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MISSION

The Rutgers University Behavioral Health Care pre-doctoral Psychology Internship Training Program is sponsored by University Behavioral Health Care (UBHC) in conjunction with the Robert Wood Johnson Medical School’s (RWJMS) Department of Psychiatry, both of which are components of Rutgers Biomedical and Health Sciences. Rutgers Biomedical and Health Sciences is the umbrella organization of all programs formerly affiliated with UMDNJ prior to the merger of UMDNJ with Rutgers in July 2013. The mission of our internship is to provide broad-based and experiential clinical training, toward the purpose of preparing interns to be competent, ethical and culturally sensitive psychologists. We focus on development of a broad range of clinical competencies, utilizing research and empirically validated treatment practices to inform that clinical practice. We identify our program as adhering to a practitioner-scholar model.

PROGRAM PHILOSOPHY, TRAINING MODEL & TRAINING PLAN

The faculty members of the Rutgers University Behavioral Health Care Training Program are licensed psychologists who are either senior supervisory staff of University Behavioral Health Care or faculty/adjunct faculty of the Department of Psychiatry of Robert Wood Johnson Medical School.

We have developed a training program for psychology interns based on the practitioner-scholar model of professional psychology training and practice. Our internship emphasizes direct clinical practice. We stress competency consolidation in assessment, diagnosis, case conceptualization, treatment planning, intervention and referral. The intern also represents the role of psychology, while working within an interdisciplinary team of professionals. Our internship strongly values cultural competence and ethics. We strive for interns to employ scientific attitude and analysis to the work they do. Overall, we expect interns to hone a range of competencies (please see our Intern Competency Based Evaluation form) which are core to effective functioning as a professional psychologist, such that they emerge from our program fully prepared to function as entry level professionals.

Ensconced within UBHC, one of the largest mental health systems in the United States, the Rutgers University Behavioral Health Care pre-doctoral Psychology Internship program emphasizes the development of intermediate to advanced level clinical skills through supervised clinical experiences in the application of theoretical and empirical psychological knowledge. The program provides interns with a continuum of clinical training opportunities within a broad range of multidisciplinary clinical settings. Our training curriculum strives to be relevant to the current demands of practicing psychologists and the populations they serve. The activities of the internship are designed to teach and develop professional competence, through modeling, experience and supervision. The internship emphasizes the provision of service to culturally diverse communities, as well as the treatment of underserved populations.

The Internship experience is structured in a tiered manner, with the interns being sequentially supervised through didactics, role modeling, (e.g., observing and co-facilitating with their supervisors), direct observation by supervisors, indirect observation by supervisors
e.g. audio/videotape, and verbal case presentation based supervision. Interns will be expected to assess cases and develop interventions based on matching clinical presentation to theory and empirically based treatment. They will be expected to understand and articulate the assumptions and limitations of their interventions, as well as implement practices that address the problems they encounter. Interns also will be expected to demonstrate competence in a broader sphere of professional issues related to the practice of psychology. Psychology interns start the year with fewer cases and gradually increase their responsibilities as their skill levels develop.

We offer two adult and three child tracks, each of which is tied to a specific primary clinical rotation site. This primary rotation will account for 3 days per week. These rotations are described later in the handbook. In addition the intern chooses one minor rotation. This will account for 5 to 8 hours per week. All tracks have been developed to provide consonant training opportunities for the interns, despite their divergent clinical population foci. Within all rotations (major and minor), the intern will be paired with a senior psychologist, who works within that clinical setting. This supervising psychologist will be responsible for fully orienting the intern to the practices and policies of that unit. The supervising psychologist will serve as a role model and mentor, supervising the intern for the range of psychological services provided by the intern within that unit. Supervisors review with interns the general and specific competencies they must develop as an ongoing function of supervision. They provide frequent and ongoing formative feedback in addition to participating in a summative evaluation process at 4 months, 8 months, and at the end of the year.

PROGRAM GOALS & OBJECTIVES

In keeping with our mission and philosophy, the following Goals and Objectives have been designed by the Training faculty to prepare interns for the practice of professional psychology within the practitioner-scholar model. The objectives are chosen to assure that all interns attain a set of general competencies required of a clinical psychologist operating within this model. Interns are expected to attain specific experience and competence in treating the population of the training track they have chosen.

Goal 1: Interns demonstrate the skills required to treat clients with behavioral health and multi-systemic problems:

Objective 1.1: Interns can establish, maintain and terminate relationships with clients in ways that embody respect and commitment to client welfare.
Objective 1.2: Interns demonstrate skill in clinical interviewing, psychotherapy and other clinical interventions.
Objective 1.3: Interns demonstrate competency in case conceptualization and treatment planning.
Objective 1.4: Interns demonstrate ability to conduct competent risk assessments and effectively manage client crises.
Goal 2: Interns possess an understanding of and commitment to maximizing client welfare through their practice:

  Objective 2.1: Interns demonstrate an awareness of ethical principles and a commitment to their appropriate application in the practice of psychology.
  Objective 2.2: Interns demonstrate an awareness of diversity issues and a commitment to cultural competence in the practice of psychology.
  Objective 2.3: Interns demonstrate a commitment to ongoing self-examination and awareness.
  Objective 2.4: Interns demonstrate awareness and skill in consultation.

