

# Doctoral Internship Program Brochure

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# **CTAC Clinical Psychology Doctoral Internship Program**

# About Colorado Therapy & Assessment Center

CTAC is a values-driven company that puts people first, including employees, student trainees, and clients. Our values, Compassion, Belonging, Excellence, and Humility, inform how we work together, train students, and serve our clients and our community. CTAC is a social justice-oriented organization. CTAC is an anti-racist, LGBTQ+-affirming, Health at Every Size ®, woman-owned practice.

CTAC is a private, outpatient-only clinic serving the greater Denver metro area. CTAC strives to provide affordable, accessible care for the community by offering a wide variety of services for numerous mental health concerns while accepting many payer sources such as commercial insurance, Medicare, Medicaid, Tricare, and reduced fee, private pay. CTAC is a designated Community Mental Health Clinic by the State of Colorado (CCR 21.120.3 B). Unlike county-wide Community Mental Health Centers, CTAC's operation as a private, Community Mental Health Clinic enables us to work with clients who are good fits for our services, clinical modalities, and are low acuity and appropriate for outpatient-only level of care. CTAC serves voluntary clients only.

CTAC offers specialty services for eating disorders, as well as general mental health treatment for depression, anxiety, relational concerns, trauma, and more through individual, group, couples, and family psychotherapy. CTAC's robust psychological assessment program provides comprehensive testing for multiple concerns.

CTAC has two locations, serving the greater Denver area. Interns will have a primary office at the Westminster location, since the majority of the doctoral training supervisors and staff primarily work out of this location, and use the Denver office for seminars and group therapy, per opportunity. Each location has senior staff and supervisors as well as doctoral externs. On days where training activities are located at Westminster and/or Denver, each intern will have an office to work out of for the entire workday.

# Denver - 1777 S. Bellaire St. Suite 390 Denver, CO 80222

Our Denver office is located on the south side of downtown Denver and near an eating disorder treatment program, with which CTAC works closely. This location includes therapy offices and a group room where seminars, assessments, meetings, and group therapies are held. Licensed psychologist supervisors are on-site and coordinate with the Training Director regarding intern services and trainings.

Westminster - 8461 Turnpike Dr. Suite 102, Westminster, CO 80031

Our Westminster office is located off of Highway 36 at Sheridan Blvd, midway between Denver and Boulder. This location is close in proximity to a dietetic service provider, with which CTAC also has a strong relationship. This location includes therapy offices and group rooms where seminars, assessments, meetings, and group therapies are held. Licensed psychologist supervisors are on site and coordinate with the Training Director regarding intern services and trainings.

# What does CTAC do?

CTAC accomplishes its mission by offering clients:

- 1. Individual Psychotherapy
- 2. Group Psychotherapy
- 3. Family Psychotherapy
- 4. Couples Psychotherapy
- 5. Psychological Assessment and Testing

CTAC also has a training program for doctoral psychology graduate students, doctoral psychology interns, and postdoctoral residents. CTAC staff (Licensed Psychologists and Postdoctoral Residents) provide supervision and training to trainees, creating variety in their work and supporting CTAC's mission to provide a variety of services to individuals of all backgrounds, increasing access to quality mental health care.

# Who does CTAC serve?

- 1. CTAC provides services for clients who are clinically appropriate for outpatient-only level of care.
- CTAC serves voluntary clients only. CTAC does not provide services for individuals who are mandated in any way, instead, providing them a referral to organizations that specialize in mandated services.
- 3. CTAC serves clients ages 5 years and older.

CTAC serves clients from all backgrounds, racial, ethnic, and gender identities, and with various levels of ability and disability, religious, spiritual, and non-faith backgrounds. CTAC does not discriminate based on identity or protected classes.

# Training Program Philosophy and Overview

# General Description of Internship program

The Clinical Psychology Doctoral Internship Program at CTAC is a full-time (40 hours per week, 2000 hours total), 12-month long program for qualified trainees who come from clinical psychology doctoral training programs. It provides interns a unique opportunity to work in a group private practice setting with a specialization in outpatient eating disorder treatment. Our program emphasizes a developmental approach to training that offers comprehensive supervision and support as interns grow and practice a mixture of therapeutic and assessment services to adults and adolescents. We strive to provide an excellent training program that is both personally and professionally rewarding in order to launch trainees into their future careers in clinical psychology.

The doctoral psychology internship program represents the first year in a two-year training track at CTAC; the second year is a postdoctoral residency which provides additional training in our areas of specialization (e.g., eating disorders, psychological testing, supervising externs) and hours toward licensure pending continued interest and fit at CTAC. Interns must complete their dissertation, doctoral degree, and internship in order to participate in the postdoctoral residency.

# Aims, Philosophy, and Training Model

At CTAC, our goal is to provide not only excellent, in-depth clinical training to interns, but to support interns' development, professionally and personally. The aims of the doctoral internship program are to provide students with a broad range of experiences in an outpatient setting specializing in treating eating-disorders, by treating a diverse population of clients and learning from psychologists with varying professional and personal background in order to develop profession-wide competencies. Following models of servant leadership and authentic leadership, interns will be invited to develop character strengths such as humility, forgiveness, courage, and more, in addition to professional skills such as assertive communication, conflict resolution, and collaborative teamwork. CTAC wants all employees and trainees to feel like they are better people for having worked here. Our program heavily emphasizes practical skills for the working world and professional mentorship. We draw from a Practitioner-Developmental-Apprenticeship model.

Consistent with the Practitioner-Developmental-Apprenticeship model, the training sequence begins with a structured orientation to CTAC policies, practices, and an emphasis on seminar trainings before interns build their caseloads. As the training year continues, interns will continue to receive consistent supervision and seminar experiences, but transition to managing full caseloads in a manner equipping them for

future independent practice. Throughout the training year, interns will receive hands-on support, supervision, and guidance by supervisors and training staff to gain clinical prowess alongside personal formation.

