Counseling Psychology Clinical Training Handbook



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Introduction to the Clinical Training:

Clinical training is an essential part of your matriculation and is invaluable to the enhancement of your skills as a psychologist. It involves three separate experiences that are sequential and build upon student's growth and development within the program. The three experiences are: practicum, externship and internship. The practice training sequence ensures Preparation for Practicum, Preparation for Internship, and Preparation for Practice. These experiences are important as they provide the necessary hours for internship and licensure. Your performance at your clinical training sites is a reflection of your ability to provide professional services and reflects on the Howard University Counseling Psychology program. It is paramount that you conduct yourself in the most professional and responsible manner, this includes abiding by the ethical guidelines of the American Psychological Association. Therefore, it is important that you approach this experience with a serious commitment to your preparation as a counseling psychologist. These experiences are designed to ensure that you meet the licensure laws throughout the United States.

Please review the link to familiarize yourself with the path to licensure and the clinical trainings expectations.

http://c.ymcdn.com/sites/www.asppb.net/resource/resmgr/Mobility_/Licensure_steps_for_Faculty_.pdf

OVERVIEW OF PRACTICUM IN COUNSELING PSYCHOLOGY

Practicum is the first clinical placement, which occurs in the second semester of the first year at the Howard University Counseling Center. This placement serves as an entry-level placement for first-year students and guides their clinical development. By the end of the practicum, students are expected to be able to conduct clinical interviews, have more refined micro-counseling skills and have developed a working understanding of clinical diagnoses.

Prerequisite:

Successful completion of HUDE 605: Clinical Interviewing/Micro Counseling

Practicum Site:

Howard University Counseling Center (HUCC)

Duration of Practicum:

Students are required to accumulate a minimum of 10 hours/week at HUCC for the spring semester of their first year. Four of these hours are face-to-face, 1 hour supervision, 2 hour case conference, and 1 hour didactic. Students must also register for and attend the practicum course (HUDE 344) offered in the department.

No Exception will be made under any circumstance

I. Preparation for Practicum

- **Step 1:** Review microcounseling skills, clinical interview textbook, mental status exam categories, and DSM diagnostic criteria.
- **Step 2:** Familiarize yourself with intake procedures of Howard University Counseling Center.
- **Step 3:** Practice presenting and writing up intakes with peers and/or practicum instructor.

II. Practicum Timeline

Item	When
Register for Practicum	During Spring registration of Fall Semester of 1 st year
Review microcounseling skills, clinical interview textbook, mental status exam	Winter break of first year

categories, ethics, and DSM diagnostic criteria.	
Purchase Liability Insurance	Winter break of first year- 1 st week of Spring semester
Review Intake procedures at HUCS	1 st week of Spring Semester
Complete and finalize practicum paper	End of Spring Semester

OVERVIEW OF EXTERNSHIP IN COUNSELING PSYCHOLOGY

The externship experience is an essential part of students' training and is invaluable to the enhancement of necessary skills as a psychologist. It precedes internship, and students are required to enroll in externship courses while placed at an externship site. The Counseling Psychology Doctoral Program has approved a variety of supervised externship sites in Virginia, DC, and Maryland, including such settings as community mental health centers, psychiatric hospitals, schools, university counseling centers, forensic settings, and chemical dependency treatment programs.

Externship I requires that students conduct therapy, and by the end of this training experience students are expected to demonstrate knowledge of evidence based theories, and the ability to conceptualize client diagnoses and engage the intervention process. During Externship II, which occurs in the second year of practical training (year 3 of the program), students train at sites where they conduct assessment primarily. By the end of this training experience, students are expected to be able to administer, score, and interpret integrated comprehensive psychological assessments, understand the application of empirically-based clinical interventions, and demonstrate strong a knowledge of, and ability to, conceptualize clients from their preferred theoretical orientation. Externship III builds upon the previous training experience and upon completion, students are expected to be able to conduct clinical interviews, diagnose, conceptualize, demonstrate mastery of a theoretical orientation, and evaluate the efficacy of the interventions utilized. Students apply for internship while they are in Externship III.

Prerequisite:

Successful completion of the following courses

HUDE 344	Practicum
PSYC 233	Neuropsychology
HUDE 228	Personality Assessment
HUDE 322	Individual Assess of Cognitive Abilities I
HUDE 340	Seminar in Counseling Psychology
HUDE 327	Psychopathology of Childhood or PSYC 220 Psychopathology
HUDE 444	Group Processes and Interpersonal Relations

and approval by the Training Director in charge, of you as a candidate and of the site selected for the externship.

Externship Sites:

- I. Sites that are listed in the Externship Opportunities section
- II. Sites that have licensed psychologists on-site with expertise in various therapeutic modalities (individual, family, group, etc), assessment (intelligence, personality, etc.) and consulting, etc.

- III. At least one licensed psychologist must agree, in writing, to provide adequate (e.g., at least one hour of one-on-one supervision per week) and necessary supervision.
- IV. Externship sites that are not listed in the Externship Opportunities section must be approved by the Training or Clinical Director.

Duration of Externship:

During externship, students obtain 20 hours of experience per week during the Fall and Spring semesters of each year. The minimum externship experience requirement is a total of **1800** hours, with **900** hours of direct service experience and **300** hours of supervision. We encourage students to obtain additional hours during their clinical training to help Other recommended extern activities include attending case conferences, writing reports, and maintaining current clinical notes.

The program requires that all externship supervision be conducted by a licensed psychologist. Students can receive supervision from other licensed professionals at their respective externship sites, but at least one hour of weekly scheduled supervision must be with a licensed psychologist.

No Exception will be made under any circumstance

I. Preparation for Externship

- **Step 1:** Decide what types of populations you want to get experience working with (children, adults, adolescents, autistic children, etc.).
- **Step 2:** Update your curriculum vita that encompasses all supervised training experience and academic experiences.
- Step 3: Decide on the sites that you will apply to in consultation with the Training or Clinical Director. Call each site and obtain information about the facility and the experiences they provide for externs. Make sure that the required work days do not conflict with your other classes for the following year or semester.
- Step 4: Decide who will provide you with the most positive reference letters. Most externship sites ask for recommendations from your clinical supervisors. It is most time efficient to write your own recommendations and have the supervisor(s) review them and print them on company letterhead.

Step 5: Apply to several sites that fit your criteria. Be sure to adhere to any deadlines for application materials. It is recommended that all application materials be submitted in one packet.

Step 6: The Interview

- Be prepared to briefly present a current or former case.
- Know why you want to work with this population.
- Have an idea about your future career goals and how this externship will fit with those goals.
- Know what your days of availability will be in the fall and spring semesters of the following year.
- Be able to articulate what type of supervision works best for you.
- Ask if there are current or past externs that you can talk with about the externship experience via phone, e-mail, etc.
- Remember that they are as interested in you as you are at their site, so, ask questions.

II. Externship Timeline

Item	When	
Research potential externship sites and	August-January of first year and each year	
application deadlines	you apply to externship	
Request letters of recommendation from	November-December of first year and each	
professors and supervisors	year you apply to externship	
Apply to Approved Externship Sites	January onward of first year and each year	
Be aware the application criteria vary by site; please contact Externship site directors for specific application criteria & procedure	you apply to externship	
Interview at Sites	March onward of first year	
Send Thank You letters to interviewers	Soon after interview(s)	
Sites notify students of acceptance Be sure to ask the site about the notification process during the interview; Also find out if they follow Uniform Notification procedures	~April 11	
Acceptance or decline of Externship sites	Immediately following an offer	
 Complete Acquisition Form and submit to Training Director immediately 		
Notify other sites that you have accepted an offer		
Register for Fall Externship (HUDE- 490)	During Spring registration of first year for Fall Classes	
Contact your Externship site to get:	Prior to mid-August during Second year	
Start Date and Time		
 Supervisor name, phone and email 		
Site address (where to report)		
Whether and when orientation is required		
Complete an Externship Assignment	Within two weeks of starting Externship	
Agreement with your supervisor		
Obtain Professional Liability Certificate of	At your supervisor's request; proof of liability	
Insurance	certificate must be shown before the start of	

	the externship
Notification of Supervised Practice in Psychology in the District of Columbia Required by DC law if doing an Externship in DC. Original to DC Board of Psychology Copy for your files Copy to the Training Department	Within two weeks of starting Externship
Register for Spring Externship	November of second year
Mid-year Externship paperwork due to the Training Director: • Supervisor's evaluation (signed by supervisor& student) • Fall Record of Hours (signed by supervisor & student)	December of second year
 End-of-the year Externship paperwork due to the Training Director Supervisor's evaluation (signed by supervisor & student) Record of Hours form (signed by supervisor & student); must contain completed cumulative hours and total batteries section Student End Year Externship Site Evaluation Form 	May of second year

III. EXTERNSHIP SETTINGS

The Howard University Counseling Psychology Doctoral Program has a list of approved Externship sites, which includes a variety of clinical settings in Virginia, the District of Columbia and Maryland. These sites include community mental health centers, psychiatric hospitals, schools, university counseling centers, forensic settings and chemical dependency treatment programs. See the Externship Opportunities section for Externship site listing.

The practitioner-scientist model emphasizes teaching students clinical skills, exposing students to relevant treatment populations, and providing supervision by experienced clinicians. Every effort is made to ensure that students receive competent supervision within a mentoring relationship and an environment conducive to learning.

Supervision should take place at regular prescheduled times to ensure that students have ready access to their professional mentors.

The student, Howard University, and the training site enter into a contractual relationship in which the student's delivery of service is exchanged for clinical supervision, exposure to professional role models, in service education, participation in a mental health service delivery system, and participation in the various roles psychologists may take on in that system.

The facilities for the externship may be chosen from the following:

- 1. Mental health centers in community hospitals
- 2. Counseling centers at colleges and universities
- 3. Correctional institutions

- 4. Rehabilitation programs
- 5. School systems

The setting will be determined by the Training or Clinical Director and the student in consultation with supervisor in the setting.

Externship placements may be found at any of the settings listed in the Externship Opportunities section. It is the student's responsibility to make applications for placement in consultation with the Training or Clinical Director. Students who find settings that are not listed in the Externship Opportunities section must have approval from the Training or Clinical Director before applying to the setting¹.

IV. ELIGIBILITY

Students are eligible for externship if they are enrolled in the Externship course, have completed a Clinical Assignment Agreement (see Appendix E), and have met the aforementioned prerequisites.

V. DURATION OF EXTERNSHIP

The minimum externship experience is <u>15-20</u> hours/week, of which at least <u>300 hours/year is in direct</u> service experience and at <u>least 100 hours/year</u> is in formally scheduled supervision. Other recommended extern activities include attending case conferences, writing reports, didactics, and maintaining current clinical notes.

VI. QUALIFICATIONS OF SUPERVISORS

Students are expected to be supervised by at least one on-site licensed psychologist. Students are responsible for ensuring that the "Externship Assignment Agreement" form is completed by their supervisor. These forms should be completed no later than the second week of the semester. Externship sites may require students to also meet with on-site supervisors in other professional domains. Students should also make arrangements to meet with these supervisors as scheduled by the on-site supervisor.

VII. APPLYING

Students should begin the application process months before actually submitting application materials to Externship sites. Students should begin researching Externship sites at the start of the school year in order to find out the application criteria, materials needed and deadlines of each Externship site in which they are applying.

Many sites request letters of recommendation as part of their application packet. Students should be sure to request these early (November-December). Supervisors and professors are often flooded with requests and turnaround time can be significant. Provide professors with any requested documents (such as CV) to ease their task.

A. INTERVIEWING

Frequently Asked Interview Questions

- 1. Why are you interested in this site? What specific skills or abilities do you bring to make you well suited to this externship?
- 2. Describe your strengths and weaknesses.
- 3. Tell me about yourself.
- 4. What are your expectations for the externship? In other words, what are your primary learning and training goals? What areas or skills do you feel need to improve?
- 5. What are your long-term goals?
- 6. How did you become interested in psychology?
- 7. Describe your theoretical orientation.
- 8. Tell me about your psychological assessment experience.
- 9. What issues should you keep in mind when working with people who are of a different ethnic or cultural background than you?
- 10. What are your needs and expectations from supervision?

Questions to Ask Interviewers

- 1. What is the theoretical orientation of this site (if not stated in site literature)?
- 2. How are cases and groups assigned?
- 3. What is the relationship between psychology and other mental health disciplines in the agency?
- 4. How many externs do you accept? Clarify starting and ending dates, and any requirements concerning evenings or weekends.
- 5. How many hours of individual and group supervision are provided per week? (know the institutional requirements!)
- 6. What types of seminars and other didactic experiences are available?
- 7. Is taping allowed at this site?
- 8. What are you looking for in an extern (level of experience, previous experience)?

B. Training Sites with Creedal Statements

Externship sites are expected to conduct their selection and training in a nondiscriminatory manner. Sites are expected to select applicants without regard to race, gender, ethnic background, sexual orientation, or religion, unless the sites have compelling legal or therapeutic reasons for limiting the applicant and selection pool. Sites that have a selection policy that disallows students based on any of the above criteria must notify the University and clarify the legal or therapeutic rationale for such policies. These policies will be noted clearly in practicum placement literature at the University. Students who feel that they have experienced discrimination or harassment in their Externship or Internship training should report this to the Training Director, who will initiate a full review of the situation.

C. Site Notifications

Sites vary in how and when they interview and select students. Students should confirm a site's notification process during the interview. Site supervisors have the right to accept or reject students. Supervisors are asked to notify students who will not receive further consideration within a reasonable period of time so that the student can make other arrangements.

D. After the Interview

After your interview, send a letter thanking those who interviews you and indicate your continues interest. Based on the site's feedback during the interview, you can gauge when to check back. Be polite and respectful and remember that other students are anxiously waiting to hear from the site as well.

E. Uniform Notification Day

Sites typically begin interviews in March and inform students of acceptances in April. Some approved sites follow the voluntary **Uniform Notification Day, the second Monday in April, from 9:00 am to 5:00 pm**, as recommended by the academic directors of training in the greater Washington and Baltimore area. **Some sites do not.** Students should also be mindful of the Uniform Notification Day guidelines in accepting offers from these sites.

VIII. THE EXTERNSHIP EXPERIENCE

Students are expected to begin their first externship experience the first semester of their second year¹. During the spring semester of their first year, students should be sure to

register for Externship in Counseling Psychology (HUDE-490). In addition, students must clarify the following details with the site contact:

- Start date and time
- Supervisor's name, phone number, email address
- Site address
- Whether and when orientation may be required

Externship runs from the beginning of the Fall semester to mid-May of the Spring semester. It may not begin earlier than mid-August unless a student is enrolled in summer Externship. Students are expected to participate in Externship for the entire period.

Students can only participate in their externship if they are enrolled in Externship in Counseling Psychology (HUDE 490). Alternate arrangements will not be made. Students who do not follow this procedure may be considered in violation of Program policies, which may result in remediation procedures¹.

