



# **INTERNSHIP MANUAL**

## **INDIANA STATE UNIVERSITY SCHOOL PSYCHOLOGY INTERNSHIP CONSORTIUM**

**Department of Applied Clinical  
and Educational Sciences**

**2023-2024**



Interns who participate in this internship experience are responsible for knowing and observing policies and procedures that govern student conduct and program operations at Indiana State University, such as the contents of the Graduate Catalog, the Student Code of Conduct, and program-level handbooks. Each of these documents supersede the contents of this Internship Manual in cases of conflicting information. Interns pursuing the program herein described are advised to secure and review the above-mentioned documents.

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## **Introduction**

The Indiana State University School Psychology Internship Consortium (ISU-SPIC) annually supports professional psychology interns who require pre-doctoral internships that are not accredited by the American Psychological Association (APA) or approved by the Association of Psychology Postdoctoral and Internship Centers (APPIC). While this opportunity is available to professional psychology interns from other programs, ISU-SPIC primarily serves doctoral students in the ISU Ph.D. in Guidance & Psychological Services, School Psychology and Psy.D. in School Psychology programs.

## **Internship Requirements**

Field experiences are critical learning opportunities that provide the foundation for graduate students to become professionally-oriented and competent within their chosen field of study. Practicum, externship, and internship experiences are sequential and graded in complexity, beginning with closely supervised practice in basic skill areas and gradually progressing to greater independence and a broader diversity and complexity of skill application. The pre-doctoral internship is the culminating experience for students seeking the Ph.D. degree in Guidance and Psychological Services, School Psychology or the Psy.D. in School Psychology. A student enrolls in the internship after successful completion of all required coursework and pre-requisite fieldwork.

The ISU-SPIC experience is designed to meet the internship requirements of APA and the Council of Directors of School Psychology Programs (CDSPP), as well as to satisfy the licensing requirements of the Indiana Professional Licensing Agency Psychology Board. An internship completed through ISU-SPIC requires the following:

### **Hours and Activities**

1. 2,000 hours completed in no less than 10 and no more than 24 months. At least 500 hours must be completed in direct service delivery (e.g., assessment, intervention, consultation).
2. A written internship training plan (Appendix A) will outline expectations for a sequential, organized experience in a health service setting. The experience should be sufficiently broad to offer opportunities in the following professional competencies:
  - Research, including the evaluation of services delivered and the effectiveness of the intern's own training
  - Ethical and legal standards
  - Individual and cultural diversity
  - Professional values, attitudes, and behaviors
  - Communication and interpersonal skills
  - Assessment
  - Intervention
  - Supervision
  - Consultation and interprofessional/interdisciplinary skills

### **Supervision**

1. A licensed psychologist is designated by ISU-SPIC as the director of training (DoT) for the internship experience. The DoT accepts responsibility for the integrity and quality of the

internship program, including the development of the internship training plan and training activities delivered by ISU-SPIC.

2. The internship must have the equivalent of at least two full-time psychologists to provide appropriate supervision.
3. Any supervisors who are responsible for case supervision (i.e., clinical supervisors) must be licensed psychologists in the jurisdiction in which the internship is located. This requires that supervisors are (a) endorsed as health service providers in psychology (HSPP) or equivalent; (b) are practicing under HSPP supervision to obtain HSPP endorsement or equivalent; or (c) hold a limited license as allowed by the jurisdiction in which the internship is located.
4. One licensed psychologist will be designated as the primary supervisor. Usually, this will be the clinical supervisor who provides the greatest proportion of individual supervision, although the Director of Training may also serve in this capacity.
  - a. Designated primary supervisors conduct live observation (can include review of audio or video recordings) of the intern's activities on at least one occasion per evaluation period, with the purpose of evaluating the intern's clinical and professional skills and providing formative and summative feedback.
  - b. Designated primary supervisors complete required intern evaluations (Appendix B) in a timely manner, at least three times per year.
5. The intern must receive at least 2 hours per week of individual supervision from licensed psychologist supervisors.
6. At least two additional hours per week must be spent in regularly scheduled individual or group supervision with an appropriately credentialed health service provider (i.e., a professional appropriately licensed for independent practice in their setting).
7. All documents prepared by the intern should be co-signed by a clinical supervisor as defined in #3 above.
8. Telesupervision consists of synchronous communication media that utilize both audio and visual communication. Any telesupervision must ensure that client and intern privacy and confidentiality are sufficiently protected. Under normal working conditions, telesupervision may only account for 50% of the individual supervision (i.e., #5 above) and 50% of the total supervision (i.e., combination of #5 and #6 above) provided to the intern. Telesupervision should only be used when the supervisor is confident that the intern's competence does not require the supervisor's physical presence. The intern should have access to supervision when needed and there should be a clear plan in place for how the intern is expected to handle emergency situations.

### **Additional requirements**

1. The intern must use the title of "intern" or other designation of trainee status.
2. The intern engages in regularly scheduled, supervised, and documented training activities with other doctoral psychology interns.
3. The intern receives a certificate of completion and other required documentation (e.g., verification of hours) upon successful completion of the internship.
4. Interns will enroll in 1 credit of SPSY 698 *Advanced Topics in School Psychology* during the Fall and Spring semesters in which they complete internship.

## Program Structure

ISU-SPIC is designed to accommodate 2-3 interns per year. This section summarizes the structure of ISU-SPIC and partner site information. Additional clinical sites may be added, depending on their capacity for supporting the requirements of the internship experience.

### Program Administration

Dr. Carrie Ball (812-237-2875; [carrie.ball@indstate.edu](mailto:carrie.ball@indstate.edu)) is the current DoT for ISU-SPIC. Dr. Ball is a licensed psychologist and school psychologist in Indiana. She oversees the coordination of internship experiences, development and monitoring of internship training plans, completion of intern evaluation activities, and training activities provided by ISU as part of the internship experience.

### Clinical Training Sites

Because ISU-SPIC is a consortium-based internship, most interns complete their clinical training in a combination of two clinical sites, or a single site that provides access to diverse populations. A summary of partner sites is provided below.

**Covered Bridge Special Education District (CBSED)**. CBSED serves P-12 students and schools in the Vigo County and South Vermillion County School Corporations in west central Indiana. Services include consultation with individual teachers, systems consultation through participation in building-level Student Assistance Teams, and evaluation services for all disability eligibility areas. Interns assigned to this site are generally assigned primary responsibility for 1-2 buildings under the supervision of a licensed psychologist and licensed school psychologist supervisor.  
Site Director: Denise Harden, Ph.D.

**Hamilton Center, Inc.** is a not-for-profit regional behavioral health system serving central and west central Indiana. Through a broad array of behavioral health services for adults, children, adolescents, and families, their mission is to provide quality behavioral healthcare, wellness and human development services to the community. Services are individualized, trauma informed, and evidence-based. Interns assigned to this site work primarily in Child and Adolescent Services, with arranged experiences in other units.  
Site Directors: Bridget Roberts-Pittman, Ph.D. and Melissa Burton, M.S.

**Indianapolis Neurobehavioral Health Center** is a private practice clinic that provides a full range of neuropsychological evaluation and intervention services to children, adolescents, and adults. The practice also offers independent educational evaluations and delivers training on mental health issues to educational and community organizations. Interns assigned to this site primarily provide individual evaluation and intervention services to children and adolescents and may participate in the other services provided on a limited basis.  
Site Director: Amanda Slonaker, Ph.D.

**Mindful Growth** is a private practice that provides psychological evaluations and psychotherapy for clients of all ages, consultation for private and public agencies, and a full range of school-based evaluation and intervention services. They specialize in designing interventions that can be implemented in the client's natural environment (e.g., home, work, daycare, school) to maximize

treatment efficacy. Interns assigned to this site will generally provide a combination of clinical, school based, advocacy, and consultation services.

Site Director: Abbie Jones, Ph.D.

[Porter School Psychology Center](#) is a university-based training clinic that provides high-quality academic and psychological services to members of the community while providing interns the opportunity to enhance their clinical skills and build their knowledge of academic, social, emotional, and behavioral issues. Services offered through the Porter Center focus on promoting the general welfare of children, adolescents, and young adults by providing educational, psychological, and behavioral evaluations and interventions. Interns assigned to this site will have an individualized experience that may include intake interviews, assessments, intervention planning, consultation services, and supervision.

Site Director: Carrie Ball, Ph.D.

[Ripley-Ohio-Dearborn Special Education Cooperative](#) serves eight school corporations in southeastern Indiana, providing a full continuum of services to students with special needs. The cooperative emphasizes collaboration and consultation among students, educators, and families to maximize students' success and full participation in their classrooms, schools, and communities. Interns assigned to this site will have an individualized experience that includes a balance of comprehensive evaluations, consultation, and counseling experiences.

Site Director: Alex Brewer, Ph.D.

### **Consortium Training Activities**

To ensure sufficient interaction and documented training activities with other interns, ISU-SPIC will schedule monthly virtual sessions including group supervision, didactic training, and interactive discussion for all participating interns. Consortium activities may require activities such as reflective journaling, case presentations, research presentations, or other assigned projects. ISU-SPIC training activities generally emphasize the required competencies of research; ethical and legal standards; individual and cultural diversity; and professional values, attitudes, and behaviors; these activities may be included as appropriate in the internship training plan. An appropriately credentialed health service provider will supervise all monthly sessions.

