



# **CLEVELAND STATE UNIVERSITY**

## **COUNSELING CENTER**

### **DOCTORAL INTERNSHIP IN HEALTH SERVICE PSYCHOLOGY**

#### **SETTING & MISSION**

CLEVELAND STATE UNIVERSITY (CSU) is an urban, commuter university established in 1964. There are seven colleges within the university as well as the Cleveland-Marshall College of Law. Recent statistics show enrollment of approximately 11,000 undergraduate students and 6,000 graduate and law students. Twenty-three percent of these students belong to ethnic minorities and fifty-five percent are women. The University has over 800 international students representing 75 countries, with significant numbers from Saudi Arabia and India. The CSU campus is just east of downtown and includes 41 buildings ranging from the historical Mather Mansion to the 2015 Center for Innovations in Health Professions. The Cleveland/Akron Metropolitan area is the 15th largest in the United States with a population approaching 3 million.

CSU MISSION: Our mission is to encourage excellence, diversity, and engaged learning by providing a contemporary and accessible education in the arts, sciences, humanities and professions, and by conducting research, scholarship, and creative activity across these branches of knowledge. We endeavor to serve and engage the public and prepare our students to lead productive, responsible and satisfying lives in the region and global society.

THE COUNSELING CENTER provides counseling and psychological services designed to promote the academic success and personal well-being of CSU students. Services include short-term individual, couple, and group counseling; crisis counseling; assessment; psychiatric services; workshops; and consultation. Some recent group offerings include: Wise Minds: Building Skills for Acceptance and Change (a DBT-based group), the LGBTQIA Student Support Hour, Trans Student Support, Connections (an interpersonal process group), and Sista to Sista (psycho-educational topics and support for black women). We provide training for Residence Life staff and conduct about 100 outreach presentations each year. Once a year, the Center provides campus-wide screenings for depression and anxiety.

The Counseling Center is located in the Union Building at 1836 Euclid Avenue. The space was renovated to our specifications and includes twelve offices, a group room, reception area, waiting room, file room and kitchen area.

The Counseling Center Staff reflect diversity in terms of identity, background, clinical approach, and training. The Counseling Center senior staff includes four licensed psychologists with some having clinical and some having counseling psychology training, and we are currently conducting a search for two more psychologists. Our current senior staff includes three women and two men, all cisgendered, one African-American, one bisexual woman and one gay man from varying social class backgrounds. One psychologist is also a Licensed Independent Social Worker. Staff incorporate relational, psychodynamic, cultural, Afrocentric, feminist, dialectical-behavioral, and cognitive-behavioral approaches to therapy. In addition, a psychiatrist is on-site for 1.5 days each week, and she provides some training and consultation.

The Counseling Center clients are primarily CSU students. They range in age from 16 to 61 with a modal age of 21. They come to the Counseling Center with a wide range of concerns, but the majority of clients present with anxiety and/or depression; relationship and family concerns; academic stress and identity concerns. Many clients also have a history of sexual or emotional abuse and many present with some suicidal ideation or crisis and some eating or substance abuse concerns. A number of clients struggle with financial hardship, and we work with clients experiencing their first manic episode and first psychotic symptoms. About half of clients have not received counseling before, and many are first generation college students. More than 25% of clients seen are African American, and we see significant numbers of international students and LGBTQ+ students.

COUNSELING CENTER MISSION: Our mission is to support and empower our diverse student community through the provision of psychological services. Our services are confidential and include individual, couples and group counseling, crisis intervention, consultation, psycho-

education, and referrals. These services are designed to help students cultivate their strengths and overcome obstacles to obtain their personal, academic, and career goals. Likewise, we collaborate closely with our university and community partners to foster the personal, social, and academic well-being of our students and the university community. We are also committed to providing high quality experiential training to graduate students to support their development as aspiring mental health professionals.

### **Cleveland State University Counseling Center Core Values Are:**

1. **Caring** and easily **accessible** services and training.
2. **Respect** for our clients and partners as demonstrated by service delivery that is ethical, confidential, and individually tailored.
3. Promotion of **diversity, multiculturalism, and social justice.**
4. **Mutual collaboration** within the department and with our university and community partners.
5. Provision of **high quality** psychological services and training that meet or exceed professional standards.

## **STATEMENT OF TRAINING AIM/PHILOSOPHY/EDUCATIONAL MODEL**

At the CSU Counseling Center, the aim of our training program is: “to prepare interns to function competently and independently as health service psychologists.” Our mission statement explicitly states that we are “committed to providing high quality experiential training to graduate students to support their development as aspiring mental health professionals.” It is well recognized that experiential training is necessary for interns to become more fully competent. Our core values which are part of our mission statement further articulate that training is done in a “caring and easily accessible” manner in environment which supports “mutual collaboration” and growing independence. Finally, we state that we value provision of **high quality** psychological training that meets or exceed professional standards.

Our training is based on the premise that we have a serious responsibility in preparing the next generation of practitioners in the field of health service psychology. Our training plan incorporates the training criteria of the Association of Psychology Post-Doctoral and Internship Centers (APPIC) for doctoral level trainees and the Standards of Accreditation (SOA) of the American Psychological Association. Our program design draws from the practitioner-scholar model of psychological practice, awareness of the mind-body-spirit connection, and respect for human differences.

We regard the practitioner-scholar model of practice as the most appropriate paradigm for clinicians in the field of psychology. While our primary emphasis is on training interns to become practitioners, we believe that psychological practice must be informed by the body of psychological literature. We consider awareness of psychological research and writings as essential to competent practice.

