The Psychology Internship Development Toolkit (Internship Toolkit or toolkit) was envisioned by CCTC to assist psychologists with information about developing internships in professional psychology. CCTC is composed of training councils in professional psychology, and therefore the vision for the toolkit was broad-based and designed to partially address concerns with the current internship imbalance. The original toolkit was compiled and developed by a work group of CCTC, and it was available on the CCTC website in February 2010. The original work group committee consisted of the following psychologists (listed in alphabetical order):

- Sharon Berry, PhD
- Clark D. Campbell, PhD (Chair)
- Kathlyn Dailey, PhD
- Luli Emmons, PhD
- Catherine Grus, PhD
- Philinda Hutchings, PhD
- Lorraine Mangione PhD
- Roberta Nutt, PhD
- Wayne Siegel, PhD

The original authors were asked by the CCTC to revise the toolkit and request participation by representatives from additional training councils. In the spring of 2013 the following psychologists were added as authors of the revised toolkit:

- Kevin Antshel, PhD
- Rupal Bonli, PhD
- Jenny Cornish, PhD
- Mike Vanderwood, PhD

Together, these psychologists represent several groups* that participate in CCTC and have a vested interest in professional education and training in psychology.

The toolkit is intended to provide resources that can be used to facilitate institutional and financial support for creating and expanding internship programs. The revised toolkit adds new information, deletes outdated information, and provides updated web links to various resources. The work group members are committed to the development of quality internships in professional psychology, and because of this commitment to our students and the profession we collaborated in providing significant and sustained energy to complete this revision in a timely manner. Our hope is that the toolkit will help ameliorate the imbalance between the numbers of
students seeking internships and the number of available positions, and thereby serve the public and profession effectively.

The framework of the toolkit is organized around individual sections, each of which represents a core component related to the structure of an internship program. The sections address the following topics:

- Rationale for Developing Internships
- Settings and Structures
- Funding
- Administrative issues
- Legal and Ethical Issues
- Quality Assurance Mechanisms
- Mentoring Resources and Emergency Recovery Procedures

Although the toolkit is designed as a whole document, it is structured so that each section can be accessed and used independently. Several of the embedded links to websites in the revised toolkit will provide additional information.

Disclaimer: Much of the information contained in the toolkit is a compilation of existing resources. However, it has been developed and arranged in a manner that should facilitate easy use by those professionals interested in creating an internship in professional psychology. The reader is encouraged to follow web links to other documents in order to obtain additional information about specific areas. As a living document, the toolkit will need to be updated from time-to-time so that it is relevant and current. We believe that the CCTC will assure this updating process.

* The authors represent the following groups, which participate in the Council of Chairs of Training Councils:

  - American Psychological Association (APA)
  - Association of Counseling Center Training Agencies (ACCTA)
  - Association of Psychology Postdoctoral and Internship Centers (APPIC)
  - Canadian Council of Professional Psychology Programs (CCPPP)
  - Council of Counseling Psychology Training Programs (CCPTP)
  - Council of University Directors of Clinical Psychology (CUDCP)
  - National Council of Schools and Programs of Professional Psychology (NCSPP)
  - VA Psychology Training Council (VAPTC)
Introduction

Background

The availability of quality doctoral internships for students in professional psychology is one of the most significant issues being addressed by the education and training community at present. This Psychology Internship Development Toolkit (“Internship Toolkit”) represents one of a number of initiatives underway directly resulting from conversations by leaders in education and training about the imbalance between the number of students seeking doctoral internships and the number of positions available in the internship match. The purpose of the Internship Toolkit is to provide a comprehensive, easy to use, online resource for those seeking to create or expand accredited doctoral internship training programs. First developed in 2010, this version is updated to reflect advancements and other changes that have occurred since then.

The Internship Toolkit is a product developed by the Council of Chairs of Training Councils (CCTC). CCTC was created in the mid-1980’s as an umbrella organization that brought together leadership from education and training councils in professional psychology. While early in its inception CCTC focused on promoting communication between its members the last decade has seen a shift in focus to developing and disseminating resources to enhance education and training in professional psychology. Several members and liaisons to CCTC volunteered to develop both the original and revised versions of the Internship Toolkit in addition to efforts by several individuals from the training councils represented on CCTC. At the March 2012 CCTC meeting the original Internship Toolkit authors were encouraged to revise the document and include authors from other training councils. Following this meeting, the nine original authors and four new authors began work on this revision.

The concept of the Internship Toolkit originated at a meeting that occurred in September 2008 prompted by discussion by CCTC in late 2007 and early 2008 on the need for a focused, action oriented, conversation about the match imbalance. Specifically, this call was raised by those members of CCTC most impacted by the internship match imbalance. These included five doctoral training councils: the Council of Combined and Integrated Doctoral Programs in Psychology (CCIDPIP), the Council of Counseling Psychology Training Programs (CCPTP), the Council of Directors of School Psychology Programs (CDSPP), the Council of University Directors of Clinical Psychology (CUDCP), and the National Council of Schools and Programs in Professional Psychology (NCSPP) as well as American Psychological Association Education Directorate (APA), the American Psychological Association of Graduate Students (APAGS), and the Association of Psychology Postdoctoral and Internship Centers (APPIC). The meeting was co-convened by APPIC and the APA Education Directorate who covered general meeting expenses, while each of the groups was responsible for the travel expenses for their representative. One representative from each group attended and was empowered by their organization or unit with decision making capacity regarding actions their group was willing to engage in to impact the match imbalance. The meeting occurred over a one and a half day period at the end of which an agreed upon action plan had been developed. This Internship Toolkit represents one of eleven action steps agreed upon at the meeting.

Further, at the meeting the following core principles were agreed upon by the groups:
1. We have a collective responsibility for actions to address the match imbalance.
2. Collaborative efforts across the groups will benefit students and professional psychology.
3. Continuing attention to the match imbalance is required and necessitates the development of strategies that can be implemented in the short-, mid-, and long-term.
4. Any action designed to impact the quantity of positions must ensure that the quality of education and training experiences is maintained.

While these core principles underlay the development of this Internship Toolkit, item number four is particularly salient. It is the intent of the crafters of this document that doctoral internship training provide high quality experiences to students and that the resources contained within help programs in doing so. It is also hoped that the Internship Toolkit will assist programs in moving toward formal recognition of quality through such methods as accreditation by the American Psychological Association (APA) consistent with the recently approved APA resolution on accreditation that states:

“APA affirms that health service psychologists must be trained in APA/CPA accredited doctoral and APA/CPA accredited internship programs or programs accredited by an accrediting body that is recognized by the U.S. Secretary of Education for the accreditation of professional psychology education and training in preparation for entry to practice (APA, 2013).”

The gathering that occurred in 2008 to discuss the internship imbalance was repeated in 2012. The same organizations were represented although the individuals attending were different. The focus of the meeting in 2012 was to discuss additional actions that could be taken and affirm which of the action steps were of continued relevance. The internship toolkit was deemed such an item.

A Historic Perspective on Internship Training

The first widespread doctoral internships arose out of a need for psychologists to provide services to veterans of World War II. Financial resources from the federal government through the Department of Veteran’s Affairs were provided for training to develop the needed workforce. Federal support from the National Institute of Mental Health later provided large scale, additional, financial support for internships. However, federal support for internships has declined, consequently the economic structure of internships has dramatically changed. Complicating the reduced support from the government is the reality that many third party payer systems, including Medicare, will not reimburse for services provided by a psychology trainee.

Thus, as the number of doctoral internship positions has grown funding for such position has, of necessity, come from more diverse sources. At the same time, doctoral training in professional psychology has attracted more and more students at a rate that has been greater than the creation of new internship positions. Consequently, as early as the 1970s and continuing most years up until the present there has been an imbalance between the number of students seeking an internship and the number of available positions offered in the APPIC match. Considerable efforts have been devoted to decreasing this imbalance, however, it is difficult to determine what impact these efforts have had. Although both the numbers of available internships and applicants seeking internships continue to increase, growth in the number of
applicants exceeds creation of new internships. In the ten-year period from 2002 – 2012 the number of positions offered in the match grew by 16% (438), while the number of applicants increased by 44% (1,362). Specifically, 3,073 applicants were registered in 2002 and 2,752 positions were offered. In 2012, there were 4,435 applicants for 3,190 positions, although 426 of these individuals withdrew or did not submit rankings for the match. The results of the 2013 internship match were released on February 22, 2013 and a total of 3,094 applicants were matched. There were 957 (24%) individuals who did not match; this is 84 fewer than in the 2012 match. A total of 282 positions were unfilled in phase 1 of the match. The number of internship positions offered in the 2013 match increased by 186 from 2012.

**Goal of the Internship Toolkit**

The professional psychology education and training community has regularly expressed a commitment to quality internship training, and concerns are raised that the imbalance is resulting in students creating their own internships, which are of unknown quality. This highlights the need for resources such as this Internship Toolkit to assist in the growth of internship programs and positions that become part of established quality assurance structures in professional psychology.

The Internship Toolkit is intended to collect resources that can be used to gain institutional and financial support for creating and expanding internship programs. The framework of the Internship Toolkit is organized around individual modules, each of which represents a core component related to the structure of an internship program. The modules address the following topics; rationale for developing internships, internship settings and structures, funding, legal, administrative issues, quality assurance mechanisms, mentoring resources, and emergency recovery procedures. Although it is hoped that many will find the entirety of the toolkit useful, each section was designed to be a stand-alone source of information such that the user of the toolkit could readily access the specific information desired.
Rationale for Developing Internships

Concerns within the professional psychology education and training community over the significant imbalance between the number of students applying for internships and the number of internship positions available in the APPIC Match have led many doctoral programs and clinical service agencies to consider developing internship programs. Filling the obvious need for additional quality internships within the field is only one of the many reasons to consider developing an internship. There are numerous benefits inherent in creating an internship program including contributing to the field of psychology, diversifying and enlarging staff, providing opportunities for staff professional development, increasing service provision, recruitment and retention of staff, and improving the quality and fulfilling the mission of an agency.

Benefits

Benefit to the Profession and the Public. Internship provides the capstone experience in doctoral training in professional psychology and psychologists involved in that training have the opportunity to help improve the profession. In addition to providing needed internships for current and future graduate students, an agency that develops an internship can help maintain quality control within the profession by ensuring that psychologists entering the field are competent. The provision of quality internship training helps produce psychologists that will provide quality care to their patients/clients and carry on the goals and ideals of the profession.

Internships can serve both interns who are geographically bound and the communities they serve, which benefit from the continuity of care provided by these psychologists who will remain in the community post-licensure. The creation of an internship program in an agency with few psychologists also has the potential to secure jobs for psychologists. Some community agencies have begun to replace psychologist positions with master’s level positions. An internship program may provide an incentive for an agency to continue hiring psychologists if needed for supervision purposes. At the same time, the agency is training competent psychologists who will be able to move into such positions in the future.

Staff. The addition of an internship program to an existing organization can increase staff diversity in terms of demographic and cultural factors and expertise. This in turn may increase the number of professionals available to treat a specific population. For example, if an agency is interested in expanding its biofeedback services, but only has one provider competent to provide them, interns can be trained and supervised to expand the direct service hours in that area. Similarly, bilingual or multilingual interns may increase the ability of a clinic to provide services in a patient’s native language. A multidisciplinary agency with few psychologists could join a consortium and increase the scope of psychological services available by adding psychology interns. A university counseling center or adolescent treatment center might benefit from technologically savvy interns who understand how to effectively use social media to disseminate information to clients.

Interns are often energetic and excited about their work and can help staff reconnect with their own passion for the field of psychology. Having interns who can provide clinical services may also free up staff to do research, pursue other interests, or assume other tasks and roles.
within the agency. Additionally, an internship program provides the opportunity for an organization to “grow” its own professionals by creating a qualified workforce competent to provide services in the area specific to the internship site. One way for an agency to build a high quality longer term staff is to hire its own previous interns who have been trained well.

**Professional Growth and Development.** Training and supervising interns is frequently a professional growth experience for psychologists. Many have found the adage that the best way to learn something is to teach it to be true. Supervising interns keeps staff members on their toes and may lead them to strengthen their own competencies. Enhanced competencies, especially in the area of supervision, may be of benefit to psychologists as they advance within an agency or in their careers. Interns bring with them up-to-date knowledge of the field of psychology and the learning process can be reciprocal. It’s not uncommon with the swift growth in the use of technology that interns frequently know more in this area than agency staff. They also tend to be aware of the latest research, assessment tools and theoretical developments, thus inspiring staff to also stay current.

Becoming involved in the training and mentoring of the next generation of psychologists can help staff further develop their professional identities. They may also find that investing in the generative activities of supervision and training leads them to experience an enriched professional life.

**Service Provision.** Most psychology internships are housed in agencies or organizations which participate in the provision of clinical services. It is not uncommon for such agencies to experience more demand for services than they can meet. Psychology interns can provide quality services which expand the ability of an agency to serve its clients/patients. Developing an internship program is a cost-effective way of increasing staff and services in this tight economic climate. Interns typically arrive on internship with many prior hours of supervised clinical experience and are able to begin providing such services quickly.

**Quality.** An internship program, especially once accredited, can reflect positively on the agency which houses it. Being a recognized training site within the field is often viewed as a measure of quality of the agency itself and accreditation is frequently linked to grant funding eligibility (link to “Grants” in Funding section). This prestige may also lead to an increased ability to attract high quality staff to the agency. The process of developing an internship often has the additional benefit of strengthening an agency’s policies, procedures and processes as they are closely examined. Interns also bring new and creative ideas that can lead to improvements within the agency, such as new service offerings, innovative ways to market services, and more efficient clinic procedures.

**Mission.** The development of an internship program can assist an agency in fulfilling its mission, whether it includes service, research, or education and training. It is helpful to consider an organization’s mission statement when developing an internship program so that the internship both serves that mission and becomes integrated into the system.

**Making the Case for Developing an Internship Program**
It is a good idea to first gather information about what will be needed to create a successful, quality internship:

- Internship structure that will best fit your agency (link to section on Internship Settings and Structures)
- Number of interns
- Staffing to provide training and supervision
- Office space
- Technology
- Financial support

When looking at the costs of an internship program, look also at the financial benefits (cost-benefit analysis) (link to “Cost-Benefit Analysis” in Funding section):

- Number of hours of service provided by interns
- Cost of service provision by interns per hour vs. that of staff
- Hours of service provided by interns in relation to the hours of training/supervision provided by staff
- If interns can supervise practicum students at your site, you may also be able to add additional hours of therapy at little cost

Next determine what resources you already have and what additional resources are easily accessible:

- Licensed psychologists on staff qualified to supervise
- Other mental health professionals on staff that could serve in roles other than that of primary supervisor (e.g., seminar facilitator, group supervisor, seminar presenter)
- Nearby space that can be used or reconfigured or offices of part time staff that can be utilized/shared
- Salary of a staff member who may be resigning or retiring (to be redirected for stipends rather than staff replacement if adequate staffing already exists)
- Interests and expertise of staff to be incorporated into program
- Professionals in the community that would be willing to present one or more seminars
- Available grants to fund internship development and/or pursuit of accreditation (link to Funding section)

Outline the benefits of developing an internship program (see Benefits section above):

- Contribution to the profession by filling a need for internships, training the next generation of psychologists, and creating a qualified workforce
- Enhanced staff diversity and expertise
- Potential to free up current staff to take on new roles/tasks in agency
- Professional growth and enhanced competence of staff
- Increased service provision
- Prestige of agency and increased ability to attract quality staff
- Influx of new ideas

Enlist the aid of staff members who are in favor of developing an internship to assist in gathering and presenting this information to administrators.
Then What?

Developing an internship program may seem like a daunting task, but once in place it can be easily updated and improved as needed. Sites wishing to develop internships have access to assistance and resources from many sources – professional organizations, doctoral programs and other internship programs. Additionally, they can collaborate with potential partners to form a consortium internship, which may allow a site to pool their resources (funding, space, supervision, and training), to form one collective larger program. The remainder of this Internship Toolkit contains an abundance of useful information regarding the ways an internship can be structured, potential costs and sources of funding, legal and administrative issues, quality assurance, mentoring resources and additional tips for handling potential problems that might arise. We hope you will find developing an internship program to be an exciting and rewarding endeavor.
Internship Structures and Settings

In this chapter we provide an overview of structures, settings and extant types of internship training.

Internship training is meant to be “broad and professional in its orientation rather than narrow and technical” (APA Guidelines and Principles for Accreditation of Programs in Professional Psychology, January 2009 – G&P, Domain B). “CoA recognizes that there is no one ‘correct’ philosophy, model, or method of doctoral training for professional psychology practice; rather there are multiple valid ones.” Thus, the G&P do not discourage “experimentation, innovation and modernization” with regard to teaching methods or curricula and there is wide latitude for type of settings, populations served, and training opportunities within the structures outlined here:

APA Commission on Accreditation Guidelines and Principles:

The section on Structures describes organizational parameters recognized by the profession for internship programs. (Refer to the Toolkit section on Administrative Issues (link) for organizational details within the internship structure.) The section on Settings provides examples of major internship setting categories to illustrate a range and diversity of sites, including less traditional and emerging internship settings.

Structures

In Structures we consider: 1) duration and hours of training; 2) types of affiliation between the organized internship program and an academic institution or institutions; 3) types of internship governance; and 4) general administrative structure. Structural and administrative components must allow for depth, breadth and intensity of training appropriate for the internship level of training: more advanced than practicum and less specialized than postdoctoral training.

Duration and hours of training. The APA G&P stipulate that the doctoral program “requires of each intern the equivalent of 1 year full-time training to be completed in no less than 12 months (10 months for school psychology internships) and no more than 24 months” (See Internship Domain B. at http://www.apa.org/ed/accreditation/about/policies/guiding-principles.pdf). Therefore internships are organized as full-time one year or half-time two years in duration. Although both models are acceptable, and each has advantages and disadvantages, only a small percentage of accredited and APPIC member internships are half-time. Within either time frame, students are expected to accrue sufficient supervised professional experience hours to meet requirements of the jurisdiction(s) where they intend to become licensed. Internship hours required for state licensure currently range from 1500-2000 hours. APPIC Internship criteria require a minimum of 1500 hours within 9-24 months (http://appic.org/AboutAPPIC/JoiningAPPIC/Members/InternshipMembershipCriteria.aspx) See the Association of State and Provincial Licensing Boards Handbook on Licensing and Certification Requirements for specific jurisdiction requirements.
**Full-time.** The 1-year full-time internship is the principal model in doctoral training. The majority of internships in the U.S. and Canada are full-time, requiring at least 40 hours per week training for no less than 10 months (for school psychology internships) and no more than 12 months duration. In the full-time internship, students pursue clinical training either in the same geographic region or at a distance from their doctoral program. The pragmatic advantages for students and programs are clear: The student for whom the internship is a capstone of doctoral training and education, completed in a year, can proceed to graduate and to postdoctoral training and licensure. For the internship program and students, the full-time model may be most cost-effective and efficient.

**Part-time (Half-time).** The half-time internship has worked well as a training structure in some regions of the country and for specific programs and students. The half-time program is often set within a regional community of students, doctoral programs, and psychological service sites. Most of these internships have developed through extensive cooperation between educational institutions and local training sites. For some doctoral programs, the half-time internship is integral to a Psy.D. degree that integrates the internship with academic work (see “Doctoral Program Integrated Training Model” below). Although it may be possible to establish half-time internships within traditional full-time internship settings, this would create additional administrative challenges.