OVERVIEW OF INTERNSHIP IN COUNSELING PSYCHOLOGY

The Counseling Psychology Program requires completion of an APA-accredited pre-doctoral internship. The internship is the capstone experience of professional education and training preparatory to the practice of psychology in health and human services. It is the culminating experience in the training of doctoral students in counseling psychology and is an intensive one-year period of supervised practice that follows the completion of all coursework and clinical training (with the exception of dissertation and internship courses).

Prerequisite:

- Successful completion of ALL courses
- Passing Comprehensive Exams
- Successful defense of dissertation proposal
- Admission to Candidacy
- obtained at least 1840 clinical hours (during practicum and externships) and
- approval by the Training Director of you as a candidate.

Internship Information:

Internships are considered the pinnacle of your clinical training while in graduate school. It is completed during your last year of doctoral training. All students are expected to apply to APA accredited sites ONLY for internship. Students must submit applications in the first round of the match. Internship duration and sites vary considerably; thus, all students must register and visit www.appic.org for specifics regarding internship sites. Students are able to register for internship course hours for the two semesters in which they are completing internship.

Students are eligible for internship when they have completed the above prerequisites and have obtained at least 1840 clinical hours (during practicum and externships).

Prior to students submitting their rank ordered list of internship sites to the APPIC Match Program, they must be considered eligible and "ready" for internship by the Program Director. Students are considered eligible and ready to apply for internship if they: a) are in good standing, b) have successfully passed doctoral Comprehensive Examinations, c) have successfully proposed their dissertation proposal, and d) have been approved by the Counseling Psychology Faculty and Program Director.

Students are required to enroll in course credits (HUDE 520) during their internship year. At the end of the fall semester, students receive an incomplete grade. After successful completion of the internship, incomplete grades are removed and students receive a letter grade for the fall and spring semesters.

Once an internship placement has been secured, students typically work at that placement for 40 hours per week. Some students remain in the area (e.g., Howard University

Counseling Services), while others have selected internships outside of the DC Metro area, including Massachusetts, Louisiana, and New York.

A potential internship site must be APA accredited and:

- a. Be a regularly publicized psychology internship program. It is preferable that the site be listed in the most up-to-date APPIC manual; or if it is a new site, it should be listed in a major publication such as the American Psychologist.
- b. Have acceptance of more than one intern each year.
 - c. Have a designated Director of Training on site who is a licensed psychologist.
 - d. Have a series of didactic training workshops or presentations.
- e. Have the opportunity for interns to present cases.
- f. Be an internship program that is a full year (12 months) in length and provides a minimum of 1500 hours of total training. Further, it should meet the hour requirement for licensure in the state in which the site is located.

I. Preparation for Internship

- Step 1: Review your training experiences. Be clear about the types of populations you have experience working with (children, adults, adolescents, autistic children, etc.). Determine if there are any gaps in your clinical training (i.e. no seniors, no forensic settings, limited assessment experiences, etc.). Determine strengths within your clinical training (i.e. multicultural clients, HIV/AIDS, assessment, etc.)
- **Step 2**: Assess your clinical strengths and weaknesses (interviewing, CBT interventions, conceptualization, etc). Determine which skills you would like to gain and which skills you bring to a training environment.
- **Step 3**: Update your curriculum vita that encompasses all supervised training experience and academic experiences.
- **Step 4**: Register on APPIC website and download application (including essays)
- **Step 5**: Begin to think about answers to essay questions. Prepare outlines and/or key points of what you would like to include in each essay
- Step 6: Decide on the sites that you will apply to in light of the information you learned in Step 1 and 2. Consult with the

Training or Clinical Director to ensure that you have selected a robust group of internship sites.

- **Step 7**: Research each site and obtain information about the training experiences, application, and other pertinent information.
- **Step 8:** Organize application information into a table that includes pertinent information (due date, recommenders, and additional essays)
- **Step 9**: Decide who will provide you with the most positive reference letters. Most externship sites ask for recommendations from your clinical supervisors. It is most time efficient to write your own recommendations and have the supervisor(s) review them and print them on company letterhead.
- **Step 10:** Apply to as many sites as fit your criteria. Be sure to adhere to any deadlines for application materials. It is recommended that all application materials be submitted in one packet.

Step 11: The Interview

- Be prepared to briefly present a current or former case.
- Know why you want to work with this population.
- Have an idea about your future career goals and how this externship will fit with those goals.
- Know what your days of availability will be in the fall and spring semesters of the following year.
- Be able to articulate what type of supervision works best for you.
- Ask if there are current or past externs that you can talk with about the externship experience via phone, e-mail, etc.
- Remember that they are as interested in you as you are at their site, so, ask questions.

Review this website for additional information:

http://www.psychzone.com/files/Pincus%20Otis%20Internship%20Manual%202008.pdf

II. Internship Timeline

Item	When
Research potential internship sites and	Once student successfully passes
application deadlines	Comprehensive exams
Register with APPIC site	Once student successfully passes Comps
Review clinical strengths and growth areas,	Summer before you plan to apply for
training experiences, and clinical hours	internship
Prepare draft of APPIC essays	Summer before you plan to apply for

	internship		
Review APPIC calendar and familiarize	August of application year		
yourself with relevant dates	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Request letters of recommendation from	August - October of application year		
professors and supervisors			
Complete and Finalize paper application	August – October of application		
(essays not included)			
Send essays to faculty and peers for review	October – November of application		
and edits, Finalize essays			
Apply to Approved Internship Sites	November-December of application year		
Be aware the application criteria vary by site; please contact			
Externship site directors for specific application criteria & procedure Notify current externship site that you will be	Following notification of interviews		
going on interviews for internships and may	I ollowing notification of interviews		
miss dates			
Interview at Sites	March onward of application year		
Send Thank You letters to interviewers	Soon after interview(s)		
Match Day (phase I)	February of application year		
Prepare & apply for phase II if not matched	Immediately following match day		
Match Day (phase II)	March of application year		
Contact your Internship site to get	Following acceptance to ensure they have		
Contact your internating after to get	your current email and phone number		
Notification of Supervised Practice in	Within two weeks of starting Internship		
Psychology in the District of Columbia	Within two weeks of starting internship		
Required by DC law if doing an Internship in DC.			
Original to DC Board of Psychology			
 Copy for your files Copy to the Training Department 			
Register for Internship	During Fall registration of spring semester		
1 3 1 1 1 P	prior to starting internship		
Mid-year Internship paperwork due to the	December of internship year		
Training Director:	, , , , , , , , , , , , , , , , , , ,		
Supervisor's evaluation (signed by			
supervisor& student)			
Fall Record of Hours (signed by supervisor &			
student)	Manager and the same		
End-of-the year Internship paperwork due to	May of internship year		
the Training Director			
 Supervisor's evaluation (signed by supervisor & student) 			
 Record of Hours form (signed by supervisor & 			
student); must contain completed cumulative			
hours and total batteries section			
 Student End Year Externship Site Evaluation 			
Form			

III. Application Process

Application to APA accredited internships in the U.S. and Canada is administered by APPIC

(Association of Psychology Postdoctoral and Internship Centers) by means of a competitive online match program which follows a structured schedule during the year. Generally, applications are made through APPIC in early fall to winter. Students are strongly urged to register on APPIC to familiarize themselves with the internship application process. Generally, students apply for internship by late Summer and into Fall, and conduct interviews in the Winter, leading up to a matching day. Students should attend all meetings scheduled by the Director of Clinical Training regarding internship application process.

POLICIES AND PROCEDURES

I. GRIEVANCES, PROBLEMS AT TRAINING SITE

Please follow policy and tell us about important issues

If students are having problems at their training site, they should consult with the Director of Training as soon as a concern arises. Supervisors are encouraged to immediately contact the Director of Training with any concerns about their student. It is vital that we follow policy and procedures as closely as possible.

The following procedures are recommended to address grievances and solve problems at training sites.

- **1.** Discuss issues and concern with instructor of your clinical training course and inform the Training Director.
- 2. Review any and all documents regarding training sites policies for resolving grievances and problems related to training site. Follow the policies outlined at the site. Every attempt must be made to address the problem with the appropriate person(s) at the site: (a) the person or persons directly involved; (b) their supervisor or the director of the Program Director of the training site.
- 3. If not resolved with personnel at the site, then update the Training Director that the issue remains unresolved. The Training Director will work to resolve the issue with you and the site.

II. TRACKING CLINICAL HOURS

Students are required to track their clinical hours annually. Students should track all of their practicum, externship, and internship hours. We recommend that students use online tracking systems. Here are links to a few online systems:

My Psych Track- links directly to APPIC application www.mypsychtrack.com

Immediately begin to document your hours on site including activities such as client contacts, tests administered, and batteries conducted.

Students must submit hours at the end of each year. They can print out a summary of hours from the online system and turn it in to Training Director. Also, review the APPIC website at www.appic.org to become familiar with their means of documenting hours and activities.

III. RESPONSIBILITIES IN CLINICAL PRACTICES

Clinical training unites student, site supervisor and Howard University's Counseling Psychology Doctoral program in a working relationship in which all parties are responsible to each other in the following ways:

STUDENTS:

- 1. Conduct themselves in an ethical and professional manner in all clinical activities.
- 2. Integrate themselves into training sites and develop respectful working relationships with staff and clients.
- 3. Cultivate an attitude of openness to self-examination and new learning.
- 4. Inform the on-site supervisor and Clinical Director of any difficulties encountered at the training site.

SITE SUPERVISOR:

- 1. Communicates clear expectations of students.
- 2. Establishes regular, pre-set times for supervision.
- 3. Provides adequate clinical opportunities for the students to meet Howard University Counseling Psychology Doctoral program requirements.
- 4. Evaluates students in a timely manner.
- 5. Gives clear and frequent feedback to students regarding their progress in training.
- 6. Informs the Clinical Director as early as possible of any difficulties encountered at the Externship site.
- 7. Informs the Clinical Director of any changes in the clinical training experience (e.g., supervisor change, change in treatment populations).
- 8. Maintains an up-to-date resume with Howard University Counseling Psychology Doctoral program.

FACULTY MEMBER OF THE EXTERNSHIP/ PRACTICUM COURSE:

- 1. Communicates clear expectations to students.
- 2. Establishes regular communication with the site supervisor.
- 3. Schedules at least one on-site visit to any new (no student within the program has received training at this site before) externship site.

- 4. Evaluates students in a timely manner¹.
- 5. Familiarize themselves with various training sites for externship and/or internship.
- 6. Maintain office hours for students to discuss clinical issues.
- 7. Assist students in application process for externship and internship

IV. ASSIGNMENT AGREEMENT

Prior to the end of the academic year, the student should complete the *Externship Assignment Agreement* (Appendix E p. 30). This form identifies the site, the supervisor, and the days and time you will be on site. Signatures of the site supervisor, student and Howard University Counseling Psychology Training Director are required. You are responsible for completing this form and returning it to the Training Director **within two weeks of starting Externship**.

V. PROFESSIONAL LIABILITY CERTIFICATE OF INSURANCE

Students participating in externship are required to obtain professional liability insurance through the American Psychological Association. This insurance is necessary to protect you from any claims which may arise from your professional experiences at your externship site. You will need to be a member of APA in order to qualify for this insurance. You are encouraged to purchase insurance that will provide you with at least 2 million dollars of annual aggregate coverage. All students must provide proof of *Professional Liability Certificate of Insurance before* the start of the externship. It is important to secure insurance well in advance as the time to process your paperwork may take several months. Forms for applying for insurance are available on the association's website¹.

VI. NOTIFICATION OF SUPERVISED PRACTICE IN PSYCHOLOGY IN THE DISTRICT OF COLUMBIA

If your clinical training experience is in the District of Columbia, DC law **requires** you and your supervisor fill out the *Notification of Supervised Practice in Psychology in the District of Columbia* form. The form can be obtained by using the following website address: (http://app.doh.dc.gov/prof_license/services/pdffile/psychology/psychology_super_practice.pdf). After completion, you should keep a copy for your files, send a copy to the Training Director, and mail the original to the DC Board of Psychology (address is on the form). We must comply with all the District's laws. Please be vigilant in submitting this form.

VII. EVALUATION OF STUDENT PROGRESS

Supervisors complete a structured performance evaluation form (see Evaluation Forms for Practicum, Externship, and Internship in Appendix F) at the end of the semester. Students are encouraged to maintain their own record of clinical activities and to share these with supervisors for inclusion in their evaluation reports. Supervisors provide oral feedback to their supervisees, describing progress the student has made as well as areas for growth. Supervisors send their electronic evaluation form to the Director of Training. A minimum grade of B is required for internship, externship, and practicum. Students who receive less than a B or a "fail" in any of these courses will be required to meet with the Director of Training and the respective faculty member to develop a remediation plan. Students on internship will receive an Incomplete during the fall semester of their internship year; the grade will be updated once the student completes the internship year. Supervisors' evaluations are included in the portfolio review process and in students' written feedback. The written evaluation at the end of the semester is retained in the student's program file

VIII. Clinical Training and Probation

Students must not be on academic probation at the time of application to any clinical training experiences, and at the time clinical training begins. Students must remain off of probation while completing the clinical training. Students placed on probation or who become eligible for probation during the clinical training may be withdrawn from training for that year.

Students must abide by the specific site's rules, policies, and regulations. Students who fail to abide by and/or adhere to those policies may be in jeopardy of being terminated from that training site.

In those cases in which the student has not demonstrated the minimum skill level and professional development to successfully advance to the next level of training or if the course supervisor, Training or Clinical Director have reservations about a student's readiness for clinical advancement, students may be required to repeat the course and/or abide by the remediation procedures stipulated by the Counseling Psychology Program faculty. Students will be notified by the Training Director regarding any reservations about their skill and/or professional development. A student's plan of remediation must be implemented prior to the start of the following semester.

Note that ethical, judiciary code and legal violations committed at an externship site or related to externship responsibilities by a student may result in a failing grade for the course, possible disciplinary action and/or possible dismissal from the Program¹.

¹ Sections have been revised as of October 5, 2016. All students in the Program are expected to follow these and all other policies stated in this handbook.

APPENDECIES EXTERNSHIP FORMS



School of Education

Department of Human Development and Psychoeducational Studies Counseling Psychology Doctoral Program

Clinical Training Information Form

This form should be completed annually and should be turned in at the end of each Fall semester during a clinical training year.

A. Student Information	
Name:	Year in Program:
B. Current Clinical Site Information	
Name of Site:	
Day and Hours working:	
Type of Clientele: (age, ethnicity, race, sexual orientation, SES, v	veteran status, disability status, etc)
Describe clinical training rotations: (group, individual, assess	ment, intakes, etc.)
Describe didactics:	
C. Supervisor Information	
Name:	Phone number:
Email:	Official title:
Describe supervision: (individual, group, etc.)	

