

**ERIE PSYCHOLOGICAL CONSORTIUM HANDBOOK**  
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**CLINICAL DIRECTOR**

REVISED/August 2019 Compiled by EPC faculty

**MISSION STATEMENT:** The Erie Psychological Consortium (EPC) strives to prepare students in clinical and counseling psychology to become competent and ethical psychology professionals.

The EPC is built upon the premise that intensive experiential training with a variety of age groups under close clinical supervision will facilitate the process of integrating psychological and neuropsychological theory and findings into clinical practice. While each rotation has a particular clinical emphasis, the program is designed to provide a general diverse experience in preparation for clinical practice with a variety of age groups and cultures.

**STATEMENT OF DIVERSITY:** The Erie Psychological Consortium is fundamentally committed to the principle that cultural and individual differences matter in our efforts to train competent psychologists. The provision of culturally competent psychological services is an important objective of our internship program and we continually strive to enhance our efforts toward attracting diverse faculty and interns. Attracting diverse faculty and interns allows for a more diverse experience and a rich environment and curriculum that embraces individual difference and diversity. This is particularly important in the training of psychological assessment and interventions with diverse groups.

Consistent with these efforts, EPC acts to ensure a supportive and encouraging environment appropriate for the training of diverse individuals. Further, the program avoids any actions that would restrict program access on grounds that are irrelevant to success in the EPC internship training program or a career in psychology. EPC strives to ensure interns will have opportunities to learn about cultural and individual diversity as they relate to the practice of psychology and integrate into their clinical practice as psychologists. Specific goals and objectives are included in the intern's clinical learning objectives.

**TRAINING MODEL:**

The Erie Psychology Consortium (EPC) is distinctive not so much in terms of its structure i.e. a consortium, but in the unique composition of its members and the services provided. Safe Harbor of UPMC (SHBH) is a multi service outpatient clinic providing a range of clinical services to a more traditional mental health population. Northshore Psychological Associates (NPA) is a private practice of psychology providing integrative care in predominantly health care settings. As such, traditional models of training such as those defined by psychotherapeutic approaches do not adequately grasp the nature of "psychology in action" within the fast paced and changing nature of such practices. EPC has chosen to term its philosophy / model of training as 'experiential' as it is through the immersion of the intern into the culture, science and practice of professional psychology that they acquire not only the technical skill for future practice but also the identity as a psychologist. EPC discusses early in the internship year that interns are "doctors in training" on a par with other doctoral trained health care professionals. The goal, therefore, is that graduates of EPC will feel technically qualified and professionally prepared for any future employment. How does EPC do this?

### **Integrating science and practice:**

Interns participate in a variety of educational experiences both within the internship and at off campus offerings. These include: Internally- assigned readings, monthly journal articles, case discussion, monthly lectures combining neurology residents and psychology interns and various topic discussions within psychology such as managing diabetes, dementia, depression, intro to traumatic brain injury, stroke and rapidly progressive dementias. Externally - Attendance at the Annual Neuroscience conference, UPMC grand rounds and other community offered programs such as joint lectures with other local psychology internship sites.

### **The culture of the profession:**

EPC integrates the culture of the profession into the training in several ways. The first relates to modeling. Interns, particularly during their rotation at NPA, are immersed into the private practice world of psychology. Several faculty / supervisors have extensive involvement in the larger profession of psychology, serving as presidents of the regional psychological association (2), presidents of the state psychological association (2), members of various state association committees (6), members of the state psychological political action committee (1), APA Heiser award recipients (2), and APA Council of representatives (1). Interns meet on a monthly basis for a seminar on ethical and professional issues in psychology. Topics in this seminar range from macro issues such as the future of psychological training and internships to individual ethical dilemmas faced during internship. A list of these topics and readings will be provided. Interns, in the company of faculty, attend a yearly, invitation only, Ethics Educators Seminar sponsored by the state psychological association. During this experience, interns are exposed to faculty and supervisors involved in ethical training and education. The interns, in the company of faculty, attend the Annual Advocacy Day activities sponsored by the state association. During this event, interns receive training on legislative and regulatory issues in Pennsylvania that impact on psychology or the patients we serve. Interns then accompany psychologists to the state capitol where they partake in advocacy efforts with state legislators around these issues.

**CLINICAL SUPERVISION:** Interns are provided with three or more hours of supervision per week coordinated through the primary clinical supervisor. Two hours of individual supervision per week are provided at your primary site (Northshore or Safe Harbor) and provided by your primary clinical supervisor and/or the clinical director of the internship program. Interns also receive an hour of group supervision on a weekly basis with the clinical director and an hour of group supervision on a weekly basis at SHBH. The group supervision will include case presentations, journal club (general article reviews), review of neuropsychological assessment and instruments, literature discussion, issues of cultural diversity, professional development, and general discussion. All supervisory sessions will be documented on the clinical supervision form and signed by the interns and supervisor. Interns will also receive an additional hour of supervision attending various seminars scheduled throughout the month and supervised by other staff psychologists.