Goal 3: Interns demonstrate continuous professional development:

  Objective 3.1: Interns utilize supervision effectively toward their growth as a psychologist.
  Objective 3.2: Interns understand organizational standards and exemplify professional behavior.
  Objective 3.3: Interns are able to provide basic supervision to other trainees.

Goal 4: Interns employ scientific attitude and analytic skills in the practice of psychology:

  Objective 4.1: Interns adapt scientific practices to their clinical work.
  Objective 4.2: Interns demonstrate facility with applying psychological research/literature to their practice.

Goal 5: Interns are able to conduct comprehensive clinical assessments, utilizing clinical interview, behavioral assessment, psychological testing and psychological inventory:

  Objective 5.1: Interns exhibit role-effectiveness in psychological assessment.
  Objective 5.2: Interns are able to perform competent psychological assessments.

This training model and its goals and objectives, inform the competencies that must be achieved by interns in order to successfully complete the internship. The Intern Evaluation Competency Based Evaluation Form defines the competencies to be rated by supervisors for each Objective. During the first two weeks of the internship, interns self-assess their competencies using the Intern Evaluation Form. This information is reviewed and considered by the Intern and the Director of Training in finalizing their individual training program. This information is then reviewed by the supervising psychologist at each rotation. Each supervisor evaluates the interns they supervise using this Intern Evaluation Form at 4 months, 8 months and the end of the year. It is a basis for providing summative feedback at those four month intervals. Interns are expected to attain a final competency level of at least 3 (Intermediate skill level) for 95% of the objectives in order to successfully complete the internship.
POLICIES FOR INTERN SELECTION

Applicants should have completed all the coursework required for the Ph.D. or Psy.D. Degree in an APA-accredited doctoral program in clinical, counseling or school psychology and should have had supervised clinical practicum training, adequate and appropriate for a practitioner-scholar model internship. Although we have no minimum cutoff for face to face clinical experience, we have found more successful interns to have had above 600 such hours. Applicants should also possess a Masters degree in Psychology and have successfully passed comprehensive or qualifying examinations. Three letters of recommendation should be submitted from supervisors familiar with the applicant’s clinical skills and interests. Two written work samples are also required: one a psychological testing report and the other a treatment report. Applicants are expected to express interest in a specific major track when applying. Applicants should highlight related experience and goals when possible. We emphasize that the internship demands maturity, motivation, autonomy and clearly defined goals. Applicants should submit the APPIC Application form. In ranking candidates, we are particularly attentive to the match of the applicant’s interest focus, cumulative experience and career goals with our resources and opportunities. We are again, particularly attuned to the match between the intern and her/his choice of major track.

We adhere to all APPIC requirements in meeting, interviewing and considering candidates for our internship program. The following steps are taken from the time the completed application is received through to the final ordering of applicants:

1. The Internship Director and Training Committee read and review all applications. Based on the prospective intern’s credentials and our judgment as to goodness of fit, decisions are made regarding extending an invitation to interview.

2. We prefer candidates who have completed all or almost all requirements for their degree (Ph.D. or Psy.D.), have outstanding letters of recommendations (top third or better of class), have completed at least 2-3 years of practicum experience and are a good match for their track of choice. We invite approximately 60 individuals, out of approximately 180 applications for personal interviews.

3. Selected applicants are invited to attend one of 3 interview dates scheduled in December and January. Each candidate participates in two individual interviews with faculty or staff members. Candidates also participate in a small group interview, as well. The prospective applicants then meet with the current intern group in order to obtain unencumbered and uncensored feedback from the interns who have first-hand experience with all aspects of the program. The interview sessions run from 8:30-1 p.m.

4. Interviewers complete a rating form describing the applicant’s strengths, weaknesses and goodness of fit between the candidate and our program. All interviewers then meet as a group to share impressions of the candidates and to determine a final ranking.

5. Finally, the Training Committee reviews ranked lists of candidates for inclusion in the computerized match.
REQUIREMENTS FOR COMPLETION OF INTERNSHIP

The following requirements must be met to the satisfaction of the Training Committee to receive satisfactory certification of internship completion:

1. The internship requires a total of 2000 hours. The bulk of this will time will be supervised work in the major rotation, but will also include time in the minor rotation, as approved by the Director of Training. A **minimum** of 500 hours in the provision of direct face-to-face clinical services is required.

2. All rotations must be satisfactorily completed. 95% of competency measures, on all rotations, must be at a level of at least 3 (intermediate skill level) by the completion of the internship.

3. All assigned clinical documentation and administrative record keeping must be completed.

4. Regular attendance at the Psychology Seminar, Assessment Seminar and Special Topics in Psychology Seminar must occur.

5. At least five Psychological Evaluations with an integrated written report must be completed. Feedback on the results of the evaluation must be provided to the referral source and the individual tested, as well as to family members when appropriate.