## **Applications**

Students who wish to participate in ISU-SPIC must submit a CV and cover letter to Dr. Carrie Ball ([carrie.ball@indstate.edu](mailto:carrie.ball@indstate.edu)) no later than April 1 of the year preceding the desired internship placement. The cover letter should include an explanation of why the student is seeking an internship through ISU-SPIC and their training goals for the internship experience. Students who are applying from outside the ISU Ph.D. in Guidance & Psychological Services, School Psychology or Psy.D. in School Psychology programs must also submit an official or unofficial graduate transcript, contact information for two professional references, and a letter of support from their training program DoT or designee, verifying that they have been approved by their program to apply for a pre-doctoral internship.

Acceptance to the consortium will be on a rolling basis, depending upon applicant qualifications and the suitability of available sites to meet interns' training needs. ISU-SPIC and/or its clinical training sites may require interviews with applicants and follow up with program DoT's before making final decisions about acceptance.

## **Beginning the Experience**

### **Accepting and Formalizing an Internship**

At the conclusion of the application and interview process, the DoT will communicate a decision to applicants. Applicants who are determined to be a good match for ISU-SPIC will be extended a tentative verbal acceptance to the consortium, including the identified training site(s) that will provide the clinical experience. Once an applicant has accepted the tentative offer, the internship will be formalized in two steps.

***Internship Training Plan.*** First, the DoT will facilitate one or more meetings with the intern and the supervisors at the clinical training site(s) to develop an appropriate internship training plan that meets internship requirements for providing a broad, sequential, and organized training experience. This phase will also include a negotiation of how the intern's time and supervision will be distributed across multiple sites, if necessary. When all individuals are satisfied with the training plan, it will be circulated for signatures by the intern, DoT, and site supervisors. If a satisfactory training plan cannot be constructed, the internship offer may be withdrawn or modified.

***Clinical Agreements.*** Following completion of the internship training plan, additional documents will be completed and signed to formalize the experience prior to the beginning of the experience. For ISU students, the *Clinical Affiliation Agreement* (Appendix C) is an official contract between the university and the agency, generally initiated by the University and signed by an administrator of each clinical training site and a Dean at the University. For non-ISU students, the intern's home university may or may not have similar agreements; the DoT will coordinate completion of such agreements when possible.

A *Memorandum of Understanding* (MoU; Appendix C) is an internal document developed by ISU-SPIC to clarify the expectations and responsibilities of the ISU-SPIC DoT, psychology program DoT, intern, and supervisors. The ISU-SPIC DoT will create MoU's for each clinical training site based on the internship training plan and will coordinate obtaining the signatures of all parties.

### **Required Intern Documentation**

All internships plans and clinical agreements are contingent on interns satisfactorily completing these documentation requirements prior to beginning clinical work. Failure to meet these requirements will result in a delay or termination of the internship.

***Background Checks.*** All interns are required to complete and pass a fingerprint background check before beginning any clinical experiences. Instructions for meeting this requirement can be found at <http://www.indstate.edu/education/ess/criminal-background-checks>.

**Malpractice Insurance.** Interns are required to provide proof of their own student malpractice insurance policy, even if they are covered under their supervising agency's liability policy. ISU-SPIC requires a standard \$1,000,000/3,000,000 policy. Coverage is available through several organizations, including [Trust Risk Management Services](#) or [Healthcare Providers Service Organization](#). Interns are not permitted to participate in any field-based experiences until verification of coverage has been received and their policy is in effect (typically the first of the month following the policy purchase).

**Site-Specific Requirements.** Some sites have additional requirements as conditions of the placement. These may include, but are not limited to, additional background checks, TB testing, drug or alcohol screening, and additional pre-placement training. Interns are expected to cooperate with the requirements of the site in a timely manner. If concerns arise related to the cost or reasonability of any such additional requirements, students should contact the ISU-SPIC DoT as soon as possible to discuss their concerns. Sites may dismiss or refuse to accept a student who does not meet or refuses to comply with site-specific requirements.

### **Course Registration**

All interns will be required to register for 1 credit of SPSY 698 *Advanced Topics in School Psychology* during the fall and spring of the internship year(s). ISU school psychology students should register for both SPSY 698 and SPSY 891 *Doctoral Internship*. Non-ISU students will need to apply for admission to ISU as non-degree-seeking students in order to complete the required course registration. Students who are not from ISU school psychology programs are not required to register for SPSY 891 but are expected to enroll in any internship credits required by their training programs.

## **Internship Requirements**

The internship experience follows several years of sequential practicum and externship and is considered a capstone experience that allows interns to further develop and refine their content knowledge and clinical skills. It is anticipated that the specific activities and learning experiences will vary, depending upon the interns' professional interests and training needs and the opportunities available within the internship site. Therefore, specific course requirements are relatively general, to ensure that the experience can be appropriately individualized.

SPSY 698 is graded on an A-F scale. A grade of "A-" or better is required to successfully complete the internship and receive a certificate of completion. Interns will receive a grade of "incomplete" or "in progress" for each semester of SPSY 698 until the entire internship experience is completed. The basis for determining grades are described below. Interns' doctoral training programs will retain responsibility for determining whether internship has been successfully completed relative to program standards.

### **Hours Requirement (35%)**

***Graded as pass/fail.***

***Internship cannot be successfully completed without meeting this requirement.***

The complete internship experience requires at least 2000 hours of field work, including time spent in the placement and off-site time spent preparing for and documenting clinical work, participating in planned didactic activities, and engaging in individual and group supervision.



- At least 25% of the hours (i.e., at least 500 hours) must be spent in face-to-face service delivery, including assessment, intervention, and consultation.
- The equivalent of at least 2 hours per week must be spent in individual supervision, and the equivalent of 4 hours per week must be spent in a combination of individual and group supervision.

Hours logs will be collected periodically throughout the year to monitor interns' progress toward these requirements. A final hours log will be required at the end of the internship.

### **Performance Evaluation (35%)**

***Graded as pass/fail.***

***Internship cannot be successfully completed without meeting this requirement.***

Successful internship completion is contingent on satisfactory supervisor evaluations of intern performance, which is defined as a rating of "Satisfactory" or higher on at least 90% of rated items on the final evaluation. The primary supervisor will complete a performance evaluation form on at least three occasions during the year to provide the intern with an opportunity to receive formal feedback and identify areas for further growth. The internship evaluation form must be structured to measure practice standards outlined by the National Association of School Psychologists (NASP) and the American Psychological Association (APA). The ISU-SPIC form is provided in Appendix D; alternative forms (e.g., program-specific forms from other doctoral training programs) may be used but should be approved in advance by the DoT.

### **Additional Requirements (30%)**

***Each requirement graded as pass/fail.***

Additional ISU-SPIC requirements as part of the internship experience will be graded on a pass/fail basis. This may include timely submission of required documentation, attendance at group supervision meetings, and completion of ISU-SPIC required activities. The percentage of passed requirements will constitute the basis for calculating the remainder of the course grade.

## **Expectations for Intern Performance and Progress**

### **Intern Preparation**

Prior to beginning the internship experience, interns should have completed all required doctoral coursework in a professional psychology training program, including the following:

- Discipline-specific Knowledge (i.e., cognitive, affective, developmental, biological, and social bases of behavior)
- Assessment (e.g., psychopathology/diagnosis, academic, cognitive, social-emotional, behavioral, neuropsychological, personality)
- Intervention (e.g., academic, social-emotional, behavioral, counseling)
- Consultation and supervision
- Law and ethics
- Psychometrics, research methods and statistics

Interns should also have completed practicum and externship experiences that are sequential and graded in complexity. Each intern will be approved in advance by their doctoral program faculty for the internship experience.

## **Conduct and Dispositions**

Throughout the experience, interns are expected to exhibit professional values, attitudes, and behaviors consistent with professional psychologists. For example, interns should demonstrate dependability, adequate self-reflection, an orientation to continued professional growth, receptiveness to supervision and feedback, integrity, good judgment, and a commitment to legal and ethical practice.

Interns are expected to comply with local, state, and federal laws governing personal and professional conduct, the ethical guidelines of the [American Psychological Association](#) and [National Association of School Psychologists](#), the policies and procedures outlined by the field site, and the [Indiana State University Code of Student Conduct](#).

## **Intern Progression**

Clinically, *beginning interns* should demonstrate basic mastery of individual assessment and intervention skills, and the ability to provide consultation and basic supervision. Depending on their prior clinical experiences, some interns may find particular skillsets to be a bit “rusty” and may initially require more review and increased support in those areas. It is expected that most interns will have certain gaps in their knowledge and experience due to a lack of exposure in their prior didactic and clinical work. These should be identified in the course of supervision, and interns should actively participate in a plan for addressing such gaps during the internship experience.

