consultation occurring outside the auspices of the internship program are outside the purview of this institution. Any intern engaging in such activity on his/her own is responsible for any action that may be taken against him/her in connection with this activity. The intern is expected to clear any activity of this sort with the Training Director and the Executive Training Committee.

Furthermore, in agreeing to perform services for agencies or individuals outside the internship program, interns are strongly advised to avoid the appearance of a conflict of interest, e.g., providing of services to client pools served by the VAMC or in direct competition with the VAMC. Conflicts of interest are viewed very seriously by agencies in these competitive times.

J. Leave:

- 1. Vacation Leave:** Interns accrue 4 hours of annual leave per pay period. Annual leave cannot be used before it is accrued.
- 2. Sick Leave:** Interns accrue 4 hours of sick leave per pay period. Sick leave cannot be used before it is accrued. Sick leave may only be used for illness, doctor's appointments, family care, etc.
- 3. Holidays:** Ten federal holidays are provided to the interns throughout the training year. This constitutes 80 hours per year.
- 4. Conference Leave:** Professional Training Seminars as sponsored by the VAMC are required of all interns. Additionally, leave may be granted to attend approved conventions and workshops. Approval by the immediate supervisor and the Training Director is required.
- 5. Leave Approval:** All Leave (except holidays) and emergency leave must be approved in advance. Your rotation supervisor(s) and the Training Director must be notified of any leave to be taken. Unscheduled absences related to illness or emergencies should be reported to the immediate supervisor(s) as soon after 8 a.m. as possible. It is the intern's responsibility to take appropriate action for scheduled patient care responsibilities and appointments (e.g. informing your supervisor or requesting other staff cancel the appointments).

III. ADMINISTRATIVE ORGANIZATION

A. Director of Internship Training

The Director of Training is responsible for the overall functioning of the internship training program.

B. Executive Training Committee

The Executive Training Committee (ETC) consists of the Psychology Department Chief, the Training Director, Assistant Training Director and a representative from the supervisors. The ETC has final responsibility for determining training rotations and approving internship policies and procedures.

C. Training Committee

The Committee's task is to serve the needs and goals of the interns and the Internship Program in regard to internship training issues.

1. The Training Committee consists of the clinical supervisors from the Carl T. Hayden VAMC.
2. The Training Director sequences agenda and chairs the Training Committee meetings.
3. A designated Training Committee member takes the minutes for the meeting, which are distributed to all Committee members. A copy is filed in the Internship Program files and kept for five years.
4. If a Training Committee member experiences a conflict of interest in a decision to be made by the Committee, the member is expected to bring this to the attention of the Committee and to abstain from voting on the issue.
5. The Training Committee meets the fourth Monday of the month or at the call of the Director when there are specific agenda to be considered.
6. Any Training Committee member or intern may request that the Committee consider an issue. Such requests should be submitted in writing to the Director and should include a statement of the problem along with a suggestion for action. The Director will inform the person of the date the issue will be considered. Interns who propose agenda items may be invited to attend meetings when their agenda items are to be discussed.
7. Decisions made by the Training Committee are based on information obtained from staff and interns or other relevant sources. This information may be requested by memo, questionnaire, interview, or open discussion. Decisions which change the policies of the program will be written and distributed as additions or corrections to this manual.
8. Policy decisions will be made by the Training Committee only when a quorum of three or more voting members is present. Preferably, such decisions will reflect a consensus of the Committee, but if this is not possible, simple majority will prevail.

D. Training Committee Activities

In a number of areas, Training Committee members and interns are asked to share responsibility with the Training Director for ongoing training tasks.

1. **Intern Applicant Screening:** The Training Director, and members of the Training Committee review all completed applications from prospective interns. Applications are reviewed and rated by at least two training staff.
2. **Intern Orientation:** With the input of the Training Committee, the Training Director schedules and carries out orientation activities for incoming interns. The focus of orientation is to help interns become familiar with the site and the rotations available.
3. **Brochure and Training Manual Update:** Each year the Internship Program Brochure and the Internship Training Manual are updated to ensure accurate information is provided about the internship. A committee to do this shall consist of the Training Director and one other member. Current interns participate in this process by providing feedback and suggestions.
4. **Professional Seminar Series:** Supervising staff assist the training director in scheduling presenters for the professional seminar series. They review offerings to ensure breadth of presentations and monitor the quality with presenter evaluation forms.

