SVPS Clinical Psychology Doctoral Internship Program

Training Program Curriculum Overview

At Shared Vision Psychological Services, Inc. (SVPS), one of our primary initiatives is to enhance the growth of the next generation of caring professionals in our field by offering wide-ranging, hands-on experience providing treatment to the clients we serve. Relying on a comprehensive array of psychodynamic and developmental theories, the Clinical Psychology Doctoral Internship Program at SVPS is a full-time (40-45 hours per week), 12-month long program for qualified trainees from clinical psychology graduate school programs, which affords clinicians-in-training opportunities to provide an extensive blend of therapeutic, diagnostic, and consultative services to children, adolescents, adults, and families in our outpatient professional setting. Our clinic fosters professional development through balanced, comprehensive supervision that affords consistent guidance, encouragement for self-reflection and awareness, and support for increased autonomy and growth. The established Clinical Training Program at SVPS maintains the utmost attention to current literature and empirical research, considerations for individual diversity, effective multidisciplinary collaboration, and professional ethics. We strive to provide the highest quality training environment and rich clinical opportunities that propel our doctoral trainees into creative, unique, and fulfilling careers in clinical psychology.

Clinic Overview

SVPS is a not-for-profit organization made up of Clinical Psychologists who have come together because we share the same vision: to offer support and healing within a compassionate environment that strives to make patients feel comfortable, encouraged, and understood. We work side-by-side with patients and their families to help reach understanding, strengthen resilience, and experience hope. SVPS provides the most current methods of clinical assessment and treatment to optimally serve the needs of children, adolescents, adults, couples, families, educational systems, community liaisons, and other health care providers, promoting the mental health and wellness of all members of our community.

Further, SVPS is strongly invested in providing superior training opportunities to the next generation of developing professionals in the field of psychology, providing training, supervision, and consultation to doctoral and post-doctoral clinicians and staff alike, and maintaining an unwavering commitment to continued professional and organizational development. Our staff clinicians all hold doctoral degrees in clinical psychology, each clinician-in-training is degreed at the master’s level, and all supervisory staff are licensed by the state of Illinois.

Our specialized services include:

**Therapeutic Services** – Individual Therapy, Play Therapy, Couples Therapy, Family Therapy, Parent Guidance, Group Therapy, DIR Floortime (Developmental, Individual Difference, Relationship-based model), Parenting Workshops, Multidisciplinary Treatment Consultation


**Special Services** – Circle of Security Parenting Education Groups, Developmental & Special Needs Psychological Services, Executive Functioning Seminars & Coaching, Pre- and Post-Adoption Psychological Services, Social Skills Groups for Kids & Teens, Adult Stress Management Groups, Program Development & Evaluation, Outcome Research, Consultation to Professionals, and Doctoral and Post-Doctoral Training in Clinical Psychology

**Community Services** – Consultation to Schools, Community Presentations, Outreach, and Professional Training Initiatives
One-Year Full Time Requirement

The SVPS Clinical Psychology Doctoral Internship is an APA-accredited, full-time training program that is 12 months in length, annually beginning and ending during the first week in July. To achieve successful program completion, doctoral interns are expected to work 40-45 hours per week, and are required to accumulate a minimum of 2,000 hour of work, and at least 750 of these hours must be provision of direct service. Doctoral interns receive 12 paid vacation/sick/personal days, as well as 9 paid national holidays. If a Doctoral Intern is unable to complete the required program hours due to illness or some other unexpected circumstance, he/she may petition for an extension of the training experience beyond the scheduled completion date; the SVPS Training Committee will make decisions regarding extensions of the training year on case-by case basis.

Program Philosophy, Objectives, and Training Model

Educational Philosophy and Training Model:
The educational philosophy of the SVPS Clinical Psychology Doctoral Training Program is based on a Practitioner-Developmental-Apprentice model. This model is based on a training mission emphasizing direct clinical practice consistent with the tradition of professional psychology training in the United States (practitioner), facilitating the transition from Doctoral Intern to professional psychologist (developmental), and providing consistent guidance for quality clinical service delivery, as well as personal and professional growth (apprentice). Taken together, each of these categories builds upon a Doctoral Intern’s prior training in psychology and provides a training experience that is sequential, cumulative, and graded in complexity. The SVPS Doctoral Clinical Psychology Internship Program is carefully planned to sequence both learning activities and clinical deliverables related to the practice of professional psychology within our outpatient clinic. In an effort to ensure that doctoral interns are afforded a depth and breadth of professional development experiences in their time as valued clinicians at our organization, all training activities run throughout the duration of the training year.

In order to support the overarching goals of our Clinical Psychology Training Program, our year-long curriculum includes many clinically diverse components. Doctoral interns provide a broad range of treatment services at our outpatient clinic, including play therapy, individual psychotherapy, family psychotherapy, group psychotherapy, couples therapy, and parent guidance services. In addition, Doctoral Interns conduct a minimum of six comprehensive diagnostic evaluations incorporating psychological, neuropsychological, and developmental facets of assessment. On a weekly basis, doctoral interns assume leadership roles in our clinic’s intake department, as well as participate in individual clinical and diagnostic supervision, group clinical and diagnostic supervision, and didactic and experiential seminars that include rotating clinical topics, case presentations, and trainings emphasizing the integration of professional literature and clinical practice. They also participate in a bi-weekly Clinical Reading Group, engage in group psychotherapy peer mentorship opportunities, as well as clinic-wide didactic, experiential, and consultative training activities alongside clinical staff members. Doctoral Interns attend monthly meetings with the Director of Clinical Training, and quarterly Professional Development Training & Consultation Meetings facilitated by the SVPS founder & CEO. Additionally, SVPS offers specialized programming in which doctoral interns are encouraged to engage, including but not limited to: Developmental & Special Needs Services, Adopt-Adapt-Attach, School & Community Outreach, Group Therapy Programming, Bilingual Services, and Research and Professional Development.

Education and Training Objectives:
The Developmental-Practitioner-Apprentice model serves as a foundation of the SVPS Clinical Training Program educational philosophy. By the end of the internship training year, each Doctoral Intern is expected to demonstrate an advanced level of proficiency in each of our related training goals objectives, and competencies as follows:

Goal #1: To facilitate the Doctoral Intern’s clinical skill development in preparation for an entry-level position as a professional clinical psychologist. Related objectives for this goal include but are not limited to the following:
Objective 1.1 for Goal #1: To develop knowledge and skills in the area of psychological assessment and evaluation. Assessment and evaluation competencies involve the ability to provide ongoing client assessment throughout each phase of the treatment process, as well as the ability to conduct formal psychological evaluations.

**Competencies Expected:**
1. Devises and/or clarifies reason(s) for referral and relevant background history through discussions with the referral source, client, and/or other collateral contacts, as well as via record reviews.
2. Establishes rapport and positive working alliance with assessment clients & gathers relevant information in the clinical interview while utilizing appropriate diagnostic interviewing techniques.
3. Discusses the reliability and validity of various assessment measures;
4. Effectively selects appropriate assessment measures to answer referral question(s);
5. Appropriately administers, scores, and interprets psychological instruments consistent with the needs of the client and the Doctoral Intern’s level of training;
6. Gathers adequate and meaningful information from multiple sources through multiple methods (e.g., behavioral observation, chart review);
7. Appropriately identifies possible problem areas & offers differential diagnoses in light of client’s strengths and resources, as well as demonstrates knowledge and familiarity with using the DSM-V;
8. Conceptualizes and integrates assessment data in a contextually adept manner;
9. Case conceptualization clearly informs diagnosis, recommendations, and treatment planning;
10. Thoughtful recommendations are offered and include empirically supported treatments, when applicable, and feedback sessions are conducted in a timely and sensitive manner.
11. Assessment reports and other clinical documentation are integrative, organized, and grammatically correct.