*As the experience progresses*, interns are expected to demonstrate increasing independence in the application of a broader range of clinical skills and should continuously improve their clinical decision-making and case conceptualization abilities. Increased knowledge and skill should be observed in areas that have been specifically targeted for growth. Ongoing support may be needed for working with clients who have unique or particularly challenging needs.

*By the conclusion* of the experience, interns should exhibit a moderately high level of independence and confidence in most aspects of their clinical work and should take increasing responsibility for their supervision and professional learning needs. They should function at a level consistent with beginning independent practice (school settings) or post-doctoral supervised practice (non-school settings).

## **Commitment and Engagement**

Interns are expected to commit to ISU-SPIC for the entirety of the 2000-hour experience. The specific timing of the experience (i.e., start/end dates, days of the week) and the expected schedule should be negotiated prior to beginning the experience. If the intern plans to complete 2000 hours in less than a 12-month period, a plan for completing the hours should be discussed.

Interns are expected to exhibit an orientation and commitment to continual learning and growth. They should be well-prepared for and actively engaged in all internship activities. Interns are expected to actively participate in regular individual supervision for a *minimum of two hours weekly*, and to seek supervision in a timely manner regarding activities that exceed the intern’s bounds of competence or are of a time-sensitive nature. Interns are further required to participate in two hours weekly of additional individual or group supervision. Interns should collaboratively engage with supervisors in creating and revising the training plan, and completing and reviewing required documentation.

## **Documentation**

Interns are required to complete a background check and provide the program with evidence of malpractice coverage in a timely manner. Interns are required to track their own hours using Time2Track, university-provided templates, or another approved method, and to submit documentation of their hours upon request to university and/or field supervisors. Interns are responsible for ensuring that all documentation required for successful completion of the experience is submitted to the DoT according to the specified schedule.

## **Communication**

Interns are expected to maintain frequent and timely communication with the DoT and their clinical supervisors, as well as to communicate with their doctoral program faculty on an as-needed basis. Notably, but not exhaustively, interns are expected to:

- Communicate with the primary supervisor about course requirements, course timelines, and important due dates for evaluations and documentation.
- Communicate with the DoT and doctoral program faculty regarding potential barriers to successful or on-time completion of course requirements.
- Clearly communicate with the DoT and clinical supervisors about scheduling needs, site-based experiences, and training needs in a timely manner.

## **Expectations for Clinical Supervisors**

ISU-SPIC relies on frequent and effective collaboration with clinical supervisors to support intern growth through the completion of fieldwork. Supervisors are expected to provide high-quality, individualized supervision, identify relevant activities for their supervisee, complete necessary documentation that describes intern performance, and communicate with the DoT and the primary supervisor as needed.

### **Responsibilities of all Clinical Supervisors**

***Training Plan Development and Implementation.*** All clinical supervisors are expected to engage with the intern and DoT in actively planning an experience that meets the intern's professional goals and balances the needs of the site(s), the supervisors, and the intern. The plan should be based upon required professional competencies, the intern's articulated goals, and the experiences available at the training site(s). The activities identified should include experiences that the supervisor can reasonably arrange/coordinate and competently supervise. Supervisors are strongly encouraged to review the training plan with the intern at the time of each performance evaluation, to ensure the intern remains on target to complete the identified activities, and that the identified activities remain relevant to the intern's goals. If and when circumstances change during the course of the placement, the training plan may be modified to suit the needs of all parties.

***Supervision.*** Individualized supervision and monitoring is one of the most crucial roles of the clinical supervisor. Interns are required to receive a *minimum of two hours weekly* individual supervision; each supervisor shares responsibility for scheduling and valuing individual supervision time as described in the internship training plan. Supervision should be sufficient to ensure the quality of

services provided and to monitor the intern's conduct as it pertains to (a) the personnel policies and practices of the site, (b) legal and ethical practice, and (c) generally acceptable guidelines for professional conduct in all activities associated with the placement.

While this handbook has identified general expectations, clinical supervisors should be prepared to adjust the field experience and supervision strategies to best suit the needs of the intern. Although interns have successfully completed prior field experiences, each intern nevertheless comes to each new learning experience with unique clinical and dispositional strengths and limitations. As such, each intern may need more or less support in some areas.

It is expected that the amount of supervision will fluctuate throughout the year, with closer and more intensive supervision usually being required at the beginning of the experience and tapering toward the end. Many interns benefit from shadowing opportunities during their first weeks on-site. This serves to familiarize them with the structure and unique expectations of the site and with the supervisor's approach to working with clients and colleagues. This also provides an opportunity for the intern and supervisor to discuss the intern's questions, concerns, and professional needs.

As the supervisor and intern gain more confidence in the intern's abilities, the intern may complete more activities independently. It is still recommended that the supervisor closely track and inquire about the intern's activities and clinical decision-making, regularly check permanent products (e.g., reports, protocols, session notes) and seek feedback from other staff about the intern's performance. Towards the end of the experience, the supervisor may feel comfortable placing progressively more reliance on the intern's self-report and self-selection of supervision topics.

**Communication.** Clinical supervisors are expected to demonstrate timely communication with both the intern and the DoT as needed. With respect to intern communication, it is expected that clinical supervisors will:

- Inform the intern of agency expectations, policies, and procedures which will serve as guidelines for dress code, professional and personal conduct, confidentiality, and delivery of school psychological services. If the site has its own due process procedures, these should be provided to the intern at the outset of the experience.
- Notify the intern of case assignment, responsibilities, and educational opportunities.
- Notify the intern of concerns regarding their fieldwork performance.

With respect to ISU-SPIC communication, it is expected that clinical supervisors will:

- Collaborate with one another as needed to complete required performance evaluations.
- Communicate any concerns about the intern's performance to the DoT at the time of the performance evaluation or more frequently, as needed for appropriate collaboration, support of the intern, and/or remediation of deficits.
- Notify the DoT if site-specific due process procedures are initiated as a result of intern behaviors, intern activities, or internship conditions.
- Notify the DoT of any situation that may require immediate intervention, may threaten the intern's successful completion of the internship, or may represent a violation of agency or university policies, professional ethical guidelines, or state or federal law.

## **Responsibilities of the Primary Supervisor**

The university relies upon the primary supervisor's cooperation in ensuring the requirements of the experience have been satisfactorily completed. The primary supervisor's unique responsibilities are described below.

**Hours Verification.** At the time of the first and final performance evaluations, the primary supervisor is expected to review a summary of the intern's hours logs. The primary supervisor is encouraged to review the hours log more frequently and to monitor that the intern appears on-track to minimally (a) complete at least 2000 total hours, (b) participate in 2 hours individual and 4 hours total supervision weekly, and (c) engage at least 25% of time in face-to-face contact with clients or consultees. At the time of the final performance evaluation, the primary supervisor is expected to verify that the hours log reflects a good faith estimate of clinical activities completed.

**Direct Observation.** APA guidelines require that primary supervisors directly observe trainees at least once per evaluation period. These requirements specify that the observation should involve the intern's engagement in a direct service activity, with the intent of evaluating the intern's clinical department and skills in psychological service delivery. It is generally beneficial for the supervisor to observe a range of the intern's early activities (e.g., interviews, observations, assessments, counseling sessions, evaluation feedback), to gain a first-hand sense of the intern's strengths and limitations. Although this may cause some anxiety on the part of the intern, they generally find comfort in knowing that the supervisor's feedback is grounded in direct observation rather than their own self-report.

**Performance Evaluations.** The primary supervisor is instrumental in evaluating the performance and developing professional competence of interns across the course of the experience. The primary supervisor should use the ISU-SPIC provided form (see Appendix D) or another evaluation format that has been pre-approved. Evaluations are to be completed at least three times throughout the year. When evaluating performance, supervisors should rate the intern's performance **based on expectations for end-of-year performance**. Therefore, it is typical for many skills to be rated as "Developing" at the beginning of the experience, indicating that the intern is on-track with skill development and is responding adequately to supervision and feedback, but has not yet reached end-of-year expectations. A rating of "Unsatisfactory" indicates that an intern has not adequately responded to feedback or shown acceptable levels of progress and is therefore not on-target to reach end-of-experience expectations. A rating of "Satisfactory" is expected for at least 90% of rated items by the end of the experience. This Satisfactory rating indicates that the supervisor believes the intern's performance is sufficient to proceed to the next step of clinical training (i.e., beginning school psychology practice and/or post-doctoral supervised practice).

**Collaboration.** Because the primary supervisor accepts responsibility for verifying and evaluating the performance of the intern across clinical sites, the primary supervisor accepts responsibility for initiating communication with other clinical supervisors as needed to verify the intern's hours, activities, and performance.

## **Telesupervision Policy**

APA provides detailed requirements for the definition and use of telesupervision. Telesupervision is defined as a "synchronous audio and video format where the supervisor is not in the same physical

facility as the trainee.” Telesupervision does not include phone calls, text messages, e-mail, or other forms of communication that do not use synchronous audio and video communication.

