

Southern Utah University
Counseling & Psychological Services

Internship Manual

2025-2026

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Training Committee Members

Committee Chair:	Kristina Johnson, PhD
Committee Members:	Andrea Donovan, LCSW
	Blaine Edwards, CMHC
	Charissa Novasel, PsyD
	Curtis Hill, PhD
	DeNean Petersen, LCSW
	Lesli Allen, PhD
	Rachel Fraser, PhD
	Magnum Morgan, LMFT
	Merrill Jones, PhD

Internship Clinical Supervisors

Curtis Hill, PhD	Licensed Psychologist & Primary Supervisor
Blaine Edwards, CMHC	Licensed CMHC & Group Supervisor
Lesli Allen, PhD	Licensed Psychologist & Primary Supervisor
Kristina Johnson, PhD	Licensed Psychologist & Primary Supervisor
Merrill Jones, PhD	Licensed Psychologist & Primary Supervisor
Rachel Fraser, PhD	Psychologist & Assessment Supervisor

Internship Program Overview

Doctoral psychology Interns are an integral part of Counseling & Psychological Services (CAPS) at Southern Utah University. Interns are encouraged to actively participate in various aspects of CAPS' functioning and to assume a major role in the delivery of services. CAPS is committed to maintaining an Internship Program that facilitates learning and professional development for Interns. Our staff places a high premium on creating an environment that is professionally stimulating, open to change, and sufficiently flexible to accommodate individual training needs. Through the Internship Program, CAPS supports the mission of Southern Utah University to "engage students in a personalized and rigorous experiential education."

Philosophy Of Training

The Internship Program at CAPS employs a **developmental-mentorship-practitioner** training model. The guiding principle is that learning is a **developmental** process that is dependent on support, challenge, feedback, and role modeling. The training model is supported by the following principles that are infused into all aspects of the training curriculum:

1. Developmental perspective on all training activities
2. A sequential learning environment that encourages professional growth and development
3. Emphasis on mentoring, role-modeling, and supervision
4. A learning environment that is collaborative and collegial
5. Focus on clinical service delivery within a university setting
6. Interdependence within the university community
7. Respect for diversity and uniqueness of the individual

The Internship Program's **mentorship** focus emphasizes the relationships that Interns develop with CAPS staff members over the course of the internship year. Staff members serve as role models, resources, and advocates as Interns cultivate and consolidate their identity as professional psychologists. The Internship Program facilitates maximum interaction among Interns and staff members through a variety of clinical, training, supervisory, and outreach/consultation activities. The **practitioner** orientation of the Internship Program emphasizes the importance of applying existing knowledge and skills. Learning is continual, and accumulates through reflective clinical practice during the internship year. Intern development occurs through both didactic and experiential learning activities, which are informed by relevant scholarly literature.

Internship Aims & Competencies

The overarching aim of SUU's doctoral psychology Internship Program is to prepare Interns for competent, generalist entry-level psychological practice. Upon completion of the internship, many SUU Interns pursue positions in university counseling centers. The Internship Program at CAPS also prepares Interns well for a variety of positions, especially in outpatient mental health settings.

The Internship Program focuses on preparation in terms of the following aims. These aims align with the profession-wide competencies as outlined by the Standards of Accreditation in Health Service Psychology (SoA).

Aim 1: Conceptualization & Intervention

Interns will acquire intermediate to advanced skills in case conceptualization and clinical interventions, and demonstrate the use of these skills with clients with a variety of presenting concerns in a variety of modalities (e.g., individual and group therapy, crisis intervention)

Case Conceptualization – the ability to accurately conceptualize the multiple dimensions of the case, incorporating theory and case material.

Intervention – the ability to use interventions designed to alleviate suffering and to promote health and well-being in a variety of modalities.

Scientific Thinking – the ability to use and understand scientific methods in applied practice. The ability to understand the scientific foundations of Evidence Based Practices and their limitations.

Aim 2: Ethical, Professional, & Reflective Practice

Interns will cultivate the attitudes, knowledge, skills, and self-awareness needed for ethical, professional, and reflective practice as a psychologist.

Ethical and Legal Standards – the possession of knowledge of ethical and legal standards of the profession and the ability to engage in ethical decision-making and behavior.

Professionalism - the ability to behave consistently with professional values and ethics, including integrity, responsibility, and concern for the welfare of others. The ability to behave professionally across various settings and to maintain a professional identity as a psychologist.

Reflective Practice – the ability to self-assess competence, to seek out and learn from feedback, to practice self-care, and to commit to one's professional development.

Relationships – the ability to develop and maintain effective relationships with a wide range of clients, colleagues, organizations, and communities.

Interdisciplinary Systems – the possession of knowledge of the shared and distinctive contributions of other professions and the ability to effectively function in interdisciplinary settings.

Aim 3: Individual-Cultural Diversity

Interns will cultivate the awareness, sensitivity, and skill needed to provide competent professional psychological services to individuals, groups, and communities representing various dimensions of diversity, broadly defined. This includes the ability to acquire cultural knowledge of oneself and to understand complex dimensions of culture in others and to use that knowledge effectively in psychological work.

Aim 4: Assessment

Interns will acquire intermediate to advanced skills in a variety of assessment types, with an emphasis on educational assessment (i.e. Learning Disability, ADHD) and outcome assessment.

Assessment & Diagnosis – the ability to assess and diagnose problems, capabilities, and issues. The ability to assess using a variety of methods and to communicate findings clearly and constructively.

Outcome Evaluation - the ability to evaluate the progress of one's own activities and to use this information to improve one's own clinical effectiveness.

Aim 5: Outreach & Consultation

Interns will acquire the knowledge and skill needed to perform consultation and outreach functions in a university setting. This includes the ability to disseminate knowledge in professional psychology using a variety of strategies and methods and to provide expert guidance or professional assistance in response to a client's needs/goals, to a colleague, or within an organization or community.

Aim 6: Supervision

Interns will develop a beginning to intermediate knowledge regarding the provision of clinical supervision, including developing a personal philosophy or model of supervision that is informed by relevant theory and literature. This includes the ability to understand the complexity of the supervisor role and knowledge of the procedures and practices of supervision. Interns will practice their supervisory skills through peer consultation and role play.

Internship Program Elements

Assessment

Interns receive training and supervision in the area of clinical interviewing. All CAPS clients take the Counseling Center Assessment of Psychological Symptoms (CCAPS) at intake and prior to each subsequent session. Interns receive training in outcome assessment and the use of CCAPS data in treatment planning. Interns also receive training in the ongoing assessment of the therapeutic alliance using the Session Rating Scale (SRS). Interns are trained to use the SRS on a weekly basis and to incorporate SRS feedback into treatment planning.

During the internship year, Interns develop skill in the use of assessments related to a university counseling center population. Interns are expected to complete 4 total assessments over the course of the year. Out of the 4 required assessments, 2-3 must be Educational Assessments (assess for the presence of Learning Disabilities and/or ADHD). *One of these must be completed (including feedback given to the client) during Fall Semester so that the Intern's skills can be evaluated on the Midyear Comprehensive Evaluation of Intern.* The other 1-2 assessments should be Psychological Assessments in an area of the Intern's choice. Possible tests include personality inventories (MMPI-2, PAI), trauma inventories (TSI-2, DES) eating disorder assessments (EDI-III & Structured Interview), substance use assessments (YAAPST, SASSI-3, ASI) and inventories of career interests and skills (SDS, SII-II).

At the beginning of internship, Interns participate in an Assessment Intensive, when each Intern's abilities to administer, score, and interpret the WAIS-IV and Woodcock-Johnson-IV are formally assessed. Ideally, Interns demonstrate competency in administration, scoring, and interpretation by the end of the Assessment Intensive. If an intern does not achieve this, the ultimate deadline to achieve competency is before mid-October Informal Evaluations. Interns who have not achieved competency by mid-October will likely require a remediation plan and it will be difficult for them to complete their first evaluation by the end of Fall Semester. Thus, Interns are encouraged to take the competency process very seriously, devoting time to practice and collaborating with supervisors to improve their skills. Throughout the internship year, Interns are recommended to block a continuous 3-4 hours/week for assessment work (honing skills, testing, or report-writing), which support them in meeting this goal and the goal of completing assessment reports in a timely manner.

Interns also participate in Group Supervision of Assessment during Fall and Spring Semesters, where they receive supervision of their assessment work as well as training in the use of various psychological tests. Interns are expected to bring raw testing data and in-progress reports to these meetings and to collaborate with the Supervisor(s) who lead Group Supervision of Assessment and bear the responsibility of signing off on all assessment reports. See the syllabus for Group Supervision of Assessment and Titanium Schedule for details.