Full time and half-time internship components must be organized into a training program that is sequential, cumulative, and graded in complexity (G&P, I-R C-8). Completion of an Accredited Internship Training Program: Issue of Half-Time, Two-Year Internship Programs (Commission on Accreditation, 1987; revised 1998) clarifies how sequence of training ensures this standard in the half-time internship, with specific emphasis on doctoral program oversight of a two-year sequence in separate agencies each year:

*Accredited internship training sites may host interns on a full-time or a half-time basis. In either case, doctoral training programs in psychology need to ensure that the students’ overall internship experience is appropriate in terms of breadth, depth and focus. Internship agencies that accept half-time students also need to ensure the same, whether or not the student plans to be at the same agency for both half years. Thus, if a student plans to divide the total internship experience among two or more agencies, it is important that the sponsoring doctoral program, the intern, and the participating internship agencies have a mutual understanding of the students’ overall plan. Students engaged in half-time internship training will complete their programs within 24 months. In an accredited setting that accepts interns for half-time placement, both years should be completed at that setting for the intern to claim completion of an accredited internship. Internship training agencies must also make clear to the public that practicum students and others who use the setting for training are not completing an accredited internship.*


Structurally more similar to practicum than full-time internship, the half-time internship must be distinct from practicum in terms of training organization, trainee responsibilities and level of competencies expected. For details about the range and variety of half-time internship models, see Mangione, Borden, et al. (2006).
An example (but not necessarily a prototype) of an APA Accredited Half-Time Internship can be found at the following website:

- Carson Center for Human Services, Westfield, MA
  http://www.carsoncenter.org/employment/internshipinprofes/

**Affiliation between Doctoral Programs and Internships.** Three major types of affiliation between doctoral programs and internships have emerged in practice. These associations reflect the degree of administrative and academic integration between doctoral programs and internships: *Non-affiliated, exclusively affiliated, and partially affiliated.* Type of affiliation has no bearing on the internship status as a separate organizational entity meeting standards and criteria for accreditation and/or APPIC membership.

**No Affiliation with Doctoral Program**

*Non-affiliated Independent Training Structure.* Internships that function as part of an independent institutional setting. In this more traditional form of internship, described as Capstone Model, no course work, seminars or other training services are regularly provided by graduate program faculty. However, a graduate program may have been instrumental in developing the internship and may be used as a resource (see Mangione, VandeCreek, et al, 2006).

**Affiliation with Doctoral Program**

*Exclusively Affiliated* internships only admit students from a specific doctoral program. Historically referred to as captive or fully affiliated, graduate programs operate these internships for the benefit of their students. Students may or may not participate in the internship. These internships share a common decision-making structure at a higher level of authority within the doctoral program. (Mangione, VandeCreek, et al, 2006).

Examples of APA Accredited Exclusively affiliated Internships can be found at the following websites:

- Widener University Internship http://www.widener.edu/academics/schools/shsp/psyd/
- University of Denver Graduate School of Professional Psychology Internship Consortium http://www.du.edu/gspp/programs/consortium/ (Also see Cornish et al (2005) for a detailed description of how this program was organized).
- Massachusetts School of Professional Psychology Internship Consortium http://www.mspp.edu/academics/field-placement/internship-consortium.php
**Partially Affiliated.** Similar to exclusively affiliated, a partially affiliated internship arranges to hold some positions for students from an affiliated doctoral program, while leaving the remaining positions open to all applicants.

Examples of partially affiliated internships can be found at the following websites:

- University of Rochester -- University Counseling Center -- Three 2-year part-time positions are partially affiliated with the University of Rochester's doctoral program, meaning qualified UR candidates are ranked first.  
  [http://www.rochester.edu/UCC/training/predoc/index.html](http://www.rochester.edu/UCC/training/predoc/index.html)

- Marin County Health and Human Services – Two of six full-time positions are affiliated with the Palo Alto University Ph.D. Program in Clinical Psychology, Diversity and Community Mental Health Emphasis.  
  [https://www.marinhhs.org/mental-health-graduate-clinical-training-program](https://www.marinhhs.org/mental-health-graduate-clinical-training-program)

**Governance:** **Internship Placement in relationship to Academic Programs.** Three distinct configurations of internship organization are defined by the training and governance relationship between academic programs and internships:

- **Capstone Model.** A non-affiliated Independent training structure (as described above). Doctoral programs subscribing to this model view the internship as a culminating experience that serves to integrate practicum training and academic preparation (Cornish et al, 2005). Coursework is not taken concurrently. Students are required to complete coursework prior to commencing internship. Interns typically complete internships that are not affiliated with their academic program. The majority of psychology programs endorse the capstone model (Ducheny, in Kenkel & Peterson, 2009, p. 211).

- **Doctoral Program Integrated Training Model.** This model is characterized by the requirement that students take coursework in their graduate program concurrent with internship training (Mangione, VandeCreek, et al, 2006). Internship is integral to final years of the graduate curriculum and is typically half-time. These programs are fewer in number and are reviewed on a case by case basis by APPIC. This program structure has been controversial in terms of whether internship training can truly be integrated with academic requirements, especially as APPIC membership criteria require that the training is “post-practicum and pre-doctoral.” Distinguishing between practicum and internship training is particularly important for programs using an integrated training structure.

  For an example of an Integrated Training Model, see Illfelder-Kaye, & Knauss, L.K. (2009) description of the APA Accredited two-year half-time, exclusively affiliated integrated internship at Widener University:  

- **Allied/Shared Governance.** In addition to level of affiliation, integrated internships may have some form of shared governance with a doctoral program or allied training structure. The internship sites may be centrally or administratively coordinated by the doctoral program.
Training resources and didactic training may be shared between the doctoral program and sites. Mangione, VandeCreek, et al., (2006) provide a comprehensive overview of how integrated training can be organized and describe implications for accreditation and APPIC membership. For this type of program setting to meet APPIC criteria, there must be a training director on site for a minimum of 20 hours per week, and the Director of Graduate Training and Internship Training Director positions are separate.

**Administrative Structure.** An internship program may consist of, or be located under, a single administrative entity (institution, agency, school, department, etc.) or may be a consortium of several sites or involve collaboration of doctoral program and internship programs as stakeholders.

**Independent.** Defined above as a non-affiliated independent training structure, these internships function within an independent institutional setting. While students train at internships that are distinct from their academic program, the internship and doctoral program work together in a collaborative manner given that the internship is a requirement of the degree in professional psychology.

**Consortium.** A consortium is comprised of multiple independently administered entities that have established a formal agreement to share resources to conduct a well-rounded, comprehensive and unified training program (APA Guidelines and Principles, all Domains, but particularly Domains B, C, & F, [http://www.apa.org/ed/accreditation/about/policies/guiding-principles.pdf](http://www.apa.org/ed/accreditation/about/policies/guiding-principles.pdf)). Consortia are possible in the integrated, allied and capstone configurations. Consortia hold several advantages for internship development, notably fiduciary and shared resources. Sites that do not meet accreditation standards alone can be part of an APA accredited internship. A consortial partner (member entity) of an accredited consortium may not publicize itself as independently accredited unless it also has independently applied for and received accreditation.

The benefits of the consortium model include:

- Shared resources (ideas, staff members, financial) that can enable smaller sites, or sites with fewer licensed psychologists and/or ability to financially afford more than one intern to be part of an accredited consortium when otherwise they would not be able to sustain accreditation as an independent agency.

- As multiple agencies and psychologists are involved in a consortium, interns are exposed to more perspectives (e.g., theoretical orientations, treatment settings, client populations), training seminars, and role models than they would in a traditional single agency setting (Ilfelder-Kaye et al, 2009).

**Consortium Development**

Consortia require a formal written agreement between all programs involved in training. This agreement articulates:

- The rationale for the consortia partnership
- Each partner’s commitment to the training/education program, philosophy, model and goals
- Each partner’s obligations regarding contributions and access to resources
• Each partner’s adherence to central control and coordination of the training program
• Each partner’s commitment to uniform administration and implementation of the program’s training principles, policies, and procedures addressing trainee/student admission, financial support, training resource access, potential performance expectations, and evaluations.

http://appic.org/AboutAPPIC/JoiningAPPIC/Members/InternshipMembershipCriteria.aspx

In practice, consortia are challenging to administer and require the oversight of a skilled and dedicated Training Director. Challenges and issues include establishing:

• A common model, goals, objectives, and evaluation system
• Shared site policies and procedures. Sites initial differences may interfere with developing the common mission, goals and objectives of the overall consortium
• Communication between and input from site supervisors and the consortium TD
• Interaction between interns and input from interns into the program across sites
• Stipend equity across sites

Types of structures that are problematic and/or difficult to alter once established include:

• Independent sites that do not share a model or coordinating function;
• Fluctuating membership;
• Differences between APPIC membership and APA accreditation in terms of the hours of supervision.
• Sites within Consortia that either do not pay stipends or pay stipends that are different from the other sites.

Pitfalls in consortia programs reviewed by the Committee on Accreditation (Ilfelder-Kaye et al, 2009) include:

• Lack of program coherence: Lack of a true model and philosophy that guides the consortia program across all sites
• Inconsistent implementation of goals and objectives across all sites
• Inconsistent evaluation systems used to evaluate interns/postdocs and collect feedback and data about the program
• Lack of a truly functioning centralized training committee that directs and organizes the program
• Inconsistent policies and procedures for interns/postdocs located at different sites
• Inclusion of weaker sites in order to get a consortia off the ground and as a result having sites and supervisors that do not understand the consortia philosophy, goals and objectives or share the commitment to training, in terms of time, resources, attendance at training committee meetings, etc.
• Lack of quality control across sites in the consortia
• Public information that does not present the consortia program in a consistent, coherent and accurate manner
Sites considering a consortium model are advised to seek consultation from APPIC and the CoA.

Examples/links to of consortium models

- The Charleston Consortium Psychology Internship Training Program
  [http://academicdepartments.musc.edu/psychology_internship/index.htm](http://academicdepartments.musc.edu/psychology_internship/index.htm)

- Illinois School Psychology Internship Consortium
  [http://psychology.illinoisstate.edu/ispic/](http://psychology.illinoisstate.edu/ispic/)

- Boston Consortium in Clinical Psychology

Consortia that don’t rotate – intern stays at one site: training shared by several sites

  School-based internship experience in South Louisiana in geographic area in and around New Orleans. Up to 7 school districts, in partnership with the Human Development Center at LSU Health Sciences Center, provide opportunities to practice in urban, rural and/or suburban settings. The choice of training site (school district) is based on a mutual match between the intern's training goals and the opportunities available in the various sites.

Consortia that combine multiple experiences (populations, inpatient/outpatient, etc.) by rotating internships through several settings:

- Albany Psychology Internship Consortium Department: Albany Medical College, Department of Psychiatry -- [http://www.amc.edu/academic/PsychologyInternship/](http://www.amc.edu/academic/PsychologyInternship/)
  A generalist internship offered in a medical school, private general hospital, state hospital, and VA Medical Center consortium. All consortium sites within walking distance. Three, four-month rotations. Interns complete both outpatient and inpatient rotations. One elective (e.g., child and adolescent psychiatry, adolescent day treatment, primary health care, Veterans' Trauma Rehabilitation Program)

**Stakeholder Collaboration.** Doctoral programs or entities that agree to join forces to develop internships or internship positions within an existing internship. These collaborations could include clinical, counseling, or school psychology programs, PsyD and PhD programs, or doctoral programs in collaboration with community mental health agencies.

Unlike consortium arrangements, which involve more than one internship site, stakeholder collaborations are between doctoral programs, and agencies.

Example: Marin County Health and Human Services – Two of six full-time positions are affiliated with the Palo Alto University Ph.D. Program in Clinical Psychology, Diversity and
Settings

The G&P stipulate that the training institution has “among its primary functions the provision of service to a population of recipients sufficient in number and variability to provide interns with adequate experiential exposure to meet its training purposes, goals, and objectives” (G&P, B. Domain A).

There are no formal definitions for site types and settings. Sites are categorized by programs to best describe their institution, training emphasis, services and populations served. Many sites fit into multiple categories. In an overview of internship structures, Stedman et al (2005) note that traditional internship training prepares students for the delivery of individual psychotherapy to adult outpatients, followed by work with child, adolescent, low-income, and seriously mentally ill patient populations, group therapy and brief therapy, and to conduct assessments with some or all of those patient populations. Less traditional and newer categories in listings for internship training include HIV/AIDS, administration, public policy/advocacy, primary care, eating disorders, sex offenders, feminist therapy, etc. Therefore, examples listed in Addendum A are not comprehensive, but illustrate major categories of internship settings.
Structures and Settings Addendum A

Examples of Major Internship Setting Categories

**Child Psychology**
- Alfred I. duPont Hospital for Children
  [http://www.nemours.org/education/gme/psychology-programs/psychinternship.html](http://www.nemours.org/education/gme/psychology-programs/psychinternship.html)

**Community Mental Health**
- Aurora Mental Health Center
  [http://www.aumhc.org/internship-program-psychology.html](http://www.aumhc.org/internship-program-psychology.html)

**Correctional Facility**
- Atascadero State Hospital (Additional Agency Type: Correctional Setting)
- Federal Bureau of Prisons
  [http://www.bop.gov/jobs/students/psychology.jsp](http://www.bop.gov/jobs/students/psychology.jsp)

**Medical School**
- Kennedy Krieger Institute at Johns Hopkins University School of Medicine
  [http://www.kennedykrieger.org/professional-training/training-disciplines/behavioral-psychology/pre-doctoral-training](http://www.kennedykrieger.org/professional-training/training-disciplines/behavioral-psychology/pre-doctoral-training)

**Military Facility**
- Tripler Army Medical Center, Honolulu

**Private Hospital (General)**
- Lenox Hill Hospital

**Private Hospital (Psychiatric)**
- The University of Utah Neuropsychiatric Institute
  [http://healthcare.utah.edu/uni/internship/](http://healthcare.utah.edu/uni/internship/)

**State Facility**
- Atascadero State Hospital (Additional Agency Type: Correctional Setting)

**University Counseling Center**
- Kansas State University Counseling Services
  [http://www.k-state.edu/counseling/training/internship.html](http://www.k-state.edu/counseling/training/internship.html)

**Veterans Affairs**
- VA Palo Alto Health Care System
  [http://www.paloalto.va.gov/services/mental/PsychologyTraining.asp](http://www.paloalto.va.gov/services/mental/PsychologyTraining.asp)

**Other (Sites that do not fall into the usual categories):**
Community Health Center (Primary Care)
* Cherokee Health Systems, Knoxville, TN

Older Adult Mental Health (Geropsychology)

* Heritage Clinic, Center for Aging Resources, Pasadena, CA
  [http://www.cfar1.org/hctraining.html](http://www.cfar1.org/hctraining.html)
Structures and Settings Addendum B

References


Funding

Overview

Funding for internship training programs includes consideration of staffing (including training/supervision), office space, technology (computers, phones, recording equipment), and financial support (travel, support services, salaries, benefits). Traditional sources of funding for internship programs and intern stipends include department and agency operational budgets, revenue from service positions, grants, VA training fund, and others. In order to seek funding for internship programs and positions, consider investigating new or innovative sources of funding in addition to advocating for increased funding from traditional services. Most support for internship training has been provided by the agency offering the training program, but some non-traditional funding ideas might involve funding the intern regardless of the location or setting in which the training takes place. Some options for traditional and non-traditional funding are presented below, followed by guidelines and examples of cost/benefit analyses to support internship funding.

Operational Budget Funds

A variety of agencies are able to write support for internship training programs into their annual budget. Agencies such as university counseling centers, hospitals, and community mental health centers may devote funds to training psychology students. The Association of Counseling Centers Training Agencies (ACCTA) offers advice for those seeking agency funding to develop an internship. (link to Funding Addendum A)

Fee for service. All third-party payers set requirements for those individuals authorized for service delivery under their contracts, and almost all prohibit reimbursement for services provided by interns, since they are not licensed for independent practice. Agencies that are in the position to charge cash for services on a sliding scale to indigent clients without health insurance may be able to receive small cash payments for intern services. Agencies in the position to charge full cash fee for service to clients may also do so. Some internship programs have stated that if their interns are licensed or credentialed as a master’s level healthcare professional, e.g., a licensed professional counselor, some of the services offered in training may be reimbursable under that license. However, this may confuse independent practice with training, and it is difficult to reconcile training for one profession that is independently practiced by another. Many psychology licensing boards will refuse to accept services provided under another license as supervised experience required for psychology licensure, so be sure to check with the licensing authority in your jurisdiction before adopting such an approach.

Contracts. There are occasionally contracts available for services provided by interns. Local county, city, or state departments or offices may put out bids for services that may be provided by interns under the supervision of licensed psychologists. For instance, the Department of Vocational Rehabilitation or Economic Security may offer contracts for psychological assessment of individuals applying for services, and may contract with agencies allowing students to administer the psychological tests under the supervision of a licensed psychologist. Local court systems may offer similar contracts, or contracts for programs offering restoration to competency or other services. In some states, interns are able to bill Medicaid or
the state program for services if they are employed by the state-certified or funded agency. It may also be possible to develop contracts within one’s own agency or organization. For example, a university counseling center internship could contract with the Athletics Department to provide sports psychology services or a hospital internship could contract with the Surgical Department to provide pre-op assessments.

Cost offsets. Cost offsets may also be created. Donald Hands, Ph.D., at the Wisconsin Dept. of Corrections, reports that since his agency is an APA-approved Continuing Education (CE) sponsor, his program developed the internship didactic seminars as CE programs for his staff, providing “free” CE to psychologists who need 40 hours of CE credit every two years. This provided significant savings to the agency, which otherwise would have paid the cost of these CE credits to external providers. Some university based internships have been able to secure additional supervisors through their Psychology Department in exchange for internship staff teaching a course or offering a practicum experience.

Grants

The Graduate Psychology Education (GPE) and Graduate Medical Education (GME) programs are federal grant programs that support training in healthcare. Both are administered by the U.S. Health Resources and Services Administration (HRSA) Bureau of Health Professions with GPE specifically targeted for psychology and GME primarily used by programs in medicine.

GPE. The GPE program awards grants on a competitive basis to APA-accredited psychology doctoral, internship and postdoctoral programs. The grants support interdisciplinary training of psychology graduate students to work with other health professions in the treatment of underserved populations (older adults, children, chronically ill persons, victims of trauma and abuse, and returning military personnel and their families). Funds may be used for stipends, faculty/supervisors, model demonstration programs and technical assistance. Notices regarding applications and funding can be found at http://www.hrsa.gov/grants.

GME. The Children’s Hospitals Graduate Medical Education Payment Program provides funding to freestanding children’s hospitals to support the training of pediatric and other residents in graduate medical education (GME) programs. It was established to compensate for the disparity in the levels of Federal funding for teaching hospitals for pediatrics as opposed to hospital settings that provide care to other patient populations. Information is available from http://bhpr.hrsa.gov/childrenshospitalgme/. At present, the funds are directed towards training of pediatricians and pediatric subspecialty areas, however, it does free up existing educational or training funds within their hospitals that can be used to train other healthcare specialists, including psychology interns.

For those internship programs existing within children’s hospitals that receive such funding, Directors of Training in Psychology can try to negotiate for the training funds being replaced by the CHGME Payment Program to be utilized to support the Psychology training program.
**MBHET.** Mental and Behavioral Health Education and Training (MBHET) Grants, is another grant program sponsored through Health Resources and Services Administration (HRSA) [http://bhpr.hrsa.gov/grants/mentalbehavioral/mbhet.html](http://bhpr.hrsa.gov/grants/mentalbehavioral/mbhet.html). This is a grant program specifically to support graduate students in social work and psychology. In psychology, APA-accredited internship (and doctoral) programs are eligible to apply for 3-year grants, specifically to add positions that serve high-need, underserved populations, including rural, vulnerable groups and veterans, military personnel and their families.

