

**IU Health Ball Memorial Hospital**

**Health Service Psychology Doctoral Internship**

**Training Manual**



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## Internship Mission and Program Aim

### **Mission and Model of Training:**

*“Everyone is a teacher, a student, a patient, and a healer. Each day provides an opportunity to grow and develop. We embrace the challenge to understand and impact our health, our patients, our community, and our world.”*

As the Family Medicine Residency Center’s mission statement suggests, we are committed to improving ourselves and others in a variety of ways. One of our most important commitments is toward teaching and training. Our doctoral internship program is designed to prepare interns for entry level practice in health service psychology. This commitment is achieved through experiential training activities that prepare interns to provide service to patients in an integrated healthcare setting. Interns have opportunities to learn in several different healthcare environments around the clinic and hospital. Interns train side by side with the full spectrum of multidisciplinary healthcare team members. Our goal is that this environment puts our interns in the beneficial role of being both the student and the teacher. Our interns learn breadth of skill by working with a diverse group of patient populations with varied clinical needs. Our interns deepen their skillsets in health psychology by working frequently with medical comorbidities and other health related challenges.

Technology is utilized within our clinic to enhance the intern and patient experience. Interns have a shared office space with access to their own individual computer and software. Each intern has access to support staff, educational materials, and resources within the clinic. Live video and recording software are placed within each patient room, allowing them to enhance their training and supervision at a moment’s notice. Paging systems are utilized to help physicians consult with interns and to increase access to behavioral healthcare for our patients.

Didactic learning is fully integrated into the clinic structure. Interns receive daily didactic lessons during lunch. These “noon conferences” encompass wide varieties of topics in healthcare and behavioral health. These daily didactics are utilized by not only the interns, but also the full complement of residents and medical directors of the clinic. Furthermore, interns receive weekly didactic lessons that are specifically catered to the needs of a doctoral intern in health service psychology. These weekly didactics are focused on core competencies for entry level practice of health service psychologists and typically are only attended by fellow interns and psychologists.

Interns are given the opportunity to practice supervision and clinical teaching skills with psychology practicum students and medical students. Student trainees are not a guarantee for interns. This experience cannot be guaranteed each year because student trainee interest and need within the clinic is variable. When available, these training experiences are matched based on clinical interests. Supervision of supervision is provided weekly, and interns can expect to explore multiple models of supervision throughout their training.

The internship utilizes the practitioner-scholar model of training. The program values experiential learning with formal and informal supervision. Our site has heavy emphasis on consultation and warm handoffs, most specifically with physicians and medical residents but interns work closely with all staff. The site also emphasizes the importance of evidence-based research and encourages interns to use empirically supported treatments throughout their practice.

While all interns complete core portions of the training curriculum, interns also have some freedom to pursue personal interests. In particular, community outreach programs offer opportunities for interns to focus on areas of special interest within primary care or health psychology. Interns can utilize already established programs or create their own outreach opportunities. Our site has made inroads with much of our community and assistance can be given in establishing a relationship with community organizations.

All the didactic and experiential components of this program have been developed to allow interns to assume increasing responsibilities as they move towards greater autonomy over the course of their internship. Thus, the program fosters the development of professional competencies as well as professional identity as a health service psychologist. The program also fosters the development of multicultural competence and benefits greatly from the rich diversity of the patients we serve.

**Program Aim:**

Our program aim is to prepare psychologists ready for entry level practice in health service psychology.

## **Profession-Wide Competencies**

The APA Commission on Accreditation references 9 profession-wide competencies that internship sites must utilize as part of health service psychology training. Our site provides training in the following elements of each profession-wide competency:

### **Intervention:**

By the completion of the training year, interns are expected to:

- Establish and maintain effective relationships with the recipients of psychological services.
- Develop evidence-based intervention plans specific to the service delivery goals.
- Implement interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.
- Demonstrate the ability to apply the relevant research literature to clinical decision making.
- Modify and adapt evidence-based approaches effectively when a clear evidence-base is lacking.
- Evaluate intervention effectiveness and adapt intervention goals and methods consistent with ongoing evaluation.

### **Consultation and Inter-professional/Interdisciplinary Skills:**

By the completion of the training year, interns are expected to:

- Demonstrate knowledge and respect for the roles and perspectives of other professions including the dynamics of an interdisciplinary team.
- Demonstrate knowledge of consultation models and practice.
- Apply this knowledge in direct or simulated consultation with individuals and their families, other health care professionals, interdisciplinary teams, or systems related to health and behavior.

### **Assessment:**

By the completion of the training year, interns are expected to:

- Demonstrate current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology.
- Demonstrate understanding of human behavior within its context.
- Demonstrate the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process.
- Select and apply assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics.
- Interpret assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases and distinguishing the aspect of assessment that are subjective from those that are objective.
- Communicate orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.

### **Supervision:**

By the completion of the training year, interns are expected to:

- Demonstrate knowledge of supervision models and practices.



- Apply knowledge in direct or simulated practice with psychology trainees or other health professionals.

### **Communication and Interpersonal Skills:**

By the completion of the training year, interns are expected to:

- Develop and maintain effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services.
- Produce and comprehend oral, nonverbal, and written communications that are informative and well-integrated. This will be demonstrated through a grasp of professional language and concepts.
- Demonstrate effective interpersonal skills and the ability to manage difficult communication well.

### **Professional Values and Attitudes:**

By the completion of the training year, interns are expected to:

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

### **Individual and Cultural Diversity:**

By the completion of the training year, interns are expected to:

- Demonstrate an understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves.
- Demonstrate knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision, consultation, and service.
- Demonstrate the ability to integrate awareness and knowledge of the individual and cultural differences in the conduct of professional roles. This includes the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered as well as those that create conflict with their own.
- Demonstrate the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during the internship.

### **Ethical and Legal Standards:**

By the completion of the training year, interns are expected to:

- Be knowledgeable and act in accordance with each of the following:
  - The current version of the APA Ethical Principles of Psychologists and Code of Conduct
  - Relevant laws, regulations, rules, and policies governing health service psychology within the organizational, local, state, regional, and federal levels
  - Relevant professional standards and guidelines

- Recognize ethical dilemmas as they arise and apply ethical decision-making processes in order to resolve the dilemmas.
- Conduct self in an ethical manner in all professional activities.

**Research:**

By the completion of the training year, interns are expected to:

- Demonstrate the independent ability to critically evaluate and disseminate research or other scholarly activities.
- Demonstrate the independent ability to find, analyze, and incorporate evidence- based research into their clinical practice.

## **Internship History**

We began our internship training with the belief that training psychologists in an integrated primary care setting is both a benefit to the field of psychology and a responsibility to the patients in our healthcare system. We align with the American Psychological Association's strategic plan for expanding psychology's role in healthcare, and furthermore, believe that this is the present and future of effective psychological treatment.

IU Health Ball Memorial Hospital's Family Medicine Residency began training interns in 2011 as one of the founding members of the Integrated Behavioral Health Consortium of Indiana. Throughout the consortium's history our interns focused on health service psychology, school psychology, community mental health, and residential inpatient psychology, rotating between sites throughout Indiana.

The 2017-2018 training year marked a major change for our site as we began to host a standalone internship site for the first year. This was an exciting phase of our training, as we shifted focus from a breadth of various fields and instead offer a depth of training into health service psychology.

### **Internship Setting:**

The Family Medicine Residency Center (FMRC) was built in 2000 to provide access to training for family medicine residents in the Central Indiana area. Since that time, our program has started a behavioral health training program that works side by side with a large group of resident physicians. This unique training setting imbeds behavioral health in the same 24 room clinic as medical providers, giving you a chance to see how primary care works from all angles. Being a member of our training facility gives interns the chance to both teach and learn from residents and staff and allows you to utilize support while maintaining expertise among your peers. The FMRC is the primary location for our interns and contains:

- 24 clinic rooms, divided into 4 pods
- Dedicated behavioral health office space
- Dedicated behavioral health consultation room for counseling and patient meetings
- Individual computers with access to internet, software, and scoring programs
- Access to three conference rooms with LCD projection for didactics and presentations
- Full access to all support staff and faculty (i.e. physicians, nurses, social work, patient education, medical assistants, coordinators, pharmacists, schedulers, and clinic staff)
- Ample free parking
- A cafeteria, coffee shop, and Subway restaurant within the hospital
- Walking distance to several restaurants
- The clinic is located central to residential areas, Ball State, and the downtown area
- The FMRC is located across the street from IU Health Ball Memorial Hospital, a 360 bed teaching hospital. While most of the time is spent in the outpatient setting, there are some opportunities to work in the hospital as well. This includes bedside therapy, consultation with providers, multiple specialty medical clinics, and hospital wide training events.

All interns are active in a diverse range of outpatient experiences; however, our site also prides itself on flexibility in training. With the permission of the training director, interns have the option to seek out experiences of interest. These experiences can be outpatient, inpatient, or within the community but must maintain integrity to the mission of the internship.

**APA Accreditation Status:**

Our internship is fully accredited by the Commission on Accreditation of the American Psychological Association. Our next site visit will take place in 2029.

*Questions related to the program's accreditation status should be directed to the Commission on Accreditation:*

*Office of Program Consultation and Accreditation  
American Psychological Association  
750 1<sup>st</sup> Street, NE, Washington, DC 20002  
Phone: (202) 336-5979 / E-mail: [apaaccred@apa.org](mailto:apaaccred@apa.org)  
Web: [www.apa.org/accreditation](http://www.apa.org/accreditation)*

## **Clinical Areas of Focus**

The profession-wide competencies serve as the sites comprehensive evaluative criteria; though often prospective interns ask what opportunities occur most frequently while training at our site. Though, all the profession-wide competencies are valued equally and experienced throughout the training year, these areas of focus outline some of the most common experiences and skillsets during the internship.