Couples Counseling

When couples request counseling at SUU CAPS, Interns are given priority to work alongside them. Intern(s) who are currently participating in an elective rotation in Couples Counseling will be given the opportunity first, followed by the other Intern(s).

Crisis Services

At the beginning of each semester, each CAPS clinical staff member is assigned to be the “Counselor on Duty” (COD) for a certain number of days (divided evenly among staff). The COD is responsible for being at CAPS from 8am-5pm. If they need to leave the office, they will arrange for another staff member to cover COD during their absence. Based on demand for services, the Clinical Director will instruct staff on how much time should be blocked off for crisis appointments on COD days (typically 1-3 hours). Placeholders must be entered in Titanium according to the Clinical Director’s instruction and should not be covered with other appointments. The front desk does their best to schedule crisis appointments during the placeholders that the COD schedules, but crises are unpredictable by nature and so the COD’s schedule must be flexible. It is wise to assume that anything else scheduled on a COD day may need to be moved (e.g., if a crisis appointment runs long, a student needs to be hospitalized, a crisis needs to be seen immediately, etc.). Therefore, try to schedule low-acuity clients, supervision, or non-essential meetings on COD days. Also allow an extra hour for Notes & Reports at the end of the day, as crisis documentation is time-consuming.

Interns gain crisis service experience through a series of steps:

1. Observing at least two crisis appointments conducted by a senior staff member.
2. Providing a minimum of two crisis appointments under the observation of an appropriately credentialed and experienced senior staff member.
3. The Training Committee consults to determine whether the Intern is ready to independently serve as the COD. An Intern may benefit from the opportunity to provide additional observed crisis appointments before providing these services independently.
4. Serving as the COD. When providing independent COD services, Interns are still paired with an appropriately credentialed and experienced senior staff member who is available for consultation. This senior staff member will schedule their day in a flexible manner and will expect that at any point, they may be called out of an appointment to support the Intern COD or any other trainee who needs assistance.

Elective Rotations

At the beginning of each semester, Interns, in conjunction with their supervisor and the Director of Training, develop a particular area where they would like to gain more training and experience. Interns are encouraged to develop goals for this area, and to seek out training opportunities during the semester. Examples of elective rotations include group therapy, assessment, career counseling, or collaborating with a specific office on campus. The Director of Training will provide a list of available Elective Rotations during Orientation. Interns are also invited to create their own elective rotation in consultation with the Director of Training. Elective rotations are supervised by the Intern’s primary or secondary supervisor, dependent on expertise. Thus, the elective rotation you choose can determine which supervisors you work with each semester.

Group Counseling

Interns co-lead or process-observe one general process group each semester during Fall and Spring. Interns may co-lead additional group(s) as part of an elective rotation in group therapy. Groups are co-led with a senior staff member during Fall and Spring Semesters. If the staff co-

leader anticipates being absent for a group session, Interns often have enough advanced training to lead the group alone. Prior to an Intern running a group alone, the staff member co-leader consults with the Intern and the Intern's primary supervisor.

During Summer Semester, Interns may request to co-lead a general process group together. The Group Coordinator and Director of Training consider this request in the context of available summer groups, as well as Intern readiness to co-lead without a senior staff member. Interns cannot co-lead ongoing process groups together, as these extend past the end of internship and it is important that the leadership not be replaced mid-group. Interns may be allowed to co-lead a psychoeducational group together earlier in the year, dependent on readiness as assessed by supervisors and Group Coordinator.

Individual Counseling

Interns develop a caseload of clients whose presenting concerns and demographics fit their individual training needs and experience. By working with diverse individuals, Interns increase their proficiency in the competency of individual-cultural diversity. Interns are given priority when selecting clients, in order to facilitate maintenance of a caseload that allows for both depth and breadth of experience. Please coordinate with the Clinical Director to ensure that your caseload meets your training goals. Interns should have a maximum of 25-30 clients on their caseloads.

Outreach

Interns lead outreach presentations based on their training needs and experience. The Outreach Coordinator presents opportunities to participate in outreach throughout the internship year. Common topics include: stress management, study skills, coping with depression/anxiety. Interns independently develop at least one outreach presentation during the internship. A copy of this presentation is kept in the Intern's portfolio. Interns are required to conduct two outreach presentations during Fall Semester and two outreach presentations during Spring Semester (tabling or quick introductions to CAPS services do not count). Interns may do additional outreach presentations as part of an elective rotation. In order for your outreach presentations to be evaluated, a Training Committee member should be invited to attend and give verbal feedback to you and your supervisors. **Please arrange for your first presentation and one other presentation to be attended by a Training Committee member (alternatively, they could co-present with you).**

Research

Interns may use up to two hours each week to work on their dissertation, research, or applications for post-docs or jobs. This time may be "banked;" for example, an Intern may elect to take one day during a month rather than two hours each week. Banked time may also be used to attend professional conferences. Interns are permitted to schedule this time on the weekends or evenings, combining it with their after-hours professional development hours (see section titled Professional Development on page 19). Interns are required to present a poster or lead a breakout session at the Utah University Counseling Center Conference. All CAPS staff attend this conference and this is an opportunity for Interns to engage in presenting scholarly research in a conference setting.

Supervision

Interns work with supervisors who oversee their clinical caseloads, groups, assessment, and elective rotations. Assigned supervisors provide mentoring and facilitate professional development through support and challenge. Interns are required to work with a minimum of two individual supervisors over the course of the internship year.

Interns need to receive an average of four hours of supervision with a psychologist every week, totaling 200 hours by the end of internship. Half of these hours need to be one-on-one (i.e., Individual Supervision). In order for supervision hours to qualify, the psychologist must have been licensed for a minimum of two years and currently be licensed in Utah (This is designated in Titanium as U2LP [Utah/2-Year Licensed Psychologist]). Interns will also receive supervisory support from other members on staff who partner with psychologists to provide supervision in areas such as group and assessment. Interns receive additional supervision from their group co-leader. Consultation with other staff members is done on an informal and/or as-needed basis.

200 U2LP Supervision hours are acquired through:

1. Weekly Individual Supervision with Primary Supervisor all year (50 hours total)
2. Weekly Individual Supervision with Secondary Supervisor all year (50 hours total)
3. Group Supervision of Assessment during Fall Semester and Spring Semester (50 hours)
4. Group Supervision of Group Therapy all year (25 hours total)
5. Group Supervision of Supervision all year (25 hours total)

Since it is inevitable that the above-mentioned supervision will be canceled some weeks (due to supervisor or Intern vacation, illness, or other unforeseeable circumstances), the following U2LP Supervision is also scheduled to make sure Interns meet the goal of 200 supervision hours. Though these extra hours might seem like a lot, it is strongly advised that Interns not rely on these hours, and reschedule any missed individual supervision to ensure that your goal is met. Also, it is common to consult with supervisors in between scheduled supervision meetings. Make sure that these meetings are entered into Titanium.

1. Some activities during orientation qualify as U2LP Group or Individual Supervision.
2. Case conference on the week an Intern presents counts as U2LP Individual for that Intern only (3 hours total)
3. Monthly 30 min individual Internship Check-Ins with the Director of Training aimed at reviewing the progress the Intern is making regarding hours, internship tasks, and training goals (5.5 hours total)
4. Career Considerations is a group-format U2LP supervision that focuses on topics related to Intern career development (e.g., licensure, postdocs/jobs, interviewing, EPPP, etc.). This occurs monthly during Fall Semester and bimonthly during Spring and Summer Semesters (8 hours total)

Didactic Training

The internship provides at least 2 hours per week of didactic trainings, as required by APPIC.

Activity	Fall Semester	Spring Semester	Summer Semester
Orientation	August 7-22	--	--
Intern Seminar (80 min)	Every other week	Every other week	Every other week
Diversity Seminar (80 min)	Every other week	Every other week	Every other week
Case Conference (50 min)	Every other week	Every other week	Every other week
Professional Development Meeting (50 min)	Every other week	Every other week	--
	2.5+hrs/week	2.5hrs/week	2hrs/week

Orientation

During the first ~3 weeks of internship, Interns are oriented to Counseling & Psychological Services and SUU through a series of trainings, supervision, and activities. By participating in orientation, Interns have opportunities to become acquainted with each other, as well as the staff, and to become acclimated to CAPS prior to beginning their clinical work.

