SVPS Clinical Psychology Doctoral Training Program

Doctoral Resident & Doctoral Extern Requirements

The SVPS Clinical Psychology Doctoral Training Program is 12 months in length, requiring 20-25 hours per week for Doctoral Externship, and 40-45 hours per week for Doctoral Residency Placement. A general breakdown of these hours per week, **not including support activities**, is as follows:

Doctoral Residency Weekly Hours:

- Therapy: 16 to 20 clients
- Diagnostic: 6 batteries per year (minimum)
- Training Activities: 9
- Individual Supervision: 3
- Professional Development & Support Activities: variable

Doctoral Externship Weekly Hours:

- Therapy: 8-10 clients
- Diagnostic: 3 batteries per year (minimum)
- Training Activities: 7
- Individual Supervision: 1-2
- Professional Development & Support Activities: variable

Year-Long Training Activities Include:

• **Amount of individual face-to-face supervision per week provided by licensed psychologists:** 2-3 hours

- 2 hours of Individual Therapy Supervision for therapy cases, each hour provided by 2 distinct primary licensed clinical supervisors (***1 hour for Doctoral Externs***)
- 1 hour of Individual Diagnostic Supervision, provided by primary licensed diagnostic supervisor (weekly for Doctoral Residents; when testing/once per month for Doctoral Externs)

• **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:** 5 hours (average)

- 2 hours Group Clinical Supervision per month, provided by licensed staff psychologist
- 1 hour Group Diagnostic Supervision/Diagnostic Lab, facilitated by licensed staff psychologists
- 1 hour per week supervision of Clinical Interviewing and Initiating Client Treatment meetings, provided by intake supervisor
- 1 hour every other week Supervision of Groups, facilitated by licensed staff psychologist
- 1 hour per month Clinical Case Conference, facilitated by staff clinicians (in lieu of Clinical Seminar)

• **Additional training activities:** (3-5 hours, average)

- 1 hour, Diagnostic Seminar/Diagnostic Case Conference, provided by licensed staff psychologists
- 1 hour, Clinical Seminar, led by staff clinicians (weekly for Doctoral Residents, as scheduled for Doctoral Externs)
- 1 hour per month, Director of Clinical Training Meeting
- 1 –2 hours per month, Equity Diversity and Inclusion Seminar (facilitated by staff clinicians)
- Doctoral Residency Clinical Case Presentations to SVPS staff (2 times per year for each Doctoral Resident, in lieu of Doctoral Resident-Only Clinical Seminar);
- 1 hour monthly, Early Career Supervision Consult Group, facilitated by staff psychologist (for Doctoral Residents only)
- Clinic-Wide Clinical Seminar Presentations (1x/year for Doctoral Residents & Doctoral Externs)
- 1 hour monthly, Clinical Reading Group, facilitated by staff clinicians (for Doctoral Residents only)

- 2 hours weekly Theory & Conceptualization Seminar: Treatment and Diagnostics with SVPS Founder & CEO and Supervisory Staff (as scheduled)
- 12-week Rorschach Course (in lieu of Diagnostic Lab)
- SVPS Professional Development In-service Presentation & Experiential Trainings (including but not limited to SVPS Diversity and Ethics events, and as otherwise scheduled)
- 8-week live observation of Circle of Security© Parenting Education Workshop (as available)