E. Supervisors

All work performed by interns during their internship year must be under the supervision of a psychologist with two years post licensure experience. Interns have supervision covering three domains. These include a rotation supervisor, long-term therapy supervisor and weekly group supervision.

1. Rotation supervisors are responsible for supervising the intern's work for that rotation. In some cases, interns have a split rotation between two settings. In the case of split rotations, a supervisor is assigned from each of the rotations.
2. Long-term therapy supervisors provide the supervision for the mandatory long term therapy cases. Interns are assigned to a supervisor at the beginning of the year based on a combination of, intern preference, area of specialty and cases being supervised. Supervision of long-term therapy is a minimum of one hour per week and in some cases hour for hour.
3. Group supervision is offered on a weekly basis and rotates monthly among all supervising clinical staff. This affords interns exposure to all supervising staff, a variety of theoretical approaches and peer feedback.

To summarize, each intern will receive a minimum of two hours of formal individual supervision for the rotations, one hour of long-term therapy supervision and one hour of group supervision per week. In addition, informal supervision is provided as needed. Each supervisor will arrange supervision times and procedures with their respective interns.

Supervisors are the most important training resource interns have. They provide modeling, instruction and specific feedback. Supervisors facilitate interns' dealings with other personnel and facilitate the acceptance of the intern as an important contributor to the treatment program. All supervisors have major patient care responsibilities, so interns gain skills and knowledge by working side-by-side with staff members. Interns can expect intensive supervision with the opportunity to take on considerable professional responsibility. Styles of supervision vary from rotation to rotation. Observation and co-therapy are some of the techniques used by various supervisors.

1. Each supervisor meets with the interns during Orientation Week to describe the learning opportunities of the rotation. He or she talks with interested interns to determine whether the rotation would be a desirable placement for the intern based on individual learning needs and interests.
2. The supervisor works with the intern at the beginning of the rotation to delineate training goals and the means for reaching these goals and to arrange for the intern to work toward completing his/her training requirements.
3. Supervisors schedule regular weekly times for one-to-one supervision, and provide additional supervision as needed. A minimum of two hours of formal scheduled supervision is required each week. Supervisors also make themselves available for informal supervision and consultation.
4. Supervisors co-sign all progress notes, treatment plans, assessment reports, correspondence and any other intern entries into the medical record.
5. When the supervisor is away from the facility, he/she arranges for another licensed Psychologist to provide supervision and to co-sign for the intern.
6. Midway through the rotation, each supervisor reviews progress with the intern and formulates plans for the remainder of the placement. The supervisor shares his/her evaluation of the intern's strengths and needs with the Training Committee.
7. At the end of the rotation, the supervisor completes a structured written evaluation of the intern's experiences on the rotation. The supervisor and intern discuss the evaluation and the supervisor provides the final form of the evaluation to the Training Director prior to the end of the rotation. This evaluation will be placed in the intern's file.

IV. TRAINING OBJECTIVES

The primary objective of the program is to provide training for interns to assume professional responsibility for the delivery of comprehensive psychological services in acute general medical and extended care treatment settings. Our program has the following goals and objectives:

- To further refine interns' knowledge and skills in therapeutic interventions with a wide variety of presenting problems. Interns will refine psychotherapy skills in a variety of contexts.
- To further refine interns' knowledge and skills in psychological assessment including cognitive testing, personality, and specialized assessment, and clinical interviewing.
- To further refine the integration of ethical and legal aspects of clinical practice. To develop competence and ability to work effectively with diverse types of clients.
- To provide supervisory experience in a variety of clinical settings from multiple supervisors to ensure exposure to a variety of theoretical orientations, supervisory styles and formats.
- To promote professional development and identity through supervisory feedback and self-assessment of skills and professional abilities.
- To promote professional skills in interactions with patients as well as other collaborative interactions with fellow medical professionals. Professional skills are also improved in didactic case presentations and professional presentations in the professional seminar series.