- To be categorized in the intern’s hours log as “supervision,” each site needs to develop a clearly articulated rationale and written procedures for using electronically mediated supervision. Procedures must address issues of non-scheduled consultation, crisis coverage, and handling of privacy and confidentiality. These procedures need to be established before using telesupervision, and a copy must be available to the clinical supervisor, the intern, and the DoT.
- Telesupervision should not account for more than 50% of the total supervision provided.
- Prior to using telesupervision, the supervisor is responsible for ensuring the intern has adequate clinical experience to operate without the supervisor’s physical presence in the same location.
- Both the supervisor and the intern should have sufficient technological skill and access to technology to allow full participation in telesupervision using synchronous video and audio communication.
- The mode of communication must be sufficiently secure to protect the confidentiality of the intern and any client information.

## **ISU-SPIC Support and Communication**

### **Facilitation and Coordination**

ISU-SPIC accepts responsibility for facilitating the creation and monitoring of the internship experience. This includes:

- Advertising the internship on a yearly basis
- Accepting applications and facilitating the interview and intern acceptance process
- Facilitating development of the internship training plan and completion of clinical affiliation agreements and MoU’s
- Ensuring interns complete the required background check and submit evidence of malpractice insurance prior to beginning the internship
- Ensuring collection and documentation of hours logs and intern evaluations
- Verifying the satisfactory completion of internship requirements and issuing an internship completion certificate
- Facilitating informal or formal efforts to address concerns that arise during the course of the internship
- Working with interns’ doctoral program faculty to address any program-specific requirements or any concerns that arise during the course of the internship

### **Consortium Structure**

ISU-SPIC provides a consortium structure for the internship experience to increase the number of interns who can be served, provide additional documented training activities, and ensure sufficient opportunities for interaction amongst doctoral interns. The DoT serves as the instructor of record for the consortium-based portion of the experience (SPSY 698). The DoT will explain, oversee, and evaluate course assignments and will provide regular opportunities for check-ins and consultations with interns.

## **Communication**

The DoT is expected to demonstrate timely communication with both the intern and the clinical supervisors. This will include:

- Providing sites with assurance that the intern has passed a criminal background check and has purchased malpractice insurance coverage
- Communicating internship requirements in the form of
  - A copy of this handbook
  - A signed copy of the internship training plan and the MoU
  - A form and timeline for completion of intern performance evaluations
  - A timeline and process for the verification of final hours logs
- Provide the opportunity for a conference between the intern, the DoT, the primary supervisor, and other clinical supervisors following completion of each performance evaluation, or as needed.
- Support the clinical supervisors with regard to concerns about (a) intern performance, (b) the ability of the agency to provide adequate supervision, (c) the ability of the agency to provide opportunities sufficient to complete internship requirements, or (d) other concerns that arise relative to the internship experience.

## **Due Process Procedures**

Clinical sites that have their own internal due process procedures must provide a copy to interns and the DoT at the outset of the experience. Clinical sites are strongly encouraged to initiate ISU-SPIC's due process procedures prior to initiating their own processes. Often, a mutually agreeable resolution can be reached that supports the best interests of both the intern and the site.

### **Intern Performance Concerns**

Intern performance concerns are ordinarily brought to the attention of the DoT as a result of unsatisfactory performance evaluations or when a clinical supervisor otherwise expresses concern about an intern's preparation, performance, or progress. In the event that an intern is not performing adequately, the DoT will work with the clinical supervisor(s) to determine whether concerns need to be addressed formally or informally, as well as the clinical supervisors' ability and willingness to address the concerns with the intern.

***Informal Resolution.*** For concerns that can be addressed informally, the DoT and clinical supervisor(s) will collaborate to determine the best method of communicating the concerns to the intern, supporting the intern's progress, and monitoring the concerns. A specific plan will be established for revisiting the concerns and determining next steps.

***Formal Resolution.*** If a concern needs to be addressed formally and the clinical supervisor is willing to continue working with the intern, the DoT and clinical supervisor(s) will jointly develop a performance improvement plan in consultation with the intern's doctoral program faculty as needed. Interns who agree to and successfully respond to the performance improvement plan will continue in their internship placement.

In the event that the clinical supervisor is unwilling or unable to participate in addressing the concerns, or if the intern refuses or does not respond adequately to performance improvement efforts, the placement may be discontinued. In this situation, the DoT and the intern will consult with the intern's doctoral program faculty to discuss the appropriateness and feasibility of successfully completing the internship experience. At the discretion of the DoT, with consultation as needed, the internship training plan may be revised with or without a performance improvement plan, or the intern may be dismissed from ISU-SPIC.

### **Concerns and Appeals**

When interns or clinical supervisors have concerns about the internship experience or wish to appeal a decision that has been made, the following steps should be used to attempt a mutually agreeable resolution:

1. Direct discussion between the individuals involved. This may be a discussion between the intern and clinical supervisor, the intern and DoT, the DoT and clinical supervisor, and/or the DoT and university doctoral program faculty.
2. For issues involving the intern and the clinical supervisor that cannot be resolved, contact the DoT. The DoT may initiate a joint meeting or attempt to mediate the issue.
3. If still unresolved, or for issues involving the DoT, discuss the issue with the chairperson of the Department of Applied Clinical and Educational Sciences.
4. If still unresolved, discuss the issue with the associate dean or dean of the Bayh College of Education. The dean's office will make the final determination or recommendation, and may refer the matter to another office for further input and assistance.

Concerns should be addressed in a timely and professional manner. Individuals who engage this process should come prepared with clear examples of concerns, including dates of reference and any relevant evidence. Concerns should be those that hinder the intern's progress at the internship site, thus impeding their development as a professional psychologist. Appeals should be made on the basis of actions that are inconsistent with the policies and expectations provided by ISU-SPIC or by the clinical site. Allegations of Title IX violations or harassment will be immediately referred to the ISU Title IX officer.



## **Appendix A – Internship Training Plan Template**

## Indiana State University School Psychology Internship Consortium (ISU-SPIC) Internship Training Plan

Intern Name:	
--------------	--

Academic Year:	
----------------	--

**I. Goal Selection (completed by the intern)**

Reflect on your development of knowledge and professional skills to this point in your training, and consider the knowledge and professional skills you would like to further develop. Also consider what may or may not be reasonable to accomplish during internship, given what you know about the populations served and the services provided by your internship site(s). List 3-5 goals that describe the knowledge and skills you wish to improve during your internship experience.

1	
2	
3	
4	
5	

**II. Clinical Site Information**

Provide the name and point-of-contact information for each clinical training site.

Clinical Site Name	Contact Person and Title	Phone Number	Email Address

**III. Activity Planning (completed collaboratively)**

APA requires that internship be organized and sequential training experiences that occur in a health service setting. Therefore, interns must have the opportunity for experience in the areas listed below. With the intern's goals, available experiences, and the needs of the site(s), summarize the type and range of activities that will be completed in each competency area. Keep in mind that at least 25% of the intern's total time must be devoted to direct contact with clients or consultees, and approximately 10% should be spent in supervision.

Professional Competency	Summary of Planned Activities	Site(s)	Approx. % Total Time	Exposure to Diverse

				Populations? Y/N
<b><i>Direct Service Domains</i></b>				
Assessment				
Intervention				
Consultation/ Interdisciplinary Services				
<b><i>Indirect Professional Practice Domains</i></b>				
Receiving Supervision				
Providing Supervision				
Research				
Law & Ethics				
Professional Development				

#### IV. Supervision Plan

<b><i>Part 1: Available Supervisors</i></b>			
	Name	Affiliated Site	License/Endorsement (License Number)
Provide the name, affiliation, and credentials for <b><i>licensed psychologists</i></b> who will be available to provide supervision.			
Designate the individual from the list above who will serve as the primary supervisor.			
Provide the name, affiliation, and credentials for <b><i>other licensed health service providers</i></b> who will provide supervision.			

<b><i>Part 2: Supervision Delivery</i></b>	
Provide a narrative explanation of the plan for providing the equivalent of two hours per week of individual, face-to-face supervision by a licensed psychologist(s).	
Provide a narrative explanation of the plan for providing the equivalent of two additional hours per week of supervision by a licensed health service provider.	

**V. Acknowledgements and Signatures**

By signing below, I acknowledge that I have reviewed this plan and believe it will satisfy my professional training goals. I agree to complete the internship experience.

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

\_\_\_\_\_  
Date

By signing below, I acknowledge that I have reviewed this plan and believe it is feasible within the clinical site for which I am responsible. I agree to be available for supervision while the intern is completing clinical work at the site for which I am responsible.

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

By signing below, I acknowledge that I have reviewed this plan and believe it represents an sequential and organized training experience as required by ISU-SPIC. I agree to provide the consortium activities included in this plan and to be available for consultation with the intern and/or clinical supervisors as needed.