- Doctoral Residents have two individual clinical supervision hours per week, and one individual diagnostic supervision hour per week. Doctoral Externs will have individual clinical supervision once per week, and diagnostic supervision once per week when assigned a testing case (and otherwise once per month). Individual supervision hours are scheduled independently with assigned supervisors.
- Though days spent on-site are scheduled on an individual basis, all Tuesday, Wednesday & Friday training activities are mandatory and in-person. **Should extenuating circumstances necessitate a resident to miss a training activity, attend virtually, or leave a training activity early, permission and related make-up procedures must be requested from the Director of Clinical Training and the staff member facilitating the training.**
- Most clients are seen in the afternoon and evening hours to accommodate after-school and post-work hours. Therefore, doctoral residents & externs will be required to work at least two late evenings per week.
- Doctoral residents & externs should not need to arrive at the office prior to 9:00 am. On "late evenings", doctoral residents & externs should plan to hold office hours until between 8:00 – 8:15pm and be prepared to exit the clinic by 8:30pm. On those days, it is anticipated that doctoral residents & externs will arrive at the office late morning/early afternoon, and schedule more administrative functions in earlier parts of their day. On "early evenings", it is expected that doctoral residents & externs will arrive at the office earlier in the morning and stack hours with any morning clients (when assigned), and plan to leave the office no earlier than the 6pm hour. Please note that daily time of arrival at the office may depend upon scheduled intake responsibilities as necessary, as well as clinic needs per case assignment and office space availability. Likewise, it is important to remain flexible around hours on-site to accommodate client schedules and to fully build clinical caseloads; some days may be longer than 8 hours while others may be shorter.
- Should you require any alterations or changes to your schedule, (i.e. religious, medical, or other reasons protected by Federal or Illinois Law), contact your clinical supervisor(s).
- In the event that you would like to schedule a client outside of your normal training hours, please notify the Director of Clinical Training.
- **You will be utilizing an app-based phone system that you are expected to check twice daily at minimum** (at the beginning and end of the day), and **return all calls within 24 business hours Monday-Friday**. Please update your outgoing message as needed to reflect times when you are out of the office (see SVPS Policies & Procedures Manual, Appendix H: Voicemail Instructions).
- **All new clients should be informed of your status as a "Doctoral Resident/Doctoral Extern", working with our clinic from early July of the current year to early July of the following year, and if it happens that your duration working with the clinic will be extended beyond that time (e.g., you are selected for and choose to stay on for an additional year of training), you will notify them promptly. Additionally, each client/parent should be provided with "Our Commitment to Clinical Training" form via TherapyNotes.** (TherapyNotes › Library › Library Files › Commitment to Clinical Training).
- When planning to be out of town, it is expected that residents & externs provide clients with ample notice and directly inform them of their supervisor's name and phone number, as well as provide this information on their outgoing voicemail recording. Handling disruptions in treatment (e.g., therapist is out sick, family emergency, etc.) is further outlined in Appendix D: SVPS Time Off Policy (see SVPS Policies & Procedures Manual).
- Therapy office space will be assigned to you, based upon the days and times that you are scheduled to see clients. Therapy offices should be organized and neat when you are finished. Toys should not be moved between offices or removed from offices. Personal bins are for art projects or toys specifically purchased for a client. Should you notice that therapy office supplies are running low or in need of replacement, please alert the Practice Manager.

Policy on Doctoral Resident & Doctoral Extern Responsibility:

- We practice a model of supervision and consultation that expects doctoral residents & externs to seek guidance and collaboration on all varieties of clinical concerns that arise in cases or incoming intakes. In order to ensure the safety of our clients, it is our policy for doctoral residents & externs to immediately alert a supervisor to any clinical risk issues that emerge directly or indirectly with a client. These may include, but are not limited to, the following:
    - Disclosure of self-injurious or high-risk behaviors (e.g., cutting, binge drinking, substance use, OTC/prescription drug use, hair pulling, restrictive eating, binging/purging behavior, or laxative use, sexually high-risk behavior);
    - Reports of self-harm ideation (e.g., feelings of "not wanting to be here anymore," better if they weren't here, thoughts of self-harm);
    - Direct or indirect references to suicide or homicide;
    - Expressions of planned aggression towards another person;
    - Reports of maltreatment or abuse, including verbal, emotional, physical or sexual abuse;
    - Information from an outside source, such as a parent, school social worker or teacher about concerns related to self-harm or high-risk behaviors.
- If and when these issues or any other risk issues of concern arise in a case, you are expected to alert a direct supervisor ASAP. The determination of the level of risk and the necessary clinical response will be made in collaboration with your supervisor.
- Other clinical situations also warrant communication to your supervisor. While these situations may not inherently increase the risk posed to your clients, a thoughtful clinical response can reduce the chance that these incidents propel your clients toward greatest risk. Alert your supervisor if and when any of the following occurs:
    - Disruptions in the treatment schedule or missed/cancelled appointments;
    - Major losses in the family, including trauma, death, separation, divorce;
    - History of abuse or suicide in the family;
    - Missed co-payments or other billing concerns;
    - Vacations or extended absences by client/therapist.
- **Clinical Training Program Confidentiality**: Our model of supervision is collaborative in nature, as we approach training as a supervisory team. In order to ensure an optimal and integrated training experience, each resident/extern's global progress is consistently shared across the SVPS training team. This includes any concerns that are being addressed within the individual supervision framework. Please be sure to discuss any questions around supervisory confidentiality with your supervisors as needed.
- As clinical psychologists, we understand the relevance and significance of personal development as an aspect of professional development and clinical skill. Further, we appreciate the depth and intensity that often comes with long-term psychodynamic work. That said, engaging in personal psychotherapy is encouraged and may be recommended in the event of personal matters impacting the role and responsibilities of a clinician in training. If in need of a personal therapy referral, please see our referral list located on SharePoint.
- **Professional Expectations**: When performing your training responsibilities at SVPS, you are in a highly professional role providing clinical care to clients **(see Appendix Q: Office Etiquette Guidelines & Dress Code).**
  As such, you are expected to:
    - Dress professionally and conduct yourself in a highly professional manner. Shared Vision observes a "business casual" dress code (e.g., no light-washed and/or frayed jeans, hats, flip-flops, shorts);
    - Appropriately seek supervision during difficulties;
    - Manage life events so they have as limited an impact on your clinical work as possible, which includes alerting your supervisors preventatively to discuss the best way to proceed during times of heightened life challenges;
    - Appreciate the demands of balancing graduate school work with the intensive training you will receive at this site;
    - Manage your time, schedule, and clinical activities with responsibility, timeliness, and the utmost attention to professional ethics. Consult with your direct supervisor(s) and Director of Clinical Training should assistance be needed in managing your schedule;

- Consistently respond to all phone and email communications within 24 business hours, Monday-Friday.
- Manage staff and training relationships in a professional manner;
- All residents/externs are expected to attend trainings in person, and if needed to attend otherwise, they must first request permission from the staff facilitating the meeting;
- If a resident/extern has to miss any scheduled clinical training meeting, they are asked to contact the appropriate staff facilitators as soon as possible and complete the related make-up assignment provided;
- If a resident/extern is 15 minutes late or more to any scheduled clinical training meeting, this will be counted as an absence unless otherwise confirmed with the pertinent supervisory staff. Please follow the relevant instructions for make-up provided;
- In all clinical training meeting spaces, phones are to be kept away and laptops/tablets shut unless required by staff facilitators for discussion purposes.