### **Therapeutic Intervention:**

Interns develop the necessary skills to implement short term, solution-focused therapeutic intervention in the primary care setting. Interns implement treatment through warm handoff consultations, individual therapy, group therapy, and psychoeducational groups. In addition to more traditional models of care, interns have the opportunity to be involved with medical appointments. Interns have the opportunity to engage in regularly scheduled group medical appointments as part of an interdisciplinary team. Interns infrequently are involved with home visit appointments when patients have limited access to care. Interns generally manage an appointment-based caseload of ~40-60% of their work week; however, this amount of time will increase dependent on how often warm handoff consultations are needed.

### **Experiences:**

- Interns are expected to broaden their general therapeutic skills while developing depth in health psychology interventions.
- Interns will have frequent opportunities to work within specialty medicine clinics (most frequently in bariatric and medical weight loss.) Interns utilize a variety of treatment modalities and understand the evidence base for each.
- Interns also learn facilitation skills necessary for leading small and large groups.
- Interns learn to explore diversity and culture with patients and other professionals.
- Interns learn how to deliver cost effective treatment while navigating the medical system, healthcare plans, and effective documentation.

### **Consultation:**

Interns are expected to learn the role of a consultant within an outpatient primary care office. Interns learn how to navigate systems and appropriately consult with the professionals in those systems. Heavy emphasis of training is made toward consulting with primary care physicians within the residency program. Interns consult with physicians and medical staff:

- on a daily, regular basis
- Interns consult with providers about shared patients
  - providers will seek consultation and training regarding patients that will not be seen by the intern.
- Interns also learn the resources of the area and utilize referral sources appropriately.

In this way the intern learns how to utilize their expertise to best serve patients in an interdisciplinary system.

### **Screening, Assessment, and Diagnosis:**

Interns use screeners, brief clinical assessment, and diagnostic criteria to conceptualize the patient's needs and plan treatment. Our site prioritizes screening over full batteries of assessment. Interns develop the skills required to appropriately screen patients in the primary care setting for behavioral

health related needs. The interns also develop a treatment plan and refer screened patients when appropriate.

While our site prioritizes screenings, interns will gain:

- competence and experience to complete full assessments for a variety of patient concerns (i.e. ADHD, Dementia, Pre-surgical Bariatric Examinations, etc.).
- Interns learn to conduct thorough clinical interviews, assess risk, analyze and integrate data, prepare clear and succinct reports, and provide follow up consultation. Interns regularly assess patients seeking treatment for a wide variety of issues and needs

**Supervision:**

Interns receive informal and formal evaluation throughout the year in the forms of live supervision, live video, taped video, and written evaluations. Interns receive a minimum of 4 hours of supervision each week using individual and group supervision formats. Additionally, interns:

- Interns also provide supervision for practicum students and medical students only when students are available.
  - Group supervision of supervision is used to help guide interns and to present a variety of supervision modalities to utilize when they have supervisees.
- Interns learn how to prepare and present case information, seek supervision, and utilize supervision effectively.

Specific requirements and further clarification of how the intern will be evaluated in these areas can be found in the profession-wide competencies and evaluation sections of this document.

## **Other Areas of Focus**

### **Competence in Health Service Psychology:**

Our site seeks to provide the skills necessary for successful interns to be prepared as an entry level psychologist within the Health Service Psychology field. The site seeks to assist interns in:

- understanding the boundaries of one's practice, knowledge, and competence
- providing experience necessary for broad professional competency in Health Service Psychology as well as competency within specialized areas of Health Psychology.

### **Practice Oriented Setting:**

The site seeks to provide guidance in leaving the academically focused setting of a graduate university into a primarily patient and practice-oriented setting within our clinic.

- Our site utilizes the practitioner-scholar model of training and application of practice takes precedence over research.
- Research and community outreach opportunities may be utilized in addition to practice application at the interest and discretion of the intern and supervisors
  - but should not come at the expense of the clinical environment.
- The site operates under a developmental model and will help interns increase in autonomy within the practice setting throughout the year.

### **Navigation of the Inter-professional Setting:**

The site seeks to aid interns in the ability to work with a variety of people, settings, and systems. The site will help interns:

- understand how individual and cultural diversity influences their work and those around them.
- Interns will have specific duties regarding supervision with other psychologists, but the site will help interns find supervision and mentorship amongst other professions during the year.
- The site aims to provide the opportunity to effectively consult with psychological and non-psychological professionals and how to effectively navigate the settings these professionals work in.
- The site will provide opportunity to critically evaluate treatment methods, programs, and systems to help interns develop skills within program evaluation.

### **Didactic Lessons:**

The site will provide didactic lessons to further develop as a Health Service Psychologist. Didactic lessons serve several purposes:

- the site will facilitate the understanding of how to become an adept user of evidence-based literature for lifelong learning.
- The site will provide didactic lessons with the purpose of helping interns in both understanding of new knowledge as well as the application of knowledge in the professional and clinical environments.
- The site aids interns in how to effectively receive and disseminate knowledge within an inter-professional environment. The site will provide space, time, and audience for interns to present their own didactic lessons amongst their peers.

## **Intern Activities and Responsibilities**

### **Internship:**

Interns complete at least 2000 hours in the 53-week internship. Interns are responsible for keeping track of their hours toward completion and any paperwork necessary by their university. The training year lasts through late June or early July. Interns will complete 53 weeks of internship to help provide orientation and patient-provider transition with the next training year's interns.

### **Schedule:**

The FMRC is typically open Monday through Friday from 8AM to 5PM. Generally, the last patient arrival is at 4PM. Most of the intern's work will occur during these hours. However, there are events and clinics that happen outside of these general hours on occasion that the intern is expected to participate in. The Bariatric and Medical Weight Loss Center has psychoeducational and support groups that occur early morning or after business hours. The interns are responsible for participating in these groups.

Intern schedules are based on the intern's availability and timing of clinic events but must include the following in their schedule, unless specified otherwise.

- Weekly group supervision (2 hours)
- Weekly group supervision of supervision (1 hour if the intern is supervising a practicum student; this will replace one hour of group supervision)
- Individual supervision twice weekly (1 hour each)
- Supervision of student supervisee (1 hour per supervisee, if supervisees are available)
- Weekly behavioral health didactics (1-2 hours)
- Daily noon conference didactics (1 hour)
- Medical weight loss psychoeducational morning or evening groups every third week (1-2 hours)
- Occasional bariatric support groups in the evening or during lunch (1 hour)
- Weekly Safely Home meetings and twice weekly Safely Home clinics (1-3 hours)

Based on interest level and clinical need, interns may need to include the following on their schedule.

- Various specialty medical psychoeducation or therapeutic groups (e.g., substance use disorders; LGBTQ+ youth)
- Any special interest projects or community outreach projects created by the intern
- Any training events or conferences attended by the intern
- Presenting during noon conference
- Rounding with hospital teams
- Grand rounds that are of interest to the intern

### **Counseling Activities:**

Interns provide a wide variety of therapeutic experiences. Individual sessions are typically brief (30 minutes) short term (1-10 sessions) patient centered therapy. Interns determine the theoretical framework based on the patients' needs and their experience; however, CBT, ACT, and motivational interviewing are used frequently. The following list is not exhaustive but serves as a template of commonly provided counseling services.



- Individual counseling
- Warm handoffs of physician's patients
- Mental health screeners
- Consultations with medical providers and at Ball Memorial Hospital
- Brief intervention following a positive mental health screening
- Crisis assessment
- Group therapy
- Psychoeducational group facilitation
- Weight related counseling and assessment

### **Supervision:**

Interns complete a minimum of 4 hours of supervision per week, with the option of additional supervision throughout the week as needed. The behavioral health faculty have an open-door policy for on-the-fly supervision or staffing of patients.

Interns receive two hours of individual supervision split between two site supervisors each week. Site supervisors are doctoral level Licensed Psychologists that are certified as a Health Service Provider in Psychology. Notes and electronic medical records are signed by one of the intern's assigned supervisors.

Group supervision is two hours weekly and includes all doctoral interns on site as well as all site supervisors. Supervision of supervision is also given in group format weekly, only when supervisees are available to the interns. Group supervision and supervision of supervision occur in the same block of time weekly and is protected time for the interns. Supervision of supervision will replace one hour of group supervision, when relevant.

If students are available, interns are also given the opportunity to provide supervision to practicum students and to be shadowed by medical students or residents, while receiving their own supervision for this task. Students will be made available when there are appropriate applicants and a need within the clinic. When students are available, supervision of the student occurs for at least one hour weekly, scheduled at the intern's and student's convenience. Supervisees are typically psychology graduate students completing their master's or doctoral level practicum experience from universities in the region. Likewise, interns occasionally have a medical student or resident shadowing them throughout the day. These students are typically 3<sup>rd</sup> or 4<sup>th</sup> year medical students or family medicine residents. Supervisors and supervisees are matched to the same partner for the duration of their rotation.

All supervision typically occurs on site. There are several rooms that are available for supervision, and reserved conference rooms for didactics and group supervision.

### **Didactics, Education, and Training:**

Interns typically receive 5 to 7 hours of structured education throughout the week. Most of which are in the form of didactic presentations, but also include case conferences, treatment team meetings, professional development, practice management, grand rounds, regional training opportunities, journal club, and research team meetings.

Interns participate in a 1-2 hour behavioral health didactic weekly. This didactic includes all interns as well as all site supervisors. Frequently when the topic is relevant, other clinicians from the hospital may join.