**APA.** Grants may also be available to existing internship programs to assist them in their efforts to apply for APA-accreditation. These grants were authorized in 2012 by APA Council. Information is available on the APA website, [http://www.apa.org/about/awards/internship-program-grants.aspx](http://www.apa.org/about/awards/internship-program-grants.aspx).

**Garrett Lee Smith Memorial Act of 2004.** This grant program provides funds for suicide prevention programs in schools, colleges, tribal organizations, and some other agencies. Monies from this grant cannot be used to support intern stipends or staff salaries, but can provide program support funds. Information is available at [http://www.samhsa.gov/grants/grant-announcements/sm-15-008](http://www.samhsa.gov/grants/grant-announcements/sm-15-008).

**Department of Labor.** The Heart of America Psychology Training Consortium was developed through funding from an H-1B Technical Skills Training Grant awarded by the Employment and Training Administration of the U.S. Department of Labor. The Consortium joined resources from academic programs, community agencies, private hospitals and independent practitioners to provide training experiences. The H-1B training grants are awarded to Workforce Investment Boards that represent a local or regional public-private partnership (e.g., a business or business-related non-profit organization and a community based organization or higher education institution). These grants permit agencies and facilities to receive reimbursement for the expenses involved in offering practica and internships. Information on this program is available at [http://www.foreignlaborcert.doleta.gov/h-1b.cfm](http://www.foreignlaborcert.doleta.gov/h-1b.cfm).

**Private foundation grants.** Applications may be made to private foundations to support training in healthcare service delivery. There are a variety of private trusts and foundations that support service provision through grants for services, and these may include support for intern stipends and/or the psychologist supervisor positions. There are national foundations, such as the Robert Wood Johnson Foundation, [http://www.rwjf.org/en/grants.html#q/maptype/grants/ll/37.91,-96.38/z/4](http://www.rwjf.org/en/grants.html#q/maptype/grants/ll/37.91,-96.38/z/4), and local or regional foundations, such as the Virginia G. Piper Charitable Trust in Arizona, [http://pipertrust.org/grant-process/](http://pipertrust.org/grant-process/), and the Hogg Foundation in Texas, [http://www.hogg.utexas.edu/initiatives/psychology_internships_initiative.html](http://www.hogg.utexas.edu/initiatives/psychology_internships_initiative.html). More information and resources are available at [http://www.grantsusa.net](http://www.grantsusa.net).

**Scholarships and Supports**

**Federal Work Study.** Federal Work Study (FWS) is a program that provides funds to pay students to perform work during their education. Schools request FWS funding from the Department of Education, and then use that money to employ students in positions both on and
Schools must use at least 7% of their allocation to employ students in community service positions, and it is preferred that these positions are related to their educational program or career goals. Schools may use FWS to employ students in internship positions in community service agencies. So, some doctoral programs are able to place their students in internship positions in community agencies, and the school pays the intern through FWS funds. It is permissible for students to earn academic credit as well as payment for these positions, and the guidelines specifically state that internships, practica and assistantships are appropriate (Operating a Federal Work Study Program, Chap. 2, www.ifap.ed.gov/sfhandbooks/attachments/0809Vol6Ch2.pdf, page 29). There are some restrictions on student, employment, and site eligibility.

You can find out more about FWS at http://www.ed.gov/programs/fws/index.html, http://studentaid.ed.gov/PORTALSWebApp/students/english/campusaid.jsp, or you may contact the financial aid office of a school or doctoral program. Schools may have additional regulations about the use of FWS funds in addition to Dept. of Education requirements.

Other Sources of Scholarships and Supports

State Psychological Associations may be encouraged to develop scholarship opportunities for internship stipends or to partner with doctoral programs or others to create and/or develop funds for internship programs or stipends. Similarly, doctoral programs may be encouraged to set up specific funds to support intern stipends by seeking donations from alumni and other donors. Some State Psychological Associations, including Arizona http://www.azpa.org/displaycommon.cfm?an=7 and Nevada http://www.nvpsychology.org/displaycommon.cfm?an=9, have or are in the process of creating internship consortia.

The APA Education Government Relations Office (GRO) and concerned psychologists are currently advocating for support for internship training scholarships with the National Health Service Corps and the newly established Public Health Science Scholarship Program. Currently, licensed psychologists are eligible for loan repayment positions in the National Health Service Corps, but students and interns are not eligible for scholarships. In the future, NHSC funds may be used to support internship training in exchange for the commitment of continued service for some period of time, but this funding opportunity is not yet available. Information is available at http://nhsc.hrsa.gov/.

There is additional legislation currently being proposed which could increase future funding sources for psychology internships: 1) an amendment to the Social Security Act that would make the cost of training psychology interns eligible for Medicare payments to hospitals; 2) authorization of a new Geriatric Career Incentive Awards program to provide financial support for psychology students interested in working with older persons; 3) the Child Health Care Crisis Relief Act, under which psychology graduate programs would be eligible for grants to provide internships in child and adolescent mental health; and 4) the Mental Health on Campus Improvement Act which allows for funds to be used to expand mental health training on college and university campuses through psychology internships.
Cost-Benefit Analysis

In seeking funding to support an internship training program, it will be helpful to develop a cost-benefit analysis. Jane Levin, in her cost-benefit analysis of the University of Minnesota Counseling and Consultation Center internship program, reports that there are four models of evaluating cost and benefit:

1) Cost vs. Revenue Model (Weiskopf & Newman, 1982) - this model, which was developed for a community mental health center, compares revenues generated by interns with costs of the internship training program. It is only applicable to settings where fees are collected for services.

2) Fees per Contact Model (Rosenberg et al., 1985) - this model proposes a graph whereby the "yearly cost per intern" is plotted against the "fees per contact". The goal is to determine how many contacts an intern must have per week to offset the cost of his/her training. This model is also only applicable to fee-generating settings.

3) Replacement Cost Model (Loucks et al., 1980) - this model assesses how much it would cost if services provided by interns were delivered by senior staff, minus the cost of the Training Program. This model is applicable to all internship programs, whether or not the center is fee-for-service.

4) Combined Model (Schauble et al., 1989) - this model proposes a complex mathematical formula to determine cost per service hour for interns vs. cost per service hour for senior staff replacement of interns. It is most applicable to programs where there is great variability in costs and numbers of trainees from year-to-year.

A cost-benefit analysis typically includes a series of tables, each examining the anticipated costs of different aspects of the internship program. Cornish et al. (2003) present a detailed approach to organizing a cost-benefit analysis.

References: (link to Funding Addendum B)

Examples of cost-benefit analyses:
Replacement Cost Model analysis (link to Funding Addendum C)
Cost-Benefit Analysis (link to Funding Addendum D)
Analysis of internship impact if threatened with closing (link to Funding Addendum E)
Another example (link to Funding Addendum F)
Funding Addendum A

Association of Counseling Center Training Agencies (ACCTA)
Kathlyn Dailey and Sarah Armstrong

Funding

Before seeking funding, determine what you need for the internship to be successful: # of interns, staffing (including training/supervision), office space, technology (computers, phones, recording equipment), and financial support (travel, support services, salaries, benefits). Obtain state licensing laws/rules and regulations, APPIC membership guidelines and APA accreditation guidelines. Develop your program to meet those guidelines, in that order, as resources become available. Determine what resources you already have and what additional resources are easily accessible.

When looking at the costs of an internship program, look also at the financial benefits (cost-benefit analysis):

- Look at the # of hours of service provided by interns/stipends (cost of their service provision per hour) vs. that of staff
- Look at the hours of service provision by interns in relation to the amount of staff time needed for training/supervision
- If interns can supervise practicum students, you will likely be able to add additional hours of therapy at little cost

The first person to get on board, after your director, is the person above him/her in the reporting line (e.g., V.P., Asst. V.P.):

- Tie the internship to the mission of your division and university – service to students (Student Affairs) and education (University)
- Use IACS standards for the number of staff you should have – interns are a cost-effective way to expand staff
- Show hard data for number of clients being seen; if you have a waiting list, present this also
- Early in the process, make the CC an integral part of the university community – be responsive to other departments, serve on committees and work with student groups; utilize their feedback/support with funding sources

Other sources of funding:

- Student Service Fees – enlist aid of students in student government or organizations you have helped – find out who is on the committee and don’t hesitate to discuss your plans with those who are supportive/appreciative of your Center (e.g., faculty with whom you have consulted; groups for whom you have done presentations/outreach; and even students who have been clients of the center who are very open about the good work that has been done by your staff)
• Psychology and other academic departments – ask for funding from departments for which you train practicum students, or arrange to have faculty serve as supervisors or seminar presenters to free up your own staff
• Utilize the salary of a staff member who has resigned/retired for stipends instead of replacing the staff member (won’t work with small staffs)
• Redirect other CC funds into the internship – e.g., money for contract counselors, some travel funds, practicum stipends
• Contract with outside departments/offices/groups to provide consultation, training, or other services for a fee, which will be dedicated to the internship

Miscellaneous:

• Start off with a part-time internship or with fewer interns than your end goal
• Have your intern slots listed as staff positions and have their salaries in the same category as other staff salaries – it may be easier to get them cost of living raises if increases are linked to a staff position, rather than requesting raises for the internship program
References


The Cost Replacement Model utilizes the following four step model to determine the cost of a training program: 1) Compute total expenses for the program, 2) Compute total number of direct service hours provided by trainees, 3) Compute number of FTEs required to replace the service currently provided by trainees and, 4) Compute cost of replacement staff minus cost of training program to arrive at the fiscal cost/benefit of the training program.

Procedure

In order to produce a comprehensive report, input was sought from a number of sources involved in the training program. A Cost-Benefit Analysis Worksheet was developed and distributed to the entire Training Committee, the current interns and the Academic Training Directors of the relevant academic programs on campus. In addition, fiscal data was obtained from relevant support staff. Finally, e-mail correspondence was initiated with other counseling center Training Directors (n=3) who had undertaken similar projects. Other documents utilized were: Client Opinion Surveys for interns and practicum students, 1996-97 Annual Direct Service Data for interns and practicum students and Total Client Interview Summary Data for 1996-97.

Information contained in the Cost-Benefit Analysis Worksheets was collated and synthesized. Fiscal data was used to determine cost replacement. Other documents were used to compute such things as percentage of total counseling interviews provided by trainees.

Assumptions

The computations that follow are based on several assumptions as stated below:

- Full-time salaried senior staff benefits include 22 days vacation, 10 university holidays and 3 days professional development leave. Combined, these add up to 35 days or 7 weeks. Therefore, senior staff are on-site and available to see clients 45 weeks/year.
- Senior staff salaries incur a fringe benefit cost of 26%. Fringe for non-U interns is 7.7% (in 1996-97 two interns were not from the U).
- Intern health benefits are $82/month for Cobra and $117/month for the student health center. For this analysis, an average of the two options or $100/month per intern will be used.
- An entry-level senior staff salary is $40,000 plus fringe.
- An associate staff is paid $15 per hour and no fringe. Associate staff expenses also include 1 hour/week 1:1 senior staff supervision.
- An intern full-time salary is $14,000 plus fringe. Intern expenses also include 2 hours/week 1:1 senior staff supervision.
- A full-time staff provides 18 direct service hours per week.
- In order to provide 18 direct service hours per week, staff need to schedule 22 OPs to account for cancellations, no shows and postponements of appointments.
- All computations are based on 1996-97 salaries and clinical service data.
COST OF INTERNSHIP

EXPENSES

Salaries
Intern salaries ($14,000 X 4) $56,000
Fringe (for 2 non-U interns) 2,156
Health benefits 4,800

Subtotal $62,956

Supervision/Seminars

<table>
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<tr>
<th>Activity/Sup</th>
<th>Hrs/Wk</th>
<th>Cost/Wk</th>
<th># Wks/Yr</th>
<th>Subtotal</th>
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<td>26.45</td>
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<tr>
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<td>25.08*</td>
<td>11</td>
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<tr>
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<td>40.25*</td>
<td>10</td>
<td>403</td>
</tr>
</tbody>
</table>

Subtotal $16,677

Other Expenses

Professional Dues
APA 1,500
APPIC 240
ACCTA 100

Accreditation Site Visit Fee
($2400/5 years) 480
Intern telephones 895
Printing 1,142
Supplies 651
Equipment repair 167
Postage 127
Orientation materials & Trainee Manuals 60
Monthly supervisor's meeting (11 months) 1,038
Monthly Training Comm. meeting (10 months)
Note: 1/2 cost assumed by Practicum program 826
ACCTA Meeting (approx.) 800
Administration of Training Program
REPLACEMENT COST CALCULATIONS

1996-97 Intern Direct Service Hours = 2354

1 FTE providing 18 hours direct service/week X 45 weeks = 810 hours/year

2354/810 = 2.9 FTE

In order to provide the number of direct service hours currently provided by interns, the center would need to replace the interns with 2.9 FTE staff.

2.9 FTE entry-level senior staff replacement would incur the following costs:

2.9 FTE @ $40,000 + $10,400 (fringe) + $500 (telephone and supplies) = $147,610.

COST OF SENIOR STAFF REPLACEMENT MINUS COST OF INTERNSHIP PROGRAM EQUALS FINAL COST/SAVINGS TO THE CENTER

COST OF SENIOR STAFF REPLACEMENT ($147,610) MINUS COST OF INTERNSHIP PROGRAM ($113,567) = SAVINGS TO THE CENTER OF $34,043.

Note: Although the cost of replacing interns with part-time Associate Staff graduate students was calculated (approximately $88,000 plus administrative costs), this replacement option raises a number of concerns. Six half-time Associate Staff would be needed. This would mean that almost half of the center’s clinical staff would be comprised of part-time graduate students, potentially weakening the cohesiveness and stability of the staff. This staffing pattern would also require a considerable amount of time each year to select, orient and support these staff. Finally, it is unknown whether it is even possible to find six qualified university psychology students who have completed their internships and have the skills necessary to work in a university counseling center. For all of the above reasons, this option was not considered feasible.

QUALITY OF SERVICES AND BENEFITS OF INTERNSHIP
The quality of services was assessed by tabulating items on the Client Opinion Survey for all four interns. 87% of those responding indicated they had "achieved some" or "fully achieved" their goals in counseling. 100% of the respondents indicated they had learned "some" or "a lot" as a result of counseling. 100% of the respondents gave their counselor a rating of 1 or 2 on a 5 point scale on all of the counselor attributes listed on the opinion survey (responsive, informed, understanding and helpful). Finally, 97% of the respondents reported that they worked "exceptionally well" or "very well" with their counselor.

Benefits of Internship

- Increases multicultural diversity of counseling staff
- Provides more diversity of counselors for student-clients
- Each intern completes a specialized project that benefits the center
- Interns bring specialized skills and interests
- Interns require only a one year commitment (vs. senior staff)
- Benefits U academic depts. in that approx. 50% of center interns are from the U
- Keeps senior staff professionally current and invigorated
- Brings prestige to the U via APA accreditation and Training Director participation in CCTA and state organizations
- Recognition from other academic training programs via interactions with academic training directors
- Interns are flexible in their assignments and can cover services as needed e.g., more groups, outreach
- Interns are rated by their clients as providing high quality services (see Client Opinion Survey data)
- Provides senior staff opportunity to supervise
- Provides approx. 80% of group services, a modality that is more cost-effective than individual counseling and often more clinically effective
- Increases visibility of center on campus via outreach and orientation activities
- Adds variety to senior staff job descriptions; decreases potential for senior staff burn-out
- Client service frees senior staff for more complex service e.g., response to crises, consultation with faculty
- Status as role models stimulates desire for excellence among senior staff
- Bring a new perspectives and energy each year
- APA accreditation adds incentive and guidelines for high standards of care
- Provides the capstone experience in doctoral training for psychologists
- Ties center (and student affairs) to the U's academic mission as well as the mission of a land-grant university; fits with U's mission of teaching, research and service
- Prepares future college counseling center psychologists
- Integrates scientist and practitioner perspectives
- Interns provide 49% of the center’s client interviews
- Attraction and retention of high-quality senior staff
- Increases ability to provide outreach and liaison functions
- Collaboration with other universities via ATDs
- Provides professional development seminars to the center’s staff
• Keeps senior staff involved in applied research via dissertation research and/or center research projects
• Interns formally evaluate the center and make recommendations for improvement

**CONCLUSION**

From the above analysis, it is clear that the benefits of the internship greatly exceed the costs. In addition to a sizable fiscal savings, the internship affords the center a myriad of non-fiscal benefits to the staff, the University and professional psychology.

The recommendation, based on this analysis, was that the internship be continued in its current model. It was also recommended that the program continue to look for ways to reduce costs, such as those that were implemented in the current year (internship brochure, web page, reduction in senior staff time for intern selection, increased oversight of copying costs).
HIGHLIGHTS FROM THIS YEAR

- Trainee productivity continues to be substantial (trainees provide ~27% of the center’s direct service and ~21% of the hours spent in community engagement) and cost-effective (return in hours is ~150%)

- Our center continues to demonstrate commitment to the success of all students by providing clinical training to advanced trainees

Training continued to be a significant part of the Counseling Center’s activities this year. Our interns contributed a substantial portion (~27%) of the direct service (i.e., IA & IC) we provided to the University community. In addition they participated in other forms of clinical activity such as Group, Triage, Community Engagement and supervision of MA trainees. Our Interns have also served the Center and the University community by participating in a wide variety of activities ranging from Residence Hall Liaison to guest lectures and workshops. Having said all this, it is very clear that our interns provide us with much more than that which is tangible; they contribute new ideas, increased energy, critical mass and valuable ways of knowing and being in this world.

Our number of applications for the 2008-2009 Pre-doctoral internship remained high. This is likely due to the continuing improvements to our internship website, our recruiting efforts, and our reputation for multicultural training through the xxx program. Concerted efforts were made to solicit internship applications from trainees of color through personal contacts, listservs, and email. This application cycle we made improvements and hit our target of nearly 30% having self-reported identity characteristics that place them in an underrepresented category. Recruiting for diversity is an uphill battle for universities in the Midwest; we tend to be seen as less appealing to trainees of color, who statistically are more likely to apply to internship sites on the east or west coasts. The Pre-doctoral intern salary is close to the median salary for APA-accredited pre-doctoral internships in counseling centers, which likely contributes to our attractiveness.

All training committee members (licensed psychologists who are the primary supervisors for our pre-doctoral interns) reported substantial improvement in the quality of supervision they provided resulting from the utilization of webcam technology. Supervisors continue to report having less time than they desire to review trainees’ session notes and recordings. All trainees
were recorded while providing clinical services on-site. Training is not only an important piece of the center’s identity and history, our investment in it is also very cost effective.

Below are sections on the quantitative data gathered specific to training, followed by a brief qualitative data section noting the less-tangible, but extremely important impact our training program has had on staff, interns, and students.

