Student Health and Counseling Services

DOCTORAL INTERNSHIP

In

HEALTH SERVICE PSYCHOLOGY

August, 20 2020 - August 19, 2021

A TRAINING PROGRAM IN HEALTH SERVICE PSYCHOLOGY ACCREDITED BY THE AMERICAN PSYCHOLOGICAL ASSOCIATION

*Questions related to the program's accredited status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
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INTRODUCTION

A. Student Health and Counseling Services

Student Health and Counseling Services consists of the Counseling Center (CC) and the Student Health Center (SHC). This comprehensive and holistic student development agency is committed to student learning, as well as assisting students in actualizing their maximum potential. Student Health and Counseling Services is also a professionally staffed practicum and doctoral internship training facility for graduate students in counseling, counseling psychology, clinical psychology, and social work. Services are accredited by the International Association of Counseling Services (IACS) and the doctoral internship in psychology is accredited by the American Psychological Association (APA).

The primary goal of Student Health and Counseling Services is to enhance the total development of the student and to contribute to the educational mission of the University. Student Health and Counseling Services seeks to increase students’ awareness of mental and physical wellness and health, as well as career planning.

B. Counseling Center

The Counseling Center provides counseling, wellness, and psychiatric services for University of Memphis students. The Counseling Center assists students to thrive in their academic pursuits by helping with management of emotional, psychological, and interpersonal problems.

Counseling center services include individual, couples, family, group, and crisis counseling individualized career exploration and planning, topical workshops and outreach programming for faculty, classes, and campus organizations.

Diversity is valued at the Counseling Center including national origin, race, gender, gender expression, sexual orientation, ethnicity, functional ability, socio-economic status, age, and religious affiliation.

All services are confidential and most are available for students currently enrolled in six (6) or more credit hours during fall or spring semesters. Students who enrolled in the spring and fall semester are also eligible for services in the summer. Triage hours are Monday through Friday between 10:00 A.M. and 3:00 P.M.

C. Our Services
Individual Counseling: Typically, students are seen on a weekly or biweekly basis. Students receiving psychiatric services provided by the center are required to be seen by a therapist on a monthly basis at minimum. Counseling sessions are limited to 12 sessions per academic year; however, periodic review of long-term clients may occur.

Couples and Family Counseling: Couples and Family counseling is available to any student couple (married, same-sex partnered, partnered) or family when one partner or family member is enrolled in six semester hours.

Group Counseling: Group counseling sessions are not time limited. Group options include support groups, psychoeducational groups and process-oriented groups.

Crisis Counseling: Crisis or emergency sessions are available on an as-needed basis including after office hours and on weekends. Crises occurring during regular office hours may be addressed during triage/walk-in hours.

Assessment: Psychological and educational assessment is available for those concerned about ADHD, learning disorders and other issues. ADHD and Learning Disabilities assessments are NOT free of charge. The fee is $300.00 for LD/ADHD assessment and is $75.00 for other psychological evaluations.

Psychiatric Evaluation and Medication Management: Eligible students may receive a psychiatric evaluation for medication. Students receiving psychiatric care through the center are required to participate in individual or group counseling. Students requesting medication for ADHD must provide a current and comprehensive assessment report. This service is only available for uninsured students.

Substance Abuse Screenings and Support: Students may be assessed and supported using the BASICS method.

Relaxation Zone/ Stress Management Services: Stress management may include brief mindfulness, biofeedback, and use of massage chair in the Relaxation Zone. An additional service may include group/classroom orientation to the Relaxation Zone.

Consultation, Campus Outreach, and Education Programs: Staff provides outreach to the university campus based upon identified needs and requests. Outreach topics include but are not limited to stress management/anxiety management, assertiveness, building healthy relationships, time management, suicide prevention, sexual assault prevention/bystander intervention. Staff seeks opportunities to collaborate with various university departments and student organizations.
Career Counseling: Students may address career concerns and confusion with an individual career counselor or within a group setting. Non-students are eligible for career counseling with a $75.00 fee.

D. Our Staff

Our staff consists of six full-time licensed psychologists, two licensed clinical social workers, a licensed mental health counselor, one post-doctoral fellow, four doctoral psychology interns, and practicum students. Clinicians use a breadth of theoretical orientations with each therapist utilizing their own integrative approach to treatment. Staff time is devoted to the delivery of direct clinical services, training, supervision, consultation, outreach, professional development, programming, and administrative duties. Additionally, we have an Administrative Assistant, an Office Associate, a part-time psychiatric nurse practitioner, and part-time contract clinicians.
E. Organizational Chart

Jane B. Clement, Ph.D.
Director
Student Health & Counseling Services

HEALTH CENTER

Aprille Abston-Turns, APN, MSN, RN, Nurse Practitioner
Chelsea Schmidt, Nurse Practitioner
Michelle Wilmer, LPN, Licensed Practical Nurse
Brittney Smith, Licensed Practical Nurse
Karen Berry, MLT, ASCP, Medical Lab Technician
Debbie Widman, MBA, MPS, Admin Associate II
Andrella Maclin, Certified Medical Assistant
Deven Katherine, CPHT, Medical Office Assistant

Len Getz, FNP/PMH, Psychiatric Nurse Practitioner

COUNSELING CENTER

Associate Director (currently vacant)

Victoria Jones, LMSW, Outreach Coordinator
Will Adams, Ph.D., Staff Psychologist
Artice Carter, LCSW, Mental Health Counselor
David Deason, Ph.D, Staff Psychologist
Staff Psychologist - currently vacant
Timothy White, Ph.D., Post Doctoral Fellow

Kelsey Hoover, B.A., Administrative Assistant
Donna Larison, Office Associate

Linh P. Luu, Ph.D Associate Director/Training Director

Zachary Cohen, PsyC Intern
Aldra Forrester, PsyC Intern
Parker Rhomberg, PsyC Intern
Christopher Varghese, PsyC Intern
Prac 1
Prac 2
Prac 3
Prac 4
Prac 5

Britney Bryson, LPC, MHSP Wellness & Health Outreach Educator

Britney Bryson, LPC, MHSP Wellness & Health Outreach Educator
HEALTH SERVICE PSYCHOLOGY TRAINING PROGRAM

A. Philosophy

Our philosophy of training incorporates a Practitioner-Scholar Training Model. We are committed to providing a strong foundation that lends itself to the development of competent mental health professionals. This philosophy trains psychologists as generalists, capable of functioning in a wide variety of settings, counseling with diverse populations, and dealing with an assortment of problems and concerns. Our training program focuses on "learning by doing". The center provides a supportive environment that respects interns’ individual differences and experiences. Importantly, we strongly value diversity and multiculturalism in all aspects of our training program.

