

Profession Wide Competencies

Provide information below to illustrate how the program ensures that ALL interns can acquire and demonstrate substantial understanding of and competence in:	
Competency:	<i>(i) Research</i>
Elements associated with this competency from IR C-8 I	<ul style="list-style-type: none"> • Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.
Program-defined elements associated with this competency (see table description above)	<ol style="list-style-type: none"> 1. Engage in systematic effort to increase knowledge of psychology through reviewing and implementing research and advances in the field. 2. Understand methods appropriate to research questions, setting and/or community and groups. 3. Integrates science and clinical judgment with practice, evaluating treatment progress and modifying treatment plans.
Examples of Competency Benchmarks	<ul style="list-style-type: none"> • Identifies multiple factors and interactions of those factors that underlie pathological behavior. • Reviews scholarly literature related to clinical work and applies knowledge to case conceptualization. • Independently compares and applies EBP approaches with other theoretical perspectives and interventions in the context of case conceptualization and treatment planning. • Participates in program evaluation. • Compiles and analyzes data on own clients (outcome measurement). • Uses findings from outcome evaluation or evaluation of client progress to alter intervention strategies as indicated. • Independently tracks client progress on clinical dashboards and changes intervention when needed to improve outcomes. • Applies scholarly literature into rounds and case presentations.
Required training/experiential activities to meet each element.	<ul style="list-style-type: none"> • Complete required readings and research on specific interventions and new developments in the field. • Utilize evidence based and promising therapeutic interventions. • Case presentations demonstrate knowledge of integrating research with practice. • Participate in didactic seminars which integrate scholarly inquiry into the main topic. • Use of evidence based databases such as PWEBS to identify best practices for client treatment. • Use of clinical dashboard and agency data bases to track effectiveness of evidence based interventions. • Describe how outcomes are measured in each practice activity. • Lead client care team meetings.

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	<ul style="list-style-type: none"> • Attends off-site trainings, conferences and workshops in which scholarly research is disseminated. • Prepare and deliver a staff training that incorporates relevant research and addresses specific program needs. 	
<p>How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.</p>	<p>How outcomes are measured:</p> <ul style="list-style-type: none"> • Presentation of best practices in individual supervision, group supervision, weekly rounds and didactics, IEP meetings, case presentations, client care team meetings and interagency trainings and meetings. Complete group outcome measures and present data. • Presentation of minimum of two clinical dashboards in group supervision documenting at least 8 weeks of treatment interventions in group supervision. • Training presentation to staff. • Initial orientation assessment of competency based evaluation. 	<p>Evaluation tool and self-study location:</p> <ul style="list-style-type: none"> • Assessment of Intern Performance mid and end year (Standard IIA.1-2, uploaded document) • Quarterly Evaluation (Standard IIA.1-2, Uploaded document) • Participant Rating form (Standard IIA.1-2, Uploaded document) • Supervision log (Standard IIA.1-2, uploaded document)
<p>Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.</p>	<p>Minimum score of “3 – <i>Intermediate Internship</i>” at mid-year and “4 – <i>High Internship/Mastery</i>” at year-end on bi-annual assessment of intern performance forms; rating of “3 – <i>Intermediate Internship</i>” at mid-year or “4 <i>High Internship/Mastery</i>” at year-end on the Didactic Participant Evaluation Form; and completion of dashboard presentations in group supervision.</p>	