Objective 1.2 for Goal #1: To develop and show competence in a range of therapeutic interventions. Therapeutic intervention competencies involve demonstrated skills and proficiency in those activities related to direct clinical service for the purpose of treatment for clients and their families. These interventions involve activities that improve client functioning through psycho-education, case management, psychotherapy, and coordination with other service providers.

**Competencies Expected:**
1. Accurately tracks meaning of therapeutic communications and develops appropriate case conceptualizations;
2. Forms & implements appropriate treatment planning based upon the unique and evolving needs of clients within the context of individual, group, and/or family therapy;
3. Possesses reflective self-awareness and exercises reflective functioning within therapy sessions;
4. Demonstrates knowledge of theories of intervention and their related techniques;
5. Uses therapeutic techniques that are appropriate for the client given age, levels of intellectual and emotional functioning, and cultural background;
6. Effectively communicates clinical recommendations to parents and demonstrates coordination with other service providers/community resources;
7. Demonstrates awareness & incorporation of diversity factors/individual differences into treatment approach & interventions;
8. Addresses factors influencing/disrupting the treatment frame appropriately;
9. Accurately assesses clinical risks;
10. Accurately responds to risk issues to stabilize clients or link them to higher level of care;
11. Demonstrates efficacy with a variety of diagnostic presentations.

Objective 1.3 for Goal #1: To demonstrate the ability to value and form quality therapeutic relationships with a diverse array of clients. While SVPS promotes and supports the use of a range of specific theories of interventions and their related techniques, the establishment and maintenance of quality therapeutic relationships is viewed as the foundation of effective service delivery.

**Competencies Expected:**
1. Communicates respect and establishes positive alliances & rapport with a range of diverse clients;
2. Communicates respect and establishes positive alliances & rapport with parents and/or treatment collaterals;
3. Demonstrates an awareness of and maintains appropriate, ethical treatment boundaries;
4. Successfully identifies and address ruptures and/or strains in working alliances;
5. Implements a thoughtful and professional termination process at the conclusion of therapy;
6. Evidences a collaborative, empathic attitude toward others and an appreciation for individual differences;
7. Forms therapeutic relationships with individuals at various ages and presenting concerns;
8. Responds appropriately to the client’s developmental process in treatment and adjusts therapeutic approach and goals according to clients’ needs.

**Objective 1.4 for Goal #1:** To demonstrate a commitment to the application of scientific research to clinical practice. The application of scientific research to clinical practice competency relates to the Doctoral Interns’ ability to pursue and integrate information from the literature that is relevant to their clinical cases and training at SVPS.

**Competencies Expected:**
1. Pursues relevant information in professional journals and books;
2. Discusses and explores with supervisors, colleagues, and peers how newly discovered and/or other empirical information could be applied and integrated into clinical practice;
3. Constructively and critically evaluates information in published research articles prior to incorporating the findings into clinical practice, as well as case presentations.

**Objective 1.5 for Goal #1:** To develop and show competence in consultation and clinic professional development activities. Consultation competencies involve collaborative interactions with colleagues, as well as professionals in the community for the purpose of imparting knowledge and expertise on an identified problem area, topic, or clinical issue. Consultation is considered an intervention process for either identified individual(s) or an organization in which the Doctoral Intern does not have direct responsibility for the outcome or process of change.

**Competencies Expected:**
1. Demonstrates willingness and initiative to facilitate in-service training presentation for agency clinicians and trainees on a topic of expertise;
2. Conducts presentations in an informed, organized, professional manner and within suggested guidelines;
3. Appropriately gears presentations and seminars to the needs and level of understanding of the audience;
4. Actively pursues and maintains areas of specialization relevant to the needs of the clinic. This can be accomplished by consulting experts, supervisors, or the literature;
5. Provides consultation, information, and/or presentations to individuals within the clinic and in the community in a “user” friendly way and in a manner that is timely and courteous;
6. Provides useful, thorough, and clinically thoughtful consultation to colleagues within the clinic and/or professionals in the community.
7. Recognizes personal limitations in regards to knowledge and expertise when consulting and/or presenting;
8. Demonstrates willingness to share audiotapes, videotapes, and/or live observation with supervisor(s), peers, and/or other staff members as deemed appropriate and with client permission;
9. Actively participates in seminars, meetings, and activities provided by the clinic.

**Objective 1.6 for Goal #1:** To develop and show competence in the use of supervision, within a mentorship role in working with Advanced Externs, and in a leadership role within the clinic at large. These competencies in clinical training relate to the Doctoral Interns’ commitment to ongoing clinical training services to all clinicians at SVPS, as well as service providers from the community.

**Competencies Expected:**
1. Communicates an openness and commitment to self-evaluation, learning, and professional development;
2. Appropriately seeks out supervision and consultation, while recognizing the professional boundaries of these relationships;
3. Demonstrates an openness to supervisory feedback and an aptitude to integrating and implementing supervisory feedback into clinical practice;
4. Evidences an awareness and responsiveness to personal strengths and limitations;
5. Displays consistent effort and evidence toward growth and rapport within supervisory relationships;
6. Brings current and relevant case materials to supervision and engages actively in the supervisory process;
7. Displays a developmentally appropriate capacity for sound judgment with minimal supervision in clinical practice;
8. Utilizes supervision to explore personal reactions to clients and how these reactions may be impacting therapeutic relationships;
9. Shares areas of concern related to training experiences with supervisor and, as appropriate, with colleagues.
10. Demonstrates the capacity to assume a mentorship/leadership role amongst peers within the training cohort.
11. Conducts self professionally and constructively in the process of interviewing prospective internship candidates.

Goal #2: To enhance the Doctoral Intern's self-awareness and understanding, critical thinking, attitudes, and broader professional skills and conduct necessary for effective, ethical practice as a clinical psychologist. Related objectives for this goal include but are not limited to the following:

- **Objective 2.1 for Goal #2:** To demonstrate broad personal qualities that directly impact professionalism across all areas of functioning as a clinician. These areas of competency are recognized as interfacing with each training goal and objective.

  **Competencies Expected:**
  1. Produces quality and clearly written communications and reports;
  2. Produces quality and clear verbal communications;
  3. Demonstrates the ability to formulate inferences and hypotheses to guide work;
  4. Demonstrates thoughtful evaluation of one's own thinking process;
  5. Displays willingness to reflect before taking professional action;
  6. Differentiates between personal capabilities for independent work versus the need for guidance from others;
  7. Demonstrates initiative on case assignments and special projects.

- **Objective 2.2 for Goal #2:** To demonstrate awareness of one's personal identities (e.g. race, ethnicity, age, social class, religion, gender, sexual orientation, etc.), as well as to demonstrate a commitment towards development and competency in the ability to incorporate diversity factors and individual differences into clinical work. Diversity competencies relate to the Doctoral Interns' ability to show respect, appreciation, and understanding for the cultural and/or individual differences of clients, colleagues, and peers.

  **Competencies Expected:**
  1. Demonstrates awareness of personal cultural and other diversity factor biases, values, assumptions and the impact of these on relationships with clients;
  2. Demonstrates sensitivity to cultural differences/diversity factors as they impact outcomes related to assessment, treatment, and consultation;
  3. Seeks relevant information, knowledge, and/or consultation pertaining to cultural issues and individual differences as indicated by a case;
  4. Addresses any issues and personal reactions to cultural and individual differences in supervision.

- **Objective 2.3 for Goal #2:** To demonstrate knowledge and application of the APA Ethics Code, as well as the level of professional conduct associated with that of a clinical psychologist. Professional conduct competencies relate to the Doctoral Interns' ability to conduct oneself in a manner conducive to forming and maintaining meaningful working alliances with colleagues, peers, supervisors, service providers within the community, and professionals from other disciplines. These competencies also relate to the Doctoral Interns' ability to conduct oneself in a manner that promotes personal and professional growth.