B. Training Program Goals and Competencies

The internship training program is an interactive learning experience where emerging professionals practice and develop the multiple roles of a counseling center psychologist. Interns practice in an apprentice role, within a multidisciplinary team, with psychologists who mentor and model professionalism. Interns are exposed to a variety of didactic, supervisory, and experiential activities that value the integration of scholarly knowledge and practice. Our developmental practitioner-scholar model focuses on building on previous skills and knowledge to develop competencies for delivering psychological services, and providing graduated learning opportunities with increased responsibility as the year progresses. By the end of the internship year, interns are prepared to function as autonomous, entry-level practitioners with an intermediate to advanced level of competency in most professional areas. Expectations for independent functioning throughout the internship year facilitate continued growth from a “trainee” identity toward a “professional” identity.

Interns’ experiences are sequential, cumulative, and graded, with increasing levels of responsibility toward this end, the internship year begins with a period of orientation during which interns receive various seminars providing didactic information on the core tasks that interns will engage in throughout the year (e.g., assessment, triage, outreach/consultation, group therapy, crisis intervention, and supervision, etc.). Interns also shadow training staff as they conduct initial clinical assessment interviews and crisis intervention sessions before interns are expected to engage in these activities themselves. Previous training and experience are assessed, initial goals for training are determined, and these training goals are revised throughout the year based on periodic intern evaluations. Throughout the internship year, support, training, and supervision activities are geared toward assisting interns to increase their clinical sophistication, knowledge skill, confidence, and capacity for autonomous functioning.
Goals:
In accordance with American Psychological Association Standard of Accreditation for Health Service Psychology, interns are expected to develop and demonstrate the following nine (9) areas of competencies.

**Competency I: Research**
*Demonstration of the integration of science and practice*

a. Demonstrates ability to select appropriate treatment interventions based upon scholarly knowledge and current research.
b. Ability to use scholarly knowledge to evaluate treatment efficacy
c. Demonstrates ability to critically evaluate and disseminate research or other scholarly activities (e.g. case conference, presentations, publications, etc.) at the local, regional or national level.
d. Demonstrate ability to conduct research/evaluation/special projects relevant to clinical practice and services in a university counseling center

**Competency II: Ethical and Legal Standards:**
*Demonstration of knowledge and application in professional practice.*

a. Demonstrates ability to conduct self in a professional and ethical manner in all professional activities.
b. Demonstrates knowledge and ability to practice in accordance with APA Ethical Principles of psychologists and Code of Conduct and relevant professional standards and guidelines.
c. Demonstrates knowledge and ability to practice in accordance with relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal level.
d. Demonstrate ability to identity and think through complicated ethical dilemmas as they arise and seek appropriate consultation.

**Competency III: Individual and Cultural Diversity**
*Demonstration of awareness, knowledge, sensitivity, and skills when working with diverse individuals and communities who embody a variety of cultural and personal background and characteristics (e.g. age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, socioeconomic status, and other sources of difference)*

a. Demonstrates knowledge regarding one’s own cultural/diverse background, values, and worldview; and how they may impact therapy and other areas of professional functioning (e.g. when reactions and/or biases may inhibit or interfere with therapy or consultative process).
b. Critically evaluates the contributions of individual and cultural issues (noted in III above) and adapt interventions in a culturally sensitive manner in assessment, case conceptualization, treatment planning, and therapy.

c. Demonstrates the ability to apply self-reflection and knowledge in a culturally sensitive manner to work effectively with the range of diverse individuals and groups encountered in a variety of capacities during internship.

d. Demonstrate knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision, consultation, and service.

Competency IV: Professional Values, Attitudes and Behaviors:
*Demonstration of a strong professional identity as a psychologist that includes personal and professional responsibility.*

a. Demonstrates appropriate professional demeanor in appearance and behavior.

b. Demonstrates integrity, accountability, and concern for client welfare.

c. Demonstrates self-evaluation and ability to integrate learning and recognize professional strengths and growth edges.

d. Initiates self-direction and demonstrates motivation for professional growth.

e. Engages in activities to maintain and improve performance, well-being, and professional effectiveness.

f. Actively engages and demonstrates openness to feedback and suggestions in supervision and training seminars.

g. Demonstrates capacity to self-reflect along with a willingness to explore personal reactions/values as they affect the therapeutic relationship/process and other aspects of professional functioning.

h. Demonstrates ability to effectively manage workload (e.g., time management, deadlines, projects, etc.)

Competency V: Communication and Interpersonal Skills

a. Establishes respectful, productive, and culturally sensitive relationships with peers, supervisors, center staff, and other university/community colleagues and organizations.

b. Demonstrates effective interpersonal skills and the ability to manage difficult communications well.

c. Maintains appropriate and timely record-keeping in accordance with professional standards and agency policy.

d. Produces written communications/reports that are professional, informative, and well-integrated.

e. Demonstrates ability to write and present a formal case conceptualization.

f. Provides feedback regarding experiences, satisfaction, and concerns regarding the training program and/or center functioning.
g. Demonstrates ability to oversee administrative projects and appropriately manage ambiguity.

**Competency VI: Assessment**  
*Demonstration of competency in psychological testing.*

a. Demonstrates ability to administer and interpret LD/ADHD and psychological assessments

b. Demonstrates ability to select multiple culturally and clinically appropriate assessment instruments and interpret results in a manner consistent with current research and professional standards.

c. Demonstrates ability to integrate and communicate orally and in a written report the findings and recommendations in an effective manner sensitive to the recipient (e.g. client, referring party, etc.).

d. Demonstrates ability to conduct comprehensive initial intake assessments that integrate clinical information and relevant cultural diversity factors into thorough case conceptualization and appropriate treatment recommendations.

e. Demonstrates ability to provide appropriate DSM diagnoses, taking into account multicultural/diversity factors and differential diagnoses.

**Competency VII: Intervention**  
*Demonstration of strong clinical skills required for professional practice in psychology.*

a. Psychotherapy knowledge and skills
  
  • Develops effective therapeutic alliance with a wide variety of clients.
  
  • Uses core counseling skills appropriately (including open and closed questions, paraphrasing, summarizing and accurate empathic statements).
  
  • Uses theory to conceptualize cases and develop, implement, and evaluate treatment plans taking into account client goals, development, and diverse identities.
  
  • Uses a range of evidenced-based psychotherapeutic techniques and interventions appropriate to the presenting issues and client characteristics.
  
  • Manages the interpersonal dimensions of therapy (including setting the use of empathy, exploring feelings, responding to verbal/non-verbal behavior, addressing incongruities, and handling therapist/client dynamics).
  