The FMRC also hosts daily noon conferences on a variety of primary care medicine topics. These noon conferences are one hour each day at noon and provide the opportunity to learn more about how primary care medicine functions and to share behavioral health expertise with an audience of physicians. Topics vary widely and may not always directly relate to psychology, but interns are generally expected to attend and participate. Interns have the opportunity to lead the lecture at least once over the course of the year. Interns typically eat their lunch and socialize during this hour as well.

**Community Outreach:**

Interns can participate in community outreach during the course of the internship year. Participation may occur within the clinic or somewhere within the Muncie community. Interns are exposed to a wide variety of community outreach projects throughout the year; however, the intern may find outreach opportunities outside of clinic operations as well. Interns are encouraged to find an outreach opportunity that they are passionate about with the goal of improving our community, exposing themselves to a diverse group of people, and to improve their training.

## **Intern Selection**

### **Eligibility:**

Graduate students from APA accredited program in a professional psychology field are eligible to apply. Applications from students seeking a Ph.D. or Psy.D. in Clinical, Counseling, or School Psychology are welcome.

### **Preference:**

Our selection committee seeks interns with an interest in health service psychology, primary care psychology, and health psychology, thorough preparation in therapeutic intervention, comfort with a fast-paced unpredictable schedule, a self-starting personality, emotional maturity, ability to utilize feedback positively, ability to handle emotionally difficult situations, and has multifaceted interests both professionally and personally. We are committed to expanding diversity within our field; members of minority groups are strongly encouraged to apply. A master's degree is not required; however, preference will be given to those that have a conferred master's degree at the time of application.

### **Selection Criteria:**

Applicants should have the following minimum qualifications:

- Graduate coursework and practicum training in therapeutic interventions. All theoretical orientations are welcome, but applicants must have familiarity and comfort with CBT and motivational interviewing.
- Applicants must have clear and genuine interest in primary care psychology, health service psychology, and/or health psychology.
- Applicants should have experience in completing concise treatment notes and brief assessment reports.
- APPIC application is required.
- Applicants must have at least 1 letter of recommendation from a clinical supervisor. At least two of the letter writers should be able to write about your therapeutic intervention skills.
- Citizenship is not required, but we are not able to be a primary sponsor to work or school visas.
- Dissertation proposal and any comprehensive examinations are required to be completed prior to internship start date.
- Applicants must be in good standing in their graduate institution.
- A minimum of 4 years of graduate training with a minimum of 500 hours of practicum training in therapeutic intervention. Preference will be given to those that have interventional training in a healthcare setting.
- Intern is required to have diagnostic training or experience with the DSM-5.
- Verification of all selection criteria from the training director of the applicant's graduate program, prior to start date.

### **Selection:**

Applications are screened by a member of the training committee. Applications meeting all selection criteria will be dispersed to all site supervisors to be read and ranked. Rank order will be determined by the applicant's experience, perceived interest in our program, and professional and personal fit with our training model. The top ranked applicants will be invited for interview. Applicants are strongly encouraged to come for an in-person interview when possible. Virtual interviews via video

or phone can be arranged when either personal or environmental circumstances warrant them, including COVID-19 surges. In the case of mandatory virtual interviews, the APPIC directory will be updated to reflect that status. Interviews are structured and will be attended by the training director and at least one other site supervisor. A tour of the site and additional time for informal questions will be provided. Candidates will have time to meet/interview with both site supervisors as well as the current interns. The entire interview process will last around a half day, but interns will be provided a list of geographic points of interest and are encouraged to explore the surrounding area if they are in the area. The selection committee will then meet to discuss and finalize rank orders after the final interview date.

**Nondiscrimination Policy:**

IU Health Ball is an equal opportunity employer dedicated to prohibiting unlawful discrimination on the basis of race, color, sex, religion, age, national origin, genetic information, marital status, veteran status, disability, sexual orientation, gender identity or expression. IU Health Ball is committed to providing its team members with a work environment that is free from unlawful discrimination and harassment of any kind.

As a recipient of Federal financial assistance, IU Health Ball, does not exclude, deny benefits to, or otherwise discriminate against any person on the ground of race, color, sex, religion, age, national origin, marital status, veteran status, disability, sexual orientation, gender identity or expression in admission to, participation in, or receipt of the services and benefits of any of its programs and activities or in the employment therein, whether carried out by IU Health Ball directly or through a contractor or any other entity with whom IU Health Ball arranges to carry out its programs and activities.

This statement is in accordance with the provision of Title VI and VII of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Regulations of the U.S. Department of Health and Human Services issued pursuant to the Acts, Title 45 Code of Federal Regulations Part 80, 84, and 91, all as amended (Other Federal Laws and Regulations provide similar protection against discrimination).

In case of questions concerning this policy, or in the event of a desire to file a complaint alleging violations of the above, please contact:

IU Health Ball Memorial  
2401 W. University Avenue  
Muncie, IN 47303  
Attn: Human Resources Director  
Phone: 765-747-3007  
Toll-free: 800-533-7359  
TDD: 765-441-2990

Our internship program makes a concerted effort to recruit and retain diverse interns, staff, and faculty. This is also considered in our training, which will include discussion and lectures geared toward diversity in clinical and professional settings.

**Application Procedures:**

If you wish to apply for the doctoral psychology internship at IU Health Ball Memorial Hospital's Family Medicine Residency Center, please send:

- A completed APPIC Application for Psychology Internship form (AAPI) filed electronically. You can access this form from APPIC's web site: <http://www.appic.org>.
- Please include a cover letter indicating your interests in our site.
- Please include among your letters of recommendation, at least one clinical supervisor and at least two that can attest to your therapeutic intervention skills.
- Please include your graduate program transcript, as specified by the APPIC directions for the electronic application.

As a member of APPIC, IU Health Ball Memorial Hospital's Family Medicine Residency agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any applicant.

If you have any questions concerning the application process, please contact the training director.

Lauryn M. Toby, Ph.D., BCBA, HSPP  
Director of Behavioral Health; Internship Training Director  
221 N. Celia Avenue,  
Muncie, IN 47303  
765-747-8409  
[ltoby@iuhealth.org](mailto:ltoby@iuhealth.org)

## **Intern Compensation**

### **Stipend:**

Interns receive a stipend of \$43,888 a year and are paid on a biweekly basis.

### **Benefits:**

Interns receive health, malpractice, and life insurance, provided through IU Health beginning on the first day of employment. Interns accrue 1 day of PTO/sick/holiday leave every two weeks, starting the first day of internship with a total accumulation of 26 days. The clinic observes all major national holidays. All training and educational events are considered work oriented, and do not count against PTO.

### **Optional Benefits:**

Interns have access to a behavioral health consultation room, for therapy, consultation, and assessment. Interns have the option to add family members to their health insurance plan for an additional premium. Interns also have access to dental and vision insurance for an additional premium. IU Health has an onsite fitness center that may be utilized for free. Family plans for the fitness center can be added for a small premium.

### **Resources:**

Interns have access to a substantial psychological and medical library that has been supported through the residency that is directly related to primary care psychology. Likewise, copies of the DSM-5 and ICD-10 are available to all interns. Interns also have access to a large academic library on the hospital's campus that gives access to hundreds of clinical journals as well as research staff. Interns will have access directly to several psychological, family medicine, and professional journals by way of an office subscription.

Regional or local training opportunities are provided to the interns as they come up for no additional cost. These trainings usually take place in Central Indiana and budget is allotted on a conference-by-conference basis but interns typically receive at least 2 regional training opportunities over the course of the year.

Throughout the residency's recruitment season (~4 months) food will be provided during noon conference. This is typically catered by a local restaurant.

Interns share an office space with our clinical patient educator, but have their own work area, desk, computer, and phone. This is located centrally to the clinic as to support frequent consultation by the physicians. Additionally, interns have use of specifically designated Consultation/Therapy room adjacent to the intern office and is used exclusively by the BH interns.

Time can be allotted for research/dissertation when interns are not busy with clinical responsibilities. The clinic also has a research coordinator that can assist in research development and dissertation prep when needed. If dissertation is already completed and the intern is not completing research, this time can be used for EPPP preparation. The site has a number of study guides for the exam that are passed on by previous interns.

Healthy snacks are provided by the clinic and delivered weekly.

A lounge area is provided to give comfortable space to relax or work from when not directly needed in the clinic area.

**Parental Leave**

Our program embraces the benefits of maternity and paternity leave for all interns that would like to utilize time away from work related duties. Our program highly values wellness, support, and family and we fully support time away for parents to take care of their health and create familial bonds. Interns will still meet all the criteria for successful completion of the internship which will mean starting early or graduating later. The amount of time off and start/completion dates will be determined with major consideration to the intern's preference, but will be decided on a case by case basis with all training factors considered. The time off will be unpaid and pay will restart following the end of parental leave. Benefits and liability insurance will be maintained during the time away. The training director will work with the intern to find the best plan for parental leave and make a written agreement with the intern. Following the return to work time will be made throughout the workday for breastfeeding or pumping for interns that choose to do so. A breastfeeding/pumping room in the building is available for privacy.

**Date Program Tables are updated: 8/8/2025**

**Program Disclosures**

As articulated in Standard I.B.2, programs may have “admission and employment policies that directly relate to affiliation or purpose” that may be faith-based or secular in nature. However, such policies and practices must be disclosed to the public. Therefore, programs are asked to respond to the following question.