6. All supervisor evaluation forms, seminar evaluation forms, and Internship Program Evaluation forms must be completed.

7. The intern must participate in and complete a quality improvement project that is approved by the Director of Training and a faculty supervisor.

8. Formal case presentations are required.

9. Participation in routine case conferences and meetings required for the major and minor rotations are expected.

10. Participation in a final, formal case presentation is required. This exercise involves an extensive write-up of a treatment case followed by an oral defense before a team of three licensed psychologists

DESCRIPTION OF TRAINING OPPORTUNITIES

The UMDNJ-Piscataway Psychology Internship program provides core advanced training experience in 5 specific areas which correspond to our five tracks. These specialty areas are Child Partial Mental Health Services, Adolescent School-based Mental Health Services, Adolescent Institutional Forensic Mental Health Services, Adult Outpatient Latino
Mental Health Services and Adult Severe Mental Illness Partial/IOP Mental Health Services. Interns receive supplemental training and experience in other areas of interest via the inclusion of minor rotations.

**Child Therapeutic Day School Track (1 position)**

This track position is within the Child Therapeutic Day School. This unit serves students who have been classified as emotionally disturbed by their school districts and have been judged to require longer-term (at least a year) therapeutically-based out-of-district placement. This position includes assessment, individual and family therapy, group therapy, milieu therapy and case consultation.

**Adolescent School Based Track (1 position)**

This track position is at the South Brunswick School Based Youth Services Program. This program is collaboration between UBHC and the South Brunswick School District. South Brunswick is a large, suburban, multicultural district in Central Jersey. Services provided to children and families include: evaluation; individual, family and group therapy; consultation with on-site psychiatrists; psychoeducational activities and support groups; program development and evaluation; consultation with school staff and community entities around client care issues; participation in school and community advocacy groups.

**Adolescent Forensic Track (1 position)**

This position is located within a residential juvenile justice setting approximately 10 miles of the main campus, in affiliation with University Correctional HealthCare. UCHC is a subcomponent of UBHC, which is contracted to provide mental health and medical services to NJ’s prison population. This position includes assessment, individual and family therapy, group therapy and consultation.

**Adult Latino Mental Health Services Track (1 position)**

This position is located at the community based New Brunswick outpatient office. Set in a culturally diverse small city, with a burgeoning Latino immigrant population the New Brunswick Outpatient Team provides treatment services to individuals who often present with multiple problems, e.g. major mental illness, substance abuse, poverty, immigration issues, etc. The primary focus of this rotation will be provision of assessment, individual, family and group therapy to a largely immigrant and Spanish-speaking population. Again there is the opportunity to work as part of an interdisciplinary team, representing the role of psychologist as well to provide consultation.

**Adult Severe Mental Illness Track (1 position)**

Interns gain experience providing individual, family and group therapy, in a community based intensive outpatient setting as well as within a separate partial hospital setting, to consumers with severe and persistent mental illness. The intern will work as part of an
interdisciplinary team. There is focus on triage and consumer based case disposition. There is also a focus on working within a wellness model.

Minor Rotations:

**Employee Assistance Program**

The Employee Assistance Program gives interns the opportunity to provide short-term treatment, consultation and referral to adults and families seeking service. This program has contracts to provide brief intervention services to the employees of a variety of large corporations throughout the State of New Jersey.

**University Correctional HealthCare (UCHC)**

University Correctional HealthCare is UBHC’s program to provide mental health services to inmates in New Jersey prisons. This service offers a broad range of mental health services for inmates incarcerated within the 14 Department of Corrections facilities. Interns may elect to spend a half-day to one day per week seeing incarcerated patients. They will also help conduct psychological evaluations for inmate classification, provide crisis intervention and participate on a treatment team. There are many highly experienced forensic psychologists who will provide close supervision to assist interns in developing assessment and treatment competencies in forensic assessment and health delivery.

**Juvenile Sex Offender Program**

Interns can work with adolescent boys adjudicated by the court for sexual offending behavior. Treatment includes group, individual and family therapy as well as the potential to conduct psychosexual evaluations. The intern will also interface with the Department of Probation on a routine basis.

**Acute Psychiatric Services**

Interns can work with a multidisciplinary team, providing both on and off-site emergency assessment to adults who present in crisis. Services include assessment, case disposition and referral to higher levels of care
Comprehensive Outpatient Psychiatric Services on Aging (COPSA)

Interns can work with geriatric patients providing neuropsychological assessment through the dementia diagnostic program as well as conduct milieu therapy within the Dementia Day program.

Early Intervention Support Services

Interns can work within a grant funded intensive outpatient program specifically designed to keep clients from requiring more intensive/inpatient services. Interns would work with an interdisciplinary team within a brief intensive therapeutic model.