  • Manages the therapeutic process effectively (including setting the frame, goal setting, monitoring progress, timing interventions, managing ambiguity, special circumstances, crises, and termination).

b. Crisis intervention skills
  
  • Demonstrates ability to appropriately assess and respond to crises.
  
  • Demonstrates ability to conduct and document risk assessments (harm to self and/or others).
  
  • Demonstrates ability to work collaboratively with other crisis responders on the scene and effectively convey information to area resources, if involved.
c. Group therapy skills
   • Demonstrates ability to recognize group process issues.
   • Demonstrates ability to recognize the contributions of individual and cultural issues as they impact group process.
   • Demonstrates ability to effectively facilitate therapy groups.

d. Outreach programming skills
   • Demonstrates ability to plan, implement, and evaluate outreach programs tailored to the needs of the target audiences.
   • Demonstrates ability to incorporate feedback from student/program evaluations to improve service delivery.

Competency VIII: Supervision:

*Demonstration of competencies in providing supervision.*

a. Provides a positive role model for professional functioning.
   b. Demonstrates ability to conceptualize the supervision process.
   c. Demonstrates ability to evaluate and effectively communicate supervisee’s strengths and areas for growth.
   d. Demonstrates ability to facilitate supervisee development.

Competency IX: Consultation and Interprofessional/ Interdisciplinary Skills

a. Demonstrates knowledge and respect for the roles and perspectives of other professions.
   b. Demonstrate willingness and ability to work collaboratively with professionals from other areas of the University (e.g., Residence Life, Office of Student Conduct, Police Services, and Student Health Center)
   c. Demonstrates ability to consult with professional staff and community providers as needed to provide quality treatment, make appropriate referrals, and facilitate continuity of care.
   d. Demonstrate ability to provide consultation about mental health issues.
   e. Exhibits knowledge about the multiple roles/functions a counseling center may have within the university community (e.g. therapist, committee member, trainer, consultant, presenter.)
   f. Demonstrates ability to take a broader systems perspective in considering issues and services.
C. Training Experiences

I/ Internship Orientation

Interns begin the training program by participating in a three-week orientation; a detailed schedule is provided on the first day of internship. The mission of, training model and operations of the counseling center are reviewed. Administrative management, policies and procedures are communicated. Interns also begin to integrate into the University community, meet other Division staff, and develop a greater awareness of the community roles of the Counseling Center and the Division of Student Academic Success. Course of training and clarification of expectations are reviewed. Interns interact with all supervisors in a group setting to learn about their theoretical orientation, supervision philosophy, style, expectations and clinical interests. After these meetings, interns submit rankings for their desired primary supervisors for the semester. Final determination of supervisory dyads will be made by the Training Committee. During Orientation, interns will also be provided with crisis/ triage and initial assessment training.

II/ Clinical Services

The Health Service Psychology Doctoral Internship training program has at its foundation standard core clinical service provision requirements, including training in the areas of individual, couples, group, crisis intervention/counseling, supervision, assessment, outreach, and consultation. During COVID-19 pandemic, to ensure health and safety for staff, trainees, and the campus community, all services and training activities are delivered in the format of telehealth. Please refer to Telepsychology Clinician and Supervisor Manual for more detailed information and instructions on conducting telepsychology services.

1. Psychotherapy

a) Individual Counseling: Interns provide 12-18 hours of psychotherapy per week. A short-term treatment model of twelve sessions per client per academic year is in effect with opportunities for unlimited group therapy services. Longer-term treatment options may be available after client staffing. Interns have an opportunity to develop skills by observing and being observed by senior staff members. The intern, supervisor, and the Training Committee will determine readiness for more autonomous functioning.

b) Couples Counseling: Couples counseling is available to any student couple (married, same-sex partnered, partnered) or family when one partner or family member is enrolled in six semester hours.

c) Group Counseling: Interns lead or co-lead both structured and unstructured groups throughout the year. A beginning intern co-leads at least one group with a senior staff
member. After they have demonstrated proficiency, interns may lead a group(s) or co-
lead a group(s) with other interns. Ideally, interns conduct at least one group during
each six months period. Senior staff members provide supervision of group work.

2. Crisis Counseling/ After Hours’ Emergency Coverage
Interns are responsible for providing crisis intervention as needed. After-hours cell phone
coverage begins for interns no later than October, and only after training and shadowing in
September. Supervisors accompany interns when after-hours crises require a return to campus.
Staff psychologists are always available for consultation and to assist with crises when
necessary.

3. Triage
Interns participate in the center’s triage/ walk-in system. Students coming to the center between
10:00 A.M. to 3:00 P.M. are seen briefly to assess for safety and schedule or refer as
appropriate.

4. Assessment
Assessment training includes diagnostic interviewing, test administration, interpretation,
professional report writing, and feedback review. Interns receive training and experience with a
variety of assessment materials, including objective and projective personality measures,
intelligence tests, and a variety of other measures. Interns are expected to complete six [6]
assessment reports over the course of the internship year. All of which may be LD/ADHD
assessments (two [2] can be substituted for personality assessments). Interns must show
competency administering the WAIS - IV and the Woodcock Johnson IV –Achievement or the
WIAT-III by the end of orientation period. Assessment deadlines are at least two assessments
completed by November 1. Assessments are to be completed by June 1.

5. Relaxation Zone
Interns will spend a minimum of two hours a week staffing the Relaxation Zone. Interns will become
familiar with biofeedback and other resources of the Relaxation Zone. Interns may orient students to
the Relaxation Zone, check students in, facilitate guided tours of the Relaxation Zone or facilitate
relaxation activities. Interns will ensure students complete pre-and post-test measures associated with
utilization of the Relaxation Zone. During COVID – 19 pandemic, the relaxation zone will be
temporarily closed and will be reopened when it is safe to do so.

6. Consultation/Outreach
Consultation and outreach are important activities and interns are required to participate. Outreach topics include, but are not limited to, stress management/anxiety management, building healthy relationships, time management, suicide prevention, and sexual assault prevention/bystander intervention. Interns are required to actively participate in all center’s outreach activities.

Outreach Project
Interns will complete year-long individual AND group outreach projects in which they will select a community whose identity historically has led to it having little contact with counseling center services, with the goals of engaging a “hard-to-reach” student population. Utilizing a social justice perspective, interns will work to cultivate relationships with their selected community on campus, as well as assess and address identified needs of the community, particularly with regards to emotional well-being/mental health.

7. Supervision of Practicum Students
Interns provide primary supervision for a practicum student for the fall and spring semester. Interns meet with their supervisee for an hour and a half weekly to monitor clinical work and discuss their supervision work within Supervision of supervision.