<p>Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution’s affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values. If yes, provide website link (or content from brochure) where this specific information is presented:</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>



## Internship Admissions, Support, and Initial Placement Data

### Internship Program Admissions

Date Program Tables are updated: 8/8/2025

**Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements:**

All information gathered in the training manual may be important for potential applicants to make a decision about applying or ranking our program. We encourage all potential applicants to review all the material within the training manual. However, sections about intern selection criteria may help individuals quickly assess if they are eligible for application. Sections about intern responsibilities and opportunities may help potential applicants quickly determine if they have interest in our site and model. Lastly, sections about the quality of life during internship may help individuals determine if our community, culture, and environment would make for an appropriate personal choice for them.

**Does the program require that applicants have received a minimum number of hours of the following at time of application? If Yes, indicate how many:**

Total Direct Contact Intervention Hours		Yes	Amount: 500
Total Direct Contact Assessment Hours		Yes	Amount: 25

**Describe any other required minimum criteria used to screen applicants:**

- Dissertation proposal successfully completed
- Good standing within program
- Minimum of 4 years of graduate training

## Financial and Other Benefit Support for Upcoming Training Year\*

Annual Stipend/Salary for Full-time Interns	\$43,888	
Annual Stipend/Salary for Half-time Interns	N/A	
Program provides access to medical insurance for intern?	Yes	No
<b>If access to medical insurance is provided:</b>		
Trainee contribution to cost required?	Yes	No
Coverage of family member(s) available?	Yes	No
Coverage of legally married partner available?	Yes	No
Coverage of domestic partner available?	Yes	No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	208 (26 days)	
Hours of Annual Paid Sick Leave	PTO and sick leave are combined into the same pool	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	Yes	No
Other Benefits (please describe): <ul style="list-style-type: none"> <li>• Optional dental insurance</li> <li>• Optional vision insurance</li> <li>• Onsite fitness center membership</li> <li>• Multiple onsite amenities (more detail can be provided in the resources section of the training manual)</li> </ul>		

\*Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table

## Initial Post-Internship Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

	2021-2024	
Total # of interns who were in the 3 cohorts	6	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	PD	EP
Community mental health center	0	1
Federally qualified health center	0	0
Independent primary care facility/clinic	0	0
University counseling center	0	0
Veterans Affairs medical center	0	0
Military health center	0	0
Academic health center	3	2
Other medical center or hospital	3	3
Psychiatric hospital	0	0
Academic university/department	0	0
Community college or other teaching setting	0	0
Independent research institution	0	0
Correctional facility	0	0
School district/system	0	0
Independent practice setting	0	0
Not currently employed	0	0
Changed to another field	0	0
Other	0	0
Unknown	0	0

Note: "PD" = Post-doctoral residency position; "EP" = Employed Position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.

## **Living in Muncie**

Many of our applicants are unfamiliar with the Muncie area. This section of the guide is designed to highlight some of our communities many wonderful features. Our internship highly values work life balance, and we feel that our community has all the resources to make that goal a reality.

### **Quality of Life**

Muncie offers the best of both worlds in regard to its size. It is big enough that you will find culture, entertainment, and socialization and it is small enough to be affordable, quiet, and natural. The quality of life is very high, and the cost of living is extraordinarily low, making it a great place to live for an internship.

### **Food and Drink**

Muncie is the home to many food and drink options from casual to fine dining. It isn't hard to find what you are looking for, because Muncie is home to many cultural and ethnic food varieties. Some of the popular locations include:

- Elm Street Brewery
- Trust Your Butcher Lahody's Steakhouse
- Concannon's Pastry Shop
- Savages Alehouse (Pub and Craft Beer)
- Vera Mae's Bistro (French)
- Sitara Indian Restaurant
- Tupee Tong (Thai)
- Thai Smile (2)
- Dumpling House (Traditional Chinese)
- Casa Del Sol
- Acapulco
- Puerta Vallarta
- Brother's (Pub)
- Mark III Tap Room (LGBTQ Bar)
- Roots (Burger/Sports Bar)
- Twin Archer Brew Pub (Pub, Craft Beer, and Arcade)
- Fuji's (Sushi and Hibachi)
- 1925 Taphouse (Pizza, Pub, and Brewery)
- The Heorot Pub
- The Caffienery (Local Coffee)
- Rosebud Coffee House
- The Cup (Coffee)
- Tonne Winery
- The Guardian Brewery
- Indy Craft Brew Taproom (Pub, food, live music)
- Muncie also hosts most popular chain restaurants

## **Entertainment**

Muncie is often called a college town, and with Ball State University hosting around 20,000 students there are many cultural, entertaining, and fun experiences that are a natural part of our social landscape. There are numerous events, performers, and shows that are hosted by Ball State, but the city itself has many outlets for entertainment outside of campus. Some of Muncie's highlights include:

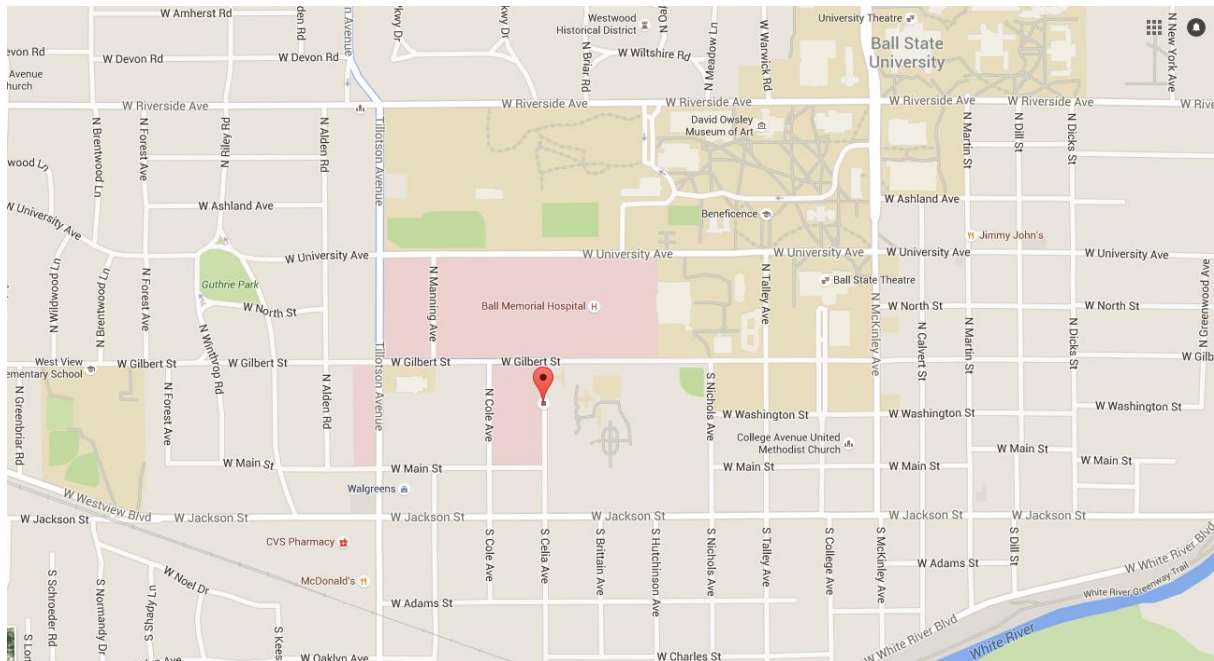
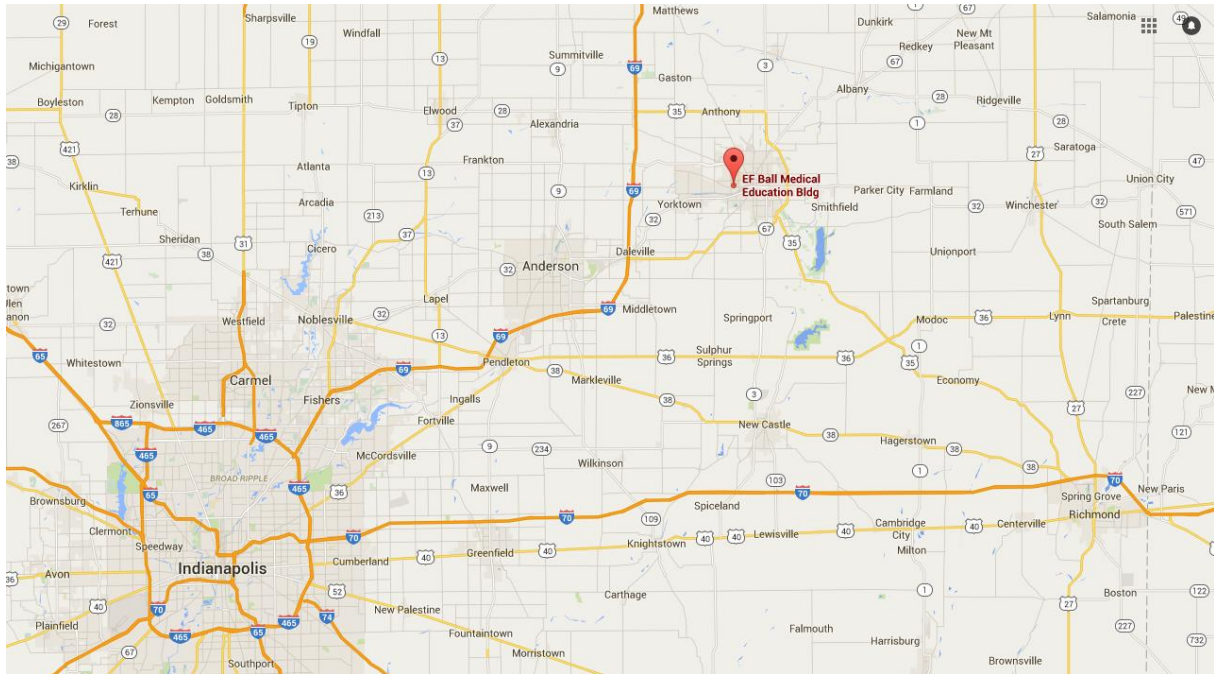
- Minnetrista Cultural Center
- Ball State Planetarium
- Ball State Art Museum
- Ball State Athletics
- Emen's Auditorium (music, comedy, theatre, etc.)
- Many beautiful park areas
- Cardinal Greenway (biking and walking)
- White River Greenway (biking and walking)
- Halteman Park (pickleball)
- McCullough Park (disc golf)
- First Thursday (gallery walk around downtown Muncie)
- Moonlight Movies (Outdoor at the Canan Commons monthly in the Summer)
- Funcie Fems (Burlesque show)
- Mad Axe Muncie (axe throwing)
- Muncie also hosts most major shopping outlets, a mall, and movie theatre

## **Housing**

It is not difficult to find residence in Muncie and it is equally easy to rent a home or an apartment. Cost of living is also very low in comparison to the high quality of life. Safe, quality, affordable housing is adjacent to the hospital and there are many other housing locations within the city and just outside of city limits.