Supplementary to the hands-on training in the internship program, interns are encouraged to access the library of CTAC resources including training videos, books, assessment manuals, podcasts, and professional memberships, in order to deepen their training experience. CTAC has a social justice resource library for books related to anti-racist, LGBTQ-affirming, weight-inclusive, to name a few, to aid in social justice awareness and ability to implement social change. In addition to the resources provided by the internship program staff, interns also receive administrative support from the CTAC Office Manager and Biller. The Office Manager and Biller provide support for interns regarding scheduling, EMR-support, insurance questions, client communication, and billing.

# **Training Goals & Objectives**

Grounded in the Developmental-Practitioner-Apprentice model of training, the CTAC Clinical Training Program seeks to achieve an advanced level of proficiency in training goals consistent with the APA's profession-wide competencies. In addition to the profession-wide competencies, interns are expected to demonstrate CTAC-specific competencies/objectives consistent with our company values of Compassion, Belonging, Humility, and Excellence. By the end of the internship training year, each intern is expected to demonstrate "intermediate competence" in each of our training goals and objectives. The CTAC training goals and objectives are as follows:

#### Goal 1# - Research/Evaluation

To demonstrate a commitment to the application of scientific research to clinical practice. The application of scientific research to clinical practice competency relates to the Doctoral Interns' ability to pursue and integrate information from the literature that is relevant to their clinical cases and training at CTAC.

Objectives:

- 1.1 Demonstrate ability to critically evaluate research.
- 1.2 Demonstrate ability to disseminate research and/or participate in other scholarly activities (case conference, presentation, publication).

# Goal #2 - Ethical and Legal Standards

To demonstrate the application of ethical concepts and awareness of local and profession-wide legal issues regarding professional activities with individuals, groups, and organizations.

Objectives:

- 2.1 Have working knowledge and act in accordance with APA Ethics Principles and Code of Conduct alongside other relevant laws, regulations, rules, and policies, and professional standards and guidelines
- 2.2 Independently identify ethical dilemmas as they arise and apply ethical decision-making processes to these dilemmas.
- 2.3 Act in an ethical and professional manner in all professional activities.

#### Goal #3 - Assessment

To develop knowledge and skills in the area of psychological assessment and evaluation. Assessment and evaluation competencies involve the ability to accurately choose and employ appropriate tools to assess and diagnose problems through the formal psychological evaluation and feedback process.

Objectives:

- 3.1 Demonstrate current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology.
- 3.2 Demonstrate a respectful understanding of diverse human behavior and identities within the unique context (e.g., family, social, societal, and cultural).
- 3.3 Demonstrate the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process.
- 3.4 Independently select and apply multiple evaluative methods that draw from
  the best available empirical literature and that reflect the science of measurement
  and psychometrics; collect relevant data needed to address the goals and
  questions of the assessment, keeping in mind relevant diversity characteristics.
- 3.5 Independently integrates assessment data and results to accurately evaluate presenting questions, inform case conceptualization, diagnosis, and recommendations in a manner following current research and professional standards and guidelines.
- 3.6 Communicate orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to different audiences.
- 3.7 Completes assessment, including administration, interpretation, and report writing, in a timely manner (as discussed in the CTAC Testing Program Manual).

#### Goal #4 - Intervention

To develop and show competence in establishing quality therapeutic relationships with a diverse range of clients and display a range of therapeutic interventions grounded in evidence-based practice in order to alleviate suffering and promote the well-being of individuals, groups, and/or organizations.

# Objectives:

- 4.1 Establish and maintain effective relationships with a range of clients.
- 4.2 Display clinical skills to treat a wide range of presenting problems for a variety of clients in a manner consistent with ethical judgment
- 4.2 Produce evidence-based intervention plans specific to the treatment goals
- 4.3 Implement evidence-based interventions and clinical decision making consistent with empirical models, yet flexible enough to adapt where appropriate
- 4.4 Evaluate treatment progress and intervention effectiveness in an ongoing manner and adapt interventions to address relevant treatment goals

# Goal #5- Consultation and interprofessional/interdisciplinary skills

To develop and provide expert guidance or professional assistance and to understand and engage in related multidisciplinary consultation in response to client's needs or goals.

#### Objectives:

- 5.1 Demonstrate knowledge and respect for the roles and perspectives of other related professions.
- 5.2 Demonstrate knowledge of consultation models and practices.
- 5.3 Apply this knowledge in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior toward shared goals.

# Goal #6 - Professional values, attitudes, and behaviors

To develop and show competence in behavior and comportment that reflect the values and attitudes of professional psychology.

#### Objectives:

- 6.1 Act in ways that reflect core professional values such as integrity, deportment, accountability, concern for others, and professional identity.
- 6.2 Engage in self-reflection, self-evaluation, and intentional efforts to maintain and improve competence and well-being.
- 6.3 Demonstrate humility through openness and responsiveness to feedback.
- 6.4 Demonstrate pursuit of excellence across professional domains.
- 6.5 Act in ways that communicate compassion and belongingness to clients, colleagues, and contractors.
- 6.7 Act in ways consistent with being an ideal team player

# Goal #7 - Supervision

To demonstrate competence in the use of supervision and within a supervision role in working with doctoral externs.

#### Objectives:

7.1 Demonstrate knowledge of supervision models and practices.

 7.2 Apply this knowledge in direct or simulated practice with psychology trainees, or other health professionals

# Goal #8 - Communication and Interpersonal Skills

To demonstrate broad personal qualities that directly impact professionalism across all areas of functioning as a clinician. These areas of competency reflect CTAC's company values of Humility, Excellence, Compassion, and Belonging.

