Internship Manual

Clinical Health Psychology

2024-2025

INTERNSHIP MANUAL

This manual is intended to clarify aspects of the Clinical Health Psychology Internship with regard to procedures and obligations. It is not intended to supplant or augment the intern contract with the individual medical center. In addition to this manual, each medical center will provide specific information related to that institution.

January 1, 2024

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SECTION I – OVERVIEW OF PROGRAM

1.1. What is MI CAPT?

The Michigan Center for Advanced Psychology Training (MICAPT) at McLaren Health Care Corporation provides advanced training in internship and postdoctoral clinical health psychology that interfaces with medicine, using guidelines recommended by experts in the field, accreditation standards set by the American Psychological Association (APA), the needs of supporting institutions, and the needs and interests of trainees. MICAPT provides this training in an atmosphere of cultural diversity, cultural awareness and humility, and equal opportunity. The MICAPT internship program operates on a practitioner-educator model that is designed to teach collaborative care within healthcare settings.

1.2. The Center

MICAPT is sponsored by McLaren Healthcare Corporation. Both McLaren Macomb and McLaren Oakland are medical centers located in Mt Clemens, MI (Macomb) and Pontiac, MI (Oakland) and are academic teaching sites within McLaren Health Care Corporation and affiliated with Michigan State University Colleges of Human and Osteopathic Medicine.

1.3. Clinical Health Psychology Internship Program

MICAPT's Clinical Health Psychology Internship provides a twelve-month advanced training experience for doctoral-level candidates. The comprehensive training program prepares graduates for independent practice as Clinical Health Psychologists. Graduating interns will be capable of assuming roles in clinical activity in a variety of settings, making meaningful scholarly contributions within healthcare settings, and being active in relevant professional organizations. The internship is graduated in intensity. Program descriptions and sample schedules for interns are available on the website.

1.4. Accreditation

The Clinical Health Psychology (CHP) postdoctoral program at MICAPT was the first Clinical Health Psychology program to receive accreditation, on contingency by the American Psychological Association (APA). As this is the first year of the CHP internship, a self-study has been submitted to APA and we expect a site visit from APA in the first year of the internship. The contact information for the Commission on Accreditation is:

Office of Program Consultation and Accreditation 750 First Street, NE Washington, DC 20002-4242 Phone: 202-336-5979 TDD/TTY: 202-336-6123 Fax: 202-336-5978 <u>http://www.apa.org/ed/accreditation/about/coa/index.aspx</u> Email: <u>apaaccred@apa.org</u> (general questions) aro@apa.org (Annual Report Online only)

1.5. Educational Aims & Objectives

The MICAPT Clinical Health Psychology (CHP) postdoctoral internship has four major aims. Upon graduation, interns who complete the one-year Clinical Health Psychology internship will demonstrate the following:

- 1. Competency in Clinical Health Psychology practice
- 2. Advanced knowledge of Integrated Primary Care model of service delivery
- 3. Expertise in hospital and ambulatory practice involving a transdisciplinary model within a team process approach.
- 4. The ability to critically review research, adopting a commitment to lifelong learning.

In line with the program aims, the internship trains psychologists to achieve competency in Clinical Health Psychology. MICAPT has adopted the APA Health Service competencies. These competencies include:

- Integration of science and practice
- Ethical and legal standards
- Individual and cultural diversity
- Research and/or program evaluation
- Professional values and attitudes
- Assessment
- Intervention
- Consultation and interprofessional/interdisciplinary skills

The MICAPT Internship Core Curriculum contains details regarding these aims, competencies, and the associated objectives along with the methods, sequence, frequency, and outcome measurements. Interns must read and familiarize themselves with the curriculum (See Appendix A of this manual for MICAPT CHP Core Curriculum) as well as the individual descriptions of this training.

1.6. MICAPT Contact

Dr. Jennifer Carty McIntosh, PhD, is the MICAPT Internship Program Director and Behavioral Health Academic Program Director for McLaren Macomb Family Medicine and Internal Medicine. Her contact information is as follows; Phone: 586-493-3744 | Fax: 586-493-3720 |Email: jennifer.cartymcintosh@mclaren.org

Dr. Christopher Corbin, PsyD, is the MICAPT Internship Associate Program Director and Behavioral Health Academic Program Director for McLaren Oakland Internal Medicine Residency Program. His contact information is as follows; Phone: 248-338-5408 | Fax: 248-338-5567 | Email: christopher.corbin@mclaren.org.

1.6.a. Board of Directors

- Barbara Wolf, PhD, MICAPT Fellowship and Internship Training Director; Corporate Director, Behavioral Health Education and Physician Well-Being, McLaren Health Care; Associate Professor, Family Medicine and Psychiatry Departments, Michigan State University Colleges of Human and Osteopathic Medicine, 3230 Beecher Rd, Suite 1, Flint MI 48532. Phone: 810-342-5623 | Fax: 810-342-5629 | Email: <u>barbara.wolf@mclaren.org</u>
- Erin O'Connor, PhD, CHP/McLaren Flint MICAPT Program Director/Director of Behavioral Medicine Education for Family Medicine, McLaren Flint/Assistant Professor, Michigan State University College of Human Medicine. McLaren Family Medicine Residency Center, 3230 Beecher Rd, Suite 1, Flint MI 48532 | Phone: 810-342-5624 | Fax: 810-342-5629 | Email: <u>erin.oconnor@mclaren.org</u>
- Jennifer Carty McIntosh, PhD, CHP/McLaren Macomb MICAPT, Behavioral Health Academic Program Director McLaren Macomb Family Medicine and Internal Medicine/Assistant Professor Michigan State University College of Human Medicine. McLaren Family Medicine Residency Center, 36500 S. Gratiot Ave., Clinton Twp., MI 48035 | Phone: 586-493-3744 | Fax: 586-493-3720. Email: jennifer.cartymcintosh@mclaren.org
- Yen Ju Lee, PhD, Associate Program Director of Behavioral Medicine Education for Family Medicine, McLaren Flint/Clinical Assistant Professor, Michigan State University College of Human Medicine Family Medicine. McLaren Family Medicine Residency Center, 3230 Beecher Rd, Suite 1, Flint MI 48532 | Phone: 810-342-5656 | Fax: 810-342-5629 | Email: yenju.lee@mclaren.org

- Andrew Champine, PsyD, Chief Psychologist MICAPT Internship and Fellowship; Assistant Designated Institutional Officer, Director of Medical Education, McLaren Macomb 1000 Harrington Blvd. Mount Clemens, MI 48043 | Phone: | Email: <u>andrew.champine@mclaren.org</u>
- Nicole Franklin, PsyD, Assistant Medical Director, McLaren Bariatric Institute/Adjunct Assistant Professor, Michigan State University College of Human Medicine, McLaren Bariatric Institute, 3200 Beecher Rd, Suite MBI, Flint MI 48532. Phone: 810-342-5470 | Fax: 810-342-5788 | Email: <u>nicole.franklin@mclaren.org</u>
- Robert Flora, MD, MBA, MPH, Chief Academic Officer/ VP of Academic Affairs, McLaren Health Care, Professor and Associate Chair for Education, Department of Obstetrics, Gynecology, and Reproductive Medicine, Michigan State University College of Human Medicine | Michigan State University College of Human Medicine, Clinical Professor of Osteopathic Surgical Specialties, Michigan State University College of Osteopathic | McLaren Corporate, One McLaren Parkway, Grand Blanc, MI 48439 | Phone: 810-342-1147 | Email: Robert.Flora@mclaren.org
- Kimberly Keaton-Williams, MBA, Vice President of Talent Acquisition and Development and Chief Diversity Officer at McLaren Health Care. One McLaren Parkway, Grand Blanc, MI 48439 | Phone: 810-342-4634 | Fax: 810-342-5401
- Prabhat Pokhrel, MD, PhD, Program Director of Family Medicine, McLaren Family Medicine Residency Center, 3230 Beecher Rd, Suite 1, Flint MI 48532 | Phone: 810-342-5656 | Fax: 810-342-5638 | Email: Prabhat.pokhrel@mclaren.org
- Erin Reis, EdD, MBA, FACHE, C-TAGME, Associate DIO | Director of Medical Education at McLaren Flint, 701 S. Ballenger Hwy., Flint, MI 48532 | McLaren Bay Region | Phone: 810-342-2416 | Fax: 810-342-4981 | Email: <u>Erin.Reis@mclaren.org</u>