Seminars

Following orientation, internship incorporates a variety of training opportunities, which Interns are expected to attend. Intern Seminar is designed to expose Interns to a variety of topics related to college counseling and generalist mental healthcare. See Intern Seminar Syllabus for more details. Diversity Seminar is attended by Interns during Spring and Fall Semesters and by all clinical staff during Summer in order to facilitate a more diverse dialogue on topics related to social justice and mental healthcare. See Diversity Seminar Syllabus for more details.

Case Conference

Case Conference provides clinical staff the opportunity to consult on cases. Interns are assigned to a consultation group consisting of a multidisciplinary team of 5-6 CAPS staff. Each consultation group decides how to structure their meetings, but formal presentations will be part of the expectation. Interns prepare a formal presentation once each semester (Fall, Spring, Summer). Complete the *Case Conference Presentation* template (Appendix B), and select a brief video clip to show. The written Case Conference Presentation should be no longer than 2 pages. This document should be thoroughly de-identified and submitted to the Director of Training to be included in the Intern portfolio. Intern presentations are evaluated by their consultation group. A copy of the completed evaluations is provided to the Intern and a copy is kept in the Intern's portfolio.

Professional Development Meeting

During Fall and Spring Semesters, clinical staff take turns presenting for Professional Development Meeting on topics which they have expertise or interest in. Interns present once during Fall Semester and once during Spring Semester.

Local or National Conferences

Interns typically have opportunities to attend local conferences (e.g., the Utah University and College Counseling Centers Conference) for professional development and networking. Interns may also choose to attend a conference/training of their choice. A small conference fund is available for Interns to defray some of the cost. Speak with the Director to learn more.

Intern Schedules

Weekly Time Distribution

At the beginning of each semester, Interns collaborate with the Director of Training to complete a *Weekly Time Distribution* (see Appendix A) that outlines their plan for a weekly schedule and articulates goals for the semester. At the conclusion of the semester, Interns complete the “Outcomes” and “Internship Completion Criteria” sections of the *Weekly Time Distribution* form.

Here is an example of what a *Weekly Time Distribution* might look like for an Intern during Fall Semester. Keep in mind that there is an ebb and flow to university counseling center work that requires flexibility, rather than strict adherence to the *Weekly Time Distribution*. For example, an Intern may spend 3 hours on outreach one week followed by two weeks with no outreach.

TYPE OF ACTIVITY	HOURS
Direct (avg 10 hrs/wk to achieve 500 hours by end-of-internship)	
Individual therapy (including intakes)	12.75
General Process Group	1.5
Crisis/Urgent Care Appointments	.5
Assessment Administration	.5
Direct Service Communication	.5
Outreach	.5
Intern Selection Interviews (Spring)	0
Direct Elective Rotation(s): Cross Campus Partnership in Housing	1
Indirect	
Indirect Elective Rotation(s): Prep for Housing Outreach/Support	3
Research (e.g., dissertation)	2
Staff Business Meeting (all year)	1
Notes and Reports (including assessment scoring and interpretation)	5
Prep (for own supervision and clinical work/supe of supe presentations)	3
Exercise (1hr Fall/Spring; up to 2.5hrs Summer with approval from TD)	1
Intern Selection Committee Meetings (Spring)	0
Other: _____	0
Supervision (avg 4 hrs/wk w/U2LP to achieve 200 hours by end-of-internship; 100 individual)	
Individual Supervision of Clinical Work and Elective Rotation(s)	2
Individual Supervision of Internship Progression (.5 monthly all year)	.125
Individual Supervision with Group Co-Leader(s)	.5
Group Supervision of Assessment (1.5 weekly Fall and Spring)	1.5
Group Supervision of Group Psychotherapy (.5 weekly all year)	.5
Group Supervision of Supervision (.5 weekly all year)	.5
Career Considerations (.125 Fall, .05 Spring/Summer)	.125
Training (2+ hrs/wk required)	
Intern Seminar or Diversity Seminar (all year)	1.5
Case Conference (every other week all year)	.5
Professional Development Meeting (every other week Fall/Spring)	.5
Total Hours	40

Administrative Policies & Procedures

Attendance

Internship is a 12-month, 40-hour-per-week commitment. Interns can expect to work 8am-5pm, Monday-Friday with a one-hour lunch break midday. Interns use leave time if they are not working on CAPS-related activities. Travel to/from work occurs on the Intern's personal time (i.e., Interns are expected to be at work at 8am, so travel must occur before then). If an Intern works a half day at CAPS and a half day at home, any travel time between offices occurs on the Intern's lunch break.

Accommodations

CAPS is eager to support Interns to be successful on internship. ADA stipulates that employees must initiate requests for accommodations. Please use the guide and template for a letter found in Appendix F to request accommodations. The following options are available when submitting a request for accommodations:

1. Your written request can be submitted to the Director of Training. The Training Committee will meet to review requests and will collaborate with the Intern to create adjustments so that the Intern can successfully meet all requirements of the internship.
2. Interns also have the option of working with SUU HR to support their accommodation needs. This may be a more time-intensive route, but is a good option if the intern does not want CAPS to know their diagnosis, but does want CAPS to provide accommodations.

Interns are not eligible for FMLA, as SUU requires one year of employment prior to its implementation. When the need for extended leave arises, the Director of Training in partnership with the Training Committee works proactively with the Intern, their academic program, and APPIC to arrange alternatives, including the use of all leave time, unpaid leave, and/or extending internship. Please notify the Director of Training as soon as possible so that we can collaborate on solutions in a timely manner.

Hybrid Work

Research suggests that a hybrid work model has a mixture of costs and benefits for both employees and employers (Ateeq, 2022; Bloom, Han & Liang, 2022; Niebuhr, Borle, Borner-Zobel, and Voelter-Mahlknecht, 2022). Evidence suggests that some employees benefit greatly from a hybrid model, and that the benefits are often most pronounced for individuals who are marginalized by a traditional work schedule (e.g., caregivers, people with chronic illness, individuals who are pregnant or breastfeeding, etc.)(Kinnette & Lin, 2021). Given CAPS' commitment to recruiting and retaining diverse employees, including Interns, CAPS collaborates with each employee to create a schedule that supports their personal wellness and workplace effectiveness.

CAPS employs a hybrid model, utilizing HIPAA Compliant Zoom for all telehealth and remote supervision appointments. Except in the event of quarantine, Interns will spend a minimum of 32 hours per week working in their CAPS office and may be able to spend a maximum of 8 hours per week working from home (dependent on caseload and schedule limitations).

Days and times spent on-site vs. at-home will be arranged in collaboration with the Clinical Director and Director of Training. Interns are expected to attend most seminars and group supervision

meetings in-person. Exceptions can be made for emergency situations (e.g., quarantine), with advance permission from the trainer/supervisor (please give at least 48 hours' notice), or in cases where the trainer/supervisor grants on-going permission for Interns to attend remotely.

Within a hybrid model, it is important to see clients in the format they selected when scheduling the appointment (in-person vs. telehealth). Clinicians should not switch formats except in emergency situations or where client and therapist have collaborated and agree that the change is in the best interest of the client. Titanium should be updated immediately to reflect the appointment (in-person vs. tele-) before the appointment begins. Client preference for in-person vs. tele- should be respected even if this limits an Intern's ability to work from home (e.g., if every client on an Intern's caseload prefers in-person, working from home for 8 hours per week may not be realistic).

In line with current research, CAPS provides the necessary technical equipment (e.g., computers, white noise machines, HIPAA-compliant Zoom account) to support effective work both on-campus and in home offices (Niebuhr et. al., 2022). Training on how to use the equipment is provided during orientation and as-needed throughout the year.

Assurance of confidentiality is a prerequisite for all CAPS employees to work remotely. Interns who wish to work from home must have a confidential space in which to conduct sessions and engage in supervision. All procedures discussed in this manual's Confidentiality section must be followed in order to maintain the right to work from home. Similarly, if ongoing challenges arise (e.g., poor internet connection, failure to join video-chats from a confidential space, distractibility during Zoom calls), the work-from-home arrangement may be reevaluated.

Tele-Supervision

Except in extenuating circumstance (e.g., quarantine), at least two of the four required hours of supervision will be provided in person at CAPS. Group supervision is primarily conducted in-person (Group Supervision of Assessment, Group Supervision of Group Psychotherapy, and Group Supervision of Supervision). Individual supervision may be in-person or remote, a choice that is made between each supervisee/supervisor dyad. An Intern's training needs (as determined by the Training Committee in collaboration with the trainee) will always take precedence over supervisor/supervisee preferences for in-person vs. remote supervision. Thus, if tele-supervision does not seem to be meeting an Intern's training needs, the Training Committee may require in-person supervision, at least for a period of time.