  **Competencies Expected:**
  1. Expresses interest in and ability to establish positive working relationships with colleagues and other professionals;
  2. Establishes and maintains appropriate professional boundaries;
  3. Accepts personal responsibility;
4. Responds to phone calls and emails in a timely manner;
5. Completes necessary documentation in a prompt and professional manner;
6. Demonstrates a conscientious, energetic, and responsible approach to conducting professional activities;
7. Evidences appropriate knowledge of and adherence to the APA Code of Ethics, Other APA Related Specialty Guidelines, and familiarity with State Laws regarding mental health and confidentiality;
8. Exhibits professional and appropriate appearance and dress;
9. Responds appropriately to feedback from clients, peers, colleagues, and other professionals;
10. Arrives on time and comes prepared for scheduled seminars, meetings, and activities;
11. Appropriately obtains and utilizes information on community resources.

Program Structure and Training Methods

Sequence, Intensity, Duration, and Frequency of Training Activities:
The Practitioner-Developmental-Apprentice model of training at SVPS is accomplished through an extensive range of carefully planned and sequenced activities related to the practice of professional psychology. During the first four weeks of the training program, doctoral interns are afforded a structured orientation process, provided by a variety of the clinic’s staff members. Orientation activities include: frequent orientation meetings with the Director of Clinical Training; initial meetings with each direct assessment and therapy supervisor; meetings with various program directors and specialists within the clinic; initial orientation related to clinical issues of safety; procedures for initiating the treatment process with new cases; orientation around our training manual of clinic policies, procedures, and doctoral trainee expectations; training on specific agency documentation and forms; meetings with our Office Manager and Billing & Account Manager for general orientation to the office space and an introduction to our Health Insurance Portability and Accountability Act (HIPAA) compliant billing software; clinic HIPAA compliance training; and a more extensive introduction to our Assessment Clinic and Clinic Intake Department. These meetings help doctoral interns assimilate into their roles at clinic, as well as to begin in forming a training cohort with one another alongside our advanced externs. The mid-summer starting date for doctoral interns falls during a time of year when clinic activities are quieter, allowing for a gradual introduction into the agency, an increased availability of staff, and time for doctoral trainees to reach some level of comfort and acclimation to the clinic before the fall.

Assessment training is didactic and experiential, as well as equally broad and thorough. At the beginning of the training year, before there is a full therapy caseload, assessment training is largely didactic. Assessment orientation occurs during the first two weeks of internship, then quickly but gradually increases the intensity of clinical assessment challenges and requirements. Doctoral interns’ clinical skills are reviewed and augmented where necessary early on in the training year, and initial case assignments receive intensive supervision. By the end of the first trimester, around the fourth month of internship, direct training in all areas of the assessment process and all major assessment measures used in the clinic has been completed. Weekly, assessment-related didactic seminars shift to a group supervision format, with didactics primarily occurring within the context of doctoral trainee cases. Doctoral interns are exposed to a great deal of rehearsal and constructive critique through presenting data and case material to one another, as well as to the assessment supervisors. In this way, they improve: skills and comfort related to providing testing feedback sessions; collaboration with other health and mental health experts close to a case; and any future participation in conferences or other professional activities a trainee might pursue. The assessment training is designed to gradually taper towards the end of the year. Similarly, specialized seminars in Pediatric Neuropsychology, occurring later on in the training year, are designed in a sequential and cumulative manner, allowing doctoral interns to move from the scientific bases (theory and research) of this subject to the translation of this knowledge to clinical practice.

As doctoral interns are provided with extensive orientation to the organization during the initial phase of the training year, they are closely guided through their training activities alongside the provision of their diagnostic and therapy case assignments. Throughout this phase, supervisors are available to observe through a one-way mirror to oversee administration of testing, and by appointment to review scoring and interpretation of assessment measures. Likewise, supervisors may elect to join in live sessions or feedbacks, as well as to review audio/videotapes of sessions per client consent.
Case assignments are structured to provide direct clinical experiences that are graded in terms of case complexity, with a diverse range of referral questions, presenting difficulties, and areas of individual difference. Doctoral intern therapy caseloads are built gradually until approximately 50% of their time is spent providing direct service delivery. Weekly case summary updates are written by doctoral interns and provided to their respective primary therapy supervisors prior to scheduled supervisory meetings. Weekly case summary documentation requirements allow for careful, thorough supervisory review of case material and treatment progress, as well as afford both depth and breadth to individual therapy supervisory hours, which also incorporate a predominant focus on the Doctoral Intern's professional identity development. Additionally, Doctoral Intern Case Presentations are organized 3 times per year for each Doctoral Intern (every 4 months, at near the end of every trimester). Doctoral Intern Case Presentations require the Doctoral Intern to select one therapy client on which to present to SVPS staff, facilitating clinic-wide opportunities to follow the therapeutic development of the treatment case, along with the professional identity development of the doctoral intern, while further enhancing the accessibility of diverse supervisory and feedback opportunities available to Doctoral Interns across the training year.

Doctoral Interns meet weekly throughout the year to discuss clinical intake screenings and policy processes. Weekly clinic intake meetings are initially supervised by the SVPS Clinical Coordinator, who provides scaffolding opportunities for doctoral interns to gradually assume leadership positions in facilitating these team meetings while overseeing advanced externs in this aspect of their roles within the clinic. By the third month of internship, once doctoral interns transition into leadership roles within the clinic's intake department, they continue to receive supervision by the Clinical Coordinator as necessary for guidance and consultation, while further promoting their professional identity development. Weekly Clinical Group Supervision begins during the first month of the training year, as doctoral trainees build their individual caseloads. Weekly Clinical Group Supervision is designed as a process-oriented forum for doctoral interns and advanced externs to discuss any number of issues pertaining to their clinical work and professional identity development, which continues through to the end of the training year.

By the sixth month of the training year, doctoral interns continue to be closely supervised from construction of an initial psychological testing battery through completion of comprehensive, integrative assessment case reports, as well as with their therapy cases, through use of taping, written case summary updates, progress notes, and verbal reports of clinical work. As the year progresses, doctoral interns are expected to balance their need for guidance and support with a developing sense of confidence and competence in their clinical decisions and recommendations, as well as the assessment and therapeutic services they provide. It is our goal that doctoral interns come to feel integrated into the framework of the organization in a manner consistent with that of post-doctoral and staff clinicians. Doctoral interns attend all-staff meetings on a quarterly basis, participate in outreach and presentation opportunities as feasible within the balance of their internship requirements, and collaborate on treatment cases shared with staff. The input and feedback provided by doctoral interns on cases should be valued and respected by colleagues to the extent that as they approach the end of the training year, their absence will be clearly noticed and their presence significantly missed.

A doctoral intern's internship hours, including direct service, support hours, supervision, and training activities, are monitored weekly along with a progress summary of their therapy caseloads, through use of a Weekly Summary tracking sheet. This form is submitted to direct individual therapy supervisors, including the Director of Clinical Training, at the start of each week. Doctoral Interns are also required to complete an Internship Competency Checklist to monitor and verify their completion of required program components as their training year progresses.