1.6.b. MICAPT Core Faculty (Supervisors)

- Barbara Wolf, PhD, Corporate Director, Behavioral Health Education and Physician Wellness, McLaren Health Care, Training Director McLaren Internship and Post doctoral Health Psychology programs Associate Professor, Family Medicine and Psychiatry Departments, Michigan State University Colleges of Human and Osteopathic Medicine, 3230 Beecher Rd, Suite 1, Flint MI 48532. Phone: 810-342-5620 | Fax: 810-342-5629 | Pager: 810-389-0910 | Email: <u>barbara.wolf@mclaren.org</u>
- Jennifer Carty McIntosh, PhD, CHP/McLaren Macomb MICAPT Internship Program Director, Behavioral Health Academic Program Director McLaren Macomb Family Medicine and Internal Medicine/Assistant Professor Michigan State University College of Human Medicine. McLaren Family Medicine Residency Center, 36500 S. Gratiot Ave., Clinton Twp., MI 48035 | Phone: 586-493-3744 | Fax: 586-493-3720 |Email: jennifer.cartymcintosh@mclaren.org
- Christopher Corbin, PsyD, CHP/McLaren Oakland MICAPT Internship Associate Program Director, Behavioral Health Academic Program Director McLaren Oakland Internal Medicine/ Assistant Professor Michigan State University Colleges of Human and Osteopathic Medicine. McLaren Oakland Internal Medicine Residency Center, 50 N. Perry Street, Pontiac, MI 48342
 Phone: 248-338-5408 | Fax: 248-338-5567 | Email: <u>christopher.corbin@mclaren.org</u>.
- Brenda Lovegrove Lepisto, PsyD, Behavioral Health Academic Program Director for McLaren Greater Lansing Family Medicine Residency, 3101 Discovery Drive, Suite 400, Lansing, MI 48910 |Phone: 517.975.3745 | Email: <u>brenda.lepisto@mclaren.org</u>

- Susan Martin, PsyD, Behavioral Health Academic Program Director for McLaren Bay Region Family Medicine Residency, Mclaren Bay Family Residency Program, 1900 Columbus Ave, Bay City, MI 48708 |Phone: 989-895-4625 | Email: <u>susan.martin@mclaren.org</u>
- Munni Deb, PhD, Behavioral Health Academic Program Director for McLaren Oakland Family Medicine Residency Program, McLaren Oakland Internal Medicine Residency Center, 50 N. Perry Street, Pontiac, MI 48342 | Phone: 248-338-5408 | Fax: 248-338-5567 | Email: <u>munni.deb@mclaren.org</u>
- Erin O'Connor, PhD, McLaren Flint CAPT Program Director/Director of Behavioral Medicine Education for Family Medicine, McLaren Flint/Assistant Professor, Michigan State University College of Human Medicine, McLaren Family Medicine Residency Center, 3230 Beecher Rd, Suite 1, Flint MI 48532 | Phone: 810-342-5620 | Fax: 810-342-5629 | Email: <u>erin.oconnor@mclaren.org</u>
- Yen Ju Lee, PhD, Associate Program Director of Behavioral Medicine Education for Family Medicine, McLaren Flint/Clinical Assistant Professor, Michigan State University College of Human Medicine Family Medicine. McLaren Family Medicine Residency Center, 3230 Beecher Rd, Suite 1, Flint MI 48532 | Phone: 810-342-5656 | Fax: 810-342-5629 | Email: yenju.lee@mclaren.org

1.6.c. MICAPT Support Staff

• MICAPT is supported by the McLaren Macomb Graduate Medical Education department.

SECTION II – ADMINISTRATIVE STRUCTURE

2.1. MICAPT Meetings

2.1.a. MICAPT Board of Directors. The Board of Directors consists of the Training Director (of both the internship and the post doctoral fellowship), Internship Program Director, a representative of the MICAPT Faculty, the MICAPT Chief Psychologist, the Associate Designated Institutional Officer and a Family and Internal Medicine Faculty representative, as well as the corporate Chief of inclusion and Diversity and one post-doctoral fellow and one intern. This group meets at least twice per year, along with the McLaren Flint Academic Program Administrator, to ensure uniform administration and implementation of the program's training principles, policies, and procedures, and reviews the programs evaluations.

2.2. Diversity Committee

Efforts to create a learning environment that incorporates cultural diversity are ongoing and a vital objective within MICAPT. The Diversity Committee is comprised of faculty, postdoctoral fellows and interns and meets monthly to oversee events and generate ideas for deepening diversity within MICAPT.

The committee develops an annual calendar of events, with events facilitated on a rotating basis by the fellows and interns, along with the faculty facilitators. Fellows and interns have the opportunity to select the topic, format, and/or speakers they identify as pertinent to furthering the diversity committee's mission of deepening exposure to diverse populations, improving recognition of cultural factors relevant to Clinical Health Psychology, and facilitating cultural humility. Events vary from year to year in an effort to promote relevant, timely, and fellow and intern driven experiences. The faculty facilitators also coordinate one diversity field trip per year, where fellows, interns and faculty spend a half-day off-site and engaged in a diversity-related experiential activity.

SECTION III – POLICIES AND PROCEDURES

All MICAPT/McLaren Cooperation policies referenced below can be found on the "<u>McLaren Health Care</u> <u>Corporation Graduate Medical Education Policies</u>" webpage (<u>https://sites.google.com/</u> <u>mclarenmeded.org/medicaleducationpolicies/home</u>).

3.1. Licensing Policy

All interns must possess a Michigan license to begin the internship if possible. This would be a Masters educational (temporary) limited license (TLLP).

The Program Director assists incoming interns in obtaining the Michigan license.

3.2. Confidential Information

Each MICAPT faculty member and intern shall comply fully with all applicable state and federal laws and regulations and maintain the integrity, confidentiality, and security of individual medical charts, billing records, and other individually identifiable health information including HIPAA and its regulations that may, from time to time, be publicized. HIPAA rules and guidelines shall be provided to each fellow.

All faculty and interns must not release Confidential Information to which they have access, except to authorized personnel. Confidential information includes any and all information about a patient such as name, phone number, address, treatment, diagnosis, lab reports, or appointment times. This information can be given only if a release is signed by the patient. Furthermore, patient names should never be mentioned outside of the work area or in front of anyone not working directly on the case. If an employer calls desiring any information on office appointments, attendance or diagnosis, there must be a written release from the patient.

Insurance companies can receive information only if there is a release signed by the patient or guardian. For advice regarding institutional policy in these matters, contact the program director and the risk management office.

3.3. Admission and Selection Process

The intern selection process begins with open application on Nov 1st of each year. Rolling applications will be reviewed should open positions exist once the match is completed (once APA accreditation is attained).

3.3.*a. MICAPT Admission Requirements.* To apply for a MICAPT program, applicants must meet the minimum entrance requirements:

To apply for a CHP internship position, applicants must meet the following entrance requirements:

- Matriculation of doctoral studies at an accredited institution in clinical or counseling psychology, preferably in an APA accredited doctoral program
- License eligible in the State of Michigan as a masters level temporary limited licensed psychologist
- Possess a broad, general background in professional psychology
- A minimum of 500 intervention hours
- A minimum of 50 assessment hours
- At least 5 Integrated Assessment reports
- Experience with a diverse population
- Special interest in Health Psychology

In addition to ensuring minimum entrance requirements are met, reviewers look for the presence of experiences and/or attributes evidenced within application materials. Examples of desirable experiences and attributes include the following (NOTE: Desirable experiences completed or attributes evidenced apply to CHP:

- Academic training in Clinical Health Psychology (coursework)
- Research experience
- Clinical experience in Clinical Health Psychology/medical settings
- Experience in the primary care setting
- Experience in medical education

- Classroom teaching experience
- Level of support from letters of recommendation
- Personal statement (clarity of goals, match with program, writing skills)

3.3.b. Application Timeline. To be considered as a candidate for an internship position, candidates who meet the admission requirements (2.2.a. above) must complete the following:

CHP Internship Application Instructions: submit an online application (<u>www.mclaren.org</u> or the APPIC website <u>https://www.appic.org/Internships/AAPI</u>) and provide the following materials on or before the application deadline, which is posted annually on the website (<u>www.mclaren.org</u>):

- Personal Statement
- Curriculum Vitae
- Graduate School Transcripts
- Three (3) satisfactory letters of recommendation, one of which must be from your current supervisor

3.3.c. Internship Selection Process. MICAPT is an Equal Opportunity Employer. We encourage members of historically underrepresented groups to apply, and consider diversity in its broadest sense as one contributing factor in our determination of an applicant's fit. We seek applicants with a solid clinical and scientific knowledge base from their academic program and internship; strong professional skills in standard assessment, intervention, and research techniques; and the personal characteristics necessary to function well as a doctoral-level professional in a medical center environment.