Objectives:

- 8.1 Demonstrate effective relationships with a wide range of individuals and groups, e.g., colleagues, communities, organizations, supervisors, supervisees, and clients.
- 8.2 Produce and comprehend oral, nonverbal, and written communications that are informative and well-integrated; demonstrate a thorough grasp of professional language and concepts.
- 8.3 Demonstrate effective interpersonal skills and the ability to manage critical feedback and difficult communication well.

# Goal #9 - Individual and Cultural Diversity

To demonstrate awareness of one's personal identities (e.g. race, ethnicity, age, social class, ability, religion, gender, sexual orientation, etc.) and privileges, as well as to demonstrate ongoing competency in the ability to incorporate cultural humility, diversity factors and individual differences into clinical and professional work.

Objectives:

- 9.1 Demonstrate awareness of the intersectionality of one's own identities, background, privilege, and biases.
- 9.2 Demonstrate knowledge of others as cultural beings and understanding of the theory and research of cultural humility and social justice.
- 9.3 Demonstrate an ability to apply cultural humility and social justice in assessment, treatment and consultation.
- 9.4 Independently apply awareness, knowledge, attitudes and skills regarding diverse and marginalized identities to work effectively with the range of individuals and groups encountered on internship.

# Goal #10 Eating Disorders

To demonstrate an understanding and practice of effective diagnosis and treatment of eating disorders and eating disorder behavior, as well as to demonstrate an understanding of the influences of diet culture, weight stigma, and intersectionality on eating disorder etiology and subsequent treatment.

# **Objectives**

• 10.1 Demonstrates awareness of one's own history and biases toward weight stigma and eating behaviors as these elements bear upon professional practice.

- 10.2 Demonstrates understanding of diet culture, weight stigma, and body diversity and challenges cultural and scientific assumptions about weight.
- 10.3 Demonstrates effective understanding and practice of evidence-based therapeutic interventions for working with a wide range of eating disorder behaviors.
- 10.4 Demonstrates ability to correctly diagnose eating disorders, determine level of care, and involve supports as indicated
- 10.5 Demonstrates knowledge of and/or initiative to consult and learn about eating disorder concerns as indicated.
- 10.6 Incorporates interdisciplinary consultation with dietitians, primary care providers, and eating disorder centers for treatment planning and interdisciplinary care in a skillful, ethical way
- 10.7 Articulates and demonstrates understanding of various evidence-based approaches in eating disorder treatment such as ACT, Psychodynamic, Family-Based Treatment, etc.

# **Program Structure and Components**

# Clinical Training Program Structure

# Estimated Average of Weekly Internship Hours Distribution: 40 hours/week

- Direct Service Delivery: 20 hours
- Supervision & Training Activities: 8 hours
- Professional Development, Administration & Support Activities: 12 hours

# Amount of direct clinical service: approx. 20 hours

- Approx. 15-17 hours of individual and group therapy
- Approx. 3-5 hours of psychological assessment administration
- 1 hour of supervision of extern

# Amount of individual face-to-face supervision per week by licensed psychologists: 2 hours

- 1 hour per week of Individual Therapy Supervision, with primary licensed supervisor
- 1 hour per week of Individual Assessment Supervision, provided by secondary licensed supervisor

# Amount of group face-to-face supervision per week: 3 hours

- 1 hour per week Group TD Psychotherapy Supervision and Lab, provided by the Training Director
- 1 hour per week Group Assessment Supervision, provided by licensed staff psychologist
- 1 hours per week of Group Supervision of Supervision, provided by licensed staff psychologist

# Amount of training activities: 3 hours

- 1 hour weekly CTAC Team Meeting
- 1 hour biweekly Eating Disorder Seminar
- 1 hour biweekly Assessment Seminar
- 1 hour weekly Psychotherapy Seminar

# Amount of professional development, administration & support activities: 8-12 hours (average)

- Psychological Assessment writing approx. 3-5 hours
- Clinical note writing and case coordination with interdisciplinary providers
- CTAC Professional Development In-service Presentation & Experiential Trainings

- Intern Team Building
- Assessment and/or Therapy consultations (as needed)
- Seminar reading and professional development projects

# **Clinical Training Program Components**

CTAC offers interns excellent clinical training and experience in the assessment and treatment of a diverse community in a private outpatient setting with a specialization in treating eating disorders. The program is designed to provide interns with practical clinical and administrative experiences in a private practice setting in order to not only prepare them to achieve doctoral level competency and their future careers in clinical practice, but challenge them to develop personal maturity. In order to accomplish these goals, the program offers the following clinical, supervision, and training experiences:

# Psychotherapy and Psychological Interventions:

- Individual therapy for a diverse population of adults and teens
  - Common presenting concerns include:
    - Eating disorders
    - Trauma/PTSD
    - Anxiety disorders
    - Mood disorders
    - OCD
    - Relationship issues
- Group therapy
  - Eating Disorder Group
  - Binge Eating Group
  - Relationships Interpersonal Process Group
  - Womxn's Interpersonal Process Group
- Couples therapy
- Family therapy
- Psychoeducational group
- Supervision of doctoral extern trainee

# Psychological Assessment and Evaluation for:

- Adoption Evaluations for Prospective Adoptive Parents
- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Learning Disorders including Dyslexia/Disorder of Written Expression, Math Disorder, and Reading Disorder
- Giftedness/IQ (Intelligence and Academic Performance testing)
- Clergy Evaluations
- Gender-related surgery such as Gender Affirming Surgery Evaluation

• General Mental Health including Mood Disorders such as Bipolar Disorder

# Supervision:

- Individual psychotherapy supervision (primary supervisor, 1 hour)
- Individual assessment supervision (secondary supervisor, 1 hour)
- Group TD psychotherapy supervision and lab (1 hour)
- Group assessment supervision (1 hour)
- Group supervision of supervision (1 hour)
- Intern supervision of extern (per opportunity)
- CTAC Team Meeting/Supervision (1 hour)