**INTERN SCHEDULE AND HOURS:** During the initial week of internship, an orientation will be completed. You will be provided with an orientation checklist and provided a tour of the facility, and given an opportunity to become familiar with your office and the facilities at your site. Your schedule will also include completion of orientation through Encompass Health and UPMC Hamot for the Northshore rotation, and Safe Harbor orientation will be scheduled for the next orientation session.

The internship is based on a 40-hour work week schedule, typically beginning at 8:00 AM and

concluding at 4:30 PM. You may work a different schedule based on a client's needs or special events scheduled. Please keep your supervisor informed of any changes in your schedule.

The internship is divided into two six-month rotations. The first rotation typically ends in February, and time is allotted to plan and transition to the next site.

**ATTENDANCE:** Interns are expected to be at their respective sites as scheduled, unless previously arranged and approved by their clinical supervisor and/or the clinical director. Dress code is generally professional, consisting of slacks and shirt or sweater, or dress/skirt and blouse or sweater. On certain approved days at each site, casual business wear may be appropriate. It is the intern's responsibility to review the dress code for each site with his/her supervisor or the clinical director as to what is considered appropriate dress. Completion of time sheets and pay will be coordinated through Safe Harbor Behavioral Health. Interns are considered employees of Safe Harbor Behavioral Health of UPMC. The internship offers a stipend of \$20,000 dispersed on a bi-weekly basis. It is necessary to complete a time card in advance as directed by UPMC human resources.

**HOLIDAYS:** EPC observes the following holidays: New Year's Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving, and Christmas. Additional holidays may be observed at the specific site where you are located. Interns are also eligible for those holidays during the rotation at that specific site.

**SCHEDULING TIME OFF:** It is often necessary to schedule time off to prepare for post-doctoral interviews, family emergency issues, or other matters. You need to coordinate this with your primary supervisor and request the time off through the Safe Harbor of UPMC supervisor.

**RESEARCH TIME:** The EPC offers four hours per week of scheduled research time. You are free to complete dissertation, research projects, or other research consistent with your academic and career goals. Please schedule this time through your clinical supervisor. At the Safe Harbor site this time is offered if client hour goals are met.

**PROFESSIONAL DEVELOPMENT:** The EPC encourages additional training and professional development throughout the course of the internship year. You are encouraged to attend conferences, workshops, and other educational activities. Many of these activities are located in Erie and Erie County. Please coordinate any requests through your clinical supervisor. Several conferences are scheduled each year and should be incorporated into your schedule in advance. These include UPMC Neurology Conference in November, Pennsylvania Psychological Association Ethics Conference in October, and Pennsylvania Psychological Association Lobby Day in April.

**INTERN PERFORMANCE EVALUATION AND FEEDBACK:** Intern performance and feedback are evaluated by:

- Direct observation of clinical practice
- Direct observation of participation in meetings
- Review of clinical case documentation
- Review of psychosocial assessments
- Review of psychological evaluations and neuropsychological evaluations
- Review of psychological and neuropsychological testing reports
- Evaluation of case formulation, as well as diagnostic and treatment plans
- Evaluation of adherence to ethical and professional standards throughout observation and

supervisory sessions

- Evaluation of sensitivity to diversity and multicultural issues
- Evaluation of ability to interpret and apply empirical findings, and treatment strategies
- Written review and feedback are provided throughout the internship experience and at the conclusion of the internship period. A variety of evaluation forms are utilized and included in this orientation handbook.
- Evaluation of ability to integrate current treatment theory and methods
- Intern feedback is offered through completion of the supervisor evaluation form and final analysis evaluation

**APPLICATION REQUIREMENTS:** As noted, the internship is a full-time one-year clinical experience, beginning the first week of August and ending the last week of July. Applicants must have completed course work for doctoral-level training in clinical or counseling psychology, and successfully completed their comprehensive examinations. They must be in good standing with their doctoral programs and have completed at least 1200 hours of supervised practicum training. A letter of readiness written by the director of training for the doctoral program is required and part of the APIC application. Applicants should submit three copies of their curriculum vitae, three letters of professional reference, including one from the director of clinical training, graduate transcripts, and a clinical work sample as defined on the APIC site. The work sample should include completion of a psychological and/or neuropsychological assessment. The application deadline is November 15, 2019. Individual interviews are typically offered on or prior to December 14, 2019.

**EPC FACULTY:** Current EPC faculty includes

**Northshore Rotation:**

**Donald McAleer Psy.D ABPP.** Licensed Psychologist, Board-certified in clinical psychology–American Board of Professional Psychology (ABPP). Dr. McAleer received his graduate training at Indiana University of Pennsylvania and completed his internship in Clinical Psychology and Neuropsychology at Hamot Medical Center. He has been a member of the Consortium since its inception in 2003 and provides a variety of clinical supervision and administrative services. Dr. McAleer provides a monthly seminar on ethics and professional issues in Psychology. His clinical interests include behavioral medicine, rehabilitation, and various topics in neuropsychology. He is a past president of the Pennsylvania Psychological Association.

**Mark Hogue Psy.D./Licensed Psychologist.** Dr. Hogue is a clinical supervisor with EPC. He completed his doctoral training at Indiana University of Pennsylvania. His clinical interests include sports psychology, faith-based psychology, behavioral medicine, concussion, and sleep psychology. He is a past president of the Pennsylvania Psychological Association.