The SVPS Clinical Training Performance Evaluation Form is completed collaboratively by direct individual diagnostic and therapy supervisors, including the Director of Clinical Training, at the end of every trimester of the clinical training year. To ensure thorough opportunities to assess and review developmental progress with supervisors across the training year, as well as to provide feedback regarding the internship experience, doctoral interns complete an Initial Self-Evaluation version of the SVPS Clinical Training Performance Evaluation Form at the start of their internship year, as well as a Mid-Year Self-Evaluation and an Outcome Self-Evaluation version of this form upon the completion of their internship.
Consistently folding the Practitioner-Scholar model upheld by many of SVPS’ local, affiliated graduate school programs into our Practitioner-Developmental-Apprentice model, our training activities are consistently supported by current research and clinical publications that are relevant to the work trainees are asked to complete during their training year. Beginning with their initial orientation to the clinic, the SVPS Clinical Training Program ensures that this supporting material is fully transparent to Doctoral Interns, and facilitates active discussion of current clinical or theoretical controversies and unresolved questions across all training activities. Orientation activities incorporate training in professional standards and ethics through a review of general facets of HIPAA compliance, as well as professional and ethical standards pertaining to clinician policies and procedures at SVPS. All scheduled training seminars, case presentations, and supervisory experiences maintain an emphasis on the integration of current research and literature with clinical practice, as well as strict adherence to professional standards and ethics codes.

Clinical Training Program Curriculum Components

Clinical Training in Psychological Intervention:
Doctoral interns are assigned 16-20 psychotherapy clients to work with throughout the year through a thorough intake process (conducted and placed by senior clinical supervisors) that prioritizes the trainee’s needs, skills, and areas of experience, interest, and expertise. A doctoral intern’s individual caseload typically consists of a combination of children, adolescents, adults, couples, families, and/or groups, with clients of varying backgrounds and clinical presentations. The SVPS parent guidance model provides caregivers with ongoing opportunities to receive feedback regarding their child/adolescent’s treatment progress and to enhance guidance towards supportive interventions they can utilize, in order to further alleviate presenting clinical concerns while strengthening parent-child attachment relationships and related treatment recommendations. As doctoral interns offer parent guidance to all parents/guardians of the individual child and adolescent clients on their caseloads, this framework ensures that doctoral interns receive abundant exposure to family-based work throughout the course of their training year. Doctoral interns also play a pivotal role in our clinic’s intake team, affording them the opportunity to screen and evaluate a great number of incoming clients with diverse presenting concerns. Aside from utilizing diagnostic skills in this process, doctoral interns often must discuss the nature and benefit of psychological interventions for the populations we serve. Additionally, through their leadership roles in the clinic’s intake department, interns must provide an assessment of the level of clinical care required from incoming patients. On the front lines, they are often making assessments and clinical decisions about the level of care needed as well as collaborations with and referrals to community resources and hospital programs. Weekly individual and group therapy supervision meetings involve careful attention to actual session material, allowing for intensive, case-specific learning opportunities and rich discussion about the integration of theoretical principles and professional research in clinical practice, as well as welcome and encourage opportunities for audio and videotape review of live sessions. Weekly case summary updates are written by doctoral interns and provided to their individual therapy supervisors prior to scheduled supervisory meetings to allow for careful, thorough supervisory review of case material and treatment progress, as well as to incorporate opportunities towards advancing the exploration and enhancement of the doctoral intern’s professional identity development.

Clinical Training in Diagnostic Testing and Evaluation:
The SVPS Assessment Clinic provides psychological and neuropsychological testing and consultation on an outpatient, fee-for-service basis. Requests for services are directed to a case coordinator, who tracks clinical paperwork (including insurance benefits). The Director of Psychological Assessment completes intake assessments and makes case assignments to doctoral interns, clinical staff members, and advanced externs. Specific services include: full battery psychological assessment, including assessment of global intellectual/cognitive functioning, assessment of executive functioning, psycho-educational testing, early childhood assessment, social and emotional functioning, differential diagnostic assessment, collaboration with the SVPS Developmental Clinic during assessment of autism spectrum disorders, and consultation on assessments done previously by professionals in the community. Assessments are requested in our clinic primarily for child and adolescent clients who present with a wide range of presenting problems and symptoms. We complete assessments on many clients referred through area pediatricians and child psychiatrists, through the SVPS outpatient psychotherapy clinic, and outpatient clients referred from the local
Doctoral interns are trained in the administration, scoring, and interpretation of a variety of neuropsychological, cognitive, academic, and social-emotional testing instruments. Each evaluation is individualized based on the reason for referral and its complexity. Doctoral interns are expected to write a minimum of 6 comprehensive reports and provide supervised feedback to the client and/or family as a part of the evaluation process. Finally, doctoral interns may have the opportunity to collaborate with Developmental Assessment staff members to assess for an autism spectrum disorder. Doctoral intern activities in this area also include report writing, assessment feedback sessions with families, and feedback to referring physicians and others. Given the amount of diagnostic supervision provided during the week, the doctoral interns are active participants in our assessment team. Doctoral interns become qualified to select, administer, score, interpret, and integrate test batteries through weekly individual supervision with a primary diagnostic supervisor, as well as two hours of diagnostic group supervision/training activities.

**Individual Supervision:**
Each doctoral intern receives 3 hours of weekly scheduled individual supervision from a Licensed Clinical Psychologist who is a member of the SVPS Training Committee: 2 hours of weekly supervision are provided for therapy cases, and 1 hour of weekly supervision is provided for assessment cases. Additional supervision is available as needed for therapy and assessment cases by senior clinical supervisors, clinic consultants, staff clinicians, and/or supervisors-in-training, and supplemental collegial supervision and case consultation takes place on a frequent, ongoing basis. While each doctoral intern has designated individual supervisors within the organization, our staff maintains an open door policy for our doctoral trainees, in an effort to promote staff-wide access for case collaboration and consultation whenever needed and/or desired.

**Group Supervision:**
On a weekly basis, in conjunction with advanced externs, doctoral interns receive 1 hour of group supervision for therapy cases facilitated by a licensed psychologist, as well as 2 hours of group diagnostic supervision/training (1 hour of Diagnostic Seminar/Case Conference and 1 hour of Group Diagnostic Supervision). Additionally, group supervision occurs consistently through the training cohort’s weekly participation in Clinic Intake and Professional Development meetings, Clinical Seminars, and Clinical Case Conference presentations. Doctoral interns are required to present case material during these training activities on an ongoing basis, in an effort to optimize the depth and breadth of supervision and consultation opportunities to which they are exposed, as provided by staff clinicians throughout their training year.

At all times trainees are carrying an active testing case, they participate in weekly, individual diagnostic supervision. Trainees also attend a weekly didactic and experiential seminar that incorporates group diagnostic supervision, rotating assessment topics, and assessment case presentations. In addition, a weekly, 90-minute diagnostic lab provides hands-on training, practice, and consultation in the administration, scoring, and interpretation of specific measures. Use of a two-way mirror allows opportunities for live demonstration of trainee skills to supervisor and peer feedback, as well as learning through observation of supervisor and peer testing. Trainees frequently have opportunities to formally present their cases to peers and supervisory staff, and guest workshops by experts in specific areas of assessment are also offered through the year during our Friday diagnostic lab time.

**Training in Clinic Intake & Professional Development:**
SVPS provides doctoral interns with opportunities to learn more about the professional side of the field through on-site exposure to clinic development and practice management. As a part of their professional development, doctoral interns are responsible for coordinating the intake process for all new therapy clients. This requires trainees to know how to effectively respond to clinic inquiries and new client phone messages in a timely manner left on the intake line. Doctoral interns lead the intake department’s efforts in returning new client calls to assess client risk and schedule first appointments. This provides doctoral interns with an opportunity to be the first to interface with new prospective clients. Training in how to determine level of risk, how to respond to challenging early interactions, and how to provide appropriate feedback to inquiries around clinic policies is an initial aspect of training at the start of their training year. Calls are organized through a “Brief Phone Intake Clinical Screening & Risk Assessment” process, which is outlined specifically to streamline new client contact information, insurance information, presenting problems and appropriateness of fit, all in an effort to manage new client anxiety and unease around initiating the
process of seeking support. Doctoral trainees meet together weekly throughout the year to discuss ongoing nuances of clinic intake policies, respond to incoming client questions, and gain clarification around insurance benefits and coordination of intake scheduling. These weekly meetings are facilitated by doctoral interns and supervised by the SVPS Clinical Coordinator.