#### Seminars:

- Psychotherapy Seminar (weekly)
- Eating Disorder Seminar (biweekly)
- Assessment Seminar (biweekly)

# Other training and professional development:

- Interdisciplinary networking and consultation
- Risk Assessment
- Safe Zone (LGBTQ\* awareness and ally)
- Racial Justice
- Health At Every Size (HAES)
- Mandated Reporting

# Seminars & Trainings

# Psychotherapy Seminar

The purpose of the Psychotherapy Seminary is to assist interns in developing clinical assessment skills, diagnostic assessment skills, clinical intervention skills, and cultural awareness/humility in providing psychological services to a diverse population of outpatient clients. The seminar is consistent with the goals and convictions of CTAC in pursuing clinical excellence and social justice in all aspects of training and practice. It will be conducted weekly for 1 hour. Readings will be chosen from relevant and current literature and assigned before each seminar in order to supplement discussion, learning, and engagement with the seminar. Topics are organized in a developmentally appropriate sequence to help interns build their clinical acumen in a manner consistent with their level of experience and training trajectory for the internship year. Seminars consist of lecture/presentation, discussion, and case presentation in order to enhance learning. Topics covered in the seminar may include:

- Assessing risk and fit for outpatient treatment
- Establishing a therapeutic focus for treatment
- Assessing motivation to change
- Building a working alliance in treatment
- Developing cultural humility, competence and awareness
- Transtheoretical Model of Anxiety: Response to Intervention
- Diagnosis DSM vs. PDM
- Case Conceptualization and Formulation, Personality Structure

- Cultural Humility: ADDRESSING
- Specific Populations: LGTBQ+, BIPOC, Disabilities
- Specific Theories:
   Psychodynamic, ACT, IPT,
   Short-Term Treatment
- Specific Issues: Highly Resistant Patients, Trauma, Anxiety Dysregulation
- Person of the Therapist

#### Assessment Seminar

The Assessment Seminar is a biweekly training that is aimed to offer trainees an overview of all assessment tools used at CTAC, hands-on administration practice, guidance on interpretation of assessment measures, and integration of assessment tools to answer diagnostic questions. As such, there is a developmental trajectory in the seminar that transitions from general assessment knowledge to more complex tools and diagnostic questions. It is conducted biweekly for 1 hour. Topics/tools covered in the seminar include:

- Assessment Approach & Report Structure
- Cognitive Abilities: WAIS-IV/WISC-V/MoCA/WMS-IV
- Linguistic & Cultural Factors
- Personality 2: MCMI-IV/ Rorschach/16-pf/SII

- Executive Functioning: D-KEFS
- ADHD Symptom-based: BAARS-IV/SCID-5-CV
- Personality 1: MMPI-3
- ADHD Testing
- Academic Testing: WIAT-4/WIAT-3
- Children: BASC-3/MACI-II/ M-PACI/CONNERS-3

- Symptom-Based Methods: SCL-90/SCID-5-CV
- ADOS-2/Vineland-3
- Intellectual Disabilities
- Memory: WMS-IV/NEPSY-II
- Adoption Evaluation
- Clergy Evaluation
- Ethics/Professional Issues
- Feedback in Assessment

# Eating Disorder Seminar

The Eating Disorder Seminar is a biweekly training that is aimed to provide foundational training for treating eating disorders such as assessing and managing risk, assessing the level of care, coordinating an outpatient team, ethical care using the Health At Every Size (weight-inclusive) paradigm, and understanding nuances of each eating disorder case through in-depth, multi-factorial case conceptualizations. Participants in the Eating Disorder Seminar will progress from ethics, level of care assessment, diagnostic evaluation to more complex topics such as using specific modalities to treat eating disorders and eating disorders in marginalized populations, integrating CTAC's social justice lens. It is conducted biweekly for 1 hour by Janean Anderson, Ph.D., CEDS-S. Dr. Anderson is a Licensed Psychologist, Certified Eating Disorders Specialist, and Approved Supervisor through the International Association of Eating Disorder Professionals (IAEDP). Topics/tools covered in the seminar include:

- Practicing from a Weight-Inclusive, Health At Every Size paradigm
- Assessing Level of Care
- Coordinating Care on an outpatient, multi-disciplinary team
- The role of the therapist, dietitian, and medical providers in ED treatment
- Diagnostic assessment
- Specific interventions for Anorexia Nervosa, Bulimia Nervosa, Binge Eating Disorder, EDNOS, and ARFID
- The role of diet culture and weight stigma

- ED Treatment for TGNC\*- identifying folx
- Anti-racist work in ED treatment
- Using ACT to treat eating disorders
- Psychodynamic approaches for eating disorders
- Supportive interventions with clients such as food exposures
- Trait and temperament factors such as perfectionism
- Integration of nutritional rehabilitation with therapeutic goals

# CTAC-wide Trainings and Professional Development

Doctoral interns are seen as paid staff at CTAC and have the privilege to participate in the training opportunities offered to senior staff, licensed clinicians and post-doctoral residents. Therefore, interns are involved in all in-house workshops and seminars. Additionally, interns are involved in professional networking opportunities with local dieticians and eating disorder treatment centers. Furthermore, our practice provides a variety of psycho-educational materials for the patients in our waiting room. Doctoral interns are charged with creating and designing these psychoeducational materials and are tasked to do so in a manner that integrates current research with practical application. A sample of past and upcoming CTAC-wide training topics include:

- Eating Disorders for TGNC-identifying folx
- Anti-Racist Training
- Safe Zone LGBTQ+ Awareness and Ally Training
- Health At Every Size® (HAES)

- Group Therapy
- Mandated Reporting
- Risk Assessment

# **Trainee Evaluation**

Twice per training year, the internship program conducts a formal evaluation of the training objectives for each intern. Each intern will receive written feedback and meet with their primary supervisor and the Training Director to review their evaluation. Upon completion of each formal evaluation, the Training Director will provide the doctoral psychology intern's graduate program with feedback concerning the intern's progress in the training program.