**QUANTITATIVE DATA**
August 15, 2007 to April 30, 2008

**Tangible Clinical Training Benefits**

**Table 1. Hours Spent in Providing Direct Service as a Clinical Activity**

<table>
<thead>
<tr>
<th>Training Activity</th>
<th>Triage</th>
<th>IA</th>
<th>IC</th>
<th>GRP</th>
<th>CE</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intern #1</td>
<td>122.0</td>
<td>95.0</td>
<td>242.5</td>
<td>96.0</td>
<td>40.0</td>
<td>595.5</td>
</tr>
<tr>
<td>Intern #2</td>
<td>133.0</td>
<td>107.5</td>
<td>282.25</td>
<td>100.0</td>
<td>67.75</td>
<td>690.5</td>
</tr>
<tr>
<td>Intern #3</td>
<td>77.5</td>
<td>128.5</td>
<td>327.0</td>
<td>30.0</td>
<td>75.5</td>
<td>638.5</td>
</tr>
<tr>
<td>Intern #4</td>
<td>100.5</td>
<td>98.75</td>
<td>224.0</td>
<td>72.5</td>
<td>25.0</td>
<td>520.75</td>
</tr>
<tr>
<td>Predoc Subtotal</td>
<td>433.0</td>
<td>429.75</td>
<td>1075.75</td>
<td>298.5</td>
<td>208.25</td>
<td>2445.25</td>
</tr>
<tr>
<td>Master’s #1</td>
<td></td>
<td>108.0</td>
<td>84.5</td>
<td>89.0</td>
<td></td>
<td>281.5</td>
</tr>
<tr>
<td>Master’s #2</td>
<td></td>
<td>144.9</td>
<td>69.25</td>
<td>87.5</td>
<td></td>
<td>301.65</td>
</tr>
<tr>
<td>Master’s #3</td>
<td></td>
<td>160.0</td>
<td>62.0</td>
<td>14.25</td>
<td></td>
<td>236.25</td>
</tr>
<tr>
<td>Master’s #4</td>
<td></td>
<td>130.0</td>
<td>58.5</td>
<td>83.0</td>
<td></td>
<td>271.5</td>
</tr>
<tr>
<td>MA Subtotal</td>
<td></td>
<td>542.9</td>
<td>274.25</td>
<td>273.75</td>
<td>1090.9</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>433.0</td>
<td>429.75</td>
<td>1618.65</td>
<td>572.75</td>
<td>482.0</td>
<td>3536.15</td>
</tr>
</tbody>
</table>

**Tangible Clinical Training Cost in Hours**

**Table 2. Time Spent in Training Related Activity**

<table>
<thead>
<tr>
<th>Training Activity</th>
<th>Admin</th>
<th>Seminar</th>
<th>TC</th>
<th>Sup Prep</th>
<th>Sup</th>
<th>Support</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training Director</td>
<td>217.0</td>
<td>57.5</td>
<td>24.5</td>
<td>2.3</td>
<td>16.8</td>
<td>107.0</td>
<td>425.0</td>
</tr>
<tr>
<td>Staff Member #2</td>
<td>2.0</td>
<td>68.0</td>
<td>34.5</td>
<td>12.5</td>
<td>39.0</td>
<td>122.5</td>
<td>278.5</td>
</tr>
<tr>
<td>Staff Member #3</td>
<td>0.0</td>
<td>54.8</td>
<td>28.0</td>
<td>34.5</td>
<td>54.5</td>
<td>31.5</td>
<td>203.3</td>
</tr>
<tr>
<td>Staff Member #4</td>
<td>0.0</td>
<td>66.5</td>
<td>2.0</td>
<td>2.0</td>
<td>16.0</td>
<td>44.5</td>
<td>131.0</td>
</tr>
<tr>
<td>Staff Member #5</td>
<td>0.0</td>
<td>51.0</td>
<td>23.5</td>
<td>17.0</td>
<td>37.5</td>
<td>17.0</td>
<td>146.0</td>
</tr>
<tr>
<td>Staff Member #6</td>
<td>10.0</td>
<td>3.5</td>
<td>25.3</td>
<td>27.0</td>
<td>44.3</td>
<td>36.5</td>
<td>146.5</td>
</tr>
<tr>
<td>Staff Member #7</td>
<td>2.0</td>
<td>66.3</td>
<td>30.0</td>
<td>14.0</td>
<td>57.5</td>
<td>32.0</td>
<td>201.8</td>
</tr>
<tr>
<td>Staff Member #8</td>
<td>1.0</td>
<td>14.0</td>
<td>2.0</td>
<td>3.0</td>
<td>14.0</td>
<td>29.0</td>
<td>63.0</td>
</tr>
<tr>
<td>Staff Member #9</td>
<td>0.0</td>
<td>5.3</td>
<td>3.0</td>
<td>0.0</td>
<td>7.0</td>
<td>14.0</td>
<td>29.3</td>
</tr>
<tr>
<td>Staff Member #10</td>
<td>0.0</td>
<td>1.0</td>
<td>2.0</td>
<td>0.0</td>
<td>22.0</td>
<td>30.0</td>
<td>55.0</td>
</tr>
</tbody>
</table>
A Closer Look

Individual Direct Service
Our trainees provided more than one-quarter of our total number of traditional individual counseling appointments:

Table 3. Initial Assessment and Individual Counseling by Staff Group 2007-08

<table>
<thead>
<tr>
<th>Staff Member</th>
<th>Appointments attended</th>
<th>Number of unique clients</th>
<th>Number of client hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Predoc &amp; MA-Interns 2006-07</td>
<td>1853</td>
<td>551</td>
<td>1889</td>
</tr>
<tr>
<td>Predoc &amp; MA-Interns 2007-08</td>
<td>1529</td>
<td>686</td>
<td>1541</td>
</tr>
<tr>
<td>All Staff (including trainees) 2006-07</td>
<td>5541</td>
<td>1556</td>
<td>5550</td>
</tr>
<tr>
<td>All Staff (including trainees) 2007-08</td>
<td>5585</td>
<td>2592</td>
<td>5575</td>
</tr>
<tr>
<td>% of total provided by trainees 2006-07</td>
<td>33</td>
<td>1556</td>
<td>5550</td>
</tr>
<tr>
<td>% of total provided by trainees 2007-08</td>
<td>27</td>
<td>26</td>
<td>28</td>
</tr>
</tbody>
</table>

Community Engagements
Our trainees provided a larger portion of CE hours this year. It should also be noted that many CEs are attended by more than one staff member and/or trainee, and therefore the numbers of CEs provided include some overlap.

Table 4. Community Engagement (CE) Hours by Staff Group

<table>
<thead>
<tr>
<th>Staff Member</th>
<th>Number of CE hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Predoc &amp; MA-Interns 2006-07</td>
<td>188</td>
</tr>
<tr>
<td>Predoc &amp; MA-Interns 2007-08</td>
<td>543</td>
</tr>
<tr>
<td>All Staff (including trainees) 2006-07</td>
<td>3035</td>
</tr>
<tr>
<td>All Staff (including trainees) 2007-08</td>
<td>2561</td>
</tr>
<tr>
<td>% of total provided by trainees 2006-07</td>
<td>6</td>
</tr>
<tr>
<td>% of total provided by trainees 2007-08</td>
<td>21</td>
</tr>
</tbody>
</table>

Crisis Interventions/Triage
Our predoctoral interns provided triage during the spring 2008 semester. Despite the fact that our predoctoral interns provided crisis intervention during only one of the two academic semesters, the data indicate that they provided 433 of the 2083.75 (~21%) hours dedicated to this activity. Masters’ interns do not provide crisis interventions.

Senior Staff Resources Provided in the Service of Training
There are multiple levels of training/supervision provided at the Counseling Center. Senior staff members supervise predoctoral interns year-round. During the spring semester, MA-Interns who are providing clinical service are supervised by both a predoctoral intern and a senior staff member. Predoctoral interns receive both group and individual supervision-of-supervision by senior staff. One senior staff member and/or pre-doctoral interns provide group supervision to MA-Interns. Senior staff provides supervision to interns who lead or co-lead groups. Finally, senior staff provides training and supervision to predoctoral and masters’ interns through seminars and mentoring relationships. Because of the complexity of this system, it is difficult for Titanium [scheduling and notes program used by many Counseling Centers] to provide us with a clear picture of how many total hours are being spent by senior staff members providing supervision and training.

However, Titanium does provide percentages of staff’s total hours by appointment code. Adding all senior staff appointments coded as “TRN” (training), the percentage of supervising staff’s total hours spent in training activities was <11%. Considering the high level of productivity yielded by our interns our return rate on our investment in training is very high.

QUALITATIVE DATA

Our training program mentors and trains students to be competent and effective mental health professionals. In addition to the tremendous amount of clinical service that our interns provide, our interns both experience and effect significant growth during their internship year. This change is sometimes difficult to measure but is nonetheless significant.

Interns’ Personal and Professional Growth

Interns’ Impact on our University Community

Assistance Provided to Faculty

[data in this section have been deleted due to identifying information]

CONCLUSION

Training is cost-effect and is integrated into our identity as a center.
Funding Addendum E

Counseling Center Impact Statement for Suspension of Pre-doctoral Internship

Summary
Suspension of the pre-doctoral intern positions at the Counseling Center would have the most impact on direct counseling and crisis services, with a net loss of at least 20% of total counseling hours. This represents a projected loss of 425 individual counseling hours affecting approximately 100 students. Additional impact includes the loss of intern contributions to consultation and outreach services as well as loss of committee service, staff diversity, topical expertise, intensive projects, and fresh perspectives provided by the interns. The internship has been highly cost effective, representing about 35% of counseling appointments over the past 3 years while accounting for only about 17% of salary for counseling staff. Reduction of the internship to one intern would be significantly less cost-effective than two interns but still viable.

Data
The following quantitative data summarizes the contributions of the pre-doctoral interns to the Counseling Center’s services over the past 3 years during which we have had 2 interns:

Combined Data for Both Interns:

<table>
<thead>
<tr>
<th>Year</th>
<th>Appts kept = % of total staff appts*</th>
<th># Students served &amp; % of total**</th>
<th>Consultations</th>
<th>Outreach</th>
</tr>
</thead>
<tbody>
<tr>
<td>05-06</td>
<td>567 = 35%</td>
<td>152 = 35%</td>
<td>25 = 18%</td>
<td>10 = 12%</td>
</tr>
<tr>
<td>06-07</td>
<td>683 = 37%</td>
<td>157 = 36%</td>
<td>34 = 20%</td>
<td>14 = 14%</td>
</tr>
<tr>
<td>07-08</td>
<td>658 = 34%</td>
<td>186 = 40%</td>
<td>12 = 10%</td>
<td>13 = 16%</td>
</tr>
<tr>
<td>Average 05-08</td>
<td>636 = 35%</td>
<td>165 = 37%</td>
<td>24 = 16%</td>
<td>12 = 14%</td>
</tr>
</tbody>
</table>

*Describes number of counseling appointments kept by students scheduled with interns, followed by that same number as a percentage of the total number of kept counseling appointments for all staff. Excludes group appointments.

**Describes total number of students who met with interns in any individual counseling capacity, followed by that number as a percentage of total students served by all staff.

Discussion of data
Loss in counseling services: In the 3 years of having 2 interns, the pre-doctoral interns combined have seen about 35% of the total students served by the center. The percentage total of counseling service hours (kept appointments) is about the same, at 35%. The percentages have been fairly stable over these years. For these 3 years the interns comprised 1/3 of the counseling staff, i.e. 2 FTE out of 6 FTE, and contributed about 1/3 of the counseling hours. While the interns have training time during which they are not available for counseling, they still maintain about 1/3 of the counseling hours because 1) there is supervision and training time invested by the senior staff members running the training program, and 2) there are 2 senior staff members with major non-clinical duties. The AOD counselor has significant outreach and prevention duties, and the Director has administrative and supervisory duties and provides a large
percentage of the department’s consultations. The latter 2 senior staff’s non-clinical duties would remain regardless of the internship.

The intern contributions on a percentage basis are likely to be reduced in 2008-2009 with an additional senior staff member, raising the total staff FTE. **The estimated 2008-2009 percentage of kept individual student counseling hours provided by interns is at or just under 30% of all staff counseling hours, which will translate into an estimated 640 appointments and an estimated 155 students seen.**

**Net Loss:** If the internship were suspended, there would be time reallocated from senior staff providing training to providing direct clinical service. This time reinvested back into direct counseling service would be about 10 counseling hours per week. During heavier times of semester the interns average about 15 counseling hours each per week for a total of 30 hours. We would thus have a net loss of about 20 out of the 30 hours the interns provide in peak times, the net loss being a bit less at the beginning and end of semesters. **If the internship were suspended, the total net loss of counseling services from 2008-2009 to 2009-2010 is estimated at 20%, which translates to 425 appointments and about 100 students.**

It should also be noted that the Counseling Center has seen about an 8% annual increase in utilization over the past 3 years. If the internship were suspended, a reduced staff would have to try to absorb the interns’ hours and bear the burden of increasing student demands.

**Implications**
The most serious impact would be on clinical and crisis hours, though other services would be affected – there would be fewer staff to provide these consultation and outreach, and staff time would almost certainly need to be reallocated toward clinical service. The decreased availability of appointments would affect student access particularly at peak times of the semester (October, November, March, and April). Student wait times for an initial appointment would probably extend from a current maximum of one week to significantly longer, possibly up to two weeks or possibly resulting in a wait list for initial or follow-up appointments. If priority was placed on initial access, then wait times for return appointments for students who need follow-up would be compromised. That is, if we prioritized for initial appointment access, then return appointments could be routinely 2 weeks away, which can be highly challenging for students in crisis or suffering from serious mental health symptoms.

Another implication is for crisis coverage. Currently interns are part of the crisis coverage rotation during working hours, allowing us to have backup crisis hours on some days. These crisis hours would have to be absorbed by other staff and would further reduce ongoing counseling hours.

**Other impacts**
Interns have contributed to the Counseling Center and Student Development in other ways beyond the services mentioned above. Interns bring areas of expertise based on their research interests. Seminars series developed partially for the interns have also provided professional development for all staff on salient training topics. Interns have helped keep the Counseling Center current with the field and with students, bringing the latest trends and uses of technology
in counseling. Interns have served on committees in the division and have taught classes as adjuncts in the Psychology Department. Annual projects developed by the interns have also brought major contributions; for example, the Crisis Response Manual for the Counseling Center was co-developed by a pre-doctoral intern. The interns also serve as models (and give informational interviews) for undergraduate students considering graduate school and a career in psychology. Interns have brought diversity to the Counseling Center: both of the racially diverse counseling staff in the past 5 years have been trainees, one an intern and one a social work trainee. Furthermore, the loss of male interns would leave only 1 male counselor, the director, who has a reduced clinical case load. Without interns it would be much more difficult to accommodate student requests for a male counselor.

Prospect of a single intern

The advantages of still having a single intern are in retaining some of the contributions outlined above. There are several disadvantages to reducing to 1 intern. It would reduce the cost-effectiveness of the internship. August training is intensive and the fixed cost of staff time remains regardless of the number of interns. If there were only one intern, we would probably cut or alter some of the weekly elements of the training program which could affect the quality of training. There would also be a loss of socialization of the interns with each other and a loss of some of the small group training. We would lose our membership in APPIC (which requires 2 interns for membership) which would change our selection process and could possibly affect the quality of applicants.

Even with these disadvantages, it would be valuable to have some of the aforementioned benefits of the internship, both in service hours and the other added benefits. Despite the significant loss in cost-effectiveness and the changes in the training program, a single intern would still likely be viable.

---

1 An agency with a single intern does not meet APPIC membership criteria nor APA-accreditation Guidelines & Principles. Such agencies are advised to see the section on consortium internship programs.
Funding Addendum F

In 2008-9, six interns provided 9600 hours of therapy and assessment. Their stipend is $17.50 an hour less than entry level psychologist salary. That is a cost savings of $168,000.00. In 2009-10 we have expanded to ten interns.

The expansion of the didactic internship seminars with APA approved CE credits saves staff and/or the DOC from the costs of licensure-required coursework. In 2007 we provided 5165.5 CE credit hours. At $25.00 per credit hour, that amounted to $129,137.50 worth of training. Another example, permission granted, provide link (check this permission).

Cost Benefit Analysis – Internship year 2009-2010

First things first - the money:

| Salary/ Benefits (figured at 25% of salary) | $17,000 + $4150 | $21250 |
| Cost for supervision (2 supervisors)* | $46000 /4 interns | $11500 |
| APPIC/APA costs* | $4,000/year /4 interns | $1000 |
| Administrative Assistant: 25% of salary: * | $8000 /4 interns | $2000 |
| Miscellaneous program costs: lunches, interview days* | $1100 /4 interns | $275 |
| **These are estimates** |
| **GRAND TOTAL** | **$36025** |

Additional Points:

- For $36K/year/intern we get a master’s level PLUS clinician, as compared to $37K for an unlicensed, purely masters level clinician. This includes intensive clinical supervision which ensures a high quality of services. In addition, when taking PLT into consideration, our interns encounter more services than their LFC counterparts (roughly 5 hours more per week).
- The more interns we have the more cost effective we are: the set fees after salary/benefits is $14775/year/intern. If we had 5 (or even 6) interns those costs would not change and the set price for 5 would then be $11,800/intern (or for 6 - $9850/yr/intern). WE would save money as with 5 interns the total cost/intern would be $33050/intern (saving $4K+/intern compared to their counterparts).
- In addition, the costs we don’t see for the LFC clinician is their cost of administrative and supervisory time.
- I propose we give a minor raise to interns – bring their cost up to the $37K by making their salary $18,000K/year (we’d still be on the lower end of internship salaries), however, we’d be a bit more competitive.
- The XXX center is interested in funding a major rotation next year (2010-2011). While we are very early in the “negotiation talks,” I quoted them the full $21250 price as they would be providing their own supervision and administrative costs. Consortium status makes the internship even more cost effective.
- See the next point on Neuropsychological Screenings: however, after 2009-10 we will be able to estimate further saving based on not contracting out for all of our assessments.
Here are some of the services interns provide that we have not been “billing” for:

- Psychological/neuropsychological testing: after some internet research it seems that the average price for a screening is anywhere between $1500-2000 (for about 3 hours of testing), compared to the 6-8 hour screenings that an intern completes. Interns have previously been required to complete 4 comprehensive batteries/year, year 2009-10 this expectation will increase with the introduction of the neuropsychogical minor rotation. At the previous standard we could potential save $32K/year! ($2000/assessments at 16 assessments/year). If we do 10 (easily accomplished) more assessments through the new minor that could save an addition $20K!
- Trainings to staff: specifically, follow through on areas that affect CPSA mandates such as the “Clinical Practices Manual,” Diagnosing w/ the DSM-IV, GAFS, etc.
- Trainings to staff upon request. In the year 2008-2009 we provided over five trainings including: Axis II Disorders, Domestic Violence, services for child survivors of sexual abuse, Tavistock Group Theory, Psychopathy.

Feedback from site-supervisors:

- Interns are able to provide any service such as couples, family, group, with little oversight.
- Intensive clinical supervision provided by us – taking fewer resources from site supervisors.
- Are excellent with crisis intervention due to more extensive training.
- Provide important consultation to psychiatrist, at ART’s/CFT’s, to nurses, RSS’s, etc.
- Are often more willing and able to work effectively with outside agencies such as CPS, probation, etc., which further provides more “buy-in” by these agencies.
- Good and natural back-ups to run meetings in the absence of the clinical supervisor
- Always set the (high) standard for quality of paperwork.
- Provides additional – usually more complex and thorough – clinical perspective to the treatment team.
- Teams can provide clients with high quality individual therapy without having to go through Therapy Team (which often takes a while to get clients therapy).
- Adds to the treatment team’s diversity.
- Testing and psychological evaluations are especially helpful – especially when dealing with outside agencies, such as CPS.
- Provides staff trainings on much needed topics at the drop of a hat.
- Provides a unique connection between clinical teams, as well as between the “clinical side,” and the “outcomes/administrate side.”

Lastly – the APA/APPIC approved application process entails one of the most in-depth application, review, and interview process possible for a new hire. Our interns are almost guaranteed a professional and competitive level of independent clinical functioning that would not be found at the comparison standard: a newly mastered, unlicensed clinical. Interns are the smartest, most knowledgeable group of clinicians possible: they have just read the latest, most state-of-the-art material, and discussed that material in-depth over the last four years. We get to absorb that stat-of-the-art, and get to feel good about providing them which a much needed experiential training by hosting the internship.
Cost-Benefit Analysis for Internship

The APA-accredited doctoral internship program in professional psychology at the ISU Student Counseling Service (SCS) provides an essential vitality within the agency as well as a high-quality service to ISU students. Having an internship training program is among the strongest draws for new and diverse staff members. The internship program has been a part of SCS for more than 40 years, and it has been fully accredited by the American Psychological Association since 1980. For most of these years, the internship provided training for 4 interns. However, due to budget reversions for FY02, the number of interns in the program was reduced to 3. In FY 11, the program was returned to having 4 interns as a way to make the most efficient use of newly allocated funds. As the data indicates below, internship positions are a highly cost-effective method of achieving high-quality client care.