**Clinical Seminar:**
Weekly didactic and experiential seminars are 1 hour in length and include rotating clinical topics, case presentations, in-services, and trainings that emphasize the integration of professional literature and clinical practice. Training materials and seminars provide emphasis on theoretically diverse approaches to treatment, effective family-focused interventions, approaches to parent consultation and guidance, factors of diversity and individual difference, and clinical approaches to emotional, social, neurobehavioral, eating, and learning disorders across the lifespan. Seminar leadership rotates across members of the SVPS staff throughout the training year. When seminars are didactic, a portion of seminar time is consistently allotted for discussion and group supervision of cases as they pertain to the topic. Seminar presentations are broken down into segments reflecting areas of expertise of each staff clinician. SVPS offers monthly advanced-level clinical training and consultation meetings specifically for doctoral interns, facilitated by senior staff, which enables them to build upon topics presented to the training cohort earlier that month.

**Monthly Reading Group:**
This group training experience is dedicated to better understanding psychodynamic ideas. It is also built to offer a basic understanding of the intersection between psychodynamic theory and social neuroscience as a way to explain brain-behavior relationships in the social and emotional arena. Reading that connects these findings to analytic ideas bridge the two disciplines. Implications for testing and psychotherapy are discussed. The Clinical Reading Group, facilitated for one hour every other week by a licensed clinical psychologist, is mandatory for Doctoral Interns and Post-Doctoral Fellows and optional for Advanced Externs.

**Clinical Case Conference:**
Once per month, in lieu of Clinical Group Supervision, doctoral trainees choose a piece of clinical work that raises conceptual and clinical issues of interest, and have 1 hour to present their case to their training cohort. Clinical Case Conferences are facilitated by a licensed staff psychologist, and offer trainees the opportunity to apply conceptual and theoretical issues to clinical practice. To achieve this task, doctoral trainees identify an issue of conceptual and clinical interest, consider this issue within their chosen theoretical framework, demonstrate how theory has guided their approach to treatment, and discuss how the case raises issues that inform theory and practice. Further, this experience offers doctoral trainees the chance to reflect upon personal challenges in their clinical work. Presentations can describe interventions at a global level, as well as more discrete process issues. To ensure that case presentations are informed by best practices and current clinical literature and research, doctoral trainees provide the case conference facilitator and training cohort with a copy of a journal article relevant to any of the clinical issues on which they will be presenting to review a week prior to the conference.

**Groups Consultation:**
This bi-monthly consultation group aims to provide Externs, Doctoral Interns, and Post-Doctoral Fellows with an opportunity to collaborate and consult with both their cohort and staff clinicians who participate in facilitating psychotherapy groups. The Group Consultation hour provides a space to check-in about administrative tasks, discuss program development, as well as process group dynamics.

**Director of Clinical Training Meetings:**
The Director of Clinical Training serves as one of two primary supervisors for each doctoral intern. While doctoral intern needs, strengths, and areas for continued growth and development are discussed with the Director of Clinical Training on a continual basis, the training cohort, including diagnostic externs, advanced externs, and doctoral interns, also meets together with the DCT once per month throughout the year for 30 minutes to 1 hour (often over brown bag lunch) to discuss relevant items related to training, administrative, research, and/or clinical issues, as well as to obtain feedback from doctoral trainees with regard to their training experiences at SVPS. During the first 2
months of the training year, these meetings occur with greater frequency and with longer duration, with an emphasis upon doctoral trainees’ acclimation to the SVPS Clinical Psychology Training Program. The SVPS CEO and/or Executive Clinical Director may also attend these meetings, affording doctoral trainees enhanced opportunities to interface with senior members of the clinic’s organizational leadership. Further, as doctoral interns are provided with opportunities to launch and/or engage in program development, community outreach, research, and professional development opportunities, these meetings are utilized to determine these areas of interest and potential for development and implementation throughout the year.

**Agency Trainings, Professional Development, Outreach, & Program Development:**
On an ongoing basis, doctoral interns are involved in all in-house workshops and seminars at no cost to them, and they are allotted funding to participate in professional development activities of interest outside of the clinic that are relevant to their training year. Several staff members host various consultation and reading groups for clinical enrichment, and doctoral interns are invited to participate in these activities alongside SVPS staff. SVPS also provides specialized supervision/consultation when necessary. Interns meet quarterly with the SVPS founder & CEO for professional development training and consultation.

Additionally, throughout the training year, opportunities for outreach to the community and to develop proposals for presentations at local, state and national levels may arise, and doctoral interns often participate in various workshops and presentations to area professionals, schools and parents alongside SVPS staff. Furthermore, our clinic provides a variety of psycho-educational presentations and materials for our clients in our waiting room. Doctoral interns are charged with creating, designing, and implementing these efforts each month, receiving administrative support from our office manager to do so. Doctoral interns are invited to initiate development of programming in their own unique areas of interest as applicable to the clinic’s needs and in a manner that responsibly balances their roles and responsibilities within the context of their internship experience (e.g., group development, in-service programming, assessment research, community outreach, and/or consultation opportunities).

**Didactic Seminar Topics Include:**

- Child & Adolescent Development & Psychopathology
- Providing Parent Guidance & Consultation
- Adult Psychotherapy & Psychopathology
- Eating Disorders: Conceptual & Treatment Issues
- Interpersonal Neurobiology
- Child Maltreatment: Ethical & Clinical Considerations
- Qualitative Analysis of Cognitive Measures
- The Developmental Impact of Parental Divorce
- Helping Clients & Families Coping with Medical Illness
- Learning Disabilities: Assessment & Intervention
- Clinical Risk Issues: Ethical Assessment & Intervention
- Mind-Body Connection: Psychology of Wellness
- Therapist Self-Care
- Elements of Mourning & Loss in Psychotherapy
- Treatment Transitions & Terminations
- Psychoanalytic/Psychodynamic Theory & Conceptualization
- Family Assessment & Therapy
- Utilizing School-Based Interventions
- Treatment with Developmental & Special-Needs Populations
- Play & Sandtray Therapies with Children & Adolescents
- Circle of Security Series
- Understanding & Interpreting the Rorschach
- Social Aggression
- Professional Ethics in Clinical Practice
- DIR Floor-Time
- Narrative Therapy
- Substance Abuse Assessment & Intervention
- Attachment Theory & Partner Violence
- Considerations for Diversity in Assessment & Treatment
- Negotiating Common Clinical Challenges
Training Program Curriculum Structure

Amount of Individual face-to-face supervision per week by licensed psychologists: 3 hours
• 2 hours per week of Individual Therapy Supervision, each hour provided by 2 distinct primary licensed clinical supervisors
• 1 hour per week of Individual Diagnostic Supervision, provided by primary licensed diagnostic supervisor

Amount of individual face-to-face supervision per week by other licensed health care providers: variable/as needed

Amount of group face-to-face supervision per week: 3 hours (average)
• 1 hour per week Group Clinical Supervision, provided by a licensed staff psychologist
• 1 hour per week Group Diagnostic Supervision, provided by licensed staff psychologist
• 11 hour per week supervision of Clinic Intake & Professional Development meetings, provided by licensed staff psychologist
• 1 hour per month Clinical Case Conference, facilitated by licensed staff psychologist (in lieu of Clinical Group Supervision)