**Tammy Kordes PhD./Licensed Psychologist.** Dr. Kordes is a graduate of Gannon University. She is a clinical supervisor with EPC and has provided supervision and guidance since 2005. Her professional interests include sports psychology, dementia, traumatic brain injury, treatment of stroke, concussion and multiple sclerosis.

**Robert Mailliard Psy.D./Licensed Psychologist.** Dr. Mailliard is a graduate of the Philadelphia College of Osteopathic Medicine. He provides clinical supervision and didactic training for EPC. His clinical interests include chronic disease management, cognitive, behavioral, and reality-based psychology, ADD and ADHD, and pre-bariatric psychological evaluations. Dr. Mailliard has been a faculty member with EPC since 2009.

**Jon Glass Ph.D./Licensed Psychologist.** Dr. Glass is a graduate of Gannon University and clinical supervisor and faculty member since 2012. His clinical interests include neuropsychology, sports psychology, concussion, and dementia.

**Debra Gilroy Ph.D./Licensed Psychologist.** Dr. Gilroy completed her graduate training in Counseling Psychology from Gannon University in 2004. She completed her predoctoral internship training at the Carruth Center for Counseling and Psychological Services at West Virginia University. Her clinical interests include learning disorders, ADHD disorders for those 12 and older, grief counseling and memory assessment. She joined the EPC faculty in 2015.

**Michael Schwabenbauer Ph.D ABPP./ Licensed Psychologist.** Dr. Schwabenbauer received his graduate training at United States International University and completed his post doctoral residency in Neuropsychology at Lake Erie Institute of Rehabilitation. Dr. Schwabenbauer has been clinical director of EPC since its inception in 2003. He is board-certified in clinical psychology. His professional interests include neuropsychology, dementia, Parkinson's disease, and projective techniques. Specific topics covered in supervision include post-stroke depression, bedside assessment, differential diagnosis of dementia, and psychopharmacology.

#### **Safe Harbor Rotation:**

**Lisa May Ph.D./Licensed Psychologist.** Dr. May is a graduate of Gannon University. Dr. May provides clinical supervision and didactic training, including a monthly interdisciplinary discussion on topics related to treating weight loss and bariatric topics. Her clinical interests include transplant medicine, cultural competency, dementia, neuropsychology and pre-bariatric evaluations. She has been a clinical supervisor with EPC since 2010.

**Mandy Fauble PhD/LCSW.** Dr. Fauble is the Executive Director at Safe Harbor Behavioral Health of UPMC. Dr. Fauble completed her PhD at Case Western Reserve University, where her research focused on how maternal childhood maltreatment impacts children's mental health outcomes. Dr. Fauble has been providing clinical supervision since 2004, and is experienced in community mental health outpatient therapy, crisis intervention and case management services. Her clinical interests include serious and persistent mental illness, crisis intervention, recovery from abuse and trauma, attachment and intergenerational family dynamics as well as social systems and social functioning.

#### **Consultant**

**Parris Baker PhD./Cultural Diversity Consultant.** Dr. Baker is the cultural diversity consultant for EPC interns. He is director of the Social Work program at Gannon University. He provides training throughout the year on a number of selected topics related to cultural diversity and cultural competence.

### **Clinical Competencies and Expectations**

The EPC expects interns to master established clinical competencies by the conclusion of the program. These competencies reflect the basic performance necessary to function as a psychologist in a clinical setting. Specific goals are as follows and identified in the **Erie Psychological Consortium Evaluation of Intern** form and completed at the conclusion of each

six month rotation by your primary supervisor.

**Goal 1: Ethical and legal standards:**

**Objective 1** Knows and adheres to APA Ethical Principles of Psychologists and Code of Conduct and applicable state and federal law.

**Objective 2** Understands ethical principles and professional/legal duties that pertain to cases that involve complicated roles and responsibilities.

**Objective 3** Recognizes ethical dilemmas and applies ethical decision making to resolve those dilemmas.

**Objective 4** Seeks consultation from appropriate professional resources when clarification and assistance are needed to determine appropriate course of action.

**Goal 2: Intercultural effectiveness:**

**Objective 1** Demonstrates an understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves.

**Objective 2** Demonstrates an awareness of the variables including power dynamics, that affect culture and identity and how those intersect to affect client functioning.

**Objective 3** Engages with clients in a way that shows sensitivity and respect for identity and cultural differences and the context in which the client lives.

**Objective 4** Demonstrates skill in discussing with clients the nature of both the client's and the clinician's identity differences and how those influence the therapeutic relationship.

**Objective 5** Applies sensitivity and humility in addressing dimensions of diversity in all facets of professional work.

**Objective 6** Demonstrates knowledge and skill in addressing dimensions of diversity in all facets of professional work. This includes the ability to apply a framework for working effectively with forms of diversity not previously encountered.

**Goal 3: Professional Values and attitudes**

**Objective 1** Knows and adheres to both Northshore Psychological Associates and Safe Harbor Behavioral Health of UPMCs policies and guidelines.

**Objective 2** Meets professional obligations and supports site functioning by making reasonable efforts in assigned tasks.

