Doctoral Internship in Health Service Psychology
University of Washington Tacoma Counseling & Psychological Services

Program Description
2021-2022
Updated 08/18/20
# Table of Contents

**Training Program Setting** ....................................................................................................... 1  
  Tacoma, Washington .................................................................................................................. 1  
  Selected Local Attractions ....................................................................................................... 1  
  University of Washington Tacoma ............................................................................................ 3  
  University of Washington Tacoma Statement of Commitment to Diversity ....................... 3  
  Counseling & Psychological Services ......................................................................................... 4  
    **Mission Statement** ............................................................................................................ 4  
    **Values** .............................................................................................................................. 4  
    **Staff** ............................................................................................................................... 4  
    **Facility** ........................................................................................................................... 4  
  Integration of the Training Program into the Larger Organization ........................................... 5  

**Training Program Administration** ........................................................................................ 6  
  Accreditation/Professional Associations .................................................................................. 6  
  Evaluation and Communication with Directors of Clinical Training ..................................... 7  
  Minimum Hours Requirements ................................................................................................ 7  
  Training Program Model and Philosophy ............................................................................... 8  
  Training Program Aims and Competencies .......................................................................... 9  
    **Aims** ............................................................................................................................... 9  
    **Competencies** ............................................................................................................... 9  
  Responsibilities of the Training Program to Interns ............................................................... 12  
  Intern Responsibilities to the Training Program .................................................................... 14  

**Direct Clinical Service** ........................................................................................................ 14  
  COVID-19 Remote Services ................................................................................................... 14  
  Initial Assessment and Intervention (Drop-in) ....................................................................... 15  
  Crisis Assessment and Intervention ....................................................................................... 15  
  Provision of Individual Therapy ............................................................................................. 16  
  Provision of Group Therapy .................................................................................................. 16  

**Providing Supervision** .......................................................................................................... 17  
  Facilitating Practicum Seminar ............................................................................................. 17  

**Receiving Supervision** ......................................................................................................... 18  
  Individual Supervision .......................................................................................................... 18  
  Individual Supervisor Assignments ....................................................................................... 18
Supervision of Groups ............................................................................................................... 19
Case Conference.......................................................................................................................... 19
Supervision of Practicum Seminar ............................................................................................ 20
Training Seminars ..................................................................................................................... 20
Clinical and Professional Topics Seminar ................................................................................ 20
Multicultural Seminar ............................................................................................................. 20
Other Weekly Training Activities .............................................................................................. 21
Staff Meetings ........................................................................................................................... 21
Intern Processing Time ............................................................................................................. 21
Session Recording .................................................................................................................... 21
Research (or Dissertation/Scholarly Activity) ........................................................................... 21
Administrative Time .................................................................................................................. 22
Additional Training Activities .................................................................................................. 22
Orientation ............................................................................................................................... 22
Outreach ................................................................................................................................ 22
Consultation ............................................................................................................................ 23
Faculty, Staff, Parents, and Other Students ............................................................................... 23
Off-site Providers ...................................................................................................................... 23
Campus Office or Student-Serving Community Agency Project (Optional) ......................... 23
Meetings with the Training Director ........................................................................................ 24
Professional Development ........................................................................................................ 24
Summary of Core Training Experiences .................................................................................. 24
Example of Intern Weekly Activities ....................................................................................... 26
Duration and Stipend ............................................................................................................... 27
Benefits, Time Off, and Holidays .............................................................................................. 27
Due Process and Grievance Procedures .................................................................................. 27
Notes ..................................................................................................................................... 27
Doctoral Internship in Health Service Psychology
Program Description 2021-2022

Training Program Setting
Tacoma, Washington
Located at the foot of iconic Mount Rainier, along the shores of Commencement Bay in Washington State, Tacoma is recognized as a livable and progressive port city. With a population of more than 217,000 residents, Tacoma is the second largest city in the Puget Sound area and the third largest in the state. In the last few decades, the city underwent a major transformation and became a center for international exports, the arts and diverse culture, outdoor recreation, and healthy, affordable living. Scenic views abound, from salt water beaches to twin suspension bridges, from nearby national parks to an urban forest preserve. Average temperatures in Tacoma typically range from 37°F to 78°F. Tacoma’s short summers tend to be warm and dry, and its longer winters cold and rainy. With an average annual rainfall of 41 inches (compared to the U.S. average of 38 inches), Tacoma stays green throughout most of the year, with only occasional snowfall (an average of 4 inches annually).

Selected Local Attractions
Please take a moment to browse the information below about our community and selected local attractions in Tacoma, Pierce County, and beyond. Items are alphabetized within the categories of general information, the outdoors, museums and landmarks, and sports and entertainment.

General Information:
   Chamber of Commerce
   https://www.tacomachamber.org/
   Explore Neighborhoods
   https://movetotacoma.com/explore-neighborhoods/
   Joint Base Lewis-McCord
   Puyallup Tribe of Indians
   http://www.puyallup-tribe.com/
   Travel Tacoma
   https://www.traveltacoma.com/
   UW Tacoma Staff Favorites: Restaurants, Activities, Nightlife, and Shopping
   https://www.tacoma.uw.edu/sites/default/files/sections/StaffAssociation/Tacoma_Favorites.pdf

The Outdoors:
   Five Mile Drive and Trails
   https://www.metroparkstacoma.org/five-mile-drive-trails-point-defiance/
   Mount Rainier National Park
https://www.nps.gov/mora/index.htm
Olympic National Park
https://www.nps.gov/olym/index.htm
Pierce County Parks
https://www.piercecountywa.org/114/Parks-Recreation
Point Defiance Park
https://www.metroparkstacoma.org/point-defiance-park/
Ruston Way Waterfront
https://www.traveltacoma.com/regions/tacoma/ruston-way-waterfront/

Museums and Landmarks:
Chihuly Bridge of Glass
https://www.traveltacoma.com/listings/chihuly-bridge-of-glass/479/
Museum of Glass
https://www.museumofglass.org/
Point Defiance Zoo and Aquarium
https://www.pdza.org/
Seymour Botanical Conservatory
https://www.metroparkstacoma.org/place/w-w-seymour-conservatory/
Tacoma Art Museum
https://www.tacomaartmuseum.org/
Tacoma Narrows Bridge
https://www.wsdot.wa.gov/TNBhistory/
Union Station
https://www.gsa.gov/historic-buildings/tacoma-union-station-tacoma-wa

Sports and Entertainment:
Chambers Bay Golf Course
https://www.chambersbaygolf.com/
Cheney Stadium
https://www.milb.com/tacoma/ballpark/cheney-stadium
Emerald Queen Casino
http://emeraldqueen.com/
Grand Cinema
https://www.grandcinema.com/
Tacoma Arts Live
https://www.tacomartslive.org/
Sports Leagues and Recreation
https://www.co.pierce.wa.us/1407/Recreation-Sports
Symphony Tacoma
https://symphonytacoma.org/
Tacoma Dome
https://www.tacomadome.org/
Wild Waves Theme & Water Park
University of Washington Tacoma
The University of Washington Tacoma (UW Tacoma; “U-Dub” Tacoma) is located in Tacoma's historic Warehouse District, part of the recently revitalized area of downtown Tacoma. As one of three campuses that make up the University of Washington, UW Tacoma is a member of the Coalition of Urban Serving Universities, founded in 1990 in response to the growing interest in higher education opportunities in the South Sound region. Initially focused on ‘time bound, place bound’ students with limited access to educational opportunities, and offering programs with demonstrated regional needs, UW Tacoma is committed to building strong communities and improving the health of diverse populations. In this spirit, some of the university’s unique academic offerings include undergraduate majors in Ethnic, Gender, and Labor Studies; Spanish Language and Cultures; and Sustainable Urban Development. These are complemented by undergraduate minors such as American Indian Studies; Asian Studies; Corporate Responsibility; and Education and Community Engagement; and by graduate and professional programs in Community Planning, Educational Leadership, Geospatial Technologies, Nursing, and Social Work, to name a few.