Additional training activities: 3-5 hours (average)
• 1 hour, Diagnostic Seminar/Diagnostic Case Conference, provided by licensed staff psychologists
• 1 hour, Clinical Seminar, provided by staff clinicians (weekly for Doctoral Interns, bi-weekly for Advanced Externs)
• 1/2 hour per month, Director of Clinical Training Meeting
• Intern Case Presentations to SVPS Staff (3 times per year for each doctoral intern, in lieu of Clinical Seminar)
• 1 hour every other week, Clinical Reading Group (mandatory for Interns, optional for Advanced Externs), facilitated by licensed staff psychologist
• Quarterly, Intern Professional Development Training & Consultation Meetings with the SVPS CEO
• 8-week live observation of Circle of Security© Parenting Education Workshop
• SVPS Professional Development In-Service Presentation & Experiential Trainings (including but not limited to monthly SVPS Diversity Committee Events and as otherwise scheduled)

Estimated Average of Weekly Internship Hours Distribution: 40-45 hours/week
Direct Service Delivery: 20 hours (16-20 therapy clients; 6 diagnostic batteries)
Supervision & Training Activities: 10 hours
Professional Development & Support Activities: 10-15 hours
PRACTICA & ACADEMIC PREPARATION ELIGIBILITY REQUIREMENTS:

SVPS DOCTORAL INTERNSHIP ELIGIBILITY REQUIREMENTS

SVPS utilizes the AAPI Internship Application Form created by APPIC to verify intern applicants’ enrollment in an APA-accredited doctoral program in either clinical, school, or counseling psychology. Applicants are required to submit official graduate school transcripts as part of the application process. The application also requires that the AAPI Part I verifies eligibility from their academic Director of Training that the intern applicant has fulfilled all academic and practicum requirements to begin internship. If the AAPI Part I does not reflect this, then a separate letter from the Director of Training verifying eligibility is required.

Internship applicants must be enrolled in a Ph.D. or Psy.D. program in clinical psychology from an accredited university and have completed (or be in the process of completing) at least three years of supervised clinical work. Candidates from APA-approved doctoral programs are preferred. Applicants must have at least 1000 combined assessment/therapy practicum hours, as well as provide verification that their dissertation project will be finalized by the time they have completed their internship year. Previous clinical training experience working with children and adolescents, relevant graduate academic coursework in child and adolescent development and treatment, as well as an identified emphasis on a psychodynamic theoretical approach to clinical work is required. As SVPS specifically offers formal training from a psychodynamic lens, with a particular emphasis on attachment-based theories, only applicants who have had prior experience and/or are interested in acquiring a more extensive background working from these theoretical perspectives will be considered for review. Applicants with diverse backgrounds and experiences, including bilingual competencies in therapy and assessment, are encouraged to apply.

Further, a curriculum vita detailing clinically-relevant experiences is required as part of the application process. In reviewing an applicant’s curriculum vita, special attention is paid not only to clinical work, but also to additional experiences such as volunteering within the non-profit social service sector, and past leadership and/or teaching experiences. In addition, close attention is paid to the tables in the AAPI Part II that outline number of direct service hours (both therapy and assessment) provided and with what populations, as well as supervision and support hours received. Also, thoughtful consideration is paid to the quality of the applicant’s three letters of reference provided by graduate faculty members and/or clinical supervisors, with a particular focus on verifying an intern’s prior clinical training experiences, future professional interests, and the strength of the writer’s overall recommendation of the applicant.

Applicants are also required to submit a sample, de-identified psychological assessment report with their application. A minimum administration of 8 full psychological assessment batteries is required, with the incorporation of various testing instruments and assessment procedures to include an integration of diagnostic interviewing, self-report, intelligence, achievement, visual motor, objective, and projective measures. Experience with the administration and integration of the Rorschach in assessment report writing, as well as an interest and/or experience in Neuropsychological and/or Developmental assessment, is preferred and strongly encouraged.

Intern application packets are due annually on November 15th via the APPIC online application portal. Applicants are notified via email by December 15th as to whether or not they will be invited for an in-person interview. Should a preliminary phone interview be determined necessary by applicant reviewers for any interested applicants, this screening is scheduled to take place prior to the December 15th interview status notification deadline.
SVPS POLICY ON INTERN RECRUITMENT & SELECTION

Application Process
The following documents should be included in the doctoral internship application:
1. Resume/Curriculum Vitae
2. One writing sample of a full, de-identified psychological assessment report
3. Three letters of recommendation. These letters are preferably written by previous clinical supervisors, and/or by professors with extensive knowledge of the applicant’s clinical and academic strengths
4. Official graduate school transcripts
5. APPIC Application Packet with match number

*Complete applications must be received by November 15th*

Internship applicants will be notified via email as to whether or not they will be invited to interview. Applicants will be notified of interview status by December 15th. The SVPS Training Committee will review application packets, and selected applicants will be contacted via email to schedule an interview.

PLEASE NOTE: Given the clinic's location, access to a car/personal means of transportation is highly recommended for this internship site.

Interview Process
Phase I of the SVPS Doctoral Internship interview is conducted via telephone. During Phase II of the interview process, SVPS will host 3 different interview days for selected internship candidates. The interview day will consist of comprehensive rotating interviews in which applicants will meet with the majority of SVPS staff, as well as current interns. The on-site interview process lasts for approximately 2.5 hours, and applicants are provided with site informational materials, an interview agenda, and refreshments upon arrival. Once the interview process is complete, the SVPS Training Committee meets together to review applicant interviews and to rank order intern candidates. Currently, SVPS has 3 full-time internship positions available. Applicants are ranked and notified of internship offers in accordance with APPIC guidelines.

Respect for Cultural and Individual Differences
SVPS is committed to a policy of equal opportunity for all applicants for employment and training in a manner that is consistent with applicable local, state, and federal laws. Likewise, the SVPS Clinical Psychology Doctoral Internship Program is committed to promoting respect for cultural and individual diversity, and understanding human diversity is an integral component and developmental competency of the SVPS clinical training program. Our emphasis in this area of clinical experience is achieved through the clinic’s personnel policies, the training program’s didactic curriculum, the issues discussed and processed in supervision and training seminars, and the opportunities of working with the clinic’s diverse client population. In addition, SVPS has budgetary allowances for outside clinical consultation on a range of topics including issues of diversity and individual difference as necessary to enhancing the growth and expertise of our team of clinical psychologists and clinicians-in-training.

SVPS makes every effort to recruit intern candidates, graduate trainees, and staff from diverse backgrounds and with a diverse range of personal and professional experiences. In the spirit and support of our Equity and Inclusion Policy and our Policy on Harassment and Discrimination, SVPS does not discriminate on the basis of race, color, gender, sexual orientation, citizenship, cultural background, marital status, unfavorable military discharge, or any additional status protected in areas of staff hiring, assignment, promotion, or discipline.

In an effort to promote accessibility and reduce the risk of applicants incurring unnecessary costs of travel, phone screenings are completed by our internship selection committee. These screenings are completed prior to the collaborative decision-making process for which applicants will proceed to an internship selection interview at SVPS. In circumstances of financial strain, SVPS will arrange for an interview via Skype with our staff for those applicants who cannot afford the costs of travel associated with interviewing out of state.
Financial Assistance Policy

Stipend:
Interns will receive an annual salary of $23,000.00, as well as a pre-tax allocation to assist with the cost of Blue Cross Blue Shield health insurance coverage.

Overview of Benefits:
- 14 days paid personal/sick/vacation days
- 9 National Holiday days off
- Medical/Health Insurance Choice of PPO, HMO, or HSA plan
- Tax-Deferred Retirement Savings Account available
- Direct Deposit
- Participation in all in-house workshops and seminars free of charge
- Funds towards off-site professional development activities
- Coverage of specialized consultation/ supervision as indicated
What distinguishes the SVPS Advanced Doctoral Externship from the SVPS Clinical Psychology Doctoral Internship Program?