8. Integrated Health
Interns will be trained in behavioral health consultant model and will provide coverage for integrated health program at Student Health Services for a minimum of 2 hours per week. During COVID-19 pandemic, integrated health services are temporarily suspended and will be resumed when in-person services are resumed.

9. Community Resources
Interns are to familiarize themselves with both campus and community resources in order to make appropriate referrals. Referral information is available in the Counseling Center and through consultation with senior staff.

III/Intern Training Seminars

Training Seminars during Orientation
During orientation period, interns will receive a number of training seminars. Examples of training seminars offered during orientation include:

Crisis/Triage Training
This training is designed to provide practical skills required for assisting clients in crisis. Topics to be covered include but are not limited to: Assessing risk level, law and ethics, ethical decision making, confidentiality, and dealing with angry clients. The interns will also familiarize with the counseling
center after-hour on call system. This training is designed for 4 hours but may vary depending on need.

**Safe Zone**
Student Health and Counseling Services typically offers at least two (2) Safe Zone training sessions in the fall and two (2) sessions in the spring to the campus community. The interns will be trained as the Safe Zone trainers and will be able to facilitate the Safe Zone workshops on campus. Safe Zone Training is a 2-hour workshop aiming to increase LGBTQ+ awareness and inclusion. The workshop aims to set and clarify a common vocabulary on LGBTQ issues, provide activities and lectures that serve as a space for critical discussion and examination of privilege, bias, and identity, give space for participants to ask and discuss any questions they have, and empower participants to feel personally involved and invested in issues of gender and sexuality.

**Relaxation Zone/ Biofeedback**
Training for the Relaxation Zone consists of orientating interns to the logistics and procedures in implementing the relaxation zone program. The interns will learn and apply these prevention intervention programs in working with students as well as help staffing the Relaxation Zone. The Relaxation Zone/ Biofeedback training will include utilization of various biofeedback software, stress relief coloring, zen garden and sand tray work, therapeutic massage chairs, and creating their own stress balls. Interns are expected to consult with students about these services when students come for the program. This is to ensure the students have optimal experience in the Relaxation Zone and are provided with coping skills and knowledge about stress management. During COVID – 19 pandemic, the relaxation zone will be temporarily closed and will be reopened when it is safe to do so.

**Career Counseling**
This training is designed to provide interns with basic knowledge of career assessment instruments typically used at the counseling center. Interns will become familiarized with the SII, MBTI, or other career assessments, and gain knowledge and skills to help students develop both long and short-range career goals.

**Assessment**
Interns will be having 3 – 4 training sessions (approximately 6-8 hours in total) focusing on assessment during orientation period. These sessions aim to give the interns an overview of the assessment instruments used at the counseling center for a LD/ADHD test battery. Interns will also learn about report writing and providing review sessions. Please note that it is up to the interns to have additional practice of administering the assessment (if needed) outside of the group training sessions. Interns must show competency administering the WAIS - IV and the Woodcock Johnson IV –Achievement or the WIAT-III by the end of orientation period.

**Special Topics Seminar**
This is a biweekly didactic and interactive seminar (often with assigned readings) primarily focusing on a variety of clinical issues, ethics, and integrating science and scholarly knowledge into practice. Other professional areas addressed include managing multiple roles, job search/application/interviewing strategies, preparation for licensure, and internship selection activities.

**Multicultural Seminar**
This seminar is a year-long, bi-weekly seminar, designed to expose interns to a variety of multicultural and social justice topics, as well as to help interns better integrate their awareness, knowledge, and skills into culturally appropriate interventions and prevention activities. The seminar is designed to be two 2-hour long sessions per month, with a major focus on experiential and reflective activities, in addition to didactic components. Interns will develop multicultural competence for working with diverse individuals, groups, and communities of various cultural and personal background and characteristics. Diversity of identities includes (but not limited to) those based on gender; gender identity; race; ethnicity; family, culture, and country of origin; religion; age; sexual orientation; size; ability; language; class and socioeconomic status; and impact of social justice systems. Importantly, interns will also engage in self-reflective practices on their own privilege, culture, and identities.

**IV/ Supervision Training**

1. **Individual Supervision**
Interns receive a minimum of two hours weekly of individual supervision. Individual supervisors are rotated to ensure exposure to a variety of supervisory styles and areas of expertise.

2. **Case Conference**
Case conference is a weekly two-hour group supervision activity that is supervised and evaluated by senior staff. In case conference, interns present cases, case conceptualization write-up, concerns, or topics of particular interest. Interns are expected to show video recording of their sessions as well as provide feedback to their peers.

3. **Assessment Supervision**
Assessment supervision is a monthly meeting, focuses on clinical assessment and case conceptualization with particular emphasis on a therapeutic use of assessment. Training in administration and interpretation of a variety of assessment instruments. This also includes information on assessment of special populations.

4. **Supervision of Supervision**
Supervision-of-supervision is a weekly meeting, designed to support interns as they supervise practicum students who are one or more training levels below the intern. In supervision of supervision, interns reflect on their supervision framework, present supervision case
conceptualization based on their supervisory theoretical approach, and present on their work with their supervisee. Interns are expected to show video recording of their sessions as well as receive and provide feedback to their peers.

Supervisory Process for Interns and Primary Supervisor
- Develop and carry out a plan of supervision for intern trainee.
- Develop a theoretical framework for the supervisory experience.
- Develop an awareness of how personal issues might interfere with the supervisory process.
- Develop a trusting relationship between supervisor and trainee.
- Monitor interns as they supervise their interns with clinical skill development.
- Assist interns with case conceptualization.
- Assist interns in awareness of and appreciation of cultural differences.
- Identify and manage transference/counter transference issues.
- Adjust the supervisory relationship as required for optimal training.
- Assist in the development of case management skills.

Intern Responsibilities for Supervision
- Maintain progress notes and records in a timely and professional manner (within 72 hours of service delivery, and within 24 hours of triage walk-in session).
- Maintain summary of activities for week, semester, and year.
- Maintain current and accurate list of clients in Titanium.
- Discuss informed consent with clients/supervisees.
- Prepare for weekly supervision including review of all cases in caseload.
- Schedule in titanium and maintain weekly supervision sessions with primary supervisors.
- Record all client and supervisory sessions; be prepared to discuss.

Primary Supervisor Responsibilities for Supervision
- Assess supervisee’s level of competence in areas such as individual, group, couples counseling, consulting, research, program development and implementation, assessment, and supervision. The supervisee evaluation form will be the tool used to decide a baseline for the intern’s beginning level of functioning.