## **Location**

Our site is located less than an hour drive to Indianapolis. It is located at a walking distance from Ball State University, campus food and drink locations, and the beautiful White River Greenway walking trail. It is also located less than 5 minutes from downtown, major food and drink locations, and major shopping locations. All work settings are within walking distance of the internship's main site. Commuting and driving is also easy, as Muncie rarely has any congestion or traffic.



Our site values professional as well as personal wellbeing over the internship year. If you have any questions about life in Muncie, please email the training director with your inquiries.

## **Evaluation Procedures**

The following procedures have been instituted to help interns make progress and assess their growth and development towards the aforementioned goals.

### **Evaluation of Interns:**

Interns meet with their supervisors at the beginning of the internship informally to set personal goals. This is a collaborative process, with each intern articulating specific training goals and hopes for supervision. Additionally, interns review systemic training goals with their individual supervisors two times a year (January and June). During these times interns review a summary of the internship goals achieved over the course of their training. Supervisors complete the intern competency evaluation form at midterm and at the end of the year in consultation with other faculty and staff members who are able to evaluate the intern's progress. Each primary supervisor then reviews the evaluation in person with the supervisee, providing both verbal and written feedback. A copy of each intern's evaluation form is placed in the intern's file and maintained indefinitely. Further detail on what is evaluated can be found on the intern competency evaluation form.

The evaluation form (contained in this training manual) is filled out at least 2 times per year or more often if remediation is necessary or a request is made by the intern or a supervisor. By the midyear evaluation, the intern should be able to meet the Intermediate rating or higher for all domains on average. By the end of the training year, it is expected that interns will be able to meet the Above Average rating and be functioning at the post-doctoral level for all evaluated domains on average. Should an intern not meet the standard set by the training goals, immediate remediation is put in place and a detailed plan for improvement is made. Any individual ratings that are in the below average or needs remediation range are required to improve before graduation. Scores in this range warrant remediation until the objective in question has improved.

Feedback is given frequently throughout the year as progress or challenges occur. This happens regularly verbally during allotted times for supervision but will also occur on an as needed basis. If major problems arise (i.e. ethics violations, professionalism issues, clinical problems, etc.) written feedback is given and signed by the intern, supervisor, and training director. This written feedback is kept in the intern's file and kept indefinitely. If the feedback of an intern is serious enough, discussions of remediation or termination may occur through an organized process that is outlined in the due process section of this manual.

All feedback and evaluation is based in part on direct observation.

### **Evaluation of Supervisors:**

At the end of the internship year, interns complete the intern evaluation of supervisor form and share this evaluation with their supervisors. Informal feedback from interns is welcomed and encouraged at any time. The data gathered will be shared with the training committee. The training committee will use the data to better develop the program. Concerns noted in

evaluation of a supervisor(s) will also be discussed with the training committee and a plan will be implemented to alleviate the concern. When appropriate, the intern may be asked to discuss the issue further with the training committee.

**Evaluation of Didactics:**

Interns have the option to complete the intern didactic evaluation form for any didactics they are present for. This feedback is considered in future program development.

**Evaluation of Program:**

At the end of the year, interns are asked to complete the internship program evaluation form to provide feedback about the training program. This feedback is considered in current or future program development. Interns also are encouraged to provide informal feedback at any time to their training director and supervisors.

**Maintenance of Records:**

All signed evaluations, signed remediation plans, and signed copies of certificates of completion for the internship are kept in a secure file electronically. Non-identifiable information, such as data used for program evaluation will be kept on IU Health's network drive in the training director's secure electronic file. All records will be kept indefinitely.



## **Due Process and Grievance Policies**

For purposes of the Due Process and Grievance Process a competence problem is defined broadly as:

1. An inability to exhibit or acquire the professional knowledge, skills, and attitudes required to reach an acceptable level of performance
2. An inability and/or unwillingness to acquire and integrate professional standards (e.g., ethical, legal, diversity) in one's professional functioning
3. An inability to effectively control personal stress, psychological dysfunction, excessive emotional reactions, and/or interpersonal difficulties that interfere with professional functioning.

### **Characteristics of Competence Problems**

Competence problems may arise because of educational or academic deficiencies, psychological adjustment problems and/or inappropriate emotional responses, inappropriate management of personal stress, inadequate level of self-directed professional development, inappropriate use of and/or response to supervision, etc. Behaviors typically become identified as competence problems when they include one or more of the following characteristics:

- The behavior is not merely a reflection of a knowledge or skill deficit that can be rectified by academic or didactic training or supervision.
- The quality of services delivered by the intern is sufficiently negatively affected.
- The behavior has potential for ethical or legal ramifications if not addressed.
- The behavior shows a persistent insensitivity to diversity considerations related to race, ethnicity, gender, sexual orientation, age, disability, veteran's status, etc.
- The intern's emotional difficulties interfere with his or her capacity to perform competently.
- The intern's interpersonal style interferes with his or her intra-professional and interdisciplinary relationships with peers, coworkers, supervisors, and/or subordinates.
- The intern does not acknowledge, understand, or address the concern when it is identified.
- The trainee's behavior does not change as a function of feedback, remediation efforts, and/or time.
- A disproportionate amount of attention by training personnel is required.
- The intern's behavior negatively impacts the public view of the training program or institution.
- The behavior negatively impacts the internship class.

### **Guiding Principles to Ensure Due Process**

The following principles serve to ensure that decisions made by the internship about interns are not arbitrary or personally based. These principles ensure that the intern is provided ongoing and meaningful feedback, opportunities for remediation, and information about appeals procedures. Guiding principles include:

1. Presenting interns with written documentation of the program's expectations related to professional and personal functioning; this training manual serves that purpose.
2. Stipulating the procedures for evaluation, including when and how evaluations will be conducted; this training manual's evaluation procedure policy serves that purpose.
3. Articulating the various procedures and actions involved in making decisions regarding problem behaviors.
4. When a problem arises supervisors will communicate with interns early and often about how to address problem behaviors.
5. Instituting a remediation plan for identified inadequacies, including the competency domain(s) in which performance is not adequate, target behaviors, expectations for acceptable performance, steps for remediation, supervisors' responsibilities, time frame for expected remediation, and consequences of not rectifying the inadequacies.
6. Providing a written procedure to the intern that describes how the intern may appeal the program's action; this is enclosed within this document.
7. Ensuring that interns have sufficient time to respond to any action taken by the internship.
8. Documenting, in writing and to all relevant parties, the action taken by the program and its rationale.

### **Due Process**

The internship has developed a set of procedures to be implemented in the event that an intern demonstrates performance or conduct problems. If an intern has performed below expectations, a formal letter is sent from the supervisor to the intern and the training director within two business days of the supervisor's determination of the problem. An evaluation in the "below average" or "needs remediation" range deemed by a supervisor is used to determine if an intern is performing below expectations. This policy can also be enacted if performance or conduct problems are observed outside of their evaluations at any time. If desired, the intern is allowed to respond in writing to the training director regarding problems identified in the letter within two business days. The training director may choose to consult with the site supervisor, the intern's supervisor, and other faculty and administration at IU Health Ball Memorial Hospital serving as individual supervisors for the internship. The intern has the right to ask the training director to consult with a specific individual and that consultation will be taken into consideration for future actions. Following this process, the training director has five business days to choose one of the following:

1. Take no further action in regard to identified problematic behaviors.
2. Issue a probation notice. This notice includes a clear and well-defined description of the performance or conduct problems. The training director provides specific recommendations and guidelines for the intern to follow in order to rectify the problems. This notice includes target behaviors, expectations for acceptable performance, recommendations and steps for intern remediation, supervisor's responsibilities, assessment techniques, expected outcomes, specified timelines to assess for successful intern remediation, and consequences for unsuccessful intern remediation. Remediation may include:

- a. Additional reading, literature review or didactic experiences with specified topics.
  - b. Increased supervision that may be offered by the intern's supervisor or another qualified individual. Supervision may involve changes in the approach, focus or orientation.
  - c. Suspension of clinical duties while maintaining non-clinical duties. During which time the intern will participate in additional supervision and role play.
    - i. The training director may immediately use this parameter in the case of gross ethical/professional violations or the potential for patient/public harm.
  - d. Recommended counseling/psychotherapy with specific guidelines regarding confidentiality as to how information from such counseling will be shared with the training director and site supervisor.
3. A leave of absence or termination from the internship.
- a. This decision will be discussed and decided on by the training committee members as well as the Family Medicine Residency's administrative faculty.
  - b. APPIC, IU Health Ball Memorial's HR department, and the intern's doctoral program will be notified.
  - c. The training committee may immediately use this parameter in the case of gross ethical/professional violations or the potential for patient/public harm.