. Prior Practicum/Externship Experience	es
I have completed an assessment to (please include dates that you worked at site	raining experience ates and type of experience—assessments given)
I have completed a therapy training (please include dates that you worked at sites a	ng experience atand type of experience—clientele and therapy format (individual, group, etc)
believe I have the following specialized e	experiences (explain why)
would like to get additional training in th	nese areas
Student Name	Student ID Number
Email address	Phone number
Student Signature	Date

THIS FORM IS DUE TO TRAINING DIRECTOR BY THE END OF EACH FALL SEMESTER



School of Education

Department of Human Development and Psychoeducational Studies Counseling Psychology Doctoral Program

ETHICS STATEMENT Howard University Counseling Psychology

This is to verify that I have read, understood, and will follow the Ethical Principles of Psychologists and Code Of Conduct (2002). This includes the Preamble, Purpose, and all Sections.

If any ethical issues occur during my clinical, I will immediately contact the professor of my clinical training course, and give him/her all necessary information and process progressions as the ethical issue moves to resolution.

Additionally, I have not been coerced in any manner by my supervisor or any University employee to comply with the ACA's Code of Ethics (2005) and/or the ASCA's Code of Ethics (2010) or to sign this form. I do this by my own volition and willingness to promote professionalism in counseling.

Signature of Candidate		
Printed Name of Candidate		
Date		

^{*}This form should be signed and completed at the start of practicum and remains in students' files throughout their matriculation in the program.*



School of Education

Department of Human Development and Psychoeducational Studies Counseling Psychology Doctoral Program

SELF-EVALUATION OF TRAINING NEEDS

Name:			Date) :	
Email:			Pho	ne:	
			nd Information		
Graduate Practicu		• `	,		
2. 3.					
Strengths/ Specia populations, and/or			reign language skills, c.):	skills with sp	ecific
			ical disability, transponflict of interest, etc.):	rtation, speci	al
		Select	ion Criteria		
<u>Type</u>	<u>Previous</u>	<u>Needed</u>	<u>Type</u>	<u>Previous</u>	<u>Needed</u>
Child Adolescent Adult Psychiatric Inpatient Community Mental Health Outpatient Medical (Hospital) Residential Treatment			Substance Abuse Cross cultural Individual Group Couples Families Gen Assessment (neuropsychology) Batteries #		

Professional Development Objectives

Student's Professional Needs and Goals (type of work setting, clientele, etc.):	Student's Professional Needs and Goals (type of work setting, clientele, etc.):							
Training Goals (type of setting and client needed):								
Immediate Goal:								
Long-range Goal:	_							
Training Skills Needed (based upon Experience Checklist on previous page): 1								
2								
4.								
5								
Additional Skills Needing Further Development (weaknesses):								
Comments:								
STUDENT SIGNATURE DATE DIRECTOR OF TRAINING DATE	-							

This form should be filled out and completed at the end of each Spring Semester a student is enrolled in a clinical training course.

Student Externship Application History

Name	Date
	Records 🌣 Status (Check ALL that apply; this is important for future Externship
	placements)
	 □ Waiting to hear from this site □ Received offer □ Declined the site's offer
	□ Site did not accept me □ Applied
	 □ Interviewed □ Waiting to hear from this site □ Received offer
	□ Declined the site's offer □ Site did not accept me □ Applied
	 Interviewed Waiting to hear from this site Received offer Declined the site's offer
	□ Site did not accept me □ Applied
	 Interviewed Waiting to hear from this site Received offer Declined the site's offer Site did not accept me
	 Applied Interviewed Waiting to hear from this site Received offer Declined the site's offer Site did not accept me
	1

^{*}For Student Personal Use*

HOWARD UNIVERSITY CLINICAL ASSIGNMENT AGREEMENT

REQUIREMENTS

The minimum externship experience is <u>800</u> hours, of which at least <u>300</u> hours is in <u>direct</u> service experience and at <u>least 100</u> hours is in formally scheduled supervision. Other recommended extern activities include attending case conferences, writing reports and maintaining current clinical notes. It is your responsibility to make sure that your site supervisor is aware of the required hours. Students are required to meet weekly for the duration of the externship with their professor at a pregranged time and place.

current clinical notes. It is your respo meet weekly for the duration of the ex	xternship with their professor at									
		NFORMATION								
Name		ng Level (please check one):								
	□ Prac	cticum Year two Year three Year four								
Address										
Home phone	Cell Phone	Email								
	SITE INF	ORMATION								
Training Site Name										
Training Site Address										
Training Director	Phone	Email								
Supervisor	Phone	Email								
Supervisor	Phone	Email								
Length of Agreement:	August/ September	, 20 to May/ June , 20								
Days and Hours Attending Site:	-									
	TRAINING	ACTIVITIES								
Direct Services (face-to-face assessment & treatment activities):	Hours per week:	Please specify:								
2. Indirect Services (charting, report writing, informal consultation, video/audio tape review, etc.)	Hours per week:	Please specify:								
3. Didactic Activities (inservice, seminars, general case conferences, grand rounds, administrative meetings, etc.)	Hours per week:	Please specify:								
4. Supervision	Hours per week:	Please specify:								
TOTAL HOURS PER WEEK ON										
	AGRE	EMENT								
Psychological Services of the Americ DC and the training site. The studen	an Psychological Association, the tand agency training representa ng Director at the earliest opport	the Ethical Principles of Psychologists and Standards for Providers of the training policies and procedures of Howard University, Washington, ative attest to the accuracy of this document and further agree to tunity to sign a new Externship Assignment Agreement, should any g.								
Signature of Student		Date								
Signature of Training Supervisor		Date								
Approved, Howard University Tra	ining Director	Date								

HOWARD UNIVERSITY SUPERVISOR TRAINING EVALUATION FORM

Student Name:	
Date:	Semester and Year:
HU ID number:	Daytime Telephone Number:
Year in the Program:	
Name of Supervisor:	
Name of Organization:	
Address of Organization:	
Type of Training:	
Type of Evaluation:	

1	2	3	4	5
Unacceptable Performance	Low Remediation Required	At Expected Level Basic	Above Expected Level Proficient	Above Expected Level Excellent
Fail	Probationary Pass	Pass	High Pass	High Pass

Definitions:

- "1" Unacceptable Performance. At this level the student does not meet even minimal performance level in this competency area. Student may have engaged in unethical and/or unprofessional behavior
- "2" Low. Student has some areas of competence but performance is below expectations in at least two areas of competency.
- "3" Basic. Student meets minimal level of expectation in area of competency.
- **"4" Proficient.** Student shows level of competency beyond what might be expected in more than one area of competency.
- "5" Excellent. Student shows level of competency that exceeds expectations of training level. Student has mastered at least two areas of competency

"N/A" Not Applicable. Student has not had the opportunity to demonstrate skill as it may not be a part of the training experience.

I.	Therapy & Interventions (Includes such areas as theoretical conceptonceptualization.)	ots,	int	erv	/en	tion	s, and case
1.	Knowledge of relevant psychological theory and concepts	1	2	3	4	5	N/A
2.	Ability to formulate cases (including diagnosis) from a targeted theoretical framework	1	2	3	4	5	N/A
3.	Knowledge of evidence based intervention	1	2	3	4	5	N/A
4.	Ability to establish rapport	1	2	3	4	5	N/A
5.	Ability to maintain empathic contact	1	2	3	4	5	N/A
6.	Ability to set realistic treatment goals	1	2	3	4	5	N/A
7.	Ability to identify appropriate interventions	1	2	3	4	5	N/A
8.	Ability to carry out appropriate interventions	1	2	3	4	5	N/A
9.	Ability to identifies basic strengths and weaknesses of	_		3		5	N/A
	intervention approaches for different populations and presenting						,
	problems						
II.	Assessment (includes processes that describe, conceptualize, character	ize.	ar	nd r	rec	dict	relevant
	pects of the client behavior)	,	· u.		,, ,,		cicvanie
	Ability to identify and clearly specify evaluation questions	1	2	3	4	5	N/A
	Ability to make decisions about how to select assessment approaches				4		N/A
	and gather information.	_	_	•	•	,	14,71
12	Ability and knowledge of clinical interviewing	1	2	2	4	5	N/A
	Ability to gather and integrate information from multiple methods			3		5	N/A
15.	and sources		2	3	4)	IN/A
1/	Ability to administer, score and interpret psychological tests	1	2	3	1	5	N/A
	Ability to interpret assessment results with respect to sociocultural			3		5	N/A N/A
15.	and Diversity issues and context	1	2	3	4	5	N/A
16	Knowledge of psychometric constructs within assessment measures	1	2	3	4	5	N/A
	Ability to identify appropriate assessment measures with client			3		5	N/A
17.	populations	-	_	,	7	J	14,71
10	Ability to disseminate/communicate assessment findings in written	1	2	3	1	5	N/A
10.	and oral formats	-	_	J	7	J	N/A
19.	Ability to accurately diagnose clients problem using DSM	1	2	3	4	5	N/A
	Cultural Competency (includes knowledge and awareness of the role of						
	ectice)			•	. р.	0.00	3131141
_	Utilizes knowledge and understanding of how culture and context	1	2	3	4	5	N/A
20.	influence behavior and functioning of individuals.	-	_	,	·	J	14,71
21	Recognizes impact of personal worldviews on professional activities	1	2	2	4	5	N/A
21.	Recognizes impact of personal worldviews on professional activities	_		3	4	J	N/A
22.	Ability to understand complexity of client problem relevant to	1	2	3	4	5	N/A
	lifestyles, values, challenges, and cultural/linguistics backgrounds						
23.	Overall ability to demonstrate cultural and self-awareness	1	2	3	4	5	N/A
	regarding professional practice						
IV.	Supervision, Ethical, & Professional Conduct						
24.	Receptivity to supervision	1	2	3	4	5	N/A

25. Ability to incorporate feedback from supervision into clinical work	1	2	3	4	5	N/A
26. Demonstrates courteous ethical and professional practice in	1	2	3	4	5	N/A
collaboration and communication with peers and professional						
27. Behaves in accordance with APA Ethical Principles of	1	2	3	4	5	N/A
Psychologists and Code of Conduct						
28. Appropriate professional presentation of self with staff and	1	2	3	4	5	N/A
clients						
29. Conforms to agency expectations regarding scheduling, absences,	1	2	3	4	5	N/A
submission of reports, etc.						
30. Ability to function in a multi-disciplinary team	1	2	3	4	5	N/A
31. Capacity for broad self-assessment of competence	1	2	3	4	5	N/A
32. Willingness to seek means to enhance knowledge and skills	1	2	3	4	5	N/A
33. Ability to monitor and evaluate practice activities	1	2	3	4	5	N/A
34. Ability to recognize limits of knowledge and skills	1	2	3	4	5	N/A
35. Ability to recognize the importance of ethical concepts in practice	1	2	3	4	5	N/A
(e.g. informed consent, confidentiality, dual relationships,						
competency, etc.)						
36. Demonstrates knowledge of ethical, legal, professional standards,	1	2	3	4	5	N/A
and guidelines						
37. Awareness and/or ability to apply ethical decision-making	1	2	3	4	5	N/A
38. Demonstrates an awareness of ethical conflicts and dilemmas	1	2	3	4	5	N/A
between personal beliefs and APA ethics code						
Overall Rating of Student	1	2	3	4	5	N/A

V. 	What do you see as this supervisee's major clinical strengths?
VI.	What do you see as this supervisee's major clinical deficiencies?
VII.	Other Comments

If student plans to apply for internship in the fall, do you recommend student for internship?

Y N

Supervisor's Signature	Date
Student's Signature	Date
Howard University Director of Training Signature	Date

Annual Student Evaluation of Training Program

■= Response is required Background Information

■Indicate your training level (year) in the program:

No answer specified

EVALUATION OF TRAINING PROGRAM

■Perceptions of Program Quality/Effectiveness

Please respond to the following items in terms of: How well the program is...

Response Legend:

1 = Not Well At All 2 = Not Well 3 = Adequately 4 = Well 5 = Very V	Vell					
	1	2	3	4	5	N/A
preparing you to become competent in research and scholarship in counseling psychology?						
increasing your knowledge and skill related to clinical practice that includes awareness of cultural factors?						
preparing you to foster respect for human diversity and to develop skills to effectively work with individuals from diverse cultural backgrounds (e.g., race, gender, orientation, class/SES, religion, immigrants, abilities, etc.?			C	0	0	0
preparing you to apply a multicultural framework to all aspects of your professional practice (e.g., clinical work, assessment, research, supervision, consultation)?		0	0			
increasing you knowledge of the scientific, theoretical, empirical, and contextual bases of psychological assessment?						
increasing your knowledge, sensitivity and effectiveness related to culturally appropriate psychological assessment?						
preparing you to appropriately apply and practice ethical and professional standards and guidelines in all professional activities?						
increasing your ability to recognize the importance of ethical concepts in practice, research, and supervision?						
	1	2	3	4	5	N/A
preparing you to conduct yourself in a professional manner?						
preparing you to develop an identity as a counseling psychologist and participate in the profession through membership, leadership, and advocacy?		0				
emphasize a hypothesis-testing approach with regard to obtaining and evaluating information, and an examination of empirical literature relevant to planning and evaluating clinical interventions?		0				
encourage or provide information on meetings and social gatherings that involve both students and faculty?						
successfully involve students on research teams that encourage empirical research, writing for publication, and presentation of						

conference papers?							
include knowledge about African American and other historically oppressed groups that is in keeping with the historical mission of the University?	0					0	
increase your capacity for critical thinking, as is consistent with the goals of the School of Education?							
contributing to your becoming a scientist-practitioner (or a researcher-practitioner) in professional psychology?					0		
preparing you for "leadership" in a Global society?							
Core Foundational Areas of Psychology Please indicate the extent to which your program is enhancing your kn Response Legend:		dge o	f				
1 = Not Well At All 2 = Not Well 3 = Adequate 4 = Well 5 = Very We	211 1	2	3	4	5	N/A	
Biological Bases of Behavior							
Cognitive/Affective Aspects of Behavior & Human Development							
Social Aspects of Behavior							
History & Systems							
Individual Differences							
Psychopathology							
Psychological Measurement							
Human Development / Lifespan Psychology							
	1	2	3	4	5	N/A	
Ethical Research & Practice							
Evidence-Based, Culturally Competent, & Effective Interventions							
Culturally Competent Assessment							
Overall Satisfaction with the Counseling Psychology Program Please indicate your level of satisfaction with each of the following itethe extent to which you were challenged by you program of study?							
the quality of instruction in your program of study?							
■the Quality of tests and other instructional materials in your program of study?							
the in-class evaluation procedures (e.g., graded tsts, papers, etc.)?							
the Accessibility of instructors for conferences/meetnigs outside of	class	;?					

- ...the Faculty responsiveness and understanding of student needs?
- ...the quality of the training curriculum?
- ...the quality of Faculty mentorship?
- •Overall, how Satisfied are you thus far with the training provided to you in the Counseling Psychology program?