The UW Tacoma campus consists of 22 buildings on 46 acres of land, a portion of which extends onto reservation land belonging to the Puyallup Tribe of Indians. UW Tacoma has developed a strong partnership with the Puyallup Tribe of Indians, who are the official tribal sponsor of the university. UW Tacoma’s diverse student population includes a broad range of ethnic and family backgrounds, ages, interests, and experiences. More than 80% of students transfer to UW Tacoma from one of the many community colleges in the area or from other universities. The UW Tacoma student population is considered majority-minority, with over half of its 5,352 students identifying from minoritized racial/ethnic groups or international: 19% Asian American, 14% Hispanic/Latinx, 9% African American, 8% Two or more ethnicities, 5% International, 1% Hawaiian/Pacific Islander, and 1% American Indian. Most students are in-state residents (93%), are enrolled full-time (84%), receive financial aid (73%), and are the first in their family to earn a college degree (56%). UW Tacoma is also designated as a veteran-supportive campus; approximately 17% of students are military-affiliated, with 10% receiving Veterans benefits. UW Tacoma welcomes students regardless of citizenship - in Washington, eligible undocumented students may pay in-state tuition at state colleges and universities.

University of Washington Tacoma Statement of Commitment to Diversity
To hold constant a nurturing learning and work environment in the midst of change, each member of our UW Tacoma community has the responsibility to build and sustain respectful and supportive relationships, through which intolerance, discrimination and social injustice are confronted and resolved through non-violent behavior.
The University of Washington Tacoma’s commitment to diversity is central to maintaining an atmosphere wherein students, staff, faculty and South Sound residents find abundant opportunities for intellectual, personal and professional growth.

Counseling & Psychological Services

**Mission Statement**
Our mission is to improve the mental health and well-being of our campus community. In the effort to provide a positive learning experience, we help students address issues of stress as well as helping them to focus on personal and academic goals, thereby contributing to improved motivation, performance and success.

**Values**
Our services are guided by our respect for individuals and their culture and by our commitment to confidential and professional excellence. CAPS is committed to maintaining an atmosphere of openness and trust. We encourage the free exploration and discussion of attitudes, beliefs, values, and behaviors that are similar to and different from those of other people. We are a Safe Zone for LGBTQ students. We are dedicated to promoting respect for all persons, and to providing culturally relevant psychological services.

CAPS staff consult and collaborate with faculty, staff, administration, and other university departments to promote student development, build community, and enhance the quality of university life. CAPS employs evaluation and research to develop more effective services for students, contribute to our profession, and create new knowledge.

**Staff**
CAPS is staffed by four full-time clinicians who are licensed as psychologists. Three have been licensed for at least two years, and thus are eligible to provide primary individual supervision to interns. Our leadership structure includes the Director, Training Director, Groups Coordinator, and Outreach Coordinator. A full-time Program Coordinator provides administrative support services. Each clinician is highly invested in our training program and is eager to support trainees’ personal and professional growth throughout the year. Our staff have a variety of theoretical orientations and all share a commitment to diversity and social justice.

**Facility**
CAPS is located on the third floor of the Mattress Factory (MAT), a flatiron-shaped (triangular) brick building originally designed in the early 20th century for the manufacture of furniture and mattresses. The building became LEED Silver Certified at the time of its renovation for university use in 2004. The preservation of historical architectural materials is evident throughout the building in exposed...
brick and wooden beams; even the Chicago Safe & Lock Co. vault remains to adorn the CAPS waiting room, too heavy and massive to be removed. Some students affectionately call it the “safe room.”

The Mattress Factory houses many of the offices and services of the Division of Student Affairs, of which CAPS is a unit. CAPS shares a suite with Disability Resources for Students (DRS). All CAPS providers have private offices with standard office equipment (e.g., desk, seating, locking file cabinet, computer, phone, lighting, internet connection, video recording equipment) and each office has a window. CAPS offices are situated together along one side of the suite, while DRS business is conducted on the other side, with a quiet testing area located in the back for students who have ADA course accommodations. Printers and office supplies are available to staff in a common area within the suite. A group room is available for group therapy, staff meetings, and other purposes. It is equipped with a white board, sofa and chairs seating, and a small table. Training seminars may be held in the group room or in nearby offices or buildings that have conference tables and audio-visual capabilities. A private waiting room is located just inside the CAPS/DRS entry, and the front desk is staffed by the CAPS Program Coordinator.

The Mattress Factory is wheelchair accessible from both front and back entrances, and the third floor restrooms and CAPS/DRS suite entry have automatic doors. All-gender restrooms are located on the first and second floors of the building. Designated women’s and men’s restrooms are located just outside the CAPS/DRS suite along with water fountains and a water bottle filling station. Just down the hall from the CAPS/DRS suite is a kitchen available for staff use, with a full-sized fridge, sink, two microwaves, toaster, coffee maker, electric kettle, seating area, and plenty of natural light. The CAPS staff also informally stock the suite with a variety of teas and snacks – both healthy and indulgent – throughout the year. The building participates in composting and recycling. Vending machines for snacks and beverages are located on the first floor near the Dawg House, a student lounge space featuring table and video games and an eating area. When you need a break, consider taking in a view of the Tacoma Dome and Mount Rainier (on clearer days) from the third floor hallway.

Integration of the Training Program into the Larger Organization
The internship training program is integrated into Counseling & Psychological Services, the Division of Student Life, and the UW Tacoma campus in a number of ways. CAPS approaches training as a vital contribution to the mental health field, and the internship as a culmination of training for entry-level professionals. Accordingly, all clinicians are committed to training, and are available as mentors during the internship year. Interns are encouraged and invited to seek all clinicians for guidance, consultation, and advice.
All clinicians participate in leading training seminars and facilitating case conference. Interns also join clinicians at CAPS staff meetings.