In addition to the formal evaluation, interns will also participate in a twice per year reflective self-appraisal exercise, an ongoing evaluative system for all CTAC paid staff. This activity will be discussed with the intern's primary supervisor and is used to implement ongoing self-awareness and growth.

If an intern receives a score less than a "3" on any training element at the mid-year evaluation, or if supervisors have reason to be concerned about the student's performance or progress, the intern's supervisor will address the concerns in the qualitative portion of the intern's evaluation and will initiate the program's Due Process procedures to support the intern in skill development. Students who receive less than a "4" on any training element during the End-of-Year evaluation will not meet requirements for successful completion of internship. The training objective rating scale is as follows:

- 1 = Not Competent, Consistently performs at a level below minimum acceptable standards; requires extensive guidance/supervision
- 2 = Beginning Competence: Demonstrates inconsistent level of performance; needs close supervision on all cases and improvement to meet training expectations.
- 3 = Foundational Competence: Demonstrates consistent level of skill and knowledge in need of regular supervision; performance is commensurate with training experience and is associated with readiness for internship.
- 4 = Intermediate Competence: Consistently meets appropriate level of skill and knowledge for internship training and is associated with readiness for entry level practice at the completion of the internship program.
- 5 = Advanced Competence: Expectations: Performance exceeds expectations for level of training; a distinct area of refined skills/strengths and/or skillful negotiation of challenges for an early career psychologist.

N = not able to rate (for particular areas/raters).

# **Dispute and Remediation Processes**

<u>Due Process, Remediation, and Grievance Procedures: Dispute and Remediation</u> Processes

#### Introduction

At CTAC, we seek to support the development of all trainees. Despite this, professional psychology training can be a challenging experience. CTAC trains individuals at various stages of development in the trajectory of professional psychology training including Psychology Student Externs, Doctoral Psychology Interns, and Postdoctoral Psychology Residents. These Due Process, Remediation, and Grievance Procedures apply to trainees at all levels of training.

#### **Due Process**

The following sections outline when a trainee's difficulties warrant intervention by CTAC. These procedures define individuals involved in the training problem, define problematic behaviors, indicate how problematic behaviors are identified, and subsequent notification and intervention provided to the trainee. Due Process is also used to address trainee concerns of the training site.

#### **Definitions**

#### Trainee

The term "trainee" is used to describe any person participating in professional psychology training at the organization including Psychology Student Externs, Doctoral Psychology Interns, and Postdoctoral Psychology Residents.

# **Primary Supervisor**

The primary supervisor is a CTAC employed staff member who oversees the training progress and development of an individual trainee. Primary supervisors may be licensed or unlicensed if supervising an extern trainee, and their work is overseen by a licensed psychologist. Doctoral Psychology Interns and Postdoctoral Residents are always supervised by a licensed psychologist. All supervision is overseen jointly by the Training Director and the Director (Chief Psychologist).

Primary Supervisors are responsible for monitoring a trainee's clinical work, case management, professional development and oversee all administrative tasks such as performance reviews and documentation.

#### Additional Supervisor(s)

Trainees may receive supervision from other CTAC staff such as Doctoral Psychology Intern, Postdoctoral Residents, or Licensed Psychologists who are not their primary

supervisors. Additional Supervisors are involved in group supervision, additional trainings, etc. Additional Supervisors may be enlisted to provide additional supervision and/or support when a person is placed on a Performance Improvement Plan (Remediation Plan), described later in this document.

# **Company Cohesion Coordinator**

The Company Cohesion Coordinator (CCC) is a senior, Licensed Psychologist who functions as a Licensed Psychologist with the additional role of defining, promoting, and maintaining company culture. The CCC develops performance reviews, defines standards of performance and practice including professionalism, teamwork, and company values. The CCC oversees all team members' development and success in embodying company values and performance excellence. The CCC reports to the Director (Chief Psychologist).

# **Training Director**

The Training Director (TD) is a Licensed Psychologist who oversees all aspects of clinical training. The TD leads the Psychotherapy Seminar, coordinates with Primary Supervisors, group supervisors, and other staff members involved in training. The TD functions as the liaison between CTAC, a trainee's graduate program, and other relevant professional organizations such as APPIC and APA. The TD reports to the Director (Chief Psychologist).

# Director (Chief Psychologist)

The Director functions as the Chief Psychologist for all CTAC locations, operations, and programs. The Director is responsible for legal and ethical compliance, maintenance of referral sources, insurance contracts, government insurance contracts, licenses the clinic holds, and human resource-related tasks. The Director oversees the work of all CTAC team members including trainees, paid staff, and contractors.

#### **Trainee Problem**

CTAC uses the following definition to describe a "trainee problem:" A problem is defined as a behavior, attitude, or other characteristic, which, while of concern and requiring remediation, is not excessive, or outside the domain of behaviors for professionals in training (Lamb, D. H., Baker, J. M., Jennings, M.I. & Yarris, E., 1983).

Problems are approached using a developmental lens, and whenever possible, are resolved using strengths-based, supportive interventions from staff. Examples of trainee problems may include but are not limited to:

- 1. Illegal, unethical, or otherwise non-compliance with legal, ethical, and internal guidelines
- 2. Inability to provide quality services to clients
- 3. Inability to conduct oneself professionally with members of the CTAC team
- 4. Inability to manage one's own life stressors resulting in interference in professional functioning
- 5. Inability or unwillingness to incorporate professional competencies, feedback, supports or other resources into one's work

If problematic trainee behavior falls under the Americans with Disabilities Act, CTAC will respond per the guidelines outlined in that statute. CTAC will seek outside counsel from an employment attorney if necessary.