If any action is taken, within two business days the intern is notified in a meeting with the training director and other parties that were involved in the decision. The intern is provided with a written record of the action taken. If any action is taken, within two business days after a decision has been made, the training director contacts the intern's doctoral program. The intern will receive copies of formal correspondence between the two programs. If an intern does not accept the decision of the training director, then a challenge can be initiated. The guidelines for challenges are outlined in a following section.

### **Procedures for Responding to Continued Problems**

Additional action may need to be implemented if an intern fails to meet expected outcomes in the probation notice. The response to continued problems is determined by the training committee who will meet to review the outlined probation notice. The training committee meets to discuss intern progress at a time outlined in the probation notice. However, any member of the training committee can call for an immediate review if intern problems continue or worsen. If an intern on a probation notice has not improved sufficiently to rectify the problems stipulated in their remediation plan, the training committee may utilize one of the following approaches or other actions deemed appropriate:

1. The training committee will continue the probation period for the intern for a specified period of time.
2. The training committee suspends the intern. Under this suspension, the intern is not allowed to engage in clinical activities or perform professional services until there is documented evidence that the performance or conduct problems have improved to the extent that these concerns are no longer considered problematic.

3. The intern is terminated.
  - a. This decision will be discussed and decided on by the training committee members as well as the Family Medicine Residency's administrative faculty.
  - b. APPIC, IU Health Ball Memorial's HR department, and the intern's doctoral program will be notified.
  - c. The training committee may immediately use this parameter in the case of gross ethical/professional violations or the potential for patient/public harm.

If any additional action is taken, within two business days the intern is notified in a meeting with the training director and other parties that were involved in the decision. The intern is provided with a written record of the action taken. If any action is taken, within two business days after a decision has been made, the training director contacts the intern's doctoral program. The intern will receive copies of formal correspondence between the two programs. If an intern does not accept the decision of the training director, then a challenge can be initiated. The guidelines for challenges are outlined in the following section.

### **Procedures for Appeal by an Intern**

Interns who wish to contest actions and decisions by the internship must submit a signed written or emailed challenge to the training director within 10 calendar days of receipt of the decision. Failure to submit a written challenge within 10 calendar days is taken as assent to the internship's actions and decisions. Once a written challenge is received, the following steps will occur:

1. The training director convenes a review panel consisting of the IU Health Ball Memorial Medical Associates Committee – Clinical Psychologists Subsection, and the intern's primary site supervisor.
2. A review hearing is conducted by the chair of the Medical Associates Committee. In the event the training director is the chair of the Medical Associates Committee, a new chair will be selected. The training committee, intern's supervisors, and the intern have the right to be present at the hearing. The training director attends this meeting but will be a non-voting member.
3. During the hearing the intern has the right to submit additional information, support their case with testimony, or support their case through the testimony of another supervisor.
4. Within 15 calendar days of the completion of the review hearing, the Medical Associates Committee files a written report, including any recommendations for further action. The intern is informed of the recommendations by the Medical Associates Committee through receipt of a copy of the Medical Associates Committee's report.
5. If the Medical Associates Committee finds in favor of the intern, no further action against the intern is taken. This decision is final.
6. If the Medical Associates Committee finds in favor of the training director, the original supervisory action is implemented. This decision is final.
7. The Medical Associates Committee may, at its discretion, find neither in favor of the training director nor the intern. It may instead modify the original supervisory action or issue and implement its own action. This decision is final.

## **Formal Grievance Procedures**

A grievance is a process that is invoked when an intern has a complaint against the training program. For purposes of the grievance procedure a grievance is defined broadly as:

1. A complaint against a perceived unfair act that has caused distress
2. The perception that another party is at fault
3. A grievance may be processed for any person, group, or policy within the internship

The following steps can be used when an intern wishes to file a grievance:

1. The intern will first try to solve the grievance with the other party by communicating professionally and directly with them within ten business days of the complaint in question.
2. If direct communication cannot solve the grievance, the intern may state a formal grievance with the intern's supervisor within two business days after an attempt to resolve the complaint themselves. In this instance, an intern's supervisor works with the intern to resolve the grievance. If the supervisor cannot resolve the grievance, or in the instance where the grievance is between the intern and the supervisor, the intern has the option of bringing the problem to the attention of the training director within two business days.
3. The training director works with the intern to resolve the grievance. If the training director cannot solve the grievance, or in the instance where the grievance is between the intern and the training director, the intern has the option of bringing the problem to the attention of the IU Health Ball Memorial Medical Associates Committee – Clinical Psychologists Subsection within two business days. If the training director is part of this committee, he or she shall temporarily recuse themselves from the committee and not participate in any vote.
4. The Medical Associates Committee will meet with the intern regarding their grievance within ten business days; the training director will not attend this meeting. The Medical Associates Committee works with the intern to resolve the grievance. This is the final step of the appeal process. Any decision or plan created by the Medical Associates Committee will be final. They may determine:
  - a. No further action is needed.
  - b. The need for the training program or intern to make changes to alleviate the current concern and prevent the problem from occurring in the future.

The Medical Associates Committee's plan will be communicated verbally and in writing to all parties involved in the grievance as well as the training committee within two business days of the decision.

# **Appendix A**

## **Internship Training Committee and Didactic Topics**

**Faculty Biographies**

**Responsibilities of the Training Director**

**Responsibilities of Supervisors**

**Didactic Topic List**

## **Current Faculty Members**

### **Lauryn M. Toby, PhD, BCBA, HSPP**

Behavioral Health Internship Training Director

Director of Behavioral Health

Family Medicine Residency Center

Dr. Toby serves as the Training Director for the behavioral health doctoral internship and all practicum training. She also serves as the Director of Behavioral Health at the Family Medicine Residency Center. She is the primary internship supervisor.

Dr. Toby completed her graduate training at Illinois State University, where she focused on both Clinical and School Psychology. Her doctoral internship and fellowship were through Johns Hopkins School of Medicine at the Kennedy Krieger Institute Neurobehavioral Unit - outpatient clinic where she specialized in the assessment and treatment of severe behavior disorders and obtained certification as a behavior analyst. She later spent time living in northern Iowa helping develop a pediatric autism clinic in a rural area before moving to Indiana in 2018. She most recently worked as the Vice President of Psychological Services at an outpatient nonprofit center for individuals with neurodevelopmental and related disorders.

Professionally, her interests include the assessment and treatment of anxiety, depression, and neurodevelopmental disorders such as autism, intellectual disability, and ADHD. She has a particular interest in females with autism, and the development of more efficient psychological assessment tools. She is passionate about improving the training of young practitioners in the field of behavioral health, and recently published her first book on interdisciplinary training for novice behavior analysts.

Personally, she enjoys spending time with her husband and two children, attending live sports events (Go Pacers!), being a dance mom, and watching horror movies. She also recently picked up several new hobbies including reading, gardening, and crocheting.

### **Eric Lester, PhD, HSPP**

Psychologist

Behavioral Health Outpatient

Ball Memorial Hospital

Dr. Lester serves as a supervisor during intern rotation at the Outpatient Behavioral Health Clinic on campus at Ball Memorial Hospital. Dr. Eric Lester is a licensed psychologist with a Ph.D. in Counseling Psychology with a cognate in Health Psychology from Ball State University, earned in 2012. His primary role is as the Team Lead Psychologist at the Outpatient Behavioral Health Clinic.

Dr. Lester has extensive experience in a range of clinical settings prior to his current place of practice. Those past settings include serving on the faculty at the IU Health Ball Memorial

Family Medicine Residency Clinic and working as a practicing psychologist in a federally qualified health center, where he provided integrated primary care services. His clinical expertise includes bariatric psychology, conducting pre-surgical evaluations for bariatric patients, ADHD, general psychological assessment, Binge Eating Disorder, individual psychotherapy, and behavior change.

In addition to his clinical responsibilities, Dr. Lester is passionate about education and mentorship. He regularly teaches in the Counseling Psychology graduate program at Ball State University and has supervised several postdoctoral fellows in health psychology. He has hosted doctoral external practicum students at the IU Health Outpatient Behavioral Health Clinic since it opened in 2021. His dedication to training and supervision is reflected in his leadership roles, including serving as Vice President of the Area Health Education Center and Chair of Medical Associates, the psychology credentialing body within the Department of Psychiatry at Ball Memorial Hospital.



## **Responsibilities of the Training Director**

### **Administration:**

The training director will serve as the leader of the internship. The training director serves as the primary source of guidance for behavioral health training program and will serve as an advocate for the needs of the interns to the program director and IU Health system. The budget is ultimately be determined by the FMRC's program director; however, the training director will be responsible for familiarity with how resources are being allocated and advocating for the needs of the interns. The training director is in charge of maintaining the selection procedures, interviews, hiring, onboarding, and maintaining accurate files for all new interns. Within the clinic the training director is responsible for but not limited to maintaining an evenly distributed case load, pairing supervisees and supervisors, obtaining space for the interns to work, reviewing intern and site evaluations, and coordinating with clinic staff.

### **Training:**

The training director makes decisions about the direction of the clinical and curricular training of the internship. They will also uphold the mission, site, and training goals of the program by guiding other psychologists and interns within the system. The training director finds appropriate speakers for the didactic curriculum or creates their own presentations when appropriate. The training director monitors clinical skills of each intern and help the intern seek out appropriate clinical training through evidence-based literature, training seminars, referral to an expert, consultation, or supervision. The training director maintains their own up to date academic and clinical knowledge by reviewing evidence-based literature, attending training seminars, consulting with experts, maintaining their licensure status, and having their own clinical load.