Prior to each semester (Fall, Spring, Summer), Interns have formal opportunities to request work-from-home days and to collaborate with individual supervisors to schedule either in-person or tele-supervision. Interns may also bring this up at any point during a semester should they want to make a change mid-semester. Interns will formally evaluate supervision provision (including its format) at midyear and end-of-year and feedback from these evaluations will inform policy and procedure about tele-supervision.

Supervisors, like Interns, may have hybrid schedules which limit their in-person availability. However, supervisors will never have fully remote relationships with Interns since they are expected to work at CAPS a minimum of 3 days per week and some of that time will be spent with Interns (e.g., weekly staff meetings, group supervision, training seminars, etc.). During times when an individual supervisor is not on-campus, CAPS Interns may seek support a) from an on-campus

supervisor, b) by calling the remote supervisor, and/or c) consulting with the COD, who is required to remain at CAPS for the duration of the work day.

Orientation is conducted in-person, which provides ample opportunity for foundational rapport to develop between supervisors and Interns before choices about tele-supervision are made. Supervisors at CAPS are committed to creating and maintaining rapport with supervisees throughout the internship year. Ruptures in the supervisory relationship may be discovered through either formal or informal feedback and are taken seriously by both supervisors and the Training Committee. Due Process and Grievance procedures, mentioned later in this manual, are to be followed as-needed.

CAPS supervisors who conduct tele-supervision are expected to maintain the same standards that they do in in-person supervision (e.g., consistently viewing tape of sessions, giving their full attention to supervisees). Supervisors are required to engage in continuing education about any activity that they engage in professionally, including the topic of tele-supervision. Current CAPS supervisors have ample training and experience providing tele-supervision, having conducted supervision in this format from March 2020-July 2022 during the COVID-19 pandemic. Any new supervisors who join the team will be provided with training on tele-supervision and opportunities to consult with more experienced peers.

Emergencies (e.g., pandemic) may result in the need to increase tele-supervision and national guidelines for health and safety will take precedence over the above policy.

Vacation, Sick Leave, and Holidays

Please talk with the Director of Training when you need to take time off on a one-time basis (e.g., taking a week of vacation, leaving early one day, etc.). Please talk with both the Director of Training and Clinical Director about recurring needs to take time off (e.g., needing to come in late every Wednesday during Spring Semester). We will collaborate with you to ensure that you use your university leave time in a way that works for you. If applicable, please refer to the Accommodations policy in this manual.

Interns have the following vacation, sick leave, and holidays over the course of the internship year:

Vacation – 15 days (accrued 5 hours per pay period)

Sick Leave – 12 days (accrued 4 hours per pay period)

Holidays – 12 official university holidays

(the holiday schedule is available at <https://www.suu.edu/hr/holidays.html>)

Professional Development – 3 days (24 hours)

Vacation

Interns should use all vacation days during the internship year. Unused vacation may not be “cashed out” at the end of the year. Interns are required to use 5 days of vacation during the last week of internship (July 31- August 6, 2025). **Thursday July 30, 2026 is the last day of attendance for internship.**

Please e-mail vacation requests to the Director of Training for approval, preferably a month or more before the vacation is to be taken. Once approved, Interns are responsible to schedule the vacation time in Titanium and to manage their schedule (e.g. rescheduling supervision, making plans with group co-leaders, and ensuring that client needs are met).

Sick Leave

According to SUU policy, accrued sick leave may be used for personal illness, injury, or incapacity. Up to 8 days of accrued sick leave may be used for the illness, injury, or incapacity of a spouse, dependent children, parent, and parent-in-law. Vacation is used for other absences.

In the event of illness, Interns call or email the front desk for help blocking out the sick leave in Titanium and rescheduling clients. They will need to contact the Director of Training as well. If able, please call or email group co-leaders, supervisors, or other staff with whom the Intern may have been scheduled to work that day. If too ill to do this, please ask the front desk to communicate with everyone.

Professional Development

Interns have three days for personal professional development during the internship year. This time may be used for conference attendance or travel related to dissertation and post-doc/job interviews. Up to two hours per week of research time may also be banked and used for these purposes. Interns inevitably spend time in the evenings and on weekends doing professional reading and/or working on dissertation. Interns can count up to 5 hours of these professional activities (outside of their 40-hour work week) towards their 2,000 hours.

Informal Flex Time

While SUU does not offer formal comp time or flex time, Interns may use informal flex time at CAPS. For example, if you conduct an outreach event from 5-7pm one evening, we encourage you to use two hours of “flex time” the following morning to make up for staying late. It is expected that flex time will be planned ahead of time and that requests will be submitted to the Director of Training for approval. Flex time needs to be used in the same week as the after-hours service.

Exercise

Interns are allowed to schedule two 30-minute sessions of exercise each week in the Fall and Spring semester. They can use more exercise time if they are caught up on all of their clinical work. In the summer they may schedule more exercise time if they are caught up on other internship requirements. Consult with the Director of Training regarding requests for more scheduled exercise.

Lunch

Interns are required to take lunch each day. Interns are expected to take lunch at 11am, 12pm, or 1pm unless special permission is granted by the Director of Training to schedule lunch at a different hour. Please use lunch to engage in non-work-related activities (eat, socialize, close your office door and have some alone time, take a walk, take a nap, do yoga, listen to a podcast or watch a TV episode).

Professionalism

Internship is designed to allow for increased professional autonomy while also providing accessible supervisory support. For some, an internship is the last step before becoming independently licensed as a psychologist. CAPS tries to honor this by creating an environment that has less scaffolding/direction than graduate school, while also clearly communicating what is expected of Interns. Interns are supported to take initiative, apply their knowledge, and assume leadership roles within CAPS and across campus. Interns should never feel “on their own” when it comes to making important decisions, but they should increasingly sense that CAPS staff are “standing in the wings” while the Intern “takes the lead.” Interns develop professionalism by encountering new situations, considering what they think the best course of action is, and then consulting with supervisors to decide on next steps.

CAPS does not enforce a “dress code.” We expect that all staff, including Interns, will dress in a manner that they feel represents themselves and their profession well.

Liability Insurance

Interns are required to maintain student liability insurance throughout the internship year. In some cases, a student’s counseling/clinical psychology program will pay for this. If an Intern has trouble acquiring liability insurance due to financial burden, they should speak with the Director of Training and Director. CAPS staff are happy to consult about their preferred insurance providers. **Please give the Director of Training proof of liability insurance before meeting with your first client at CAPS.**

Documentation

Interns are expected to keep accurate and timely clinical documentation according to the following schedule:

1. Within **24 hours**, complete: Crisis/Urgent Care appointment notes
2. Send a draft of all other notes to your primary supervisor by Friday when you leave (Intake Notes, Progress Notes, Group Notes, Consultation Notes, Termination Summaries)

Please document all communication that you have with a client. Phone calls can be summarized. Most emails can be copy/pasted because we discourage clients from sending sensitive information via email. If the client does write an email that contains more detail than you would typically include in a progress note, please consult with your supervisor.

Use of artificial intelligence (AI) in completing tasks at CAPS is not permitted; this includes using AI to write or revise clinical documentation, transcribe or summarize clinical sessions or other meetings, emails, or for any other purpose. While AI has potential to save effort in creating documentation, it is necessary for trainees to develop the skill of writing clear, concise, appropriate documentation. This will also help to ensure the integrity, confidentiality, and accuracy of documentation as well as the individual judgment and insights of the clinician. CAPS does not hold a Business Associate Agreement with any AI company, and no publicly-available AI product guarantees to protect confidential information.

Closing Client Files

Close client files within **30 days** of the last appointment by completing the following steps in Titanium:

1. Complete the Termination Summary and forward it to your supervisor.
2. If the client is no longer participating in any services at CAPS, complete the Case Closed Note and forward to the Clinical Director. This is done after all other notes have been signed.
3. The Clinical Director will remove your name on the “Client Security” screen. Please do not do this yourself.
4. If the client is no longer participating in any services at CAPS, the Clinical Director will deactivate the client’s file. Please do not do this yourself.