V. LEARNING EXPERIENCES

A. Orientation:

Interns are provided an orientation schedule which covers orientation to the VA Medical Center and the internship program. During the first week, interns are introduced to the structure of the internship program. Each supervisor presents the learning opportunities of his or her rotation to the entire intern group in a series of meetings. Interns may also schedule an individual appointment with a supervisor to discuss the rotation in more detail.

B. Rotation Placements:

The internship is divided into four rotations of three months each. The three major rotation areas include Neuropsychology, Geropsychology or Medical Psychology. Minor rotations are available in PTSD and an Outlying Satellite Medical Clinic. Interns are able to select combinations of both major and minor rotation areas during the subsequent rotations. During the first week interns will work out among themselves a rotation schedule for the training year based on the following requirements:

- The first rotation is full time and assigned according to the specialization offered on match day.
- Interns must diversify their training experience with no more than 75% of their time spent in their specialization track.
- All three major rotations must have coverage for the entire training year.

The training committee reviews the proposed rotation schedule to ensure a well rounded training experience for all interns.

Rotation placements are comprise approximately 35 hours of the intern's 40 hour week. Approximately five hours per week are set aside for seminars, case conferences, grand rounds, and intern meetings.

C. Psychotherapy

Interns are expected to carry a clinical load commensurate with their rotation placement. The number of cases and hours for psychotherapy vary depending on the placement. Interns must carry a minimum of two long term therapy patients for the duration of the internship year. Long term cases are reviewed by supervising staff for suitability for long term therapy. Long-term therapy cases, can in some instances, be a series of shorter term treatments when appropriate. The training staff attempts to arrange for therapy candidates which fulfill training goals for the intern or provide exposure to a new patient population for the intern. Interns must start pursuing cases within one month of the start of the internship. If the intern has not arranged for two cases within one month, the supervisors will assign the needed cases. Interns and supervisors should meet regularly throughout the year, including initial sessions while the cases are being selected and between cases when they “no-show” or terminate early. The requirement of two cases is considered a minimum; interns may choose to carry more cases.

Group therapy experiences are also available on certain rotations. Group experiences of varying formats are possible including psychoeducation, supportive and insight oriented. Group experiences are also available across a wide range of medical and psychiatric populations.

D. Patient Contact

Interns are typically expected to spend the majority of their time in direct patient care hours. This refers to hours spent in face-to-face patient contact while doing therapy or assessment, chart review, writing progress notes or reports, and the analysis and scoring of assessment data.

E. Psychological Assessment

Interns are required to complete a minimum of three psychological assessment batteries during the training year. The battery will include a diagnostic interview, review of the medical chart, the WAIS III, an objective personality instrument (MMPI2 or MCMI2)

and one additional standardized recognized instrument (e.g., PAI, Trails, WMS III, BDI, BAI). The three batteries should be spread throughout the year, preferably completing at minimum one battery in each of the last three rotations. Interns are responsible for seeking out cases for assessment. Typical avenues for obtaining testing cases include training rotations, long term therapy patients or patients referred by other clinical supervisors.

F. Work Sample Requirements

Interns submit work samples as part of rotation and didactic requirements. Work samples include progress notes, psychological assessment, neuropsychological assessment and case presentations. In review of work product, interns are required to collect and report a patient history, make a diagnostic and psychological formulation and appropriately diagnose using DSM-IV.

Quality of work product is evaluated by supervising psychologists with direct feedback provided to the intern. To ensure satisfactory completion of work product, supervisor evaluations reflect levels of proficiency over the internship year.

G. Seminars, Case Conferences, and Professional Training Seminars

An extensive array of didactic offerings are available to interns. Interns are expected to attend the weekly Professional Training Seminars. Interns will present at least 6 times during a Professional Training Seminar. Each intern will be responsible for three didactic presentations and 3 case presentations. There are also other didactic presentations throughout the hospital offered by medical and other professional staff. Interns are encouraged to attend these presentations. Interns are released from competing activities at these times.

H. Intern Meetings

One hour per month is set aside for interns to meet with the Training Director to share concerns and discuss issues of mutual interest. Interns are released from competing activities at these times. Once per quarter, interns meet with the Executive Training Committee.