\_\_\_\_\_  
ISU-SPIC Director of Training Signature

\_\_\_\_\_  
Date

## **Appendix B - School Psychology Field Experience Evaluation Form**

## Indiana State University School Psychology Internship Consortium (ISU-SPIC) Internship Evaluation Form

**Intern:** Click or tap here to enter text.

**Date:** Click or tap here to enter text.

**Supervisor:** Click or tap here to enter text.

**Instructions:** Thank you so much for partnering with us to provide supervised field experiences for our school psychology graduate interns! The purpose of this evaluation is to offer constructive feedback to interns regarding their performance and progress. Instructions for completing the form are provided below:

1. Please indicate the sources of information considered in completing this evaluation (check all that apply):

<input type="checkbox"/>	Direct observation (Note: This is <u>required</u> for doctoral interns each evaluation period). May include: <ul style="list-style-type: none"> <li>• Observation of individual work with clients or families</li> <li>• Observation of team interactions/staffings/meetings/consultation</li> <li>• Review of audio/video recordings</li> </ul>
<input type="checkbox"/>	Indirect report from clients or families
<input type="checkbox"/>	Indirect report from school personnel (e.g., teachers, administrators)
<input type="checkbox"/>	Review of permanent products (e.g., psychoeducational reports, protocols)
<input type="checkbox"/>	Intern self-report

2. For each item below, please rate the intern's performance using the following scale:

NO = No Opportunity	Intern has not engaged in this activity, or insufficient information is available to give a rating.
U = Unsatisfactory	Performance is deficient and/or unacceptable; little evidence of growth, or the intern has been resistant to feedback in this area.
D = Developing	Performance does not meet end-of-year expectations but is considered on-track at this time. Intern shows evidence of adequate progress and has been responsive to supervision and feedback.
S = Satisfactory	Performance meets end-of-year expectations at this time. Intern is ready for the expectations of the next stage of practice.
E = Exceeds Expectations	Performance exceeds end-of-year expectations in terms of skill development and/or professional maturity.

3. At the end of each section and/or the end of the form, please offer comments about particular areas of strength and/or professional growth needs at this time.
4. At the end of the form, please describe the intern's progress during this evaluation period and areas that should be addressed in the upcoming evaluation period or in the intern's next field experience. These may include remediating areas identified as weaknesses or deficits, seeking new or different opportunities, and/or continuing to develop in areas of the intern's particular interest.
5. Sign and date the form, and have the intern sign and date the form. The intern may upload a copy of the completed form, or you may e-mail the form directly to the university supervisor.

### Data-based Decision-making and Accountability

<p>Understands the purpose of assessment:</p> <ul style="list-style-type: none"> <li>Identifies an appropriate referral question as it pertains to an individual, group, or system</li> <li>Identifies appropriate sources of data to answer the referral question</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Collects relevant data:</p> <ul style="list-style-type: none"> <li>Collects information that is accurate, detailed, and relevant to the referral concern</li> <li>Utilizes various sources of information (i.e., record review, observation, interview, rating scales)</li> <li>Identifies direct assessment measures that are appropriate for the individual intern and for the referral concern, with consideration for the psychometric characteristics of selected measures</li> <li>Accurately administers and scores a variety of assessment measures (e.g., rating scales, standardized cognitive and achievement measures)</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Accurately interprets data:</p> <ul style="list-style-type: none"> <li>Accurately interprets data from a variety of sources</li> <li>Offers answers to referral questions that are consistent with available data</li> <li>Gives recommendations that follow logically from data</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Engages in advanced interpretation and decision-making:</p> <ul style="list-style-type: none"> <li>Integrates data from a variety of sources, considering the validity and reliability of information gathered</li> <li>Analyzes the potential impacts of both strengths and weaknesses</li> <li>Offers diagnostic impressions consistent with all available data</li> <li>Offers recommendations that reflect a consideration for unique individual and contextual factors.</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Comments: Click or tap here to enter text</p>					

### Consultation, Collaboration, and Communication

<p>Demonstrates an understanding of various approaches to consultation and collaboration</p> <ul style="list-style-type: none"> <li>Understands consultation as a joint problem-solving process</li> <li>Identifies the various potential roles of consultants and consultees in shared problem-solving</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Engages in effective shared problem-solving</p> <ul style="list-style-type: none"> <li>Works to establish a shared understanding of problems and goals</li> <li>Generates appropriate evidence-based interventions to address the targeted problem</li> <li>Follows through to evaluate intervention effectiveness</li> <li>Collaboratively explores solutions for ineffective interventions and/or poor treatment fidelity</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>



Establishes effective working relationships <ul style="list-style-type: none"> <li>Establishes effective working alliances with clients</li> <li>Understands and respects the roles and perspectives of colleagues and other professionals</li> <li>Adopts an approach to working with others that facilitates effective consultation and collaboration</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
Participates effectively in groups and teams <ul style="list-style-type: none"> <li>Understands and appropriately fills assigned role in groups or teams</li> <li>Respects the time, contributions, and roles of other team members</li> <li>Offers constructive and productive feedback, shares information and resources when appropriate</li> <li>Works to improve group or team functioning</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
Communicates clearly and appropriately <ul style="list-style-type: none"> <li>Oral and written communication is accurate and thorough</li> <li>Uses respectful and professionally acceptable language</li> <li>Communication with others facilitates effective collaboration and service delivery</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
Demonstrates flexible and sensitive communication <ul style="list-style-type: none"> <li>Understands and appropriately responds to nuance and nonverbal cues</li> <li>Remains calm in difficult situations</li> <li>Adjusts verbal and nonverbal communication to meet the unique needs of situations and individuals, including colleagues, children, and families</li> <li>Works to resolve instances of miscommunication</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
Comments: Click or tap here to enter text					

### Interventions and Instructional Support to Develop Academic Skills

Appropriately considers contextual factors in understanding and addressing academic problems, including: <ul style="list-style-type: none"> <li>Classroom or instructional factors</li> <li>Cultural, social, or family factors</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
Appropriately considers individual factors in understanding and addressing academic problems, including: <ul style="list-style-type: none"> <li>Developmental factors</li> <li>Biological factors</li> <li>Impacts of social, emotional, and behavioral concerns on academic performance (e.g., motivation, self-efficacy)</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
Engages in evidence-based practice: <ul style="list-style-type: none"> <li>Capitalizes on individual and contextual strengths</li> <li>Recommendations/interventions follow logically from assessment results</li> <li>Recommendations/interventions are consistent with the empirical literature</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>

Evaluates the effectiveness of services: <ul style="list-style-type: none"> <li>• Demonstrates knowledge of various methods for assessing instructional effectiveness at the individual, group, and/or systems level</li> <li>• Implements appropriate data collection strategies to monitor the effectiveness of academic interventions</li> <li>• Considers intervention fidelity when making decisions about effectiveness</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
Comments: Click or tap here to enter text					

### Interventions and Mental Health Services to Develop Social & Life Skills

Appropriately considers contextual factors in understanding and addressing social, emotional, and behavioral problems, including: <ul style="list-style-type: none"> <li>• Classroom or instructional factors, including antecedents and consequences</li> <li>• Cultural, social, or family factors</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
Appropriately considers individual factors in understanding and addressing social, emotional, and behavioral problems, including: <ul style="list-style-type: none"> <li>• Developmental factors</li> <li>• Biological factors</li> <li>• Impacts of academic concerns on social, emotional, and behavioral performance</li> <li>• Identifying the function of behavior</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
Engages in evidence-based practice: <ul style="list-style-type: none"> <li>• Capitalizes on individual and contextual strengths</li> <li>• Recommendations/interventions follow logically from assessment results (e.g., FBA/BIP)</li> <li>• Recommendations/interventions are consistent with the empirical literature</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
Evaluates the effectiveness of services: <ul style="list-style-type: none"> <li>• Demonstrates knowledge of various methods for assessing instructional effectiveness at the individual, group, and/or systems level</li> <li>• Implements appropriate data collection strategies to monitor the effectiveness of social, emotional, and behavioral interventions</li> <li>• Considers intervention fidelity when making decisions about effectiveness</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
Comments: Click or tap here to enter text					

### School-wide Practices to Promote Learning

Ability to navigate systems <ul style="list-style-type: none"> <li>• Understands and operates within policies and procedures</li> <li>• Respects administrative structure</li> <li>• Identifies key stakeholders</li> <li>• Interacts effectively with school personnel</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
--	--------------------------------	-------------------------------	-------------------------------	-------------------------------	-------------------------------

<p>Knowledge of school-wide interventions</p> <ul style="list-style-type: none"> <li>• Demonstrates knowledge of system-level practices for promoting intern success (e.g., character education programs, evidence-based components of instruction)</li> <li>• Participates effectively in pre-referral and/or systems-level efforts</li> <li>• Identifies factors to be considered as part of systems-level needs and outcomes assessments</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Advocacy</p> <ul style="list-style-type: none"> <li>• Understands the complexities of systems change (i.e., knowledge of implementation science)</li> <li>• Works collaboratively with school personnel to improve policies and practices that affect services to children.</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Comments: Click or tap here to enter text</p>					