Interns are also encouraged to engage with the campus community through referral, outreach, and consultation with other campus units within the Division of Student Affairs (e.g., Disability Resources for Students, First Generation Student Initiatives, Residence Life, Veteran and Military Resource Center, Student Involvement and Leadership) and in other areas of the university (e.g., Center for Equity and Inclusion, Teaching and Learning Center, International Student and Scholar Services, University Academic Advising). Based on individual interests, interns may also develop liaison relationships with campus partners, working with faculty, staff, and/or students to provide psychoeducational workshops or guest lectures, conduct needs assessments, or develop projects related to students’ mental health. Lastly, as an urban serving university, interns are introduced to and may tour the facilities of community partners (e.g., Crystal Judson Family Justice Center, Rainbow Center, Rebuilding Hope! The Sexual Assault Center for Pierce County).

In regard to functional roles, interns participate in a broad range of departmental and divisional activities and work in close contact with all their colleagues. Interns are viewed as colleagues-in-training, deserving of respect, and treated accordingly both professionally and personally.

**Training Program Administration**

Counseling & Psychological Services staff members value training and all clinical professionals participate in the training program. The Training Director, who is a Licensed Psychologist in the state of Washington, coordinates the program and reports to the Director of Counseling & Psychological Services. The Training Director is responsible for program philosophy, training structure, intern selection, assignment of supervisors, and resolution of problems or concerns involving interns and/or the training program. The Training Director has primary responsibility for the day-to-day administration, coordination, and development of the training program. Center staff members are kept informed about the training program through weekly staff meetings. Supervisors meet formally at mid-quarter (4 times per year) to discuss supervisory issues, as well as the progress and training needs of current interns.

**Accreditation/Professional Associations**

CAPS has been a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) since 2009. The Training Director is an active member of the Association of Counseling Center Training Agencies (ACCTA) and the American Psychological Association (APA).

While CAPS is not APA accredited, trainees from APA-accredited doctoral programs have matched with us, as we utilize the nine APA Profession-Wide Competencies. Further, our training program was accepted in July 2020 to the Accreditation Readiness Project sponsored by APPIC. This means that the self-study (the first step in the process of
applying to APA for accreditation) has been started, and is scheduled to be completed/submitted in summer 2021.

Evaluation and Communication with Directors of Clinical Training
Communication between doctoral training programs and internship programs is of critical importance to the overall development of competent new psychologists. The internship is a required part of the doctoral degree, and while the internship staff assess the student’s performance during the internship year, the doctoral program is ultimately responsible for evaluation of the student’s readiness for graduation and entrance to the profession. Therefore, evaluative communication must occur between the two training partners. Given this partnership, our training program follows the practices set forth by the Council of Chairs of Training Councils.11

Copies of each intern’s evaluations are sent to the doctoral program after each of four formal evaluation periods (timed with each academic quarter) which generally fall in December, March, June, and August. Interns receive a copy of their evaluation and a copy is placed in the intern’s file. Interns also complete evaluations of supervisors on a quarterly basis and of the Training Director. Copies of these evaluations are also shared with the doctoral program. Informal contact with the doctoral program is maintained throughout the year via e-mail or phone contacts. Program directors are invited to call and/or visit CAPS at their convenience during the internship year.

Minimum Hours Requirements
Minimum requirements for internship hours are set by the American Psychological Association (APA), the Association of Psychology Postdoctoral and Internship Centers (APPIC), and by state licensure laws. APA requires that full-time internships be completed in no less than 12 months. APPIC and the WA State Department of Health require the internship to be completed with a minimum of 1,500 total hours of supervised experience. APPIC further requires internship sites to meet state licensure requirements in the state where the internship is housed. In terms of direct service, APPIC requires that at least 25% of trainees’ time is spent in “face-to-face psychological services to patients/clients”9 and WA similarly requires that at least 25% of the internship experience be “in direct client contact providing assessment and intervention services.”10

The CAPS internship as a whole, including all eligible holidays and leave time for the year, totals 2,080 hours. When only scheduled holidays are considered, the internship totals 2,000 actual working hours. If additional annual leave, sick leave, and one personal holiday are taken, the internship totals 1,776 hours. States vary according to the minimum total hours required for internship, with most states ranging from 1500 to 2000 (though some states have no minimum hours requirement). Interns are advised to research the required hours for states in which they intend to become licensed to ensure that any leave time they take enables them to obtain a sufficient total number of internship hours; interns should manage their leave time accordingly. The Training
Director will consider this internship to be completed with a minimum of 1,776 total hours, of which a minimum of 500 must be direct service, over a period of 12 months. The Certificate of Completion will not be awarded prior to the completion of internship.

Demand for service fluctuates throughout the year, with the lightest client load typically occurring during summer quarter. Thus, it is recommended that interns complete 450-475 hours of direct service by the end of spring quarter, leaving 25-50 for summer quarter. To enable interns to acquire enough total and direct service hours for state licensing boards, it is also recommended that interns carefully plan their annual leave to be taken during quarter breaks or other “down times” at the center. The Training Director helps interns track their hours each quarter and advises interns and their supervisors regarding progress toward the direct service requirement.

Training Program Model and Philosophy
The UW Tacoma Counseling & Psychological Services internship program utilizes a practitioner-developmental model of training. The focus is on service delivery with a view of professional development as sequential in nature, and with the goal of helping interns move toward greater levels of autonomy and independent practice by the completion of the internship year. Embedded in this model is the belief that professional identity is not a static phenomenon that ends once a terminal degree or appropriate licensure or certification is achieved but instead consists of life-long learning that evolves as the field does.

This model also includes an emphasis on experiential learning which allows interns to learn through concrete experience, reflective observation, active experimentation, and establishment of mentoring relationships where training is viewed as relational and reciprocal. Interns are provided ample opportunity to observe the professional staff in various settings before actually participating in areas that are new to them. As expertise forms and competence develops, interns are encouraged to take on more responsibility and leadership. It has been our experience that most interns quickly move toward independent practice under supervision, with the goal of leaving the internship year as a professional psychologist and colleague.

Along with professional growth, personal growth also is encouraged. The training staff believe that personal development and maturity are cornerstones of professional competence and identity. Every effort is made to provide a supportive environment which models and attends to personal growth. In a system that provides both support and challenge, interns are encouraged and supported in the process of becoming mature practitioners. This process begins by evaluating the knowledge and skills interns bring to the center. These are explored during orientation as interns reflect on their own experiences. Interns are asked in a variety of settings, including conferences with the training director, supervision, training seminars, and case conferences, to consider their own level of skill and professional development. Initially, interns are expected to demonstrate many skills at an intermediate level as described in the intern evaluation.
forms. Interns are asked to set goals, to build on the skills they bring, and to acquire advanced skills that are essential in the profession. These goals are reviewed periodically and may be revised as interns progress through the internship year.

**Training Program Aims and Competencies**

Our training model aims to produce competent and versatile generalists who are prepared to practice as entry-level professionals in college and university counseling centers as well as a variety of related clinical settings. The internship program serves to prepare interns to meet the requirements for psychologist licensure. Program aims, listed below, are addressed primarily through experiential and didactic learning processes. These include direct intervention with clients and the presentation of theory and techniques - based on current research and scholarly works - in didactic settings.