**Objective 3** Completes professional documentation in a timely manner.

**Objective 4** Prepares for supervision.

**Objective 5** Demonstrates self-reflection, an openness to learning, and an awareness of personal and professional strengths and limitations.

**Objective 6** Demonstrates awareness of and ability to discuss personal emotional functioning as it affects performance of duties.

**Objective 7** Able to receive corrective feedback, apply it and modify behavior accordingly.

**Objective 8** Appropriately manages personal stress and emotions in a way that job performance is not unduly affected.

**Objective 9** Demonstrates awareness of personal impact on co-workers, other professionals, and clients, and alters behavior and presentation appropriately (e.g., language, dress, conduct).

**Objective 10** Demonstrates an ability to take up authority appropriate to the role, goal, and context of professional activities.

#### **Goal 4: Communication and Interpersonal Skills**

**Objective 1** Demonstrates effective interpersonal skills and the ability to manage difficult communication well.

**Objective 2** Produces and comprehends oral, nonverbal, and written communications that are informative and well-integrated; demonstrate an effective grasp of professional language and concepts.

**Objective 3** Develops and maintains effective relationships with a wide range of individuals, including colleagues, supervisors, supervisees, and those receiving professional services.

**Objective 4** Develops and maintains effective relationships with a wide range of individuals, including community members and organizations.

#### **Goal 5: Assessment:**

**Objective 1** Provides rationale and sufficient data from multiple sources for conceptualization and diagnosis.

**Objective 2** Conceptualizes cases grounded in psychological theory, evidence based practices, and an understanding of the client's context.

**Objective 3** Demonstrates flexibility in modifying conceptualization based on client responsiveness to interventions and functioning.

**Objective 4** Demonstrates ability to administer and score psychological and neuropsychological measures appropriately.

**Objective 5** Demonstrates effective integration of test data with other information (clinical interview/review of other records).

**Objective 6** Organizes and writes clear, well supported intake reports, progress notes, evaluation reports, and other documentation that communicates information effectively to the intended audience.

**Objective 7** Demonstrates a working knowledge of ICD 10 / DSM V criteria.

**Objective 8** Demonstrates knowledge of biological / psychiatric issues and appropriately refers for psychiatric and other medical assessment.

## **Goal 6: Intervention**

### **Psychotherapeutic alliance and intervention:**

**Objective 1** Listens carefully and reflects accurately what the client communicates.

**Objective 2** Shows sensitivity to emotional tone and client concerns.

**Objective 3** Is physically and emotionally present with client.

**Objective 4** Establishes appropriate therapeutic boundaries and therapeutic framework.

**Objective 5** Sets and implements appropriate goals with client.

**Objective 6** Demonstrates awareness of underlying issues and directs interventions to these issues.

**Objective 7** Makes interventions in response to client's reactions (goal – corrected attunement).

**Objective 8** Effectively utilizes cognitive interventions (e.g., framing, normalizing, etc.)

**Objective 9** Recognizes client somatic information and directs interventions toward somatic awareness and regulation.

**Objective 10** Shows awareness of own thoughts and feelings (including countertransference).

**Objective 11** Demonstrates skill in dealing with relationship issues (e.g., ruptures, transference).

**Objective 12** Challenges and provides feedback when useful.

**Objective 13** Integrates theory and practice.

**Objective 14** Utilizes outcome and process data to inform therapy.

**Objective 15** Handles termination process appropriately.

### **Crisis Intervention:**

**Objective 16** Appropriately evaluates client's level of distress and functioning.

**Objective 17** Assess risk effectively (e.g., self-harm, suicidality, homicidality, substance use).

**Objective 18** Provides appropriate level of intervention including grounding, stabilization, and other interventions as needed (e.g., referral to crisis services).

**Objective 19** Effectively utilizes appropriate resources to ensure safety.

### **Goal 7: Consultation and interprofessional / interdisciplinary skills**

**Objective 1** Demonstrates knowledge of and respect for the roles and perspectives of other professions.

**Objective 2** Identifies consultee and object of consultation appropriately.

**Objective 3** Clarifies consultee's presenting concerns.

**Objective 4** Responds effectively to both content and relational issues in consultation.

**Objective 5** Identifies appropriate resources and communicates these effectively to consultee and referral source.

**Objective 6** Follows up on consultation as necessary and appropriately documents consultation.

### **Secondary Competencies**

A specific level of competence is not required on Secondary Competencies to successfully complete internship. Interns do not always have the opportunity to provide services that would allow them to develop skill in nor do they always arrive at the internship with training in these areas. Secondary competencies are important to our work at the Erie Psychological Consortium and are often applicable in counseling centers as well as other mental health agencies. Interns will receive training and feedback in developing competencies in the following areas.

### **Goal 8 Outreach and collaboration:**

**Objective 1** Develops original or updated programs and workshops.

**Objective 2** Demonstrates competency in program delivery (e.g., assess need accurately, prepares appropriately, delivers high-quality program, etc.).

**Objective 3** Demonstrates professional public speaking skills.

**Objective 4** Participates in program delivery and outreach related activities.

**Objective 5** Maintains and reports data regarding individual programming activities and outcomes.

**Objective 6** Makes contact with and establishes relationships with collaboration sites.

**Objective 7** Informs and involves Erie Psychological Consortium staff about collaboration opportunities and/or challenges.