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Competency:	<i>(ii) Ethical and legal standards</i>
Elements associated with this competency from IR C-8 I	<ul style="list-style-type: none"> • Be knowledgeable of and act in accordance with each of the following: <ul style="list-style-type: none"> ○ the current version of the APA Ethical Principles of Psychologists and Code of Conduct; ○ Relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels; and ○ 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.
Program-defined elements associated with this competency (if applicable)	<ol style="list-style-type: none"> 1. Compliance to all laws and regulations of the California Board of Psychology. 2. Compliance to all policies and procedures of the agency and training program. 3. Acceptance of responsibility for their client’s mental health care. 4. Acts to benefit the welfare of others, especially those in need.
Examples of Competency Benchmarks	<ul style="list-style-type: none"> • Articulates and demonstrates advanced knowledge of typical legal issues, including child and elder abuse reporting, HIPAA, confidentiality, and informed consent. • Demonstrates adherence to ethical and legal standards in professional activities. • Takes responsibility for continuing professional development. • Seeks consultation regarding complex ethical and legal dilemmas. • Applies ethical decision making in resolving competing clinical, cultural, systems and program issues. • Takes appropriate steps when others behave unprofessionally or unethically. • Identifies potential conflicts between personal belief systems, APA Ethics Code and legal issues in practice.
Required training/experiential activities to meet elements	<ul style="list-style-type: none"> • Attend trainings in law and ethics. • Identify and apply laws, regulations, rules and policies governing health service psychology in practice with clients. • Meet standards of client care required by program and agency partners. • Identify best practices for client treatment through evidenced based data bases such as PWEBS. • Identify ethical dilemmas and discuss with supervisors.

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	<ul style="list-style-type: none"> • Demonstrate competent case presentation during clinical rounds and identify ethical and legal issue relevant to their case. • Completion of reading assignments reviewing literature or related themes as evidenced in participation in group supervision and didactics. • Lead multidisciplinary treatment team meetings. • Work with QA to adhere to agency document training standards. • Attend documentation training. 	
<p>How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.</p>	<p>How outcomes are measured:</p> <ul style="list-style-type: none"> • Supervisor evaluations in individual and group supervision. • Presentation of Video recordings to supervisor and live observation of intern performance by supervisor. • Clinical Dashboard program and print out. • Performance in rounds presentation. • Participation in law and ethics training. • Initial orientation assessment of competency based evaluation. 	<p>Evaluation tool and self-study location:</p> <ul style="list-style-type: none"> • Quarterly Evaluations (Standard II.A.1-2 uploaded document) • Mid-year and End of Year Intern Performance Evaluation (Standard II.A.1-2 uploaded document) • Uploaded document) • Intern Rounds performance review (Standard II.A.1-2 uploaded document) • Intern Training Participation Form (Standard II.A.1-2 uploaded document) • Clinical Dashboard Data Printout (Standard II.A.1-2 uploaded document)
<p>Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.</p>	<ul style="list-style-type: none"> • Score of “3 – <i>Intermediate Internship</i>” on Mid-Year and “4 – <i>High Internship/Mastery</i>” on Year-End on the bi-annual assessment of intern performance form indicating performance levels in this competency. • Completion and presentation of clinical dashboard in group supervision. • Score of “3 – <i>Intermediate Internship</i>” at Mid-Year and “4 – <i>High Intensity Internship/Mastery</i>” at year-end on Rounds Performance Review completed by Primary supervisor. • Scores of “3” – <i>Intermediate Internship</i> at Mid-Year and “4” – <i>High Internship Mastery</i> at Year-End on Training Participation Form. 	

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Competency:	<i>(iii) Individual and cultural diversity</i>
Elements associated with this competency from IR C-8 I	<ul style="list-style-type: none"> • An understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves. • 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. • The ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles (e.g., research, services, and other professional activities). This includes the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered over the course of their careers. Also included is the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own. • Demonstrate the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during internship.
Program-defined elements associated with this competency (if applicable)	<ol style="list-style-type: none"> 1. Include the role of individual and cultural diversity differences in treatment planning, intervention and consultation. 2. Demonstrate ability to independently monitor and apply knowledge of self and others to inform practice as a cultural being in assessment, treatment and consultation. 3. Inquire about, explore, and acknowledge individual and cultural differences during therapy with their clients. 4. Use of the intersection of individual diversity factors in treatment planning and meetings. 5. Ability to redirect individual and cultural insensitivity in the milieu. 6. Ability to conduct themselves with a keen awareness and sensitivity to diversity factors. 7. Lead multidisciplinary treatment team meetings with sensitivity to intersection of diversity factor.
Examples of Competency Benchmarks	<ul style="list-style-type: none"> • Uses knowledge of self and others to monitor and improve effectiveness as a professional. • Seeks consultation or supervision when uncertain about diversity issues. • Uses culturally relevant best practice. • Adapts professional behavior in a manner that is sensitive and appropriate to the needs of diverse others.