The mind-body-spirit connection is another important underlying component of our training plan. Interns are encouraged to view their clients as whole individuals and recognize interdependence between the psychological, the physiological, and the spiritual. We advocate using a wellness model to conceptualize cases and plan treatment. Interns are also encouraged to develop and participate in preventive wellness activities such as educational workshops for the campus community.

We emphasize interns' development of multicultural awareness and respect for human differences. Cleveland State University has a diverse population and we are able to expose trainees to a variety of multicultural experiences, many of which take place on campus. This counseling center has the advantage of being part of an urban university with a variety of traditional and non-traditional students. Our clients come from a variety of backgrounds and present with a wide range of issues. Therefore, we acquaint trainees with a variety of therapeutic modalities. We also believe in exposing trainees to multi-system interventions such as those which take place at the community, institutional, and family levels.

We take a three-pronged approach to training by using didactic, modeling, and experiential techniques, with emphasis on the latter. The didactic portion of our program includes formalized activities such as clinical supervision, in-service presentations, Intern Seminars, diversity discussions and case conferences. Our Intern Seminars incorporate psychological literature and often have experiential components. The topics of our Intern seminars derived from our staff expertise in diversity, holistic practices, group and couples therapy, and the profession wide competencies overall. Modeling and experience are integrated in an intern's daily service activities and interactions with the senior staff. We seek to balance collegiality with modeling appropriate professional behaviors and boundaries.

The program is designed to be sequential, cumulative, and graded in complexity. Cases assigned to interns are screened by the senior staff to match the developmental level of each intern as they progress through the year. Seminar content becomes more complex over time and some seminars build on material presented in previous meetings. As the interns progress through the year, the nature of supervision also changes (as appropriate) to be less directive/instructional and more supportive/facilitative. Increasingly throughout the year, interns are encouraged to act more independently. For example, an intern might initially present a workshop together with a senior staff member and then be asked to repeat the workshop alone or with another intern. Interns are also encouraged to develop their own ideas for services and are supported in providing these services to the campus.

Overall, we endeavor to offer a training program that is flexible and open to differences. We

value creative thinking and also recognize that each trainee has unique developmental needs. We seek to provide an environment which nurtures our interns as they develop their professional skills and identities.

## THE TRAINING EXPERIENCE

Training offered by the CSU Counseling Center is designed to be systematic and developmental. We are committed to providing a training experience that prepares interns to function as generalists and Health Service Psychologists, comfortable in the many roles assumed by university counseling center practitioners. Therefore, a broad range of training experiences are offered.

ORIENTATION occurs during the three weeks prior to the start of fall semester in August. Interns are trained in how to conduct telephone screenings, crisis walk-ins, ADHD/LD assessment, and group therapy. Each week, they begin a new activity, with intake and therapy beginning at the end of the first week, telephone screenings the second week, and crisis walk-in the third week. During the second week, Interns co-facilitate trainings for Residence Life staff, and in the third week, they help train practicum counselors. By the beginning of fall semester, they are able to begin assessment and continue therapy, screenings, and walk-in sessions.

**A sample Orientation Schedule can be seen here:**

[https://www.csuohio.edu/sites/default/files/2018\\_Intern\\_Orientation\\_Preview.pdf](https://www.csuohio.edu/sites/default/files/2018_Intern_Orientation_Preview.pdf)

DIRECT SERVICE ACTIVITIES include a range of services and usually comprise 50 percent of a trainee's duties. We require interns to acquire a total of 500 hours of direct service activities during the internship year, since this is the requirement for licensure in many states. Direct service activities include:

- Individual Counseling and Psychotherapy. Full-time interns carry an individual caseload of 14-18 clients per week. The cases are pre-screened so that progressively more difficult cases can be assigned as the intern's abilities develop. Cases typically reflect the diversity of the students seen at the CSU Counseling Center, both demographically and in terms of the severity of concerns.
- Couple Counseling. Interns may have the opportunity to see at least one couple in conjoint therapy with a senior staff member.
- Crisis Walk-In. Interns are available for two crisis walk-in hours each week and typically see a range of crisis clients over the year of internship, from clients with anxiety attacks or adjustment concerns to clients needing hospitalization. Senior staff are available to consult, support, or take point on a crisis session, as needed, to support intern development and ensure client safety.
- Assessment. Interns may use a wide range of available testing materials to conduct assessment of therapy clients. In addition, two integrated assessment reports are

required for ADHD/LD assessment or cognitive testing. Group Counseling. Interns are encouraged to co-lead counseling/therapy groups together with senior staff members. Interns may also work together or individually to provide psychodynamic or support groups, based on their experience and ability.

- Outreach and Consultation. Interns co-present the Residence Life training in their second week. Over the course of the year, Interns are expected to conduct at least 10 outreach presentations or workshops. In addition to filling outreach requests, Interns are encouraged to develop a consulting relationship with a group on campus and provide a targeted workshop or training that meets the group's needs. Interns also have the opportunity to serve on campus-wide committees for suicide prevention, Well Fest planning, and alcohol and other drug prevention.

SUPERVISION AND TRAINING ACTIVITIES are designed to provide interns with practical training and a variety of supervisory styles in a supportive environment. Interns are assigned individual supervisors and are also encouraged to consult with any member of the senior staff.