Given that most of the interns’ supervision and training sessions happen in a group format, there is little impact on senior staff time investment and little impact on hours needed by staff to provide supervision when adding or subtracting intern positions. The following tables demonstrate the resources needed and the benefits received from the internship program.

These numbers reflect a “typical week.” A typical week reflects full capacity on caseloads since we are now on a waiting list.

**Interns (4)**

<table>
<thead>
<tr>
<th>Weekly Direct Services Provided by Interns*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual Client Sessions: 14 hrs. X 4 interns = 56 hours</td>
</tr>
<tr>
<td>Intakes, Crisis Coverage, &amp; Consultation: 6 hrs. X 4 interns = 24 hours</td>
</tr>
<tr>
<td>Group Therapy Sessions: 3.5 hrs. X 4 interns = 14 hours</td>
</tr>
<tr>
<td>Supervision to Practicum Trainee**: 3 hrs. X 4 interns = 12 hours</td>
</tr>
<tr>
<td>Outreach to ISU Depts.: 1 hr. X 4 interns = 4 hours</td>
</tr>
</tbody>
</table>

**Total = 110 hours Direct Service**

<table>
<thead>
<tr>
<th>Weekly Training Hours Received (Staff Time Investment)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 hours individual supervision X 4 interns = 8 hours</td>
</tr>
<tr>
<td>.5 hours group counseling supervision X 4 interns = 2 hours</td>
</tr>
<tr>
<td>1 hour countersigning notes, reports, video review X 4 interns = 4 hours</td>
</tr>
<tr>
<td>1 hour group ED Case Conference X 1 staff member = 1 hour</td>
</tr>
<tr>
<td>1 hour group Group/Clinical Case Conference X 1 staff member = 1 hour</td>
</tr>
<tr>
<td>2 hours group Supervision of Supervision X 1 staff member = 2 hours</td>
</tr>
<tr>
<td>1.5 hours group Professional Development Seminar X 1 staff member = 1.5 hours</td>
</tr>
</tbody>
</table>

**Total Staff Time Investment: 19.5 hours**

Therefore, for every 1 hour of training invested in interns, we receive 5.6 hours of direct service.

* Includes time required by HIPAA for documentation of services provided.
** The intern provides supervision to a practicum trainee each semester. This 3-hour investment results in an additional 8 clients service hours at SCS per week.
Interns often see clients with a severity of concerns similar to clients seen by senior staff clinicians, and they also serve in the rotation with senior staff to provide after-hours crisis coverage. The average number of weekly direct service hours provided by FTEs is 28.85 for senior staff and 27.5 for interns.

The total cost for each intern position for FY12 is $28,500 (base salary) + $10,545 (benefits) = $39,045.

The total cost for a new senior staff psychologist position is $60,000 (base salary) + $22,200 (benefits) = $82,200.

Therefore, each intern provides 95% of the direct service of the average senior staff member at less than half the cost to the university.
Time Return for Internship

Average number of clinical contact hours scheduled per week (not including Post-pathways or extra crisis sessions)

<table>
<thead>
<tr>
<th>Position</th>
<th>Hours per Week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Staff with significant training duties</td>
<td>20 hours</td>
</tr>
<tr>
<td>Senior Staff with minor training duties</td>
<td>20 hours</td>
</tr>
<tr>
<td>Doctoral Intern</td>
<td>19 hours</td>
</tr>
<tr>
<td>Master’s Intern</td>
<td>20 hours</td>
</tr>
</tbody>
</table>

Average number of actual clinical contact hours per weeks (based on Winter 2011)

<table>
<thead>
<tr>
<th>Position</th>
<th>Hours per Week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Staff with significant training duties</td>
<td>17.5 hours</td>
</tr>
<tr>
<td>Senior Staff with minor training duties</td>
<td>19 hours</td>
</tr>
<tr>
<td>Doctoral Intern</td>
<td>17.25 hours</td>
</tr>
<tr>
<td>Master’s Intern</td>
<td>11 hours (in first 4 weeks of spring 2011)</td>
</tr>
</tbody>
</table>

Goal is average of 16+ hours per week

Time spent in training activities per week

<table>
<thead>
<tr>
<th>Activity</th>
<th>One Intern</th>
<th>Two Interns</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual supervision</td>
<td>3hrs/wk – 144hrs/yr</td>
<td>6hrs/wk – 288hrs/yr</td>
</tr>
<tr>
<td>Group supervision</td>
<td>1hr/wk – 48hrs/yr</td>
<td>1hr/wk – 144hrs/yr</td>
</tr>
<tr>
<td>ADD supervision</td>
<td>1hr/wk – 40hr/yr</td>
<td>1hr/wk – 40hrs/yr</td>
</tr>
<tr>
<td>Training Seminars</td>
<td>2hr/wk – 96hr/yr</td>
<td>2hr/wk – 96hr/yr</td>
</tr>
<tr>
<td>Training Team</td>
<td>1hr/wk – 40hr/yr</td>
<td>1hr/wk – 40hr/yr</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>8hr/wk – 368hrs/yr</strong></td>
<td><strong>11hr/wk – 608hrs/yr</strong></td>
</tr>
</tbody>
</table>

Ratio of Service to Training

<table>
<thead>
<tr>
<th>Scheduled client hours</th>
<th>One Intern</th>
<th>Two Interns</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>19:8</td>
<td>38:11</td>
</tr>
<tr>
<td></td>
<td>2.38:1</td>
<td>3.45:1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Average direct service</th>
<th>One Intern</th>
<th>Two Interns</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>17.25:8</td>
<td>34.5:11</td>
</tr>
<tr>
<td></td>
<td>2.19:1</td>
<td>3.14:1</td>
</tr>
</tbody>
</table>

Explanation:

1) Based on average number of scheduled client contacts, the core training team is not taking away from direct client contact but is training on top of doing what is the average scheduled client contact.

2) If we had one intern, for every hour put into training, we recoup approximately 2 hours of direct service.

3) With two interns, we recoup approximately 3 hours of direct service for every hour invested in training.
### Time spent in training activities per week when have Master’s Intern as well

<table>
<thead>
<tr>
<th>Activity</th>
<th>One Intern</th>
<th>Two Interns</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual supervision</td>
<td>2hrs/wk – 96hrs/yr</td>
<td>4hrs/wk – 192hrs/yr</td>
</tr>
<tr>
<td>Group supervision</td>
<td>2hrs/wk – 96hrs/yr</td>
<td>2hrs/wk – 96hrs/yr</td>
</tr>
<tr>
<td>ADD supervision</td>
<td>1hr/wk – 40hr/yr</td>
<td>1hr/wk – 40hrs/yr</td>
</tr>
<tr>
<td>Training Seminars</td>
<td>2hrs/wk – 96hr/yr</td>
<td>2hrs/wk – 96hr/yr</td>
</tr>
<tr>
<td>Training Team</td>
<td>1hr/wk – 40hr/yr</td>
<td>1hr/wk – 40hr/yr</td>
</tr>
<tr>
<td>Supervision of Master’s Interns</td>
<td>1hr/wk – 20hr/yr</td>
<td>2hrs/wk – 40hr/yr</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>9hr/wk – 388hrs/yr</strong></td>
<td><strong>12hr/wk – 504hrs/yr</strong></td>
</tr>
</tbody>
</table>

### Ratio of Service to Training

<table>
<thead>
<tr>
<th></th>
<th>1 Doc/1 Masters</th>
<th>2 Doc/1 Masters</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scheduled client hours</td>
<td>39:9</td>
<td>58:12</td>
</tr>
<tr>
<td></td>
<td>4.33:1</td>
<td>4.83:1</td>
</tr>
<tr>
<td>Average direct service</td>
<td>33.25:9</td>
<td>50.5:12</td>
</tr>
<tr>
<td></td>
<td>3.69:1</td>
<td>4.21:1</td>
</tr>
</tbody>
</table>

**Explanation:**

1) If we had one doctoral intern and one master’s intern, with the doctoral intern supervising the master’s intern, we recoup approximately 4 hours of direct service for every hour of training invested.

2) If we have two doctoral interns and one master’s intern, with doctoral interns both supervising the master’s intern, we recoup approximately 4, close to 5, hours of direct service for every hour of training invested.

### Costs:

Two Doctoral Interns cost approximately $65,624 per year (salary plus fringe for 12mo)

Program memberships and conference attendance is an additional ~$5,000

Total cost is approximately $70,000

One Psychologist costs approximately $88,495.74/year (salary plus fringe for 12mo)

Or $73,450.85 for 10 month contract

Equivalent of .8 FTE psychologist working 12 month contract.

Equivalent of .96 FTE psychologist working 10 month contract (and we get 12 months of work)
Administrative Issues

The information below is borrowed from a range of training related sources including, but not limited to APPIC (Association of Psychology Postdoctoral and Internship Centers), APA’s CoA (American Psychological Association Commission on Accreditation), CPA, (Canadian Psychological Association) and CCTC (Council of Chairs of Training Councils).

Institutional

Training programs are typically sponsored by an institution or agency whose primary functions include providing services to clientele of sufficient number and variability to meet training goals and objectives. A program may consist of, or be located under, a single administrative entity (institution, agency, school, department, etc.) or may take the form of a consortium. A consortium is comprised of multiple independently administered entities, which have, in writing, formally agreed to pool resources to conduct a training or education program. In addition:

- Training programs should be an integral part of the mission of the institution in which it resides and represented in the institution’s budget and plans.
- Training programs need to have the necessary additional resources required to achieve its training goals and objectives. The program works with the administration of the sponsor institution to develop a plan for the acquisition of those additional resources that may be necessary for program development. These should include:
  - Financial support for its intern stipends, staff, and training activities
  - Clerical and technical support
  - Training materials and equipment
  - Physical facilities and training settings
  - Training settings appropriate to the program’s training model
- Some programs accept interns as volunteers but both APPIC and APA CoA discourage non-paid interns.
- Interns can be paid as stipend employees, hourly employees or stipend non-employees.
- Programs differ on their ability to offer insurance and other benefits. APPIC and APA CoA encourage programs to offer pay and benefits to interns but understand this may not always be possible.
- Most program cover interns under their liability insurance but they vary on requiring interns to carry their own insurance. See the Legal Issues section of this handbook for more on this topic (Link to Legal Issues section).
- The host institution needs to have a method to appropriately identify interns in terms of their employee or human resources status, facility privileges or credentials, and ability to and limits of documenting in patients’ records.
- Programs should have written policies and procedures concerning:
  - Intern recruitment and selection
  - Practicum and academic preparation requirements
  - Financial and administrative assistance
  - Intern performance evaluation
  - Feedback, advisement, retention, and termination
  - Due process and grievance procedures for interns and staff
Self evaluation and self-improvement

APPIC Sample Due Process Statement
http://www.appic.org/Training-Resources/Resources#DueProcess

See APPIC’s selection of program self-studies for examples of required policies.
http://www.appic.org/Training-Resources/Resources#SelfStudy

Role of Training Director (TD)

The program has a designated director or leader who is a psychologist, appropriately credentialed (i.e., licensed, registered, or certified) to practice psychology in the jurisdiction in which the program is located, who is primarily responsible for directing the training program and has administrative authority commensurate with those responsibilities. The program director’s credentials and expertise should be consistent with the program’s mission and goals. In addition TDs:

- typically serves as the liaison between the training program and the host institutions’ management and may need to advocate for the program and its needed resources. TDs may also serve to educate the host institution regarding the nature of the program and its benefit or value to the host institution.
- have administrative responsibility and authority for the training program and the interns but may also serve as a direct supervisor, role model and a source of support and encouragement for interns. Given these multiple roles, it is important for TDs to be highly cognizant of their various roles and boundaries.
- serve as the liaison between the internship program and interns' graduate programs and are responsible for maintaining communication regarding interns’ progress and any difficulties.

CCTC Guidelines on communication with interns’ graduate programs.

APPIC Training Director Resources
www.appic.org

APPIC’s Tips for Trainers (in previous APPIC Newsletters)
http://www.appic.org/About-APPIC/News APPIC-Newsletters
Role of Supervisor

The program has formally designated intern training supervisors who:

- Function as an integral part of the program and have primary responsibility for service delivery.
- Are sufficient in number to accomplish the program’s goals
- Are doctoral level psychologists whose background, training and credentials are appropriate to the program’s training goals
- Have appropriate training and expertise in clinical supervision
- Actively participate in program planning, implementation, and evaluation
- Serve as professional role models consistent with the program’s training goals and objectives

There is no formally agreed upon criteria for who can supervise. However, the core two hours of individual supervision must be provided by a doctoral psychologist licensed in the jurisdiction of the internship program. In addition, as noted above, supervisors’ background and training must be appropriate to the setting and services provided and have competency in clinical supervision. Further:

- The supervisor has full responsibility for the clinical cases supervised. In some programs, an intern may have several supervisors but each case must have a formally designated supervisor of record who has full responsibility for the case.
- Intern supervisors often take on multiple roles including clinical supervisor, mentor, colleague, program director, interviewer or decision maker for postdoc, etc. These multiple roles can be quite confusing for interns and supervisors and it is strongly suggested that supervisors pay particular attention to identifying their current role to themselves and the intern, be highly cognizant of their boundaries with interns and identify potential conflicts of interest with their other roles.
- Supervisors need to be accessible to interns, provide guidance and supervision, and serve as role models who promote interns’ acquisition of relevant knowledge, skills, and competencies.
- Supervisors typically serve as the main source of data in evaluating interns.
- Supervisors are required to co-sign all clinical documentation of services provided by interns regardless of the supervisor being present in the clinical session. Supervisors also need to sign intern evaluations demonstrating they were the author of the ratings and reviewed the evaluation with the intern. The supervisor will also be asked to provide signed letters of recommendation for jobs or postdocs as well as verification of supervised hours for licensure or board certification.
- Supervisors outside the agency may be used, but the program needs to then demonstrate how those supervisors and their feedback on the interns are integrated into the training program. Please see the legal issues section for implications of supervisors being off-site from where clinical services are provided. Within program supervisors are encouraged to consult with other supervisors both within and outside the program, especially if there are particular difficulties with an intern. However, the supervisor or record always maintains primary responsible for the case(s) supervised.
Basic Internship Components

**Hours of supervision.** APA’s CoA requires 2 hours of individual supervision and 4 hours of total supervision. The two additional hours of non-individual supervision may be group supervision or other structured learning activities where there is significant interaction with a licensed psychologist. The key is the information presented needs to be interactive and processed. APPIC requires that supervision be provided at no less than one hour of supervision for every 20 internship hours. Further,

- It is important that the individual supervision time be protected and occur at regularly scheduled times.
- Program’s utilizing telesupervision should be aware that this is a relatively new technology that has a limited literature base and most state licensing boards and accrediting agencies do not yet have formal guidelines or policies on its utilization.

**Didactics (lecture or interactive instruction that is not supervision).** Programs should have some level of didactic instruction that complements clinical work and supervision and that is consistent with its training goals. Many programs include didactics that address APA CoA’s basic content areas including:

- Theories and effective methods of psychological assessment, diagnosis, and interventions
- Consultation, program evaluation, supervision, and/or teaching
- Strategies of scholarly inquiry
- Professional conduct, ethics, law, and related standards
- Issues of cultural and individual diversity

Additionally:

- Most programs utilize a system of evaluation to obtain feedback on its didactics.
- Didactics may be lecture based or interactive. Those that are interactive can meet definitions of non-individual supervision.
• Didactics often have required and optional readings. This is an opportunity to demonstrate the integration of the scientific literature base into the training program.
• Program staff and supervisors from psychology and other disciplines are often utilized in didactics.

**Evaluation of trainees, the program ad overall program self assessment.** Programs need to have an evaluation system that assesses interns’ performance in relation to its stated goals. Evaluations should occur at least twice while the interns are in the program (mid and end year) and after interns have completed the program.

Programs need to have an overall plan for self assessment that typically includes intern evaluation but also may encompass interns’ evaluations of the program, interns’ evaluation of supervisors, and interns’ evaluation of didactics etc. The program should have a mechanism for how it utilizes this information to assess its effectiveness in meeting its training goals and how to improve the program.

Competency Benchmark Evaluation Forms

Sample APPIC Evaluation Forms
[http://www.appic.org/Training-Resources/For-Training-Directors](http://www.appic.org/Training-Resources/For-Training-Directors)

Additional Sample APPIC Evaluation Forms
[http://www.appic.org/Portals/0/docs/Intern-Eval-Form-Portland.doc](http://www.appic.org/Portals/0/docs/Intern-Eval-Form-Portland.doc)

Sample APPIC Post-Internship Evaluation Forms
[http://www.appic.org/Portals/0/docs/PostIntern_follow-up_quest_95UCDavis.doc](http://www.appic.org/Portals/0/docs/PostIntern_follow-up_quest_95UCDavis.doc)

**Selection.** TD’s manage the recruitment and selection of interns.

APPIC Match Links
[http://www.appic.org/Match/About-The-APPIC-Match](http://www.appic.org/Match/About-The-APPIC-Match)

APPIC Guidance on Interview Questions
[http://www.appic.org/portals/0/docs/guidance_on_interview_questions_and_privacy_concerns.pdf](http://www.appic.org/portals/0/docs/guidance_on_interview_questions_and_privacy_concerns.pdf)

Interviewing and the ADA

APPIC Selection Strategies
[http://www.appic.org/Problem-Consultation](http://www.appic.org/Problem-Consultation)
Research. Internship programs are not typically required to provide training in research since internship training is seen as primarily service delivery. However, many programs choose to allow interns to work on their dissertation, other self-generated research projects, or to collaborate with the program’s staff on current research projects. Depending on the importance a program places on research and scholarly endeavors, it may provide a percentage of release time, formal mentorship, and/or didactics in research.

General Links

Canadian Psychological Association
http://www.cpa.ca/

Canadian Psychological Association – Accreditation
http://www.cpa.ca/accreditation/

Accreditation Standards and Procedures
http://www.cpa.ca/accreditation/whatis/

American Psychological Association
http://www.apa.org/

American Psychological Association – Accreditation (CoA)
http://www.apa.org/ed/accreditation/

Accreditation Guidelines and Principles
Legal and Ethical Considerations in Training

There are a number of legal issues facing training programs, with several resources available through the APPIC website: http://appic.org/Training-Resources/For-Training-Directors (go to Legal Issues and Guidelines). In addition, APPIC provides informal problem consultation (IPC) when training directors, graduate program directors, or psychology trainees would like assistance in exploring options and possible solutions to a variety of issues and concerns. For additional information: http://appic.org/Problem-Consultation.

Users may find the following resources helpful in addressing legal issues in training.