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	<ul style="list-style-type: none"> • Articulates and uses alternative and culturally appropriate repertoire of skills and techniques and behaviors. 	
<p>Required training/experiential activities to meet elements</p>	<ul style="list-style-type: none"> • Minimum 15 hours weekly client contact with a diverse population of at-risk youth and their families. • Participation in ongoing training in treatment planning and interventions that includes sensitivity to client diversity. • Serve in a leadership role on multi-disciplinary interagency teams. • Attend and participate in didactics and agency trainings on individual and cultural diversity. • Identify best practices for client treatment respecting diversity through evidenced based data bases such as PWEBS. • Completion of reading assignments reviewing literature and related themes in group supervision, rounds and didactics. • Meets standards of client care with attention to understanding and respecting diversity. • Complete documentation of clinical services. • Assessing diversity factors in assessments and intakes; and, integrating into case conceptualization and presentation. 	
<p>How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.</p>	<p>How outcomes are measured:</p> <ul style="list-style-type: none"> • Video recordings and live supervision of work with clients • Assessment of Intern Performance at mid-year and end of year • Rounds Presentation • Didactic participation • Review of Dashboard printout • Tabulation of diversity experience • Documentation of clinical services • Monitoring diversity experience • Initial orientation assessment of competency based evaluation. 	<p>Evaluation tool and self-study location:</p> <ul style="list-style-type: none"> • Live supervision review form (Standard II.A.1-2 uploaded document) • Intern Performance Evaluation (Intern Manual, pg. 55, Standard II.A.1-2 uploaded document) • Quarterly Evaluation (Standard II.A.1-2 Uploaded document) • Rounds Presenter Rating Form (Standard II.A.1-2 uploaded document) • Training Review Form (Standard II.A.1-2 uploaded document) • Clinical Dashboard data print out (Standard II.A.1-2 uploaded document) • Diversity experience log (Standard II.A.1-2

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		<p>uploaded document)</p> <ul style="list-style-type: none"> • Clinical Service notes (Standard II.A.1-2 uploaded document)
<p>Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.</p>	<ul style="list-style-type: none"> • Score of “3 – <i>Intermediate Internship</i>” at Mid-Year and “4 <i>High Internship/Mastery</i>” at Year-End, indicating satisfactory progress on the bi-annual assessment of intern performance forms • Score of “3 – <i>Intermediate Internship</i>” at Mid-Year and “4 <i>High Internship/Mastery</i>” at Year-End indicating satisfactory progress on Rounds Presenter Rating Form • Score of “3 – <i>Intermediate Internship</i>” at Mid-Year and “4 <i>High Internship/Mastery</i>” at Year-End on Training Review Form 	

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Competency:	<i>(iv) Professional values, attitudes, and behaviors</i>
Elements associated with this competency from IR C-8 I	<ul style="list-style-type: none"> • Behave in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others. • 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.
Program-defined elements associated with this competency (if applicable)	<ol style="list-style-type: none"> 1. Manage and be aware of transference and countertransference. 2. Consistently anticipate, identify and address personal problem, minimizing effects on competent professional functioning and seeks supervision. 3. Maintain appropriate professional and ethical boundaries with clients and colleagues. 4. Models self-care and monitors issues related to self-care. 5. Elicit feedback directly from clients, family members of clients, staff, supervisors and other professionals to evaluate professional competency.
Examples of Competency Benchmarks	<ul style="list-style-type: none"> • Communications and actions convey sensitivity to individual experience and needs while retaining professional demeanor and deportment. • Demonstrates flexibility, shifts demeanor to effectively meet requirements of professional situation and enhance outcomes. • Accurately assesses own strengths, weaknesses and competence and seeks to prevent or ameliorate impact on professional functioning. • Takes independent action to correct situations that conflict with professional values. • Seeks supervision when personal problems may interfere with professional activities. • Seeks supervision when working with client problems for which he/she has had limited experience to ensure competence of services. • Demonstrates compassion for others who are dissimilar from oneself, who express negative affect (e.g., hostility), and/or who seek care for proscribed behavior, such as violence, predation, or dangerousness.