Ultimately, the Program Director selects candidates who, based on all information obtained, are determined to be the best match for the internship program. Candidate selection is based on a review of all aspects of the application materials and other information gained from interviews and internet searches of applicants' names. A particular emphasis is placed upon the congruence between an applicant's prior experiences, future goals, and MICAPT offerings. MICAPT also considers candidates' representation of various cultural, life, and professional experiences to ensure diversity and equity amongst fellows and faculty. When selecting between two equally experienced candidates with high perceived program fit, MICAPT provides priority to applicants who are members of historically underrepresented groups. These factors may be indicated within application materials. Once selected, candidates are offered an internship contract agreement.

3.3.c.1. Applications are initially reviewed by the selection committee which is composed of psychologists involved in internship training. Following this initial review, highly ranked applicants may be invited for an interview.

3.3.c.2. Application Review Period. Faculty may review incomplete and complete applications. Applications are considered complete when all required materials have been submitted. Program directors ultimately determine which applicants are invited for interviews.

3.3.c.3. Candidate Interviews. Interviews within McLaren are done virtually, an interview schedule is prepared and sent to the applicant. The interview process is designed to be comprehensive and maximize fairness for all candidates. During the interview process, assessable knowledge, skills and attributes (KSAs) relevant to Clinical Health Psychology practice are noted. Assessable KSAs may include those related to interpersonal and communication skills, professionalism, teaching and education, ethics, multicultural sensitivity and practice, clinical assessment/intervention, and interprofessional functioning. Various methods may be used in the interview, including standardized questions and case presentations.

3.3.c.3.1. Travel Expenses. There are no travel expenses involved with Virtual interviewing.

3.4. Professionalism

Faculty and interns must demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population. In addition, interns are expected to:

- Demonstrate respect, compassion and integrity; a responsiveness to the needs of patients and society that supersedes self-interest, accountability to patients, society, and the profession; and a commitment to excellence and ongoing professional development.
- Demonstrate a commitment to ethical principles pertaining to provision or withholding of care, confidentiality of patient information, informed consent, and business practices.
- Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities.
- Dress and behave in a professional manner.
- Report absences and tardiness appropriately and be prompt whenever possible.
- Responsibilities including patient care may extend beyond normal work hours and interns are expected to meet these obligations.

3.4.a. APA Ethical Principles. All faculty and interns are expected to uphold the Ethical Principles of Psychologists and Code of Conduct (<u>https://www.apa.org/ethics/code</u>) at all times.

3.4.a.1 Preparing Professional Psychologists to Serve a Diverse Public: Please click on link to redirect to the above named statement Preparing Professional Psychologists to Serve a Diverse Public.docx

3.4.b. Dress Code. All faculty and interns are expected to dress and behave in a professional manner. Interns are responsible for adhering to each medical center's dress code. In the absence of the dress code, follow these general guidelines:

- Maintain good personal hygiene at all times.
- Clothes should fit properly and be kept neat and clean.
- Shoes should be clean and in good repair. Sandals, platforms and any other similar type shoe or open-toed shoes are unsafe and inappropriate in clinical areas.
- Garments should be knee length or longer, and appropriate to a hospital and business setting. The following garments are prohibited: sheer or revealing, tight-fitting, t-shirts, sweatshirts, and cut-offs.
- Tattoos must be covered

3.4.c. Attendance Policy. Interns are expected to report absences and tardiness appropriately and promptly to their supervisor or designee. Faculty and interns are expected to arrive on-time as scheduled for all MICAPT program activities. Interns attendance at MICAPT seminars is mandatory with the only exception being approval through your supervisor, such as sick, conference, vacation days, or urgent care responsibilities. An attendance log (sign-in sheet) will be provided at these sessions and attendance shall be recorded in the MICAPT main office. Frequent tardiness and/or failure to report absences in accordance with the sponsoring institution policy may result in dismissal from the program.

3.4.c.1. Absence Notification Procedure. Interns must submit an absence notification email to the MICAPT Academic Program Assistant in advance of any MICAPT didactic sessions that will be missed with the exception of unexpected, personal emergencies. This email should be sent as soon as any upcoming vacations are approved by the intern's supervisor. For personal emergencies, the email notification should be sent upon the interns returning to work. On the rare occasion a supervisor authorizes an intern to miss a MICAPT didactic session due to a clinical need, the email notification should be sent at the interns earliest opportunity.

3.4.d. Publications/Presentations. If an intern drafts a paper for publication or presentation about the internship, the medical center, residency, or its curriculum, a draft outline must be submitted to the Program Director for review and approval.

3.4.e. MICAPT Intellectual Property. Sharing, use, and reproduction of intellectual property (e.g., MICAPT manual, training materials, lectures, presentations) require the author's permission as consistent with APA guidelines.

3.5. Evaluations

3.5.a. Online Evaluations. The following MICAPT evaluations shall be completed online through New Innovations (https://www.new-innov.com/Login/Login.aspx):

3.5.a.1. MICAPT Health Psychology Internship Rotation Evaluation.

As interns complete clinical rotations, they use an online evaluation form (see Appendix B). Responses and comments are submitted confidentially and reviewed by the MICAPT Board of Directors. The purpose of the evaluation is to receive intern-based feedback that enhances awareness of programmatic strengths and weaknesses, and consequently supports continuous programmatic improvement.

3.5.a.2. MICAPT CHP Internship Semi-Annual Competencies Evaluation

Interns are evaluated by their designated supervisor. Evaluation, as it applies to measuring acquired competencies, understanding, skills and abilities, attitudes, as related to the program aims and objectives are based on the primary supervisor's opinion. These records are maintained in the interns file an electronic repository. See appendix B of this manual for a sample evaluation form.

3.5.a.3. MICAPT Supervisor/Rotation Evaluation Form.

MICAPT interns evaluate their supervisors confidentially through an online evaluation form twice per year (February and August; see Appendix B) The Program Director reviews evaluations and results of the in-person meeting with the Training Committee and ADIO. Non-specific feedback is then delivered to relevant faculty afterward. Where specific issues need to be addressed with a particular Supervisor, the Program Director will, as deemed appropriate, conduct the following in this order: Arrange an individual meeting with the intern(s) involved; if necessary and after notifying the intern(s) involved, meet with the supervisor(s) to gather further information and provide feedback. The Program Director may also, after notifying the intern(s) involved, meet jointly with those involved as needed to seek problem resolution. The goal of Intern Evaluations of Supervisors is to share information that can support MICAPT supervisors in making continuous quality improvements, while protecting the confidentiality and anonymity of current interns to the fullest extent possible.

3.5.a.3.1. Intern Evaluation of a Supervisor. This tool is used to assist the interns supervisor and intern navigate to successful completion of the interns developed mobile outreach project. See appendix B for a sample of the evaluation.s also a Program Director.

When an intern completes an evaluation of a supervisor who is also a Program Director, the evaluation form is submitted directly to the Associate Program Director (APD).

3.5.a.3.1.a. The APD will store these evaluation forms.