CTAC considers a concern worthy of due process when the trainee 1) lacks insight into their difficulties, 2) is unable or unwilling to make improvements, and 3) the problem cannot be resolved through didactic training or supervision alone.

Further, If an intern receives a score less than a "3" on any training element at the mid-year evaluation, or if supervisors have reason to be concerned about the student's performance or progress, the intern's supervisor will address the concerns in the qualitative portion of the intern's evaluation and will initiate the program's Due Process procedures to support the intern in skill development.

CTAC reserves the right to place trainees on due process remediation plans when a disproportionate number of resources are allocated to intervening with the trainee, including, but not limited to, supervision hours, teaching hours, media resources, and remediation plans.

#### Basic Procedure

- 1. Trainees receive instruction during their onboarding period including written expectations for professional behavior and clinic policies. Primary Supervisors are responsible for making sure the trainee has received these instructions.
- Trainees are informed during their onboarding that performance evaluations are conducted 2x per year and are conducted by their primary supervisor. Additional performance evaluations may be completed if this is recommended by the primary supervisor.
- 3. Company policies and procedures will be referenced when identifying whether there is problematic trainee behavior. Policies and procedures will be used to describe what is problematic about the trainee's behavior.

- 4. CTAC supervisors commit to addressing problematic behaviors immediately upon their identification, communicating these concerns directly to the trainee. CTAC will communicate frequently with the trainee's graduate program.
- 5. The TD, in consultation with the trainee's Primary Supervisor and Director, will determine if the problematic behavior warrants intervention, including a time frame for when behavioral change is expected by the trainee. Interventions may include, but are not limited to, verbal warnings, written warnings, Performance Improvement Plans (Remediation Plans), or modification of employment/training.
- The Trainee may initiate an appeal under the direction of the Director. Appeals must include a written rationale for the appeal and provide supporting documentation.
- 7. Initiation of Due Process will include feedback from multiple sources such as Additional Supervisors and CTAC staff.
- 8. The TD is responsible for ensuring all aspects of Due Process are documented. Records are maintained in the trainee's supervision chart and their personnel file.

# Notification Procedures, Hearing, and Remediation

At any time during the year the trainee's primary supervisor, Training Director, Company Cohesion Coordinator, or Director (Chief Psychologist) may determine a trainee's behavior is definitionally problematic. If this occurs, the trainee will first be informed by their primary supervisor that their behavior is considered problematic. At the discretion of the TD (in consultation with the Chief Psychologist), the doctoral intern's graduate program will be informed of any of the actions listed below. CTAC uses the following process for delivering feedback about problematic behavior and allowing for interns to respond to the concerns:

- 1. Verbal feedback from primary supervisor, and additional staff if necessary
- Informal written feedback such as a secure message or email between primary supervisor and intern summarizing an in-person conversation or a reminder to improve performance. Supervisor and intern will work together to rectify the problem or skill deficits
- 3. Formal written feedback in the form of a Performance Improvement Plan (Remediation Plan) delivered by the primary supervisor, overseen by the TD, and created in collaboration with the trainee
  - a. Performance Improvement Plans may include measures such as reassigning clinical duties, re-distributing cases, temporary suspension of clinical privileges, recommendation for the trainee to seek their own psychotherapy, etc.
  - b. Trainee received notification that they have the right to request an appeal of this action (See Appeal Procedures).

4. Written letter of suspension of training.

5. Written letter of termination of training/employment with the organization.

#### Remediation and Sanctions

Remediation and sanctions are implemented by CTAC staff with careful consideration based on the severity of the problematic behavior, in coordination with the TD and relevant supervisors, and in an order of implementation congruent with the identified concerns.

- 1. Additional Supports and Schedule Modification is designed to provide additional support from the organization with the goal of helping the trainee return to or progress to a satisfactory level. This applies to domains such as clinical work, professionalism, and administrative duties. Additional supports and modifications are established using the Performance Improvement Plan (PIP). Components of the PIP include identifying the problem, how improvement will be measured, supports needed such as additional training or supervision, who will provide such supports, and timeline for completion of the PIP. PIPs may also recommend a trainee discontinue adding new clients to caseload, to reduce existing caseload, and/or to reduce administrative duties.
- 2. Extension of Performance Improvement Plan, Supports, Modification is used when a trainee reaches the deadline for performance improvement set forth in the PIP but has not yet met performance improvement goals. The PIP may be extended in these cases when the Primary Supervisor, TD, and/or other leadership staff determines that the trainee is making progress but needs more time to improve.
- 3. Suspension of clinical activities is implemented when a trainee's performance has already or poses a future risk to any clients, CTAC team members, or the community at large. The trainee's Primary Supervisor, TD, and Director will determine if the trainee's behavior meets the aforementioned criteria. The Primary Supervisor, TD, and Director will consult with each other to determine whether the trainee can be expected to resume professional functioning in the future or if other remediation/sanctions will be used instead.
- 4. Suspension of training is a temporary discontinuation of all duties related to training. During this time, the trainee will not provide any direct services, participate in any trainings, or act in any other capacity as a trainee. During the suspension period, the Director will determine whether the trainee will be compensated and maintain employment benefits. The Primary Supervisor, TD, and Director will communicate with the trainee's graduate training program and will consider whether the trainee will be able to successfully complete their training contract (such as year-long externship, doctoral psychology internship, etc). The Director will determine if the trainee will be terminated. If the Suspension of Clinical Service Activities, or Suspension of training interferes with

- the successful completion of the training hours needed for completion of the traineeship, this will be noted in the trainee's file and the trainee's academic program will be informed.
- 5. Dismissal from training program is the employment termination and/or discontinuation of services between CTAC and the trainee. Dismissal involves surrendering all credentials, charts, proprietary information, access, and materials to CTAC. Dismissal is permanent. Documentation of the trainee's permanent dismissal is sent by the TD to the trainee's graduate program.
- 6. Immediate dismissal is used in the most serious cases of trainee problematic behaviors such as severe violations of applicable laws, regulations, APA Code of Ethics, or when imminent risk is apparent. Immediate dismissal involves the complete surrender of all access and privileges at CTAC, permanently. The trainee will be dismissed by the end of the business day at the latest and employment will be terminated. Documentation of the trainee's permanent dismissal is sent by the TD to the trainee's graduate program.