Additional Comments (Optional)

Positive Feedback

Provide attributes about the program that your appreciate that you would like to highlight or ensure that continues to occur

Suggestions for program improvement

Please provide any feedback you'd like for us to know in order to improve the program, its reputation or the experience of students

Summary of Clinical Training in Counseling Psychology

E Response is required

Section I: Identifying Information

Full Name Bison ID#

No answer specified No answer specified

Student's Level of Training in the Program

No answer specified

■Name of Training Supervisor Please enter Name of Site Supervisor No answer specified

Supervisor Credentials

Please indicate the credentials of your site supervisor (Check all that apply)

No answer specified

Please enter name of site (name of agency, school district, clinic, etc.)

No answer specified

Address of Primary Site location

No answer specified

What populations did you serve during your recent training (check all that apply)?

(Please check all that apply)

No answer specified

What grade/age levels did you serve during your recent training?

No answer specified

What type(s) of clinical/professional training experiences did you engage in during training? (check all that apply)

■Summary of Training Experience

Please provide a brief summary of your training experience, including: narrative description of the characteristics of the setting, types of services that your site is designed to provide, and any unique/new types of clients you served, training you experienced; basically, in brief, describe what you learned/how your professional abilities improved as a results of this training experience. *No answer specified*

■Total Direct vs. Indirect Training Hours

Total Direct Contact Hours Total Indirect Contact Hours

No answer specified No answer specified

■Total Hours of Supervision

Total Individual Supervision Total Group Supervision

■Total Hours of Training

Please enter your total hours for clinical training this year (Total Direct + Indirect + Supervision hours = total hours)

No answer specified

Section IV: Student Evaluation of the Training Site and Supervisor

Please rate the quality of the site/supervisor for each item below, based on the following scale:

Response Legend	:
1 = Unsatisfactory	2 = Needs Improvement 3 = Satisfactory/Adequate 4 = Highly Competent 5 =

Exceptional						
	1	2	3	4	5	N/A
Availability for you and your needs						
Demonstrated ethical behavior/decision-making						
Demonstrated organized, punctual, professional behavior						
Presented as encouraging, enthusiastic, and supportive						
Demonstrated responsiveness to your needs, queries, concerns, etc.						
Provided clear instructions/expectations						
Set tasks that were appropriately engaging and challenging						
Provided sufficient support for your success						
	1	2	3	4	5	N/A
Provided necessary guidance/supervision, but also allowed independence when appropriate						
Provided timely and helpful feedback						
Appeared interested in your learning/training						
Demonstrated knowledge/awareness of, and respect for, diversity in						

• Would you recommend this site for future Howard University School Psychology graduate students?

No answer specified

ASSESSMENTS

These are tests you need to track for the internship process. Additional tests can be listed under "other" on the tracking form.

ADULT TESTS

Bender Gestalt

Millon Clinical Multi-Axial Inv. III (MCMI)

MMPI-II

Myers-Briggs Type Indicator

Personality Assessment Inventory

Projective Sentences (includes Rotter Sentence Completion and other

Sentence Completion Tests)

Projective Drawings (includes Draw-a-Person Test and Kinetic Family and

Drawing Test

Rorschach (scoring system)

Self-report Measures of Symptoms/ Disorders (e.g., Beck Depression Inventory)

Strong Interest Inventory

Structured diagnostic Interviews (e.g., SADS, DIS)

TAT

Trail Making Test A&B

WAIS-III

Wechsler Memory Scale III

CHILD & ADOLESCENT TESTS

Connors Scales (ADD Assessment)

Diagnostic Interviews (e.g., DISC, Kiddie-SADS)

MMPI-A

Parent Report Measures (e.g., Child Behavior Checklist)

Peabody Picture Vocabulary Test

Rorschach (scoring system)

Self-report Measures of Symptoms/Disorders (e.g., Children's Depression

Inventory)

WISC-III

WPPSI-R

WRAT

Curriculum Vitae Outline

Identifying Information

- Name
- Address
- Telephone
- Fax, email

Education

- Start with Howard University, Washington, DC. One is a Ph.D. candidate after passing Comps. Ph.D. program is APA accredited
- List other degrees/ schools in reverse order
- Mention any honors associated with degree, e.g., graduated cum laude

Military Experience

Licenses

Supervised Training

- Clinical Training associated with degree program
- Include name of supervisor and degree
- Include Master's Practicum/Externship

Employment (clinically related)

Publications

Professional Memberships

Awards

• e.g., school fellowships, work commendations

Special Competencies/ Interests

• e.g., second language, advanced computer skills

IMA STUDENT, M.Ed. 111 Psychology Way Washington, DC 20009 202-333-9878

imastudent@howard.edu

EDUCATION

7/03- present Howard University

Washington, DC

American Psychological Association Accredited

Doctoral Counseling Psychology Student

Washington, DC

9/01-6/03 Howard University

Washington, DC- M.Ed.

Washington, DC

1/99-5/01 Hampton University- B.A.

Hampton, VA

Major: Psychology

SUPERVISED TRAINING

7/02- Present Children's National Medical Center

Washington, DC

Doctoral Externship

Supervisor: Ted E. Bear, Ph.D.

Outpatient and inpatient services. Duties include:

neuropsychological assessments, individual therapy, family therapy, and parent training. Attend weekly interdisciplinary meetings as well as two hours of individual supervision. Psychotherapeutic approached are behavioral, cognitive-behavioral, and play-therapy. Also participating in the

implementation of a CDC study using these psychotherapeutic

techniques.

9/02-6/03 Educational and Neuropsychological Assessments

Bethesda, MD

Master's Practicum

Supervisor: Nowuit All, Ph.D.

Outpatient Services: Conducted individual therapy sessions with

children, adolescents and adults. Used a variety of

pscychotherapeutic approaches including play therapy, cognitivebehavioral therapy and client-centered therapy. Also completed intakes as well as reports. Participated in weekly seminars and

group supervision in addition to individual supervision.

Responsible for all necessary documentation such as treatment plans and progress notes.

9/99-1/01 Hampton University

Hampton, VA

Independent Study in the Hampton Public Schools District in VA

Supervisor: Ed U. Kater, Ph.D. Candidate

Introduction and implementation of the W.E.B. DuBois Program into the first and second grade classrooms in several schools in the Hampton Public Schools District. Responsible for conducting structured interviews with the children and teachers as well as pre and post assessment of school children aged 6-10. Interaction with the teachers and children required. Analyzed and entered results into a data analysis format as well as corresponded the children's tem and report card grades.

CLINICALLY RELATED VOLUNTEER EXPERIENCE

4/02-9/02 Pediatric AIDS/HIV Care Inc

Washington, DC

Completed several activities at the center with children aged 11-

12. Assisted children with homework and projects. Also

responsible for dinner and snacks.

9/96-5/97 Washington Free Clinic

Washington, DC

Assisted staff with provided HIV tests to the community. Provided

community presentations about HIV/AIDS.

RELEVANT EMPLOYMENT

11/02- present American Society for Parental & Enteral Nutrition

Silver Spring, MD Research Assistant

Responsible for coordinating all events at the annual conference

related to research. Organize and direct several member committees pertaining to research in the field. Coordinate the annual research awards as well as the review of research literature. Manage numerous projects in a team environment.

7/02-9/02 National Institute of Mental Health (NIMH)

Bethesda, MD

Assistant to Head Psychologist, Part-Time

Processed all aspects of required office work. Specialized in the credentialing of all the providers in five locations. Also responsible for managing the coordination of licensing and insurance.

PROFESSIONAL WORKSHOPS

Tolton, I.A. (2002, January). <u>Workshop in Forensic Psychology and Urban Populations.</u> Presented by Noire Tolton in Hampton, VA.

PROFESSIONAL MEMBERSHIPS

American Psychological Association- Student Affiliate

AWARDS

Hampton University- Dean's List

Completed Graduate Courses

Adult Psychopathology
Advanced Statistics
Design and Analysis of Research Project I
Family and Couples Therapy
Group Processes
History & Systems
Professional Ethics and Legal Issues in Psychology
Research in Counseling Seminar
Seminar in Counseling Psychology
Substance Abuse

CURRENT GRADUATE COURSES

Multivariate Statistics

References are available upon request

SAMPLE COVER LETTER

Ima Student

111 Psychology Way ● Washington, DC 20009 ● 202-333-9878 ● istudent@howard.edu

April 23, 2005

Roosevelt M. Johnson, Ph.D. Director of Training The Montgomery Center 8630 Fenton Street Suite 224 Silver Spring, MD 20910

Dear Dr. Johnson,

Please accept my Externship application to the Afro American Counseling and Psychotherapy Institute, LLC for the 2005-2006 academic year.

After learning about your Externship training program, it became evident that the AACPI can provide me with the valuable experiences necessary for my short- and long-term career goals. As you can see by my CV, I have a long-standing interest in serving urban populations, and had an opportunity to work with Malcolm X Elementary School for three years. Since AACPI works with "troubled" youth and community interventions, it would round out my background tremendously. In addition, I welcome the opportunity to learn to provide appropriate interventions with diverse client population in various clinical settings. In the future, I hope to make a career of providing therapy to those in need.

I am eager to discuss the possibility of an Externship for the coming year. I can be reached at the phone number or email address above.

Sincerely,

Ima Student

Ethical Principles of Psychologists and Code Of Conduct 2002 CONTENTS

INTRODUCTION AND APPLICABILITY

PREAMBLE

GENERAL PRINCIPLES

Principle A: Beneficence and Nonmaleficence

Principle B: Fidelity and Responsibility

Principle C: Integrity Principle D: Justice

Principle E: Respect for People's Rights and Dignity

ETHICAL STANDARDS

1. Resolving Ethical Issues

- 1.01 Misuse of Psychologists' Work
- 1.02 Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority
- 1.03 Conflicts Between Ethics and Organizational Demands
- 1.04 Informal Resolution of Ethical Violations
- 1.05 Reporting Ethical Violations
- 1.06 Cooperating With Ethics Committees
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INTRODUCTION AND APPLICABILITY

The American Psychological Association's (APA's) Ethical Principles of Psychologists and Code of Conduct (hereinafter referred to as the Ethics Code) consists of an Introduction, a Preamble, five General Principles (A – E), and specific Ethical Standards. The Introduction discusses the intent, organization, procedural considerations, and scope of application of the Ethics Code. The Preamble and General Principles are aspirational goals to guide psychologists toward the highest ideals of psychology. Although the Preamble and General Principles are not themselves enforceable rules, they should be considered by psychologists in arriving at an ethical course of action. The Ethical Standards set forth enforceable rules for conduct as psychologists. Most of the Ethical Standards are written broadly, in order to apply to psychologists in varied roles, although the application of an Ethical Standard may vary depending on the context. The Ethical Standards are not exhaustive. The fact that a given conduct is not specifically addressed by an Ethical Standard does not mean that it is necessarily either ethical or unethical.

This Ethics Code applies only to psychologists' activities that are part of their scientific, educational, or professional roles as psychologists. Areas covered include but are not limited to the clinical, counseling, and school practice of psychology; research; teaching; supervision of trainees; public service; policy development; social intervention; development of assessment instruments; conducting assessments; educational counseling; organizational consulting; forensic activities; program design and evaluation; and administration. This Ethics Code applies to these activities across a variety of contexts, such as in person, postal, telephone, internet, and other electronic transmissions. These activities shall be distinguished from the purely private conduct of psychologists, which is not within the purview of the Ethics Code.

Membership in the APA commits members and student affiliates to comply with the standards of the APA Ethics Code and to the rules and procedures used to enforce them. Lack of awareness or misunderstanding of an Ethical Standard is not itself a defense to a charge of unethical conduct.

The procedures for filing, investigating, and resolving complaints of unethical conduct are described in the current Rules and Procedures of the APA Ethics Committee. APA may impose sanctions on its members for violations of the standards of the Ethics Code, including termination of APA membership, and may notify other bodies and individuals of its actions. Actions that violate the standards of the Ethics Code may also lead to the imposition of sanctions on psychologists or students whether or not they are APA members by bodies other than APA, including state psychological associations, other professional groups, psychology boards, other state or federal agencies, and payors for health services. In addition, APA may take action against a member after his or her conviction of a felony, expulsion or suspension from an affiliated state psychological association, or suspension or loss of licensure. When the sanction to be imposed by APA is less than expulsion, the 2001 Rules and Procedures do not guarantee an opportunity for an in-person hearing, but generally provide that complaints will be resolved only on the basis of a submitted record.

The Ethics Code is intended to provide guidance for psychologists and standards of professional conduct that can be applied by the APA and by other bodies that choose to adopt them. The Ethics Code is not intended to be a basis of civil liability. Whether a psychologist has violated the Ethics Code standards does not by itself determine whether the

psychologist is legally liable in a court action, whether a contract is enforceable, or whether other legal consequences occur.

The modifiers used in some of the standards of this Ethics Code (e.g., *reasonably*, *appropriate*, *potentially*) are included in the standards when they would (1) allow professional judgment on the part of psychologists, (2) eliminate injustice or inequality that would occur without the modifier, (3) ensure applicability across the broad range of activities conducted by psychologists, or (4) guard against a set of rigid rules that might be quickly outdated. As used in this Ethics Code, the term *reasonable* means the prevailing professional judgment of psychologists engaged in similar activities in similar circumstances, given the knowledge the psychologist had or should have had at the time.

In the process of making decisions regarding their professional behavior, psychologists must consider this Ethics Code in addition to applicable laws and psychology board regulations. In applying the Ethics Code to their professional work, psychologists may consider other materials and guidelines that have been adopted or endorsed by scientific and professional psychological organizations and the dictates of their own conscience, as well as consult with others within the field. If this Ethics Code establishes a higher standard of conduct than is required by law, psychologists must meet the higher ethical standard. If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to this Ethics Code and take steps to resolve the conflict in a responsible manner. If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing authority in keeping with basic principles of human rights.

PREAMBLE

Psychologists are committed to increasing scientific and professional knowledge of behavior and people's understanding of themselves and others and to the use of such knowledge to improve the condition of individuals, organizations, and society. Psychologists respect and protect civil and human rights and the central importance of freedom of inquiry and expression in research, teaching, and publication. They strive to help the public in developing informed judgments and choices concerning human behavior. In doing so, they perform many roles, such as researcher, educator, diagnostician, therapist, supervisor, consultant, administrator, social interventionist, and expert witness. This Ethics Code provides a common set of principles and standards upon which psychologists build their professional and scientific work.

This Ethics Code is intended to provide specific standards to cover most situations encountered by psychologists. It has as its goals the welfare and protection of the individuals and groups with whom psychologists work and the education of members, students, and the public regarding ethical standards of the discipline.

The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment and lifelong effort to act ethically; to encourage ethical behavior by students, supervisees, employees, and colleagues; and to consult with others concerning ethical problems.

GENERAL PRINCIPLES

This section consists of General Principles. General Principles, as opposed to Ethical Standards, are aspirational in nature. Their intent is to guide and inspire psychologists toward the very highest ethical ideals of the profession. General Principles, in contrast to Ethical Standards, do not represent obligations and should not form the basis for imposing sanctions. Relying upon General Principles for either of these reasons distorts both their meaning and purpose.