3.5.a.3.1.b. The APD will provide a summary evaluation of the Supervisor/Program Director, reviewing non-specifically strengths and areas in need of improvement. Where specific issues need to be addressed with a particular Supervisor/Program Director, the Training Director will, as deemed appropriate, conduct the following in this order: Arrange an individual meeting with the intern(s) involved; if necessary and after notifying the intern(s) involved, meet with the Supervisor/Program Director to gather further information and provide feedback. The Training Director may also, after notifying the intern(s) involved, meet jointly with those involved to seek problem resolution.

3.5.a.4. Mobile Outreach Project Evaluation Tool

This tool is used to assist the interns supervisor and intern navigate to successful completion of the interns developed mobile outreach project. See appendix B for a sample of the evaluation.

3.6. Due Process

MICAPT follows the policies and procedures for due process of McLaren Healthcare Corporation. Refer to the specific policy in the contractual agreement or resident handbook/manual.

3.6.a. Remedial Plan Procedures (concerns about intern performance). Should an intern need improvement in a specific area, a written remedial plan will be developed by the supervisor(s) in consultation with the intern that will be reviewed and signed by all parties including the Program Director. The remediation plan will include a time frame under which improvement is expected. If performance does not improve within the time frame specified within the remediation plan, a memorandum outlining the performance concerns will be sent to the intern, Program Director, and the ADIO. Any further action shall follow the policies and procedures of the intern's sponsoring institution, which can be found in that institution's resident handbook/manual.

3.6.a.1. "Good Standing" Definition. An intern is in "good standing" if he/she has ratings of "making progress toward meeting competency" for all internship goals. An intern is not in good standing when his/her supervisor initiates the Intern Remedial Plan Procedures or a more significant corrective action plan.

3.6.a.2. Disclosure of Difficulties Meeting Expectations. As early as is feasible, interns are expected to fully and completely disclose to the supervisor(s) any issue or problem that has the potential to impact patient care or internship engagement. Failure to disclose such issues will result in a meeting with the intern's supervisor and/or Program Director to develop a remediation plan, the outcome of which may include disciplinary action up to program dismissal.

3.6.b. Grievances (intern concerns within MICAPT or the training environment). An intern who has a complaint or grievance is entitled to initiate a grievance as set forth below.

3.6.b.1. Employment Issues. In the event of any claim relating to wages, hours, and conditions of employment, excluding solely educational issues, interns shall follow the general grievance procedure of the sponsoring institution; this can be requested from the ADIO.

3.6.b.2. Educational Issues. For any grievance related solely to educational issues within the MICAPT program, interns will follow the Graduate Medical Education Hearing and Review Procedure.

3.6.b.3. *MICAPT Issues.* For any grievance related to MICAPT, and not meeting the criteria for 3.6a or 3.6b, the intern will seek resolution using the following chain of command:

- First, discuss the issue with your Supervisor.
- Second, if necessary, seek additional help from the Program Director and Training Director
- Third, if necessary, request mediation by the ADIO.

3.7. Termination Policy

MICAPT intern the policies and procedures its Graduate Medical Education office with regard to termination. Refer to the specific policy in the contractual agreement or resident handbook/manual. The resident handbook/manual will be sent as soon as a contract is signed. Additionally, the Intern Health Psychology manual is available on our website.

3.8. Non-Completion Policy

In the event an intern leaves the program early, a non-completion letter will be prepared. The letter shall include an introduction to the program, the date that the intern began the program, relevant aspects of the training experience, the date that the intern left the program, and whether the intern left the program in good standing or otherwise.

3.9. Non-Discrimination Policy/Commitment to Diversity

MICAPT supports the Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists as adopted in 2002. As such, MICAPT acknowledges and supports diversity within our recruiting process and throughout our training curriculum. The curriculum includes, but is not limited to the awareness of discrimination, knowledge about cultural differences, and the development of clinical skills and cultural competence essential to functioning within diverse groups and environments.

MICAPT promotes competency and understanding in working with diverse populations which include the following individual characteristics: age; race; ethnicity; sexual orientation; gender; gender identity and expression; people with disabilities; immigrant status; socioeconomic status; religious affiliation and national origin. All decisions regarding educational and employment opportunities and performance are to be made on the basis of merit and without discrimination. Similar to many healthcare settings, MICAP hosts diverse medical learners and treats diverse patient populations. Consequently, cultural awareness and sensitivity are critical to functioning effectively within our healthcare system, and key attributes to effective practice after internship.

Any alleged violation of this policy should follow the grievance policy as outlined in 3.6.b.

3.9.a. Diversity Plan. Maintaining a diverse environment is important to MICAPT. Our efforts to recruit and retain a multiculturally diverse staff and internship cohort are broad, and include the following:

3.9.a.1. Advertising. MICAPT advertisements indicate that MICAPT is an equal opportunity employer. MICAPT advertisements are disseminated broadly and also sent to sources that target historically underrepresented minority groups (e.g., specific training directors, colleges/ universities, special interest groups).

3.9.a.2. Recruitment and Selection. MICAPT utilizes a recruitment and selection process that identifies our interest in diversity, and considers diversity representation in selection determinations when selecting between two equally competent applicants.

3.9.a.3. *Mentoring.* MICAPT shall act as a vehicle for interns specifically concerned with diversity issues or requesting a cultural mentor.

3.9.a.4. Didactics and Training Opportunities. The MICAPT curriculum includes elements of diversity as defined above in every didactic. Interns will be invited to participate in the annual Diversity outing with post doctoral faculty and fellows.

3.9.a.5. *Diversity Friendly Work Environment*. A lack of cultural competency in the work environment will not be tolerated.

3.9a.6. Ongoing and Continually Evolving Efforts. Through training and clinical activities, MICAPT interns will receive regular exposure to multiculturally representative populations and issues supporting cultural competence. Training supervisors will ensure diversity patients served by fellows. See also Section 2.2. Diversity Committee.

3.9a.7. Unconscious Bias and You. All interns are expected to complete a module concerning diversity and inclusion entitled "Unconscious Bias and You".

3.10. Sexual Harassment

MICAPT's policy is that the work environment must be free of harassment. Sexual harassment can include, among other things, sexual advances, requests for sexual favors, sexual jokes, and unwelcome physical contact. MICAPT considers sexual harassment to be a form of sex discrimination. As such, sexual harassment of MICAPT employees, faculty, fellows, interns and students will constitute a violation of MICAPT's Non-discrimination Policy.

Any allegation of sexual harassment should follow the grievance policy as outlined in 3.6.b

SECTION IV Core Curriculum

4.1 Clinical Care

Interns will complete rotations in various clinical settings, including in Family Medicine, Internal Medicine, and Emergency Medicine residencies. To ensure adequate learning opportunity, interns are generally expected to maintain either an average clinical caseload or average number of clinical hours, depending on the practice setting (e.g., integrated primary care versus outpatient psychotherapy versus consultation-liaison services). The average clinical caseload and clinical hours vary based on interns' clinical experience and learning needs.

The purpose of clinical care is to provide learning experiences in targeted assessment, intervention, and interviewing in order to effectively treat patients in the healthcare setting. In many instances, interns collaborate with their supervisors to choose cases that enhance their knowledge and ensure a wide range of learning experiences, including the biopsychosocial model and ability to apply it to clinical assessment and intervention. Interns also apply evidence-based research to practice.

4.1.a. Emergency Room Consultations. Hospital consults are a common element of Clinical Health Psychology practice. Consultations usually involve a bedside evaluation of the patient and other informants, based on the specifics of the physician's request. Following the evaluation, a note is written in the format required. Formal communication with referring physicians is encouraged. In addition, MICAPT faculty and supervisors are available on a daily basis to supervise and oversee consultations.

4.1.b. *Psychological Testing.* Psychological assessment is a valuable skill for the practicing clinical health psychologist and supported in the internship. As psychologists, we are experts on psychological testing and reserve the right to determine the necessity and appropriateness of testing for a given individual patient. Assessment materials relevant to clinical practice are available.

4.2. Supervision

Interns receive extensive supervision during the program:

4.2.a. Individual Supervision. Individual face-to-face supervision occurs at least three hours per week. The content of supervision is consistent with the interns training activities and the methods are matched to the experience and training level of the intern. There is daily contact between supervisors and interns, and additional supervision is available as needed.

4.2.b. Group supervision Group Supervision (1 hour per week) will be a part of the intern's supervisory experience. The fourth hour of supervision will be in relation to patients seen and 'just in time'.