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<p>Required training/experiential activities to meet elements</p>	<ul style="list-style-type: none"> • Minimum of 15 hours of weekly client contact. • Participating in two hours of individual supervision and two hours of group supervision weekly. • Lead multidisciplinary treatment team meetings. • Incorporates feedback from team members on clinical/therapeutic?? • Increasingly self-evaluates impact of self on team function. • Openness in supervision to feedback and examination. • Increasingly initiates the examination of transference and countertransference. 	
<p>How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.</p>	<p>How outcomes are measured:</p> <ul style="list-style-type: none"> • Supervision log • Supervisors’ review of work • Review of cases and responses of intern in individual and group supervision • Review of at least 6 therapy session through live supervision or DVD recordings in individual and group supervision • Rounds presentation and participation • Initial orientation assessment of competency based evaluation. 	<p>Evaluation tool and self-study location:</p> <ul style="list-style-type: none"> • Live supervision rating form (Standard II.A.1-2 uploaded document) • Supervision log (Standard II.A.1-2 uploaded document) • Rounds participation form (Standard II.A.1-2 uploaded document) • Assessment of Intern Performance (Intern Manual, pg. 55, Standard II.A.1-2 uploaded document) • Quarterly Evaluation (Standard II.A.1-2 Uploaded document)
<p>Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.</p>	<ul style="list-style-type: none"> • Minimum rating of “3 – <i>Intermediate Internship</i>” at mid-year and “4 – <i>High Internship/Mastery</i>” at year-end on: live supervision rating form, rounds participation form and bi-annual assessment of intern performance evaluation forms. 	

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Competency:	<i>(v) Communications and interpersonal skills</i>
Elements associated with this competency from IR C-8 I	<ul style="list-style-type: none"> • 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; demonstrate a thorough grasp of professional language and concepts. • Demonstrate effective interpersonal skills and the ability to manage difficult communication well.
Program-defined elements associated with this competency (if applicable)	<ol style="list-style-type: none"> 1. Facilitates communication amongst team members. 2. Demonstrates non-defensive listening and openness to feedback. 3. Acknowledging one's own role in difficult interactions. 4. Presenting feedback, views and decisions to colleagues in a concise and confident manner. 5. Conduct self in a professional manner across settings and situation. 6. Timely follow up with communication between team members. 7. Adjust use of language to fit audience when imparting psychological formulations to help team members understand what is underneath child's symptoms and behaviors.
Examples of Competency Benchmarks	<ul style="list-style-type: none"> • Effectively negotiates conflictual, difficult and complex relationships including those with individuals and groups that differ significantly from oneself. • Communicates effectively to resolve disagreements and fosters growth in others. • Demonstrates descriptive, understandable command of language, both written and verbal. • Accepts, evaluates and implements feedback from others. • Tolerates client's feelings, attitudes, and wishes, particularly as they are expressed toward the therapist, to maintain and/or promote therapeutic dialogue. • Communicates clearly and effectively with clients. • Prepares sophisticated, concise and compelling case reports. • Maintains appropriate interpersonal relationships with clients, peers, faculty, allied professionals, and the public. • Uses appropriate professional language when dialoguing with other healthcare providers. • Verbal and nonverbal communications are appropriate to the professional context including in challenging interactions.