PRINCIPLE A: BENEFICENCE AND NONMALEFICENCE

Psychologists strive to benefit those with whom they work and take care to do no harm. In their professional actions, psychologists seek to safeguard the welfare and rights of those with whom they interact professionally and other affected persons, and the welfare of animal subjects of research. When conflicts occur among psychologists' obligations or concerns, they attempt to resolve these conflicts in a responsible fashion that avoids or minimizes harm. Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence. Psychologists strive to be aware of the possible effect of their own physical and mental health on their ability to help those with whom they work.

PRINCIPLE B: FIDELITY AND RESPONSIBILITY

Psychologists establish relationships of trust with those with whom they work. They are aware of their professional and scientific responsibilities to society and to the specific communities in which they work. Psychologists uphold professional standards of conduct, clarify their professional roles and obligations, accept appropriate responsibility for their behavior, and seek to manage conflicts of interest that could lead to exploitation or harm. Psychologists consult with, refer to, or cooperate with other professionals and institutions to the extent needed to serve the best interests of those with whom they work. They are concerned about the ethical compliance of their colleagues' scientific and professional conduct. Psychologists strive to contribute a portion of their professional time for little or no compensation or personal advantage.

PRINCIPLE C: INTEGRITY

Psychologists seek to promote accuracy, honesty, and truthfulness in the science, teaching, and practice of psychology. In these activities psychologists do not steal, cheat, or engage in fraud, subterfuge, or intentional misrepresentation of fact. Psychologists strive to keep their promises and to avoid unwise or unclear commitments. In situations in which deception may be ethically justifiable to maximize benefits and minimize harm, psychologists have a serious obligation to consider the need for, the possible consequences of, and their responsibility to correct any resulting mistrust or other harmful effects that arise from the use of such techniques.

PRINCIPLE D: JUSTICE

Psychologists recognize that fairness and justice entitle all persons to access to and benefit from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists. Psychologists exercise reasonable judgment and take precautions to ensure that their potential biases, the boundaries of their competence, and the limitations of their expertise do not lead to or condone unjust practices.

PRINCIPLE E: RESPECT FOR PEOPLE'S RIGHTS AND DIGNITY

Psychologists respect the dignity and worth of all people, and the rights of individuals to privacy, confidentiality, and self-determination. Psychologists are aware that special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous decision making. Psychologists are aware of and respect cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status and consider these factors when working with members of such groups. Psychologists try to eliminate the effect on their work of biases based on those factors, and they do not knowingly participate in or condone activities of others based upon such prejudices.

ETHICAL STANDARDS

1. RESOLVING ETHICAL ISSUES

1.01 Misuse of Psychologists' Work

If psychologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation.

1.02 Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority

If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict. If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing legal authority.

1.03 Conflicts Between Ethics and Organizational Demands

If the demands of an organization with which psychologists are affiliated or for whom they are working conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and to the extent feasible, resolve the conflict in a way that permits adherence to the Ethics Code.

1.04 Informal Resolution of Ethical Violations

When psychologists believe that there may have been an ethical violation by another psychologist, they attempt to resolve the issue by bringing it to the attention of that individual, if an informal resolution appears appropriate and the intervention does not violate any confidentiality rights that may be involved. (See also Standards 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority, and 1.03, Conflicts Between Ethics and Organizational Demands.)

1.05 Reporting Ethical Violations

If an apparent ethical violation has substantially harmed or is likely to substantially harm a person or organization and is not appropriate for informal resolution under Standard 1.04, Informal Resolution of Ethical Violations, or is not resolved properly in that fashion, psychologists take further action appropriate to the situation. Such action might include referral to state or national committees on professional ethics, to state licensing boards, or to the appropriate institutional authorities. This standard does not apply when an intervention

would violate confidentiality rights or when psychologists have been retained to review the work of another psychologist whose professional conduct is in question. (See also Standard 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority.)

1.06 Cooperating With Ethics Committees

Psychologists cooperate in ethics investigations, proceedings, and resulting requirements of the APA or any affiliated state psychological association to which they belong. In doing so, they address any confidentiality issues. Failure to cooperate is itself an ethics violation. However, making a request for deferment of adjudication of an ethics complaint pending the outcome of litigation does not alone constitute noncooperation.

1.07 Improper Complaints

Psychologists do not file or encourage the filing of ethics complaints that are made with reckless disregard for or willful ignorance of facts that would disprove the allegation.

1.08 Unfair Discrimination Against Complainants and Respondents

Psychologists do not deny persons employment, advancement, admissions to academic or other programs, tenure, or promotion, based solely upon their having made or their being the subject of an ethics complaint. This does not preclude taking action based upon the outcome of such proceedings or considering other appropriate information.

2. COMPETENCE

2.01 Boundaries of Competence

- (a) Psychologists provide services, teach, and conduct research with populations and in areas only within the boundaries of their competence, based on their education, training, supervised experience, consultation, study, or professional experience.
- (b) Where scientific or professional knowledge in the discipline of psychology establishes that an understanding of factors associated with age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status is essential for effective implementation of their services or research, psychologists have or obtain the training, experience, consultation, or supervision necessary to ensure the competence of their services, or they make appropriate referrals, except as provided in Standard 2.02, Providing Services in Emergencies.
- (c) Psychologists planning to provide services, teach, or conduct research involving populations, areas, techniques, or technologies new to them undertake relevant education, training, supervised experience, consultation, or study.
- (d) When psychologists are asked to provide services to individuals for whom appropriate mental health services are not available and for which psychologists have not obtained the competence necessary, psychologists with closely related prior training or experience may provide such services in order to ensure that services are not denied if they make a reasonable effort to obtain the competence required by using relevant research, training, consultation, or study.
- (e) In those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists nevertheless take reasonable steps to ensure the competence of their work and to protect clients/patients, students, supervisees, research participants, organizational clients, and others from harm.

(f) When assuming forensic roles, psychologists are or become reasonably familiar with the judicial or administrative rules governing their roles.

2.02 Providing Services in Emergencies

In emergencies, when psychologists provide services to individuals for whom other mental health services are not available and for which psychologists have not obtained the necessary training, psychologists may provide such services in order to ensure that services are not denied. The services are discontinued as soon as the emergency has ended or appropriate services are available.

2.03 Maintaining Competence

Psychologists undertake ongoing efforts to develop and maintain their competence.

2.04 Bases for Scientific and Professional Judgments

Psychologists' work is based upon established scientific and professional knowledge of the discipline. (See also Standards 2.01e, Boundaries of Competence, and 10.01b, Informed Consent to Therapy.)

2.05 Delegation of Work to Others

Psychologists who delegate work to employees, supervisees, or research or teaching assistants or who use the services of others, such as interpreters, take reasonable steps to (1) avoid delegating such work to persons who have a multiple relationship with those being served that would likely lead to exploitation or loss of objectivity; (2) authorize only those responsibilities that such persons can be expected to perform competently on the basis of their education, training, or experience, either independently or with the level of supervision being provided; and (3) see that such persons perform these services competently. (See also Standards 2.02, Providing Services in Emergencies; 3.05, Multiple Relationships; 4.01, Maintaining Confidentiality; 9.01, Bases for Assessments; 9.02, Use of Assessments; 9.03, Informed Consent in Assessments; and 9.07, Assessment by Unqualified Persons.)

2.06 Personal Problems and Conflicts

- (a) Psychologists refrain from initiating an activity when they know or should know that there is a substantial likelihood that their personal problems will prevent them from performing their work-related activities in a competent manner.
- (b) When psychologists become aware of personal problems that may interfere with their performing work-related duties adequately, they take appropriate measures, such as obtaining professional consultation or assistance, and determine whether they should limit, suspend, or terminate their work-related duties. (See also Standard 10.10, Terminating Therapy.)

3. **HUMAN RELATIONS**

3.01 Unfair Discrimination

In their work-related activities, psychologists do not engage in unfair discrimination based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law.

3.02 Sexual Harassment

Psychologists do not engage in sexual harassment. Sexual harassment is sexual solicitation, physical advances, or verbal or nonverbal conduct that is sexual in nature, that occurs in connection with the psychologist's activities or roles as a psychologist, and that either (1) is unwelcome, is offensive, or creates a hostile workplace or educational environment, and the psychologist knows or is told this or (2) is sufficiently severe or intense to be abusive to a reasonable person in the context. Sexual harassment can consist of a single intense or severe act or of multiple persistent or pervasive acts. (See also Standard 1.08, Unfair Discrimination Against Complainants and Respondents.)

3.03 Other Harassment

Psychologists do not knowingly engage in behavior that is harassing or demeaning to persons with whom they interact in their work based on factors such as those persons' age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status.

3.04 Avoiding Harm

Psychologists take reasonable steps to avoid harming their clients/patients, students, supervisees, research participants, organizational clients, and others with whom they work, and to minimize harm where it is foreseeable and unavoidable.

3.05 Multiple Relationships

(a) A multiple relationship occurs when a psychologist is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the psychologist has the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person.

A psychologist refrains from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the psychologist's objectivity, competence, or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists.

Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical.

- (b) If a psychologist finds that, due to unforeseen factors, a potentially harmful multiple relationship has arisen, the psychologist takes reasonable steps to resolve it with due regard for the best interests of the affected person and maximal compliance with the Ethics Code.
- (c) When psychologists are required by law, institutional policy, or extraordinary circumstances to serve in more than one role in judicial or administrative proceedings, at the outset they clarify role expectations and the extent of confidentiality and thereafter as changes occur. (See also Standards 3.04, Avoiding Harm, and 3.07, Third-Party Requests for Services.)

3.06 Conflict of Interest

Psychologists refrain from taking on a professional role when personal, scientific, professional, legal, financial, or other interests or relationships could reasonably be expected to (1) impair their objectivity, competence, or effectiveness in performing their functions as

psychologists or (2) expose the person or organization with whom the professional relationship exists to harm or exploitation.

3.07 Third-Party Requests for Services

When psychologists agree to provide services to a person or entity at the request of a third party, psychologists attempt to clarify at the outset of the service the nature of the relationship with all individuals or organizations involved. This clarification includes the role of the psychologist (e.g., therapist, consultant, diagnostician, or expert witness), an identification of who is the client, the probable uses of the services provided or the information obtained, and the fact that there may be limits to confidentiality. (See also Standards 3.05, Multiple Relationships, and 4.02, Discussing the Limits of Confidentiality.)

3.08 Exploitative Relationships

Psychologists do not exploit persons over whom they have supervisory, evaluative, or other authority such as clients/patients, students, supervisees, research participants, and employees. (See also Standards 3.05, Multiple Relationships; 6.04, Fees and Financial Arrangements; 6.05, Barter With Clients/Patients; 7.07, Sexual Relationships With Students and Supervisees; 10.05, Sexual Intimacies With Current Therapy Clients/Patients; 10.06, Sexual Intimacies With Relatives or Significant Others of Current Therapy Clients/Patients; 10.07, Therapy With Former Sexual Partners; and 10.08, Sexual Intimacies With Former Therapy Clients/Patients.)

3.09 Cooperation With Other Professionals

When indicated and professionally appropriate, psychologists cooperate with other professionals in order to serve their clients/patients effectively and appropriately. (See also Standard 4.05, Disclosures.)

3.10 Informed Consent

- (a) When psychologists conduct research or provide assessment, therapy, counseling, or consulting services in person or via electronic transmission or other forms of communication, they obtain the informed consent of the individual or individuals using language that is reasonably understandable to that person or persons except when conducting such activities without consent is mandated by law or governmental regulation or as otherwise provided in this Ethics Code. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.)
- (b) For persons who are legally incapable of giving informed consent, psychologists nevertheless (1) provide an appropriate explanation, (2) seek the individual's assent, (3) consider such persons' preferences and best interests, and (4) obtain appropriate permission from a legally authorized person, if such substitute consent is permitted or required by law. When consent by a legally authorized person is not permitted or required by law, psychologists take reasonable steps to protect the individual's rights and welfare.
- (c) When psychological services are court ordered or otherwise mandated, psychologists inform the individual of the nature of the anticipated services, including whether the services are court ordered or mandated and any limits of confidentiality, before proceeding.
- (d) Psychologists appropriately document written or oral consent, permission, and assent. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.)

3.11 Psychological Services Delivered To or Through Organizations

- (a) Psychologists delivering services to or through organizations provide information beforehand to clients and when appropriate those directly affected by the services about (1) the nature and objectives of the services, (2) the intended recipients, (3) which of the individuals are clients, (4) the relationship the psychologist will have with each person and the organization, (5) the probable uses of services provided and information obtained, (6) who will have access to the information, and (7) limits of confidentiality. As soon as feasible, they provide information about the results and conclusions of such services to appropriate persons.
- (b) If psychologists will be precluded by law or by organizational roles from providing such information to particular individuals or groups, they so inform those individuals or groups at the outset of the service.

3.12 Interruption of Psychological Services

Unless otherwise covered by contract, psychologists make reasonable efforts to plan for facilitating services in the event that psychological services are interrupted by factors such as the psychologist's illness, death, unavailability, relocation, or retirement or by the client's/patient's relocation or financial limitations. (See also Standard 6.02c, Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work.)

4. PRIVACY AND CONFIDENTIALITY

4.01 Maintaining Confidentiality

Psychologists have a primary obligation and take reasonable precautions to protect confidential information obtained through or stored in any medium, recognizing that the extent and limits of confidentiality may be regulated by law or established by institutional rules or professional or scientific relationship. (See also Standard 2.05, Delegation of Work to Others.)

4.02 Discussing the Limits of Confidentiality

- (a) Psychologists discuss with persons (including, to the extent feasible, persons who are legally incapable of giving informed consent and their legal representatives) and organizations with whom they establish a scientific or professional relationship (1) the relevant limits of confidentiality and (2) the foreseeable uses of the information generated through their psychological activities. (See also Standard 3.10, Informed Consent.)
- (b) Unless it is not feasible or is contraindicated, the discussion of confidentiality occurs at the outset of the relationship and thereafter as new circumstances may warrant.
- (c) Psychologists who offer services, products, or information via electronic transmission inform clients/patients of the risks to privacy and limits of confidentiality.

4.03 Recording

Before recording the voices or images of individuals to whom they provide services, psychologists obtain permission from all such persons or their legal representatives. (See also Standards 8.03, Informed Consent for Recording Voices and Images in Research; 8.05, Dispensing With Informed Consent for Research; and 8.07, Deception in Research.)

4.04 Minimizing Intrusions on Privacy

- (a) Psychologists include in written and oral reports and consultations, only information germane to the purpose for which the communication is made.
- (b) Psychologists discuss confidential information obtained in their work only for appropriate scientific or professional purposes and only with persons clearly concerned with such matters.