**Preventative and Responsive Services**

<p>Knowledge of comprehensive prevention programs for promoting academic and social/emotional/behavioral success</p> <ul style="list-style-type: none"> <li>• Understands components of academic-focused multi-tiered prevention models</li> <li>• Understands components of behavior-focused multi-tiered prevention models</li> <li>• Identifies strengths and needs of current prevention efforts</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Engagement in academic and or social/emotional/behavioral prevention efforts (one or more of the following examples)</p> <ul style="list-style-type: none"> <li>• Contributes to system-level prevention efforts (e.g., participating on teams)</li> <li>• Contributes to intervention selection, implementation, and evaluation as needed</li> <li>• Supports system-wide improvements in prevention efforts (e.g., staff development)</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Knowledge of crisis prevention, response, and recovery</p> <ul style="list-style-type: none"> <li>• Understands elements of crisis prevention, response, and recovery</li> <li>• Understands risk and resilience factors that may impact particular intern</li> <li>• Understands and follows site-specific policies related to crisis prevention, response, and recovery</li> <li>• Informs supervisor of any potential crisis situations</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Engagement in crisis prevention (one or more of the following examples)</p> <ul style="list-style-type: none"> <li>• Participates in systems-level meetings to develop and implement crisis prevention and intervention policy</li> <li>• Participates in direct services related to crisis prevention, response, or recovery</li> <li>• Engages in efforts to improve crisis prevention and intervention in policy and practice</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Comments: Click or tap here to enter text</p>					

### Family-School Collaboration Services

<p>Effectively engages with families</p> <ul style="list-style-type: none"> <li>• Demonstrates an understanding of effective strategies for engaging with families</li> <li>• Communicates proactively and positively with families</li> <li>• Recognizes and adjusts communication and recommendations to account for the unique strengths, needs, and perspectives of families</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Advocates for family engagement</p> <ul style="list-style-type: none"> <li>• Works with school personnel to strengthen connections with families and improve family-school communication</li> <li>• Identifies and works to enhance connections between families, schools, and appropriate community resources</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Comments: Click or tap here to enter text</p>					

### Diversity in Development and Learning

<p>Demonstrates self-awareness</p> <ul style="list-style-type: none"> <li>• Identifies personal beliefs, attitudes, and potential sources of bias that may impact service delivery</li> <li>• Effectively manages personal bias in working relationships, including those who hold differing or conflicting values and beliefs</li> <li>• Accepts feedback and engages in thoughtful self-reflection and professional development related to reducing the impact of personal bias on service delivery</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Demonstrates knowledge of cultural and individual differences</p> <ul style="list-style-type: none"> <li>• Understands typical and atypical human development, including knowledge of psychopathology</li> <li>• Understands cognitive, affective, and biological contributors to similarities and differences in human behavior</li> <li>• Understands the impact of personal history and identity (e.g., gender, cultural, racial/ethnic, religious, sexual identity) on beliefs, attitudes, and behaviors</li> <li>• Understands the impact of contextual and interpersonal factors (e.g., family structure, institutional or personal discrimination) on beliefs, attitudes, and behaviors</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Engages in culturally responsive practice</p> <ul style="list-style-type: none"> <li>• Applies an evidence-based approach to work effectively and sensitively with diverse populations and in diverse settings</li> <li>• Assessment, intervention, and consultation activities reflect sensitivity to individual and cultural factors</li> <li>• Professional oral and written communications reflect sensitivity to individual and cultural factors</li> <li>• Identifies barriers to culturally responsive practice; may advocate for social justice.</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Comments: Click or tap here to enter text</p>					

Research and Program Evaluation

<p>Knowledge and use of empirical literature</p> <ul style="list-style-type: none"> <li>• Demonstrates an understanding of the current literature and best practice</li> <li>• Seeks information from the literature when new questions arise</li> <li>• Appropriately incorporates information from the literature into practice.</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Evaluating practice</p> <ul style="list-style-type: none"> <li>• Evaluates the effectiveness of direct and indirect services to interns</li> <li>• Understands various methods for evaluating the effectiveness of programs and practices at the classroom and/or systems levels.</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Comments: Click or tap here to enter text</p>					

Legal, Ethical, and Professional Practice

<p>Legal and Ethical Practice</p> <ul style="list-style-type: none"> <li>• Demonstrates understanding of relevant laws, regulations, rules, and policies</li> <li>• Demonstrates understanding of professional ethics and professional practice standards</li> <li>• Identifies and initiates discussions about situations with ethical and legal implications</li> <li>• Articulates and applies a problem-solving process to work through ethical and legal dilemmas</li> <li>• Consistently acts in accordance with legal, ethical, and professional standards</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Dependability</p> <ul style="list-style-type: none"> <li>• Demonstrates adequate attendance and punctuality</li> <li>• Demonstrates adequate time management, completing assigned tasks on schedule</li> <li>• Preparedness for professional activities</li> <li>• Communicates about unforeseen complications or schedule changes in a timely manner.</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Professional Integrity</p> <ul style="list-style-type: none"> <li>• Demonstrates honesty in presenting own and others' work (e.g., documenting hours and activities)</li> <li>• Accepts responsibility for behaviors and work products, including mistakes and errors in judgment</li> <li>• Accepts consequences and works to make restitution for mistakes</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Reflective Practice</p> <ul style="list-style-type: none"> <li>• Accurately self-identifies professional strengths and areas for growth</li> <li>• Seeks and responds to performance feedback from supervisors and colleagues</li> <li>• Engages in and/or seeking out activities to improve areas identified for growth</li> <li>• Demonstrating awareness of the impact of his/her behavior on others</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Comments: Click or tap here to enter text</p>					

Use of Technology

<p>Competent use of technology</p> <ul style="list-style-type: none"> <li>Learns and accurately uses relevant technology for data management (e.g., intern information systems, IEP software)</li> <li>Learns and accurately uses relevant technology to facilitate completion of tasks (e.g., scoring software, e-mail, word processing)</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Responsible use of technology</p> <ul style="list-style-type: none"> <li>Understands potential legal and ethical implications of accessing and using various technology resources</li> <li>Protects client confidentiality in electronic communications</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Enhancing service delivery</p> <ul style="list-style-type: none"> <li>Identifies appropriate technology resources to enhance interventions and recommendations (e.g., apps, websites)</li> <li>Uses available technology to facilitate efficient and effective communication</li> </ul>	NO <input type="checkbox"/>	U <input type="checkbox"/>	D <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>
<p>Comments: Click or tap here to enter text</p>					

Summary

<p>Overall Comments: Click or tap here to enter text</p>
<p>Describe the intern’s progress during this evaluation period and areas that should be addressed in the upcoming evaluation period or in the intern’s next field experience (e.g., weaknesses or deficits, areas in which more experience is needed): Click or tap here to enter text</p>

\_\_\_\_\_  
to enter text.  
Supervisor Signature

Click or tap here

Date

By signing below, I verify that I have had an opportunity to review this evaluation and discuss it with my supervisor.

\_\_\_\_\_  
to enter text.  
Intern Signature

Click or tap here

Date

**Appendix C – Clinical Affiliation Agreement and  
Program-Specific Memorandum of Understanding**

CLINICAL AFFILIATION AGREEMENT

BETWEEN

Indiana State University

AND

\_\_\_\_\_
This Agreement is by and between Indiana State University (“ISU”) and
\_\_\_\_\_ (“Agency”) located in
\_\_\_\_\_ (City, State).

WITNESSETH

Whereas, the parties desire to cooperate in establishing a continuing educational relationship to assist in the education of interns by ISU whereby the \_\_\_\_\_ Department of ISU may utilize the education experience offered by the clinical facilities of the Agency, which facilities the Agency shall make available to ISU;

Whereas, Agency operates facilities with the capacity to provide a site for clinical teaching and practical education for interns enrolled in ISU’s [INSERT PROGRAM], i.e. “Applied Medicine and Rehabilitation Department.”;

Whereas, Agency is willing to receive and accept ISU interns at its facilities in order that interns may receive clinical and/or research experience required by ISU and its programs;

Whereas, it is to the mutual benefit of the parties to provide clinical experience for interns enrolled in certain programs of ISU, the parties have agreed to the terms and provisions set forth below:

I. Purpose and Consideration: The purpose of this Agreement shall be to provide clinical experience to interns enrolled in the University’s \_\_\_\_\_ program(s). Consideration for this Agreement shall consist of the mutual promises contained herein, the parties agreeing that monetary compensation shall neither be expected nor received by either party.

II. Terms and Conditions: Pursuant to the above-stated purpose, the parties agree as follows:

A. Term and Termination:

1. The Term of this Agreement shall be for a period of \_\_\_\_\_ years/months beginning on \_\_\_\_\_ and ending on \_\_\_\_\_.



2. Notwithstanding any other method of termination set forth elsewhere in the Agreement, this Agreement shall terminate:
- a. by mutual consent of both parties; or
  - b. by either party upon ninety (90) days written notice to the other party.

In the case of early termination, any interns currently participating in a clinical experience at Facility will be allowed to complete their experience.

B. Revisions: This Agreement is subject to changes and revision as necessary and by agreement of the parties; provided, however, that any such change or revision must be agreed to in writing by both parties in order to be binding. Any written changes, revisions, or addendums, shall be attached to and considered part of the original Agreement.

C. Placement of Interns: ISU shall notify the Agency, within a reasonable time prior to the beginning of each clinical experience, of the number of interns it desires to place at the Agency. The Agency shall have the right to accept or reject that number based on the current level of staffing in the appropriate discipline.