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<p>Required training/experiential activities to meet elements</p>	<ul style="list-style-type: none"> • Minimum of 15 hours of weekly client contact. • Participation in weekly didactics, rounds, group supervision, IEP meetings, treatment team meetings, chart review and audits and other professional interagency trainings and meetings. • Reporting assessment results to referring clinicians, treatment teams and clients and families. • Competent case presentation during clinical rounds. • Foster collaborative communication in multidisciplinary treatment team meetings. • Written progress notes, treatment plans, safety plans, intake evaluations and discharge plans. • Timely follow-up with team members on treatment issues. 	
<p>How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.</p>	<p>How outcomes are measured:</p> <ul style="list-style-type: none"> • Participation form ratings of “interactive” or “attentive • Staff and supervisor feedback on intern’s performance in treatment team meeting, IEP meetings and staff meetings • Live supervision of feedback sessions for assessment cases and therapy sessions. • Presenter Rating form for Rounds Presentation • Initial orientation assessment of competency based evaluation. 	<p>Evaluation tool and self-study location:</p> <ul style="list-style-type: none"> • Assessment of Intern Performance (Intern Manual, pg. 55, Standard II.A.1-2 uploaded document) • Participant Rating form (Standard II.A.1-2 uploaded document) • Live supervision rating form (Standard II.A.1-2 uploaded document) • Supervisee log of activity (Standard II.A.1-2 uploaded document) • Quarterly Evaluation (Standard II.A.1-2 Uploaded document)
<p>Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.</p>	<ul style="list-style-type: none"> • Training Participation form ratings of “3 – <i>Intermediate Internship</i>” at mid-year and “4 – <i>High Internship/Mastery</i>” at year end • Minimum rating of “3 – <i>Intermediate Internship</i>” at mid-year and “4 – <i>High Internship/Mastery</i>” at year-end indicating satisfactory ratings on the bi-annual assessment of intern performance rating forms. • Minimum rating of “3 – <i>Intermediate Internship</i>” at mid-year and “4 – <i>High Internship/Mastery</i>” on the Presenter Rating form for Rounds. 	

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Competency:	<i>(vi) Assessment</i>
Elements associated with this competency from IR C-8 I	<ul style="list-style-type: none"> • Select and apply assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collect relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient. • Interpret assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective. • 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.
Program-defined elements associated with this competency (if applicable)	<ol style="list-style-type: none"> 1. Independently select and implement multiple methods to evaluate and assess children and adolescents. 2. Use best available empirical literature and the science of measurement and psychometrics to select and apply assessment methods and instruments for use with children and adolescents. 3. Formulate a DSM-V diagnosis. 4. Intake assessment and Interviewing. 5. Administering scoring and interpreting assessment instruments. 6. Communicating integrated test results in written reports and verbal feedback.
Examples of Competency Benchmarks	<ul style="list-style-type: none"> • Independently and accurately selects, administers, and scores and interprets assessment tools with clinical populations, as well as client population served at practice site. • Demonstrates awareness and competent use of culturally sensitive instruments, norms. • Selection of assessment tools reflects a flexible approach to answering the diagnostic questions. • Interview and report lead to formulation of a diagnosis and the development of appropriate treatment plan. • Demonstrates awareness of DSM and relation to ICD codes. • Comprehensive reports include discussion of strengths and limitations of assessment measures as appropriate. • Interprets assessment results accurately taking into account limitations of the evaluation method.