4.05 Disclosures

- (a) Psychologists may disclose confidential information with the appropriate consent of the organizational client, the individual client/patient, or another legally authorized person on behalf of the client/patient unless prohibited by law.
- (b) Psychologists disclose confidential information without the consent of the individual only as mandated by law, or where permitted by law for a valid purpose such as to (1) provide needed professional services; (2) obtain appropriate professional consultations; (3) protect the client/patient, psychologist, or others from harm; or (4) obtain payment for services from a client/patient, in which instance disclosure is limited to the minimum that is necessary to achieve the purpose. (See also Standard 6.04e, Fees and Financial Arrangements.)

4.06 Consultations

When consulting with colleagues, (1) psychologists do not disclose confidential information that reasonably could lead to the identification of a client/patient, research participant, or other person or organization with whom they have a confidential relationship unless they have obtained the prior consent of the person or organization or the disclosure cannot be avoided, and (2) they disclose information only to the extent necessary to achieve the purposes of the consultation. (See also Standard 4.01, Maintaining Confidentiality.)

4.07 Use of Confidential Information for Didactic or Other Purposes

Psychologists do not disclose in their writings, lectures, or other public media, confidential, personally identifiable information concerning their clients/patients, students, research participants, organizational clients, or other recipients of their services that they obtained during the course of their work, unless (1) they take reasonable steps to disguise the person or organization, (2) the person or organization has consented in writing, or (3) there is legal authorization for doing so.

5. ADVERTISING AND OTHER PUBLIC STATEMENTS

5.01 Avoidance of False or Deceptive Statements

(a) Public statements include but are not limited to paid or unpaid advertising, product endorsements, grant applications, licensing applications, other credentialing applications, brochures, printed matter, directory listings, personal resumes or curricula vitae, or comments for use in media such as print or electronic transmission, statements in legal proceedings, lectures and public oral presentations, and published materials. Psychologists do not knowingly make public statements that are false, deceptive, or fraudulent concerning their research, practice, or other work activities or those of persons or organizations with which they are affiliated.

- (b) Psychologists do not make false, deceptive, or fraudulent statements concerning (1) their training, experience, or competence; (2) their academic degrees; (3) their credentials; (4) their institutional or association affiliations; (5) their services; (6) the scientific or clinical basis for, or results or degree of success of, their services; (7) their fees; or (8) their publications or research findings.
- (c) Psychologists claim degrees as credentials for their health services only if those degrees (1) were earned from a regionally accredited educational institution or (2) were the basis for psychology licensure by the state in which they practice.

5.02 Statements by Others

- (a) Psychologists who engage others to create or place public statements that promote their professional practice, products, or activities retain professional responsibility for such statements.
- (b) Psychologists do not compensate employees of press, radio, television, or other communication media in return for publicity in a news item. (See also Standard 1.01, Misuse of Psychologists' Work.)
- (c) A paid advertisement relating to psychologists' activities must be identified or clearly recognizable as such.
- 5.03 Descriptions of Workshops and Non-Degree-Granting Educational Programs
 To the degree to which they exercise control, psychologists responsible for announcements, catalogs, brochures, or advertisements describing workshops, seminars, or other non-degree-granting educational programs ensure that they accurately describe the audience for which the program is intended, the educational objectives, the presenters, and the fees involved.

5.04 Media Presentations

When psychologists provide public advice or comment via print, internet, or other electronic transmission, they take precautions to ensure that statements (1) are based on their professional knowledge, training, or experience in accord with appropriate psychological literature and practice; (2) are otherwise consistent with this Ethics Code; and (3) do not indicate that a professional relationship has been established with the recipient. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)

5.05 Testimonials

Psychologists do not solicit testimonials from current therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence.

5.06 In-Person Solicitation

Psychologists do not engage, directly or through agents, in uninvited in-person solicitation of business from actual or potential therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence. However, this prohibition does not preclude (1) attempting to implement appropriate collateral contacts for the purpose of benefiting an already engaged therapy client/patient or (2) providing disaster or community outreach services.

6. RECORD KEEPING AND FEES

- 6.01 Documentation of Professional and Scientific Work and Maintenance of Records Psychologists create, and to the extent the records are under their control, maintain, disseminate, store, retain, and dispose of records and data relating to their professional and scientific work in order to (1) facilitate provision of services later by them or by other professionals, (2) allow for replication of research design and analyses, (3) meet institutional requirements, (4) ensure accuracy of billing and payments, and (5) ensure compliance with law. (See also Standard 4.01, Maintaining Confidentiality.)
 - 6.02 Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work
- (a) Psychologists maintain confidentiality in creating, storing, accessing, transferring, and disposing of records under their control, whether these are written, automated, or in any other medium. (See also Standards 4.01, Maintaining Confidentiality, and 6.01, Documentation of Professional and Scientific Work and Maintenance of Records.)
- (b) If confidential information concerning recipients of psychological services is entered into databases or systems of records available to persons whose access has not been consented to by the recipient, psychologists use coding or other techniques to avoid the inclusion of personal identifiers.
- (c) Psychologists make plans in advance to facilitate the appropriate transfer and to protect the confidentiality of records and data in the event of psychologists' withdrawal from positions or practice. (See also Standards 3.12, Interruption of Psychological Services, and 10.09, Interruption of Therapy.)

6.03 Withholding Records for Nonpayment

Psychologists may not withhold records under their control that are requested and needed for a client's/patient's emergency treatment solely because payment has not been received.

6.04 Fees and Financial Arrangements

- (a) As early as is feasible in a professional or scientific relationship, psychologists and recipients of psychological services reach an agreement specifying compensation and billing arrangements.
- (b) Psychologists' fee practices are consistent with law.
- (c) Psychologists do not misrepresent their fees.
- (d) If limitations to services can be anticipated because of limitations in financing, this is discussed with the recipient of services as early as is feasible. (See also Standards 10.09, Interruption of Therapy, and 10.10, Terminating Therapy.)
- (e) If the recipient of services does not pay for services as agreed, and if psychologists intend to use collection agencies or legal measures to collect the fees, psychologists first inform the person that such measures will be taken and provide that person an opportunity to make prompt payment. (See also Standards 4.05, Disclosures; 6.03, Withholding Records for Nonpayment; and 10.01, Informed Consent to Therapy.)

6.05 Barter With Clients/Patients

Barter is the acceptance of goods, services, or other nonmonetary remuneration from clients/patients in return for psychological services. Psychologists may barter only if (1) it is not clinically contraindicated, and (2) the resulting arrangement is not exploitative. (See also Standards 3.05, Multiple Relationships, and 6.04, Fees and Financial Arrangements.)

6.06 Accuracy in Reports to Payors and Funding Sources

In their reports to payors for services or sources of research funding, psychologists take reasonable steps to ensure the accurate reporting of the nature of the service provided or research conducted, the fees, charges, or payments, and where applicable, the identity of the provider, the findings, and the diagnosis. (See also Standards 4.01, Maintaining Confidentiality; 4.04, Minimizing Intrusions on Privacy; and 4.05, Disclosures.)

6.07 Referrals and Fees

When psychologists pay, receive payment from, or divide fees with another professional, other than in an employer-employee relationship, the payment to each is based on the services provided (clinical, consultative, administrative, or other) and is not based on the referral itself. (See also Standard 3.09, Cooperation With Other Professionals.)

7. EDUCATION AND TRAINING

7.01 Design of Education and Training Programs

Psychologists responsible for education and training programs take reasonable steps to ensure that the programs are designed to provide the appropriate knowledge and proper experiences, and to meet the requirements for licensure, certification, or other goals for which claims are made by the program. (See also Standard 5.03, Descriptions of Workshops and Non-Degree-Granting Educational Programs.)

7.02 Descriptions of Education and Training Programs

Psychologists responsible for education and training programs take reasonable steps to ensure that there is a current and accurate description of the program content (including participation in required course- or program-related counseling, psychotherapy, experiential groups, consulting projects, or community service), training goals and objectives, stipends and benefits, and requirements that must be met for satisfactory completion of the program. This information must be made readily available to all interested parties.

7.03 Accuracy in Teaching

- (a) Psychologists take reasonable steps to ensure that course syllabi are accurate regarding the subject matter to be covered, bases for evaluating progress, and the nature of course experiences. This standard does not preclude an instructor from modifying course content or requirements when the instructor considers it pedagogically necessary or desirable, so long as students are made aware of these modifications in a manner that enables them to fulfill course requirements. (See also Standard 5.01, Avoidance of False or Deceptive Statements.)
- (b) When engaged in teaching or training, psychologists present psychological information accurately. (See also Standard 2.03, Maintaining Competence.)

7.04 Student Disclosure of Personal Information

Psychologists do not require students or supervisees to disclose personal information in course- or program-related activities, either orally or in writing, regarding sexual history, history of abuse and neglect, psychological treatment, and relationships with parents, peers, and spouses or significant others except if (1) the program or training facility has clearly identified this requirement in its admissions and program materials or (2) the information is necessary to evaluate or obtain assistance for students whose personal problems could reasonably be judged to be preventing them from performing their training- or professionally related activities in a competent manner or posing a threat to the students or others.

7.05 Mandatory Individual or Group Therapy

- (a) When individual or group therapy is a program or course requirement, psychologists responsible for that program allow students in undergraduate and graduate programs the option of selecting such therapy from practitioners unaffiliated with the program. (See also Standard 7.02, Descriptions of Education and Training Programs.)
- (b) Faculty who are or are likely to be responsible for evaluating students' academic performance do not themselves provide that therapy. (See also Standard 3.05, Multiple Relationships.)

7.06 Assessing Student and Supervisee Performance

- (a) In academic and supervisory relationships, psychologists establish a timely and specific process for providing feedback to students and supervisees. Information regarding the process is provided to the student at the beginning of supervision.
- (b) Psychologists evaluate students and supervisees on the basis of their actual performance on relevant and established program requirements.

7.07 Sexual Relationships With Students and Supervisees

Psychologists do not engage in sexual relationships with students or supervisees who are in their department, agency, or training center or over whom psychologists have or are likely to have evaluative authority. (See also Standard 3.05, Multiple Relationships.)

8. RESEARCH AND PUBLICATION

8.01 Institutional Approval

When institutional approval is required, psychologists provide accurate information about their research proposals and obtain approval prior to conducting the research. They conduct the research in accordance with the approved research protocol.

8.02 Informed Consent to Research

(a) When obtaining informed consent as required in Standard 3.10, Informed Consent, psychologists inform participants about (1) the purpose of the research, expected duration, and procedures; (2) their right to decline to participate and to withdraw from the research once participation has begun; (3) the foreseeable consequences of declining or withdrawing; (4) reasonably foreseeable factors that may be expected to influence their willingness to participate such as potential risks, discomfort, or adverse effects; (5) any prospective research benefits; (6) limits of confidentiality; (7) incentives for participation; and (8) whom to

contact for questions about the research and research participants' rights. They provide opportunity for the prospective participants to ask questions and receive answers. (See also Standards 8.03, Informed Consent for Recording Voices and Images in Research; 8.05, Dispensing With Informed Consent for Research; and 8.07, Deception in Research.)

(b) Psychologists conducting intervention research involving the use of experimental treatments clarify to participants at the outset of the research (1) the experimental nature of the treatment; (2) the services that will or will not be available to the control group(s) if appropriate; (3) the means by which assignment to treatment and control groups will be made; (4) available treatment alternatives if an individual does not wish to participate in the research or wishes to withdraw once a study has begun; and (5) compensation for or monetary costs of participating including, if appropriate, whether reimbursement from the participant or a third-party payor will be sought. (See also Standard 8.02a, Informed Consent to Research.)

8.03 Informed Consent for Recording Voices and Images in Research

Psychologists obtain informed consent from research participants prior to recording their voices or images for data collection unless (1) the research consists solely of naturalistic observations in public places, and it is not anticipated that the recording will be used in a manner that could cause personal identification or harm, or (2) the research design includes deception, and consent for the use of the recording is obtained during debriefing. (See also Standard 8.07, Deception in Research.)

- 8.04 Client/Patient, Student, and Subordinate Research Participants
- (a) When psychologists conduct research with clients/patients, students, or subordinates as participants, psychologists take steps to protect the prospective participants from adverse consequences of declining or withdrawing from participation.
- (b) When research participation is a course requirement or an opportunity for extra credit, the prospective participant is given the choice of equitable alternative activities.

8.05 Dispensing With Informed Consent for Research

Psychologists may dispense with informed consent only (1) where research would not reasonably be assumed to create distress or harm and involves (a) the study of normal educational practices, curricula, or classroom management methods conducted in educational settings; (b) only anonymous questionnaires, naturalistic observations, or archival research for which disclosure of responses would not place participants at risk of criminal or civil liability or damage their financial standing, employability, or reputation, and confidentiality is protected; or (c) the study of factors related to job or organization effectiveness conducted in organizational settings for which there is no risk to participants' employability, and confidentiality is protected or (2) where otherwise permitted by law or federal or institutional regulations.

8.06 Offering Inducements for Research Participation

- (a) Psychologists make reasonable efforts to avoid offering excessive or inappropriate financial or other inducements for research participation when such inducements are likely to coerce participation.
- (b) When offering professional services as an inducement for research participation, psychologists clarify the nature of the services, as well as the risks, obligations, and limitations. (See also Standard 6.05, Barter With Clients/Patients.)

8.07 Deception in Research

- (a) Psychologists do not conduct a study involving deception unless they have determined that the use of deceptive techniques is justified by the study's significant prospective scientific, educational, or applied value and that effective nondeceptive alternative procedures are not feasible.
- (b) Psychologists do not deceive prospective participants about research that is reasonably expected to cause physical pain or severe emotional distress.
- (c) Psychologists explain any deception that is an integral feature of the design and conduct of an experiment to participants as early as is feasible, preferably at the conclusion of their participation, but no later than at the conclusion of the data collection, and permit participants to withdraw their data. (See also Standard 8.08, Debriefing.)

8.08 Debriefing

- (a) Psychologists provide a prompt opportunity for participants to obtain appropriate information about the nature, results, and conclusions of the research, and they take reasonable steps to correct any misconceptions that participants may have of which the psychologists are aware.
- (b) If scientific or humane values justify delaying or withholding this information, psychologists take reasonable measures to reduce the risk of harm.
- (c) When psychologists become aware that research procedures have harmed a participant, they take reasonable steps to minimize the harm.

8.09 Humane Care and Use of Animals in Research

- (a) Psychologists acquire, care for, use, and dispose of animals in compliance with current federal, state, and local laws and regulations, and with professional standards.
- (b) Psychologists trained in research methods and experienced in the care of laboratory animals supervise all procedures involving animals and are responsible for ensuring appropriate consideration of their comfort, health, and humane treatment.
- (c) Psychologists ensure that all individuals under their supervision who are using animals have received instruction in research methods and in the care, maintenance, and handling of the species being used, to the extent appropriate to their role. (See also Standard 2.05, Delegation of Work to Others.)
- (d) Psychologists make reasonable efforts to minimize the discomfort, infection, illness, and pain of animal subjects.
- (e) Psychologists use a procedure subjecting animals to pain, stress, or privation only when an alternative procedure is unavailable and the goal is justified by its prospective scientific, educational, or applied value.