#### Appeal Procedures

In the event that a trainee does not agree with any of the aforementioned notifications, remediation or sanctions, or with the handling of a grievance – the following appeal procedures should be followed:

- 1. The trainee should file a formal appeal in writing with all supporting documents, with the Director (Chief Psychologist). The trainee must submit this appeal within 5 workdays from their notification of any of the above (notification, remediation or sanctions, or handling of a grievance).
- 2. Within three workdays of receipt of a formal written appeal from a trainee, the Director will consult with members of the CTAC Leadership Team and then decide whether to implement a Review Panel or respond to the appeal without a Panel being convened.
- 3. In the event that a trainee is filing a formal appeal in writing to disagree with a decision that has already been made by the Review Panel and supported by the Director, then that appeal is reviewed by the Director in consultation with the CTAC Leadership Team. The Director will determine if a new Review Panel should be formed to reexamine the case, or if the decision of the original Review Panel is upheld.

#### **Grievance Procedures**

In the event a trainee encounters difficulties or problems other than evaluation related (e.g. poor supervision, unavailability of supervisor(s), workload issues, personality clashes, other staff conflicts) during his/her/their training program, a trainee can:

1. Discuss the issue with the staff member(s) involved;

- 2. If the issue cannot be resolved informally, the trainee should discuss the concern with the Training Director (TD), other staff members, or Director if needed (if the concerns involve the TD, the trainee can consult directly with the Director);
- 3. If the TD and/or Director cannot resolve the issue of concern to the trainee, the trainee can file a formal grievance in writing with all supporting documents, with the Director.

When the Director has received a formal grievance, within three (3) workdays of receipt, the Director will implement Review Procedures as described below and inform the trainee of any action taken.

# Review Procedures / Hearing

- When needed, a Review Panel will be convened by the Director to make a recommendation to the Director about the appropriateness of a Remediation Plan/Sanction for a Trainee's Problematic Behavior OR to review a grievance filed by the trainee.
  - a. The Panel will consist of three staff members selected by the Director with recommendations from the TD and the trainee who filed the appeal or grievance. The Director will appoint a Chair of the Review Panel.
  - b. In cases of an appeal, the trainee has the right to hear the expressed concerns of the training program and have an opportunity to dispute or explain the behavior of concern.
  - c. In response to a grievance, the trainee has a right to express concerns about the training program or CTAC staff member and the CTAC program or staff has the right and responsibility to respond.
- 2. Within five (5) workdays, a Panel will meet to review the appeal or grievance and to examine the relevant material presented.
- Within three (3) workdays after the completion of the review the Panel will submit a written report to the Director, including any recommendations for further action. Recommendations made by the Review Panel will be made by majority vote if a consensus cannot be reached.
- 4. Within three (3) workdays of receipt of the recommendation, the Director will either accept or reject the Review Panel's recommendations. If the Director rejects the recommendation, the Director may refer the matter back to the Panel for further deliberation and revised recommendations or may make a final decision.
- 5. If referred back to the Panel, a report will be presented to the Director within five (5) workdays of the receipt of the Director's request of further deliberation. The Director then makes a final decision regarding what action is to be taken and informs the TD.

- 6. The TD informs the trainee, staff members involved and necessary members of the training staff of the decision and any action taken or to be taken.
- 7. If the trainee disputes the Director's final decision, the trainee has the right to appeal by following the steps outlined in Appeal Procedures.

# CTAC Internship Program Staff

# Janean Anderson, Ph.D. CEDS-S (she/her/hers) - *Licensed Psychologist, Founder, Director*

Dr. Anderson is a licensed psychologist specializing in the treatment of eating disorders. She is a member of the International Association of Eating Disorder Professionals (iaedp) and is an iaedp Certified Eating Disorder Specialist. As a CEDS-S iaedp Approved Supervisor, she is able to provide supervision to professionals seeking their CEDS credential. She is part of the National Eating Disorders Association (NEDA) Network of treatment providers and is a member of the Academy for Eating Disorders (AED). Dr. Anderson was recognized as a Top 100 Eating Disorder Expert nationally in 2018. Dr. Anderson holds a Ph.D. in Counseling Psychology from Colorado State University. She has specialized in the treatment of eating disorders since 2008.

# Lauren Millard Ph.D. (she/her/hers) - *Licensed Psychologist, Coordinator of Group Services*

Dr. Millard is a licensed psychologist specializing in the treatment of eating disorders and gender-based violence/trauma (sexual assault, relationship/domestic abuse) in Denver, CO. She completed her Ph.D. in Counseling Psychology from Colorado State University with the addition of earning her Graduate Women's Studies Certificate. Dr. Millard completed her doctoral psychology internship at the University of South Carolina followed by a postdoctoral fellowship at the University of Denver. She has specialized in the treatment of eating disorders and trauma since 2012.

# Brienne Brown, Ph.D. (she/her/hers) - *Licensed Psychologist, Company Cohesion Coordinator*

Dr. Brown is a compassionate licensed psychologist specializing in the treatment of trauma, chronic illness and substance abuse, as well as depression, anxiety and general mental health issues. She completed her Ph.D. in Counseling Psychology from Seton Hall University with a minor in Neuropsychology. She completed her doctoral psychology internship at the New Jersey Veterans Administration Hospital. Dr. Brown has specialized in the treatment of trauma-related disorders since 2012.