### **Liaison:**

The training director serves as the primary liaison between the internship and several other professional agencies related to the internship. This includes relationships within the IU Health system, including the program director and hospital administration. The training director hosts a formal meeting of site supervisors and administration quarterly to discuss the mission and direction of the internship. The liaison duties also include relationships outside of the IU Health system including but not limited to the American Psychological Association/Commission on Accreditation (APA/CoA), Association of Psychology Post-doctoral and Internship Centers (APPIC), local referral sources, local training resources, local community outreach opportunities, Indiana Psychological Association, Division 38 of the American Psychological Association, and University leadership associated with our interns. The training director serves as the leader and representative for meetings and discussions within these relationships.

### **Supervision and Consultation:**

The training director has a formal supervisory role with the interns. This includes both weekly supervision and note review. They also have open office hours both through an open-door policy as well as during scheduled office hours on a weekly basis. This is to help facilitate consultation and dialogue about clinical and professional training with the interns.

**Work Environment:**

The training director is responsible for an equal opportunity work environment. This includes advocating for diversity in hiring practices as well as accounting for culturally sensitive and appropriate work conditions. The training director is responsible for providing, reasonable, safe, and non-hostile working conditions for the interns at all possible times.

## **Supervisor's Clinical Responsibility**

The program covers supervisory expectations and responsibilities during the orientation period when interns first arrive on site. Some of the various responsibilities and rights include:

### **Legally:**

The license holder is legally responsible for all patients they are supervising. The license holder has the responsibility to monitor, guide, and provide appropriate patient care for all patients they are supervising for. The license holder is a representative of the patient care for any legal matters that arise during the internship. The license holder must sign all notes that the interns complete. It is the responsibility of the license holder to edit and sign them in a timely manner. Didactic training on the Indiana state legislature, Indiana state licensure, and the Indiana State Psychology Board is provided as part of the internship curriculum. Likewise, time for study of the Jurisprudence Exam is given to interns throughout the internship.

### **Ethically:**

The supervisor has the responsibility to monitor the intern's safety during patient encounters and has the right to transfer care or terminate sessions if the situation warrants it. Likewise, the supervisor has the responsibility to monitor sessions to protect the patient against any negligent actions taken by an intern and has the right to transfer care if the situation warrants it. If the intern's treatment skills are not adequate or are harmful, it is the supervisor's responsibility to remediate, train, and enhance that treatment ability. The supervisor keeps an appropriate list of resources for legal and ethical dilemmas to be provided to the intern at the beginning of the internship.

### **Supervisory:**

All patients entering our clinic receive a notification of supervision form. This form explains that our interns are currently in training and will have the opportunity to have supervision from a licensed psychologist. The patient has the right to meet the supervising psychologist at any time during treatment. The intern has the right to present patient information for any patient to the supervising psychologist. Likewise, the supervising psychologist has the right to request patient information from the supervisee for any patient previously or actively being treated by the intern. The intern must submit all notes to the supervisor, and it is the supervisor's responsibility to provide feedback on creating appropriate notes. The supervisor has the right to return a note for timely editing when appropriate.

## Internship Didactic Topics

The behavioral health didactic training occurs weekly and is designed to provide the interns with advanced clinical training in treatment, assessment, diagnosis of psychological disorders and behavioral health issues. Presentations are primarily given by the site supervisors but are also given by lecturers and psychologists with expertise in the particular area. Didactics are occasionally held off site, when local or regional training seminars of interest can be found. The following is a list of general topics that have been used in the past. It should be noted that the didactic list could change based on the lecturer's availability and interest of the interns.

Bariatric Psychology	Professional Development
Suicide Assessment	Behavioral Medicine
Supervision Skills Training	Parent Education
Consultation Skills Training	Eating Disorders
Interdisciplinary Training	Behavioral Management of Diabetes
Ethical Principles for Psychologists	Positive Psychology
Primary Care Psychology	Career Values
Motivational Interviewing	Professional Practice and Licensure
Neurodevelopmental Disorders	Biofeedback
Pain Management	Cultural Sensitivity in Clinical Practice
Sexual Health	Exercise as Behavioral Health Intervention
Termination in Behavioral Health	Child and Adolescent Behavioral
Depressive Disorders	Interventions
Anxiety Disorders	OB Psychology
Psychopharmacology	Cultural Awareness of SES
Childhood Sexual Abuse	Developmental Disorders
Substance Use	Posttraumatic Stress Disorder
Intimate Partner Violence	Somatization Disorder
Assessment and Diagnosis of ADHD	Bipolar Diagnosis and Treatment
Multicultural Counseling	EPPP Preparedness

Interns will also attend daily didactics alongside the resident physicians of the clinic. These topics will be of wide diversity, but often contain a behavioral health component as well as a medical component.

## **Appendix B**

### **Intern Orientation**

## **Intern Orientation Checklist**

A critical issue in the success of each new Intern's performance is the orientation session. The orientation process begins the first day of the internship and continues through the first two weeks of the internship. Interns will be trained in many other areas, but may not be able to begin their internship without the successful completion of these orientation items.

- \_\_\_\_\_ Internship training manual
- \_\_\_\_\_ Ball Memorial Hospital employee handbook
- \_\_\_\_\_ Health Insurance Portability and Accountability Act (HIPAA)
- \_\_\_\_\_ Ball Memorial Hospital policies and procedures
- \_\_\_\_\_ Confidentiality statement
- \_\_\_\_\_ Doctoral intern job description
- \_\_\_\_\_ Criminal background check
- \_\_\_\_\_ Drug screen
- \_\_\_\_\_ Tax withholding and insurance benefits forms
- \_\_\_\_\_ Copy of Social Security Card
- \_\_\_\_\_ Copy of valid driver's license or passport
- \_\_\_\_\_ Copy of curriculum vitae
- \_\_\_\_\_ Copy of previous immunization records (suggested to obtain this before orientation)
- \_\_\_\_\_ TB test
- \_\_\_\_\_ Hepatitis B vaccination
- \_\_\_\_\_ CPR training
- \_\_\_\_\_ OSHA compliance policy
- \_\_\_\_\_ Emergency procedures policy

# **Appendix C**

## **Internship Evaluation Forms**

**Intern Evaluation Form**

**Intern Evaluation of Supervisor Form**

**Intern Didactic Evaluation Form**

**Program Evaluation Form**

**Case Presentation Evaluation Checklist**

## Intern Competency Evaluation

Intern: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Date: \_\_\_\_\_

Period of Evaluation: \_\_\_\_\_

Total Hours: \_\_\_\_\_

Total Supervision Hours: \_\_\_\_\_

Total Face to Face Hours: \_\_\_\_\_

Methods of Observation (check all that apply):

☐ Direct Observation

☐ Paper Review

☐ Live Recording

☐ Verbal Report

☐ Audio Recording

☐ Comments from Staff

☐ Video Tape

### Competency Rating Definitions

**N/A:** Indicates that the intern did not perform this duty, or was not evaluated by the supervisor.

**5 - Advanced:** Indicates skills necessary for autonomous practice. This is typical of someone finishing their post-doctoral training or having experience in practice.

**4 - Above Average:** Requires minimal supervision but displays highly professional skills and judgement. This is typical of someone finishing their internship, entering a post-doctoral fellowship, or beginning entry level practice. This is expected of graduating interns.

**3 - Intermediate:** Displays significant knowledge of role and skill set and can function effectively with regular supervision. Intermediate skill is expected of interns at midyear. This is typical of incoming interns.

**2 - Below Average:** Requires continuous supervision, but accepts it. This is typical of a doctoral practicum student. This should last no longer than 3 months, or remediation may be necessary.

**1 - Needs Remediation:** Displays significant problems beyond the lack of opportunity to learn the skills. The problem may be due to lack of aptitude for the task, or may be due to avoidance or resistance to changing clinical behavior. This includes unethical practice or repeated policy violations.

**Minimal Level of Achievement:** This form will be completed at least 2 times per year, at midyear and at end of year, or more often if remediation is necessary or a request is made by an intern or a supervisor. By the midyear evaluation, interns should meet the Intermediate rating ('3') or higher for all individual elements of each competency area. By the end of the training year, it is expected that interns will be able to meet the Above Average rating ('4') and be functioning with minimal supervision for all individual elements of each competency area. Should an intern not meet the minimal level of achievement for the midyear or end of year evaluations, immediate remediation will be put in place and a detailed plan for improvement will be made. Any individual ratings that are in the below average or needs remediation range will be required to improve to complete internship successfully. Scores below the minimal level set for each time point will warrant remediation until the objective in question has improved.



Intervention	
Establish and maintain effective relationships with the recipients of psychological services.	
Develop evidence-based intervention plans specific to the service delivery goals.	
Implement interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.	
Demonstrate the ability to apply the relevant research literature to clinical decision making.	
Modify and adapt evidence-based approaches effectively when a clear evidence-base is lacking.	
Evaluate intervention effectiveness and adapt intervention goals and methods consistent with ongoing evaluation.	
Average Intervention Score	

Comments on strengths and areas for growth:

Consultation and Inter-professional/Interdisciplinary Skills	
Demonstrate knowledge and respect for the roles and perspectives of other professions including the dynamics of an interdisciplinary team.	
Demonstrate knowledge of consultation models and practice.	
Apply this knowledge in direct or simulated consultation with individuals and their families, other health care professionals, interdisciplinary teams, or systems related to health and behavior.	
Average Consultation Score	

Comments on strengths and areas for growth:

Assessment	
Demonstrate current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology.	
Demonstrate understanding of human behavior within its context.	
Demonstrate the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process.	
Select and apply assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics.	
Interpret assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases and distinguishing the aspect of assessment that are subjective from those that are objective.	
Communicate orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.	
Average Assessment Score	

Comments on strengths and areas for growth:

**Supervision**

Demonstrate knowledge of supervision models and practices.