**Aims**

- To develop interns’ clinical skills in preparation for entry-level positions as health service psychologists.
- To cultivate the self-knowledge, attitudes, and professional knowledge and skills needed for effective and ethical practice as a psychologist.
- To develop and promote competence in individual and cultural diversity.

These aims are accomplished through focus on the nine Profession-Wide Competencies listed in the American Psychological Association *Standards of Accreditation for Health Service Psychology* and described in the Commission on Accreditation *Implementing Regulations*.

**Competencies**

I. **Research**: Demonstrate the substantial ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.

II. **Ethical and Legal Standards**: Demonstrate competency in the following areas:
   a. Be knowledgeable of and act in accordance with each of the following:
      i. the current version of the APA Ethical Principles of Psychologists and Code of Conduct;
      ii. relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels; and
      iii. relevant professional standards and guidelines.
   b. Recognize ethical dilemmas as they arise, and apply ethical decision-making processes in order to resolve the dilemmas.

III. **Individual and Cultural Diversity**: Demonstrate knowledge, awareness, sensitivity, and skills when working with diverse individuals and
communities who embody a variety of cultural and personal background and characteristics. The Commission on Accreditation defines cultural and individual differences and diversity as including, but not limited to, age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and socioeconomic status. Demonstrate:

a. an understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves;
b. knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision/consultation, and service;
c. the ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles (e.g., research, services, and other professional activities). This includes the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered over the course of their careers. Also included is the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own; and
d. the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during internship.

IV. Professional Values and Attitudes: Interns are expected to:

a. behave in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others;
b. engage in self-reflection regarding one’s personal and professional functioning; engage in activities to maintain and improve performance, well-being, and professional effectiveness;
c. actively seek and demonstrate openness and responsiveness to feedback and supervision; and
d. respond professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.

V. Communication and Interpersonal Skills: Interns are expected to:

a. develop and maintain effective professional relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services;
b. produce and comprehend oral, nonverbal, and written communications that are informative and well-integrated; demonstrate a thorough grasp of professional language and concepts; and
c. demonstrate effective interpersonal skills and the ability to manage difficulty communication well.

VI. **Assessment**: Demonstrate the following competencies:

a. Select and apply assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collect relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient.

b. Interpret assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective.

c. Communicate orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.

VII. **Intervention**: Intervention is defined broadly to include but not be limited to psychotherapy. Interventions may be derived from a variety of theoretical orientations or approaches. The level of intervention includes those directed at an individual, a family, a group, a community, a population or other systems. Interns are expected to demonstrate the ability to:

a. establish and maintain effective relationship with the recipients of psychological services;

b. develop evidence-based intervention plans specific to the service delivery goals;

c. implement interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables;

d. apply the relevant research literature to clinical decision making;

e. modify and adapt evidence-based approaches effectively when a clear evidence-base is lacking; and

f. evaluate intervention effectiveness, and adapt intervention goals and methods consistent with ongoing evaluation.

VIII. **Supervision**: Supervision involves mentoring and monitoring of trainees and others in the development of competence and skill in professional practice and the effective evaluation of those skills. Supervisors act as role models and maintain responsibility for the activities they oversee.
Interns are expected to apply this knowledge in direct or simulated practice with psychology trainees, or other health professionals.  

IX. **Consultation and Interprofessional/Interdisciplinary Skills**: Consultation and interprofessional/interdisciplinary skills are reflected in the intentional collaboration of professionals in health service psychology with other individuals or groups to address a problem, seek or share knowledge, or promote effectiveness in professional activities. Interns are expected to apply this knowledge in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior.

**Responsibilities of the Training Program to Interns**
The training program is committed to providing an environment conducive to the professional growth and development of interns. In addition to assisting in the development and refinement of clinical skills, a major focus of our program is to assist interns in integrating their personal functioning with their professional functioning. This involves the teaching of clinical skills as well as ongoing evaluation and feedback. This process also involves the development of trust and safety within the training program such that interns can approach learning experiences and challenges with a sense of openness, safety and appropriate vulnerability. Specifically, the training program assumes the following responsibilities toward interns:

A. The training program will provide interns with a clear statement of goals and parameters of the training experience, including information about relevant professional standards, guidelines, and legal regulations that govern the practice of psychology. The training program will also provide appropriate forums to discuss these standards and guidelines.

B. The training program will provide interns with copies of the Counseling & Psychological Services Intern Training Manual, as well as electronic access on the shared drive, with a discussion of appropriate sections. The Intern Training Manual outlines a summary of requirements to be completed during the internship year.

C. The training program will provide interns with access to the Counseling & Psychological Services Policies & Procedures via a shared computer drive, with discussion of appropriate sections.

D. The training program will provide quality supervision and didactic training by professionals who behave in accordance with professional, legal and ethical guidelines.

E. The training program will provide criteria, outlined in the intern evaluation forms, which will be used in assessing competence in the areas detailed above.
F. The training program will provide ongoing feedback that is specific, respectful, and pertinent to interns’ skills and development. Formal written evaluations of interns’ progress will be provided at the end of each academic quarter and will address interns’ knowledge of and adherence to professional standards, professional skill/competency, and personal functioning as it relates to the delivery of professional services. Informal feedback will be given on an on-going basis.

G. The training program will provide interns the opportunity to formally evaluate and provide feedback to the training program and supervisors. The opportunity to provide written evaluations of supervisors will occur at the end of each supervision cycle. Intern evaluations of the program will occur following the initial training activities (i.e., September orientation) and again at the end of the year. Interns will evaluate training seminars weekly. In addition, interns are encouraged to give informal feedback during supervision, meetings with the Training Director, and at any other appropriate time.

H. The training program will provide mechanisms and a process by which inappropriate behavior affecting professional functioning is brought to the attention of the intern. The training program will maintain internal procedures, including grievance and due process guidelines, as well as a formal remediation plan to address and remedy perceived concerns as they relate to interns professional standards, competency, and functioning.

I. The training program will maintain ongoing communication with the interns’ graduate departments regarding progress during the training year.

J. The training program will permanently maintain appropriate records to assist interns in the licensing process. Intern file contents include:

- Acceptance letter
- Completed intern evaluation forms
- Due Process/Grievance notes (if applicable)
- Written correspondence with academic program
- Case presentations (with identifying information deleted)
- Work samples, e.g., Outreach presentation, consultation project (if applicable)
- Record of hours
- Copy of Certificate of Internship Completion
Intern Responsibilities to the Training Program

A. Interns have the responsibility to maintain behavior within:
   1) the scope of the APA ethical guidelines for psychologists;
   2) the laws and regulations of the State of Washington;
   3) the regulations for professional staff of the University of Washington Tacoma; and
   4) the policies & procedures of the Division of Student Affairs and Counseling & Psychological Services.

B. Interns have the responsibility to be open to professionally appropriate feedback from supervisors, professional staff, and agency personnel.