Zoom Appointments

At the beginning of all Zoom Intake Appointments, verify the client’s identity by asking name and date of birth (which you can compare to their Titanium record). In addition, and in all subsequent appointments, ask for the client’s phone number and the physical address where they are located. This is in case of emergency and also to confirm that the client is local. Except in situations pre-approved by the Clinical Director, clients must be local (Cedar City and close vicinity). If a client reports that they are in another town or out-of-state, the appointment must be rescheduled. If, in your clinical judgment, an exception should be made, consult with a supervisor before continuing the Zoom appointment.

Confidentiality

Confidentiality is an ongoing process and a part of the professional identity of a therapist. CAPS expects all staff to think critically at all times about how they can increase measures to protect the confidentiality of those whom they serve. Below are some general guidelines to begin with.

Make It Personal

When in doubt about whether your behavior is confidential, imagine your most embarrassing secret and how you would expect your own therapist to handle that information. Would you want them to email your secret to a supervisor, write it down on a sticky note and leave it on their desk, transport it in their car, keep it in an unlocked filing cabinet, gossip about it with their colleagues over lunch? Also, remember that pieces of client data which may seem benign or common to you, are incredibly private to the client. It is best to assume that all client details are sacred; to be entrusted with them is a great privilege.

Rural De-Identification

Confidentiality requires additional consideration in a rural community like Cedar City. When de-identifying, it will likely be necessary to remove more details and demographics than you would in an urban setting. This requires therapists to think deeply about their clients and how their identities and stories may differentiate them from others in this community. For example, simply listing a client’s demographics as “black” and “lesbian,” which would not compromise the client’s identity in most urban settings, could pose problems in SUU’s dominantly white, heteronormative environment. If you add other details, such as a club that the student leads or that the student has a little brother on

campus, the student's identity will become even easier to guess. Thus, content that might be considered de-identified elsewhere, will be considered identifiable here.

The Two Locks Rule

Confidential information should be behind two locks unless in the physical presence of the therapist. This is a simple rule that can guide professional behavior at all times. For example, when a therapist leaves their office (even just for a quick break), all confidential data should be behind two locks. "Locks" include passwords on documents, the password on your computer, the password on an encrypted flash drive, the lock on your office door, the lock on a bag or filing cabinet. You can choose the combination of locks that work for you in different situations, provided the two locks rule is being followed.

Scheduling

CAPS staff are not permitted to give their personal cell phone number or a Google Voice number to clients. In general, clients should contact the front desk to reschedule. Clients can call (435) 865-8621 or stop by the front desk. While it is permissible for a therapist to email a client about scheduling, this is rarely productive, as our schedules change so quickly that by the time a client emails back, the offered slot is often taken. It is much simpler for clients to contact the front desk for all rescheduling/cancellation needs.

Devices

Interns will be supplied with a PC desktop computer and an Apple laptop. Interns should use these devices for all confidential CAPS-related work. *These devices are meant to remain at CAPS most of the time.* If an Intern is scheduled to work from home, they must take their laptop directly from CAPS to their home (or vice-versa), not making any side trips or errands along the way. CAPS devices are not to be taken on work-related trips without express permission from the Director and the Director of Training. CAPS devices should never be taken on personal vacations.

Confidential information should never be created on or copied to a personal device. It is permissible to use a personal device for certain activities (e.g., joining a Zoom call when you are out-of-town). But do not use that device to record a session, take notes on a client etc..

In general, it is wise to not be logged in to your work email after hours or on weekends. Clients should be informed that you do not maintain 24/7 access to email and that urgent matters should never be sent via email. There are 24/7 resources that clients can access instead.

Video Recording

Interns video record all of their individual therapy and some of their group therapy. CAPS uses Intelligent Video Solutions for most recording purposes. Each intern will have a Roam cart in their office, which can be moved to other locations as-needed (e.g. to record an assessment administration). The group room is equipped with its own Roam cart. Videos will be available to interns and supervisors at all times via the secure online vault and can be logged into using your SUU credentials at <https://capsmeet.suu.edu/login>.

For tele- appointments, recording should be done using HIPAA Compliant Zoom on the Apple laptops provided by SUU CAPS (not on PC desktops or personal devices). Videos should be stored

on an encrypted USB flash drive, never on the Intern's laptop. It is often necessary to record onto the laptop, but the Intern must move the video file to their flash drive and store it in a locked bag, filing cabinet, etc. before the end of the work day.

Passwords

Situations will arise throughout the year that require Interns to password-protect documents before sharing them with their supervisor (e.g., assessment reports that are shared digitally). Passwords should be committed to memory or stored in an encrypted manner (e.g., a password organization program that only the therapist has access to). Passwords should be exchanged verbally or in a manner that can be destroyed immediately. Passwords should never be shared through email. Interns are also encouraged to keep documents de-identified whenever possible.

Flash Drives

Interns will each be assigned two hardware-encrypted USB flash drives. These drives require a password to gain access to the enclosed files, which the Director of Training will share with you. To use the flash drive, insert it into your computer and run the IronKey program for either Mac or PC. After entering the password, a drive will mount titled Kingston. This is where you can place files. The IronKey manual is on the flash drive for reference purposes.

All confidential files should be stored on an encrypted thumb drive and kept in a locked bag or locked filing cabinet. All confidential data (even if it is de-identified) should be shared only in print form or via an encrypted thumb drive.

Locked Bags

Please avoid transporting confidential material outside of CAPS whenever possible. When it is unavoidable, flash drives and other confidential material should only be transported to/from CAPS in a HIPAA-compliant locked bag. It is also recommended that laptops be transported in a locked bag. Interns will receive one large locked bag and two small locked bags.

1. The large bag requires a key, which Interns should keep on their CAPS keyring, separate from the bag. These large bags are used by the Intern to transport confidential material to/from their CAPS office and home office when the need arises. When transporting confidential material, Interns should travel directly from CAPS to their home (or vice-versa), not making any side trips or errands along the way.
2. Interns will receive two small bags with combination locks. These are for storing and transporting USB flash drives. When not in use, flash drives should always be stored in their accompanying bag, in the locked position. Both Intern and supervisor will know the combination to the bag. These bags are easily passed back and forth between supervisors via the folders in the top drawer of the locked filing cabinet.

Online Data Storage and Transmission

SUU CAPS does not have a Business Associate Agreement with Google, therefore Google is not HIPAA compliant. Additionally, IT scans SUU Gmail accounts for the purpose of protecting employees from scams and identity theft, which means we cannot guarantee the confidentiality of anything sent via email. Nothing confidential should ever be written in or stored in Gmail, Google Drive, One Drive, or any other cloud service. The CAPS shared drive is also not confidential. All

online transmission of confidential data is discouraged. If you experience a situation which you believe to be an exception to this rule, consult with your supervisor and the Clinical Director.

Assessment Data & Reports

All raw assessment data should have the client's initials and date of testing on it. Do not use full client names on any raw data. Unless in use, assessment data should be stored in the CAPS filing cabinet drawers labeled Client Testing Results. It is an assessor's responsibility to create a file for their own assessment client and label it like the other files in the cabinet. Raw data and test kits are never to be taken outside of CAPS.

When working with your supervisor to edit an assessment report, pass the report back and forth via encrypted thumb drive or print copy. A digital Word document should be password-protected and a print copy should be passed back and forth in a locked bag. In either case, refrain from putting the client's name, date of birth, T-number and other unique identifiers on the document until the very last moment. A stand-in like "Student" or "Client" can easily be swapped out for a name using Word's Find & Replace feature once the report is ready to be finalized.

After finishing an assessment report, a digital copy should be uploaded to the client's Titanium file. Collaborate with your supervisor to digitally sign and upload this. Each intern will have a small scanner which should be used for all confidential data. Do not use the "Scan & Send" feature on the copy machine, as this compromises the confidentiality of the report by sending it to your email. If you and supervisor digitally sign reports, you can upload it directly from your computer rather than scanning it first. Please turn the assessment report into a PDF and remove the password so that future CAPS staff will be able to open the report.

Case Conference Presentations

Though it is completely acceptable to use client names in your consultation with other CAPS staff, in your written and verbal case conference presentations, please practice the skill of de-identification. Many Interns use their case conference presentations in postdoc/job interviews, so de-identifying the case when you present it to CAPS decreases the likelihood that you will breach client confidentiality when you present the case outside of CAPS.

Relationships Between Permanent Staff and Trainees

Definitions

Staff: Anyone who is employed by CAPS whether on a renewable or temporary contract.

Permanent Staff: Anyone who is employed by CAPS on a renewable contract, and thus could continue working at CAPS in an ongoing capacity.