- Individual Supervision (2 hours per week). Interns are assigned a different senior staff supervisor for each half of their time here and meet with that supervisor for two hours each week. Each Intern's supervision needs as well as their preferences are taken into consideration when making these supervisory assignments. This supervision focuses on the Intern's individual caseload and their professional development. Individual supervisors use client test results, interns' client notes, and video recordings, to give feedback to help the Intern develop as a clinician.
- Additional Supervision (2 hours per week) Each week, Interns receive two additional hours of supervision. During the fall semester, this usually consists of Supervision of Group and Group Supervision. During the spring semester, Interns usually receive Supervision of Group and Supervision of Supervision. During any breaks when group is not offered, two hours of Group Supervision are provided. This flexibility is designed to provide the necessary supervision without limiting Interns' ability to schedule clients and conduct experiential learning. The Training Director is responsible for ensuring Interns receive two hours of additional supervision each week.
- Supervision of Group (weekly, 1/2 -1 hour per group). Each Intern receives supervision regarding their group facilitation and structure. Most

Interns facilitate two groups per week during fall and spring semesters and receive a half-hour of supervision per group. Usually, the senior staff co-facilitator of the group provides this supervision.

- Group Supervision (1-2 hours per week). Once each week during fall semester, the Interns meet together as a group with a member of the training committee. Every other week, an Intern presents a case and receives group supervision for this clinical case. During the first few case presentations, Interns provide a written summary with

presentations becoming less formal as the semester continues. On alternating weeks, group supervision covers other topics of relevance such as assessment cases, outreach planning, crisis walk-in challenges, professional development, and multicultural issues. During the summer and breaks between semesters, group supervision occurs twice weekly.

- Supervision of Supervision (1 hour per week, second semester). During the Spring semester, Interns often have the opportunity to supervise practicum counselor. During this time, they receive weekly Supervision of Supervision, in which they show recordings of their supervision work to receive feedback and provide peer feedback and support to each other.
- Intern Seminar (2 hours per week). This is a series of educational programs provided for the Interns by the senior staff and other experts in the community.

**Click here to see an example of Intern Seminar Training Topics:**

<http://www.csuohio.edu/sites/default/files/internseminartopics.pdf>

- In-Service Training (2-3 times per year). Interns participate with senior staff in in-service training seminars in which a local expert or a member of the senior staff present on a topic of interest.
- Diversity Discussions (2-3 times per year). Senior Staff and Interns participate in Diversity Discussions to provide ongoing development of individuals' diversity awareness and competence.
- Senior Staff, Intern, and Psychiatry Case Consultation (1 hour per week, fall semester). Interns participate in senior staff case conferences which occur weekly and include the psychiatrist. High risk cases, cases with psychiatry and counseling, and campus CARE Team concerns are discussed at this time, allowing for input from more staff and across disciplines. Due to Interns' increase in responsibility (adding supervision of practicum counselor) in spring semester, Case Consultation becomes optional for them after fall semester.
- Professional Development (variable). Interns are encouraged to attend professional conferences and seminars. Continuing education workshops on campus can be attended for free, and some financial support may be available for other trainings. Interns are encouraged (but not required) to attend the Ohio Psychological Association convention in the spring or the Great Lakes Regional Counseling Psychology conference in the spring.

#### **ADDITIONAL ACTIVITIES**

- Supervision of Practicum Counselor. Most years we are able to offer Interns the experience of serving as the primary supervisor for a practicum counselor during Spring semester. We will make every effort to provide this experience, but it is not guaranteed.

The Intern's individual supervisor provides umbrella supervision, and the Intern receives Supervision of Supervision each week.

- Staff Meetings (1 hour per week). Interns are invited to participate as full staff members in weekly staff meeting. They are encouraged to report on consultations and outreach, give insight about decisions, and provide their own perspective on issues under discussion.
- Committee Meetings (variable). Interns are encouraged to serve both on internal Counseling Center Committees as well as on University-wide committees. This committee work may be short-term (in the case of an ad-hoc committee formed to address a particular issue) or the work may span the entire year in a standing committee. Interns are especially encouraged to participate on the internal Intern Selection Committee and the campus-wide Well Fest planning committee.
- Research (up to 3 hours per week). Full-time interns may devote up to three hours per week for dissertation research or research on topics pertinent to Counseling Center services. Research projects proposed by interns are reviewed and approved by the Counseling Center Director. Original research on internship must be approved by the CSU Internal Review Board.
- Note Writing, Preparation, and Case Management (about 5 hours per week). Interns are provided time each week to complete clinical notes, prepare for sessions, prepare for supervision, and conduct any case management work for clients. Interns may have several clients working with the campus Care Manager and may choose to update the CARE Manager on progress or concerns.

## EXPECTED COMPETENCIES FOR PSYCHOLOGY INTERNS

The aim of our training program is to prepare interns to function competently and independently as health service psychologists.

Our strategy for the assessment of intern competence focuses on the nine profession-wide competencies outlined in the American Psychological Association's Standards of Accreditation (SOA), Doctoral Internship Programs:

1. Research
2. Ethical and Legal Standards
3. Diversity
4. Professional Values, Attitudes, and Behaviors
5. Communication and Interpersonal Skills



6. Assessment
7. Intervention
8. Supervision
9. Consultation and Interprofessional/Interdisciplinary Skills

Each of these competencies has associated elements represented by questions on the quarterly comprehensive evaluation form (see Appendix A). This form was adapted for our use from the Competency Benchmarks in Professional Psychology: Rating Form, developed by the APA Education Directorate; see <http://www.apa.org/ed/graduate/benchmarks-evaluation-system.aspx>

Before the spring semester begins (about half-way through the internship year) and at the end of internship, the Intern's individual supervisor completes the Performance Evaluation form with input from other staff. In order to ensure that evaluation is based on observed behaviors, specific observed behaviors are rated by staff (e.g., formal case presentation, outreach), and these ratings are provided to the individual supervisor for consideration in the overall evaluation. Supervisors also provide an informal evaluation each quarter to help shape the focus of supervision and to raise awareness of any performance problems early in the year.