Smoking Cessation Program

Interns can work as part of a team providing individual manualized treatment for smoking cessation to a broad range clinical population

Through our affiliation with Robert Wood Johnson Medical School, interns can also participate in ongoing NIMH-funded studies assessing the efficacy of various interventions with different medically based populations. These studies are being run by licensed psychologists on the faculty of Robert Wood Johnson Medical School. Specific training opportunities offered include:

- Working with Paul Lehrer, PhD in ongoing clinical research into the cross-cultural utilization and provision of biofeedback.
- Working with Roseanne Dobkin, Ph.D in her research involving provision of manualized treatment for depression in individuals with Parkinson’s Disease

Interns spend approximately three days per week in their primary rotation site within their track area of specialization. Additionally they select a secondary placement in which to receive clinical experience and training and/or research experience and training totaling 5-8 additional hours per week. Whereas interest, experience and career focus determine the intern’s primary placement, other rotations are selected in consultation with the Internship Director to allow for experiences which may represent a more focused or divergent interest. The rotations are chosen carefully with the Internship Director to optimize the intern’s ability to develop the required competencies for completion of the internship.
Didactic Training

There are 3 weekly scheduled seminars which account for the final day per week.

The General Psychology seminar focuses on:
- General empirically validated treatments such as Motivational Interviewing; CBT; DBT; Brief Psychodynamic Therapy; ACT; Stress Management
- Assessment and treatment of particular diagnostic groups such as autism spectrum disorders, ADHD, OCD, attachment disorders, CBT with PTSD, Cognitive remediation with Schizophrenics
- Risk Assessment
- Psychopharmacology
- Presentation of research protocols and results of in-house studies such as Tobacco dependence, CBT with Parkinson’s patients, Positive psychology with rheumatology patients
- Ethics
- Case Conferences

The Assessment Seminar focuses on:
- Overviews of neuropsych, intelligence, personality testing with adults, adolescents, children and geriatric patients.
- Training and discussion of specific instruments such as Wechsler scales; MMPI, PAI, Projective tests.
- Behavioral assessment
- Forensic assessment
- Assessment of sexual history
- Case presentation of integrated batteries

The Special Topics in Psychology Seminar focuses on:
- Culture and Diversity
- Professional development such as Psychology in the Schools, forensic psychology, educational consultation, licensure and board certification, effective lecturing skills, psychology in medical settings
- Quality Improvement
- Supervision
- Consultation

In addition to the didactic trainings, interns are required by UBHC to complete a series of mandatory live and on-line trainings that are required of all behavioral healthcare clinicians. Information on these required trainings is reviewed with interns at orientation and completed during the orientation period. Completion of these trainings by interns is monitored by
UBHC. In addition supervisory staff are given leave time to attend professional conferences, meetings and trainings. Both UBHC and RWJMS provide a broad range of optional training presentations, conferences and seminars that supervisors and interns are encouraged to attend. These include Grand Rounds which occur twice monthly. In addition interns are able to attend a range trainings offered by UBHC and our affiliated Family and Multicultural Institute.

OVERVIEW OF THE QI/RESEARCH PROJECT

As an additional application of psychological principles to clinical settings/services, the interns will be given a Quality Improvement task to work on, which has either been identified by the previous intern class or by the Training Committee. They will assess and define the presenting issue, develop measures to use pre and post, develop interventions or modifications, and implement them. They will then write it up and do a poster presentation at the annual UBHC QI Fair. They will work with the Director of Quality Improvement for this process.

In addition, interns can participate in QI projects which are in process at the site of their major rotation.

SUPERVISION

Supervision is a core component of the internship program that provides interns with guidance and models for professional conduct and activities. Supervision is provided by NJ Licensed Psychologists who vary in their theoretical orientations and styles. Supervisors serve as professional role models. As such they understand and embrace the specific goals, objectives and competencies defined in the program’s training model. All of them work closely with the Internship Director, through the Supervisor Committee, to plan, implement, monitor and evaluate the progress of the interns in attaining the required competencies of the Internship Training Program. Supervisors provide ongoing formative feedback as well as summative feedback every four months. This feedback is synthesized by the Internship Director to formulate a mid-year and end of year letter to be sent to the intern’s Director of Graduate Studies. Interns will receive a minimum of 200 hours of direct supervision over the internship year, of which at least 100 hours will be individual.

1. Individual Supervision

Each intern receives a minimum of 2-3 hours of individual supervision weekly from their primary supervisors, who are licensed psychologists (one hour minimum with each supervisor). These primary supervisors maintain full responsibility for each intern’s work.
2. **Group Supervision**

Interns receive group supervision in the Assessment Seminar and may also receive group supervision on their rotations.

3. **Seminar Presentations**

Interns also receive group supervision, over the course of the year, in seminar based case presentations involving members of the faculty. These presentations are drawn from their own client cases and focus on issues of assessment, treatment planning, intervention, cultural competence and ethics.