- (f) Psychologists perform surgical procedures under appropriate anesthesia and follow techniques to avoid infection and minimize pain during and after surgery.
- (g) When it is appropriate that an animal's life be terminated, psychologists proceed rapidly, with an effort to minimize pain and in accordance with accepted procedures.

8.10 Reporting Research Results

- (a) Psychologists do not fabricate data. (See also Standard 5.01a, Avoidance of False or Deceptive Statements.)
- (b) If psychologists discover significant errors in their published data, they take reasonable steps to correct such errors in a correction, retraction, erratum, or other appropriate publication means.

8.11 Plagiarism

Psychologists do not present portions of another's work or data as their own, even if the other work or data source is cited occasionally.

8.12 Publication Credit

- (a) Psychologists take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have substantially contributed. (See also Standard 8.12b, Publication Credit.)
- (b) Principal authorship and other publication credits accurately reflect the relative scientific or professional contributions of the individuals involved, regardless of their relative status. Mere possession of an institutional position, such as department chair, does not justify authorship credit. Minor contributions to the research or to the writing for publications are acknowledged appropriately, such as in footnotes or in an introductory statement.
- (c) Except under exceptional circumstances, a student is listed as principal author on any multiple-authored article that is substantially based on the student's doctoral dissertation. Faculty advisors discuss publication credit with students as early as feasible and throughout the research and publication process as appropriate. (See also Standard 8.12b, Publication Credit.)

8.13 Duplicate Publication of Data

Psychologists do not publish, as original data, data that have been previously published. This does not preclude republishing data when they are accompanied by proper acknowledgment.

8.14 Sharing Research Data for Verification

(a) After research results are published, psychologists do not withhold the data on which their conclusions are based from other competent professionals who seek to verify the substantive claims through reanalysis and who intend to use such data only for that purpose, provided that the confidentiality of the participants can be protected and unless legal rights concerning proprietary data preclude their release. This does not preclude psychologists from requiring that such individuals or groups be responsible for costs associated with the provision of such information.

(b) Psychologists who request data from other psychologists to verify the substantive claims through reanalysis may use shared data only for the declared purpose. Requesting psychologists obtain prior written agreement for all other uses of the data.

8.15 Reviewers

Psychologists who review material submitted for presentation, publication, grant, or research proposal review respect the confidentiality of and the proprietary rights in such information of those who submitted it.

9. ASSESSMENT

9.01 Bases for Assessments

- (a) Psychologists base the opinions contained in their recommendations, reports, and diagnostic or evaluative statements, including forensic testimony, on information and techniques sufficient to substantiate their findings. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)
- (b) Except as noted in 9.01c, psychologists provide opinions of the psychological characteristics of individuals only after they have conducted an examination of the individuals adequate to support their statements or conclusions. When, despite reasonable efforts, such an examination is not practical, psychologists document the efforts they made and the result of those efforts, clarify the probable impact of their limited information on the reliability and validity of their opinions, and appropriately limit the nature and extent of their conclusions or recommendations. (See also Standards 2.01, Boundaries of Competence, and 9.06, Interpreting Assessment Results.)
- (c) When psychologists conduct a record review or provide consultation or supervision and an individual examination is not warranted or necessary for the opinion, psychologists explain this and the sources of information on which they based their conclusions and recommendations.

9.02 Use of Assessments

- (a) Psychologists administer, adapt, score, interpret, or use assessment techniques, interviews, tests, or instruments in a manner and for purposes that are appropriate in light of the research on or evidence of the usefulness and proper application of the techniques.
- (b) Psychologists use assessment instruments whose validity and reliability have been established for use with members of the population tested. When such validity or reliability has not been established, psychologists describe the strengths and limitations of test results and interpretation.
- (c) Psychologists use assessment methods that are appropriate to an individual's language preference and competence, unless the use of an alternative language is relevant to the assessment issues.

9.03 Informed Consent in Assessments

(a) Psychologists obtain informed consent for assessments, evaluations, or diagnostic services, as described in Standard 3.10, Informed Consent, except when (1) testing is mandated by law or governmental regulations; (2) informed consent is implied because testing is conducted as a routine educational, institutional, or organizational activity (e.g., when participants voluntarily agree to assessment when applying for a job); or (3) one

purpose of the testing is to evaluate decisional capacity. Informed consent includes an explanation of the nature and purpose of the assessment, fees, involvement of third parties, and limits of confidentiality and sufficient opportunity for the client/patient to ask questions and receive answers.

- (b) Psychologists inform persons with questionable capacity to consent or for whom testing is mandated by law or governmental regulations about the nature and purpose of the proposed assessment services, using language that is reasonably understandable to the person being assessed.
- (c) Psychologists using the services of an interpreter obtain informed consent from the client/patient to use that interpreter, ensure that confidentiality of test results and test security are maintained, and include in their recommendations, reports, and diagnostic or evaluative statements, including forensic testimony, discussion of any limitations on the data obtained. (See also Standards 2.05, Delegation of Work to Others; 4.01, Maintaining Confidentiality; 9.01, Bases for Assessments; 9.06, Interpreting Assessment Results; and 9.07, Assessment by Unqualified Persons.)

9.04 Release of Test Data

- (a) The term *test data* refers to raw and scaled scores, client/patient responses to test questions or stimuli, and psychologists' notes and recordings concerning client/patient statements and behavior during an examination. Those portions of test materials that include client/patient responses are included in the definition of *test data*. Pursuant to a client/patient release, psychologists provide test data to the client/patient or other persons identified in the release. Psychologists may refrain from releasing test data to protect a client/patient or others from substantial harm or misuse or misrepresentation of the data or the test, recognizing that in many instances release of confidential information under these circumstances is regulated by law. (See also Standard 9.11, Maintaining Test Security.)
- (b) In the absence of a client/patient release, psychologists provide test data only as required by law or court order.

9.05 Test Construction

Psychologists who develop tests and other assessment techniques use appropriate psychometric procedures and current scientific or professional knowledge for test design, standardization, validation, reduction or elimination of bias, and recommendations for use.

9.06 Interpreting Assessment Results

When interpreting assessment results, including automated interpretations, psychologists take into account the purpose of the assessment as well as the various test factors, test-taking abilities, and other characteristics of the person being assessed, such as situational, personal, linguistic, and cultural differences, that might affect psychologists' judgments or reduce the accuracy of their interpretations. They indicate any significant limitations of their interpretations. (See also Standards 2.01b and c, Boundaries of Competence, and 3.01, Unfair Discrimination.)

9.07 Assessment by Unqualified Persons

Psychologists do not promote the use of psychological assessment techniques by unqualified persons, except when such use is conducted for training purposes with appropriate supervision. (See also Standard 2.05, Delegation of Work to Others.)

9.08 Obsolete Tests and Outdated Test Results

- (a) Psychologists do not base their assessment or intervention decisions or recommendations on data or test results that are outdated for the current purpose.
- (b) Psychologists do not base such decisions or recommendations on tests and measures that are obsolete and not useful for the current purpose.

9.09 Test Scoring and Interpretation Services

- (a) Psychologists who offer assessment or scoring services to other professionals accurately describe the purpose, norms, validity, reliability, and applications of the procedures and any special qualifications applicable to their use.
- (b) Psychologists select scoring and interpretation services (including automated services) on the basis of evidence of the validity of the program and procedures as well as on other appropriate considerations. (See also Standard 2.01b and c, Boundaries of Competence.)
- (c) Psychologists retain responsibility for the appropriate application, interpretation, and use of assessment instruments, whether they score and interpret such tests themselves or use automated or other services.

9.10 Explaining Assessment Results

Regardless of whether the scoring and interpretation are done by psychologists, by employees or assistants, or by automated or other outside services, psychologists take reasonable steps to ensure that explanations of results are given to the individual or designated representative unless the nature of the relationship precludes provision of an explanation of results (such as in some organizational consulting, preemployment or security screenings, and forensic evaluations), and this fact has been clearly explained to the person being assessed in advance.

9.11. Maintaining Test Security

The term *test materials* refers to manuals, instruments, protocols, and test questions or stimuli and does not include *test data* as defined in Standard 9.04, Release of Test Data. Psychologists make reasonable efforts to maintain the integrity and security of test materials and other assessment techniques consistent with law and contractual obligations, and in a manner that permits adherence to this Ethics Code.

10. THERAPY

10.01 Informed Consent to Therapy

(a) When obtaining informed consent to therapy as required in Standard 3.10, Informed Consent, psychologists inform clients/patients as early as is feasible in the therapeutic relationship about the nature and anticipated course of therapy, fees, involvement of third parties, and limits of confidentiality and provide sufficient opportunity for the client/patient to ask questions and receive answers. (See also Standards 4.02, Discussing the Limits of Confidentiality, and 6.04, Fees and Financial Arrangements.)

- (b) When obtaining informed consent for treatment for which generally recognized techniques and procedures have not been established, psychologists inform their clients/patients of the developing nature of the treatment, the potential risks involved, alternative treatments that may be available, and the voluntary nature of their participation. (See also Standards 2.01e, Boundaries of Competence, and 3.10, Informed Consent.)
- (c) When the therapist is a trainee and the legal responsibility for the treatment provided resides with the supervisor, the client/patient, as part of the informed consent procedure, is informed that the therapist is in training and is being supervised and is given the name of the supervisor.

10.02 Therapy Involving Couples or Families

- (a) When psychologists agree to provide services to several persons who have a relationship (such as spouses, significant others, or parents and children), they take reasonable steps to clarify at the outset (1) which of the individuals are clients/patients and (2) the relationship the psychologist will have with each person. This clarification includes the psychologist's role and the probable uses of the services provided or the information obtained. (See also Standard 4.02, Discussing the Limits of Confidentiality.)
- (b) If it becomes apparent that psychologists may be called on to perform potentially conflicting roles (such as family therapist and then witness for one party in divorce proceedings), psychologists take reasonable steps to clarify and modify, or withdraw from, roles appropriately. (See also Standard 3.05c, Multiple Relationships.)

10.03 Group Therapy

When psychologists provide services to several persons in a group setting, they describe at the outset the roles and responsibilities of all parties and the limits of confidentiality.

10.04 Providing Therapy to Those Served by Others

In deciding whether to offer or provide services to those already receiving mental health services elsewhere, psychologists carefully consider the treatment issues and the potential client's/patient's welfare. Psychologists discuss these issues with the client/patient or another legally authorized person on behalf of the client/patient in order to minimize the risk of confusion and conflict, consult with the other service providers when appropriate, and proceed with caution and sensitivity to the therapeutic issues.

10.05 Sexual Intimacies With Current Therapy Clients/Patients
Psychologists do not engage in sexual intimacies with current therapy clients/patients.

10.06 Sexual Intimacies With Relatives or Significant Others of Current Therapy Clients/Patients

Psychologists do not engage in sexual intimacies with individuals they know to be close relatives, guardians, or significant others of current clients/patients. Psychologists do not terminate therapy to circumvent this standard.

10.07 Therapy With Former Sexual Partners

Psychologists do not accept as therapy clients/patients persons with whom they have engaged in sexual intimacies.

10.08 Sexual Intimacies With Former Therapy Clients/Patients

- (a) Psychologists do not engage in sexual intimacies with former clients/patients for at least two years after cessation or termination of therapy.
- (b) Psychologists do not engage in sexual intimacies with former clients/patients even after a two-year interval except in the most unusual circumstances. Psychologists who engage in such activity after the two years following cessation or termination of therapy and of having no sexual contact with the former client/patient bear the burden of demonstrating that there has been no exploitation, in light of all relevant factors, including (1) the amount of time that has passed since therapy terminated; (2) the nature, duration, and intensity of the therapy; (3) the circumstances of termination; (4) the client's/patient's personal history; (5) the client's/patient's current mental status; (6) the likelihood of adverse impact on the client/patient; and (7) any statements or actions made by the therapist during the course of therapy suggesting or inviting the possibility of a posttermination sexual or romantic relationship with the client/patient. (See also Standard 3.05, Multiple Relationships.)

10.09 Interruption of Therapy

When entering into employment or contractual relationships, psychologists make reasonable efforts to provide for orderly and appropriate resolution of responsibility for client/patient care in the event that the employment or contractual relationship ends, with paramount consideration given to the welfare of the client/patient. (See also Standard 3.12, Interruption of Psychological Services.)

10.10 Terminating Therapy

- (a) Psychologists terminate therapy when it becomes reasonably clear that the client/patient no longer needs the service, is not likely to benefit, or is being harmed by continued service.
- (b) Psychologists may terminate therapy when threatened or otherwise endangered by the client/patient or another person with whom the client/patient has a relationship.
- (c) Except where precluded by the actions of clients/patients or third-party payors, prior to termination psychologists provide pretermination counseling and suggest alternative service providers as appropriate.

History and Effective Date Footnote

This version of the APA Ethics Code was adopted by the American Psychological Association's Council of Representatives during its meeting, August 21, 2002, and is effective beginning June 1, 2003. Inquiries concerning the substance or interpretation of the APA Ethics Code should be addressed to the Director, Office of Ethics, American Psychological Association, 750 First Street, NE, Washington, DC 20002-4242. The Ethics Code and information regarding the Code can be found on the APA web site, http://www.apa.org/ethics. The standards in this Ethics Code will be used to adjudicate complaints brought concerning alleged conduct occurring on or after the effective date. Complaints regarding conduct occurring prior to the effective date will be adjudicated on the basis of the version of the Ethics Code that was in effect at the time the conduct occurred.

The APA has previously published its Ethics Code as follows:

American Psychological Association. (1953). Ethical standards of psychologists. Washington, DC: Author.

American Psychological Association. (1959). Ethical standards of psychologists. American Psychologist, 14, 279-282.

American Psychological Association. (1963). Ethical standards of psychologists. American Psychologist, 18, 56-60.

American Psychological Association. (1968). Ethical standards of psychologists. American Psychologist, 23, 357-361.

American Psychological Association. (1977, March). Ethical standards of psychologists. APA Monitor, 22-23.

American Psychological Association. (1979). Ethical standards of psychologists. Washington, DC: Author.

American Psychological Association. (1981). Ethical principles of psychologists. American Psychologist, 36, 633-638.

American Psychological Association. (1990). Ethical principles of psychologists (Amended June 2, 1989). American Psychologist, 45, 390-395.

American Psychological Association. (1992). Ethical principles of psychologists and code of conduct. American Psychologist, 47, 1597-1611.

Request copies of the APA's Ethical Principles of Psychologists and Code of Conduct from the APA Order Department, 750 First Street, NE, Washington, DC 20002-4242, or phone (202) 336-5510.

Ethics Code 2002.doc 10/8/02

EXTERNSHIP SITES

EXTERNSHIP OPPORTUNITIES

Revised January, 2014

Program: Accotink Academy
Contact Person: Deserie Charles, Ph.D.