C. Interns have the responsibility to act in a manner that facilitates professional interaction within CAPS and is in accordance with the standards and expectations of the agency.

D. Interns have the responsibility to provide professionally appropriate feedback regarding all aspects of the training experience, including but not limited to: supervision, seminars, provision of individual and group therapy, outreach programming, consultation experiences, and any emphasis area interns may select.

E. Interns have the responsibility to participate actively in all aspects of CAPS programs, including clinical activities, seminars, case conferences, staff meetings, outreach activities, center demands beyond training requirements, and professional development activities. Active participation includes, but is not limited to: arriving promptly, demonstrating preparedness (e.g., completing assigned readings in advance of seminars, presenting knowledge of client progress and concerns in supervision), turning in assignments (e.g., clinical notes, summary of hours, evaluations) on time, engaging in active listening, asking relevant questions, and contributing to discussions.

F. Interns have the responsibility to meet training expectations by developing the internship training competencies and meeting other training goals specifically identified and mutually agreed upon by the intern, supervisor, and Training Director.

Direct Clinical Service

COVID-19 Remote Services

It is unknown whether the direct services offered in 2021-22 will include remote services due to the COVID-19 pandemic. As such, the following clinical services are described as they take place in-person, followed by any changes that have been implemented for teletherapy or remote operations. Rest assured, there are written protocols for everything from how to record and save a session using Zoom, to what information to collect during a first session with a client. Teletherapy training and practice with staff are required prior to seeing clients via Zoom. Supervisors are experienced with (and provide training on) joining a Zoom session, if needed, in a crisis situation; completing a Safety Plan with a client using Zoom; and responding via phone to trainees’ consultations while they are meeting with students online. Attending Zoom
meetings or sessions can be exhausting. Staff/supervisors are aware of this and are as flexible as possible regarding expected service hours for remote operations.

It is important to our team that we all stay connected to one another while working remotely. Some remote work may occur from home, while other remote work may involve seeing clients via Zoom from the CAPS office, though not all providers will necessarily be in the office at the same time, due to physical distancing guidelines. During remote operations, all staff meet weekly on Zoom for staff meeting, and various staff see one another online during training seminars and supervision meetings. Staff use Microsoft Teams to communicate with one another on a daily basis during remote operations. The use of this platform helps us feel more like we are popping into one another’s offices to say hello or to ask for consultation, and it helps keep our email free for communication that is not as social or time sensitive.

**Initial Assessment and Intervention (Drop-in)**
Drop-in services are offered regularly throughout the week; 3 hours each Monday through Thursday, 11am-2pm or 12pm-3pm. No appointment is needed for students to use the drop-in services. The interview typically lasts 30 minutes and is done in a triage format. The purpose of the drop-in interview is to provide students with a prompt mental health consultation resulting in appropriate recommendations. For students whose needs may be best met by a community provider or other campus or community service, appropriate referrals are made. If referred for in-house services, students typically leave with a next appointment scheduled, preferably within about one week. During orientation, interns first observe and then assist senior staff during their drop-in times. After an initial period of training, interns are assigned a three hour drop-in block each week to gain experience with initial assessment and intervention, crisis assessment and intervention, and referral. Interns are encouraged to consult as needed with the senior staff supervisor who is assigned to provide backup during their drop-in coverage. The supervisor is also available to take overflow clients during periods of high volume.

When staff provide remote services via HIPAA compliant Zoom, drop-ins are scheduled by the Program Coordinator in response to calls or emails from students. One hour (rather than 30 minutes) is allotted for each appointment to account for providing information about teletherapy, prompting clients to complete any forms they may have missed, and handling any potential technical difficulties.

**Crisis Assessment and Intervention**
Interns gain experience with crisis assessment and intervention during their drop-in coverage (there is no after-hours emergency coverage). Trainings regarding suicide and homicide risk and prevention, as well as safety planning, are provided during orientation. Students may also present in crisis outside of drop-in hours, at which time they may be seen as soon as a senior staff member or intern becomes available. Interns also gain experience with crisis assessment and intervention through their own caseloads, as they monitor suicidal ideation or other risk among their individual clients.
In keeping with our practitioner-developmental model of training, supervisors are involved in crises as a first line of consultation for interns, providing support as needed, from step-by-step assistance early-on in training (and potentially joining trainees in session) to eventually providing support and any needed direction as a consultant.

When staff provide remote services, students who communicate with the Program Coordinator that they are in crisis are scheduled as soon as possible with the next available provider.

**Provision of Individual Therapy**

Interns provide therapy to students who present with a wide range of issues such as mood disorders, anxiety disorders, interpersonal relationship problems, grief and loss, suicidal ideation, trauma, identity and self-esteem, substance abuse concerns, eating disorders, and personality disorders. Typically, all students receive preliminary assessment through the drop-in service. Students who participate in individual therapy at CAPS are further assessed and diagnoses are made during their First Session with their assigned provider. CAPS uses an intentional model for individual therapy. Rather than setting session limits, clinicians work with clients in a purposeful manner to meet identified therapy goals. Clients are typically seen weekly or every other week. If students opt in, they are also sent a text reminder of their appointment (this also applies to group therapy).

Individual therapy is provided (and recorded by trainees) via Zoom during remote services. Each clinician uses their own HIPAA compliant, private Zoom **Personal Meeting Room**. When clients arrive, they will enter the **Waiting Room** and you are alerted via the **Participants** tab. Much like in-person waiting rooms, you can be logged into Zoom and preparing for session or finishing a meeting with your last client while the next client is waiting. The next client cannot see or hear you, and you cannot see or hear them, but they do receive a message that Zoom is waiting for the host (that’s you) to start the meeting, and your name appears so they know they’re in the right place. Once you are ready for them, and your last client has exited, click to allow them in and get the session started. One handy aspect of the Personal Meeting Room is that the link students use to access therapy with you is always the same (but don’t worry, the Program Coordinator resends the link and instructions the day before every therapy session).

**Provision of Group Therapy**

Interns co-facilitate a therapy group during the autumn, winter, spring, and/or summer quarters, as demand allows. During orientation, interns have an opportunity to choose from several group facilitation opportunities. Interns are paired with a member of the senior staff to co-lead group in the autumn and winter quarters. Depending on their competency in group facilitation, interns may co-lead a group with another intern during spring and/or summer quarters. Interns may develop a group based upon their individual interests for the spring and/or summer quarter, if such a group meets the...
center’s needs. All groups (including those only facilitated by senior staff) are recorded for the purpose of discussion during Supervision of Groups.

Students are allowed to participate in either individual or group therapy, but not both concurrently. For the most part, group members are referred to group after completing at least one quarter of individual therapy. This helps prepare them for the group experience and can help to deepen group conversation more quickly, which can be important when operating on the academic quarter system whereby groups tend to meet for 7-10 weeks. Common group offerings include Understanding Self and Others (interpersonal process for any/all students), Men’s Group (interpersonal process for students who identify as men), and the psychoeducational group Build Your Social Confidence, for those with social anxiety to learn and practice skills through various structured activities.