D. Discipline: While enrolled in a clinical experience at the Agency, interns will be subject to all applicable policies of the Agency, including the dress code. The Agency may immediately remove from the premises any intern who poses an immediate threat or danger to patients, staff, visitors of the premises or the public; in all other cases, interns shall be dismissed from participation in the clinical experience only after the appropriate disciplinary policies and procedures of ISU have been followed.

E. University-Specific Responsibilities: The following duties shall be the specific responsibilities of the University:

1. Identify interns for placement at the Agency.
2. Evaluate the clinical experience of the Intern in cooperation with the Agency.
3. Retain ultimate responsibility for the education, assessment, and final evaluation of the Intern's clinical experience.
4. Serve as a resource for the Facility and maintain liaison with Agency during the clinical experience.
5. Establish a procedure for notifying the Facility if an intern is unable for any reason to report for clinical training.
6. Establish professional liability and other insurance coverage as follows:
  - a. During the term of this Agreement, University agrees to provide evidence of adequate general liability insurance covering the acts or omissions of its faculty, employees and instructors during their participation in the Program. University agrees to provide notification to Facility if a lapse or change in insurance coverage occurs during the term of the Agreement.

b. The parties acknowledge that professional liability insurance may not be required for those interns that will not have patient contact. Agency shall make the final determination whether professional liability insurance is necessary for a particular educational program. Upon request of Agency, University agrees to provide professional liability insurance coverage for itself, its faculty and interns in the amounts necessary to comply with the Indiana Medical Malpractice Act.

7. Inform interns that they are not to submit for publication any material relating to the clinical education experience without prior written approval from the University and the Agency.

8. Distribute to interns the Agency's pertinent policies and procedure, if such materials are provided by the Agency.

9. Instruct its interns to comply with the policies and procedures of Agency, including those governing the use and disclosure of individually identifiable health information under federal law, specifically 45 CFR parts 160 and 164. Solely for the purpose of defining their role in relation to the use and disclosure of Agency's protected health information, such interns are defined as members of the Agency's workforce, as that term is defined by 45 CFR 160.103, when engaged in activities pursuant to this Agreement. However, interns are not and shall not be considered to be employees of the Agency. Nor shall interns at any time be considered employees, agents, or representatives of the University. In addition, University agrees that an intern's breach of Agency's policies concerning confidentiality shall be grounds for intern discipline by University, including dismissal from the educational program and/or removal from the Agency.

10. To instruct interns that they are responsible:

a. To follow policies and procedures of the Agency throughout the affiliation.

b. To provide written evaluation of the Agency to both Agency and the University upon request.

c. To provide health records upon request by the Agency. Typical requests include proof of Immunization tests, including MMR, PPD and Hepatitis B and/or Hepatitis declination form.

d. To provide documentation to the Agency of personal health insurance in effect during the term of assignment.

e. To provide documentation of appropriate professional liability insurance as provided in Paragraph II(E)(6)(b), if applicable.

f. To obtain, if required by the Agency, a criminal background check that meets the Agency's requirements and to provide a copy of the results of the background check to the University and the Agency.

F. Agency-Specific Responsibilities: The following duties shall be the specific responsibilities of the Agency:

1. Provide an orientation for the purpose of familiarizing interns with Agency's physical facilities, philosophy, policies and procedures for providing care, and such other aspects of Agency's operations as are pertinent to the educational experience of the interns.

2. Maintain a sufficient level of staff support to provide supervision of interns and to carry out normal service functions without having interns perform in lieu of staff. Notify the University if staffing falls below this level while interns are present on scheduled affiliation.

3. Provide for the interns a patient caseload that is appropriate to his/her needs and level of experience and proficiency and that is of sufficient size and variety to ensure the best educational experience possible.
4. Notify the University in writing of any changes within the Agency which would alter significantly the specified clinical education experiences for the interns.
5. Retain complete responsibility for patient care, providing adequate supervision of interns at all times.
6. Maintain a sufficient level of staff employees to carry out regular duties. Interns will neither be expected nor permitted to perform services in lieu of staff employees.
7. Provide or obtain emergency medical treatment for interns if needed for illness or injuries suffered during clinical experience. Such treatment shall be at the expense of the intern treated.
8. Maintain all applicable accreditation requirements and certify such compliance to the University or other entity as requested by the University. The Agency shall also permit authorities responsible for accreditation of the University's curriculum to inspect the Agency's clinical facilities and services as necessary.
9. Provide an assessment of the Intern's general performance and the Intern's clinical proficiency.

G. Mutual Responsibilities: The parties shall cooperate to fulfill the following mutual responsibilities:

1. The parties shall each appoint one person to be responsible for the Program. University shall appoint a program coordinator ("ISU Clinical Coordinator") and the Agency shall appoint a program supervisor ("Clinical Education Supervisor"). Each party shall supply the other party with the name of this person along with the person's professional and academic credentials. Each party shall promptly notify the other in writing of any change of the person appointed. University will disclose information from an intern's educational record, as appropriate, to personnel at Agency who have a legitimate need to know in accordance with the Family Educational Rights and Privacy Act. Agency agrees that its personnel will use such information only in furtherance of the Program, and that the information shall only be disclosed to third parties in accordance with the Family Educational Rights and Privacy Act.
2. Each party shall comply with all federal, state, and municipal laws, rules and regulations which are applicable to the performance of this Agreement.
3. Interns shall be treated as trainees who have no expectation of receiving compensation or future employment from the Facility or the University.

4. The parties expressly acknowledge and agree that interns are not the agents or employees of either the University or the Agency for any purpose, including but not limited to purposes of providing general liability coverage pursuant to Paragraph II(E)(6)(a). of this Agreement.

5. The parties agree to comply with Title VI and IX of the Federal Education Amendments of 1972, and Section 504 of the Federal Rehabilitation Act of 1973, Executive Order 11,246 and the related regulations to each. Each party assures that it will not discriminate against any individual including, but not limited to, employees or applicants for employment and/or interns, because of race, religion, ethnic or national origin, gender, sexual orientation, marital status, age, disability, or veteran status.

6. It is understood and agreed that this Agreement is not intended and shall not be construed or deemed to create or confer any right or benefit to any person not a party hereto. The relationship between the University and the Agency shall be considered as one between independent contractors and not as a joint venture or partnership.

H. Governing Law: The validity, construction and effect of this Agreement shall be governed by the laws of the State of Indiana and any dispute hereunder will be adjudicated in federal or state courts in Indiana.

I. Notice: In the event that notice is required of either party hereunder, it shall be provided through first class United States mail addressed to the following:

FOR ISU: [TITLE]  
Indiana State University  
Terre Haute, Indiana 47809

With a copy to:  
General Counsel's Office  
Indiana State University  
Parsons Hall, Suite 223  
Terre Haute, IN, 47809

FOR AGENCY:

**IN WITNESSES WHEREOF**, the parties have by their duly authorized representative set forth their signature:

UNIVERSITY:

AGENCY:

BY: \_\_\_\_\_ BY: \_\_\_\_\_  
(Signature) (Signature)

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(Printed name)

---

(Printed Name)

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(Title)

---

(Title)

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(Date)

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(Date)

## **Indiana State University School Psychology Internship Consortium (ISU-SPIC) Memorandum of Understanding**

Agency:	
Program:	Indiana State University School Psychology Internship Consortium (ISU-SPIC)
Intern:	
Dates of Experience:	

This document is intended to supplement and not replace a formal Clinical Affiliation Agreement already in place between the University and the Agency. It is mutually agreed by the above-named program and the agency that internship experiences in school psychology will be provided for the above-named intern. This document serves to define the relationship among and responsibilities of all parties in regard to internship completion.

### **ISU-SPIC Responsibilities**

1. Designate a licensed psychologist to serve as the Director of Training (DoT) for the internship.
2. Facilitate the creation and monitoring of the internship experience. This includes:
  - Advertising the internship on a yearly basis
  - Accepting applications and facilitating the interview and intern acceptance process
  - Facilitating development of the internship training plan and completion of clinical affiliation agreements and MoU's
  - Ensuring interns complete the required background check and submit evidence of malpractice insurance prior to beginning the internship
  - Ensuring collection and documentation of hours logs and intern evaluations
  - Verifying the satisfactory completion of internship requirements and issuing an internship completion certificate.
  - Facilitating informal or formal efforts to address concerns that arise during the course of the internship
  - Working with interns' doctoral program faculty to address any program-specific requirements or any concerns that arise during the course of the internship
3. Provide a consortium structure for the internship experience to increase the number of interns who can be served, provide additional documented training activities, and ensure sufficient opportunities for interaction amongst doctoral interns. The DoT will explain, oversee, and evaluate course assignments and will provide regular opportunities for check-ins and consultations with interns.
4. Demonstrate timely communication with both the intern and the clinical supervisors. This will include:
  - Upon request, providing sites with assurance that the intern has passed a criminal background check and has purchased malpractice insurance coverage

- Communicating internship requirements in the form of
  - A copy of this handbook
  - A signed copy of the internship training plan and the MoU
  - A form and timeline for completion of intern performance evaluations
  - A timeline and process for the verification of final hours logs
- Provide the opportunity for a conference between the intern, the DoT, the primary supervisor, and other clinical supervisors following completion of each performance evaluation, or as needed.
- Support the clinical supervisors with regard to concerns about (a) intern performance, (b) the ability of the agency to provide adequate supervision, (c) the ability of the agency to provide opportunities sufficient to complete internship requirements, or (d) other concerns that arise relative to the internship experience.