**Objective 8** Understands organization structure, limitations/abilities, and the needs of the collaborator.

**Goal 9 Group Facilitation:**

**Objective 1** Establishes effective co-facilitator relationship.

**Objective 2** Discriminates content from process in group.

**Objective 3** Demonstrates ability to recognize individual versus group level interventions.

**Objective 4** Demonstrates ability to reflect whole or subgroup themes to the group.

**Objective 5** Demonstrates ability to support and challenge in group context.

**Goal 10 Administration (E.G., Committee Work):**

**Objective 1** Focuses on appropriate tasks and process in meeting.

**Objective 2** Contributes meaningfully / effectively to tasks.

**Objective 3** Follows through on assignments.

# Erie Psychological Consortium

## Policies and Procedures

### Supervision Requirements

#### **Policy**

It is the policy of the Erie psychological Consortium provide at a minimum, 4 hours of supervision per week, at least two hours of which will include individual supervision by a doctoral level, licensed psychologist. The standard is in accordance with the Consortium goals of providing interns with psychological and neuropsychological scientific knowledge, an understanding of the delivery of professional psychology services and integrating ethical standards and principals for toward developing an entry level clinical psychologist.

#### **Procedure/individual supervision/Northshore rotation**

Doctoral interns are expected to receive four hours of face-to-face supervision of which at least two hours consist of individual supervision. Specific procedures are as follows:

1. At the outset of each rotation, the clinical supervisor collaborates with the intern to establish a time for weekly supervision.
2. The supervisor will review the scope and structure of the supervisory session. The supervisor will inform the intern of any necessary weekly requirements toward preparing for each session.
3. The supervisor will establish a reciprocal collaborative relationship with the intern as a means of providing a healthy learning environment.
4. The supervisor will also review the intern grievance procedure. Resolution of conflicts within the supervisory session is encouraged.
5. At the conclusion of each supervisor session, a supervision form is dated, documented and signed by the supervisor and intern and placed in the intern binder.

In addition to an hour of individual supervision completed by the primary supervisor, interns will receive one hour of individual supervision with the clinical director. All procedures outlined for the primary clinical supervisor are also reviewed and completed by the Clinical Director.

## **Procedure/individual supervision/ Safe Harbor rotation**

Doctoral interns are expected to receive four hours of face-to-face supervision of which at least two hours consists of individual supervision. Specific procedures are as follows:

1. At the onset of each rotation, the clinical supervisor collaborates with the intern to establish a time for weekly supervision. At Safe Harbor, two hours of individual supervision are provided by the clinical supervisor per week.
2. The supervisor will review the scope and structure of the supervisory session. The supervisor will inform the intern of any necessary weekly requirements toward preparing for each session.
3. The supervisor will establish a reciprocal collaborative relationship with the intern as a means of providing a healthy learning environment.
4. The supervisor will also review the intern grievance procedure. Resolution of conflicts within the supervisory session is encouraged.
5. At the conclusion of each supervisory session, a supervision form is dated, documented and signed by the supervisor and intern and placed in the intern binder.

## **Group Supervision**

Interns are provided with two hours of group supervision per week. One hour is provided by the Clinical Director. The second hour is provided by the Clinical Supervisor at Safe Harbor. Interns attended both sessions each week without regard to their current rotation site.

Group supervision generally consists of clinical case presentations, a review of pertinent scientific articles and research (journal club) and professional development issues.

Group supervision is also provided on a monthly basis through the **Ethical Seminar**. Pertinent ethical articles are reviewed and discussed as well as related professional psychology issues toward integrating science and practice.

Group supervision is also provided on a bimonthly basis through the **Diversity Seminar**. This seminar is conducted by the cultural diversity consultant and is designed to raise the intern's awareness regarding their cultural sensitivity and competence.

# **Intern Performance, Evaluation, Feedback, Retention, and Termination**

## **Policy**

The Erie psychological Consortium strives to provide interns with a consistent and ongoing evaluation process based on profession wide competencies as well as timely feedback regarding performance.

Retention and termination decisions are based on objective criteria gathered through the course of the rotation and documented in the midterm and final evaluation by the primary supervisor. All performance, evaluation, feedback, retention and termination processes are consistent with UPMC's personnel policies to the extent they are applicable to the internship.

## **Procedure**

### **Evaluation**

Interns are routinely evaluated at the outset, midpoint and conclusion of each rotation. Performance expectations are explained at the initial supervisory session and reviewed periodically throughout the rotation. Interns are encouraged to provide feedback to the supervisor regarding their performance and asked to comment as a means of demonstrating a collaborative effort toward achieving a minimal level of competency. Interns are asked to sign the evaluation form and provide written observations (if they wish) regarding the evaluation process and their performance.

Intern performance is also reviewed during the monthly EPC meeting that is rotated across both consortium sites. A considerable portion of the meeting is devoted to reviewing the intern's performance and general adjustment. All faculty attending are invited to participate and provide their observations and recommendations. The primary supervisor is generally in attendance and is encouraged to utilize these observations.