- **Guidance for Communication between Graduate Programs and Internship Programs:** these guidelines were developed in 2001 through the Councils of Chairs of Training Councils (CCTC) with the following recommendations (see additional information in attached link): keep in mind that graduate programs and internships work as a team toward the successful completion of the internship which is a requirement for graduation with the doctoral degree in professional psychology. Program directors from the graduate department and internship should communicate at the time of the match, and at the beginning of the internship, with progress reports sent to the graduate department at least semi-annually. Additional communication is recommended as needed depending on the issues/needs of the intern. [http://www.cctcpsychology.org/wp-content/uploads/2014/08/CCTC-Recommendations-for-Communication.pdf](http://www.cctcpsychology.org/wp-content/uploads/2014/08/CCTC-Recommendations-for-Communication.pdf)

- **Guidance on Interview Issues and Privacy Concerns:** this is an article written for the APPIC newsletter by former public member, Mona Mitnick, Esq, to address common concerns and recommendations regarding interview questions and how to avoid personal questions that are protected by privacy rights. [http://appic.org/Portals/0/docs/Guidance_on_Interview_Questions_and_Privacy_Concerns.pdf](http://appic.org/Portals/0/docs/Guidance_on_Interview_Questions_and_Privacy_Concerns.pdf)

- **Billing for services provided by interns:** billing by interns depends on the type of agency and the state in which billing occurs. Be sure to check with your Finance department as well as Corporate Compliance (where applicable) at your organization, as well as other internships in your state to determine if interns can bill or not. For example, interns in hospitals in Minnesota are able to bill for services through private insurance, medical assistance, and managed care companies, but the process is monitored closely by Revenue Management and Corporate Compliance so that all guidelines are followed. Be sure to check within your own state and agency to determine what is possible in your program. At times, regulatory or legislative barriers interfere but can be modified through action steps, in collaboration with the State Psychological Association and APAGS. Please contact Sharon Berry if you would like assistance in this area; Sharon.Berry@ChildrensMN.org

- **Record keeping:** Be sure to review the APA Ethical Principles of Psychologists and Code of Conduct (effective 2003) for review with interns and to guide your development of policies related to confidentiality, record keeping, need for supervisory review and sign off, and appropriate decision-making/problem solving throughout the course of the training year. Many agencies have specific guidelines as well that must be followed and monitored by

- Policies regarding interns working on reports at home: It will be important for programs to establish guidelines for trainees and faculty with regard to working on reports from home, using personal computers, and to monitor adherence to these policies in order to protect confidentiality of patient/client records. For example, internships often require that trainees email themselves the report they work on from home using the agency’s secure server. Once the report is emailed back using the same secure system, they must delete the draft report from their flash drive. Reports may be allowed to be saved as samples at the end of the training year but must be redacted of all personal information and reviewed by the training director as part of the final review process for successful completion of internship. You will want to make these guidelines explicit in order to assure appropriate protection of confidentiality and privacy.

- Internship Evaluation Forms: APPIC membership and CoA Accreditation requires evaluation of internship performance at least twice each year (commensurate with the CCTC guidelines regarding communication between internship and graduate department for two reports annually). It is recommended that you develop evaluation tools that correspond to your program’s stated goals and objectives, in accordance with accreditation guidelines. In addition, most programs also develop evaluations of didactic seminars, case presentations or other formal presentations, supervisors, and end of the year reviews as part of their outcome measurements (also required for accreditation). Examples of various Internship Evaluation Forms can be found on the APPIC Website at: http://www.appic.org/Training-Resources/For-Training-Directors (Go to Evaluation Forms).

- Grievance and Due Process Guidelines: as part of APPIC membership and/or APA accreditation, programs must have due process and grievance policies in place which are reviewed with the interns during their initial orientation. Many programs follow both the training program guidelines as well as the agency policies. The APPIC membership criteria are explicit about required components including due process and grievance procedures, as well as a notice, hearing, and appeal process, and can be found at: http://www.appic.org/Joining-APPIC/Members/Internship-Membership-Criteria (Go to Criterion #12.)

- Due Process Documents: this link will connect you to sample policies from a variety of programs: http://appic.org/Training-Resources/For-Training-Directors (Go to Due Process)

- Problem Consultation: APPIC has established both informal and formal complaint processes for interns, directors of training, and graduate departments. The goals of the Informal Problem Consultation (IPC) process are to provide confidential guidance, consultation, and assistance in resolving the broad array of problems and challenges that may be encountered by concerned parties in the internship or postdoctoral context. At times, serious problems cannot be adequately handled through the APPIC IPC process. For these situations, a formal complaint may be filed with the APPIC Standards and Review Committee (ASARC) --http://www.appic.org/Problem-Consultation. In addition, questions can also be directed to an assigned mentor, or other training directors personally or through
the listserv. The APA Office of Consultation and Accreditation also provides informal discussion and guidance, and can be reached at: http://apa.org/ed/accreditation/contact.aspx

- **Liability Insurance for Graduate Students:** faculty supervisors and directors of training within graduate training programs, internships, and postdoctoral fellowships will guide students in their settings regarding the need for liability insurance. Resources for this coverage are as follows:
  - Frequently Asked Questions: http://www.counseling.org/Students/ACA_Student_Coverage_FAQs.pdf

- **Managing Problem Students (References):** this link will provide you with numerous references of published articles about managing problems with interns and postdoctoral fellows, including the transition from graduate school to internship, competency concerns, and therapists as patients. In addition, please check published articles through the Journal of Training and Education in Professional Psychology, published jointly by APA and APPIC. http://appic.org/Portals/0/docs/problemstudentreferences.pdf

- **Additional Links Regarding Legal Issues:** http://appic.org/Training-Resources/For-Training-Directors (Go to Legal Issues and Guidelines)

  This document will assist programs to address conflicts between professional competence and trainee beliefs.

- **Family Medical Leave & Pregnancy (2007 article):** recommendations for managing medical leave or pregnancy issues for trainees; http://appic.org/Portals/0/downloads/Family_Care_and_Pregnancy-6-20-07.doc

- **FERPA (Family Educational Rights and Privacy Act):** this addresses the importance for graduate schools to balance student privacy and school safety; http://www.apa.org/pi/disability/dart/legal/index.aspx

- **Department of Labor FLSA Information (Fair Labor Standards Act):** this link will help you sort out with your Human Resources department the impact of the FLSA on stipends for trainees.

- **APPIC:** http://www.dol.gov/compliance/laws/comp-flsa.htm

- **US Department of Labor:** http://www.dm.usda.gov/employ/policy/flsa.htm
Information provided by an internship HR department to guide you: While the Fair Labor Standards Act does not specifically address interns in an employment relationship, the Department of Labor uses six criteria to determine whether an intern is an employee. An intern is not an employee if the following criteria apply:

1. The training is similar to that which would be given in a vocational school. An unpaid internship is the practical application of what the student would be learning in school, said Jay Zweig, a partner in Bryan Cave's Phoenix area office. Think of it as supplementing classroom study with on-the-job study.

2. The training is for the benefit of the student. What's most important in an unpaid internship is that the student takes away a skill; it is not generating revenue, said Zweig. The student's primary goal "isn't to produce a work product sold to customers." 

3. The student does not displace regular employees, and works under close supervision. According to Zweig, suspicions that an unpaid intern is really an employee are raised when the student performs tasks that are primarily clerical in nature and are normally handled by a lower-level employee. Exception: A small office where all employees normally rotate jobs and at some point perform clerical work.

4. The employer that provides the training derives no immediate advantage from the activities of the student, and on occasion, its operations may actually be impeded. "This is a pretty critical one," noted Zweig. He offered the example of a student shadowing an employer, asking questions about why things are done the way they are, etc. "You're taking the time to explain thought processes and business strategies — things that are intuitive [to you]. Your efficiency is interrupted."

5. The student is not necessarily entitled to a job at the conclusion of the training period.

6. The employer and the student understand that the student is not entitled to wages for the time spent in training. "There is no classification called a ‘paid intern,'" said Zweig. "You're either an employee or an unpaid intern." Where an employer-employee relationship exists, a student must be paid at least minimum wage and any overtime earned. If the student is under the age of 18, child labor laws may apply.

- **Interviewing and the ADA**: this link provides guidelines for interviewing applicants with disabilities:

- **Release of Raw Data from Psychological & Neuropsychological Testing 2005**: this link will provide you with guidelines regarding the release of raw testing data.
  http://www.appic.org/Portals/0/docs/Rawdata_Steirs_7-10-05.doc

**Newsletter Columns: Internships and the Law (written by various public members on the APPIC Board of Directors and dating back to 1976): Examples:**
• May 2009: page 23: Major Legal Issues Facing APPIC Over Past 9 Years:  
  http://www.appic.org/Portals/0/Newsletters/appic_may09_4.pdf

• November 2007: pages 10-11: Release of Student Information Under HIPAA and FERPA:  

• November 2006: page 13: Interviewing Intern Applicants:  
  http://www.appic.org/Portals/0/Newsletters/November_Issue_2006.pdf

• July 2004: page 6: Requesting photographs as a part of the internship or postdoctoral application and selection process:  

Common Ethical Issues for Training Programs:

• Ethics in the Age of the Internet: this column addresses the interface between our personal and professional lives, which is a common issue facing students and early career professionals:  
  http://www.apa.org/monitor/2008/07-08/ethics.html

• The Relationship Between Diversity and Ethics in Psychology: this column addresses the role of diversity in decision-making by psychologists:  

• Multiple Relationships in Campus Counseling Centers: this column addresses the ethical dilemma in many settings where a psychologist or trainees has multiple roles and relationships:  
  http://www.apa.org/monitor/2008/05/ethics.html

• Ethics from a Developmental Perspective: this column addresses ethical development across the professional lifespan:  
  http://www.apa.org/monitor/2008/05/ethics.html

• Posting on the Internet: this column addresses posting personal information on the internet through blogs, etc.:  

• The Titles We Use: this column addresses the use and meaning of titles by students, trainees, and psychologists:  
  http://www.apa.org/monitor/feb06/ethics.aspx
Quality Assurance Mechanisms

All parties relevant to internship training – trainers, trainees, and consumers including the general public – are concerned with the quality of psychology internships. Any proposed internship has two basic requirements: (1) that it provide quality services to the public, and (2) that it provide quality training to its interns. Embedded in these requirements are assumptions that all services and training are ethical, that training experiences lead trainees toward completion of their doctoral degree requirements and licensure as psychologists, and that internship sites strive to meet the highest professional standards, including American Psychological Association (APA) or Canadian Psychological Association (CPA) accreditation. In fact, the APA Council of Representatives voted in July, 2013 to affirm “that health service provider psychologists must be trained in APA/CPA accredited doctoral and APA/CPA accredited internship programs or programs accredited by an accrediting body that is recognized by the U.S. Secretary of Education for the accreditation of professional psychology education and training in preparation for entry to practice. APA also affirms that graduation from an APA/CPA accredited doctoral and APA/CPA accredited internship training program, or programs accredited by an accrediting body that is recognized by the U.S. Secretary of Education for the accreditation of professional psychology education and training in preparation for entry to practice, be a prerequisite for licensure in independent practice as health service psychologists. Unaccredited programs that train health service psychologists are expected to obtain APA/CPA accreditation in a timely fashion following APA Council of Representatives approval of this policy, no later than five years for doctoral programs and no later than seven years for internship programs.”

Internal Quality Assurance

Quality assurance can occur via both internal and external mechanisms. All training programs are encouraged to undergo ongoing internal self-assessment to monitor continuously their own growth and development. For example, the APA Accreditation Guidelines and Principles (G&P) for Internships under current Domain F: Program Self-Assessment and Quality Enhancement states: “The program demonstrates a commitment to excellence through self-study which assures that its goals and objectives are met, enhances the quality of professional education and training obtained by its interns and training staff, and contributes to the fulfillment of its host institution’s mission” (2009, p. 19). It then describes procedures necessary, the need to compare the program to local, regional, state/provincial, and national standards, and the necessity of the host institution providing resources and valuing the program and staff. The CPA Standards for Accreditation on Internships under Standard VIII: Programme Evaluation and Quality Improvement asks: “How do we know when we are meeting our goals and objectives? What do we do with the information gained from examining our success in meeting our goals and objectives? How does the information gained from self-assessment influence the continuous quality improvement of our training model and our goals and objectives?” (CPA, 2011, p. 54). In short, the aim is to develop an evaluation-rich environment (Peterson, 2004) in which self-assessment is an ongoing, everyday process. This model would assume a clear statement of outcomes to be defined and measured.
By evaluation-rich environment, Peterson (2004) meant a program characterized by mutual respect between faculty and students in which both faculty and students feel safe to be evaluated by the other on their skills. Evaluation is frequent and free-flowing. He pointed out that in an environment in which there is little evaluation, when it does occur, the impact is like “a bombshell” (p. 422). However, in evaluation-rich environments, there is safety “because one always knows where one stands with others, there are diverse evaluation methods and criteria, and there is a free flow of evaluative information” (p. 422). There is an attitude that change, openness to growth, and developing new competencies is evidence of strength, not weakness or prior deficits. In this atmosphere of mutual respect, it would be considered disrespectful to withhold feedback, as it would be to bash someone with excessive hurtful feedback.

**Competency Benchmarks.** One of the first steps in quality assurance is setting training program goals in terms of competencies to be achieved in trainees and procedures for measuring outcomes for success. For example, the model provided by the APA Benchmarks Task Force titled, Assessment of Competency Benchmarks Work Group: A Developmental Model for the Defining and Measuring of Competence in Professional Psychology available on the APA website (http://www.apa.org/ed/graduate/competency.aspx) under the Education Directorate can be invaluable in thinking about competency goals for an internship. This work group (convened by the APA Board of Educational Affairs in collaboration with the Council of Chairs of Training Councils-CCTC) identified 15 core competencies areas across three developmental levels, building upon earlier competency models articulated by the National Council of Schools and Programs of Professional Psychology (NCSPP) (Peterson, Peterson, Abrams, & Stricker, 1997) and the Association of Psychology Postdoctoral and Internship Centers (APPIC) and APA (Kaslow, 2004; Rodolfa, Bent, Eisman, Nelson, Rehm, & Ritchie, 2005). The core competencies are divided into foundational competencies, which are the knowledge, skills, and attitudes that serve as the foundation for the functions a psychologist is expected to perform (such as a knowledge of the scientific foundation of psychology, an understanding of ethics and their application, an awareness and understanding of individual and cultural diversity), and functional competencies, which include the major functions that a psychologist is expected to perform, each of which requires a reflective integration of foundational competencies in problem identification and resolution (such as assessment/diagnosis, intervention, research, consultation, supervision, etc.).

Of particular relevance to internship training programs are the suggested developmental levels of competence expressed as essential components and behavioral anchors for “Readiness for Internship” and “Readiness for Entry to Practice.” The “Readiness for Internship” components suggest the attributes the internship selection committee would be looking for in terms of competencies in its applicants. The “Readiness for Entry to Practice” components would suggest goals and objectives for the internship training program to reach by the end of the training sequence. As an illustrative example, under the foundational competency ethical-legal standards-policy, which is described as the application of ethical concepts and awareness of legal issues regarding professional activities with individuals, groups, and organizations, some behavior anchors for “Readiness for Internship” include: successfully completes coursework in ethics and legal aspects of professional practice, identifies ethical dilemmas effectively, actively consults with supervisor to act upon ethical and legal aspects of practice, addresses ethical and legal aspects within case conceptualizations, and recognizes and discusses the limits of one’s
own ethical and legal knowledge.

Some behavioral anchors for “Readiness for Entry to Practice” include: spontaneously and reliably identifies complex ethical and legal issues, analyzes them accurately and proactively addresses them, is aware of potential conflicts in complex ethical and legal issues and seeks to prevent problems and unprofessional conduct, and is aware of the obligation to confront peers of organizations regarding ethical problems or issues and to deal proactively with conflict when addressing professional behavior with others. A second example of a functional competency would be under Intervention Implementation for which behavioral anchors indicating “Readiness for Internship” include: apply specific evidence-based interventions, and present case that documents application of evidence-based practice. Behavioral anchors for “Readiness for Entry to Practice” include: ability to independently and effectively implement a typical range of intervention strategies appropriate to practice setting, ability to independently recognize and manage special circumstances, ability to collaborate effectively with other providers or systems of care, and self-care. Further elaboration of the competencies and their assessment including sample assessment tools can be found on the APA website at http://www.apa.org/ed/graduate/benchmarks-evaluation-system.aspx. In addition, the Commission of Accreditation (CoA) is planning to incorporate a common set of primary, core professional competencies in its new accreditation standards. Programs will be allowed the flexibility to define secondary competencies beyond the core.

Work on the NCSPP competency model has been expanded to include competency developmental achievement levels (DALs) (approved by membership on August 15, 2007) which are identified for their seven competencies 1) Relationship, 2) Assessment, 3) Intervention, 4) Diversity, 5) Research Evaluation, 6) Management/Supervision, and 7) Consultation/Education. Their model tracks knowledge, skills, and professional attitudes expected at similar points to the benchmarks project, here labeled: “Begin Practicum,” “Begin Internship,” and “Complete Doctoral Degree.” More details and examples can be found at www.ncspp.info/DALof%20NCSSPP%2020-21-07.pdf and in a new book describing competency-based education about to be published by APA (Kenkel & Peterson, 2009).

Further delineation of competency models for health service psychologists has been developed by the APA Health Service Psychology Education Collaborative (HSPEC) and published in the September, 2013 issue of the American Psychologist. These competencies to be assessed by training programs are categorized under 1) Science, including a) Scientific Knowledge & Methods and b) Research/Evaluation, 2) Professionalism, including a) Professional Values and Attitudes, b) Individual and Cultural Diversity, c) Ethical, Legal Standards and Policy, and d) Reflective Practice/Self-Assessment/Self-Care, 3) Relational: Interpersonal Skills and Communication, 4) Applications including a) Evidence-based Practice, b) Assessment, c) Intervention, and d) Consultation, 5) Education including: a) Teaching, and b) Supervision, and 6) Systems including: a) Interdisciplinary/Interprofessional Systems, b) Professional Leadership Development, and c) Advocacy (local, state and national).

**Follow-through.** Once goals and objectives are set, and desired competency outcomes and strategies for measuring them are decided, then data collection and analysis can begin. Many programs collect ongoing data from both current and past interns, employers of past interns,
supervisors of interns, etc. Ongoing self-assessment among staff and current interns focusing on “how are we doing?” is essential, so that changes can be made, as needed. Making sure that interns are equipped with skills needed in the marketplace is also critical, so monitoring marketplace needs locally, regionally, nationally, and perhaps even internationally, is important.

Programs will also want to assess fidelity to their stated requirements and processes, so that the program and potential interns are assured that scheduled supervision hours take place, client records are completed and secure, didactic training sessions are evaluated, and interns receive written evaluation and feedback on their performance. Records of internship training must also be maintained and made available to various agencies and credentialing boards. All policies and procedures and quality assurance mechanisms are under the oversight of the Training Director, a senior, experienced licensed/registered psychologist.

External Quality Assurance

One critical first step in external quality assurance is making certain that any internship experience prepares the intern for eventual licensure as a psychologist. As licensure requirements vary by jurisdiction (state, province, and territory), it behooves the internship to consider a broader geographic area than just the jurisdiction in which it is located, as it will likely draw interns who will become licensed in other jurisdictions.

There are a number of organizations, memberships, and accreditations that can aid in quality assurance for internship training, and even provide mentorship in the accreditation process. No new internship that is aiming for APA or CPA accreditation starts out at an accredited level but must work toward it. One first step is often membership in the Association of Psychology Postdoctoral and Internship Centers (APPIC) or, if in California, the California Psychology Internship Council (CAPIC) or, if in a college or university counseling center, the Association of Counseling Center Training Agencies (ACCTA); to be described in following sections. However, a recent internship accreditation status was developed by the CoA that allows internships to be “Accredited on Contingency” within the first year of interns being employed at the site.

This toolkit document assumes that internships are interested in working toward accreditation for the sake of the professional development of their interns, as trainees who gain their experience at internships which are not APA or CPA accredited or APPIC, ACCTA, or CAPIC members may have later difficulties in their career paths. They may find themselves not eligible for particular job opportunities or professional credentials, particularly as the newly endorsed (July, 2013) APA policy regarding requiring APA/CPA accreditation for health service psychologists takes effect.