- Prior to the intern’s functioning as a therapist, supervisors should feel confident that the intern meets criterion associated with a beginning professional. Until this comfort level is reached, supervisors may role-play and/or conduct co-therapy with their supervisees. Other staff may be designated to perform similar training activities.

V/ Professional Development
Intern Meeting
Interns meet for one hour weekly with the Training Director to discuss the training experience, to have questions and/or concerns addressed and to respond to personal and/or professional concerns.

Record Maintenance and Titanium
Interns are required to maintain accurate and timely records for clients on their caseload. These records include all relevant correspondence and documentation associated with treatment. Case notes will be stored in Titanium and forwarded electronically to supervisors for signatures. All clinician therapy notes must be accomplished within 72 hours of service delivery. All triage notes must be accomplished within 24 hours of service delivery. Please refer to the center Policy and Procedure Document for more details. Upon termination, a termination summary must be completed. Task Lists and Client Lists should be monitored.

Records must be secured. Access to electronic student information should be protected. Hard copy materials (e.g., assessment protocols) should be maintained in the mail room behind the front desk when not being used in offices.

Schedules on Titanium must be accurate and current. Open hours on the daily schedule are available to schedule sessions. Interns are to maintain weekly logs of their clinical and professional activities. Logs should be reviewed with primary supervisors and submitted to Training Director weekly for intern’s file. Clients are NOT to be scheduled for recurring appointment.
Sample Weekly Schedule

The following is a sample workweek, which may vary according to the service needs of the Center and the interns’ individual needs.

12 - 16 hours  Psychological Counseling (individual, couples, families)
1– 3 hours  Group Counseling
5 hours  Triage/ Crisis Counseling
3 hours  Consultation/Outreach/Committees
4 hours  Assessment
3 hours  Administration/Paperwork
2 hours  Case Conference
2 hours  Integrated Health (to be resumed post COVID pandemic)
2 hours  Relaxation Zone (to be resumed when RZ is re-opened)
1.5 hours  Professional Development/Special Topic Seminar
1.5 hours  Supervision of Practicum Students
2 hours  Individual Supervision
1.5 hours  Specialized Supervision/Training
1 hour  Intern Meeting

37.5 - 42 hours  Weekly

THE INTERNSHIP MAY REQUIRE ADDITIONAL HOURS FOR TRAINING PURPOSES.
D. Terms of Employment

Statement of Non-Discrimination

The University of Memphis is committed to ensuring that each member of the University community works or studies in an environment free from any form of unlawful discrimination or harassment that is based on race, color, religion, age, disability, sex, national origin, marital status, veteran status, sexual orientation, gender identity/expression or any legally protected class or basis (each a “protected class”).

The University of Memphis is committed to compliance with all applicable laws and regulations prohibiting discrimination and harassment in education and employment. Similarly, the U of M shall not, on the basis of a protected status, subject any student to discrimination under any educational program. No student shall be discriminatorily excluded from participation or denied the benefits of any educational program on the basis of a protected status.

It is the intent of the University of Memphis that each campus of the University shall be free of harassment on the basis of sex, race, color, religion, national origin, age or any other protected status and shall fully comply with the anti-harassment provisions of Titles VI and VII of the Civil Rights Act of 1964, as amended; Title IX of the Education Amendments of 1972, as amended, the federal and state constitutions, and all other applicable federal and state statutes.

The University specifically finds that diversity of students, faculty, administrators and staff is a crucial element of the educational process and reaffirms its commitment to enhancing education through affirmative action to increase diversity at all levels. For additional information about university policies and procedures, please contact the Office of Institutional Equity, 156 Administration Building, (901) 678-2713 (http://www.memphis.edu/oie/)

Intern Qualification and Selection Process

Qualifications of Applicants

To be eligible for internship, intern applicants must provide verification that they are enrolled in an APA-accredited doctoral program in either counseling or clinical psychology. Applicants must verify supervised professional experience and overall readiness for internship, as a requirement in the AAPI online application. In addition, applicants must provide documentation on their application that they have supervised professional experience at the practicum level that is consistent with the training goals and objectives of the center.
Individuals who are open to learning, able to balance multiple roles and responsibilities, receptive to feedback, and motivated to develop a wide range of skills fit well with the internship. Applicants are required to have: A minimum of 500 hours of direct clinical contact (face-to-face [in person or via telehealth] hours in individual/couples, group, and/or test administration) by the start of the internship year; coursework toward the doctoral degree completed by the end of the academic year prior to the start of internship; comprehensive exams, or their equivalent, must be completed prior to applying for internship and dissertation proposals are required to have been approved by the start of internship. Due to COVID-19 pandemic, and with an understanding that trainees may encounter challenges in accruing direct contact hours at practicum level, we have lowered the minimum requirement of 500 hours direct clinical contact to 400 hours for the intern class 2021-2022 selection.

All applications for Internships must be electronically submitted through APPIC. In order to be considered you must:

1. Complete the APPI found on the APPIC website then click on the 'APPI On-Line' and follow instructions outlined at the Applicant portal.

2. Provide a statement of interest explaining why you believe you would be a good fit with the internship program at the University of Memphis Counseling Center. Be specific about your goals for internship and how our program - in particular - will help you meet these goals.

3. Three letters of reference must be submitted with the application. At least two references should be from supervisors who are familiar with your clinical work, one must be from the applicant's major professor. References should reflect your most recent work if possible.

4. A readiness form completed by training director, current curriculum vita, as well as an official transcript of graduate work is required. Noncompliance with these instructions may disqualify your application. All completed applications must be submitted on-line and received by the deadline listed in our APPIC directory entry. For further information, please contact: Linh P. Luu, Ph.D., Associate Director/Training Director at lluu1@memphis.edu

Intern Selection Procedures
This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept or use any ranking-related information from any intern applicant. We are committed to adherence to all other APPIC guidelines as well. We participate in the Computer Matching process (APPIC Matching Program Code # 1559) for intern selection. After the closing
deadline listed on the APPIC directory, all completed applications will be individually reviewed over a period of several weeks and ranked. Following this initial review, applicants will be invited to interview. An on-site interview is preferred, although a skype/phone interview is an option. Applications from diverse candidates are strongly encouraged.