### **Feedback**

Interns are encouraged and expected to provide feedback to their Supervisor and Clinical Director during individual supervision, group supervision on a weekly basis, midpoint and at the conclusion of their rotation. Feedback is woven through the intern experience and sought after by faculty. Interns provide comprehensive written feedback at the conclusion of the internship year. This written feedback is reviewed during the final group supervision session with the clinical director. Interns also attend the July EPC

monthly meeting as invited guests to provide their observations and feedback to the faculty attending.

### **Retention and Termination**

Retention and termination decisions are weighed carefully throughout the course of the internship year. Every effort is made to deal with problems or conflicts which emerge toward an effective resolution.

Interns are encouraged to work closely with their supervisor and the clinical director to resolve any conflicts with supervisory staff, associated medical professionals, clients or other interested parties. If conflict cannot be resolved following initial efforts, specific procedures are followed to ensure due process and timely resolution.

### **Performance /Grievance Policy and Procedure**

**It is the policy of the Erie Psychological Consortium to respond to performance problems of doctoral candidates in a timely manner according to the following procedure:**

EPC has revised the doctoral intern performance problems policy to reflect adherence to local, state and federal statutes that govern fair treatment of interns, in accordance to UPMC personnel policies as applicable. This includes a provision where interns may appeal a Hearing Committee decision to a separate committee comprised of two clinical supervisors that do not have direct supervisory responsibilities with the intern, and the Safe Harbor Administrator for a final determination. This allows for an intern to appeal a Hearing Committee decision to another committee to further evaluate the appeal or grievance.

#### **Procedure**

1. Any questions or concerns about intern performance should be presented verbally to the respective consortium site and/or clinical supervisor. The consortium site or clinical supervisor has the discretion to request a meeting with the person or persons submitting the concern to gather additional information. UPMC Human Resources will also be involved as applicable.
2. The clinical supervisor will convene a meeting with the respective intern to:
  - a. Discussed the questions or concerns about performances that were raised
  - b. Form the level of severity of the performance concerns.
3. If the questions, concerns or behavior was determined to be that of a serious ethical or legal nature, the clinical supervisor would consult with the consortium site supervisor and clinical director.

4. The intern will be given **WRITTEN NOTICE** of a pending hearing by the Hearing Committee. The clinical Hearing Committee is composed of the clinical supervisor, site supervisor and Clinical Director. In the case of a hearing, UPMC Human Resources would also be consulted. The intern will be given the nature of the concern. Follow-up action may be implemented and consists of
  - a. Corrective action plan
  - b. Probation
  - c. Suspension-pending further investigation
  - d. Termination from the consortium
    - i) The Clinical Director will make contact (oral and/or written) with the respective interns University director of training from which the intern is registered.
    - ii) The Clinical Director will also evaluate the need to make contact (oral and/or written) with the respective professional body (i.e. APA) with which the intern is registered.
5. If the behavior warrants a corrective action plan, the Hearing committee will develop a measurable corrective plan of action with the intern that may consist of:
  - a. A written description of the specific performance concern.
  - b. A manner in which to quantify or measure the performance concern.
  - c. Specific requirements delineated to allow the intern the opportunity to correct his/her performance (retraining, therapy sessions with review, test review and practice, ethics reading/review/discussion with Clinical Supervisor).
  - d. A manner in which to quantify or measure improvement in the intern's performance (certification of trainings received, number of tapes recorded and reviewed, hours of productivity, number of practice test administrations).
  - e. A timeframe in which the intern is to improve his/her identified area of performance.
6. Appeal of Committee's decision

#### Appeal by intern

The intern may request a review of the Committee's decision by submitting to the Committee in writing, within 30 days of that decision, a request of appeal of the decision, including the reasons (s)he disagrees with the Committee's decision on the complaint.

#### Committees Response to an Appeal

- a. The Committee, for the purpose of review of intern's appeal, will consist of

two clinical supervisors, who were not the intern's direct supervisors and the agency administrator. The Committee will review any additional information submitted since the outset of the hearing.

- b. The Committee may or may not conduct additional investigation, may or may not direct the committee to reevaluate all pertinent information.
  - c. The Committee then may take one or more of the following actions on the appeal:
    - i.) It may uphold, overturn or modify its original decision and will communicate (in writing) this decision to the complainant and the intern.
    - ii.) It may authorize a challenge to its original decision by
      - a) authorizing the filing of a new complaint, waving the time limits, as necessary; or
      - b) Inviting the intern and the complainant to attend one of its regularly scheduled meetings to present their cases
  - d. The Hearing committee then will make the final written determination on the case and will communicate (in writing) the results to all parties involved.
7. All areas of performance identified via this process will continue to be reviewed with the intern, by the clinical supervisor during his/her performance evaluation.
8. Repeated infractions of previously identified and corrected performance concerns could result (at the discretion of the Clinical Director, Consortium site supervisor and Clinical supervisors) in termination from the internship program.