While SVPS interns and advanced externs matriculate together through the clinic’s comprehensive array of year-long training activities, the curricula for these training opportunities differ substantially with regard to goals, expectations, and level of training experiences.

The following definitions outline the overarching goals distinguishing our internship program from our advanced externship:

**SVPS Advanced Doctoral Externship:** a clinical training opportunity for doctoral graduate students advancing upon diagnostic and therapy practicum training years, which enhances their eligibility and readiness to apply and enter a year of clinical internship where they will be prepared to manage a full-time clinical caseload and related responsibilities with professionalism and sound clinical skill. The advanced externship year entails training in all indicated curriculum areas that facilitate the trainee’s gradual acquisition and application of theory to clinical practice.

**SVPS Doctoral Internship:** a clinical training opportunity for doctoral graduate students who have had a minimum of three years of prior training, which prepares interns for more complex case conceptualization, greater professional autonomy, and an advancement of skills that ensures eligibility and readiness to secure highly competitive post-doctoral fellowships. At the end of the internship year, competency measures that follow the intern-specific curriculum assess that the trainee is prepared to diagnostically assess and treat clinical populations at a level commensurate with a psychologist-in-training one year shy of independent state licensure. The internship year entails training in all indicated curriculum areas at an advanced level that enhances the intern's proficiency in application of theory to clinical practice and related capacity for professional autonomy.

As compared with an advanced externship level of training, our internship positions entail far more extensive and intensive expectations and training opportunities with regards to the following:

- Supervisory assignments: interns receive individual supervision in a manner that provides a higher level of support around professional development, and also allows more extensive opportunities to reach greater levels of expertise and cultivation of specific areas of interest/specialization
- Diagnostic & Therapy case assignments: advanced extern case assignments are distributed in a manner based upon assisting these trainees in gaining fundamentals to assessment and clinical work; in contrast, intern caseloads are assigned to afford opportunities to work with cases presenting with greater clinical complexity and comprehensive case management across multi-disciplinary systems, as well as inviting interns to develop caseloads that are tailored to their particular areas of interest and expertise, as well as in line with their desired professional development goals
- Eligibility requirements (see “SVPS Internship Eligibility & Recruitment Policy”)
- Required hours and on-site responsibilities (see “SVPS Policy on Trainee Responsibility”)
- Bi-weekly advanced-level clinical seminars and monthly advanced-level diagnostic seminars:
- Quarterly Intern Professional Development Meetings with the SVPS founder & CEO
- Clinical Reading Group (required for interns, optional for advanced externs)
- Leadership roles assumed within our clinic’s intake department (reference “SVPS Internship Curriculum”)
- Staff-wide intern case presentations (reference “SVPS Internship Curriculum”)
- Provision of professional development funds to secure interns’ attendance at desired off-site professional training events
- Opportunities to develop proposals for presentations at local, state, and national levels
- Participation in program development, psycho-educational, and outreach activities

Further, our training program has implemented a performance evaluation process and competency requirements that solidly distinguish the expectations of the full-time training experience of interns from our part-time advanced externship (see “SVPS Policies & Procedures Manual,” and “SVPS Due Process Policy” for minimum threshold achievement standards, as well as “SVPS Clinical Training Performance Evaluation,” and “SVPS Competency Checklist”).
While the same performance evaluation form is utilized for all doctoral trainees, varying minimum competency achievement thresholds are required, and only interns are required to complete initial self-evaluations, mid-year, and outcome self-evaluations, as well as to fulfill various, intern-level competency benchmarks prior to the completion of their internship year. Advanced externs will be asked to complete initial self-evaluations to help establish the frame of supervision at the start of the training year.

In order to best monitor our interns’ development throughout the training year, all individual supervisors complete clinical training evaluations at the end of every trimester. The evaluation is reviewed directly with the trainee in order to identify learning and training goals. Additionally, it is used to re-evaluate the initial self-evaluation completed by interns at the mid-point of the training year, and is also utilized in reference to the intern’s outcome evaluation that s/he completes at the conclusion of the training year. The Clinical Training Performance Evaluation Form includes a review of the intern’s performance in the following domains (please reference SVPS Clinical Training Performance Evaluation document for a review of competency-related objectives):

- General Policies & Procedures
- Assessment & Evaluation
- Clinical Development
- Quality of Therapeutic Relationships
- Application of Scientific Research to Clinical Practice
- Critical Thinking, Communication, Autonomy, & Initiative
- Diversity
- Professional Conduct
- Supervision
- Clinical Training, Consultation, and Development

The following rating scale is used to assess trainee development in each evaluation objective:

N/A = Not applicable and/or rater is unable to evaluate

1 = BELOW NOVICE LEVEL: The supervisee’s performance is consistent with that expected of a student who has no previous clinical training, and two or fewer semesters of graduate coursework in clinical psychology. Requires routine and intensive supervision, as well as remediation.

2 = NOVICE LEVEL: The supervisee is performing at the level expected of a trainee who is completing an initial training year. Requires routine and intensive supervision, as well as remediation in identified areas.

3 = INTERMEDIATE LEVEL: The supervisee is performing at the level expected of a trainee who is completing an intermediate training year. Routine supervision is required, and trainee requires additional guidance and oversight when faced with complex and novel situations.

4 = ADVANCED LEVEL: The supervisee is performing at the level expected of a trainee who is completing an advanced training year. Entry-level competency for postdoctoral practice has been attained in a many areas, but the trainee still requires focused supervision in a few domains.

5 = EMERGING PROFESSIONAL: Entry-level competency for postdoctoral practice has been attained in most domains. Supervisor provides overall management and oversight of the trainee’s activities; however, the focus and depth of supervision varies as needs warrant.

6 = PROFESSIONAL LEVEL: The supervisee is performing at the level expected of a postdoctoral clinician or higher. In general, supervisee is capable of functioning independently, with consultation, at a level of professional competence. However, supervisee continues to participate in regular supervision for ongoing oversight and growth.

* The minimum requirement for successful completion of doctoral internship is an average rating of at least Advanced Level (4) across areas of competency..
### Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program’s policies on intern selection and practicum and academic preparation requirements:

<table>
<thead>
<tr>
<th>PRACTICA &amp; ACADEMIC PREPARATION ELIGIBILITY REQUIREMENTS:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SVPS DOCTORAL INTERNSHIP ELIGIBILITY REQUIREMENTS</strong></td>
</tr>
<tr>
<td>SVPS utilizes the AAPI Internship Application Form created by APPIC to verify intern applicants’ enrollment in an APA-accredited doctoral program in either clinical, school, or counseling psychology. Applicants are required to submit official graduate school transcripts as part of the application process. The application also requires that the AAPI Part I verifies eligibility from their academic Director of Training that the intern applicant has fulfilled all academic and practicum requirements to begin internship. If the AAPI Part I does not reflect this, then a separate letter from the Director of Training verifying eligibility is required.</td>
</tr>
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</table>

Internship applicants must be enrolled in a Ph.D. or Psy.D. program in clinical psychology from an accredited university and have completed (or be in the process of completing) at least three years of supervised clinical work. Candidates from APA-approved doctoral programs are preferred. Applicants must have at least 1000 combined assessment/therapy practicum hours, as well as provide verification that their dissertation project will be finalized by the time they have completed their internship year. Previous clinical training experience working with children and adolescents, relevant graduate academic coursework in child and adolescent development and treatment, as well as an identified emphasis on a psychodynamic theoretical approach to clinical work is required. As SVPS specifically offers formal training from a psychodynamic lens, with a particular emphasis on attachment-based theories, only applicants who have had prior experience and/or are interested in acquiring a more extensive background working from these theoretical perspectives will be considered for review. Applicants with diverse backgrounds and experiences, including bilingual competencies in therapy and assessment, are encouraged to apply.