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	<ul style="list-style-type: none"> • Provide meaningful, understandable and useful feedback that is responsive to client needs in comprehensive reports and verbal feedback. • Demonstrates increasing autonomy preparing reports based on case material. • Accurately administers, scores and interprets test results. 	
<p>Required training/experiential activities to meet elements</p>	<ul style="list-style-type: none"> • Completion of 7 psychological integrated assessment batteries, at least of 3 of which are comprehensive assessment batteries and 4 are screening batteries. • Attend and participate in assessment didactics. • Present testing results to referring clinicians, treatment teams, parents, program partners and clients in meaningful language to differing audiences. 	
<p>How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.</p>	<p>How outcomes are measured:</p> <ul style="list-style-type: none"> • Weekly assessment supervision • Client contact hours for assessment as tracked on weekly log of activities • Participation in assessment didactics • Supervision of administration, scoring and interpretation • Review of written reports • Live supervision of feedback of assessment results • Initial orientation assessment of competency based evaluation. 	<p>Evaluation tool and self-study location:</p> <ul style="list-style-type: none"> • Didactic Participant rating form (Standard II.A.1-2 uploaded document) • Live supervision feedback (Standard II.A.1-2 uploaded document) • Assessment of Intern Performance (Intern Manual, pg. 55, Standard II.A.1-2 uploaded document) • Quarterly Evaluation (Standard II.A.1-2 Uploaded document)
<p>Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.</p>	<ul style="list-style-type: none"> • Minimum rating of “3 – <i>Intermediate Internship</i>” at mid-year and “4 – <i>High Internship/Mastery</i>” at year-end indicating satisfactory ratings on the bi-annual assessment of intern performance rating forms. • 100% accuracy of scoring for all testing forms by year’s end as evaluated by supervisor review of test instruments. • Minimum rating of “3 – <i>Intermediate Internship</i>” at mid-year and “4 – <i>High Internship/Mastery</i>” at year-end indicating satisfactory ratings on Training Participation Rating Form 	

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Competency:	<i>(vii) Intervention</i>
Elements associated with this competency from IR C-8 I	<ul style="list-style-type: none"> • 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.
Program-defined elements associated with this competency (if applicable)	<ol style="list-style-type: none"> 1. Accurately and independently assess and conceptualize client needs considering larger life context including diversity issues. 2. Provide therapy services including: intake assessment, individual therapy, group therapy, family therapy, crisis intervention, treatment planning, case management, discharge planning and documentation of services. 3. Proficiency in theories of child and adolescent psychology and emerging adults as applicable, and working with emotionally dysregulated and traumatized youth.
Examples of Competency Benchmarks	<ul style="list-style-type: none"> • Develops rapport and relationships with wide variety of clients taking into account the larger life context, including diversity issues. • Conceptualizes cases independently and accurately. • Independently selects intervention(s) appropriate for the presenting issue(s) and cultural identification. Independently and effectively implements a range of intervention strategies appropriate to practice setting client treatment needs. • Uses good judgment about unexpected issues, such as crises, use of supervision, confrontation. • Effectively delivers interventions. • Independently identifies problem areas and makes a diagnosis. • Terminates treatment successfully. • Allows, enables, and facilitates the client’s exploration and expression of difficult issues.
Required training/experiential activities to meet elements	<ul style="list-style-type: none"> • Minimum of 15 client contact hours per week. • Treat children, adolescents, young adults and their families presenting with a wide variety of psychological problems.

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	<ul style="list-style-type: none"> • Participate in bi-weekly rounds presentations. • Participate in weekly individual and group supervision. • Participate in weekly didactics and other intervention trainings for treatment of children, adolescents, young adults and their families. • Utilize clinical databases, clinical dashboards and outcome tools to identify and measure effectiveness of interventions. • Documentation of clinical services. • Consultation group attendance as appropriate. 	
<p>How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.</p>	<p>How outcomes are measured:</p> <ul style="list-style-type: none"> • Tracking of client contact hours. • Review of documentation of clinical services. • Supervisor review of implementation of interventions. • Review of participation in rounds, didactics and trainings. • Review of program evaluation tools by supervisor in group supervision. • Initial orientation assessment of competency based evaluation. 	<p>Evaluation tool and self-study location:</p> <ul style="list-style-type: none"> • Clinical Services notes (Standard II.A.1-2 uploaded document) • Supervision logs (Standard II.A.1-2 uploaded document) • Assessment of Intern Performance (Intern Manual, pg. 55, Standard II.A.1-2 uploaded document) • Quarterly Evaluation (Standard II.A.1-2 Uploaded document) • Live supervision evaluation form (Standard II.A.1-2 uploaded document) • Rounds participation form (Standard II.A.1-2 uploaded document) • Participation rating form for didactics and other trainings (Standard II.A.1-2 uploaded document) • Clinical dashboard printout (Standard II.A.1-2 uploaded document)
<p>Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.</p>	<ul style="list-style-type: none"> • Minimum rating of “3 – <i>Intermediate Internship</i>” at mid-year and “4 – <i>High Internship/Mastery</i>” at year-end indicating satisfactory ratings on the bi-annual assessment of intern performance rating forms. • Minimum rating of “3 – <i>Intermediate Internship</i>” at mid-year and “4 – <i>High Internship/Mastery</i>” at year-end indicating satisfactory ratings on live supervision and rounds participation form • Satisfactory rating on Clinical Dashboard printout 	