Candidates who are matched with our internship site will need to go through Background Check process. The University of Memphis through HR-Workforce Management will conduct background investigations on all faculty, staff, graduate assistants, and temporary applicants recommended for employment. The Disclosure and Authorization Form required by the Fair Credit Reporting Act (FCRA) is completed through a third-party vendor. No background check will be initiated until the online authorization form is completed. HR - Workforce Management is responsible for reviewing the results of the background check and determining whether the offense negates the individual from being hired. Most convicted felonies (e.g., aggravated assault, sexual assault, sexual battery, robbery, burglary, auto theft, arson, etc.) constitute a fail in background check. If the candidate does not disclose convictions during the background check process, the individual may be disqualified from consideration. In determining suitability for employment where there is a record of criminal conviction, consideration will be given to such issues as the specific duties of the position, the number of offenses and circumstances of each, how long ago the conviction occurred, whether the circumstances arose out of an employment situation, and the accuracy of the explanation on the application.

Stipend/Benefits/ Length of Employment/Leave

Stipend/Benefits/Length of Employment
Interns earn $35,568 for 12 months’ service. Additional benefits include: 24 days annual leave, 12 days sick leave to be used for doctors’ appointments or illness, 13 university holidays, Employee Assistance Program, and Retirement benefits. Additional optional benefits include medical/ dental/ vision insurance, university housing, tuition waiver, health service and access to recreational facilities. Intern stipends are compensation for a one-year, full-time internship. For more information, access the University of Memphis Human Resources page at http://bf.memphis.edu/hr/ or call them at (901) 678-2601.

Leave Time
Leave requests are made to the Training Director through Outlook; the Center Director, and Associate Director should be copied. Although every effort is made to grant leave for the time requested, coverage for the center may necessitate some leave requests being denied or revised. Interns are responsible for ensuring that the leave they use is accurately reflected in the end of the month submitted through Banner as well as on personal Titanium schedules. Primary supervisors as well as support staff should be informed of leave taken to ensure duties are covered.
Interns earn 24 days of annual leave. Interns are expected to reserve two weeks (10 working days or 75 hours) for the final two weeks of internship. **Interns are strongly encouraged to use leave time carefully to fulfill APA-accreditation internship requirement of 2,000 service hours, with a minimum of 500 direct client contact hours.** Once annual leave is used, interns will not have any further days to be absent from the office. Interns are not paid for unused sick or annual leave.

**Annual Leave**
Annual leave requests are made to the Training Director through Outlook Calendar. The Training Director reviews the request and either approves or denies it. If it is approved, interns inform their supervisor, update Titanium, and make arrangements to have their duties and responsibilities covered. Interns are required to request annual leave at least 7 days prior to the day they wish to use annual leave.

**Sick Leave**
Interns who are ill and unable to be in the center are responsible for contacting the Training Director as well as their primary supervisor as soon as possible to ensure duties and responsibilities are covered. Sick leave related to a medical appointment requires a request for sick leave to the Training Director through the Outlook Calendar.

**Secondary Employment**
Secondary employment for psychology interns is strongly discouraged. Interns are expected to adhere to APA Ethical Principles of Psychologists and Code of Conduct and the University of Memphis policy pertaining to such employment. Due to the intensive workload required by this internship, any outside professionally related organizational activities **MUST** be approved by the training director and supervisor.

**Appropriate Use of Resources**
Interns will be provided a “Tigerline” code in order to place for long-distance phone calls. The Tigerline code is solely for contacting clients. Other long-distance phone calls must be made from personal phones. Interns are encouraged to use good judgment as an employee of the University of Memphis in utilizing resources (such as printing, copying, faxing, using paper, envelopes, stationary, etc.). Interns may not use employee/center resources for personal use. Please consult when use of resources may be deemed excessive.

**Professionalism**
The Counseling Center is a campus department whose primary focus is to provide professional psychological services to the university’s diverse student population. We are also committed to training mental health professionals and in doing so emphasize the importance of personal and professional integration. As a result, our staff strives to balance appearing warm and approachable,
reflecting our individuality, and maintaining a professional image. If at any time you have questions or concerns about what is appropriate, please ask the Training Director for clarification. Likewise, understand that concerns about professionalism will be brought to your attention in a private, candid conversation. Staff members and interns are expected to maintain professional decorum with clients, colleagues, administrators, and other faculty, staff, and students.

Examples of professional behavior include:

a) Prompt attendance to meetings and active participation when appropriate.

b) Receptive to feedback coupled with non-defensiveness.

c) Establishment of collegial relationships and respect for others.

d) Open communication with supervisors and a willingness to consult when appropriate (faced with difficult situations).

e) Investment in self-care such that personal/emotional/physical issues do not impact work responsibilities.

g) Attire and grooming appropriate to a business setting (see Appendix on Dress Code)

EVALUATION PROCEDURES

A. Intern Evaluation Process

The Health Service Psychology Doctoral Internship Training Program follows a developmental model that supports and builds on the interns’ knowledge. It is sequential, cumulative, and graded in complexity. Interns build competence and confidence in their practice throughout the year, and are afforded more autonomy as appropriate. Interns are formally evaluated two times and informally evaluated two times a year: the first informal evaluation occurs in late October and the second informal evaluation occurs in May. The first formal written evaluation occurs in February and the second one is in late July. The evaluated competencies align with the program goals. Interns are expected to achieve Highly-Developed to Competent rating by the end of the internship year on competencies reflected in the Doctoral Internship in Health Service Psychology Evaluation Form (appendix F).

Interns will receive the following formal evaluations:

- Primary Supervisor and Training Team Evaluation of Intern
- Supervisee Evaluation of Intern

Supervisors provide ongoing feedback of interns’ strengths and areas of growth. When an intern is not meeting performance standards, a specific training plan may be developed for the intern.
Interns have an opportunity to respond in writing to each evaluation. The evaluations and the responses are filed in the intern’s file by the Training Director.

**B. Intern Feedback/Training Program Experience/Training Team**

Interns will provide the following formal evaluations:
- Intern Evaluation of Primary Supervisor
- Intern Evaluation of Supervisee
- Intern Evaluation of Group Training Experiences (Case conference, supervision of supervision, assessment supervision, and all didactic seminars)
- Intern Evaluation of Training Director
- Intern Evaluation of Internship Experience

Interns have an additional opportunity to discuss and evaluate the program and to give suggestions and constructive feedback to the Training Director during the interns’ weekly support meetings. A one-year follow up is conducted to evaluate the “training experience to practice” process.

**Training Committee**
The Training Committee consists of the training director, two senior staff (at least one psychologist), and a psychology intern. The purpose of the Training committee is to review all aspects of the training program, review evaluation and feedback from trainees, plan for intern selection, and make timely adjustment to the training activities to address interns’ feedback and needs. The Training Committee meets weekly for an hour.