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**Psychological Assessment**

Assessment is an integral part of the internship and all interns must complete a minimum of 5 testing assessments and integrated reports. In the year-long assessment seminar, interns will receive one hour per week of training in psychological assessments. Referrals for psychological assessment are accepted from UBHC clinical staff. Upon receipt of a testing case, the intern will be paired with a testing supervisor and arrange a supervision schedule. Assessment supervisors evaluate the interns using the intern assessment form when the testing is completed. Each intern will be supervised in the following clinical activities of the assessment process:

- Review of medical records (and school records, if applicable)
- Clarification of testing question(s)
- Clinical interviewing with clients and family members
- Test battery selection
- Administration and scoring of psychological and neuropsychological tests
- Interpretation of test results
- Analysis of client behavior during the clinical interview and testing sessions
- Writing comprehensive reports that integrate medical records (and school records, if applicable), clinical history, behavioral observations during testing, psychological and/or neuropsychological test results, and include recommendations for treatment and/or additional evaluation
- Consultation with client, client’s family members, referring physicians and other healthcare providers to communicate evaluation findings and recommendations.
CULTURAL COMPETENCY AND DIVERSITY

Throughout its history, the psychology internship program has been committed to recruiting and maintaining a diverse professional staff. Likewise we have been committed to training diverse classes of interns who will be prepared to provide mental health services as well as conduct research, to augment the professional capacity of psychology to address the needs of the increasingly diverse populations of both New Jersey and this country.

UBHC and the RWJMS Department of Psychiatry serve a large and varied community so our interns are exposed to a population that is diverse in terms of ethnicity, religion, culture, sexual orientation, age, socioeconomic status, medical status and psychiatric status. The surrounding community is amongst the most diverse and multicultural in the nation. We serve large Latino, African-American, Asian and Middle Eastern communities. Throughout the Medical School and UBHC, respect for cultural and individual difference is not only expected, but it is a living reality.

Rutgers Biomedical and Health Sciences has one of the most diverse student bodies in the nation. It is ranked 2nd in the number of Asians receiving medical degrees, 3rd in number of African-Americans, 7th in number of Hispanics, according to Diverse Issues In Higher Education (July 10, 2008). It is ranked second in total minorities receiving their first professional degree in medicine. 49% of RBHS students are of minority status. Likewise, 26.6% of faculty are of minority status and 60% of other staff members are minorities.

Within the internship program itself, 27% of the supervisory staff are of minority status. Over the past 7 years, 69% of interns have been of minority status. We actively embrace and recruit for diversity.

The leadership and staff of UBHC and RWJMS are devoted to the importance of incorporating understanding of cultural concepts into mental healthcare. The interns are exposed to a broad range of ethnicity, religion, culture and sexual orientation within their caseloads. The internship has developed a specific track to work with immigrant Latino populations. The intersection of culture and diversity with assessment and treatment issues is a clear focus of the internship. Cultural issues are routinely addressed in supervision, as well as in the internship’s formal didactic seminars. The Behavioral Research and Training Institute within UBHC, provides or sponsors many conferences and workshops devoted to issues of diversity, which interns are encouraged to attend. In addition interns are able to take trainings offered through our affiliated Family and Multicultural Institute. Consultation regarding cultural issues is strongly encouraged; our staff members are of diverse background and rich in both experiential and learned cultural competency. In addition, written resource materials regarding diversity are available to the interns.
EVALUATION OF INTERN

As discussed earlier, our Competency Based Intern Evaluation form is the cornerstone of intern evaluation. Interns self-assess with this form during orientation. Their self-assessments are discussed initially with their supervisors and become a prominent part of ongoing supervision process. Supervisors give ongoing formative feedback. The interns are evaluated by each supervisor at 4 months, 8 months and end-of-year, utilizing the intern evaluation form. This serves as the basis for summative feedback which is provided at the same time points. The evaluations are forwarded to the Intern Director, who also meets at these points with each intern to discuss their progress. The evaluation scores are aggregated and discussed with the Training Committee. If there is a need for a remediation plan this is formalized and discussed with the primary supervisors. Interns who receive ratings below 3 (Intermediate) will be counseled by their Supervisor and Internship Director on ways to improve their level of competency in those areas. When there are areas of concern regarding an intern’s performance, the supervisor will indicate these concerns both verbally and in writing. If the corrective action is not effective, the intern’s performance will be reviewed by the Training Committee and Internship Director in consultation with the intern to determine if the intern’s performance meets the minimum requirements for retention in the program (see Due Process and Grievance Procedures).

All feedback is synthesized by the Internship Director at mid-year and at year’s end to provide a letter to the intern’s Director of Graduate Studies. As stated earlier, 95% of competencies must be rated at least at a three (intermediate skill) level, by the end of the internship year.

At the end of the internship year, the Final case Conference presentation is rated by the participating psychologists and provides ancillary feedback regarding the intern’s global skill level.

Conversely, the interns are also asked to rate their supervisors using a supervisor rating form, as well to rate the program using a program rating form. This occurs three times per year, at the end of each four month cycle. More informal feedback from the interns regarding the program is solicited continuously throughout the year.