Further, a curriculum vita detailing clinically-relevant experiences is required as part of the application process. In reviewing an applicant’s curriculum vita, special attention is paid not only to clinical work, but also to additional experiences such as volunteering within the non-profit social service sector, and past leadership and/or teaching experiences. In addition, close attention is paid to the tables in the AAPI Part II that outline number of direct service hours (both therapy and assessment) provided and with what populations, as well as supervision and support hours received. Also, thoughtful consideration is paid to the quality of the applicant’s three letters of reference provided by graduate faculty members and/or clinical supervisors, with a particular focus on verifying an intern’s prior clinical training experiences, future professional interests, and the strength of the writer’s overall recommendation of the applicant.

Applicants are also required to submit a sample, de-identified psychological assessment report with their application. A minimum administration of 8 full psychological assessment batteries is required, with the incorporation of various testing instruments and assessment procedures to include an integration of diagnostic interviewing, self-report, intelligence, achievement, visual motor, objective, and projective measures. Experience with the administration and integration of the Rorschach in
assessment report writing, as well as an interest and/or experience in Neuropsychological and/or Developmental assessment, is preferred and strongly encouraged.

Intern application packets are due annually on November 15th via the APPIC online application portal. Applicants are notified via email by December 15th as to whether or not they will be invited for an in-person interview. Should a preliminary phone interview be determined necessary by applicant reviewers for any interested applicants, this screening is scheduled to take place prior to the December 15th interview status notification deadline.

<table>
<thead>
<tr>
<th>Does the program require that applicants have received a minimum number of hours of the following at time of application? If Yes, indicate how many:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Direct Contact Intervention Hours</td>
</tr>
<tr>
<td>Total Direct Contact Assessment Hours</td>
</tr>
</tbody>
</table>

Describe any other required minimum criteria used to screen applicants:

SVPS POLICY ON INTERN RECRUITMENT & SELECTION

The following documents should be included in the doctoral internship application:

1. Resume/Curriculum Vitae
2. One writing sample of a full, de-identified psychological assessment report
3. Three letters of recommendation. These letters are preferably written by previous clinical supervisors, and/or by professors with extensive knowledge of the applicant’s clinical and academic strengths
4. Official graduate school transcripts
5. APPIC Application Packet with match number

*Complete applications must be received by November 15th*

Internship applicants will be notified via email as to whether or not they will be invited to interview. Applicants will be notified of interview status by December 15th. The SVPS Training Committee will review application packets, and selected applicants will be contacted via email to schedule an interview.

PLEASE NOTE: Given the clinic’s location, access to a car/personal means of transportation is highly recommended for this internship site.

Interview Process Phase I of the SVPS Doctoral Internship interview is conducted via telephone. During Phase II of the interview process, SVPS will host 4-5 different interview days for selected internship candidates. The interview day will consist of comprehensive rotating interviews in which applicants will meet with the majority of SVPS staff, as well as current interns. The on-site interview process lasts for approximately 2.5 hours, and applicants are provided with site informational materials, an interview agenda, and refreshments upon arrival. Once the interview process is complete, the SVPS Training Committee meets together to review applicant interviews and to rank order intern candidates. Currently, SVPS has 3 full-time internship positions available. Applicants are ranked and notified of internship offers in accordance with APPIC guidelines.

SVPS is committed to a policy of equal opportunity for all applicants for employment and training in a manner that is consistent with applicable local, state, and federal laws. Likewise, the SVPS Clinical Psychology Doctoral Internship Program is committed to promoting respect for cultural and individual
diversity, and understanding human diversity is an integral component and developmental competency of the SVPS clinical training program. Our emphasis in this area of clinical experience is achieved through the clinic’s personnel policies, the training program’s didactic curriculum, the issues discussed and processed in supervision and training seminars, and the opportunities of working with the clinic’s diverse client population. In addition, SVPS has budgetary allowances for outside clinical consultation on a range of topics including issues of diversity and individual difference as necessary to enhancing the growth and expertise of our team of clinical psychologists and clinicians-in-training. SVPS makes every effort to recruit intern candidates, graduate trainees, and staff from diverse backgrounds and with a diverse range of personal and professional experiences. In the spirit and support of our Equity and Inclusion Policy and our Policy on Harassment and Discrimination, SVPS does not discriminate on the basis of race, color, gender, sexual orientation, citizenship, cultural background, marital status, unfavorable military discharge, or any additional status protected in areas of staff hiring, assignment, promotion, or discipline. In an effort to promote accessibility and reduce the risk of applicants incurring unnecessary costs of travel, phone screenings are completed by our internship selection committee. These screenings are completed prior to the collaborative decision-making process for which applicants will proceed to an internship selection interview at SVPS. In circumstances of financial strain, SVPS will arrange for an interview via Skype with our staff for those applicants who cannot afford the costs of travel associated with interviewing out of state.
### Financial and Other Benefit Support for Upcoming Training Year*

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount/Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Stipend/Salary for Full-time Interns</td>
<td>23,000</td>
</tr>
<tr>
<td>Annual Stipend/Salary for Half-time Interns</td>
<td>n/a</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program provides access to medical insurance for intern?</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trainee contribution to cost required?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Coverage of family member(s) available?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Coverage of legally married partner available?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Coverage of legally married partner available?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Coverage of domestic partner available?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Coverage of domestic partner available?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Hours of Annual Paid Personal Time Off (PTO and/or Vacation)</td>
<td>80</td>
</tr>
<tr>
<td>Hours of Annual Paid Sick Leave</td>
<td>32</td>
</tr>
<tr>
<td>In the event of medical conditions and/or family needs that require</td>
<td>Yes/No</td>
</tr>
<tr>
<td>extended leave, does the program allow reasonable unpaid leave</td>
<td></td>
</tr>
<tr>
<td>to interns/residents in excess of personal time off and sick leave?</td>
<td></td>
</tr>
<tr>
<td>Other Benefits (please describe):</td>
<td></td>
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<tr>
<td>Pre-tax allocation to assist with cost of insurance coverage,</td>
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<tr>
<td>tax-deferred retirement savings account available, direct deposit,</td>
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<tr>
<td>participation in all in-house workshops and seminars free of charge,</td>
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<tr>
<td>funds towards off-site professional development activities,</td>
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<tr>
<td>coverage of specialized consultation/supervision as indicated.</td>
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</table>

*Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table*
**Initial Post-Internship Positions**  
*(Provide an Aggregated Tally for the Preceding 3 Cohorts)*

<table>
<thead>
<tr>
<th>Setting</th>
<th>2014-2017</th>
<th>PD</th>
<th>EP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total # of interns who were in the 3 cohorts</td>
<td></td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree</td>
<td></td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Community mental health center</td>
<td></td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Federally qualified health center</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Independent primary care facility/clinic</td>
<td></td>
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<td></td>
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<tr>
<td>University counseling center</td>
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<tr>
<td>Veterans Affairs medical center</td>
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<tr>
<td>Military health center</td>
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<tr>
<td>Academic health center</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Other medical center or hospital</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychiatric hospital</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Academic university/department</td>
<td></td>
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</tr>
<tr>
<td>Community college or other teaching setting</td>
<td></td>
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</tr>
<tr>
<td>Independent research institution</td>
<td></td>
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</tr>
<tr>
<td>Correctional facility</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>School district/system</td>
<td></td>
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</tr>
<tr>
<td>Independent practice setting</td>
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<tr>
<td>Not currently employed</td>
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<td></td>
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</tr>
<tr>
<td>Changed to another field</td>
<td></td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Other: Outpatient Clinic</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unknown</td>
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</tr>
</tbody>
</table>

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