Interns’ primary supervisors and other supervising staff also meet with the Training Director monthly to review interns performance and progress.
DUE PROCESS, REMEDIATION, and GRIEVANCE GUIDELINES

A. Rights and Responsibilities

This section provides interns and staff with an overview of the process of identification and management of intern problems and concerns. A listing of possible sanctions and an explicit discussion of the due process and grievance procedures is provided. Also included are important considerations in the remediation of problems. In cases of sexual harassment and/or a hostile work environment, the University policies and procedures supersede these procedures.

We encourage staff and interns to discuss and resolve conflicts informally. If this cannot occur, this document was created to provide a formal mechanism to respond to issues of concern. Due process ensures that decisions made by the training program about interns are not arbitrary or personally based, requires that the program identifies specific evaluative procedures which are applied to all interns, and have appropriate appeal procedures available to the intern in order to challenge the program’s action.

1. Interns have the right:

   a. To a clear statement of general rights and responsibilities related to the training program, and professional functions.
   b. To be trained by professionals who behave in accordance with the APA ethical guidelines.
   c. To be treated with professional respect and with recognition that the trainee brings a wealth of experience.
   d. To ongoing evaluation that is specific, respectful, and pertinent. Evaluations occur at specified times, with the procedures for evaluation clearly stated in writing.
   e. To engage in ongoing evaluation of the training experience.
   f. To initiate informal resolution of problems that might arise in the training experience through a request to the individual concerned and/or the Training Director.
   g. To a clear and written statement of the procedures/actions involved in decision-making related to inadequate performance.
   h. To information on intern appeals procedure.
   i. To early and frequent communication with graduate programs when appropriate about suspected difficulties with interns. These communications may seek input and/or inform graduate programs of action taken.
   j. To a remediation plan instituted with the input and knowledge of the graduate program when appropriate. (Remediation plans address identified inadequacies and include a time frame for remediation and consequences of not meeting goals.)
k. To written documentation to all relevant parties including action taken, consequences and rationale.
l. To sufficient time to respond to action taken by the program.
m. To due process to deal with problems after informal resolution has failed or to determine when rights have been violated.
n. To privacy and respect of one’s personal life.

2. Interns have the responsibility:

   a. To read, understand, and clarify when necessary the statements of rights and responsibilities.
   b. To maintain behavior within the scope of the APA ethical guidelines.
   c. To behave within the bounds set forth by the laws and regulations of the State of Tennessee.
   d. To be open to professionally appropriate feedback from supervisors, staff, other interns, and university staff.
   e. To behave in a manner that promotes professional interaction and is in accordance with the standards and expectations of the counseling center and the profession of psychology.
   f. To give professionally appropriate feedback regarding the training experience.
   g. To conduct oneself in a professionally appropriate manner if due process is initiated.
   h. To actively participate in training, service, and overall activities
   i. To meet training expectations by demonstrating proficiency identified

B. Definition of Unsatisfactory Intern Performance

For purposes of this document, unsatisfactory performance is defined broadly as an interference in professional functioning which is reflected in one or more of the following ways:

1) An inability and/or unwillingness to acquire and integrate professional standards into one’s repertoire of professional behavior;
2) An inability to acquire professional skills in order to reach an acceptable level of competency
3) An inability to control personal stress, psychological disorder, and/or strong emotional reactions which interfere with professional functioning. Evaluative criteria which link this definition of unsatisfactory intern performance to particular professional behaviors are incorporated in the specific evaluation forms which are completed by supervisors.

While it is a professional judgment as to when an intern’s behavior is judged to be
unsatisfactory rather than problematic, for purposes of this document a problem refers to an intern’s behaviors, attitudes, or characteristics which, while of concern and requiring remediation, are not unexpected or excessive for professionals in training. Problems typically become identified as unsatisfactory intern performance when they include one or more of the following characteristics:

1. The intern does not acknowledge, understand, or address the problem when it is identified.
2. The problem is not merely a reflection of a skill deficit which can be rectified by academic or didactic training.
3. The quality of services delivered by the intern is sufficiently negatively affected.
4. The problem is not restricted to one area of professional functioning.
5. A disproportionate amount of attention by training personnel is required.
6. The intern’s behavior does not change as a function of feedback, remediation efforts, and/or time.

C. Procedure for Responding to Unsatisfactory Intern Performance

If an intern’s performance is deemed inadequate as a result of evaluation, or if a staff member evaluates an intern’s performance as unsatisfactory, the Training Director welcomes information or a written statement of response from the intern. Whether a response is provided by the intern, the following procedures will be initiated:

1. The staff member, primary supervisor, and the intern will meet to discuss the unsatisfactory performance and determine appropriate action to be taken.

2. The staff member, primary supervisor, and the intern will meet with the Training Director (TD) to review the rating and subsequent plans of action for intern and staff member(s) addressing the issue(s). The TD may also meet with the staff member, primary supervisor and/or intern individually. The TD welcomes information or a written statement of response from the intern.

3. After review of the unsatisfactory performance and the intern’s response, the TD may adopt one or more of the following courses of action or may take another appropriate action:
   
   • Convene a meeting of the Training Team, all principle parties including any staff member chosen by the intern, to review the issue(s) and make recommendations for action.
• Acknowledge and document to all principle parties (i.e. intern, concerned staff members), actions which have been taken in response to the issues under review.

• Define, in a written agreement, a probationary period in which the intern, TD, staff member, and primary supervisor will actively and systematically monitor the manner and degree to which the intern and supervisor(s) address and progress toward remediation of the unsatisfactory performance. The written agreement specifies the unsatisfactory performance, recommendations for rectifying it, the time-frame for remediation, and procedures to assess whether the unsatisfactory performance has been rectified.

4. The TD will meet with the intern to review the action taken. The intern may choose to accept the conditions presented or may choose to appeal the action.

5. The TD may inform the intern’s sponsoring department about the nature of the unsatisfactory performance and action to be taken for remediation. The intern will be provided with a copy of all written communication with his/her sponsoring department and will have the opportunity to provide a written response.

6. The status of the unsatisfactory performance will be reviewed no later than the next evaluation period or upon expiration of the probation period.

7. If unsatisfactory intern performance has been rectified to the satisfaction of the primary supervisor and/or staff member and the TD, the TD will communicate in writing to the intern and intern’s home academic department (if appropriate) to provide information when intern successfully completes remediation process and how intern will integrate back to all aspects of their training and experience. A copy of the letter will be added to intern’s file.

D. Intern Appeal

The intern may appeal the action taken by the TD, by informing the TD, in writing, of such an appeal. Upon receipt of the appeal, the following process will be initiated:

1. The TD will convene an Ad Hoc Review Panel consisting of the TD, a training staff member selected by the TD and a training staff member selected by the intern.