4.3. Didactic Training

Interns receive didactic training in a variety of Clinical Health Psychology topics using modalities ranging from formal classroom-like instruction to on-the-fly and curbside teaching. At the first session of each scheduled module or series, interns will receive a sample syllabus that includes minimally the topics to be covered, presenters involved, and locations of didactics. See Appendix A for a sample syllabus.

The graduate medical education department hosts a variety of continuing education experiences for learners and faculty that are open to MICAPT faculty and interns. Examples include noon conferences; special GME/CME lectures; Grand Rounds; Morbidity, Mortality and Improvement Conferences; Morning Report; and others.

4.4. Teaching/Supervision

Interns receive training in medical education techniques and procedures. They then apply this knowledge to their roles as teachers and supervisors of learners.

4.4.a. Lecturing. The Graduate Medical Education (GME) department provides didactics to learners and faculty. MICAPT interns are provided an opportunity to present resident/faculty lectures throughout the course of their internship. Topics are discussed and supervised by the intern's supervisor.

4.4.b. *Precepting/Shadowing.* Precepting is a term used in medical education to indicate a form of clinical teaching, whereby a faculty member directly oversees the clinical work of the training physician. Psychologists in our medical education setting serve as clinical faculty and, when appropriate, precept physicians. Interns will have the opportunity to observe their supervisor precepting with medical residents and attending's, which may involve reviewing videotapes with the physician of interactions with patients, as well as actually accompanying the physician into the exam room ("shadowing").

4.4.c. Community Service or Outreach Activity.

Interfacing with the local community and learning to provide outreach activities are important Clinical Health Psychology roles. Interns will have the opportunity to provide behavioral services for the uninsured in the Family Medicine residency Mobile Healthcare Unit.

4.4.d. Supervising.

Interns may provide supervision via a tiered approach for practicum students as assigned/as available.

4.5. Scholarly Activity

Interns receive training and support that enables them to critically review research, adopt a commitment to lifelong learning, and participate in scholarly activities. While research and quality improvement projects are not required, participation is encouraged and often results in peer reviewed dissemination via regional and national presentations.

4.5.a. Quality Improvement Projects. QI projects have become required for all resident physicians involved in training at McLaren. Interns are not required to complete scholarly projects but, if interested, may participate in such projects with residents.

4.5.b. Participation and Presentation at Professional Meetings. Although not required, interns are encouraged to prepare and submit scholarly work for peer-reviewed regional and national meetings on topics of interest. Organizations important for clinical health psychologists include the American Psychological Association (APA), Michigan Psychological Association (MPA), and Association of Behavioral Science and Medical Education (ABSAME), Association for Hospital Medical Education (AHME), as well as Society of Teachers in Family Medicine (STFM). Additional associations may be indicated based on the populations and specific medical learners served. When interns are presenting their own work, monetary support from GME or the hospital system may be available.

SECTION V – Intern Resources

5.1. Administrative Support

MICAPT provides direct administrative support in overall internship functioning including accreditation, recruitment, evaluation, financial expenditures/invoices, meeting-related documentation, and record keeping. MICAPT also has administrative support for interns and faculty related to day-to-day activities and sponsoring institution-specific policies/procedures such as stipend/salary, benefits, continuing education funds, vacation days, scheduling of patient care and teaching responsibilities, authorizations and billing, computer and information technology assistance.

5.2. Financial Assistance

MICAPT does not provide financial assistance for interns. However, one provided benefit is Employee Assistance Program (EAP), which can provide financial counseling.

The 2024/2025 academic year stipend and benefits package is as follows:

Interns are given a stipend of **\$40,000**. They are given an annual education allowance (\$1,000) to use for education activities including, but not limited to, conference attendance. Educational expenses must be approved through Graduate Medical Education prior to use. Interns are also given a meal stipend to utilize at the hospital. They are allotted 20 days of paid time off, which includes both vacation and sick days. Interns also have health, dental, and vision insurance.

5.3. Intern Rights and Responsibilities

Interns have the right to be treated in a professional and respectful manner by all faculty and staff. Interns must adhere to the policies and procedures outlined in Section III of this manual, which is provided and reviewed at MICAPT orientation. Interns are also expected to follow the policies and procedures as outlined in their resident manual and intern contract.

5.4. MICAPT Calendar

The MICAPT calendar includes routine and special intern activities and events for the month and is available online via Google calendar. The calendar is shared with all MICAPT faculty, fellows, and interns, and intended to serve as a reference for the date, time, and location of MICAPT activities. Activities are subject to change. Every effort is made to ensure the MICAPT calendar reflects changes as early as is feasible.

5.4.a. Internship Activities/Events.

5.4.a.1. Welcome Luncheon. In August of each year, the interns are welcomed by the FAFF/MICAPT Faculty and fellows at an informal luncheon

5.4.a.2. Orientation. Orientations are provided in August and span introductions to MICAPT, as well as to McLaren Macomb and McLaren Oakland in general.

5.5. Online Resources

5.5.a. MICAPT Website.

The MICAPT website (https://www.mclaren.org/gme-medical-education/mclaren-residencyprograms) is where information can be accessed including the application process, faculty and director biographies, and other general information.

5.5.b. New Innovations.

New Innovations is a web-based residency management tool that includes scheduling, evaluations, tracking duty times, case logs, conferences, and other aspects of program maintenance. Login information is provided to all interns.

APPENDICES:

Appendix A: MICAPT 2023-2024 CHP Didactic schedule

Appendix B: MICAPT CHP Evaluations

MICAPT Health Psychology Internship Rotation Evaluation MICAPT CHP Internship Semi-Annual Competencies Evaluation MICAPT Supervisor/Rotation Evaluation Form Mobile Outreach Project Evaluation Tool

Appendix A: MICAPT 2023-2024 CHP Internship Didactic Schedule

	Internship Didactics				
Time	Block	Торіс	Time	Block	Торіс
8-10am	Orientation	Program Overvie	ew, Orientation,	Review Program Man	ual, Policies and Procedures
8-10am	Orientation	Program Overvie	ew, Orientation,	Review Program Man	ual, Policies and Procedures
8am-9am	Professionalism and Diversity	APA Code of Ethics	9am-10am	Lifestyle Medicine	Lifestyle Medicine Curriculum Introduction
		HOLIDAY		_	
		Role of Psychologist in IPC	9am-10am	Professionalism and	Di Role of Psychologist - Case Discussion
		Role of Psychologist in Hospital			Role of Psychologist - Case Discussion
		Role of Psychologist in Medical Education		Journal Club	Diversity Journal Club
		Models of Supervision		Foundations of Healt	th Role of Psychologist - Case Discussion
	Foundations of Health Behavior Change	Social Cognitive Theory			Health Behavior Change - Case Discussion
		Health Belief Model			Health Behavior Change - Case Discussion
		Theory of Planned Behavior		Journal Club	Health Behavior Journal Club
		Social Determinants of Health			Health Behavior Change - Case Discussion
		Health Disparities			Health Behavior Change - Case Discussion
Bam-10am	Motivational Interviewing	Introduction			als, Spirit, and Utilization
8am-10am				terviewing Interactive	
8am-10am				terviewing Interactive	Workshop
8am-10am		Wellness Activities with Fan	-		
8am-10am				terviewing Interactive	-
8am-10am			Motivational Ir	terviewing Interactive	Workshop
		HOLIDAY			
		HOLIDAY		1	
	Brief Interventions	АСТ		Journal Club	Brief Intervention Journal Club
		CBT		Brief Interventions	IPC Case Discussion
		Relaxation Training		Brief Interventions	IPC Case Discussion
		CBT-i		Lifestyle Medicine	Lifestyle Medicine Activity
		DBT in Primary Care		Brief Interventions	IPC Case Discussion
		HOLIDAY			
		IPC Models		Lifestyle Medicine	Lifestyle Medicine Activity
		Substance Use disorders and MAT - Part 1	_	Brief Interventions	
		Substance Use disorders and MAT - Part 2		Journal Club	Brief Intervention Journal Club
	Brief Assessment/HP Assessment	Screening for Mental Health		Lifestyle Medicine	Lifestyle Medicine Curriculum
		Screening for Behavioral Health Disorders		Brief Assessment/HP	
		Chronic Pain evaluations		Brief Assessment/HP	
		ADHD Pariately Funkations		Journal Club	Brief Assessment Journal Club
	Participation of Mandian I Education and Discretion Manifester	Bariatric Evaluations		Brief Assessment/HP	
	Basics of Medical Education and Physcian Wellbeing	Medical school overview		Lifestyle Medicine	Lifestyle Medicine Curriculum
		ABCs of ACGME		Lifestyle Medicine	Lifestyle Medicine Curriculum
		Physician Wellbeing HOLIDAY		Med Ed	Case Discussion
			-	Lifectulo Madiata -	IM Activity
		Review Wellbeing Programs		Lifestyle Medicine	LM Activity
		Engagement in Resident Wellness days		Lifestyle Medicine	LM Activity
	Lifestyle Medicine	Engage in LM activities with FM residents	Life-t-	Med Ed	Case Discussion
	Lifestyle Medicine			le Medicine Curriculu Ne Medicine Curriculu	
		Lifestyle Medicine Curriculum Lifestyle Medicine Curriculum			
		HOLIDAY	Lifesty	le Medicine Curriculu	
			ot Discussion		
		Mobile Clinic Outreach Proje			
	Demonstrum Antivities	Mobile Clinic Outreach Proje	ect Discussion	Fulle lanear dimon	
	Departure Activities Exit Interviews Departure Activities Exit Interviews				