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	<ul style="list-style-type: none">• Minimum rating of “3 – <i>Intermediate Internship</i>” at mid-year and “4 – <i>High Internship/Mastery</i>” at year-end indicating satisfactory ratings on Participation rating form for didactics and trainings.
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Competency:	<i>(viii) Supervision</i>
Elements associated with this competency from IR C-8 I	<ul style="list-style-type: none"> • Apply supervision knowledge in direct or simulated practice with psychology trainees, or other health professionals. Examples of direct or simulated practice examples of supervision include, but are not limited to, role-played supervision with others, and peer supervision with other trainees.
Program-defined elements associated with this competency	<ol style="list-style-type: none"> 1. Providing feedback to peers regarding peers' clinical work in context of group supervision or case conference or consultation group. 2. Openness and responsiveness to supervision, appropriate self-disclosure, engagement in the self-reflective process. 3. Provide feedback to supervisor regarding supervision process. 4. Ability to receive constructive criticism and make effective use of constructive criticism; engage in professional reflection about one's clinical relationships with supervisor or other staff, as well as relationships with clients. 5. Reflection and knowledge of the role of diversity in the supervision relationship. 6. Command and application of relevant ethical, legal and professional standards and guidelines when providing supervision services. 7. Articulate a philosophy or model of supervision and reflect on how model is applied in practice, including contextual, legal and ethical perspectives. 8. Understanding of use of self as a therapist, as it relates to countertransference. 9. Demonstrate understanding of complexity of supervisors' role in ethical, legal and contextual issues. 10. Knowledge of procedures and practices of supervision including preparation of agency and state board of psychology required paperwork for supervision agreement. 11. Understanding of the developmental model of supervision.
Examples of Competency Benchmarks	<ul style="list-style-type: none"> • Elicits evaluation from supervisor about supervisory relationship and uses feedback to improve quality of supervision. • Articulates how supervisory relationships may enhance the development of supervisees and their clients. • Working with program staff and how they conceptualize cases. • Utilizes supervision effectively and appropriately.

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<p>Required training/experiential activities to meet elements</p>	<ul style="list-style-type: none"> • Participate in individual and group supervision. • Provide minimum of 15 hours weekly of client contact and services. • Attend didactic on supervision. • Documentation of clinical services provided. • Provide feedback and coaching to milieu staff and other trainees. • Co-facilitate or facilitate program specific meetings. 	
<p>How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.</p>	<p>How outcomes are measured:</p> <ul style="list-style-type: none"> • Supervisor review of progress in both group and individual meetings. • Ratings of participation in didactics. • Weekly review of progress by training committee. • Review of Documentation of clinical services by supervisor. • Use of supervision agreement. • Review of service notes. • Ratings in rounds. • Initial orientation assessment of competency based evaluation. 	<p>Evaluation tool and self-study location:</p> <ul style="list-style-type: none"> • Assessment of Intern Performance (Intern Manual, pg. 55, Standard II.A.1-2 uploaded document) • Quarterly Evaluation (Standard II.A.1-2 Uploaded document) • Supervision log (Standard II.A.1-2 uploaded document) • Participant Rating form (Standard II.A.1-2 uploaded document) • Live supervision rating form (Standard II.A.1-2 uploaded document) • Weekly log of training committee (Standard II.A.1-2 uploaded document) • Supervisor agreement (Standard II.A.1-2 uploaded document) • Clinical service notes (Standard II.A.1-2 uploaded document)
<p>Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.</p>	<ul style="list-style-type: none"> • Minimum rating of “3 – <i>Intermediate Internship</i>” at mid-year and “4 – <i>High Internship/Mastery</i>” at year-end indicating satisfactory ratings on the bi-annual assessment of intern performance rating forms. • Minimum rating of “3 – <i>Intermediate Internship</i>” at mid-year and “4 – <i>High Internship/Mastery</i>” at year-end indicating satisfactory ratings on the Live supervision rating form. • Progress noted on weekly log • Successful completion of service notes 	