PROFESSIONAL BEHAVIOR

Interns are expected to behave professionally and ethically. Responsibility and punctuality in staff, client and community interactions are expected. Administrative and clinical documents are to be completed in a timely and accurate manner. UBHC guidelines, policies and procedures are to be followed, and interns are required to attend mandatory orientation and training that is provided to all UBHC staff on a yearly basis regarding safety, infection control, corporate compliance, etc. Interns understand that they must complete all required pre-employment physicals through our Environmental & Occupational Health Sciences Institute at no cost to the intern. Interns use the title of “Psychology Intern” on all clinical
records, letters and other documents. Interns need to inform all clients that they are a trainee under supervision. They must procure signed consent from their clients as well as document the disclosure conversation with the client.

Interns are expected to contact the Director of Training and any other relevant supervisor/rotation in the case of absence. Absences may include: illness, vacation time or personal emergency. Interns are eligible for 10 such days off per year. Interns are responsible for contacting and rescheduling their own patients/clients and to reschedule any missed appointment due to an unexpected absence. Time off requests must be cleared through the Director of Training using a request for leave form. Subsequently, interns are expected to notify all of their supervisors of their vacation time.

Interns (as are staff) are expected to contact their patients when they are unexpectedly absent in order reschedule appointments.

All interns are required to attend an Orientation Training during the first two weeks of the internship. This training reviews the policies and procedures for all administrative requires of Rutgers and UBHC. The policies and procedures may be found at the following web addresses:

Institutional policies pertaining to Rutgers-Robert Wood Johnson Medical School can be found on the website, [www.rutgers.edu](http://www.rutgers.edu).

Institutional policies pertaining to University Behavioral Health Care (UBHC) can be found on the website, [www.ubhcweb/ubhcweb_internal/index.htm](http://www.ubhcweb/ubhcweb_internal/index.htm).

Interns also receive training at a one-day training on the UBHC electronic medical record and HIPPA requirements. Additionally, there are a number of required online training offerings.

**UBHC/RWJMS INTERNSHIP DUE PROCESS & GRIEVANCE PROCEDURES**

The training program follows due process guidelines to ensure that decisions about interns are not arbitrary or personally based. The program uses the same procedures to evaluate all trainees, and it has appeal procedures that permit any intern to challenge program decisions. The due process guidelines include the following.

1. All interns receive a written statement of program expectations for professional functioning.
2. Evaluation procedures are clearly stipulated, including when and how evaluations will be conducted.
3. The procedures and actions for making decisions about problematic performance or conduct are outlined in written statements given to all interns.
4. Graduate programs are informed about difficulties with interns.

5. Remediation plans are instituted for identified inadequacies, and they include time frames for remediation and specify consequences for failure to rectify the inadequacies.

6. All interns receive a written description of procedures they may use to appeal the program’s actions, and procedures they may use to file grievances.

7. Interns are given sufficient time to respond to any action taken by the program.

8. Decisions or recommendations regarding the intern’s performance or conduct are based on input from multiple professional sources.

9. Program actions and their rationale are documented in writing to all relevant parties.

**DEFINITION OF PROBLEMATIC PERFORMANCE AND/OR CONDUCT**

*Problem behaviors* are said to be present when supervisors perceive that a trainee's behaviors, attitudes, or characteristics are disrupting the quality of his or her clinical performance and/or movement toward competencies; his or her relationships with peers, supervisors, or other staff; or his or her ability to comply with appropriate standards of professional behavior. It is a matter of professional judgment as to when an intern's problem behaviors are serious enough to fit the definitions of problematic performance or conduct rather than merely being typical problem behaviors often found among trainees.

The program defines *problematic performance* and *problematic conduct* as follows. *Problematic performance and/or problematic conduct* are present when there is interference in professional functioning that renders the intern: unable and/or unwilling to acquire and integrate professional standards into his/her repertoire of professional behavior; unable to acquire professional skills that reach an acceptable level of competency; or unable to control personal stress that leads to dysfunctional emotional reactions or behaviors that disrupt professional functioning. More specifically, problem behaviors are identified as *problematic performance* and/or *problematic conduct* 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 that can be rectified by academic or didactic training.

3. The quality of services delivered by the intern is significantly 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 trainee’s behavior does not change as a function of feedback, remediation efforts, and/or time.

**PROCEDURES FOR RESPONDING TO PROBLEMATIC PERFORMANCE AND/OR PROBLEMATIC CONDUCT**

The program has procedures to guide its response to interns with problematic performance or problematic conduct. When supervisors' evaluations indicate that an intern's skills, professionalism, or personal functioning are inadequate for an intern in training, the Training Committee, with input from other relevant supervisory staff, initiates certain procedures. First, the negative evaluations will be reviewed and a determination made as to what action needs to be taken to address the problems. Second, the intern will be notified in writing that a review is occurring and that the Training Committee is ready to receive any information or statement that the intern wishes to provide with reference to the identified problems. Third, after reviewing all available information, the Training Committee may adopt one or more of the following steps, or take other appropriate action.