Appendix B. MICAPT CHP Evaluations

MICAPT Health Psychology Internship Rotation Evaluation

Intern Name:

Training Year:

Rotation:

Supervisor:

Expectations of progress for successful Competency Evaluation: Intern must receive a final rating of meeting developmental expectations to successfully complete the rotation. If this is not met, interns may be placed on a performance improvement plan.

Scale for Rating Intern Competencies			
5= Expert	Performs this activity at the level of an experienced independently licensed		
4 = Proficient	Performs this activity regularly and independently for a level appropriate for a		
3 = Competent	Performs this activity regularly and independently with acceptable quality at a level appropriate for independent entry-level practice. Seeks supervision or		
2 = Advanced Beginner	Performs this activity with acceptable quality but continued supervision and / or assistance is required (performance may be inconsistent or not yet autonomous).		
1 = Novice	Rarely or never able to perform this activity with acceptable quality. A clear plan		
N/O	No opportunity to observe OR not applicable to the rotation.		

Profession-Wide Competencies

•		
1. Research: Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities	Rating	
Independently accesses and applies scientific knowledge and skills appropriately to the	Select Rating	
Accurately evaluates scientific literature regarding clinical issues.	Select Rating	
Reviews scholarly literature related to clinical work and applies knowledge to case	Select Rating	
Contributes to the knowledge base by generating and/or disseminating scholarly	Select Rating	
Evaluates practice activities using accepted techniques and uses findings from outcome	Select Rating	
Competency Summary Rating: Select Rating At end of rotation: Intern making progress toward meeting developmental expectation in this area of the Research competency?		

2. Ethical Legal Standards: Application of ethical concepts and awareness of legal issues regarding professional activities	Rating
Demonstrates advanced knowledge and application of the current APA Ethical Principles and Code of Conduct and other	Select Rating
Independently recognizes ethical dilemmas as they arise, and applies ethical decision-	Select Rating
Demonstrates adherence to ethical and legal standards across professional activities and	Select Rating
	Select Rating
	Select Rating

Competency Summary Rating: Select Rating

At end of rotation: Intern making progress toward meeting developmental expectation in this area of the Ethical and Legal competency?

Yes No

3. Individual and Cultural Diversity: Awareness, sensitivity, and skills in working professionally with diverse individuals, groups, and communities	Rating		
Demonstrates understanding of how one's own personal/cultural history, attitudes, and biases may affect how one understands and	Select Rating		
Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all	Select Rating		
Integrates awareness and knowledge of individual and cultural differences in the conduct of professional roles (research,	Select Rating		
Ability to work effectively with areas of individual and cultural diversity not previously encountered in training or	Select Rating		
Ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict	Select Rating		
Independently applies knowledge, skills, and attitudes in working effectively with the range of diverse individuals and groups	Select Rating		
Competency Summary Rating: Select Rating			
At end of rotation: Intern making progress toward meeting developmental expectation in this area of the Individual and Cultural Diversity competency?			
Yes No			

4. Professional Values and Attitudes: Behaves in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional	Rating
Monitors and independently resolves situations that challenge professional values and integrity; Displays consolidation of professional identity as a psychologist	Select Rating

Conducts self in a professional manner across settings and situations; Independently accepts personal responsibility across	Select Rating	
Independently acts to safeguard the welfare of others.	Select Rating	
Actively seeks and demonstrates openness and responsiveness to feedback and supervision	Select Rating	
Engages in self-reflection regarding personal and professional functioning; recognizes limits of knowledge/skills and	Select Rating	
Competency Summary Rating: Select Rating		
At end of rotation: Intern making progress toward meeting developmental expectation in		

this area of the Professional Values and Attitudes competency?

Yes	No
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	·	
5. Communication and Interpersonal Skills: Relates effectively and	Rating	
Develops and maintains effective relationships with a wide range of individuals, including colleagues,	Select Rating	
Produces and comprehends oral, nonverbal, and written communications that are informative, articulate, succinct,	Select Rating	
Demonstrates effective interpersonal skills and the ability to manage difficult	Select Rating	
Competency Summary Rating: Select Rating		
At end of rotation: Intern making progress toward meeting developmental expectation in this area of the Communication and Interpersonal Skills competency?		

6. Assessment: Conducts evidence- based assessment consistent with the	Rating
Demonstrates current knowledge of diagnostic classification systems, functional and dysfunctional behaviors,	Select Rating
Demonstrates understanding of human behavior within its context (e.g., family,	Select Rating
Demonstrates the ability to apply the knowledge of functional and dysfunctional behaviors, including context to the	Select Rating

Selects and applies assessment methods that draw from the best available empirical literature and reflect the science of measurement and psychometrics; collects relevant data using multiple sources/	Select Rating	
Interprets assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against	Select Rating	
Communicates orally and in written documents the findings and implications of the assessment in an accurate and effective	Select Rating	
Competency Summary Rating: Select Rating At end of rotation: Intern making progress toward meeting developmental expectation in this area of the Assessment competency?		

7. Intervention: Provides evidence- based interventions directed at an individual, a family, a group, a	Rating
Establishes and maintains effective relationships with the recipients of	Select Rating
Develops evidence-based intervention plans specific to the service delivery goals.	Select Rating
Implements interventions informed by the current scientific literature, assessment	Select Rating
Demonstrates the ability to apply the relevant research literature to clinical	Select Rating
Modifies and adapts evidence-based approaches effectively when a clear	Select Rating
Evaluates intervention effectiveness and adapts intervention goals and methods	Select Rating
Competency Summary Rating: Select Rating	
At end of rotation: Intern making progress toward meeting developmental expectation in this area of the Intervention competency?	

8. Supervision: Mentoring and monitoring of others in the development of competence and skill in professional	Rating
Demonstrates knowledge of supervision models and practices; demonstrates	Select Rating

Applies this knowledge in direct or simulated practice with psychology trainees or other health professionals. Examples of direct or simulated practice of supervision	Select Rating
Competency Summary Rating: Select Rating	
At end of rotation: Intern making progress toward meeting developmental expectation in this area of the Supervision competency?	

Yes

9. Consultation and Interprofessional/ Interdisciplinary Skills: Intentional collaboration of professionals in health service psychology with other individuals	Rating
Demonstrates knowledge and respect for the roles and perspectives of other professions	Select Rating
Applies this knowledge in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior. Direct or simulated practice examples of	Select Rating
Competency Summary Rating: Select Rating At end of rotation: Intern making progress toward meeting developmental expectation in this area of the Consultation and Interprofessional/Interdisciplinary Skills competency?	