I. Library Resources

A medical library is available at the VAMC for interns' use. Materials from various outside sites can be requested through interlibrary loan.

J. Professional Meetings and Independent Workshops

Interns are encouraged to attend the yearly meetings and workshops sponsored by the Arizona State Psychological Association and other professional meetings or continuing education activities. Authorized absence may be granted for such activities. Absences for such meetings should be negotiated with supervisors, and approved by the Director of Training.

VI. ROTATION SELECTION AND APPROVAL PROCEDURES

A. Assessing Training Needs

During Orientation Week, interns are encouraged to critically examine their training strengths and needs as an aid to selecting their internship training experiences. After the mid-point of each rotation, the Training Committee meets to evaluate interns' progress in fulfilling their training needs. The Committee may make recommendations to interns regarding future training experiences.

An objective examination is administered during orientation to assess the skills, knowledge and abilities of the interns. The examination is clinical in nature, covering didactic topics, clinical information and legal responsibilities. The results of the examination are used to determine the level of functioning for the intern in this training setting.

Occasionally, an intern is seen as having a serious deficit in his or her knowledge or skills in a basic area. Under these circumstances, the Training Committee may choose to require particular training experiences of an intern. The Training Committee makes their decision after considering input from the supervisors and the intern.

B. Information Dissemination

It is intended that interns have as much information as possible before the rotation selection process begins. There are numerous sources of information available on the various rotations: the Internship Brochure, the supervisors' presentations during orientation, and individual appointments with supervisors.

C. The Rotation Selection Process

Interns will work in their area of specialization full time for the first rotation. Subsequent rotations will be worked out among themselves culminating in a proposal outlining rotation placements for the training year. The three major specializations must have coverage at least half time for the duration of the year. To provide a variety of training experiences, an intern may not exceed 75% of their training in one area (thus maximum is two full time rotations combined with two half time rotations in the same training rotation). This proposal is presented to the Training Director who then submits it to the Training Committee for final approval.

This initial assignment schedule is not necessarily final, and interns can petition for changes later in the year as their interest or needs evolve. Interns wishing to change their rotation assignment should make formal request to the Training Committee, no later than one month before the beginning of the affected rotation. However, interns requesting changes should attempt to make the request as far in advance as possible – supervisors must have ample time to prepare for interns who will be assigned to their rotation, and supervisors who were expecting interns may have already made preparations.

While intern preferences are always taken into consideration, there are also limitations:

1. Some rotations can only accommodate one intern per rotation due to limits in the number of available supervisors.
2. Due to staff turnover, administrative reorganizations, and a number of other predictable and unpredictable events, not all placements may be available for interns during all rotations.
3. As noted in assessing training needs, occasionally, an intern may have a serious deficit in his or her knowledge or skills in a basic area. Under these circumstances, the Training Committee may choose to require particular training experiences of an intern. The Training Committee makes their decision after considering input from the supervisors and the intern. If this were to occur for the second or later rotation, this could have an impact on other interns' rotation placements.

D. Rotation Availability

Every effort will be made to offer rotations listed in the brochure. Rotation placements may not be available to interns for a variety of reasons. This may occur when, for instance, a supervisor plans a prolonged vacation, there is massive administrative reorganization occurring on a rotation, the psychologist position is vacant, a new psychologist has just arrived on a unit and needs time to acclimate to the setting prior to providing supervision for an intern, or when a particular placement does not provide adequate supervision.

E. Changes in the Rotation Plan

From time to time, it may be desirable for an intern to change rotation placements during the three month rotation period. This may occur, for instance, when there are unanticipated personnel or administrative changes on a unit which impact negatively on an intern's learning opportunities. With the consultation of the Training Director and current supervisor, the intern's rotation placements may be revised.

VII. EXIT CRITERIA

The internship program at the Carl T. Hayden VAMC Psychology Internship Program focuses on the development of clinical skills within a large medical center. Although there is an emphasis on medically-based disorders, interns learn general clinical skills as they apply to a hospital-based practice. It is our expectation that interns will utilize their internship year to focus and expand their skills in the practice of psychology. While some of the work of the internship year is to hone skills developed in graduate school, we also encourage interns to try new approaches, techniques, and perspectives. Upon completion of the internship year, interns should have demonstrated competence in a broad range of psychological functions, as evidenced by two objective measures.