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Competency:	<i>(ix) Consultation and interprofessional/interdisciplinary skills</i>
Elements associated with this competency from IR C-8 I	<ul style="list-style-type: none"> • Demonstrate knowledge and respect for the roles and perspectives of other professions. • Apply this knowledge in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior.
Program-defined elements associated with this competency (if applicable)	<ol style="list-style-type: none"> 1. Recognizing when to consult with a licensed supervisor on legal and ethical issues. 2. Systematically initiates collaboration successfully with other relevant partners. 3. Awareness of role of diversity in consultation. 4. Serve in a leadership role on multi-disciplinary interagency teams and training activities. 5. Understand and appreciate the role of psychologists in impacting larger systems as a leader and manager. 6. Understanding one's scope of practice and its limits.
Examples of Competency Benchmarks	<ul style="list-style-type: none"> • Ability to articulate different forms of consultation (e.g., mental health, educational, systems, advocacy). • Demonstrates ability to gather information necessary to answer referral question. • Prepares clear, useful consultation and recommendations to all appropriate parties. • Provides verbal feedback to consultee of results and offers appropriate recommendations. • Accurately matches professional role function to situation. • Respectful of the beliefs and values of colleagues even when inconsistent with personal beliefs. • Ability to elicit feedback about their own communication and interpersonal skills. • Appropriately addressing any difference in opinion (i.e., going to the person first, then supervisor).
Required training/experiential activities to meet elements	<ul style="list-style-type: none"> • Weekly supervision to review progress. • Participation in weekly clinical department meetings, rounds, and other professional and interagency trainings and meetings. • Lead multidisciplinary treatment team meetings. • Consistent conduct of self in a professional manner across settings and situations. • Regularly follow up with communication between team members.

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	<ul style="list-style-type: none"> • Adjust use of language to fit audience when imparting psychological formulations and other helpful psychological concepts to help team members understand sources of youth’s symptoms and behaviors. • Provides testing feedback to team. 	
<p>How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.</p>	<p>How outcomes are measured:</p> <ul style="list-style-type: none"> • Supervisor review of performance in team meetings, cottage meetings and interagency meetings. • Ratings forms for attendance and participation in the weekly didactics. • Rounds presentation. • Timeliness. • Timely responsiveness to the team. • Effective communication with the team. • Initial orientation assessment of competency based evaluation. 	<p>Evaluation tool and self-study location:</p> <ul style="list-style-type: none"> • Supervision log (Standard II.A.1-2 uploaded document) • Diversity Experience log (Standard II.A.1-2 uploaded document) • Participant Rating Form (Standard II.A.1-2 uploaded document) • Assessment of Intern Performance (Intern Manual, pg. 55, Standard II.A.1-2 uploaded document) • Quarterly Evaluation (Standard II.A.1-2 Uploaded document)
<p>Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.</p>	<ul style="list-style-type: none"> • Minimum rating of “3 – <i>Intermediate Internship</i>” at mid-year and “4 – <i>High Internship/Mastery</i>” at year-end indicating satisfactory ratings on the bi-annual assessment of intern performance rating forms. • Record of attendance at interagency trainings and meetings 	