Trainee: A person engaging in the training required to become a mental health professional within their field (counseling, psychology, social work). These individuals are typically on temporary contracts and work at the university for the purpose of meeting an educational goal such as completing graduate school.

Clinical Staff: Any staff member who provides therapy at CAPS. This includes Interns and other trainees.

Senior Clinical Staff: Permanent staff who provide therapy at CAPS.

Administrative Assistants: Individuals who work in reception and assist in administrative tasks.

Directors: CAPS has three director positions: Director, Clinical Director, and Director of Training. People in these roles inherently carry more power because they oversee/manage other staff.

Doctoral Psychology Intern (“Intern” for short): Current-year trainees in CAPS’s APA-Accredited Doctoral Psychology Internship Program.

Evaluation: The process of assessing someone’s performance, both informally and formally. Interns complete evaluations of their internship experience and of their supervisors. While this feedback is important and used to make changes to the Internship Program, it inherently has fewer consequences than the evaluations that the internship does of the Intern. The internship’s evaluation of an Intern has the power to halt or delay the Intern’s progress toward becoming a psychologist. All permanent staff may be involved in an evaluative capacity with Interns. It cannot be assumed that only direct clinical supervisors or the Training Committee have evaluative power and responsibility for trainees. All Clinical Staff are considered trainers and therefore supervisors. Administrative assistants often contribute evaluative data about Interns’ professional behavior, which they have the opportunity to observe in ways that clinical supervisors do not.

Workplace Social Interactions: Informal exchanges that inevitably occur between people at work (e.g. casual conversation in the hallway, eating together in the common area at CAPS, outings that the entire staff is invited to). These interactions rarely extend beyond the workday/workweek.

Personal Relationships: Ongoing non-professional interactions that do not include the entire Intern cohort or the entire CAPS staff. These relationships can be problematic if occurring between staff with different levels of power. For example, a senior clinical staff member and Intern repeatedly going out to dinner where other staff are not invited, having repeated private conversations that are not professionally motivated, or following each other’s personal social media accounts.

Mentorship relationship: A personally engaging relationship with an explicit professional function – to benefit the professional growth of a trainee. Mentors and mentees understand that they can communicate openly about the power dynamics and hierarchical structures of the relationship.

Multiple Role Relationships: Relationships in which two people are engaged in two or more professional roles, or in a professional role and a non-professional role with each other. These relationships are often unavoidable (e.g., group co-facilitators/supervisor-supervisee; Director/Intern's mentor; permanent staff and Interns attending an outing together) but should be entered into with thoughtfulness for the potential impact on those with less power.

Recommendations/Guidelines

The responsibility for creating and maintaining professional relationships lies with the person who has more power. Interns, by the nature of their professional roles, have less power than permanent staff. Research by Eliz Yarris indicates that Interns are less likely to recognize boundary violations while in the role of Intern than they are later in their career (i.e., when they reflect back on their internship, they identify coercive, unethical, or harmful behaviors that they did not identify at the time). The following reasons might contribute to this phenomenon.

1. Interns are under constant scrutiny and need to please their internship site in order to become a psychologist
2. Interns have less experience working in the field of mental health
3. Interns may idealize a given permanent staff member
4. Permanent staff and Intern may be engaged in mutual idealization
5. Interns may identify with a given permanent staff member
6. Interns may be lonely in a new and unfamiliar social environment

Thus, even when a personal relationship is initiated by an Intern, because of the power dynamics involved, it is always the permanent staff member's responsibility to be mindful of potential risks to the Intern and act in accordance with the Intern's best interests. The following guidelines are a starting place for professional behavior, which Interns can expect CAPS staff to abide by. Additionally, Interns can expect the CAPS staff to approach this topic, not just as a list of rules to be followed, but as a part of their professional identity.

1. It is never permissible for senior clinical staff or administrative assistants to engage in a romantic, dating, or sexual relationship with a current trainee.
2. Senior clinical staff and administrative assistants are strongly discouraged from entering into a personal relationship with a current trainee, including following each other on social media.
3. Professional mentorship relationships are acceptable, and at times recommended for the purpose of supporting and assisting in a trainee's professional growth. The mentor is responsible for maintaining the professionalism of the relationship.
4. When a permanent staff member suspects a potentially unethical relationship between another permanent staff member and a trainee, professional ethics for psychologists, counselors, and social workers dictate that the staff member takes responsibility to protect the trainee from possible harm or exploitation. The permanent staff member should:
 - a. Address the issue with the colleague involved
 - b. Encourage the colleague to discuss the situation with a Director(s), and
 - c. Inform a Director(s)

5. When the potential for a personal relationship between a permanent staff member and a trainee becomes evident, the permanent staff member should:
 - a. Consult their professional ethics codes and professional literature
 - b. Consult with colleagues and/or a Director(s)
 - c. Consider the potential short-term and long-term, positive and negative consequences to the trainee
 - d. Prioritize the well-being of the trainee. Such a decision should not be based on the self-interests of the permanent staff member (e.g. permanent staff member enjoys hanging out with the trainee; the trainee is a ready and willing support; permanent staff member feels lonely, etc.).
 - e. Take any practical steps possible to ensure that the relationship will not negatively impact the trainee or the professional functioning of either party
6. Should a multiple role relationship occur, the Director and Director of Training have the discretion to initiate a discussion with the staff member and/or trainee to explore the issue further and potentially request that those involved take particular action to minimize the potential for negative short-term or long-term consequences to the trainee, permanent staff member, and the center.

Social Support While on Internship

Interns are encouraged to develop social networks within the Intern cohort and with SUU faculty & staff who do not work at CAPS. SUU has a variety of networks, organizations, and functions which can help Interns connect with potential social supports. Interns are also encouraged to actively seek out social opportunities in the Cedar City community.

Following Completion of Internship

To respect each person's autonomy and right to conduct their personal lives and relationships, there is no specific policy regarding relationships with former Interns. Once an Intern has fully completed training at CAPS, and there is a reasonable assumption that they will not be resuming training again at CAPS, personal relationships may be less problematic, since the evaluative component will no longer be in place.

Power dynamics may continue to be in place to some extent even after completion of internship. Permanent staff members (especially direct supervisors, the Director of Training, or those who coordinate specific parts of the training program) may be asked to write letters of recommendations in the future. Furthermore, there may linger idealization of the permanent staff member that affords the staff member ongoing interpersonal power in relation to the former Intern. Hence, CAPS staff are encouraged to maintain thoughtfulness, and carefully consider the potential pros and cons to the former Intern of entering into a personal relationship even after completion of training.

Additional Information

As this is a complicated, multi-faceted issue, you are encouraged to review Appendix E, which provides a summary of potential issues and recommendations offered by other Counseling Center Directors of Trainings. Another useful resource for this type of self-reflection and consultation, *Social Dual-Role Relationships During Internship: A Decision-Making Model* can be found on the CAPS shared drive.

Intern Rights & Responsibilities

Intern Rights

1. The right to a clear statement of general rights and responsibilities upon entry into the internship, including:
 - a. Goals of the internship experience
 - b. Expectations related to professional functioning
 - c. Procedures for evaluation, including when and how evaluations will be conducted
 - d. Due process policies and guidelines
2. The right to be trained by professionals who behave in accordance with the APA ethical guidelines and the laws and regulations of the State of Utah Board of Licensure for Psychologists.
3. The right to be treated with professional respect and with recognition of the training and experience attained prior to this internship.
4. The right to ongoing evaluation that is specific, respectful, and relevant.
5. The right to engage in an ongoing evaluation of the training experience and Internship Program.
6. The right to initiate an informal resolution of problems that might arise in the training experience through request to the individual(s) concerned, the Director of Training, and/or the Training Committee.
7. The right to due process if informal resolution is unsuccessful (see the Due Process Procedures section in this manual).
8. The right to privacy and respect of one's personal life, within the context of Section 7.04 of the APA Ethics Code on Student Disclosure of Personal Information. Because we believe that professional growth occurs within the context of self-reflection and personal exploration, our various training activities will, at times, ask Interns to disclose personal information. CAPS staff members take very seriously the responsibility to foster and maintain a safe, trusting, and supportive environment that will allow such disclosures to occur in accordance with the goals and objectives of our training model. And we respect an Intern's right to decline to disclose.
9. The right to have one's personal and cultural worldview respected.
10. The right to ask for reasonable accommodations that will enable performance of essential job functions, in accordance with the Americans with Disabilities Act.
11. The right to a certificate of internship completion upon successful completion of internship requirements.