1. The committee may elect to take no further action.

2. The committee may issue an *Acknowledgement Notice* that formally states the following:
   a. The committee is aware of and concerned about the negative evaluation.
   b. The evaluation has been brought to the intern's attention and the committee or other supervisors will work with the intern to rectify the problem within a specified time frame.
   c. The behaviors associated with the negative evaluation are not significant enough to warrant more serious action at the time.

3. Alternatively, the committee may issue a *Probation Notice*, which specifies that the committee, through the supervisors and Internship Director, will actively and systematically monitor for a specific length of time, the degree to which the intern addresses, changes, and/or otherwise improves the problem behaviors. The *Probation Notice* is a written statement to the intern that includes the following items:
   a. A description of the problematic performance or conduct.
   b. Specific recommendations for rectifying the problems.
   c. A time frame for the probation during which the problem is expected to be ameliorated.
   d. Procedures to assess whether the problem has been appropriately rectified.

If the Training Committee deems that remedial action is required, the identified problems in performance or conduct must be systematically addressed. Possible remedial steps include (but are not limited to) the following:

1. Review and restructuring of training plan
2. Increased supervision, either with the same or other supervisors.

3. Change in the format, emphasis, and/or focus of supervision.

4. A recommendation that personal therapy or Employee Assistance Services be undertaken with a clear statement about the manner in which such contacts will be used in the intern evaluation process.

5. Recommendation of a leave of absence where indicated.

Following the delivery of an Acknowledgment Notice or Probation Notice, the Internship Director will meet with the intern to review the required remedial steps. The intern may elect to accept the conditions or may challenge the committee's actions as outlined below. In either case, the Internship Director will inform the intern's sponsoring graduate program, and indicate the nature of the inadequacy and the steps taken by the Training Committee. The intern shall receive a copy of the letter to the sponsoring graduate program.

Once the Training Committee has issued an Acknowledgement Notice, the problem's status will be reviewed within three months time, or the next formal evaluation, whichever comes first. In the case of a Probation Notice, the problem's status will be reviewed within the time frame set by the notice.

FAILURE TO CORRECT PROBLEMS

When a combination of interventions does not rectify the problematic performance or problematic conduct within a reasonable period of time, or when the trainee seems unable or unwilling to alter his or her behavior, the training program may need to take more formal action. If an intern on probation has not improved sufficiently to rectify the problems under the conditions stipulated by the Probation Notice, the Training Committee will conduct a formal review and then inform the intern in writing that the issues have not been adequately addressed in the probationary period. The committee may then elect to take any of the following steps, or other appropriate action.

1. It may continue the probation for a specified time period.

2. It may suspend the intern with or without pay whereby the intern is not allowed to continue engaging in certain professional activities until there is evidence that the problem behaviors in question have been rectified.

3. The Internship Director may request a review by outside, non-supervising psychologists if there is a question regarding the intern’s successful completion of the internship.

4. It may inform the intern, the intern's sponsoring graduate program, the Executive Director of the Behavioral Research and Training Institute (BRTI) of University Behavioral HealthCare and President & Chief Executive Officer of University
Behavioral HealthCare that the intern will not successfully complete the internship if his/her behavior does not change. If by the end of the training year, the intern has not successfully completed the training requirements, the Training Committee may give the intern only limited certification or no certification at all. The Committee may specify those settings in which the intern can or cannot function adequately. The intern and the intern's home department will be informed that the intern has not successfully completed the internship.

5. It may inform the intern that the Committee is recommending to the Executive Director of the BRTI of University Behavioral HealthCare and the President & Chief Executive Officer of University Behavioral HealthCare that the intern be terminated immediately from the internship program, and with the Executive Director of the BRTI and President's approval, terminate the intern.

All the above steps will be appropriately documented and implemented in ways that are consistent with due process procedures, including opportunities for interns to initiate grievance proceedings to challenge Training Committee decisions. The intern may still engage in a challenge of the Training Committee’s decision even if they have been terminated.

INTERN CHALLENGE AND GRIEVANCE PROCEDURES

Interns who receive an Acknowledgment Notice or Probation Notice, or who otherwise disagree with any Training Committee decision regarding their status in the program, are entitled to challenge the Committee's actions by initiating a grievance procedure. This is done independently of the Training Committee’s actions as described in the Failure to Correct Problems section above.

If the recommendation is made that the intern be terminated, it is at the discretion of the training committee whether the intern would be terminated immediately or after a period of suspension. An appeals process could take place either during the suspension or following termination. Within 5 working days of receipt the Training Committee's notice or other decision, the intern must inform the Internship Director in writing that he or she is challenging the Committee's action. The intern then has 5 additional days to provide the Internship Director with information as to why the intern believes the Training Committee's action is unwarranted. Failure to provide such information will constitute a withdrawal of the challenge. Following receipt of the intern's challenge, the following actions will be taken.