During remote operations, interpersonal process groups and psychoeducational groups are co-facilitated by senior staff and interns using Zoom. The curriculum for Build Your Social Confidence has been revised from its original in-person format for use online.

Providing Supervision

Facilitating Practicum Seminar
Interns are responsible for co-facilitating a one-hour seminar for CAPS practicum trainees. The practicum program is a 9-month training experience for two doctoral students in counseling or clinical psychology programs. Because University of Washington does not have a clinically-focused doctoral program in psychology, our practicum trainees come from other universities in the region. We require these students to have at least one year of clinical experience before joining us so that they can jump right into the work with our unique student population (providing individual therapy and occasional outreach).

In the state of Washington, where a postdoctoral training year is not required for licensure in the state (so long as other requirements are met), students typically opt to obtain a “practicum” (first clinical training experience) and then a “preinternship” (advanced/additional clinical experience) before applying for the doctoral psychology internship. If students meet the requirements for each of these, they may be eligible to obtain licensure without completing postdoctoral supervised hours. In order for CAPS to attract strong candidates for our practicum training and ensure that our trainees have already completed some clinical training, we technically offer a pre-internship. Thus, we follow the state guidelines for the pre-internship described in Washington Administrative Code (WAC) 246-924-053.14 We simply call it practicum out of habit and history (we all completed our doctorates in other states so this language is new to us)!

There are specific requirements for doctoral students to meet if participating in a bona fide preinternship, one of which involves being supervised primarily by a licensed psychologist. This makes it challenging to involve interns in the supervision of practicum
trainees. Thus, we offer interns the experience of facilitating a weekly seminar that fulfills the requirement of “other learning activities such as case conferences, seminars on applied issues...and group supervision.” This intern-led seminar involves some flexibility in its content, e.g., presentations and facilitated discussion on relevant training topics, formal case presentations by practicum trainees, and group supervision. A senior staff member supervises the interns on this training experience.

When working remotely, the weekly practicum seminar is provided via Zoom.

Receiving Supervision

Individual Supervision
Supervision is one of the primary tools utilized to assist interns in their training and development. As such, it is an important focus of the internship experience. Interns receive two hours of weekly individual supervision from a Licensed Psychologist. For licensure purposes, some states require that interns receive supervision from a psychologist who has been licensed for at least two years. Thus, all individual supervisors at our site meet this criterion. The supervisor is responsible for overseeing the intern’s caseload, signing off on the intern’s drop-in and individual therapy notes, and providing clinical supervision. Interns and supervisors maintain secure, private, shared access to the intern’s client list (which the trainee updates weekly) as well as the intern’s videos of individual therapy (which the intern deletes after supervision each week).

Supervisors assume the liability and professional responsibility for the clients with whom the intern works. Thus, acceptance of a particular client onto an intern’s caseload is up to the discretion of the intern’s individual supervisor. Agency demands and availability of particular client characteristics also influence disposition of clients to an intern’s caseload.

During remote operations, individual supervision is provided via Zoom. Through screen sharing, session recordings can be viewed and discussed, much as they would during in-person supervision. There is also a secure folder for coordinating signatures on any client correspondence (e.g., release of information, letter for hardship withdrawal) and the Program Coordinator is available to assist with this, including uploading a copy to the client file.

Individual Supervisor Assignments
During orientation, interns meet as a group with each individual supervisor to discuss supervision styles, theoretical orientations, expectations for supervision, and any clinical interests. Interns discuss their supervisory preferences for the year with one another and communicate their preferences to the Training Director who consults with staff for the supervisory assignments. Each intern is supervised by at least two different psychologists during the course of the year.
Supervision of Groups
Interns and their co-facilitators meet for Supervision of Groups for one hour weekly. Supervision of Groups is facilitated by the Groups Coordinator, who is a Licensed Psychologist. At these meetings, discussions focus on group processes and related theory and to presenting video recording of group sessions. The group supervision format enhances training by exposing interns to a variety of group types, facilitation styles, and client presentations. It also provides interns with practice giving peer feedback related to clinical intervention. Those co-facilitating psychoeducational groups may be asked to meet additionally for planning purposes.

When working remotely, Supervision of Groups occurs via Zoom, and recordings are watched using screen sharing.

Case Conference
A one hour case conference is scheduled weekly for case presentations by interns and senior staff. A senior staff psychologist presents a case once every four meetings and facilitates a discussion among the interns. Interns are then scheduled in the subsequent two meetings to present case presentations with the same senior staff member in attendance. On the fourth week, all staff and interns are invited to attend All Staff Case Conference, bringing cases they would like to discuss in a case consultation format. The Intern Case Conference is designed to allow interns the opportunity to receive peer supervision of their clinical work along with feedback from a senior staff psychologist. It also gives interns an opportunity to have regular contact with a variety of senior staff psychologists. All Staff Case Conference provides interns with exposure to an even greater variety of client cases.

Intern case presentations include a written report with specific elements outlined, such as client demographics, presenting concerns, therapy goals, diagnostic information, theoretical discussion, the appropriate application and interpretation of one or more assessment instruments (e.g., CCAPS), as well as exploration and discussion of multicultural factors. A research component is also included, as interns cite at least one scholarly article and describe its relevance to the case. The written report is accompanied by a selected portion of session recording of no less than 5 minutes. In contrast, senior staff case presentations are typically oral only, as senior staff are not expected to present a written report or to record their sessions.

Early in winter quarter, in preparation for post-internship employment interviews, interns will present a formal case presentation (that includes PowerPoint) to all senior staff. This is meant to simulate the kind of experience that is typically required for university counseling center interviews. Staff provide support and constructive feedback with the hope that what is learned helps the interns land their dream job!
As with other activities, Zoom is utilized for Case Conference presentations and for All Staff Case Conference. A private shared folder is available for staff to access the interns’ written reports in advance, and screen sharing is used to show the video recording.

**Supervision of Practicum Seminar**
Interns meet weekly with a senior staff supervisor for supervision of their facilitation of the practicum seminar. During this time, interns reflect on their skills, competence, and experiences facilitating the seminar; read about and discuss various models of supervision; obtain clinical supervision-of-supervision in response to practicum case presentations or clinical discussions; and engage in planning for future seminars.

**Training Seminars**

**Clinical and Professional Topics Seminar**
This seminar meets for one and a half hours weekly throughout the year. The seminar explores various professional topics and provides training in several clinical areas. Clinical training topics may include: diagnosing and treating anxiety disorders, providing process oriented group therapy to university students, reviewing APA guidelines for clinical practice with specific populations, and mindfulness and attunement in psychotherapy. Examples of professional topics include: presenting select outreach topics to university students, ethical and professional conduct, and preparing for the EPPP. Multicultural factors will be incorporated into each presentation. Some seminars may be conducted jointly with interns from another university, either in-person or using Zoom. Seminar facilitators may come from CAPS or another office at UW Tacoma, from the Tacoma community, or from across the country from another university or private practice. In the latter case, Zoom is used for conducting the seminar.