Brief rating forms used for these observations simply include the relevant items from the Performance Evaluation with room for comments and suggestions. The specific rating forms are for the following:

- One disseminated research project during the course of the internship year is reviewed and rated (e.g., published article, poster, or conference presentation)
- One formal case presentation is given to staff with case summary, and staff provide ratings and comments
- Supervisor for fall semester views and rates one full client session
- Supervisor for spring semester views and rates one full client session and if available, one full supervision session of practicum counselor
- Each of two assessment integrated reports are reviewed and rated by the staff person supervising the assessment
- One outreach presentation is observed by (or co-presented with) a senior staff member and rated
- If possible, consultation experience is observed by a senior staff member and rated (e.g., staff member may attend committee meeting or may review a recorded phone consultation intern provided)

## Minimum Levels of Achievement (MLA)

The Performance Evaluation uses a Likert-type scale to represent the level of performance for each item:

- 1 Does not demonstrate competent performance at this time; needs further training and/or close supervision (approximate early practicum level or below)
- 2 Performs at a competent level some or most of the time with some supervision (approximate advanced practicum level)
- 3 Performs consistently at or above a competent level with minimal supervision (approximate intern level)
- 4 Performs consistently above a competent level with little to no supervision (approximate post-doctoral level)
- 5 Performs consistently well above competent level with no supervision, using consultation as appropriate (approximate licensed psychologist level)

N/O No opportunity to observe

Minimum levels of achievement for each area on the evaluation by the end of internship are a rating of 3: "Performs consistently at or above a competent level with minimal supervision." When formative evaluations throughout internship have ratings below 3, these result in closer supervision or a remediation plan (see section on remediation) to support each Intern to attain the minimum level of achievement by the end of internship.

## POLICIES AND PROCEDURES

**HOURS OF WORK:** Interns begin working on August 4<sup>th</sup> of each year. Interns have until August 3<sup>rd</sup> of the following year to complete 2000 internship hours (including 500 direct service hours).

Interns work 40 hours per week in order to meet this requirement. We discourage interns from working more than 45 hours per week in order to preserve self-care. Interns complete their hours during the Counseling Center's normally open hours of 8:00 a.m. - 6:00 p.m. Monday through Friday. Clients may never be seen unless a senior staff member is present in the Center.

We work with interns to help them accrue all of their hours while still taking needed sick days and some vacation time. Vacation and planned sick leave must be approved ahead of time by the Training Director and Center Director.

The Sample Schedule below is an estimate. Actual hours spent on each activity per week vary.

## **SAMPLE SCHEDULE FOR INTERNS**

### Training Activities:

2 hours Intern Seminar

2 hours Individual Supervision

1-2 hours Group Supervision

1 hour Supervision of Supervision (during Spring)

0-1 hour Additional Supervision (as needed)

### Professional Service Activities:

14-18 hours Individual and/or Couple Therapy

1-3 hours Screenings and Crisis Walk-In

2 hours Group Therapy

0-2 hours Assessment

1-2 hours Outreach

1 hour Supervision of Practicum Counselor (in Spring)

1 hour Consultation or Committee work

2 hours Staff Meeting and Case Consultation

5-10 hours Case Management, Notes, Clinical Preparation

**COMPLETION OF INTERNSHIP:** Successful completion of the internship involves the fulfillment of these basic expectations.

- Accrual of 2000 internship hours (including 500 direct service hours) at the CSU Counseling Center
- Dissemination of research to local, regional, or national audience (e.g., literature review published in state or regional psychological association publication; research journal publication; presentation at a conference)
- Completion of 5 outreach programs or workshops (e.g., Residence Life training, Academic Skills Workshop, etc.)

- Satisfactory completion of 2 integrated assessments (includes interview, selecting tests, administering tests, conceptualization and recommendations, integrated report, and feedback session)
- Satisfactory completion of one formal clinical case presentation to senior staff with written report
- Completion of some consultation (e.g., phone consultation with concerned faculty member, committee work outside the Center, or consultation with specific department or student group)
- Demonstrated competencies as measured by obtaining the minimum level of achievement on the final performance evaluation in each of these nine profession-wide competencies:
  1. Research
  2. Ethical and Legal Standards
  3. Diversity
  4. Professional Values, Attitudes, and Behaviors
  5. Communication and Interpersonal Skills
  6. Assessment
  7. Intervention
  8. Supervision
  9. Consultation and Interprofessional/Interdisciplinary Skills

Interns who meet these criteria will be given a certificate signifying the satisfactory completion of the internship.

Additional Policies pertaining to the Cleveland State University Counseling Center Internship, including those concerning Intern evaluation, due process and grievance policies can be found in the Internship Training Manual located at:

[https://www.csuohio.edu/sites/default/files/Intern\\_Training\\_Manual\\_2018-2019.pdf](https://www.csuohio.edu/sites/default/files/Intern_Training_Manual_2018-2019.pdf)

## CSU COUNSELING CENTER CLINICAL STAFF

**Dr. Katharine Oh, Psychologist:** Ph.D. in Counseling Psychology from the University of Kentucky, 2010

Director of the Counseling Center. Interests include trauma recovery, LGBTQ concerns, and acculturation. Dr. Oh conducts feminist multicultural and relational cultural therapy and supervision, and facilitates Wise Minds (a DBT-based group). She leads the campus-wide suicide prevention efforts and enjoys leadership and service for her professional associations.

**Dr. Bruce Menapace, Psychologist:** Ph.D. in Clinical Psychology from California School of Professional Psychology, 1997

Interests include cross-cultural psychology, gay/lesbian/bisexual/transgender concerns, antiracism training, stress management/relaxation training, and men's issues. He facilitates the LGBTQIA Student Support Hour and Trans Student Support and coordinates Outreach.