1. The Internship Director will convene a Review Panel consisting of two staff members selected by the Director and two staff members selected by the intern. The intern retains the right to hear all facts and the opportunity to dispute or explain his or her behavior.

2. The Internship Director will conduct and chair a review hearing in which the intern's challenge is heard and the evidence presented. The Review Panel's decisions will be made by majority vote. Within 5 days of completion of the review hearing, the Review Panel will prepare a report on its decisions and recommendations and will inform the intern of its decisions. The Review Panel will then submit its report to the BRTI Executive Director of University Behavioral HealthCare and the President & Chief Executive Officer of University Behavioral HealthCare.
3. Once the Review Panel has informed the intern and submitted its report, the intern has 5 working days within which to seek a further review of his or her grievance by submitting a written request to the BRTI Executive Director of University Behavioral HealthCare and the President & Chief Executive Officer of University Behavioral HealthCare. The intern's request must contain brief explanations of the grievance and of the desired settlement he or she is seeking, and it must also specify which policies, rules, or regulations have been violated, misinterpreted, or misapplied.

4. The BRTI Executive Director of University Behavioral HealthCare and the President & Chief Executive Officer of University Behavioral HealthCare will then conduct a review of all documents submitted and render a written decision. They will render their decision within 5 working days of receipt of the Review Panel's report, and within 5 working days of receipt of an intern's request for further review if such request was submitted. The BRTI Executive Director and President may either accept the Review Panel's action, reject the Review Panel's action and provide an alternative, or refer the matter back to the Review Panel for further deliberation. The panel will report back to the BRTI Executive Director and President within 5 working days of the request for further deliberation. The BRTI Executive Director and President will then make a final decision regarding actions to be taken.

6. Once a final and binding decision has been made, the intern, sponsoring graduate program and other appropriate individuals will be informed in writing of the action taken.

**STAFF ALLEGATION OF INTERN VIOLATION OF STANDARDS**

Any staff member of the UBHC, RWJMS, or other RBHS unit may file a written complaint against an intern for the following reasons: (a) unethical or legal violations of professional standards or laws; (b) failures to satisfy professional obligations and thereby violate the rights, privileges, or responsibilities of others.

1. The staff member should first report the issue to the Internship Director.

2. The Internship Director will review the complaint with other members of the Training Committee and determine if there is reason to go further or whether the behavior in question is being rectified.

3. If the Internship Director and other Training Committee members determine that the alleged behavior cited in the complaint, if proven, would not constitute a serious violation, the Training Director shall inform the staff member who may be allowed to renew the complaint if additional information is provided.

4. When the Internship Director and other Training Committee members decide that there is probable cause for deliberation by a Review Panel, the Internship Director shall notify the staff member and request permission to inform the intern. The staff member shall have 5 days to respond to the request and shall be informed that failure to grant permission may preclude further action. If no response is received within 5 days, or
permission to inform the intern is denied, the Internship Director and the other Training Committee members shall decide whether to proceed with the matter.

5. If the intern is informed of the complaint, the Training Director and Training Committee make a recommendation as outlined in the “Procedures for Responding to Problematic Performance and/or Problematic Conduct”. The intern has the opportunity to follow full Challenge and Grievance Procedures as previously outlined. However, the Review Panel would include 2 internship staff selected by the Complainant and 2 internship staff selected by the intern. The Review Panel will respond as previously outlined.

INTERN COMPLAINT OR GRIEVANCE ABOUT SUPERVISOR, STAFF MEMBER, TRAINEE, OR THE TRAINING PROGRAM

Interns are employees of Rutgers University, and, as such, are entitled to the avenues open to all employees concerning problems that may come up during their internship year. In general, employees are encouraged to discuss concerns, complaints, and grievances with their immediate supervisors, and to take those concerns up the supervisory chain of command if the situation is unresolved after discussion with the immediate supervisor.

In the case of the internship program, interns may individually, or as a group, use the following supervisory chain of command that exists for interns regarding their experience as interns:

1. Direct supervisor for the specific clinical rotation in which the student is located.
2. Internship Director.
3. BRTI Executive Director.
4. CEO and President of UBHC.

In addition, interns may register complaints or concerns about issues in a particular service in UBHC with the following individuals:

1. Clinician Supervisor of the unit.
2. Clinician Administrator of the unit.
3. Vice President (UBHC) of the level of service involved.
4. Executive Director of Behavioral Research and Training.
5. CEO and President of UBHC.

If an intern has a complaint about issues on a rotation in the Department of Psychiatry the intern may register concerns with the following individuals:

1. Supervisor or Administrator of the unit
2. Vice Chair of the Department of Psychiatry for Clinical Services
3. Chair of the Department of Psychiatry
ACCREDITATION STATUS

The Rutgers University Behavioral Health Care Psychology Internship is accredited by the Commission on Accreditation of the American Psychological Association. Our last site visit was in December 2010. We are fully accredited until 2017.

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

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE • Washington, DC • 20002
Phone: (202)-336-5979 / E-mail: apaaccred@apa.org
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