Intern Responsibilities

1. To behave within the bounds of ethical principles and guidelines including:
 - a. APA Ethical Principles of Psychologists and Code of Conduct
 - b. APA Guidelines for Practitioners
 - c. Other relevant and applicable codes, standards, or guidelines
2. To behave within the bounds of the laws and regulations of the State of Utah Board of Licensure for Psychologists (<https://www.dopl.utah.gov/psychology/laws-and-rules/>).
3. To behave in a manner that conforms to the professional standards of Counseling & Psychological Services and Southern Utah University (<https://www.suu.edu/policies/>).
4. To integrate relevant professional and ethical standards into one's repertoire of behaviors.

5. To demonstrate interpersonal and professional competence; self-awareness, self-reflection, self-evaluation; and openness to processes of supervision. To resolve issues or problems that interfere with professional development or functioning in a satisfactory manner.
6. To read, understand, and seek clarification (if needed) of the Internship Manual and the Due Process Procedures, by the end of the orientation period (see Appendix G for the Internship Manual & Due Process Signature Sheet, which is signed and submitted by the end of the orientation period).
7. To meet training expectations responsibly by developing competencies in the skill areas outlined in Internship Goals, as well as in the specific behaviors outlined in the *Comprehensive Evaluation of Intern* form (see Appendix C).
8. To conduct oneself in a professionally appropriate manner.
9. To actively participate in training, service, administrative meetings, and other activities at Counseling & Psychological Services.
10. To make appropriate use of supervision and other training activities through behaviors such as arriving on time, arriving prepared, maintaining openness to learning, and accepting and using constructive feedback effectively.
11. To provide professional feedback to peers and staff regarding their work, as well as the impact of their behavior. To provide the Internship Program feedback regarding training activities and the impact of the training experience.
12. To manage personal stress, which includes tending to personal needs and seeking personal and/or professional help if necessary.
13. To participate in the creation of a multiculturally sensitive workplace, which includes respecting and working to understand others' worldviews.

Evaluation

Evaluation of Intern

Interns receive ongoing informal feedback from their supervisors and group therapy co-leaders with respect to their strengths and areas for continued growth and development. Interns are expected to be thoughtful about their knowledge, skills, and competencies at the beginning of each semester in order to facilitate setting semester training goals.

Formal evaluations are completed in terms of the goals and competencies that contribute to the overall internship goal of preparing Interns for competent entry-level psychological practice. The *Comprehensive Evaluation of Intern* form is found in Appendix C. The *Comprehensive Evaluation of Intern* form is completed by the primary supervisor, in collaboration with the Training Committee, who meet prior to each evaluation period. Feedback is also included from any other staff members who have had opportunity to observe the Intern's work directly (e.g., co-leading group, attending/co-presenting outreach).

The following schedule guides the evaluation process over the course of the internship year:

1. **October** – preliminary review, areas of significant concern communicated to academic DCT
2. **January** – formal evaluation, copy forwarded to the academic DCT
3. **April** – informal evaluation that addresses areas of concern and may include written feedback, areas of significant concern communicated to academic DCT
4. **July** – formal evaluation, copy forwarded to the academic DCT (along with a copy of the Intern's Completion Certificate, if they successfully completed internship)

Interns are also evaluated and provided with both quantitative and narrative feedback on their Case Conference presentations.

Evaluation of Internship

Interns are invited to provide informal feedback to the internship site throughout the year. Interns complete formal written evaluations three times: 1) at the end of orientation, 2) at Midyear, and 3) at End-of-Year. Evaluations include both quantitative and narrative feedback. Midyear evaluations include questions about seminars, group supervision meetings, the Director of Training, and supervisors. End-of-Year evaluations are similar to mid-year evaluations with the addition of a section about Program Aims and Competencies. This gives Interns the opportunity to reflect on how well the training provided prepared them in the areas needed for entry-level practice.

Internship Completion

Internship Hours

Internship completion requires 2,000 total hours, with a minimum of 25% of those hours (or 500) as direct service and a minimum of 200 U2LP supervision hours (100 individual supervision, 100 group supervision). This is the “gold standard” in the field and getting 2,000 hours on internship is a great way to ensure licensure in almost any state. The number of hours needed for licensure in each state may vary. It is up to the Intern to investigate the requirements for the states in which they may wish to receive licensure. If a difference exists between that state’s requirements and those of SUU CAPS, this should be discussed with the Director of Training immediately.

The maximum number of hours that Interns should finish internship with is 2,028. We set a maximum in order to ensure that Interns attend to self-care by taking their vacation time, sick leave, and holidays off. In order to complete 500 direct service hours, Interns are encouraged to take advantage of higher student demand for services during Fall and Spring semesters. Thus, activities that do not provide an Intern with direct hours might be best delayed until Summer semester.

Included and Unincluded Hours

Vacation, sick leave, and holidays are not included, but other hours outside of the regular work week are. We know that Interns engage in professional reading or dissertation work in the evenings or on weekends and the internship honors this by counting up to 5 hours per week toward internship (260 hours). This ensures that Interns are able to take all of their vacation, sick leave, and holidays without fear of dropping below 2,000 hours.

Hours Calculation	
40hrs/week x 52 weeks	= 2080
Vacation hours	-120
Holiday hours	-96
Sick leave hours	-96
	= 1768
After-hours professional activities	+260
	= 2028

Estimated Goals for Each Semester

The following outlines approximate ranges of hours that Interns should achieve each semester to stay on track for successful internship completion. We encourage Interns to aim for somewhere in between the minimum and maximum of each range. Interns should not aim to achieve above the maximum, as this could result in burnout.

Fall Semester

August 7-December 31 = 21 weeks

Direct goal: 170-190

U2LP Supervision goal: 80-91

Total goal: 800-830

Spring Semester

January 1-April 30 = 17 weeks

Direct goal: 260-280 (including Fall: 430-470)

U2LP Supervision goal: 68-74 (including Fall: 148-165)

Total goal: 720-750 (including Fall: 1,520-1,580)

Summer Semester

May 1-August 6 = 14 weeks (must take vacation for the last week)

Direct goal: 30-70 (including Fall and Spring: 500)

U2LP Supervision goal: 35-52 (including Fall and Spring: 200)

Total goal: 420-480 (including Fall and Spring: 2,000)

Tracking Hours for Internship Completion

The Director of Training will calculate each Intern's hours at key times throughout the internship year, but Interns ultimately bear the responsibility to ensure that they are successfully accruing the hours needed to complete internship. Interns can use whatever method of tracking works best for them, including Time2Track or a spreadsheet. Interns will also be taught how to generate reports using Titanium and how to calculate their exact hours from this report.

Reporting Hours to SUU HR

Interns will submit their time off to SUU HR every month through their SUU portal.

Internship Completion Requirements

Interns must meet the requirements outlined in Appendix D *Internship Completion Requirement Checklist* in order to complete the Internship Program. The internship is designed to support and facilitate successful completion of these program elements; however, Interns also assume personal responsibility to track their progress throughout the internship year to ensure that the requirements are met. Should an Intern recognize difficulty making timely progress in any area, please address the area of concern proactively and seek consultation with supervisors and/or the Director of Training.

Due Process

Due Process Guidelines

Due process procedures offer protection to Interns to assure, as much as possible, that decisions are not arbitrary or personally biased. They require that the Internship Program identify specific evaluative procedures that are applied to all Interns and provide appropriate appeal procedures. All steps need to be appropriately documented and implemented. General due process guidelines include:

1. The requirements of the internship are available on the Internship Program's website so that Interns know what will be expected of them before they choose to attend the internship.
2. During the orientation period, Interns review requirements of the internship, which are provided in writing and are discussed with the Interns. Interns are provided an opportunity to have their questions answered.
3. The procedures for evaluation, including when and how evaluations will be conducted, are provided to the Interns.
4. The various procedures and actions involved in making decisions regarding inadequate performance or problematic behavior are provided.
5. When Intern performance or behavior is not responsive to informal feedback, written feedback is provided. Interns provide their perspective and response in writing.
6. The Internship Program communicates early and often with the academic program about any suspected difficulties regarding Intern performance or behavior. When necessary, the Internship Program seeks input from the academic program about how to address these difficulties.
7. The Internship Program institutes, when appropriate, a remediation plan for identified inadequate performance or problematic behavior, including a time frame for expected remediation and consequences of not rectifying the inadequate performance or problematic behavior.
8. The Internship Program provides a written procedure to the Intern which describes how the Intern may appeal actions taken by the program.
9. The Internship Program uses input from multiple senior staff members when making decisions or recommendations regarding the Intern's performance.
10. The rationale for and actions taken by the program are documented in writing and shared with all relevant parties.