1. Internship Examination: The first measure is reflected in the internship examination, as noted earlier in the training manual. An objective examination is given at the onset of the training year. This examination is readministered near completion to determine intern progress. The examination is referred to as the Pretest and Posttest.

2. Supervisor Evaluation Forms: The second measure of exit criteria are the supervisor evaluation forms. Interns are ranked at the completion of each of the four training rotations. The evaluation covers six basic skill areas and requires the intern to attain a mean score of 3 in each of the skill areas. The skill areas include the following:

A. Therapeutic Interventions

Interns are assessed on their ability to interact with patients in a therapeutic manner during all patient encounters including long term therapy, brief and group psychotherapy and diagnostic interviews. Interns should demonstrate understanding of theoretical approaches and clinical intervention. Theory should be integrated into therapy interventions and they should be able to establish appropriate therapeutic rapport. Demonstration of realistic and objective treatment goals with appropriate interventions paced for the patient's symptoms and abilities.

B. Assessment and Diagnosis

Interns are expected to be able to assess patients who present with a broad variety of problems with a variety of instruments. Interns are expected to demonstrate skill with the following: personality assessment, cognitive testing, specialized assessment dependent on the rotation, and clinical interviewing. It is expected the intern can administer, score and interpret the instruments according to standardized procedures. The level of independence by which interns conduct assessments is based on their skill level. Additionally, interns are expected to integrate test data with DSM criteria in making a diagnosis. Finally, useful recommendations based on evaluation results are assessed. Gradually, over the rotation and the training year, interns are given increased independence in conducting evaluations, interpreting results, and writing formal reports.

C. Ethics, Law and Diversity

Interns are expected to understand the application of APA Ethical Standards and Code. Conduct should be in accordance with the APA Ethical Standards as well as the Arizona Licensure laws. Moreover, respect for human diversity on issues including gender, ethnicity, sexual preference, age, religion, physical and mental disability are monitored and evaluated.

D. Supervision and Feedback

Interns should take in and make use of feedback received in supervision, from peers and other professional colleagues, and from patients. They should also show the ability to self-monitor and to change their behavior in response to cues. The evaluations conducted by supervisors are a formal way of monitoring interns' ability to respond to feedback. Supervision sessions provide a less formal, ongoing method of providing

direct feedback to interns and monitoring their ability to successfully follow through with the feedback.

E. Professional Development

Over the course of the internship year, interns should develop a primary professional identity as a psychologist. Interns are expected to demonstrate the appropriate level of confidence and independence. Responsibilities include being prompt, punctual and reliable. Moreover, compliance with leave and VA center procedures are adhered to.

Interns should demonstrate effective functioning with peers, colleagues from other professions, and support staff. Interns should show an awareness of boundary issues with both staff and patients, behaving appropriately in their role and avoiding dual relationships. Again, supervisors serve as role models for interns and will provide direct feedback to interns regarding these issues.

F. Professional Skills

Interns are required to give formal and informal presentations throughout their training year; this is considered an integral component of their development and professional skills. The VAMC also encourages interns to take on other professional tasks such as developing patient education brochures, assisting staff in developing treatment protocols and programs, and participating in updating current treatment protocols.

VIII. EVALUATION OF INTERNS PROGRESS

A variety of types and formats for evaluation are used in the training program. Supervisors and interns are expected to exchange feedback routinely as part of the supervisory process, and the evaluation procedures are meant to formalize this regular information exchange.

A. Intern Self-evaluation

Interns are asked to evaluate themselves as a regular part of the evaluation process. At the beginning of each rotation, interns delineate their goals for each rotation placement. At the mid-rotation point, interns are asked to evaluate their progress in terms of their original goals for the rotation, to modify their goals as appropriate, and to plan for attaining these goals during the remainder of the rotation. Forms are provided to interns to aid with these tasks. Copies of these forms are placed in the intern's file.