Apply knowledge in direct or simulated practice with psychology trainees or other health professionals.

Average Supervision Score

Comments on strengths and areas for growth:

**Communication and Interpersonal Skills**

Develop and maintain effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services.

Produce and comprehend oral, nonverbal, and written communications that are informative and well-integrated. This will be demonstrated through a grasp of professional language and concepts.

Demonstrate effective interpersonal skills and the ability to manage difficult communication well.

Average Communication Score

Comments on strengths and areas for growth:

**Professional Values and Attitudes**

Behave in ways that reflect the values and attitudes of psychology, including integrity, demeanor, professional identity, accountability, lifelong learning, and concern for the welfare of others.

Engage in self-reflection regarding one's personal and professional functioning; engage in activities to maintain and improve performance, well-being, and professional effectiveness.

Actively seek and demonstrate openness and responsiveness to feedback and supervision.

Respond professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.

Average Professional Score

Comments on strengths and areas for growth:

**Individual and Cultural Diversity**

Demonstrate an understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves.

Demonstrate knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision, consultation, and service.

Demonstrate the ability to integrate awareness and knowledge of the individual and cultural differences in the conduct of professional roles. This includes the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered as well as those that create conflict with their own.

Demonstrate the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during the internship.

Average Diversity Score

Comments on strengths and areas for growth:

Ethical and Legal Standards	
Be knowledgeable and act in accordance with each of the following: The current version of the APA Ethical Principles of Psychologists and Code of Conduct, relevant laws, regulations, rules, and policies governing health service psychology within the organizational, local, state, regional, and federal levels, as well as relevant professional standards and guidelines.	
Recognize ethical dilemmas as they arise, and apply ethical decision-making processes in order to resolve the dilemmas.	
Conduct self in an ethical manner in all professional activities.	
Average Ethical Score	
Comments on strengths and areas for growth:	

Research	
Demonstrate the independent ability to critically evaluate and disseminate research or other scholarly activities.	
Demonstrate the independent ability to find, analyze, and incorporate evidence based research into clinical practice.	
Average Research Score	
Comments on strengths and areas for growth:	

Overall	
Average Overall Score	
Comments on strengths and areas for growth:	

This competency evaluation has been explained and discussed with the evaluated intern.

Supervisor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Intern Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Intern Evaluation of Supervisor Form

Intern: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Date: \_\_\_\_\_

Please provide written feedback for your supervisor in the space below. This is an opportunity for you to request additional support in one of the identified domains. Space is provided for additional comments at the end of each large section. Please note that you are also welcomed to add comments about individual items if you wish to do so.

Use the following guidelines for your ratings and place a checkmark in the appropriate box:

- 1: Strongly Disagree
- 2: Disagree
- 3: Neutral
- 4: Agree
- 5: Strongly Agree

I. Supervisory environment:	1 SD	2 D	3 N	4 A	5 SA
A. Aids in establishing and maintaining the focus of supervision					
B. Supervisor is accessible					
C. Notifies Intern in advance when unable to keep scheduled supervisory sessions					
D. Avoids interruptions during supervision					
E. Shows interest in intern concerns					
F. Respects personal differences between supervisor and intern					
G. Serves as an advocate or support person for intern					
H. Uses appropriate self-disclosure					
I. Works to establish a "climate of trust" to maximize an honest and candid exchange of feelings and ideas					
J. Works constructively to resolve conflict in supervisory relationship					
K. Actively encourages a timely and successful completion of internship					
L. Supervisor acts as a role model					
Additional comments:					

<b>II. Supervision</b>	<b>1 SD</b>	<b>2 D</b>	<b>3 N</b>	<b>4 A</b>	<b>5 SA</b>
A. Assists with case conceptualization					
B. Clearly conveys feedback about cases or theory					
C. Conveys a sound conceptual grasp of patients and their problems					
D. Offers constructive treatment suggestions					
E. Discusses the application of ethical principles					
F. Uses appropriate didactic material when needed					
G. Explores the appropriate use of various counseling processes					
H. Is knowledgeable about community resources and helps interns make appropriate referrals					
I. Recognizes own therapeutic limitations and makes appropriate referrals					
J. Explores and navigates individual and cultural diversity					
Additional comments:					

III. Communication:	1 SD	2 D	3 N	4 A	5 SA
A. Regularly provides constructive feedback and support					
B. Encourages Intern to share professional/personal concerns and responds constructively					
C. Use video and/or audio recordings to enhance skill development and professional understanding					
D. Willingly examines the supervisor/intern relationship when needed					
E. Acknowledges intern's competencies and provides positive reinforcement					
F. Encourages independent thinking and action					
G. Frankly discusses intern limitations and growth areas					
H. Allows the use of the intern's own theoretical orientation without imposing his/her own theoretical orientation on the intern					
I. Provides supervision appropriate to supervisee's developmental level					
J. Helps Intern select appropriate professional and training goals, tasks, and experiences					
K. Aids in setting goals for supervision					
Additional comments:					

\_\_\_\_\_  
Supervisee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor

\_\_\_\_\_  
Date

## Intern Didactic Evaluation Form

Didactic Topic: \_\_\_\_\_

Date: \_\_\_\_\_

Presenter(s): \_\_\_\_\_

Please rate each item below using the following scale:

1: Strongly Disagree

2: Disagree

3: Neutral

4: Agree

5: Strongly Agree

The topic was relevant to my training. \_\_\_\_\_

The topic was interesting to me. \_\_\_\_\_

I have a better understanding of this topic. \_\_\_\_\_

I can use what I learned in my clinical work. \_\_\_\_\_

I would recommend this didactic. \_\_\_\_\_

Comments:



## Program Evaluation Form

This evaluation is intended to provide an opportunity for you to give anonymous feedback regarding your internship training experiences. Your feedback will assist us in making improvements in the training program. Feedback from this evaluation will be provided to the training director, individual supervisors, and the training committee.

Instructions: Respond to the following items digitally or on an attached page. Please give your impression of the internship training program as fully and honestly as possible.

The program adequately emphasized, utilized, and oriented interns to the following:					
<b>1. Internship recruitment materials and procedures</b>					
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	
Comments:					
<b>2. Intern orientation</b>					
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	
Comments:					
<b>3. Clinical experience</b>					
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	
Comments:					
<b>4. Supervision</b>					
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	
Comments:					
<b>5. Evaluation process</b>					
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	
Comments:					
<b>6. Major Tracks</b>					
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	
Comments:					
<b>7. Didactics</b>					
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	
Comments:					

<b>8. Integration of science and practice</b>					
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Comments:					
<b>9. Cultural and individual differences and diversity</b>					
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Comments:					
<b>10. Professional ethics</b>					
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Comments:					
<b>11. Personal growth</b>					
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Comments:					
<b>12. Professional development</b>					
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Comments:					
<b>13. Resources</b>					
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Comments:					
<b>14. Overall strengths and/or weaknesses of internship experience</b>					
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Comments:					
<b>15. Additional comments, suggestions, or concerns.</b>					
Comments:					
Comments:					
Comments:					
Comments:					

# **Appendix D**

## **Other Forms**

**Permission to Record**

**Notification of Supervision**

**Supervision Journal**

**Case Presentation Guide**

**Certificate of Completion**

## Permission to Record

Patient Name: \_\_\_\_\_

Therapist Name: \_\_\_\_\_

I grant permission to my therapist to have our sessions recorded or observed. I understand that I will not be recorded without my permission or knowledge. All recordings will be treated confidentially and will be used only for therapist training. The recordings may be reviewed by the therapist, clinical supervisor, or advanced doctoral trainees. Recordings will be deleted, erased or destroyed immediately following use for training.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Notification of Supervision

Your therapist is currently under the supervision of a licensed psychologist as part of a training program. The name of your therapist's supervisor is listed below. You have the right to meet your therapist's supervisor, if you wish.

Therapist: \_\_\_\_\_

Title: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Title: \_\_\_\_\_

Client/Patient: \_\_\_\_\_

Date: \_\_\_\_\_

## Certificate of Completion Example

### Certificate of Completion

NAME

has successfully completed a 2000 hour

**Doctoral Internship in Health Service Psychology**

through the

**IU Health Ball Memorial Hospital Health Service**

**Psychology Doctoral Internship**

START AND END DATE

---

Lauryn M. Toby, Ph.D., BCBA, HSPP  
Training Director



## Training Acknowledgement Form

Please sign this acknowledgement page and return to the Training Director.

### Acknowledgement:

I acknowledge that I have received and reviewed The Psychology Internship Training Manual, including all of the policies within it. I agree to abide by all the policies and procedures outlined in this document.

I have read and understand the following:

_____	The Training Manual
_____	The Internship Mission, Aim, and Competencies
_____	The Intern Activities and Responsibilities
_____	APA Ethics Code
_____	Diversity and Non-Discrimination Policy
_____	Due Process and Grievance Procedures
_____	Stipend, Benefits, and Resources Policy
_____	Supervision Policy
_____	Intern Evaluation, Retention, and Termination Policy
_____	Supervisor Evaluation Form
_____	Program Evaluation Form
_____	Intern Competency Evaluation

I have been provided with a copy of these documents to keep in my files.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date