2. The Ad Hoc Review Panel, chaired by the TD, will hear the intern’s appeal and his/her supporting evidence.
3. The intern has the right to hear all facts presented against him/her and has the opportunity to present his/her response. The Ad Hoc Review Panel will submit a report to the Director including any recommendations for further action. The intern will receive a copy of the report. The intern will be informed of the recommendations.

4. The Director may accept the Ad Hoc Review Panel’s action, reject the Ad Hoc Review Panel’s action and provide an alternative, or refer the matter back to the Ad Hoc Review Panel for further deliberation. If the last option is chosen, the Ad Hoc Review Panel will submit a report of the further deliberations back to the Director, with a copy to the intern. The Director will then make a final decision regarding action to be taken.

5. The TD, staff member, intern, sponsoring department, and other appropriate individuals are informed in writing of the action taken. The supervisee may submit a written response.

E. Possible Intervention in Response to Unsatisfactory Intern Performance

Training goals and objectives are designed to improve upon and develop intern skills. Identification of and correction of inadequate intern performance is of extreme importance. Possible, and perhaps concurrent, courses of action designed to remediate unsatisfactory performance include:

Verbal Notice – the trainee is given feedback regarding unsatisfactory behavior

Written Notice – directs the trainee to discontinue unsatisfactory action(s) or behavior(s). The trainee will be given a letter specifying the following:
   a. Description of the unsatisfactory behavior
   b. Actions required to correct the unsatisfactory behavior
   c. Timeline for correction
   d. Possible consequences if the problem is not corrected

Schedule Modification – the trainee’s schedule is modified to allow the trainee to focus on remediation of the area of concern. Examples of possible modifications include:
   a. Increasing the amount of supervision, either with the same or other supervisors
   b. Changing the format, emphasis, or focus of supervision
   c. Recommending personal work
   d. Reducing the trainee's clinical or other workload
Probation – if the area of unsatisfactory behavior is deemed serious enough, the trainee may be placed on probation. The trainee will be given a letter specifying the following:

a. Description of the unsatisfactory behavior
b. Actions required to correct the unsatisfactory behavior
c. Timeline for correction
d. Explanation of the procedure that will be used to determine whether satisfactory progress has been made
e. Possible consequences if the problem is not corrected

Clinical Privileges Suspension – if it is determined that the trainee’s problem behavior might impact client welfare, the trainee’s clinical privileges will be suspended. The trainee will be given a letter specifying the following:

a. Description of the unsatisfactory behavior
b. If applicable,
   1) Actions required to correct the unsatisfactory behavior
   2) Timeline for correction
   3) Explanation of the procedure that will be used to determine whether satisfactory progress has been made
   4) Possible consequences if the problem is not corrected

Administrative Leave – the trainee may be placed on leave, accompanied by suspension of all duties and responsibilities in the agency. The trainee will be informed in writing about potential consequences resulting from suspension, which might include inability to complete program hours or other requirements.

In some cases, the above remediation options may not, after a reasonable time period, rectify the unsatisfactory performance. When the intern does not rectify the unsatisfactory performance, the TD may take additional formal action, including such actions as:

- Initiate the review process again by convening the Training Team and two staff members chosen by the intern. The steps outlined in 3-5 above may be engaged again.
- Note the unsatisfactory performance in the intern’s final evaluation, including the specification of those settings in which the intern cannot function satisfactory.
- Determine that the intern has not successfully completed the training experience.
- Terminate the intern from the training program.

Dismissal – dismissal from the training program might occur under the following circumstances:

a. It is determined that remediation cannot be successfully accomplished.
b. Serious violation of ethical standards
c. Serious violation of SHCS and/or University of Memphis policy and procedures

d. Serious legal violation

e. Any other condition that jeopardizes trainee, client or staff welfare

On occasion, a career shift for the intern may be recommended and assistance in implementing the change offered. U of M Policy HR5000 states, in part: “All new hires are initially placed under a six-month probationary period during which time their employment may be terminated without cause. However, supervisors are still encouraged to monitor and document less than satisfactory employment standards as a means of improving the overall quality of the work force. (See cited Policy for further detail [https://memphis.policytech.com/dotNet/documents/?docid=410](https://memphis.policytech.com/dotNet/documents/?docid=410)). Frequent evaluations are scheduled throughout the year to provide numerous opportunities for interns to receive feedback on their progress.”

**F. Intern Complaint Procedures**

In order to protect the needs and rights of all interns, a formal complaint procedure has been developed. While it is hoped that any concerns of complaints can be discussed and resolved informally, a formal mechanism is appropriate in light of the power differences between supervisors and interns.

In general, interns are encouraged to work actively to create an experience that fits their needs and interests and to work with the staff to ensure that their needs are met. Giving feedback to staff members/supervisors or the Training Director is encouraged to create an environment that facilitates open dialogue and feedback.

Procedures covered in this document may be initiated in the following situations:

- When an intern has a complaint concerning a staff member/supervisor regarding a situation other than evaluation.
- When an intern has a complaint concerning another intern.
- When an intern disagrees with an evaluation by a supervisor.
- When an intern disagrees with actions taken by the Training Director.

**Complaints Regarding Training Issues:**
1. The intern is encouraged to speak directly with the staff member/supervisor involved for a resolution.
2. If the situation is not resolved, or if the intern prefers not to speak directly to the staff member/supervisor, the intern may discuss the complaint with the Primary Supervisor and/or Training Director. The Training Director will then facilitate a meeting between the
intern and the staff member/supervisor. In the case of a complaint concerning a support staff member, the Primary Supervisor and/or Training Director will consult with the Counseling Center Director who may then delegate the facilitation of a meeting between the intern and that staff member.

3. If the complaint is not resolved in the meeting with the intern, staff member/supervisor, and the Training Director, and/or Primary Supervisor, the Training Director will convene an Ad Hoc Advisory committee. The Ad Hoc committee will include the Training Director and/or the Primary Supervisor, the intern, the staff member/supervisor, a member selected by the Training Director, and an intern advocate selected by the intern.

4. If the complaint remains unresolved, the Director of the Counseling Center will meet with the Ad Hoc Advisory committee to review and act on the complaint.

Complaints Regarding Non-Training Issues:
1. Interns are encouraged to initiate procedures 1-4 outlined above to resolve the complaint.

2. In the event that the complaint is against the Training Director, the intern may discuss the complaint with the Director of the Counseling Center. The Director will implement procedures 1-4 above to resolve the complaint, with the Director replacing the Training Director or appointing a designee for that role.

3. In the case of perceived harassment (sexual, racial, and other) which is not resolved through this procedure, the intern should refer to University policy GE2030 (https://memphis.polictech.com/dotNet/documents/?docid=430) for information regarding advocacy and filing a complaint.