B. Internship Pretest/Posttest:

As noted previously, an objective examination is administered at the onset of the training year and near completion of the final rotation. The examination is evaluated in terms of the change of score from the pretest to the posttest. The examination spans the clinical experiences, didactic information and professional interactions encountered during the internship training.

C. Evaluation by Supervisory Staff

Several weeks after the mid-rotation evaluation, supervisors meet to evaluate interns' progress in fulfilling their training needs. The intern's primary supervisor is responsible for discussing the Training Committee's feedback with the intern. The Training Committee may make recommendations to interns regarding future training experiences.

D. End of Rotation Evaluation

At the end of each rotation, supervisors complete an evaluation regarding the intern's experience on that rotation. As noted previously, the evaluation covers six skill areas. The supervisor and intern discuss the evaluation and both sign it before it is placed in the intern's file. Copies of the evaluation are provided to both the intern and the supervisor.

IX. PROGRAM EVALUATIONS

A variety of types and formats for program evaluation are used in the training program. Interns are asked for input and feedback routinely as part of the supervisory process, and by the training director as part of the regular functioning of the program. Our program evaluation procedures are meant to formalize this regular information exchange.

A. Rotation/Supervisor Evaluations

Rotation and supervisor evaluations are to be provided by each intern to his/her supervisor at the end of the rotation. Forms to structure these evaluations are given to the interns prior to the end of each rotation. These evaluations are to be turned in to the Training Director. Program evaluations provide feedback to supervisors and units.

B. Overall Program Evaluation

An overall program evaluation is requested from interns at the close of the internship year. This is an opportunity for interns to provide feedback on the overall organization and functioning of the internship program and to evaluate specific facets of the program not included in the rotation evaluation. A form to structure the evaluation is provided to interns. In addition, evaluations of various segments of the training program may be requested from time to time.

C. Informal Evaluation Procedures

Informal evaluation procedures are based upon the routine verbal exchange of feedback. These informal evaluations are expected to occur regularly, and are scheduled twice during the internship year.

1. The intern group meets monthly with the Training Director and Assistant Training Director to discuss general issues, and to bring to the Director's attention any difficulties in the program.

2. Each intern meets individually with the Training Director six weeks into the internship year to discuss their experience to that point.
3. Each intern meets with the Training Director during the last week of the internship to review the internship year and to offer comments and suggestions for the training program.

X. GRIEVANCE PROCEDURES

To the extent that open communication and effective negotiations are built into the selection of rotation placements, we expect to have potential disagreements identified and resolved before they become problematic. Most disagreements that arise after an intern is assigned to a training slot can be resolved simply by the intern addressing the issue with the person involved.

If resolution is not achieved, the intern will contact his/her direct supervisor who will arrange a meeting with the persons involved in order to gather relevant facts, establish the specific nature of the grievance, and explore options for change which will adequately resolve the conflict. If the meeting is not successful, the Director of Training is given the relevant information in writing. (If the conflict is with the supervisor, the intern will go directly to the Director of Training.)

1. The Director of Training will review the information and appoint and chair a three-member group chosen from the Training Committee to study the issue.
2. This group will be responsible for reviewing information gathered by the supervisor as well as any actions taken by the intern and/or the supervisor in efforts to resolve the conflict. The group then recommends actions to be taken including modifications in the training assignment.
 - a. If the intern remains in the rotation, actions may be recommended to the intern or supervisor, usually both, and specified evidence of their success will be expected within a stated time frame.
 - b. If a change of assignment is recommended, the intern will be responsible for contacting a new supervisor and working out an arrangement with him/her to be reviewed by the Training Committee by a specific date. The Director of Training will assist in these negotiations
3. The group's findings are given to the Director of Training, who communicates them in writing to the appropriate administrator of the training facility (e.g., VA Chief of Psychology).

If the grievance is against the Director of Training, and if resolution cannot be effected by direct discussion with that person, the intern will contact the Training Committee.

The intern's position, the supervisor's position and the Training Committee's recommendations will be recorded and placed in the intern's file.