**Dr. Paula Mickens-English, Psychologist:** Ph.D. in Counseling Psychology from Kent State University, 1996

Interests include Afrocentric counseling, relationship issues, women's issues and alternative therapies. Dr. Mickens-English facilitates Sista to Sista, a Black Women's discussion and support group. She coordinates Practicum and Graduate Assistant training and is also a Licensed Independent Social Worker.

**Dr. Todd Seibert, Psychologist:** Ph.D. in Clinical Psychology from the University of Nevada, Las Vegas, 2009

Training Director. Interests include group therapy, cognitive assessment, and process-oriented therapy. Dr. Seibert facilitates Connections, an interpersonal process group. He coordinates Assessment, Groups, and client assignment.

**Dr. Brittany Sommers, Ph.D.** in Counseling Psychology from Andrews University, 2017

Group Coordinator. Interests include relational concerns, sexuality, emotion regulation, self-injurious behaviors, and trauma. Conducts therapy and supervision informed by Relational and Dialectical Behavior Therapy approaches. She specializes in working with couples and individuals with self-injurious behaviors.

**Dr. Alex Wang, Psychiatrist,** M.D. from Case Western University School of Medicine, 2014

Interests include diagnosis and treatment of primary mental health disorders in the college and transitional aged populations. Dr. Wang completed her residency at University Hospitals Cleveland Medical Center. In addition to her time at CSU, she also works with students at Case

Western Reserve University and Oberlin College. She is employed by University Hospitals in the Department of Psychiatry as a Senior Instructor.

## INTERNS

Our current interns may be contacted for information at 216-687-2277.

Recent interns include:

2017-2018: Chris Bober (Michigan School of Professional Psychology)

2016-2017: Fabienne Leaf (Loma Linda University) and Brittany Sommers (Andrews University)

2015-2016: Dr. Angela Harrington (Carlow University) and Dr. Heather Spence (Antioch University)

2014-2015: Stephanie Marasti-Georg (Carlow University) and Brittany Tutena (Chatham University)

More than half of our Interns go on to university counseling center postdoctoral fellowships or to jobs at university counseling centers.

## APPOINTMENT DETAILS

**Positions Available:** The Counseling Center offers two intern positions each year.

**Term of Service:** Interns begin working three weeks prior to the start of fall semester each year. Typically, this is the first or second week of August, with fall semester starting during the fourth week of August. Interns have one year from their start date to complete 2000 internship hours.

**Stipend and Benefits:** The stipend is \$27,000. Interns are provided benefits of full-time staff including: Health insurance, dental insurance, life insurance and retirement contributions. Interns are able to purchase a university parking pass and a Viking I.D. card for access to the university library and computer system. Interns are also able to use the university's Health Services for routine medical services. We ask that interns provide their own professional liability insurance and interns who wish to park on campus will need to pay for parking.

## APPLICATION

### **Qualifications:**

1. Doctoral student in counseling or clinical psychology who has completed all doctoral coursework, practica, and comprehensive/qualifying exams. Preference will be given to applicants who have an approved doctoral dissertation proposal.
2. There is no minimum number of practica hours required to apply.

### **Application Procedure:**

November 30, 2018 is the application deadline. To be reviewed, applications must include the completed AAPI Online (APPIC Application for Psychology Internships) with the following elements:

1. A curriculum vitae
2. All graduate transcripts
3. Three letters of recommendation from either faculty members or former supervisors.

### **Selection and Notification Process:**

The CSU Counseling Center adheres to the APPIC Internship Matching Program Policies regarding the selection and notification of applicants. This internship site 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 intern applicant. Results of the match will be released on the APPIC Match Day in February. Summary information about our program is also listed on the APPIC Directory at: <https://www.appic.org/> To review the APPIC procedures and/or register for the Match, visit: <https://natmatch.com/psychint/>

Diversity and Non-Discrimination: The Cleveland State University Counseling Center is committed to attracting and training diverse interns to serve our diverse student population. Our institutional Notice of Non-Discrimination has a link from our main Counseling Center Webpage <http://www.csuohio.edu/counselingcenter/> or can be found directly at: <http://www.csuohio.edu/sites/default/files/Notice%20of%20Nondiscrimination.pdf>

Background Check: Interns who are matched with our site through the APPIC match are subject to a standard background check as a condition of their employment. A PDF of these specific policies can be found at: <https://www.csuohio.edu/sites/default/files/3344-60-01.pdf>

Send all application materials (via AAPI) and other correspondence to: Katharine Oh, Ph.D.  
Cleveland State University Counseling Center 2121 Euclid Ave., UN 220 Cleveland, Ohio 44115  
Questions may be directed to [t.m.seibert@csuohio.edu](mailto:t.m.seibert@csuohio.edu)

Appendix A: Intern Evaluation Form

**Cleveland State University Counseling Center**

**Intern Performance Evaluation**

Trainee Name:

Date Evaluation Completed:

Supervisor:

Rate each item by responding to the following question using the scale below:

1. Does not demonstrate competent performance at this time; needs further training and/or close supervision (early practicum level or below)
2. Performs at a competent level some or most of the time with some supervision (advanced practicum level)
3. Performs consistently at or above a competent level with minimal supervision (intern level)
4. Performs consistently above a competent level with little to no supervision (post-doctoral level)
5. Performs consistently well above competent level with no supervision, using consultation as appropriate (independent practice)
6. N/O No opportunity to observe