Revised

3/2/2019 MS

# Non-discrimination Policies

## Policy

It is the policy of the Erie Psychological Consortium to avoid any actions that would restrict program access or completion on grounds that are irrelevant to success in graduate training or the profession. In that regard, general guidelines have been established to ensure the orderly induction of interns, faculty and support staff. Employment policies are designed to foster a sense of pride in the Erie Psychological Consortium and its mission to the clients it services

## Procedure

1. All non-discrimination policies are made readily available for interns, faculty and support staff to review.
2. Non- discrimination policies are available in the internship handbook and posted at both consortium sites.
3. These policies include Equal Employment Opportunity affirmation and policy (EEOC) as well as employment policy which emphasizes hiring the best qualified person for each opportunity regardless of race, creed, religion, national origin, sex, sexual orientation, age or religion.
4. Safe Harbor and Northshore Neurosciences post all employment and non-discrimination policies on site for consortium staff and interns for review.
5. Interns are required to review all non-discrimination policies during the initial orientation and review this has been completed with their primary supervisor.

Revised: 3/9/19 MS

# **EEOC Affirmation**

Erie Psychological Consortium in recognition of its responsibility to its clients, family members, staff and the communities it serves affirms its policy in compliance with all applicable federal, state and local laws to hire qualified applicants and treat employees during their employment without regard to race, color, religion, sex, age, national origin, disability, sexual orientation or any other characteristic protected by law.

The successful achievement of a non-discriminatory employment policy requires cooperation between the agency administration and its employees. In fulfilling its part in this cooperative effort, administration is committed to setting the example by establishing and implementing affirmative practices, which ensure the objective of equitable employment opportunities for all.

In order for the Erie Psychological Consortium to fulfill this policy, all vendors, customers and employment services are required to comply with all applicable federal, state and local laws in their association with the Erie Psychological Consortium.

## **EEOC Policy**

An open and equitable personnel system will be established and maintained. Personnel policies, procedures and practices will be designed to prevent discrimination on the basis of race, color, religious creed, disability, ancestry, national origin, age or sex.

Employment opportunities shall be provided to applicants and reasonable accommodation(s) shall be made to meet the physical or mental limitations of qualified applicants or employees.

Any employee who believes he/she has been discriminated against may file a complaint of discrimination with any of the following:

Bureau of Equal Opportunity  
Department of Public Welfare  
Room 223 Health and Welfare Building  
P.O. Box 2675  
Harrisburg, PA. 17105

Office of Civil Rights  
U.S. Department of Health and Human Services  
Office of Civil Rights Region III  
Suite 372 Public Ledger Building  
150 South Independence Mall West  
Philadelphia, Pa. 19106-9111

Pennsylvania Human Relations Commission  
Pittsburgh Regional Office  
Eleventh Floor, Pittsburgh State Office Building  
300 Liberty Street  
Pittsburgh, Pa. 15222

Bureau of Equal Opportunity  
Department of Public Welfare  
Western Field Office  
Room 702 Pittsburgh State Office Building  
300 Liberty Street  
Pittsburgh, Pa. 15222

## **Employment Policy**

In order to ensure the orderly induction of staff and interns and to establish general guidelines for the employment relationship between Erie Psychological Consortium and employees and interns, the following practices and policies have been established. It is the policy of the Erie Psychology Consortium:

To employ the best qualified person for each job opportunity regardless of race, creed, religion, national origin, sex, sexual orientation, age or handicap.

- To encourage promotion of current Erie Psychological Consortium employees who demonstrate leadership skills and exceptional abilities.
- To foster individual development as directly related to the goals of the agency.
- To provide working conditions free from unnecessary hazards.
- To provide hours of labor and conditions of employment in accordance with federal, state and local regulations.
- To foster in each employee a sense of pride in the Erie Psychological Consortium and its mission to the clients it serves.

# Requirements for successful internship performance

## Policy

It is the policy of the Erie psychological Consortium to clearly define the requirements for successful internship performance. Interns are evaluated on nine profession wide competencies required under the APA standards of accreditation. Criteria used to determine the rating on each element are effectiveness, extent of integration of element into interns' practice, and the degree to which the intern can function independently.

## Procedure

At the onset of each rotation, (generally within the first week) interns are asked to complete a self-evaluation utilizing the **Profession Wide Competencies Evaluation of Intern** form as a starting point toward achieving at least a minimum level of achievement for all competencies. Evaluation scale ranges from level 1 insufficient confidence to level 5 proficient. Interns complete an initial self-rating on the following professional wide competencies:

Ethical and legal standards

Intercultural effectiveness

Professional values and attitudes

Communication and interpersonal skills

Assessment

Intervention

Consultation and  
interprofessional/interdisciplinary skills

Interns also complete secondary competencies which include outreach and collaboration, group facilitation and administration. As interns do not always have the opportunity to provide services that would allow them to develop skills related to secondary competencies, a specific level of competence is not required though interns are encouraged to make a good faith effort to do so. Interns will receive support, training and feedback toward developing

competencies in these objectives.

At the midway point of the rotation an evaluation of the intern is completed and reviewed in supervision as a means of gauging progress. Interns are again rated at the conclusion of the rotation. Interns must obtain a minimum level of achievement rating of three on all elements of the profession wide competencies.