# Bert Pace, Psy.D. (he/him/his) - Licensed Psychologist, Coordinator of Testing Services

Dr. Pace is a licensed psychologist specializing in the treatment of chronic depression, anxiety disorders, trauma, eating disorders, and general mental health issues. He received his Psy.D. in Clinical Psychology from George Fox University in Newberg, Oregon. Throughout his training, he has worked in a variety of settings including community mental health clinics, university clinics, schools, and hospitals. He

completed my doctoral psychology internship at Biola Counseling Center in Los Angeles, California.

# Chris Gioielli, Psy.D. (he/him/his) - Licensed Psychologist, Training Director

Dr. Gioielli is a licensed psychologist offering individual psychotherapy to adults, couples therapy, and psychological assessment to adults and adolescents. He specializes in the treatment of anxiety, depression, and trauma, as well as relational conflict, issues in spirituality, and general mental health concerns. Dr. Gioielli completed his Psy.D. in Clinical Psychology from Fuller Graduate School of Psychology in Pasadena, California. He completed his doctoral psychology internship at SUNY Stony Brook Counseling and Psychological Services in Stony Brook, New York. Dr. Gioielli is currently in Core Training for Intensive Short-term Dynamic Psychotherapy (ISTDP) through the ISTDP Institute.

# Kiersten Eberle-Medina, Ph.D. (she/her/hers) - Licensed Psychologist, Supervisor

Dr. Eberle-Medina is a licensed psychologist specializing in the treatment of eating disorders, substance abuse, interpersonal trauma, relationship struggles, and identity development, as well as anxiety, depression, and other mental health concerns. She received her Ph.D. in Counseling Psychology from the University of Northern Colorado in Greeley, CO and completed her doctoral psychology internship at the University of Notre Dame's Counseling Center.

# Megan Martinez, Ph.D. (she/her/hers) - Supervisor

Dr. Martinez offers individual counseling services as well as services for couples and families. She specializes in a wide array of mental health concerns including eating disorders, depression, interpersonal conflict, OCD, and trauma. Dr. Martinez completed her Ph.D. in Counseling Psychology with a minor in Statistics from the University of Northern Colorado in Greeley, CO. She has worked at a variety of university counseling centers and completed her doctoral psychology internship at the University of Puget Sound's Counseling Health and Wellness Services in Tacoma, WA.

# Eligibility, Application process, Stipend and Benefits

# Eligibility

Colorado Therapy & Assessment Center attends carefully to fit in the internship selection process. We seek interns with diverse backgrounds and identities who will not only benefit from the strengths of our program, but share and align with CTAC company values of COMPASSION, BELONGING, HUMILITY and EXCELLENCE. The prerequisites for our internship program are as follows:

- Applicants must have completed coursework and comprehensive exams towards a
  doctoral degree in psychology from an accredited institution (APA accreditation is
  preferred) prior to application
- Applicants must complete their dissertation proposal prior to the ranking deadline. We
  prefer candidates who will clearly complete their dissertation prior to internship as that
  makes for a much better internship experience. If this is not possible, applicants must
  provide verification that their dissertation project will be finalized by the time they have
  completed their internship year.
- Applicants must have at least 500 direct service practicum hours at the time of application.
- Applicants must have completed, or plan to complete, at least five integrated psychological assessment reports before starting the internship
- Applicants must have a readiness for training that attends to eating disorders and body-image concerns, though prior experience is not required.

Though not required, we seek applicants who demonstrate:

- Experience with interpersonal and/or relational/psychodynamic psychotherapy,
- Investment in cultural competence/humility,
- Facility with testing including Rorschach (R-PAS) and Autism Diagnostic Observation Schedule-Second Edition (ADOS-2) administration and scoring,
- Maturity and a commitment to ongoing personal/professional growth.

# **Application Process**

Qualified applicants should submit the following materials via the AAPI Online Portal:

- 1. APPIC Application Packet with match number (AAPI)
- 2. Resume/Curriculum Vitae
- 3. <u>Two</u> writing samples of a full, de-identified integrated psychological assessment reports from <u>actual</u> clients
- 4. Three letters of recommendation:
  - a. At least one letter from a recent clinical supervisor
  - b. Other letters can be written by previous clinical supervisors, and/or by professors with extensive knowledge of the applicant's clinical and academic strengths

All application materials must be received by the date noted in the current APPIC directory to be considered.

# Questions regarding the Doctoral Internship Program or Application Process should be directed (preferably by email) to:

# recruitment@coloradotherapyassessment.com

# Chris Gioielli, Psy.D., Licensed Psychologist, Training Director

Colorado Therapy & Assessment Center abides by all APPIC and APA policies. The CTAC Doctoral Internship Program does not discriminate in selection, training, retention, or evaluation on the basis of any individual characteristics which are not relevant to professional training such as age, ethnicity, race, sex, gender, sexual orientation, religious or philosophical affiliation, class, disability, nationality, citizenship, language, etc. CTAC values diversity and actively promotes cultural humility in all training and service activities.

# Summary of Financial and Other Benefit Support

Annual Stipend/Salary for Full-Time Intern (non-exempt status)	\$30,000
Access to medical insurance for intern	Yes
Intern contribution to cost of medical insurance required	Yes
Coverage for family member(s) available	Yes
Coverage for legally married partner and domestic partner available	Yes
Hours of annual paid vacation (accrued over 12 months)	TBD
Hours of annual paid sick leave (accrued over 12 months)	TBD
In the event of medical conditions and/or family needs requiring extended leave, does the program allow reasonable unpaid leave to interns in excess of personal time off and sick leave?	Yes
Other Benefits:  Dental Insurance, Vision Insurance, Access to medical insurance plans with Health Savings Account, Professional/Liability Insurance, Traditional 401k	Yes
and/or Roth401k with 4% employer match following 6 months of employment.	