**FOUNDATIONAL COMPETENCIES**

**I. PROFESSIONALISM**

<b>1. Professionalism:</b> as evidenced in behavior and comportsment that reflects the values and attitudes of psychology.						
<b>1A. Integrity and Accountability</b> - Honesty, personal responsibility and adherence to professional values						
Monitors and resolves situations that challenge professional values and integrity; Independently accepts personal responsibility						
Examples:						
Takes action to correct situations that are in conflict with professional values						
Addresses situations that challenge professional values						
Enhances own professional productivity						
Holds self accountable for and submits to external review of quality service provision						
	1	2	3	4	5	N/O
<b>1B. Deportment</b>						
Conducts self in a professional manner across settings and situations						
Examples:						
Verbal and nonverbal communications are appropriate to the professional context, including in challenging interactions						
Flexibly shifts demeanor to effectively meet requirements of professional situation and enhance outcomes						
	1	2	3	4	5	N/O
<b>1C. Concern for the welfare of others</b>						
Independently acts to safeguard the welfare of others						
Examples:						
Communications and actions convey sensitivity to individual experience and needs while retaining professional demeanor and deportment						
	1	2	3	4	5	N/O

Respectful of the beliefs and values of colleagues even when inconsistent with personal beliefs and values

Demonstrates compassion for others who are dissimilar from oneself, who express negative affect (e.g., hostility)

**1D. Professional Identity**

Displays consolidation of professional identity as a psychologist; demonstrates knowledge about issues central to the field; integrates science and practice

Examples:

Keeps up with advances in profession

	1	2	3	4	5	N/O
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**2. Individual and Cultural Diversity:** Awareness, sensitivity and skills in working professionally with diverse individuals, groups and communities who represent various cultural and personal background and characteristics defined broadly and consistent with APA policy.

**2A. Self as Shaped by Individual and Cultural Diversity** (e.g., cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status) **and Context**

Independently monitors and applies knowledge of self as a cultural being in assessment, treatment, and consultation

Examples:

Uses knowledge of self to monitor and improve effectiveness as a professional

Seeks consultation or supervision when uncertain about diversity issues

	1	2	3	4	5	N/O
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**2B. Others as Shaped by Individual and Cultural Diversity and Context**

<p>Independently monitors and applies knowledge of others as cultural beings in assessment, treatment, and consultation</p> <p>Examples:</p> <p>Uses knowledge of others to monitor and improve effectiveness as a professional</p> <p>Seeks consultation or supervision when uncertain about diversity issues with others</p>	<p>1    2    3    4    5    N/O</p>
<p><b>2C. Interaction of Self and Others as Shaped by Individual and Cultural Diversity and Context</b></p>	
<p>Independently monitors and applies knowledge of diversity in others as cultural beings in assessment, treatment, and consultation</p> <p>Examples:</p> <p>Uses knowledge the role of culture in interactions to monitor and improve effectiveness as a professional</p> <p>Seeks consultation or supervision when uncertain about diversity issues in interactions with others</p>	<p>1    2    3    4    5    N/O</p>
<p><b>2D. Applications based on Individual and Cultural Context</b></p>	
<p>Applies knowledge, skills, and attitudes regarding dimensions of diversity to professional work</p> <p>Examples:</p> <p>Adapts professional behavior in a manner that is sensitive and appropriate to the needs of diverse others</p> <p>Articulates and uses alternative and culturally appropriate repertoire of skills and techniques and behaviors</p> <p>Seeks consultation regarding addressing individual and cultural diversity as needed</p> <p>Uses culturally relevant best practices</p>	<p>1    2    3    4    5    N/O</p>

<b>3. Ethical Legal Standards and Policy:</b> Application of ethical concepts and awareness of legal issues regarding professional activities with individuals, groups, and organizations.						
<b>3A. Knowledge of Ethical, Legal and Professional Standards and Guidelines</b>						
Demonstrates advanced knowledge and application of the APA Ethical Principles and Code of Conduct and other relevant ethical, legal and professional standards and guidelines						
Examples:						
Addresses complex ethical and legal issues						
Articulates potential conflicts in complex ethical and legal issues.						
Seeks to prevent problems and unprofessional conduct						
Demonstrates advanced knowledge of typical legal issues, including child and elder abuse reporting, HIPAA, confidentiality, and informed consent						
	1	2	3	4	5	N/O
<b>3B. Awareness and Application of Ethical Decision Making</b>						
Independently utilizes an ethical decision-making model in professional work						
Examples:						
Applies applicable ethical principles and standards in professional writings and presentations						
Seeks consultation regarding complex ethical and legal dilemmas						
Takes appropriate steps when others behave unprofessionally						
Identifies potential conflicts between personal belief systems, APA Ethics Code and legal issues in practice						
	1	2	3	4	5	N/O
<b>3C. Ethical Conduct</b>						
Independently integrates ethical and legal standards with all competencies						
Examples: Demonstrates adherence to ethical and legal standards in professional activities						
Takes responsibility for continuing professional development						
	1	2	3	4	5	N/O
<b>4. Reflective Practice/Self-Care:</b> Practice conducted with personal and professional self-awareness and reflection;						

with awareness of competencies; with appropriate self-care.						
<b>4A. Reflective Practice</b>						
<p>Demonstrates reflectivity in context of professional practice (reflection-in-action); acts upon reflection; uses self as a therapeutic tool; Accurately assess own competence; recognizes limits of knowledge/skills and acts to address them; Attends to personal well-being to assure effective professional functioning</p> <p>Examples:</p> <p>Monitors and evaluates attitudes, values and beliefs towards diverse others</p> <p>Recognizes when new/improved competencies are required for effective practice</p> <p>Anticipates and self-identifies disruptions in functioning and intervenes at an early stage/with minimal support from supervisors</p> <p>Recognizes and addresses own problems, minimizing interference with competent professional functioning (uses appropriate self-care)</p>						
	1	2	3	4	5	N/O
<b>4B. Participation in Supervision Process</b>						
<p>Independently seeks supervision when needed</p> <p>Examples:</p> <p>Seeks supervision when personal problems may interfere with professional activities</p> <p>Seeks supervision when working with client problems for which he/she has had limited experience to ensure competence of services</p>						
	1	2	3	4	5	N/O