Licensure. Information on licensure issues in general and licensure in specific jurisdictions can be found on the website of the Association of State and Provincial Psychology Boards (ASPPB) at www.asppb.net. As stated above, one can seldom assume that all interns trained at an internship site will plan to work only in that jurisdiction, nor would it be likely that a given intern would spend a whole career in one jurisdiction. Hence, an internship would want to be
sure to satisfy licensure requirements for the jurisdiction in which it is located, but also search more widely to satisfy a broad range of requirements so that interns who complete the internship would have licensure mobility.

General information regarding licensure and credentialing brochures available by request or that can be downloaded from the website include:

- ASPPB’s Guide for Students and Faculty: Entry Requirements For the Professional Practice of Psychology
- ASPPB Information for Candidates: Examination for Professional Practice in Psychology (EPPP)
- EPPP: Myth vs. Reality
  [http://www.asppb.net/?page=MythsvsReality&hhSearchTerms=%22myth%22](http://www.asppb.net/?page=MythsvsReality&hhSearchTerms=%22myth%22)
- Credentials Verification Program
  [http://www.asppb.net/?page=TheBank&hhSearchTerms=%22Credentials+and+Verification+and+Program%22](http://www.asppb.net/?page=TheBank&hhSearchTerms=%22Credentials+and+Verification+and+Program%22)

All of these brochures are helpful in preparing for licensure and a career as a psychologist. There are also materials on practice exams ([http://www.asppb.net/?page=Practiceexinfo](http://www.asppb.net/?page=Practiceexinfo)) on the website. All can be put to good use in training seminars which are an important component of any internship experience.

Licensure information for specific jurisdictions can be found by going to the ASPPB main page and looking at the Quick Links section on the left side of the page. Under the second listing: “Licensing Board Contact Information” will be found contact information and quick links for all the psychology licensing boards in the United States and Canada, as well as their laws and regulations. Their application requirements, and in many cases, even their application forms, are available on their websites.

In addition, there is some summary information available under the 10th Quick Link: “Specific Licensure Requirements by State/Province/Territory (Handbook).” This section of the website contains summary tables that provide a quick oversight of specific licensure requirements by jurisdiction, as well as specific requirements for individual jurisdictions. Sample summary tables include:

- EPPP Passing Score Requirements by Jurisdiction & License Type
- Earliest Time the EPPP Can Be Taken by Jurisdiction & License Type
- Oral Examination Requirements by Jurisdiction & License Type
- Degree Level Requirements for Licensure by Jurisdiction
- Institutional Accreditation Requirements by Jurisdiction
- Temporary and Provisional Licensure Provisions by Jurisdiction

These tables compare some of the most common variables of concern across jurisdictions. It is still important to consult the total set of licensure requirements in any jurisdiction of interest. There may be important variations in such variables as the total number of hours of experience
required, or the total number of hours of supervision required, or the years of experience or credentials of the supervisor. Missing an important variable can negate an internship experience meeting a licensure requirement. This information can be used both to structure the internship experience, in general, and also to help prepare specific interns for work in particular jurisdictions. There are also jurisdictional specific summaries under the “Jurisdictional Handbook” listing.

All interns should consider banking their credentials to support their ongoing licensure mobility and the security of those credentials. In a highly mobile society in which it is often difficult later to track down sources to verify training experiences, banking credentials that are also primary source verified is good insurance for the future. It is also good protection against disastrous events. ASPPB (www.asppb.net), the National Register of Health Service Providers in Psychology (www.nationalregister.org), and the American Board of Professional Psychology (www.abpp.org) provide banking services for doctoral students and interns. The ABPP service is aimed toward banking your credentials toward board certification. The ASPPB and National Register banking programs are both primary source verified.

**APPIC: Association of Psychology Postdoctoral and Internship Centers.** A new internship should join APPIC as soon as feasible and it meets membership requirements. APPIC is a membership organization consisting of internship and postdoctoral programs in the U.S. and Canada. In addition, APPIC oversees the uniform application for internship (APPIC Application for Internship—AAPI), the national internship match (through National Matching Services), and provides other important resources such as mentoring programs (for new internship programs as well as assisting programs to become APA-accredited), informal and formal problem consultation, and a wealth of training materials online. APPIC is a member of the Council of Chairs of Training Councils.

The APPIC website is located at [www.appic.org](http://www.appic.org) and is regularly updated.

Membership criteria are available on the APPIC website (with additional membership criteria for consortia). General requirements for internship programs include having an organized training program, at least two interns, a licensed psychologist training director, at least two FTE licensed doctoral level psychologists on staff, at least two hours/week of individual supervision and at least two hours/week of additional training activities, and other considerations including written due process procedures, sufficient financial resources, and so on.

Membership applications are available online (see APPIC website) and are due March 1 or September 1 each year. Membership benefits include listing in the APPIC online directory, a subscription to the journal *Training and Education in Professional Psychology*, the APPIC newsletter and members-only listserv, and use of the match services including Phase I, Phase II, and the post-match vacancy service. APPIC strongly encourages all internship programs to become APA-accredited and has partnered with the Western Interstate Commission for Higher Education in developing the APPIC Accreditation Readiness Project in order to identify and assist APPIC member programs in that process.

**National Register of Health Service Psychologists**
If interns want future credentialing in the National Register of Health Service Psychologists, their internship will be evaluated against national criteria that have existed since 1980, at which time the Register adopted what were then APPIC criteria. They have evolved similarly over time. The main difference is that the National Register will allow a candidate to complete an internship after the completion of the doctoral degree. However, the Register prefers their applicants to complete an internship that is APA- or CPA-accredited and an APPIC member. For the National Register criteria, see http://www.nationalregister.org/internship.pdf.

The APPIC website (www.appic.org) provides a wealth of information about APPIC policies, general internship information, match policies and procedures, and other psychology training information. APPIC also provides valuable listserv resources.

ACCTA: Association of Counseling Center Training Agencies. ACCTA was founded in 1978 and is an organization of the College and University Counseling Centers in the United States and Canada. It has provided direction and guidance to hundreds of Training Directors and internships. ACCTA is an active and vocal participant in national politics and events as they affect and shape psychology education and training and represents one of the largest single training settings for APA-Accredited internships in the U.S.

ACCTA thrives because of its culture of collaboration, community, and culture building, with multiple voices informing both the process and the content. ACCTA is committed to being an organization that is sensitive, knowledgeable, and inclusive of the many cultures and diverse identities of our members. ACCTA strives to engage in the ongoing and fluid process of working to create safe and welcoming space for everyone. ACCTA has grown tremendously in the past 30+ years from the original 17 members to close to 170 programs. Dailey and Armstrong (2012) have developed a helpful document for those working on new and existing internships entitled ‘Developing and Strengthening Internships: From Conception to Accreditation.’ This document is located in the password protected section of the ACCTA website, but the 2012 version is available in Appendix A at the end of this section.

Qualifications for Membership:
Training Agencies are defined as organizations providing a one year full-time or two year half-time pre-doctoral experience in a university or college counseling center for trainees completing the internship requirement for their doctoral degrees in professional psychology. Counseling center training agencies which are members of a consortium are also eligible for membership. Counseling centers which are in the active process of developing a pre-doctoral internship program may also become members.

One representative from each Agency attends the annual ACCTA conference except in a year of transition when the out-going and in-coming Directors may attend. Only one member may vote on behalf of the Agency membership. Dues are $300 per year and are payable at the start of each fiscal year (October 1). New member dues that are processed from May through September count toward not only the remainder of the ACCTA fiscal year but the next year as well.
ACCTA website may be found at www.accta.net.

CAPIC: California Psychology Internship Council. CAPIC was founded in 1991 as a consortium of doctoral programs and internships in California working to improve integrated training and serve California population needs. CAPIC currently has nearly 200 member agencies including postdocs. Approximately 500 psychology doctoral students are at CAPIC internships every year, with about half in one-year full-time placements and half in two-year half-time placements. Most full-time and more than half of half-time placements are paid. Funding comes from such sources as the California Department of Mental Health which therefore goes to provide mental health care to Californians in need.

Among the functions of CAPIC listed on its website are:
1. Helps facilitate internship quality assurance.
2. Provides standardized application, evaluation, and contract forms used by internship programs.
3. Implements policies, procedures, and timetables that improve the application/selection process for students, internship programs, and member schools.
4. Promotes culturally relevant training.
5. Advocates for increased public awareness of the benefits of student services in the field of mental health.

Criteria for CAPIC membership include such points as:
- Being an organized training program with a planned, programmed sequence of training experiences.
- A clearly designated doctoral-level licensed psychologist who is responsible for the program and on site for minimum 20 hours per week for full-time internship and 10 hours per week for half-time.
- Specification of minimal number of staff.
- Provision of supervision at a minimum rate of 10% of the time worked each week.
- Provision of wide range of psychological assessment and intervention activities.
- At least 25% of intern’s time in face-to-face psychological services.
- Provides a minimum amount of didactic activities: four hours per week for full-time internships and two hours per week for half-time internships.
- Internship is post-practicum and precedes doctoral degree.
- Internship has written brochure and due process procedures.
- Minimum 1500 hours, no less than 9 months, no more than 44 hours per week
- Must issue certificate of completion
- Must demonstrate evidence of cross-cultural training
- At least twice a year formal written evaluations

Their full detailed criteria, application form, and policies can be found on their website at www.capic.net. CAPIC members do take students from outside California.
APA CoA: American Psychological Association Commission on Accreditation. To meet the APA Guidelines and Principles (G&P) for accreditation, an internship must currently demonstrate it has met the guidelines in each of eight domains listed below (the G&P is undergoing a revision process in 2013 and 2014). The APA Office of Program Consultation and Accreditation will provide assistance and consultation with this task.

All of the expectations of the G&P can be found on the APA website at www.apa.org under the Education Directorate then under Accreditation or more specifically at http://www.apa.org/ed/accreditation/about/policies/guiding-principles.pdf. To provide an idea of what is expected under each domain, a few important points for each are summarized below:

- **Domain A: Eligibility**, the G&P is primarily interested in whether the program is part of a larger institution or agency which serves a large enough population to give the interns a good variety of experience and which respects and understands cultural and individual diversity.

- **Domain B: Program Philosophy, Objectives, and Training Plan**, the G&P wants to be sure that the program has a clearly specified philosophy of training that fits the mission of its sponsor institution with consistent goals and objectives and a logical training sequence. It is necessary that intern supervision is regularly scheduled and sufficient and that the program has a designated leader who is a doctoral psychologist, appropriately credentialed to practice psychology in the jurisdiction.

- **Domain C: Program Resources**, the program is expected to have formally designated doctoral level licensed psychologist intern training supervisors who are sufficient in number and an identifiable body of interns who are sufficient in number to ensure meaningful peer interaction, support, and socialization. The program also has necessary additional resources, such as stipends, clerical and technical support, training materials, physical facilities, etc.

- **Domain D: Cultural and Individual Differences and Diversity**, the program is expected to have made systematic, coherent, and long-term efforts to attract and retain interns and staff from differing ethnic, racial, and personal backgrounds, as well as provide interns with relevant knowledge and experiences about the role of cultural and individual diversity in psychological phenomena and professional practice.

- **Domain E: Intern-Staff Relations**, the program demonstrates mutual respect and courtesy between interns and training staff in all their interactions. Also, at the time of admission, the program provides interns with written policies and procedures, and interns receive written feedback at least semiannually.

- **Domain F: Program Self-Assessment and Quality Enhancement**, the program, with appropriate involvement from its interns, engages in regular, ongoing self-studies regarding its effectiveness in achieving its goals and objectives.

- **Domain G: Public Disclosure**, the program describes itself accurately in all written materials and other communications to all its “publics.”

- **Domain H: Relationship with Accrediting Body**, the program informs the accrediting
body in a timely manner of important changes and remains in good financial standing.

The August, 2013 CoA newsletter suggested that the new standards for accreditation will contain five “areas” consistent across the three levels of accreditation with specifics within the areas (e.g., internship) tailored to the unique needs for that training level. Diversity will be integrated throughout the standards. The standards are:

1. **Institutional and Program Context**
   A. Type of program
   B. Institutional & program setting and resources
   C. Program context and policies
   D. Institutional/program context and diversity

2. **Curriculum, Outcomes and Evaluation**
   A. Goals of the program
   B. Competencies: This will include core competencies as defined by the profession as well as program-defined competencies.
   C. Evaluation of intern competencies and ongoing continuous quality evaluation of the program.

3. **Interns**
   A. Selection processes and criteria
   B. Educational environment and climate
   C. Program efforts to maximize trainee success
   D. Intern diversity

4. **Staff Credentials and Sufficiency**
   A. Program leadership
   B. Staff qualifications
   C. Staff sufficiency
   D. Staff diversity

5. **Communication Practices**
   A. Public disclosure
   B. Communication with program applicants
   C. Communication with accrediting body

**Application process.** Applying for APA accreditation begins with a written self-study that follows the format of the G&P outlined above. The Office of Program Consultation and Accreditation will provide the necessary directions and materials which are available on the website at [http://www.apa.org/ed/accreditation/about/policies/self-study-instructions.aspx](http://www.apa.org/ed/accreditation/about/policies/self-study-instructions.aspx). It is advisable for the person or persons preparing the self-study first to attend an APA Self-study workshop and/or Site Visitor Training, which are frequently offered prior to the annual APA convention and in conjunction with the annual training council meetings (APPIC, ACCTA, CUDCP, CCPTP, CDSPP, NCSPP) at no cost. These workshops provide a solid understanding of the accreditation process and what APA, the Commission on Accreditation (CoA), and the Site Visitors are looking for in your program. Think through who is best at writing this self-study. Some programs assign it to one person. In others, it is a group project. Decide what works best for your site. Then make sure that whoever is involved is given enough time off from other duties to give the self-study sufficient attention.

Applications may be submitted at any time, but the three submission deadlines if you want to fall within a certain review cycle are September 1 (January through March), January 1 (April through August), and May 1 (September through December). There is no guarantee that your program
will fall within a certain visit cycle as an applicant program first-timer, as you may have to rewrite a portion of the self-study, provide additional material, readers may take longer, etc. The program is authorized to arrange a site visit once the self-study is assessed to be complete and comprehensive.

**Site visit.** Once your program has been approved for a site visit, you will receive a list of three names from which to choose a site visit chair and a list of five names from which to choose your second visitor. You may not choose someone with whom you have a conflict of interest, i.e., someone you know too well, went to school with, published with, your former professor, etc. Don’t take it personally if someone turns you down. Not everyone on the list is willing to do a site visit—some have already done too many that year, may have a conflict with your timing, etc. If you cannot find a visitor from the lists given, it is OK to ask APA for an additional list.

Be sure to prepare your staff and interns for the site visit, not in terms of what to say, but more in terms of what to expect. The site team will also want to interview anyone else involved with your training program, so those individuals also need to be prepared. Make sure everyone is aware of your training model, goals and objectives, competencies, etc. It can be helpful to prepare an Executive Summary of the self-study for any administrators of your institution who may be interviewed to comment on future support and funding for your internship and how it fits with the institutional mission. A brief meeting with them before the visit is also beneficial.

The site visitors determine their own visit schedule, but they will usually request that you prepare a first draft. Then they will approve your draft or request changes. Site visitors will pay for their own travel, lodging, meals, etc., but you will be expected to make their lodging reservations as you will know best what lodging is most convenient for the visit. Site visitors will not socialize with staff and interns during their meal times but will usually spend their meals with each other sharing impressions or working on their report activities. Site visitors share their observations and impressions with the CoA but do not make recommendations regarding accreditation status.

**Site visit report.** Site visitors must complete their report to APA within 30 days of the visit. The report will then be sent to you for your comment, and you will have 30 days in which to correct any inaccurate information and/or clarify misperceptions. You may also present any changes made since the site visit.

Your self-study, the site visit report, and your response to the site visit report will be read by the CoA readers prior to the next CoA meeting, at which your program information will be presented. The CoA will discuss your program and vote, and you will receive a letter describing their decision and reasons within 30 days of the meeting. If your program is accredited, the decision letter will contain the number of years of accreditation (maximum 7 years) and will inform you of any issues that need to be addressed in your annual report or next self-study. Accreditation is effective as of the last day of the site visit.

Be aware that once your program is accredited, there are appropriate places and ways to list that accreditation in public places and materials. Be sure to follow ethical standards and practices in listing the program’s accreditation status. You will be expected to submit an electronic annual report every year that you are accredited until your next self-study is due for re-accreditation. The annual report deadline reminder will be sent to the Training Director electronically. (For more detailed helpful hints, see Dailey & Armstrong on the ACCTA website. [http://www.accta.net/](http://www.accta.net/))
The Canadian Psychological Association (CPA) Accreditation Standards and Procedures for Internship Training Programmes in Professional Psychology in Clinical, Counselling, and School Psychology (Fifth revision, 2011) are substantially similar to the current APA G&P. Their categories are listed below. There is a separate listing for internships in Clinical Neuropsychology. The CPA website to find details for all materials is www.cpa.ca/accreditation. To provide an idea of what is expected in each category, a few important points are summarized below:

- **Eligibility** includes the expectation that the internship programme receives the support of its host department or discipline, including stable and specifically-designated budgeting. The Director of Training is expected to be an experienced, senior, and registered psychologist.

- **Philosophy, Mission, and Model:** Every programme has a philosophy of training and values and principles about teaching and training. Included in that model are some expected requirements including competencies of interns, breadth of training, and increased responsibility for the trainee.

- **Diversity:** “The Canadian mosaic represents one of the world’s most culturally diverse nations.…..It is based on First Nations heritage, two linguistic groups with roots in European cultures (i.e. French and English), international immigration, and a commitment to multiculturalism recognized in provincial and territorial and federal statutes”(p. 51). Therefore, the programme actively demonstrates its understanding and respect for variability in human diversity in staff and interns and provides instruction and practical experience with the variability in human diversity.

- **Professional Psychology Staff** are doctoral-level registered psychologists sufficient in number to deliver services and supervise interns.

- **Interns:** Because interns contribute to and support the training of their peers, at least two, and preferably more, interns are enrolled in the internship programme. They are treated with the same dignity and respect accorded to professional staff.

- **Facilities and Resources** may be considered adequate if they include quiet and unobstructed work space, secure storage for work, efficient means of communication such as voice mail and e-mail, sound dampened space to work with clients, clerical support, audio-visual resources, computer access, and library facilities.

- **Public Disclosure:** All descriptive materials are accurate, and evidence of accreditation status and term is made available to applicants.

- **Programme Evaluation and Quality Improvement** are ongoing processes in which the programme continuously reviews its training model, goals and objectives, and curriculum in light of the evolving body of scientific knowledge as it applies to clinical practice; current professional and regulatory standards of best professional practice; local, regional, and national needs; and the jobs and career paths of graduates.

- **Relationship with the CPA Accreditation Panel:** All accredited programmes comply with Accreditation Standards and Procedures, submit self-studies and annual reports, maintain accurate records, inform the CPA Accreditation Panel of important programme changes, and submit annual fees.

**Application process.** Given that the accreditation process is voluntary, it is the programme’s responsibility to initiate the process after it has developed its training philosophy and model (including goals, objectives, and their evaluation) in addition to demonstrating compliance with the CPA Accreditation Standards. The self-study must be submitted in accordance with CPA instructions. All formal correspondence with the programme will primarily be addressed to the
Director of Training.

The self-study describes the past and present and conveys how their examination will inform future planning for continuous quality improvement. The Accreditation Panel wants to know how the programme operationalizes its philosophy of training, how interns acquire skills and knowledge, what outcome measures are used to determine if those skills and knowledge are imparted, and how it is determined that the internship is serving the public need.