### **Agency Responsibilities**

1. Determine willingness to accept the intern for the period covered by this agreement.
2. Prior to the beginning of training, provide the intern with:
  - A written statement of salary, benefits, reimbursable travel, holidays
  - Information pertaining to due process procedures, if applicable
  - Agency expectations, policies, and procedures which will serve as guidelines for dress code, professional and personal conduct, confidentiality, and delivery of school psychological services
  - Any other information relevant to successful completion of the internship experience
3. Provide the intern with appropriate office space, secretarial assistance, and other necessary support, materials, and equipment to carry out the functions of the placement. These provisions will be consistent with the availability afforded regular staff members.
4. Coordinate supervision as described in the internship training plan. This includes:
  - Designating a clinical supervisor(s) to provide case supervision. Clinical supervisors must be doctoral level psychologists who are actively licensed to practice at the independent level by the state regulatory board of psychology.
  - Coordinating additional group or individual supervision, conducted by an appropriately credentialed health service provider(s), if such supervision is to be provided by the agency.
5. In the event that the clinical supervisor becomes unavailable:
  - Cooperate with the DoT and intern to provide for appropriate clinical supervision as needed for a period of up to 60 days.
  - Within 60 days, designate a new clinical supervisor as described above
6. Allow adequate time for the intern to participate in professional development and supervision experiences such as conferences, seminars, group and individual supervision, or similar meetings in consultation with the Supervisor.
7. Ensure the intern has a title such as “intern,” “resident,” or other designation of trainee status.

8. Provide the opportunity for the intern to complete an experience of 2,000 hours over a period of 12 months.

### **Clinical Supervisor Responsibilities**

1. Participate in the creation of the internship training plan.
2. Within the first 30 days of the internship, provide a copy of the supervisor's current curriculum vitae.
3. Provide regular individual supervision according to the plan described in the internship training plan. The specific intent of this supervision is evaluating the quality and integrity of the services provided by the intern and supporting the intern in his/her role as psychological service provider.
4. Monitor the intern's activities and internship hours to ensure the intern remains on-track to complete the hours and activities associated with the agency in the internship training plan.
5. Maintain clinical responsibility for the cases being supervised. This includes:
  - Communicating and/or coordinating case assignments, responsibilities, and educational opportunities to the intern.
  - Co-signing reports prepared by the intern for consumers (i.e., other agency personnel or other relevant publics).
  - At least once per observation period (i.e., quarterly), directly observing the intern with the specific intent of evaluating the intern's clinical department and skills in psychological service delivery.
  - Monitoring the intern's conduct as it pertains to (a) the personnel policies and practices of the Agency, (b) ethical guidelines, (c) state and federal law, and (d) generally acceptable guidelines for professional conduct in all activities associated with the internship placement. The intern shall be under the direction and control of the agency while they are on the premises of the agency or acting in behalf of the agency in locations other than the premises.
6. Communicate any concerns about the intern's performance to the primary supervisor and DoT at the time of the quarterly evaluation or more frequently, as needed for appropriate collaboration, support of the intern, and/or remediation of deficits. Notify the DoT if due process procedures are initiated as a result of intern behaviors, intern activities, or internship conditions.
7. Notify the DoT of any situation that may require immediate intervention; may threaten the intern's successful completion of the internship experience, or may represent a violation of Agency, University, or Program policies, professional ethical guidelines, or state or federal law.
8. Collaborate with the supervision team (i.e., the other clinical supervisors and the DoT) as needed to:
  - Complete required evaluations and hours log verification



- Ensure compliance with the telesupervision policies of ISU-SPIC as described in this agreement
- Address any concerns that arise during the course of the internship

### **Primary Supervisor Responsibilities**

1. Coordinate with the other clinical supervisors as needed to:
  - Complete a formal, written evaluation three times during the year, and discuss the results of the evaluation with the intern.
  - Review and the intern's completed hours log three times per year, at the time of each performance evaluations.
2. Submit the completed evaluation forms, signed by both the primary supervisor and the intern according to the procedures requested by ISU-SPIC.
3. Verify the reasonable accuracy of the hours log at the conclusion of the internship according to the procedures requested by ISU-SPIC.

### **Intern Responsibilities**

1. Commit to the internship placement for the duration of this agreement, including full-time, on-site engagement in the internship site. Exceptions should be approved in advance by the agency supervisor. The intern is responsible for notifying the DoT of significant scheduling changes.
2. Maintain and provide ISU-SPIC with evidence of a minimum of \$1,000,000/\$3,000,000 professional liability insurance during the internship placement, at the intern's expense.
3. Complete and provide ISU-SPIC with evidence of a clear criminal background check.
4. Complete in a timely manner any requirements of the agency for internship placement, including but not limited to criminal background checks, drug screening, or agency-specific training.
5. Function within (a) the personnel policies and practices of the Agency, (b) the policies and procedures of ISU-SPIC, (c) professional ethical guidelines, (d) state and federal law, and (e) generally acceptable guidelines for professional conduct in all activities associated with the internship placement.
6. Assume responsibility for ensuring all internship requirements have been met in accordance with the expectations set forth by ISU-SPIC. This includes but is not limited to:
  - Regular and timely communication with the agency and clinical supervisors about consortium requirements and important due dates for assignments, evaluations, and documentation.
  - Regular and timely communication with the DoT regarding potential barriers to successful or on-time completion of course requirements.

7. Actively participate in regular individual and group supervision activities with the assigned supervisors, and seek supervision in a timely manner regarding activities that exceed the intern's bounds of competence or are of a time-sensitive nature.
8. Clearly communicate about scheduling needs, site-based experiences, and training needs to the supervision team (i.e., DoT and clinical supervisors) in a timely manner.
9. Maintain responsibility for expenses incurred for travel to and from the site, as well as for participation in professional development activities or professional association membership incurred during the internship experience.

### **Telesupervision Policies**

The DoT and clinical supervisors share responsibility for ensuring the telesupervision requirements are satisfied. According to APA Implementing Regulations, telesupervision is defined as a “synchronous audio and video format where the supervisor is not in the same physical facility as the trainee.” Telesupervision does not include phone calls, text messages, e-mail, or other forms of communication that do not use synchronous audio and video communication. Telesupervision is generally utilized to supplement—rather than replace—regularly scheduled face-to-face supervisory interactions.

1. Telesupervision should not account for more than 50% of the individual supervision provided or more than 50% of the total supervision provided. Telesupervision may exceed 50% of the total supervision only if there is no alternative option for delivering supervision (e.g., quarantine, emergency situations).
2. If used, the agency has a clearly articulated rationale for using electronic media for supervision purposes and maintains a formal policy that includes procedures to address issues of non-scheduled consultation, crisis coverage, and handling of privacy and confidentiality. These policies and procedures are established in advance and provided by the agency to the clinical supervisor, the intern, and the DoT.
3. Prior to using telesupervision, the clinical supervisor is responsible for ensuring the intern has adequate clinical experience to operate without the supervisor's physical presence in the same location, and there must be a plan in place for managing crisis situations.
4. Both the supervisor and the student should have sufficient technological skill and access to technology to allow full participation in telesupervision using synchronous video and audio communication.
5. The mode of communication must be sufficiently secure to protect the confidentiality of the supervisee and any client information.
6. Due to COVID-19, telesupervision may be utilized more than typical to ensure proper social distancing and comply with health and safety guidelines.

### **Terms of Agreement**

1. The terms of this agreement shall be for the period specified at the beginning of this agreement. The intern is assigned to the same schedule and calendar time as are other school psychology staff employed by the Agency.
2. This agreement is subject to changes and revisions as necessary and by written agreement of the parties concerned.

3. This agreement may be immediately suspended by either the Agency or the Program upon suspicion of illegal, unethical, or unprofessional behavior on the part of the Intern, the Agency, or the Program, such that the integrity of the services provided by the Agency or the quality of training provided to the Intern may be called into question if the partnership continues.
4. This agreement may be immediately terminated upon findings or admission of illegal, unethical, or unprofessional behavior, as described above.
5. This agreement may be discontinued by any party with 60 days' written notice.
6. No compensation will be paid or received by the Program or the University.

Intern Contact Information	
Printed Name	
Preferred Phone Number	
E-mail	
Agency Representative Contact Information	
Printed Name	
Preferred Phone Number	
E-mail	
ISU-SPIC DoT Contact Information	
Printed Name	
Preferred Phone Number	
E-mail	
Clinical Supervisor Contact Information	
Printed Name	
Preferred Phone Number	
E-mail	
Clinical Supervisor Contact Information	
Printed Name	
Preferred Phone Number	
E-mail	

I have read and agree to abide by the terms of this agreement.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Agency Representative Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
ISU-SPIC DoT Signature

\_\_\_\_\_  
Date

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Clinical Supervisor Signature

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Date

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Clinical Supervisor Signature

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Date