**Comments on Professionalism, Diversity, Ethics, Reflective Practice:**

## II. RELATIONAL

<b>5. Relationships:</b> Relate effectively and meaningfully with individuals, groups, and/or communities.
<b>5A. Interpersonal Relationships</b>
Develops and maintains effective relationships with a wide range of clients, colleagues, organizations and communities
Examples:
Effectively negotiates conflictual, difficult and complex relationships including those with individuals and groups that differ significantly from oneself
Maintains satisfactory interpersonal relationships with clients, peers, faculty, allied professionals, and the public
1 2 3 4 5 N/O
<b>5B. Affective Skills</b>
Manages difficult communication; possesses advanced interpersonal skills
Examples:
Accepts, evaluates and implements feedback from others
Uses affective reactions in the service of resolving disagreements or fostering growth in others
Tolerates patient's feelings, attitudes, and wishes, particularly as they are expressed toward the therapist, so as to maintain and/or promote therapeutic dialogue
Allows, enables, and facilitates the patient's exploration and expression of affectively difficult issues
Works flexibly with patients' intense affects which could destabilize the therapeutic relationship
1 2 3 4 5 N/O
<b>5C. Expressive Skills</b>

Verbal, nonverbal, and written communications are informative, articulate, succinct, sophisticated, and well-integrated; demonstrates thorough grasp of professional language and concepts

Examples:

Demonstrates descriptive, understandable command of language, both written and verbal

Communicates clearly and effectively with clients

Uses appropriate professional language when dialoguing with other healthcare providers

Prepares sophisticated and compelling case reports

1 2 3 4 5 N/O

**Comments on Relational Competencies:**

**III. SCIENCE**

**6. Scientific Knowledge and Methods/Research Evaluation:** Understanding of research, research methodology, techniques of data collection and analysis, biological bases of behavior, cognitive-affective bases of behavior, and development across the lifespan. Respect for scientifically derived knowledge.

**6A. Scientific Foundation of Professional Practice**

Independently applies knowledge and understanding of scientific foundations to practice

Examples:

Accurately evaluates scientific literature regarding clinical issues

Reviews scholarly literature related to clinical work and applies knowledge to case conceptualization

1 2 3 4 5 N/O

Independently applies EBP concepts in practice

Independently compares and contrasts EBP approaches with other theoretical perspectives and interventions in the context of case conceptualization and treatment planning

**6B. Application of Scientific Method to Practice**

Applies scientific methods of evaluating practices, interventions, and programs

Examples:

Uses findings from CCAPS to alter intervention strategies as indicated

Participates in program evaluation

1    2    3    4    5    N/O

**Comments on Science Competencies:**

**FUNCTIONAL COMPETENCIES**

**IV. APPLICATION**

**7. Assessment and Diagnosis:** Assessment and diagnosis of problems, capabilities and issues associated with individuals, groups, and/or organizations.

**7A. Knowledge of Assessment Methods and Psychometrics**



<p>Understands the strengths and limitations of diagnostic approaches and interpretation of results from multiple measures for diagnosis and treatment planning; Selects multiple means of evaluation that are responsive to diverse clients</p> <p>Examples:</p> <p>Selection of assessment tools reflects a flexible approach to answering the diagnostic questions</p> <p>Interview and report lead to formulation of a diagnosis and the development of appropriate treatment plan</p> <p>Demonstrates awareness and competent use of culturally sensitive instruments and norms</p> <p>Seeks consultation as needed to guide assessment</p> <p>Describes limitations of assessment data</p>								<p>1    2    3    4    5    N/O</p>
<b>7B. Diagnosis</b>								
<p>Utilizes case formulation and diagnosis for intervention planning in the context of stages of human development and diversity</p> <p>Examples:</p> <p>Treatment plans incorporate relevant developmental features and clinical symptoms as applied to presenting problem</p> <p>Demonstrates awareness of DSM and relation to ICD codes</p> <p>Independently identifies problem areas and makes a diagnosis</p>								<p>1    2    3    4    5    N/O</p>
<b>7C. Conceptualization and Recommendations</b>								

<p>Accurately conceptualizes the multiple dimensions of the case based on the results of assessment, including client strengths and psychopathology</p> <p>Examples:</p> <p>Prepares reports based on case material</p> <p>Accurately administers, scores and interprets test results</p> <p>Formulates case conceptualizations incorporating theory and case material</p>	1	2	3	4	5	N/O
<b>7D. Communication of Assessment Findings</b>						
<p>Communicates results in written and verbal form clearly, constructively, and accurately in a conceptually appropriate manner</p> <p>Examples:</p> <p>Writes an effective, comprehensive report</p> <p>Effectively communicates assessment results verbally to clients</p> <p>Reports reflect data that has been collected via interview and its limitations</p>	1	2	3	4	5	N/O
<b>8. Interventions</b>						
<b>8A. Knowledge and Application of Evidence-Based Practice</b>						
<p>Independently applies knowledge of evidence-based practice, including empirical bases of assessment, intervention, and other psychological applications, clinical expertise, and client preferences</p> <p>Examples:</p> <p>Writes a case summary incorporating evidence-based practice</p> <p>Presents rationale for intervention strategy that includes empirical support</p> <p>Independently creates a treatment plan that reflects successful integration of empirical findings, clinical judgment, and client preferences</p>	1	2	3	4	5	N/O