**Site visit.** Following the submission of the written self-study and its acceptance by the Accreditation Panel for completeness and basic compliance with Standards, a site visit may be scheduled. The Accreditation Office will send the programme instructions for conducting a site visit and a list of names of potential site visitors from which the programme can select a site visit team. For purposes of the site visit, Canada has been divided into regions: 1) the Atlantic provinces (Newfoundland, Nova Scotia, Prince Edward Island, and New Brunswick), 2) Quebec and Ontario, 3) the Western provinces (Manitoba and Saskatchewan) and 4) the Mountain provinces (Alberta, British Columbia, and the Territories). Normally the site visit team will contain one member from outside the region of the programme and two from within the region.

During the site visit, the visitors collect data about the programme that can be used to verify and enhance the information reported in the self-study materials. They do not make any recommendations about the programme or give any advice about changes. The site team conveys information to the Accreditation Panel but does not make a recommendation regarding accreditation status. After the visit, the site visit team has 30 days to submit its report to CPA. The programme then receives a copy of the report and has 30 days in which to respond with any objections, corrections, or additional information.

**Accreditation decision.** The Accreditation Panel customarily makes decisions in the Fall or Spring each year. Possible decisions are award, denial, or renewal of accreditation, with accreditation being effective as of the date of the site visit. Accredited programmes may also be placed on probation or inactive statuses. Programmes are notified of decisions by telephone or electronic mail followed by a formal decision letter.

As a condition of accreditation, a programme must submit an annual report. Each accredited programme should receive a reaffirmation letter and must submit an annual fee. A long self-study would be submitted when re-accreditation is due (after three to seven years).

**References**


Canadian Psychological Association (2011). *Accreditation standards and procedures for doctoral programmes and internships in professional psychology* (5th ed.). CPA.


Appendix A

**Developing and Strengthening Internships: From Conception to Accreditation**

Kathlyn C. Dailey, Ph.D. and Sarah K. Armstrong, Psy.D.
Association of Counseling Center Training Agencies (ACCTA)

**Funding**

Before seeking funding, determine what you need for the internship to be successful: # of interns, staffing (including training/supervision), office space, technology (computers, phones, recording equipment), and financial support (travel, support services, salaries, benefits). Obtain state licensing laws/rules and regulations, APPIC membership guidelines and APA accreditation guidelines. Develop your program to meet those guidelines, in that order, as resources become available. Determine what resources you already have and what additional resources are easily accessible.

When looking at the costs of an internship program, look also at the financial benefits (cost-benefit analysis; see *Psychology Internship Development Toolkit* link on ACCTA website for examples):

- Look at the # of hours of service provided by interns/stipends (cost of their service provision per hour) vs. that of staff
- Look at the hours of service provision by interns in relation to the amount of staff time needed for training/supervision
- If interns can supervise practicum students, you will likely be able to add additional hours of therapy at little cost

The first person to get on board, after your director, is the person above him/her in the reporting line (e.g., V.P., Asst. V.P.):

- Tie the internship to the mission of your division and university – service to students (Student Affairs) and education (University)
- Use IACS standards (approximately 1,200 students for every staff member) for the number of staff you should have – interns are a cost-effective way to expand staff
- Show hard data for number of clients being seen; if you have a waiting list, present this also
- Early in the process, make the counseling center an integral part of the university community – be responsive to other departments, serve on committees and work with student groups; utilize their feedback/support with funding sources

**Other sources of funding:**

- Student Service Fees – enlist aid of students in student government or organizations you have helped – find out who is on the committee and don’t hesitate to discuss your plans with those who are supportive/appreciative of your Center (e.g., faculty with whom you have consulted; groups for whom you have done presentations/outreach; and even students who have been clients of the center who are very open about the good work that has been done by your staff)
- Psychology and other academic departments – ask for funding from departments for which you train practicum students, or arrange to have faculty serve as supervisors or seminar presenters to free up your own staff
• Utilize the salary of a staff member who has resigned/retired for stipends instead of replacing the staff member (won’t work with small staffs)
• Redirect other counseling center funds into the internship – e.g., money for contract counselors, some travel funds, practicum stipends
• Contract with outside departments/offices/groups to provide consultation, training, or other services for a fee, which will be dedicated to the internship

Miscellaneous:
• Start off with a part-time internship or with fewer interns than your end goal
• Have your intern slots listed as staff positions and have their salaries in the same category as other staff salaries – it may be easier to get them cost of living raises if increases are linked to a staff position, rather than requesting raises for the internship program

Motivating and Organizing Staff

Advertise/promote advantages of having an internship program:
• Prestige
• Increased ability to attract quality staff
• Opportunities for staff to train/teach
• New ideas will be coming into the center
• Training role will keep staff on their toes
• Potential for adding diversity to the staff

Organize staff:
• Get your director on board – you will need both financial and administrative support
• Recruit staff members most interested in training to serve on Training Committee
• Identify interests and expertise of staff and incorporate into program
• Licensed Psychologists – serve as primary supervisors and engage in same training activities as other staff
• Master’s level/unlicensed/other mental health professionals – seminar facilitators, seminar presenters, group supervision, group co-leader/supervisor, core coordinators, case supervisors

Miscellaneous:
• Identify staff members opposed to internship program and explore opposition – attempt to address concerns; try to find a place for them in program (e.g., seminar facilitator or presenter)
• Address with Director the need for training activities to count as direct service

Timeline

• Count on approximately 1 year from self-study to accreditation
• Work with what you have and build upon it until you’re ready to pursue accreditation

Example from Texas State:
1. Year 1 – only got funding for one position; no psychology interns due to state licensure requirements for two interns; intern from doctoral counseling program (not psychology)
2. Year 2 – requested/obtained additional funding for second intern; joined APPIC
3. Years 2-4 – 2 interns, 2 licensed psychologists
4. Year 5 – 2 interns, hired 3rd psychologist
5. Year 6 – funding for 3rd intern – 3 interns, 3 psychologists
6. Year 7 – hired 4th psychologist and wrote self-study; site visited last 2 days of internship year
7. Year 8 – Received notice of accreditation – retroactive to visit

Example from University of St. Thomas

1. Years 1-2 Funding for one paid intern position (3 doctoral level psychologists on staff, no official training director)
2. Years 3-4 Hired 4th psychologist as training director. Joined APPIC. Requested/received funding for three intern positions, wrote self-study.
3. Year 5 APA Site visit and accreditation

APPIC Membership

- Join APPIC as soon as feasible (have to have at least 2 interns in place) — even if not ready to apply, go ahead and obtain application materials so you will know what APPIC is looking for and can structure your program accordingly
- If you are a member, you must use the match for all slots; you can use separate lists if required to save a slot for a local intern or want specific characteristics
- Many academic programs require either an APA-accredited or APPIC internship
- Ask to see completed APPIC applications from other ACCTA sites who have recently completed applications
- APPIC web site and match listerv are very useful
- Application deadlines are April 1st and September 1st; application fee is $300; if not APA/CPA accredited, membership will be reviewed every 3 years; current dues are $400 ($450 as of 1/1/13) plus the match fee of $115 (see www.appic.org for additional information)
- Requirements for membership:
  1. Training Director must be licensed psychologist, present at least 20 hours/week
  2. Must have at least 2 FTE doctoral level licensed psychologists on staff
  3. Must have a minimum of 2 FTE interns during any training year; must already have interns in training at time of initial application
  4. Must provide at least 2 hours/week individual supervision (whether full- or part-time internship) and at least 2 additional hours of training activities (e.g., seminars, group supervision, grand rounds, etc.)
  5. At least 25% of interns’ time spent in providing face to face psychological services to clients/patients
- APPIC application for membership is good groundwork/preparation for accreditation
- Include completed application form, training program brochure or written statement (e.g., from web), training calendar/seminar schedule, due process procedures, and intern certificate (application form/instructions can be found on APPIC website)

Getting Interns
The easiest way to get interns is to join APPIC; prior to APPIC membership it may be helpful to send information to all academic programs (clinical and counseling).

Contact academic TDs at regional doctoral programs because many students want to stay in the area.

Send information to all non-APA accredited academic programs since they are more likely to allow their students to go to non-accredited internship sites.

If not an APPIC member, go through the APPIC match if at all possible (non-membership APPIC match fee is $240).

Write to the ACCTA listserv if you have openings after Phase II of the Match – TDs may know of past practicum students who have not been matched.

Contact local/regional academic programs post-match to see if any of their students remain unmatched – they may have applied only to APA programs in the area and their program may be more likely to remove APA-site requirement if they are not matched.

Plan procedures for reviewing, interviewing and ranking ahead of time to expedite the process.

Self-Study

It is a good idea to attend an APA Self-study Workshop and/or Site Visitor Training prior to your own self-study and site visit (frequently offered at APA, APPIC and ACCTA conferences at no cost to participants). That way you have a solid understanding of the accreditation process, what APA and the site visitors are specifically checking for, etc.

Obtain release time to work on the self-study unless you are going to spread it out over time.

Be prepared for pressure – it’s like writing a dissertation.

Obtain instructions from APA for writing the self-study (http://www.apa.org/ed/accreditation/).

Write out everything your interns do – service, receiving and providing supervision, training seminars, staff meetings, research, etc – to get an overall picture of the internship.

Be aware of what your center is like philosophically – both as an agency and as a training site (e.g., research oriented, nurturing/mentoring, etc.) – use this and above as a starting point for choosing your training model. It’s also helpful to read articles about some of the different training models. The first volume of Training and Education in Professional Psychology (August 2006) includes classic articles discussing models of professional training.

ACCTA members generally agree that Domain B can present the most challenges – it’s a good idea to play with this before trying to write the self study – it will help to see where you need to tweak the program to make sure you are following your training model and philosophy.

Get copies of other self-studies from ACCTA members and off the APPIC web site.

Gather, analyze, and synthesize outcome data for interns (e.g. evaluation results for your various competency areas) and get help from staff, if necessary, presenting this in spreadsheet form. APA expects to see quantitatively how your interns are doing.

Decide who is going to write the self-study – if your Training Committee is highly involved, you can have different people write different sections and have one person edit it for consistency. Be sure to access the corporate memory of your center, as well as the wisdom of former Training Directors and others involved in past training.
• If you’re having trouble getting started, pick a section/subsection that is easy for you (e.g., history of program or resources) and write it first – doesn’t necessarily have to be written in order
• Start trying to write during down times in your center (if such times exist) so that you don’t feel so pressured when you’re facing a deadline for applying
• Cost – duplicating, postage, printing (multiple drafts)
• Make enough copies for APA (4), your own center, V.P., and two site visitors – you will have to send those out once you have chosen site visitors
• Send your self-study to APA in a way which you can track (e.g., Return Receipt mail, UPS, Airborne Express, etc.) – this helps with the anxiety

Accreditation

• Let APA know you are interested in applying for accreditation and they will send you the Accreditation Guidelines and Procedures, instructions for writing the self-study, etc.
• Keep in touch with APA as you go through the process; you will not know about any changes to the process or directions unless you do so – they only send updates/information to accredited programs or those they know are in the process of applying.
• You will communicate with the APA Office of Program Consultation and Accreditation (Susan Zlotlow), but the accreditation decision will be made by the Commission on Accreditation (CoA).
• Fees - $2,250 non-refundable application fee and $3,400 site visit fee (due after the visit); $2,250 annual accreditation fee.
• Applications can be submitted anytime, but the three submission deadlines if you want to fall within a certain cycle are Sept. 1st (January through March), Jan. 1st (April through August), and May 1st (September through December). There is no guarantee that you will fall within a certain visit cycle as an applicant program - you may have to rewrite a portion of the self-study, readers may take longer, etc.
• In general, a site is not approved for a site visit until the CoA believes there’s a good probability that it will be accredited – you may be given a list of questions to answer for the site visitors
• Choose several dates that are acceptable to you for a two day site visit.
• Once you have been approved for a site visit, you will receive a list of 3 names from which to pick a site visit chair and a list of 5 names from which to pick your second visitor. If there is a conflict of interest you cannot have that person as a site visitor. If you cannot find a visitor from a list who is willing to do the site visit you can ask for another list. Not everyone on the list is willing to do a site visit – some have already done too many that year, timing isn’t good, didn’t agree to be on the list, etc. Don’t worry or take it personally if someone turns you down.
• Prepare your staff for the visit. All staff in your center and other offices that help train and/or use services of the interns may be interviewed (e.g., all center staff, psychiatrist, Disability Services staff, Residence Life staff, etc.). It’s helpful to have a retreat to acquaint counseling center staff with the training model and information from each domain. Staff may not be aware of all of the interns’ activities.
• Prepare an Executive Summary of the self-study (3-4 pages) for the VP/ university administrators, and meet with them ahead of time to prepare them for things they might be expected to comment on (e.g. funding and stability of the resources devoted to the
internship program, how the internship program is compatible with the university’s mission).

- The site visitors will determine the visit schedule – usually request you to draft a schedule and then they will approve or request changes
- Site visitors pay for own travel, lodging, meals, etc.
- Site visitors must complete their report to APA within 30 days of the visit. The report will be sent to you and you will respond within 30 days by correcting any inaccurate information and/or clarifying any misperceptions.
- Your self-study, site visit report and response will be read by CoA readers prior to the CoA meeting (check Office of Program Consultation and Accreditation web site for CoA meeting dates). The CoA will vote and you will receive official notice of their decision within 30 days of the meeting.
- The decision letter will contain the number of years your program is accredited (maximum of 7 years) and will inform you of any issues that need to be addressed in your annual report or next self-study. Accreditation is retroactive to the last day of the site visit.
- Susan Zlotlow may be willing to tell you the decision prior to letters going out, but you may not advertise or present your program as accredited until you get the letter.
- Be assertive and stay in touch with Susan – if you haven’t heard anything from APA after a reasonable length of time (anywhere in the process), call Susan; she will be responsive.
- Anytime you send something to APA – self-study, response to site visit report, etc. – send it return receipt requested or by other traceable mail – APA has been known to lose things.
- It may take 9 – 12 months after submission of the self-study to learn your accreditation status – don’t guarantee interns, directors, VP’s any particular timeline
- Once accredited, you will be expected to submit an annual report to APA each year. A reminder and report forms will be sent to you electronically and you will typically have 4 months to complete the report.
- Inform APA of any substantial changes to your program (e.g. changes in core training staff and/or budgetary cutbacks that may affect the program) before your next self-study is due.
Mentoring Resources and Emergency Recovery Procedures

For psychologists who are considering starting an internship, or who are further into the process of developing an internship or trying to improve or expand an already existing internship, some of the most important help available is through speaking directly with other psychologists who are already involved with internship training. Several established organizations such as APPIC, APA, and ACCTA have both formal and informal programs established to help with the internship process, and many graduate programs and training organizations stand ready to consult with potential internship directors.

Mentoring Resources

APPIC.

- APPIC has a Mentorship Program in which an established internship works with a new internship to facilitate their development
  [http://www.appic.org/AboutAPPIC/JoiningAPPIC/Members.aspx](http://www.appic.org/AboutAPPIC/JoiningAPPIC/Members.aspx)
- When an internship is more established and is a member of APPIC, APPIC’s informal problem solving service, which primarily addresses problems around individual interns, can be helpful. Look under Problem Consultation at the APPIC website. The APPIC listserv also offers informal problem solving with other APPIC members.
- APPIC’s website can offer a lot of information about internship, including resources for a variety of issues events. Please look under Training Resources and Training Director Resources.

APA.

- The Commission on Accreditation, or CoA, is available for help in several ways, with workshops on the accreditation process and how to write a self-study for accreditation, through its website at APA, and through informal consultation with Dr. Susan Zlotlow, head of the Office of Accreditation, who can also be reached through the website. [http://www.apa.org/ed/accreditation/](http://www.apa.org/ed/accreditation/)
- The CoA offers periodic workshops to help prepare training directors to apply for accreditation. See this link at the CoA website to learn more about the workshops: [http://www.apa.org/ed/accreditation/visits/visitors/workshops.aspx](http://www.apa.org/ed/accreditation/visits/visitors/workshops.aspx)
- The Education Directorate is involved with doctoral level education including internship, and its web pages within the APA website discuss many of the seminal issues in internship training. Dr. Catherine Grus, the Associate Executive Director, Professional Education and Training, can be reached through the website. [http://www.apa.org/ed/graduate/](http://www.apa.org/ed/graduate/)

ACCTA.

- ACCTA is an organization comprised of predoctoral internship programs in university and college counseling centers within the United States and Canada. The mission of ACCTA is to promote excellence in psychology internship training, including the mentoring of Training Directors of developing internship
programs. ACCTA has a very active listserv which facilitates the exchange of information and discussion of issues pertinent to counseling center internship training. This is a useful resource for anyone interested in developing, or forming a consortium with, a university counseling center internship program. Information about membership can be found at http://www.accta.net.

**Local internship or training associations.**

- **CAPIC**—this is a California based institution that organizes an internship match for many California internships. [http://capic.net/](http://capic.net/)
- **BAPIC**—This is an organization of San Francisco bay area doctoral programs that have joined together to help organize practica. [www.bapic.info](http://www.bapic.info)
- **ACEPT**—This is an organization of Chicago area programs and practicum/internship sites. [http://www.accept.us/](http://www.accept.us/)
- **Massachusetts Psychological Association Training Committee**—This is a group of program, internship, and practicum representatives in the greater Boston and Massachusetts area, with ties to the New England region. [www.masspsych.org/](http://www.masspsych.org/)
- **Other locations**, please contact the local state psychological association to see if there is a training entity or group nearby that can be of help.

**Doctoral programs.**

- All doctoral programs in professional psychology have someone who is in charge of overall clinical training (the Director of Clinical Training, or the Chair of the Department), and some programs have a Director of Internships who coordinates the internship process for students. Local programs can be found through the APA list of accredited sites that is maintained by the Commission on Accreditation at [http://www.apa.org/ed/accreditation/](http://www.apa.org/ed/accreditation/)

**Education and training literature.**


**Emergency Recovery Procedures or What To Do If….**

While most of the organizations listed above under mentoring could also be helpful in a serious glitch or a major crisis, APPIC is your best resource for this, especially since many of these kinds of issues involve the viability of the internship itself. Please see Problem Consultation at the APPIC website [http://www.appic.org/Problem-Consultation](http://www.appic.org/Problem-Consultation). The APPIC listserv also offers informal problem solving with other APPIC members.
Numerous issues are brought to APPIC through the Informal Problem Consultation service or IPC, and are almost always related to the following concerns:

- Protecting the integrity of the APPIC Match contract
- Maintaining quality control over the APPIC membership criteria.
- General humanitarian assistance for students and training directors.

Some of the problems internships have encountered that can be threats to viability as they are starting up, or even once they are up and running, might include losing one or two psychologists so they no longer have the required two; the threat of loss of funding before they even start or midyear; an intern not able to start, or dropping out, so there is not the requisite number of interns.

As the internship develops, other issues can come up that need informal consultation. For example:

- A student contacts IPC regarding the possibility of discrimination while going through internship interviews -- feeling as if they were questioned inappropriately based on perceived disabilities.
- A program requests release from the Match contract after a positive finding from a criminal background check that was clearly identified in their internship website materials.
- A student requests release from the Match commitment as they feel that the internship training program has changed due to a change in programming related to funding.
- An intern requests consultation due to concerns about possible sexual harassment by a supervisor with inappropriate boundaries.
- An intern is concerned that benefits and stipend advertised for their program are changed without warning or discussion.
- An intern is determined to have not met expectations for competency during the internship and will not be graduated from the program; due process guidelines are reviewed to determine that the program followed their stated policies.
- A student is placed on probation by the academic department after the Match but before beginning internship. Consultation is requested about this process -- whether the student will be off probation and allowed to pursue internship or if the program should be released from the Match contact and allowed to seek another intern through the Clearinghouse.

Helpful Literature

This is a small portion of the literature directed at problems one might find on internship, particularly problems with students as opposed to financial or organizational problems. It is meant as a starting point for a literature search.