All seminars conducted during remote operations utilize Zoom.

**Multicultural Seminar**
This seminar meets for one and a half hours weekly throughout the year. It focuses on various multicultural topics and promotes self-exploration and the development of cultural humility. Example topics include: introduction to the multicultural orientation model; introduction to diversity, equity, and inclusion in American higher education; suicide prevention for LGBT youth; multicultural considerations in group therapy; awareness of implicit bias; addressing weight and size stigma, working with conservative religious clients who experience same-sex attraction, and the impact of schemas and insecure attachments on depression in Latinx students. Relevant movies and documentaries are also utilized for this seminar, followed by facilitated discussion.

This seminar is conducted via Zoom during remote operations.
Other Weekly Training Activities

Staff Meetings
All staff and interns attend this weekly meeting designed to communicate items of interest or concern related to Counseling & Psychological Services. Any staff member may place an item on the agenda to be discussed by emailing the Director. One common topic is how many openings each intern/clinician has to take on new clients. As Staff Meeting occurs every Wednesday morning, clinicians may wish to review their caseloads on Tuesday in preparation for this discussion.

When working remotely, staff meeting occurs via Zoom.

Intern Processing Time
Interns schedule one hour every other week to form their own self-led support group to process their internship experiences throughout the year. Interns are encouraged to schedule this time around a lunch hour in order to have up to two hours to meet each time. Interns may use the time in any way they like, such as going off-site for lunch, exploring the area, playing games, making crafts, watching movies, or otherwise spending time bonding. Interns are encouraged to use their processing time to discuss and resolve any conflicts that arise between them. The Training Director is also available for mediation if needed.

Alternative plans may be made for intern processing time when working remotely, such as talking via phone (given Zoom fatigue), playing an online game, or other creative ideas. Interns may consult with the Training Director about what options work best for them.

Session Recording
Interns are expected to video record their individual and group therapy sessions in order to enrich the training experience. Individual therapy recordings are reviewed during individual supervision and group therapy recordings are viewed during supervision of groups. Following supervision, it is the intern’s responsibility to ensure the recordings are deleted. Interns may save recordings for use in case conference and related consultation, but no recordings should be saved longer than one quarter. Interns are encouraged to review their video recorded sessions in advance of supervision in order to identify areas on which to focus during supervision. In the beginning of the training year, interns are required to video record every client at every session. Subsequent changes to recording procedures may be made at the discretion of the individual supervisor and Training Director.

Research (or Dissertation/Scholarly Activity)
Interns may demonstrate competency in this area in a number of ways. The two hours per week allotted to dissertation/scholarly activity/research may be used for dissertation-related work (e.g., research, writing, defense preparation, or consultation
with instructors/advisors), scholarly inquiry into topics relevant to interns’ clinical caseloads (to be presented in case conference or supervision), review of literature used in building outreach presentations, giving a poster or presentation at a regional or national conference, working toward publication of an article or the dissertation, or similar activities. This time cannot be used for commencement exercises, for which annual leave time is required.

**Administrative Time**
Time is provided for other activities such as completing clinical notes and paperwork, reviewing session recordings, case management, and completing any readings assigned for seminars.

**Additional Training Activities**

**Orientation**
The internship year begins with a comprehensive, structured two- to three-week orientation to the internship. The orientation is designed to welcome interns and begin to integrate them into Counseling & Psychological Services. Interns are introduced to the CAPS mission and values and are informed about the training program’s model, aims, competencies, service and training activities, administrative details, and referral sources. During orientation, each intern will complete a self-assessment which will assist in formulating training goals for the year.

The orientation program is developed and coordinated by the Training Director with input and participation from the staff. Orientation is an ongoing process, and interns are encouraged to consult with their supervisors and/or any senior staff member throughout the orientation period and the internship year.

**Outreach**
The outreach work of CAPS is considered an essential service. The Outreach Coordinator is responsible for handling outreach requests, communicating outreach opportunities to the staff, maintaining an updated database of presentations, and posting relevant CAPS activities, such as available groups and workshops or self-care tips, to our social media. Our staff provides outreach to the UW Tacoma campus consistent with demonstrated need and requests. Outreach topics include, but are not limited to: introduction to our services, responding to distressed students, managing stress, coping with imposter syndrome, and improving sleep quality. CAPS frequently collaborates with departments across campus in order to provide pertinent outreach and best meet the needs of our students.

Interns are expected to engage in all forms of outreach, including the design, implementation, and evaluation of effective outreach programs in response to campus requests. Interns are required to participate in all tabling events prior to the start of classes. Interns participate in at least two outreach activities per quarter other than
tabling events. Interns are welcome to observe outreach presentations during orientation or early in the year prior to participating themselves, depending on their level of experience and comfort. Next, interns pair with a senior staff member to co-facilitate outreach presentations. Eventually, interns are expected to either present on their own or assume the lead role. If, after completing the requirements, an intern’s skills in this area do not meet minimum competency requirements, an intern may be assigned additional outreach presentations to help develop these skills.

Student organizations and various campus offices have moved orientations, resource fairs, and other types of outreach requests to the Zoom platform during remote operations.

Consultation

**Faculty, Staff, Parents, and Other Students**
During the interns’ drop-in coverage and at other times, they may be asked to consult with faculty, staff (including Student Affairs partner offices), parents, or other students concerned about a UW Tacoma student (or client). These consultations involve communicating the limits of confidentiality, actively listening to concerns, providing information about how to refer a student to CAPS or to crisis resources, sharing other area resource information, and making recommendations about how to approach difficult conversations such as referring a student for counseling services. Interns then follow up with appropriate documentation.

**Off-site Providers**
Interns are encouraged to consult with students’ current psychiatric and/or medical providers to coordinate care, when relevant to their clients’ well-being. Interns may also consult with past mental health providers when a student transfers their care to CAPS. Interns are encouraged to discuss such consultation in advance with their supervisors. In all cases, appropriate releases of information from the student are required.

**Campus Office or Student-Serving Community Agency Project (Optional)**
Interns with a special interest in a particular campus office (e.g., Veteran & Military Resource Center, First Generation Student Initiatives, Residence Life, Center for Equity & Inclusion) or a community agency that regularly serves UW Tacoma students (e.g., The Rainbow Center, Rebuilding Hope Sexual Assault Center for Pierce County, Comprehensive Life Resources) may speak with the Training Director about approaching that office/agency to inquire about a potential consultation project. Typically such a project would include identifying a point person at the agency, performing an assessment of the agency’s needs, agreement with the agency upon a need for the intern to target, development and delivery of a way to address the need (i.e., a product such as an educational/informational initiative, a database or collection of information,
research pointing to best next steps, etc.), a plan for continuity of the project after the intern exits the internship, and an evaluation of the consultation project by the agency point person and the CAPS supervisor.