XI. REMEDIAL ACTION PROCEDURES

One of the purposes of the internship year is for interns to identify and fill in gaps in their knowledge and experience. The Training Committee tries to help interns identify these areas and provide suggestions on how they might improve their skills through additional readings, experiences, or rotation slots. Occasionally, the problem identified may be of sufficient seriousness that the intern would not get credit for the internship unless the deficiency is remedied. Any time this is the case, the problem must be brought to the attention of the members of the Training Committee.

This would be handled in the following manner:

1. An intern identified as having a serious skill or knowledge deficit to the extent that this deficit would prevent him/her from successfully completing the internship will be placed on probationary status by the Training Committee.
2. The Training Committee may require the intern to take a particular rotation, or may provide guidelines for the type of rotation the intern should choose to remedy the identified deficit.
3. The intern, the intern's supervisor, and the Training Committee together draw up a contract specifying the kinds of knowledge, skills or behavior that are necessary for the intern to develop in order to remedy the identified problems.
4. Once an intern has been placed on probation, and a learning/behavioral contract has been written and adopted, the intern may move to a new rotation. The new placement will be carefully chosen by the Training Committee and the intern to provide a setting to work on the identified problems. In some instances, an intern and a supervisor may feel it would be to the intern's benefit to remain in the current placement. If so, both may petition the Training Committee for an exception to the normal rotation procedure.
5. The intern and the supervisor will report to the Training Committee on a regular basis, as specified in the contract (not less than every two months) as to the intern's progress.
6. The intern's probationary status will be communicated to his/her academic program and, a copy of the learning contract will be sent to the Academic Training Director. It is expected that the Internship Training Director will have regular contact with the Academic Training Director including at least two written progress reports per rotation.
7. The intern may be removed from probationary status by a majority vote of the Training Committee when the intern's progress is sufficient. Removal from probationary status indicates that the intern's performance is at a level appropriate for receiving credit for the internship.
8. The decision for credit or no credit for an intern on probation is made by the majority vote of the Training Committee. The Training Committee will vote based on all available data with particular attention to the intern's fulfillment of the contracts drawn up for the

probationary status. If it becomes apparent that it will not be possible for the intern to receive credit for the internship, the Director of Training will inform the intern.

9. An intern may appeal the decision of the Training Committee by submitting a detailed response to the recommendations of the Training Committee. A review panel comprised of three Training Committee faculty members will be appointed by the Director of Training at his/her discretion with the exception that no one involved in the original action shall be on the panel. The Training Committee may request legal representation be available to consult with the panel concerning due process issues. The Director of Training shall present the position of the Training Committee, and the intern, together with any counsel he/she may choose, shall present the appeal. The Training Committee shall abide by the panel's judgment if it recommends continuation of the training. The intern and his/her supervisor will then develop a training plan for the rest of the year.

XII. ILLEGAL OR UNETHICAL BEHAVIOR

At the beginning of the internship, each intern will be provided a copy of the American Psychological Association's Ethical Principles. It is the responsibility of each intern to read and understand these ethics.

Appropriate employee conduct is a major concern of employing agencies. Consequently, personnel policies of the VAMC are to be honored at all times. Interns are cautioned to exercise due restraint in relating to their clients, peers, supervisors and co-workers so that there is no appearance of sexual, ethnic, racial or other prejudice that detracts from the perception of their service as competent and unbiased. Illegal activities are strictly prohibited.

Illegal or unethical conduct by any intern should be brought to the attention of the Director of Training, in writing. Any person who observes such behavior, whether staff or intern, has the responsibility to report the incident.

1. Infractions of a minor nature may be dealt with by the Director, the supervisor and the intern.

2. Any significant infraction or repeated minor infractions must be taken up by the Training Committee after the written complaint is submitted to the Director of Training. After a careful review of the case, the Training Committee will recommend either probation or dismissal of the intern. Recommendation of a probationary period must include specific guidelines, a time frame and periodic reporting to the Training Committee. A violation of the probationary contract will necessitate the termination of the internship.

XIII. REVIEW AND REVISION OF THE TRAINING MANUAL

Each July the Training Manual will be reviewed by the Training Director. Staff and interns are invited to provide input on changes or revisions they would like to see made. Any addenda made during the year are to be incorporated into the body of the manual at this time. The revised manual is to be distributed to all staff members, and to the incoming interns.