<b>8B. Intervention Planning</b>						
Independently plans interventions; case conceptualizations and intervention plans are specific to case and context						
Examples:						
Accurately assesses presenting issues taking in to account the larger life context, including diversity issues						
Conceptualizes cases independently and accurately						
Independently selects intervention(s) appropriate for the presenting issue(s)						
	1	2	3	4	5	N/O
<b>8C. Skills</b>						
Displays clinical skills with a wide variety of clients and uses good judgment even in unexpected or difficult situations						
Examples:						
Develops rapport and relationships with wide variety of clients						
Uses good judgment about unexpected issues, such as crises, use of supervision, confrontation						
Effectively delivers intervention						
	1	2	3	4	5	N/O
<b>8D. Intervention Implementation</b>						
Implements interventions with fidelity to empirical models and flexibility to adapt where appropriate						
Examples:						
Independently and effectively implements a typical range of intervention strategies appropriate to practice setting						
Independently recognizes and manages special circumstances						
Terminates treatment successfully						
Collaborates effectively with other providers or systems of care	1	2	3	4	5	N/O

<b>8E. Progress Evaluation</b>						
Independently evaluates treatment progress and modifies planning as indicated, even in the absence of established outcome measures						
Examples:						
Addresses changes in CCAPS scores with clients						
Critically evaluates own performance in the treatment role and seeks feedback from clients						
Seeks consultation when necessary						
	1	2	3	4	5	N/O
<b>9. Consultation:</b> The ability to provide expert guidance or professional assistance in response to needs or goals (peer consultation, consultation with concerned other or crisis consult, consultation with department or group, or committee/systems work providing psychological consultation)						
<b>9A. Knowledge of Consultation Models and Methods</b>						
Demonstrates knowledge of consultation models and methods for different consultation situations; Shifts roles accordingly to meet referral needs						
Examples:						
Is able to articulate different forms of consultation (e.g., mental health, educational, systems, advocacy)						
Accurately matches professional role function to situation						
	1	2	3	4	5	N/O
<b>9B. Application of Consultation Knowledge</b>						
Demonstrates knowledge of and ability to select appropriate and contextually sensitive means of data gathering to answer referral question; Applies literature and knowledge to provide effective feedback and to articulate appropriate recommendations						
Examples:						
Demonstrates ability to gather information necessary to answer						
	1	2	3	4	5	N/O

referral question

Provides clear verbal feedback and offers appropriate recommendations

**Comments on Assessment, Intervention, Consultation:**

**V. EDUCATION**

<b>10. Supervision: Supervision and training in the professional knowledge base of enhancing and monitoring the professional functioning of others.</b>						
<b>10A. Knowledge of Supervision</b>						
<p>Understands the ethical, legal, and contextual issues of the supervisor role; Demonstrates knowledge of supervision models and practices</p> <p>Examples:</p> <p>Articulates a model of supervision and reflects on how this model is applied in practice</p> <p>Integrates contextual, legal, and ethical perspectives in supervision</p>						
	1	2	3	4	5	N/O
<b>10B. Supervisory Practices</b>						
<p>Provides effective supervised supervision to less advanced students, peers, or other service providers in typical cases appropriate to the service setting</p> <p>Examples:</p>						

Helps supervisee develop evidence based treatment plans						
Provides supervision input according to developmental level of supervisee						
Encourages supervisee to discuss reactions and helps supervisee develop strategies to use reactions in service of clients						
Presents supervisor of supervision with accurate account of case material and supervisory relationship, seeks input, and utilizes feedback to improve outcomes						
	1	2	3	4	5	N/O

Comments on Supervision:

VI. SYSTEMS

<b>11. Interdisciplinary Systems:</b> Knowledge of key issues and concepts in related disciplines. Identify and interact with professionals in multiple disciplines.						
<b>11A. Knowledge of the Shared and Distinctive Contributions of Other Professions</b>						
Demonstrates awareness of multiple and differing worldviews, roles, professional standards, and contributions across contexts and systems; demonstrates respect for the distinctive roles of other professionals						
Examples:						
Reports observations of commonality and differences among professional roles, values, and standards						
Demonstrates respect for and value of contributions from related professions						
	1	2	3	4	5	N/O
<b>11B. Functioning in Multidisciplinary and Interdisciplinary Contexts</b>						
Demonstrates basic knowledge of and ability to display the skills that support effective interdisciplinary team functioning						
	1	2	3	4	5	N/O

<p>Examples:</p> <p>Demonstrates skill in working with other professionals</p> <p>Effectively resolves disagreements about diagnosis or treatment goals</p> <p>Maintains own position when appropriate while acknowledging the value of others' positions and initiates mutually accepting resolutions</p> <p>Supports and utilizes the perspectives of other team members</p>						
<p><b>12. Advocacy:</b> Actions targeting the impact of social, political, economic or cultural factors to promote change at the individual (client), institutional, and/or systems level.</p>						
<p><b>12A. Empowerment</b></p>						
<p>Examples:</p> <p>Promotes client self-advocacy</p>						
	1	2	3	4	5	N/O
<p><b>12B. Systems Change</b></p>						
<p>Demonstrates beginning, basic ability to promote change at the level of institutions, community, or society</p> <p>Examples:</p> <p>Develops alliances with relevant individuals and groups</p> <p>Engages with groups with differing viewpoints around issue to promote change</p>						
	1	2	3	4	5	N/O

**Comments on Systems Competencies:**

**Overall Assessment of Trainee's Current Level of Competence**

Please provide a brief narrative summary of your overall impression of this trainee's current level of competence. What are the trainee's particular strengths and weaknesses?

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

Signature of Evaluator: \_\_\_\_\_



Cleveland State University