SIGNATURE PAGE

	Intern Signature	Rotation Supervisor
Date:		

Signatures above indicate the intern and supervisor(s) have reviewed the intern's ratings and progress. The intern has had an opportunity to discuss, provide input, and seek clarification regarding the ratings.

MICAPT Internship Competency Evaluation Tool

Intern Name:

Training Year:

Rotations Completed	Supervisor

Expectations of progress for successful Competency Evaluation: *Intern must receive a final rating of 3 in all global competency domains in order to successfully complete internship.*

Scale for Rating Intern Competencies	
5= Expert	Performs this activity at the level of an experienced independently licensed
4 = Proficient	Performs this activity regularly and independently for a level appropriate for a follow or early correct psychologist
3 = Competent	Performs this activity regularly and independently with acceptable quality at a level appropriate for independent entry-level practice. Seeks supervision or
2 = Advanced Beginner	Performs this activity with acceptable quality but continued supervision and / or assistance is required (performance may be inconsistent or not yet autonomous).
1 = Novice	Rarely or never able to perform this activity with acceptable quality. A clear plan
N/O	No opportunity to observe OR not applicable to the rotation.

Profession-Wide Competencies

I	
1. Research: Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities	Rating
Independently accesses and applies scientific knowledge and skills appropriately to the	Select Rating
Accurately evaluates scientific literature regarding clinical issues.	Select Rating
Reviews scholarly literature related to clinical work and applies knowledge to case	Select Rating
Contributes to the knowledge base by generating and/or disseminating scholarly	Select Rating
Evaluates practice activities using accepted techniques and uses findings from outcome	Select Rating
Competency Summary Rating: Select Rating	
At 6-month (mid-year): Intern making progress toward meeting developmental expectation in this area of the Research competency?	
At 12 months (end of year): Intern meets competency in Research?	

2. Ethical Legal Standards: Application of ethical concepts and awareness of legal issues regarding professional activities	Rating
Demonstrates advanced knowledge and application of the current APA Ethical Principles and Code of Conduct and other	Select Rating
Independently recognizes ethical dilemmas as they arise, and applies ethical decision-	Select Rating
Demonstrates adherence to ethical and legal standards across professional activities and	Select Rating
	Select Rating
	Select Rating

Competency Summary Rating: Select Rating

At 6-month (mid-year): Intern making progress toward meeting developmental expectation in this area of the Ethical and Legal competency?

Yes No

At 12 months (end of year): Intern meets competency in Ethical and Legal?

3. Individual and Cultural Diversity: Awareness, sensitivity, and skills in working professionally with diverse individuals, groups, and communities	Rating	
Demonstrates understanding of how one's own personal/cultural history, attitudes, and biases may affect how one understands and	Select Rating	
Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all	Select Rating	
Integrates awareness and knowledge of individual and cultural differences in the conduct of professional roles (research,	Select Rating	
Ability to work effectively with areas of individual and cultural diversity not previously encountered in training or	Select Rating	
Ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict	Select Rating	
Independently applies knowledge, skills, and attitudes in working effectively with the range of diverse individuals and groups	Select Rating	
Competency Summary Rating: Select Rating		
At 6-month (mid-year): Intern making progress toward meeting developmental expectation in this area of the Individual and Cultural Diversity competency?		
At 12 months (end of year): Intern meets competency in Individual and Cultural Diversity?		

4. Professional Values and Attitudes: Behaves in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional	Rating
Monitors and independently resolves situations that challenge professional values and integrity; Displays consolidation of	Select Rating
Conducts self in a professional manner across settings and situations; Independently accepts personal responsibility across	Select Rating
Independently acts to safeguard the welfare of others.	Select Rating
Actively seeks and demonstrates openness and responsiveness to feedback and supervision	Select Rating
Engages in self-reflection regarding personal and professional functioning; recognizes limits of knowledge/skills and	Select Rating
Competency Summary Rating: Select Rating	
At 6-month (mid-year): Intern making progress toward meeting developmental expectation in this area of the Professional Values and Attitudes competency?	

At 12 months (end of year): Intern meets competency in Professional Values and Attitudes? Yes No

5. Communication and Interpersonal Skills: Relates effectively and	Rating
Develops and maintains effective relationships with a wide range of individuals, including colleagues,	Select Rating
Produces and comprehends oral, nonverbal, and written communications that are informative, articulate, succinct,	Select Rating
Demonstrates effective interpersonal skills and the ability to manage difficult	Select Rating
Competency Summary Rating: Select Rating	
At 6-month (mid-year): Intern making progress toward meeting developmental expectation	

in this area of the Communication and Interpersonal Skills competency?

Yes

At 12 months (end of year): Intern meets competency in Communication and Interpersonal Skills?

Yes No

6. Assessment: Conducts evidence- based assessment consistent with the	Rating	
Demonstrates current knowledge of diagnostic classification systems, functional and dysfunctional behaviors,	Select Rating	
Demonstrates understanding of human behavior within its context (e.g., family,	Select Rating	
Demonstrates the ability to apply the knowledge of functional and dysfunctional behaviors, including context to the	Select Rating	
Selects and applies assessment methods that draw from the best available empirical literature and reflect the science of measurement and psychometrics; collects relevant data using multiple sources/	Select Rating	
Interprets assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against	Select Rating	
Communicates orally and in written documents the findings and implications of the assessment in an accurate and effective	Select Rating	
Competency Summary Rating: Select Rating		
At 6-month (mid-year): Intern making progress toward meeting developmental expectation in this area of the Assessment competency?		
At 12 months (end of year): Intern meets com Yes No	petency in Assessment?	

7. Intervention: Provides evidence- based interventions directed at an individual, a family, a group, a	Rating
Establishes and maintains effective relationships with the recipients of	Select Rating
Develops evidence-based intervention plans specific to the service delivery goals.	Select Rating
Implements interventions informed by the current scientific literature, assessment	Select Rating

Demonstrates the ability to apply the relevant research literature to clinical	Select Rating	
Modifies and adapts evidence-based approaches effectively when a clear	Select Rating	
Evaluates intervention effectiveness and adapts intervention goals and methods	Select Rating	
Competency Summary Rating: Select Rating		
At 6-month (mid-year): Intern making progress toward meeting developmental expectation in this area of the Intervention competency?		
At 12 months (end of year): Intern meets competency in Intervention?		

8. Supervision: Mentoring and monitoring of others in the development of competence and skill in professional	Rating
Demonstrates knowledge of supervision models and practices; demonstrates	Select Rating
Applies this knowledge in direct or simulated practice with psychology trainees or other health professionals. Examples of direct or simulated practice of supervision	Select Rating
Competency Summary Rating: Select Rating At 6-month (mid-year): Intern making progress toward meeting developmental expectation in this area of the Supervision competency? Yes At 12 months (end of year): Intern meets competency in Supervision?	

9. Consultation and Interprofessional/ Interdisciplinary Skills: Intentional collaboration of professionals in health service psychology with other individuals	Rating
Demonstrates knowledge and respect for the roles and perspectives of other professions	Select Rating

Applies this knowledge in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior. Direct or simulated practice examples of	Select Rating	
Competency Summary Rating: Select Rating		
At 6-month (mid-year): Intern making progress toward meeting developmental expectation in this area of the Consultation and Interprofessional/Interdisciplinary Skills competency?		
At 12 months (end of year): Intern meets competency in Consultation and Interprofessional/ Interdisciplinary Skills		
?		
Yes No		

SIGNATURE PAGE

	Intern Signature	Program Director
Date:		

Signatures above indicate the intern and supervisor(s) have reviewed the intern's ratings and progress. The intern has had an opportunity to discuss, provide input, and seek clarification regarding the ratings.

Supervisor:

Rotation Name:

The purpose of this evaluation is to gather feedback regarding your experiences with your supervisors and clinical rotations throughout the internship year, including the value of the activities on the rotation, the quality of supervision provided, and recommendations for improvement of the training experience.

Evaluations will be forwarded to the Internship Program Director at the completion of each rotation. The evaluation will be forwarded to the Associate Internship Program Director for rotations that the Program Director is the primary supervisor. Formal ratings and responses will not be shared with individual supervisors until completion of the internship year to protect the anonymity of the interns.

Using the scale below, please indicate the quality of the supervision provided on the rotation and how well your supervisor met your training needs.