Due Process Procedures

Informal Procedure

If a CAPS staff member is concerned about an Intern's behavior or performance, the staff member addresses the concern informally by discussing the issue with the Intern who is involved and consulting with the Director of Training. If the issue is not resolved informally, the staff member may seek resolution using the following formal procedures.

Formal Procedure

If a concern about Intern behavior or performance is not resolved informally, or if an Intern's behavior compromises client care, the situation is addressed formally by:

1. Submitting a written request, with all supporting documents, to the Director of Training for review.
2. If the staff member who brings the concern is not the Intern's primary supervisor, the Director of Training will discuss the concern with the Intern's primary supervisor.
3. The Director of Training will inform the Intern of the concern in writing and request the Intern's perspective on the matter in writing.
4. The Director of Training will meet with the primary supervisor and the Training Committee to discuss the concern, and to determine the Internship Program's response to the concern. This discussion includes the Intern's written perspective, and may include consultation with other staff members, as necessary.
5. The Director of Training informs the Intern of the outcome of the meeting in writing and meets with the Intern to review this information. The Director of Training will review the Internship Program's assessment of the concern, whether or not any action will be taken and what those actions would be, as well as any expectations for change. This meeting may include the Intern's primary supervisor, or other staff members as appropriate.
6. Any formal action taken by the Internship Program may be communicated in writing to the Intern's academic department. This notification will include, but is not limited to, the nature of the concern and the specific actions implemented to address the concern.
7. The Intern may choose to accept the decision and recommended actions or may choose to challenge the action. The procedures for challenging the action are described under "Review Panel."

Actions to Advise and Assist Interns

If an Intern is not performing at the program's expected level of competence, possible actions to remediate skill deficits or inadequate performance may include:

1. Increasing supervision, shifting the focus of supervision, or modifying the format of supervision with either the same or a different supervisor.
2. Reducing the Intern's caseload or responsibilities.
3. Implementing a remediation plan. The Director of Training and Intern collaborate to create a written plan for achieving competency in the area in question.
 - a. The Training Committee and other impacted staff will be included in the creation and implementation of the remediation plan.
 - b. Remediation plans are implemented for a specified period of time and include regular evaluation and supervision.
 - c. The remediation plan will identify the specific competency that the Intern is failing to achieve (as described in the *Comprehensive Evaluation of Intern*).
 - d. The remediation plan will include specific information about the actions and behavior required to successfully complete the remediation plan and the consequences of not completing the remediation plan successfully.
 - e. Remediation plans are private and will not be shared with other Interns or staff who are not involved in supporting the Intern's completion of the remediation plan.
4. Recommending that the Intern voluntarily take time off to attend to personal or medical needs. The Director of Training will collaborate with the Intern to use their vacation and sick leave and make a plan for returning and completing internship if possible.
5. Suspending the Intern. Interns may be temporarily suspended from engaging in any/or all counseling or direct services. Such suspensions can be initiated by the Director of Training

or Director of Counseling & Psychological Services. All temporary suspensions become effective immediately upon written and oral notification of the Intern. The written notification, which includes the reasons for the suspension, will be provided to the Intern within one working day.

6. Immediate dismissal from the Internship Program for egregious ethical or legal violations. See below for details.

When a combination of interventions does not rectify the problem or when the Intern seems unable or unwilling to alter behaviors, the Training Committee may elect to give the Intern a limited endorsement, specifying settings in which the Intern could function adequately or dismiss the Intern from the Internship Program.

Immediate Dismissal from the Internship Program

If an Intern engages in an egregious ethical violation or violation of the law, the internship may pursue immediate dismissal from the Internship Program without taking any of the above actions to rectify the competency problem. The APA Ethical Principles & Code of Conduct, Utah psychology law, and ASPPB Code of Conduct will serve as guides and only behaviors that have been identified by these bodies as unlawful or unethical will be grounds for immediate termination. Examples include:

1. Engaging in an exploitative relationship with a client or a relevant person associated with or related to a client.
2. Sexual contact with a client, relevant person associated with or related to a client, a former client (as outlined by APA), supervisee, or trainee for whom the Intern is likely to have evaluative authority.
3. Providing therapy to a former sexual partner.
4. Sharing confidential information without a release of information or legal mandate.
5. Deliberately withholding of information that falls under mandated reporting obligations.
6. Seeing a client while significantly impaired due to mental, emotional, cognitive, psychological, pharmacological, substance abuse, or induced conditions.

<https://www.apa.org/ethics/code/ethics-code-2017.pdf>

<https://www.dopl.utah.gov/psychology/laws-and-rules/>

[https://cdn.ymaws.com/www.asppb.net/resource/resmgr/guidelines/code_of_conduct_2020 .pdf](https://cdn.ymaws.com/www.asppb.net/resource/resmgr/guidelines/code_of_conduct_2020.pdf)

Problematic Behavior and Attitudes

Interns are expected “to demonstrate interpersonal and professional competence; self-awareness, self-reflection, and self-evaluation; openness to processes of supervision; and to resolve issues or problems that interfere with professional development or functioning in a satisfactory manner,” (guidelines from Council of Chairs of Training Councils in psychology). In contrast, problematic behavior, attitudes, or characteristics are defined broadly as interferences in professional functioning which are exhibited in one or more of the following ways:

1. An inability 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; and/or

3. An inability to control personal stress, strong emotional reactions, and/or psychological dysfunction such that they interfere with professional functioning.

Intern behavior and attitudes that are considered problematic typically include one or more of the following:

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, didactic, or experiential training;
3. The quality of services delivered by the Intern is sufficiently affected in a negative way;
4. The problem is not restricted to one area of professional functioning;
5. A disproportionate amount of time and attention is required by staff members, supervisors, and the Training Committee;
6. The Intern's behavior does not change as a function of feedback, remediation efforts, and/or time.

Grievance Procedures

If an Intern encounters significant difficulties or problems (e.g., poor supervision, unavailability of a supervisor, evaluations perceived as unfair, workload issues, personality clashes, other staff conflict) during the training experience, the Intern should follow the following steps.

Informal Procedure

First try to resolve the problem informally by discussing the issue with the staff member who is involved. If the issue is not resolved informally, the Intern may seek resolution using the following formal procedures.

Formal Procedure

1. The Intern should discuss the concern with the Director of Training or Director of Counseling & Psychological Services.
2. If the Director of Training or Director cannot resolve the issue, the Intern can formally challenge any action or decision taken by the Director of Training, a supervisor, or any member of the training staff by following this procedure:
 - a. The Intern should file a formal complaint in writing and with all supporting documents with the Director of Training. If the Intern is challenging a formal evaluation, the Intern must do so within 5 business days of receipt of the evaluation.
 - b. Within 3 business days of receiving a formal complaint, the Director of Training must consult with the Director and implement Review Panel procedures (see next section).

Review Panel

1. When required by these policies, a Review Panel of three members, at least two of whom are mental health professionals, will be formed by the Director of Counseling & Psychological Services (or the Director of Training, if the Director is involved in the complaint or challenge) with recommendations from the Training Committee and the Intern involved in the dispute. Review Panel members may be drawn from CAPS staff, other campus professionals, or community mental health professionals. The Intern has the right to hear all facts with the opportunity to dispute or explain their perspective.

2. Within 10 business days of receipt of the request for appeal, a meeting will be conducted in which the Intern's formal complaint or challenge to a formal evaluation is heard and relevant material presented.
3. Within 5 business days of the completion of the review, the Review Panel submits a written report to the Director (or Director of Training, as appropriate), including any recommendation for further action.
4. Within 5 business days of receiving the recommendation, the Director (or Director of Training, if needed) will either accept or reject the Review Panel's recommendations. If the Director (or Director of Training) rejects the panel's recommendations due to an incomplete or inadequate evaluation of the dispute, the Director (or Director of Training) may refer the matter back to the Review Panel for further deliberation and revised recommendations or may make a final decision.
5. If referred back to the panel, they will report back to the Director (or Director of Training) within 5 business days of the receipt of the Director's (or Director of Training) request of further deliberation. If the Director has overseen the review panel process, the Director makes a final decision regarding what action is to be taken and informs the Director of Training.
6. The Director of Training informs the Intern, staff members involved, and if necessary, members of the training staff, of the decision and any action taken or to be taken.
7. The decision of the Director (or Director of Training, if needed) is final.