- **Professional Standards**: Clinician shall at all times act in a manner consistent with professional and ethical standards established by applicable state and Federal agencies, licensure and accreditation bodies and professional associations. Further, Clinician shall not conduct themself in a manner which would be disruptive to Shared Vision or any facility or hospital at which Clinician provides services pursuant to this Agreement, or which would jeopardize the health or safety of any patient or any Shared Vision employee or other person, or the quality of patient care, each as determined by the Shared Vision. Clinician shall comply with all applicable Federal, state and local laws and regulations as well as with all applicable requirements and standards necessary to maintain Shared Vision's license to operate as a business and good standing as a participating provider in various managed care plans. Clinician shall observe and comply with all reasonable rules and policies adopted from time to time by Shared Vision and shall comply with the accepted standards of practice and ethics set forth by the American Psychological Association. Clinician shall not use the name of the Shared Vision without the prior written approval of the Shared Vision.
- **Case Transitions:** Transition of SVPS client care at the conclusion of the clinical training year routinely takes place via transition in-house to another SVPS clinician. Grounded within the framework of our ethical guidelines and legal duties as clinical psychologists, clients assigned to extern/resident caseloads are clients of SVPS, are seen under the licensure of SVPS supervisory staff, and as such SVPS does not make referrals to unlicensed clinicians who are transitioning their work outside of the clinic at the conclusion of their training year. Further, clinicians in training cannot solicit clients to follow them (e.g., by asking the client if they would like to continue seeing the therapist at their new location), as remains an ethical boundary of our profession. Direct supervisors finalize all case transitions with highest consideration for the interconnected clinical services routinely engaged by SVPS clients and families.
- **Competence:** Clinician shall at all times render services to patients in a competent, professional and ethical manner, in accordance with prevailing standards of clinical psychological practice, all applicable statutes, the standards and practice of the American Psychological Association, all applicable government agency regulations, rules, orders and directives and all applicable Shared Vision policies, procedures, rules and regulations
- Failure to comply with this policy may result in a report by your supervisors to your training department and advisor for review.
- Continued failures to comply with this policy may result in the suspension of your training placement (refer to SVPS Policies & Procedures Manual, Due Process Guidelines)
- Your signature below indicates that you have read and agree to this policy.

Administrative Assistance Policy:

- The SVPS Practice Manager is available to support all SVPS staff, including all clinicians in training, with tasks including but not limited to office orientation, processing client fees, PDF and Office 365 document processing, assistance with phones, building management, or software-related issues, production of forms (copying or printing), ordering of supplies and play therapy materials, filing, HIPAA-protocol related questions and concerns, and arranging for reimbursement after the incidental purchase of any supplies.
- The SVPS Billing and Account Manger provides training on HIPAA-compliant Therapy Notes software and is available throughout the business week to address any insurance- or billing-related questions.

- SVPS Doctoral Residents receive personalized business cards, password-protected voicemail boxes, a dedicated phone extension, mailbox, staff office file drawer (as needed), and an email address/Office 365 account.
- All doctoral residents & externs receive HIPAA compliance training during orientation, and thereafter as necessary.
- There are 5 shared-use, networked computers in the staff office. Doctoral residents & externs receive assistance from our Practice Manager setting up their own laptop computers to connect to our HIPAA-compliant server network and printers, and receive training on policies for saving, naming, and password-protecting clinical documents.
- Each of our therapy offices is comfortably equipped with a desk, couch/loveseat and upholstered chair, therapy sand tray and miniatures, play therapy materials, and activity table/chairs.
- Each space office is equipped with a white-noise machine for added privacy. There may be some office rotation required for doctoral residents & externs, which is minimized by a well-kept office space schedule that is managed via Skedda by the Practice Manager, Director of Clinical Training, and Executive Clinical Director.
- SVPS is contracted with CISO Global, a managed IT company, who provides additional technical and electronic support to staff and doctoral residents should more complex technical or software issues arise. The Practice Manager will coordinate the creation of support tickets with CISO Global as needed and provides SVPS staff & residents with their Help Desk contact information in case of emergencies.
- Personnel records for each current and previous doctoral resident are stored in a secure folder on our encrypted cloud server and are overseen by the SVPS Practice Manager and Director of Clinical Training. Additionally, a physical copy of personnel records (residents prior to 2024) are kept in a locked cabinet in a secure SVPS Staff Office. In the event that storage space limitations occur in the future, older records will be sent to an off-site record storage facility, where those files will be securely stored and documented for tracking, should that record need to be retrieved.

Name: _____ Date: _____

Doctoral Extern/Resident Signature: _____

Supervisor Signature: _____

Executive Director Signature: _____