Additional supervision dedicated to a consultation project may be scheduled according to staff expertise/availability or incorporated into the intern’s individual supervision, if relevant. It is recommended that a consultation project be started no later than November of the internship year in order to allow sufficient time to establish a relationship with the partner office. The CAPS office is also a potential site for a consultation project (e.g., during the COVID-19 pandemic, interns consulted with the CAPS Groups and Outreach Coordinators to develop and co-present Zoom workshops focused on helping students cope with stay-at-home orders).

Although remote services may complicate some aspects of communication regarding the types of consultation described above, we try to be flexible and so far have not encountered significant barriers in this area.

Meetings with the Training Director
The Training Director meets with each intern individually on a regular basis to informally check in about how the internship training is meeting their needs and to solicit feedback about the training program. The Training Director keeps an open door policy and interns are encouraged to meet informally and/or request additional meetings to focus on training concerns.

These meetings also take place via Zoom when working remotely.

Professional Development
Release time for the dissertation defense is included in interns’ benefits; interns do not take annual leave for this milestone. Professional development release time may also be available for interns to attend workshops and conferences. Some funding also may be available, but is not guaranteed.

Summary of Core Training Experiences
We are always making improvements to our training program. As such, the following list is an estimate of the time allotted to each activity and is subject to change.

Direct Clinical Service: 23 hr/wk
3 hr/wk Drop-in/Crisis
20 hr/wk Individual Therapy, Group Therapy, Group Screenings

Providing Supervision: 1 hr/wk
1 hr/wk Facilitating Practicum Seminar
Receiving Supervision: 5 hr/wk
- 2 hr/wk Individual Supervision
- 1 hr/wk Supervision of Groups
- 1 hr/wk Case Conference
- 1 hr/wk Supervision of Practicum Seminar

Training Seminars: 3 hr/wk
- 1.5 hr/wk Clinical and Professional Topics Seminar
- 1.5 hr/wk Multicultural Seminar

Other Weekly Training Activities: 8 hr/wk
- 1 hr/wk Staff Meeting
- 0.5 hr/wk Intern Processing Time
- 2 hr/wk Research
- 4.5 hr/wk Administrative Time

Additional Training Activities: Varied
- Orientation
- Outreach
- Consultation
- Meetings with the Training Director
- Professional Development

Total: Average 40 hr/wk

Notes for core training experiences:
- Minimum 500 direct clinical service hours for the year. Can be flexible in what counts as direct service according to APPIC during COVID-19 pandemic.
- For drop-in, only count actual clients seen, not coverage time.
- Outreach requires minimum of 2 presentations per quarter; 8 per year.
- Outreach can be counted as direct service in WA but to ensure sufficient hours for all states, outreach is considered an additional training activity for this internship.
- In all their direct clinical service activities, trainees must work with a variety of clients and presenting concerns.
- Interns must attend and participate in a minimum number of training seminars and activities throughout the year.

See below for example of intern weekly activities.
# Example of Intern Weekly Activities

<table>
<thead>
<tr>
<th></th>
<th>Autumn (Sep-Dec) Hrs/wk</th>
<th>Winter (Jan-Mar) Hrs/wk</th>
<th>Spring (Apr – Jun) Hrs/wk</th>
<th>Summer (Jun – Aug) Hrs/wk</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Direct Clinical Service</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drop-in</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Individual Therapy, Group Therapy, Group Screen</td>
<td>20</td>
<td>20</td>
<td>20</td>
<td>20</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>23</strong></td>
<td><strong>23</strong></td>
<td><strong>23</strong></td>
<td><strong>23</strong></td>
</tr>
<tr>
<td><strong>Providing Supervision</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Facilitating Practicum Seminar</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1</strong></td>
<td><strong>1</strong></td>
<td><strong>1</strong></td>
<td><strong>1</strong></td>
</tr>
<tr>
<td><strong>Receiving Supervision</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual Supervision</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Supervision of Groups</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Case Conference</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Supervision of Practicum Seminar</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>5</strong></td>
<td><strong>5</strong></td>
<td><strong>5</strong></td>
<td><strong>4</strong></td>
</tr>
<tr>
<td><strong>Training Seminars</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clinical and Professional Topics Seminar</td>
<td>1.5</td>
<td>1.5</td>
<td>1.5</td>
<td>1.5</td>
</tr>
<tr>
<td>Multicultural Seminar</td>
<td>1.5</td>
<td>1.5</td>
<td>1.5</td>
<td>1.5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>3</strong></td>
<td><strong>3</strong></td>
<td><strong>3</strong></td>
<td><strong>3</strong></td>
</tr>
<tr>
<td><strong>Other Weekly Training Activities</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff Meeting</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Intern Processing Time</td>
<td>0.5</td>
<td>0.5</td>
<td>0.5</td>
<td>0.5</td>
</tr>
<tr>
<td>Administrative Time</td>
<td>4.5</td>
<td>4.5</td>
<td>4.5</td>
<td>5.5</td>
</tr>
<tr>
<td>Research</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>8</strong></td>
<td><strong>8</strong></td>
<td><strong>8</strong></td>
<td><strong>9</strong></td>
</tr>
<tr>
<td><strong>Additional Training Activities</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Orientation</td>
<td>Varied</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outreach</td>
<td>Varied</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consultation</td>
<td>Varied</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meetings with the Training Director</td>
<td>Varied</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td><strong>40+</strong></td>
<td><strong>40+</strong></td>
<td><strong>40+</strong></td>
<td><strong>40+</strong></td>
</tr>
</tbody>
</table>
Duration and Stipend
The 2,080 hour full-time internship begins September 1 and ends August 31. This Professional Staff Temporary Position (PSTP) is paid $35,568 annually ($2,964 monthly) and is benefits-eligible (see below).

Benefits, Time Off, and Holidays
The full-time internship is benefits-eligible and accrues leave according to the Professional Staff Program. Benefits include dental insurance, disability insurance, health insurance, and life insurance. Professional staff also participate in the University’s holiday schedule (10 Washington State-recognized holidays annually), accrue sick and vacation time off, and receive an annual personal holiday. Specifically, interns:

- are allotted 1 personal holiday (to be taken at any time during the year with supervisor approval).
- accrue 10 hours of vacation per month of completed employment (totaling 120 hours or 15 days of vacation annually). Vacation may be taken following the first month’s accrual.
- accrue 8 hours of sick leave per month of completed employment (totaling 96 hours or 12 days of sick leave annually). Sick time off accrues at the end of the month in which it is earned and is available for use the following month.
- are allotted 5 days of professional leave (e.g. to defend a dissertation or attend professional meetings and conferences).

Please note that the number of hours of vacation listed in the Summary of Benefits for Psychology Interns document (i.e., 11 allotted vacation days per year) is incorrect. All of the above information has been verified by UW Tacoma Human Resources.

Due Process and Grievance Procedures
Staff and interns are encouraged to discuss and resolve conflicts informally. However, if this cannot occur, the Due Process Procedures for Training Staff and Grievance Procedures for Doctoral Psychology Interns documents provide formal mechanisms and guidance for CAPS and trainees to respond to issues of concern. The documents are available from the Training Director, included in the Intern Manual, and reviewed during September orientation.

Notes