Interns are also evaluated based on **Clinical Learning Objectives** specific to each rotation site. These objectives are more specific to each rotation and include completion of orientation checklists, assessment competency verification, participation in interdisciplinary treatment team meetings, and completion of a 'Lunch and Learn' presentation. These objectives are also reviewed at the beginning of each rotation and reviewed on a monthly basis in supervision. At the conclusion of the rotation all objectives are reviewed to ensure completion of these goals and objectives. Supervisors and interns are encouraged to openly discuss any potential problem areas particularly during the midterm evaluation which may be interfering with completion of the minimal level of achievement.

At both sites interns are routinely evaluated in terms of competency to complete assessment tools. This is completed utilizing the **Competency Evaluation Form** following direct face-to-face observation of the intern.

Interns are also evaluated on other measures including the **Cultural Competence Checklist** at the conclusion of the cultural seminars and **Final Exit criteria** completed by the Clinical Director prior to conclusion of the internship year.

Revised 2/23/19 MS

# Maintenance of Records

## Policy

The Erie Psychological Consortium strives to maintain an atmosphere of mutual respect and courtesy between interns and training staff and operates in a manner that facilitates interns educational experiences. The consortium remains responsible for keeping all relevant information and records including formal complaints in a secure setting.

## Procedure

1. At the outset of each internship year a binder is prepared to accumulate documents as they accrue. These include individual and group supervision documentation, evaluations, training received, and presentations completed. The binders also include enough certificates and any formal complaints or grievances.
2. The binders are maintained in the Northshore practice manager office to maintain their confidentiality.
3. At the conclusion of each internship year a copy of the completed internship certificate is added as well as all final evaluations. The completed binder is maintained in the Northshore practice manager's office for safe keeping.

Revised 3/9/19MS

# Administrative and financial assistance

## Policy

The Erie Psychological Consortium provides necessary administrative and financial assistance to our current doctoral interns. The administrative staff seek to provide structure and support to facilitate the success of the internship training program.

## Administrative description

The administrative structure begins with the Executive Director of Safe Harbor. The program

administrator, Mandy Fauble PhD provides administrative oversight for both rotations, with clinical oversight provided by the Clinical Director and Supervisor of the Safe Harbor site. Dr. Fauble has also provided clinical supervision in the past and assistance with program efforts to expand our cultural diversity experiences. Interns are employees of UPMC and receive ongoing support through UPMC human resources. Prior to beginning the internship program, all interns complete necessary clearances and in-service training as required for all UPMC staff as well as preliminary educational requirements to provide clinical services at UPMC Hamot. Additional administrative support is provided through the practice manager at NorthShore Neurosciences for all administrative policies and procedures applicable at this rotation site including FBI and child protective clearances. Administrative issues and updates which may impact the internship program are presented and reviewed at a monthly EPC meeting attended by the clinical director and faculty. Issues addressed at these meetings include stages of completion of all necessary clearances as well as completion of pre-medical screening and ongoing programmatic changes. Additional administrative support is provided through Encompass Health. This includes necessary orientation and in-service training and medical staff credentialing at Encompass Rehabilitation Hospital of Erie. At the outset of the rotation, the medical staff coordinator at Encompass announces to all clinical and administrative staff the doctoral intern will be beginning clinical training on a specific date. A picture of the intern is conveyed through email and an identification badge is assigned.

### **Financial assistance**

Administrative support also extends to financial assistance provided to the doctoral interns. Funding for the stipend is provided through several sources including a grant from UPMC Hamot. Additional funding is generated through clinical services provided through Safe Harbor. The stipend was increased to \$20,000 in September 2018. Interns also receive healthcare benefits through UPMC Safe Harbor Behavioral Health. Interns are provided with financial assistance when attending educational seminars including out of town conferences. Conference registration fees and hotel and meal costs are provided. Additional financial assistance is provided for cultural diversity seminars as well. Interns are provided with vacation, personal and research support time.

# Erie Psychological Consortium Intern recruitment and selection

## Policy

It is the policy of the Erie Psychological Consortium to recruit and select interns compatible with the mission of the consortium and choose candidates that appear ready to begin the internship level of training required. EPC has a commitment to further the training experiences of the interns and promote our model of experiential training toward preparation as an entry level psychologist.

## Procedure

1. All applications are carefully screened and reviewed according to establish criteria as a prerequisite to completing the program. These criteria include readiness for internship per the applicant's academic training director, completion of practicum hours, cultural diversity experience, breadth of assessment and treatment experience and letters of recommendation. Prior doctoral program preparation with neuropsychological assessment, working with culturally diverse populations and clinical assessment is encouraged.
2. The candidates APPIC application is reviewed and a point system is utilized to determine those candidates that have necessary clinical and culturally diverse training experiences.
3. Candidates which meet these criteria are offered a face-to-face or a phone interview. Those who accept are interviewed in January of the following year. Interns are rated during the interview on several factors including preparation, subject knowledge and program fit for each clinical rotation. Candidates interviewed are provided with more detailed information regarding the training at each site and are given a tour of the facilities and hospitals. Candidates also meet with current interns on the day of the interview to gather perspective on the nature of the training experience.
4. At the conclusion of the interviews a ranking meeting is conducted with all faculty invited to participate.

All potential candidates are encouraged to contact the clinical director with questions prior to submitting their applications. Historically, many applicants contact the clinical director via email. All queries are generally answered within 24 hours as a means of assisting applicants with their decision making.

Revised 2/16/19 MS