Scale for Rating Supervisor Competencies and Rotation Effectiveness	
5	Excellent
4	Good
3	Acceptable
2	Marginal
1	Poor
N/A	Not Applicable or No Opinion

1. Communication and Organization	Rating
	Select Global Rating
Provided proper orientation to the rotation (e.g., reviewed clinic/hospital policies and procedures, facilitated introductions to the interdisciplinary team, identified office space/ storage/facilities/amenities for intern use, provided necessary equipment or resources to complete clinical and administrative responsibilities).	Select Rating
Communicated clinical expectations and goals for the rotation (e.g., reviewed available intervention, assessment, and/or research activities; discussed caseload expectations).	Select Rating
Communicated administrative expectations and goals for the rotation (e.g., reviewed processes and procedures for scheduling patients, entering progress notes, and EMR documentation; reviewed requirements and expected timelines for documentation).	Select Rating
Communicated clearly (i.e., verbally and in writing), answered questions effectively, provided explanations and rationales for decisions, emphasized important points, routinely reviewed intern expectations and plans for improving performance as needed.	Select Rating
Provided clear, thorough, and timely feedback on intern strengths, areas of growth, and progress toward goals (e.g., openly discussed intern performance during supervision; provided thoughtful edits and appropriate turnaround of required documentation).	Select Rating
Completed, reviewed in supervision, and was timely in responsiveness to requests for all required programmatic documentation (i.e., Program Manual, Rotation Evaluations).	Select Rating

2. Accessibility	Rating
	Select Global Rating
Provided at least one hour of regularly scheduled individual, face-to-face supervision per week.	Select Rating
Provided unscheduled supervision and/or consultation (e.g., "on the fly" supervision) as needed or requested.	Select Rating
Demonstrated commitment to supervision and respect for the intern by keeping scheduled appointments, arriving on time and prepared, or communicating clearly and rescheduling when needed.	Select Rating
Communicated preferences for how to be contacted (e.g., office extension, cell phone, Perfect Serve, etc.) and was appropriately responsive.	Select Rating
Communicated plans for provision of backup supervision if unavailable for any reason (e.g., name and methods for contacting the designated supervisor, identified who should be listed as the cosigner of progress notes, etc.).	Select Rating

3. Clinical Competence	Rating
	Select Global Rating
Demonstrated and effectively communicated knowledge/expertise in specialty area (e.g., discussed history of and ongoing developments/research in the field, discussed empirical basis of intervention/assessment and directed the intern to relevant literature/research/ resources, discussed multiple or opposing viewpoints, demonstrated breadth and depth of knowledge within health psychology area).	Select Rating
Demonstrated and modeled sound clinical skill and judgment.	Select Rating
Instructed the intern in conducting a thorough chart review, gathering accurate patient and collateral information, objectively evaluating patient problems, interpreting available data, integrating relevant diagnostic criteria, formulating a case conceptualization and treatment plan, implementing evidence-based and/or supportive interventions, and identifying appropriate recommendations.	Select Rating

Instructed the intern in producing quality documentation (e.g., writing style, structure/ organization, cohesion, brevity/efficiency) that was appropriate to the population and setting.	Select Rating
Instructed the intern in conducting a comprehensive risk assessment and implementing appropriate interventions to ensure patient safety and effectively communicated relevant ethical and legal implications.	Select Rating

4. Supervision Skills	Rating
	Select Global Rating
Geared instruction to the intern's level of readiness and supported gradual autonomy and independence over time.	Select Rating
Actively guided the development of clinical skills (e.g., clearly communicated performance expectations, allowed for intern observation, demonstrated clinical procedures and techniques well, provided specific and appropriate practice opportunities, prepared interns for and discussed ways to manage challenging or unique clinical situations).	Select Rating
Demonstrated and actively guided the development of awareness and sensitivity when working with individuals from diverse backgrounds (e.g., encouraged understanding of and openly discussed how one's own history, attitudes, and biases may affect patient, professional, and supervisory interactions).	Select Rating
Provided direct oversight of intern performance (e.g., live observation, audio/video review, co-treatment) at appropriate times during the rotation.	Select Rating
Identified and clearly communicated intern strengths and areas of growth and provided frequent, constructive feedback with specific suggestions for performance improvement.	Select Rating
Established a safe climate that facilitated both clinical and professional development (e.g., encouraged intern initiative and engagement, demonstrated understanding of and clearly responded to intern questions/inquiries, utilized Socratic questioning effectively, assisted interns with organizing and clarifying their thoughts, provided positive reinforcement of efforts, provided a supportive environment in which errors or sensitive topics could be comfortably broached and addressed without fear of retribution).	Select Rating

5. Professional Values, Attitudes, and Interpersonal Qualities	Rating
	Select Global Rating
Behaved in ways that reflect the values and attitudes of Psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others (e.g., demonstrated empathy and respect for others, demonstrated tolerance of value differences, modeled awareness of and sensitivity to moral and ethical practice issues, demonstrated awareness of and sensitivity to individual and cultural differences).	Select Rating
Demonstrated investment in the training process (e.g., listened attentively to intern concerns, demonstrated sensitivity to intern needs, asked/answered questions and provided corrective feedback in a supportive manner, showed genuine interest in intern performance and progress toward professional goals).	Select Rating
Demonstrated effective interpersonal skills and the ability to establish rapport (e.g., demonstrated self-confidence, enthusiasm when teaching, genuineness/authenticity, enjoyable presentation style, ability to facilitate intern initiative and engagement, open- mindedness, non-judgmental attitude).	Select Rating
Actively sought and demonstrated openness and responsiveness to feedback (e.g., demonstrated awareness of limitations, managed sensitive or uncomfortable discussions well, responded appropriately and without defensiveness or arrogance to constructive feedback, took responsibility for actions and actively addressed errors).	Select Rating

NARRATIVE FEEDBACK

Using the space below, please provide feedback with regard to supervisor strengths and areas of growth as well as any recommendations you have for improving the training experience.

Note: Any ratings below a "3" (i.e., acceptable) warrant an explanation regarding specific skill limitations.

ROTATION EVALUATION

Please indicate the quality of the rotation as it relates to available clinical experiences and how well it met your training needs.

Rotation Experiences	Rating
	Select Global Rating
Provided a variety of clinical opportunities (e.g., intervention, assessment, consultation, scholarly activity).	Select Rating
Provided exposure to a range of patient populations and/or diagnoses.	Select Rating
Provided opportunities to work within an interdisciplinary team or alongside other disciplines.	Select Rating
Provided sufficient opportunities to engage in challenging and/or meaningful clinical work.	Select Rating
The scope of training was appropriate and contributed to meeting my professional goals.	Select Rating
Did the experiences on this rotation closely match its description in the program manual and/or when presented during orientation week?	Select Response
Would you recommend this rotation to another intern?	Select Response

NARRATIVE FEEDBACK

Using the space below, please provide feedback with regard to rotation strengths and areas of growth as well as any recommendations you have for improving the training experience.

Note: Any ratings below a "3" (i.e., acceptable) warrant an explanation regarding specific limitations. Additionally, if you would not recommend this rotation to another intern for any reason, please tell us why.

Your honest feedback is crucial to maintaining a high-quality and successful internship training program. Thank you!

Mobile Outreach Project Evaluation Tool

Project Title: Intern Name:

Check the number that best corresponds to performance. Rating Scale: 5= Excellent, 4 = Good, 3 = Neutral, 2 = Fair, 1 = Poor

Evaluation Area	Rating Scale
Preparation	
Formulated a project informed by clinical problems encountered, clinical services, and/or clinical needs related to health disparities and/or underserved patient populations	
Identified appropriate evidenced-based literature, references, and/or resources	
Integrated the best of available research, cultural considerations, and clinical expertise into the project.	
Execution	
Implemented the project as designed, in an appropriate and thoughtful manner	
Adhered to ethical codes and policies of the profession and sponsoring institute	
Provided a clear, well-organized project that could be implemented by another team-member (e.g., future interns, residents)	

Identify two key strengths of this project:

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Identify two ways this project could be improved:

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2.

Summary Rating: _____

Faculty Member Signature:	
Date:	

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