Phone: 703-451-8041
Address: 8519 Tuttle Road
Springfield, VA 22152

Web Address: www.accotink.com

Appl. Due Date: ***Not accepting applications 2014-2015

2 externs. School for learning disabled and emotionally disturbed children and adolescents (ages 5 to 21). Four individual psychotherapy cases, co-lead three psychotherapy groups, three comprehensive psychological evaluations, and consultation. Two hours of individual supervision weekly. Send 2 copies of vita and 2 letters of recommendation to Dr. Russell or Dr. Charles by February 22, 2008.

Program: Afro American Counseling and Psychotherapy Institute, Inc. Contact Person: Roosevelt M. Johnson, Ph.D. or Barbara Y. Johnson, M.A., LPC

Phone: (301) 495-0856 or (202) 723-0030

Address: The Montgomery Center

8630 Fenton Street

Suite 224

Silver Spring, MD 20910

Corporate Office-Headquarters

1717 K Street, N.W.

Suite 600

Washington, D.C. 20036

Web Address: http://www.afroamericancounseling.com/
Appl. Due Date: ***Not accepting applications 2014-2015

10 Externs. Minimum of 20 hours per week. Will be working with youth aged 6-13 in various settings (i.e., Faith-based counseling center, private practice, elementary and junior high schools). Eclectic orientation but heavily Cognitive-Behavioral. Individual and group therapy. Must obtain professional liability insurance. If interested, please call Mrs. Barbara Young Johnson in order to express interest. Submit a letter of interest with days of availability and a CV. Will be called for an interview if applicable.

Program: Affiliated Community Counselors, Inc.

Contact Person: Ellery Allen Owens, LCSW-C, Clinical Director

Phone: 301-251-8965

Address: 50 West Montgomery Ave, Suite 110

Rockville, MD 20850

Web Address: http://www.dcresources.org/1054

Appl. Due Date: ***Not accepting applications 2014-2015

Externships for advanced social work and psychology students. Community Mental Health Clinic. Psychodynamic work with adults, children, families, and couples, Therapy and

psychological assessments. Individual and group supervision. Case conferences, seminars, and consultation. Mandatory Friday attendance. 20 hours. To apply submit 2 letters of recommendation, CV and letter of interest to Ellery Allen Owens.

Program: Alexandria Mental Health Center

Outpatient Adult Services/Youth and Family

Contact Person: Deborah Warren, DCSW

Phone: 703-838-6400

Address: 720 N. St. Asaph Street

Alexandria, VA 22314-1960

Web Address: www.alexandriava.gov

Appl. Due Date: ***

2 Externs for Youth and Family Services. 2-3 Externs for Adult Services. 20 hours. Assessments and individual, family, or group psychotherapy. 1.5 hours of individual supervision. Group supervision and seminars. Call to apply.

Program: The American University

Counseling Services

Contact Person: Jeanne Piette, Ph.D., Assistant Director for Training

Phone: 202-885-3500 **Address:** MGC 214

4400 Massachusetts Ave., NW Washington, DC 20016-8027

Web Address: www.american.edu/counseling

Appl. Due Date: February 24, 2014

Applicants must be enrolled in an accredited counseling or clinical psychology program. 16-20 hours. Psychodynamic orientation. University students. 6 therapy clients. 2 supervisors. Case conferences, consultation, seminars, and professional development group. Submit application, Training Director form, official transcript, and 2 letters of recommendation to Dr. Jeanne Piette by Monday, February 24, 2014. For application materials and procedures go to: www.american.edu/counseling- Graduate Training programs. Questions about the externship training program should be directed to Dr. Jeanne Piette, Assistant Director for Training - Contact information: Phone: (202) 885-3500 or E-mail: piette@american.edu

Program: Arlington County Department of Human Services

Child and Family Services Division

Mental Health and Substance Abuse Services

Contact Person: Laura Ragins, Psy.D

Phone: 703-228-1592

Address: 3033 Wilson Blvd., Suite 500B

Arlington, VA 22201

Web Address: www.arlington.va.us

Appl. Due Date: ***

20 hours, some evening hours required. 12 months preferred. Outpatient children, adolescents, and families in need of mental health and substance abuse services. Provide

assessment, individual, group and family therapy, and occasional community services for culturally diverse, largely Spanish-speaking population. At least one hour of individual supervision weekly, mandatory two hour group/staff meeting on Thursday mornings, and participation in educational seminars. Send a vita, three letters of recommendation, and letter of interest.

Program: Arlington County Behavioral Healthcare/Adult Detention Facility

Contact Person: Sam Gaines, Ph.D.

Phone: 703-228-7367

Address: 1425 North Courthouse Road

Arlington, VA 22201

Web Address: www.co.arlington.va.us/Departments/HumanServices/services/bhd Appl. Due Date: ***

1 extern, 16 hours, with additional one-hour didactic opportunity on Thursdays. Begins second week of September until mid-May. Interview-based assessments and ongoing therapy in a 650-bed adult correctional facility. Diverse clientele. Liaison with correctional staff, medical staff, free-standing substance abuse program and 29-bed Mental Health Unit for seriously mentally ill (SMI) inmates. Send vita, letter of interest and 3 letters of recommendation to Dr. Gaines.

Program: Arlington County Juvenile and Domestic Relations

Contact Person: Robin Knoblach, Ph.D.

Phone: 703-228-7334

Address: 1425 North Courthouse Road, Room 5100

Arlington, VA 22201

Appl. Due Date: ***

To apply, submit a CV, sample test report, and 3 letters of recommendation. An interview will also be required.

Program: Arlington County Behavioral Healthcare

Adult and Child Unit

Contact Person: Dr. Carol Sacks **Phone:** 703-228-5150

Address: 1725 N. George Mason Drive

Arlington, VA 22205

Web Address: www.co.arlington.va.us/Departments/HumanServices/services/bhd

Appl. Due Date: ***

2 Externs. 16 hours including 1 evening. Encourage Wednesday and Thursday availability. Begins after Labor Day until mid-May. Adult services. Intake evaluations, psychological assessments, and individual (5-6 clients) therapy. Supervised 2 hours. Need to attend weekly

Treatment Team meetings and in-service trainings. Send vita, letter of interest, and 3 letters of recommendation to Dr. Sacks.

Program: The Catholic University of America

Counseling Center

Contact Person: Dorothy Van Dam, LICSW, Director of Externship Training

Phone: 202-319-5765 **Address:** 126 O'Boyle Hall

The Catholic University of America

Washington, DC 20064

Web Address: http://counseling.cua.edu/graduate/gpsyextern.cfm

Appl. Due Date: February 14, 2014

The externship is a nine-month, 16-hour per week position. The CUA externship provides a \$1,000 stipend for second year students, \$1,500 stipend for graduate students in their third year and beyond students. College students. Up to 8 individual therapy cases, group therapy, provide consultation within the campus community and workshops. Case conferences and staff development. Individual and group supervision. Send CV, 3 letters of recommendation, a self-descriptive cover letter explaining reasons for interest in this setting, summary of completed/planned coursework, previous clinical experience, consulting/outreach experience, and non-classroom learning experience.

Program: Children's National Medical Center

Eating Disorders Clinic

Contact Person: Darlene M. Atkins, Ph.D., Director, Eating Disorders Clinic

Phone: 202-476-2164

Address: 4900 Massachusetts Avenue, NW

Washington, DC 20016

Web Address: www.dcchildrens.com Appl. Due Date: February 1, 2014

16 hours. The department of Adolescent and Young Adult Medicine is designed to meet healthcare needs of adolescents ages 12-21. Focus on eating disorder patients as well as other comorbid problems such as depression, anxiety disorders, family conflicts. Diagnostic evaluations, individual psychotherapy, group psychotherapy, and some parent counseling. No formal psychological testing. Individual and group supervision. Preference is given to more advanced doctoral students. Send CV/resume, letter of interest, and at least 2 letters of recommendation, and a stamped, self-addressed envelope to Darlene M. Atkins or datkins@cnmc.org

Program: Children's National Medical Center

Center for Autism Spectrum Disorders (CASD) - Clinical Psychology

Contact Person: Christopher Vaughan PsyD & Karin Walsh Psy D

Phone: 301-765-5430

Address: 15245 Shady Grove Rd, Suite 350

Rockville, MD 20850

Web Address: www.dcchildrens.com
Appl. Due Date: February 15, 2014

16 hour/week. Children and adolescents with autism. Outpatient psychotherapy, group psychotherapy, weekly team evaluations, case conferences, didactic seminars, autism diagnostics. Individual supervision. *Split time between Rockville and Northwest DC (confirm with supervisor). Send CV, letter of interest (include program or faculty preferences if applicable in your letter), 2 letters of recommendation, graduate transcripts (may be unofficial). Email for application materials: CVaughn@ChildrensNational.org

Program: Children's National Medical Center

Pediatric Neuropsychology

Contact Person: Christopher Vaughan Psy D & Karin Walsh PsyD

Phone: 301-765-5430

Address: 15245 Shady Grove Rd, Suite 350

Rockville, MD 20850

Web Address: www.dcchildrens.com
Appl. Due Date: February 15, 2014

16 hours. Evaluation of children and adolescents with neurological and developmental disorders. 1 to 2 hours of supervision per week. Send CV, letter of interest, 2 letters of recommendation, graduate transcripts (may be unofficial).

Program: Children's National Medical Center

Outpatient and Inpatient Hematology/ Oncology

Contact Person: Steven J. Hardy, Ph.D.

Phone: 202-884-5000 (main number) **Address:** 111 Michigan Avenue, N.W.

W4-600, Divisions of Hematology and Oncology

Washington, DC 20010

Web Address: www.dcchildrens.com

Appl. Due Date: February 1, 2014

Tuesdays/Thursdays from August or September through May (16 hrs/week). Suited for advanced practicum students. Externs will spend 2 days per week providing psychological services to children & adolescents with cancer or other blood disorders and their families. Clinical activities include inpatient consultation/liaison and outpatient therapy. Emphasis on cognitive/behavioral and family systems approaches, and brief neurocognitive assessment. Formal coursework in child development and clinical experience with child and adolescents is required. Email a letter of interest, CV, and at least 2 letters of recommendation to Steven Hardy, Ph.D. at sjhardy@childrensnational.org or mail-in application materials.

Program: Children's National Medical Center

Fairfax Hyperactivity, Attention, and Learning Problems Clinic

(HALP Clinic)

Contact Person: Lisa A. Efron, Ph. D.

Phone: 571-405-5797

Address: Children's National Medical Center

3023 Hamaker Court Ste. 300

Fairfax, VA 22031

Web Address: www.dcchildrens.com

Appl. Due Date: February 1, 2014

*Extern must be available on Tuesdays and Thursdays from 8:30am-5pm. Children with a variety of school problems, including hyperactivity, ADHD, learning disorders, and disruptive behavior disorders. Externs learn to administer, score, and interpret a standardized battery of tests. Reports are written on a weekly basis. Externs will have the opportunity to observe and conduct diagnostic interviews and feedback sessions. Externs generally carry a caseload of 2-3 therapy clients. Send CV and 2 letters of recommendation to Lisa A. Efron. Email: lefron@cnmc.org

Program: Children's National Medical Center

The Pediatric Sleep Disorders Program

Contact Person: Danny Lewin, Ph.D., Attending and Supervisor

Phone: 202-476-6209

Address: 111 Michigan Avenue, N.W.

Pediatric Sleep Disorders Program Pulmonary Medicine

Washington, DC 20010

Web Address: www.dcchlidrens.com

Appl. Due Date: February 1, 2014

2-3 externs. Approx. 40hrs per month. Preference will be given to more advanced doctoral students. Assessment and treatment of sleep disorders. Work 1 to 2 hours per week on a clinically relevant research project. Send CV/resume, letter of interest, and 2 letters of recommendation to Danny Lewin. Email: dlewin@cnmc.org

Program: Children's National Medical Center

Child Development Program

Contact Person: Tara Brennan, Psv.D., Training Director

Phone: 202-476-3640

Address: 111 Michigan Avenue, N.W.

Washington, DC 20010

Web Address: www.dcchlidrens.com

Appl. Due Date: February 1, 2014

16 hours. Evaluation of infants and young children referred for developmental & behavioral problems. (birth to age 3 or preschool age children). Presenting problems include complications around time of birth, primary motor delay, primary language delay, and social/communication disorders or autism spectrum disorders. Structured interviews of parents, administer standardized tests, formulate a therapeutic plan, and write the assessment report. Send CV with a list of relevant coursework, a letter of interest, and two letters of recommendation to Tara Brennan, Psy.D. Email: tbrennan@cnmc.org

Program: Children's National Medical Center

Child and Adolescent Anxiety Program (CAAP)

Contact Person: Aaron Rakow, Ph.D., Director CAAP

Phone: 202-476-3390

Address: Department of Behavioral Medicine

111 Michigan Avenue, N.W. Washington, DC 20010

Web Address: www.dcchlidrens.com

Appl. Due Date: February 1, 2014

2-3 externs. 16 hours. Minimum of 2 days per week. Diagnostic evaluations, individual treatment, co-lead group treatment sessions. Weekly supervision, didactic training in anxiety disorders. Opportunity to attend weekly psychiatry grand rounds, clinical seminars, and case conferences. Formal coursework in child assessment & intervention, prior practicum experienced in child/adolescent therapy required. Send CV/resume, letter of interest, and 2 letters of recommendation to Aaron Rakow, Ph.D., Director – Child and Adolescent Anxiety Program. Email: arakow@cnmc.org

Program: Circle Treatment Center, P.C.
Contact Person: Rosalind Goldfarb, Ph.D., C.C.D.C.

Phone: 301-258-2626

Address: 424 N. Frederick Avenue, 8A

Gaithersburg, MD 20877-2433

Web Address: www.circletreatment.com

Appl. Due Date: ***

16 to 20 hours per week for a year. Outpatient alcoholism and chemical dependency treatment. Individual and group supervision. Cognitive-behavioral and eclectic approachbased on Alcoholics Anonymous (AA) framework. Minimum 2nd and 3rd year students. Contact Dr. Goldfarb to apply. Email: contact@circletreatment.com or telephone.

Program: Clifton T. Perkins Hospital Center

Contact Person: Dr. Caitlin Stetson **Phone:** 410-724-3076

Address: 8450 Dorsey Run Road

Jessup, MD 20794

Web Address: www.dhmh.state.md.us/perkins

Appl. Due: Mid-February

2-4 Externs. 16 hours. Forensic neuropsychological assessment and therapy (group and individual). 2 clients per semester. Cognitive-behavioral approach. Five assessments per academic year. Most patients have been found not criminally responsible for a crime due to mental illness. Call to express interest. Submit letter of interest and CV.

Program: College of Notre Dame of Maryland

Counseling & Disability Support Services

Contact Person: Amy S. Provan, Psy. D., Director of Counseling Services

Phone: 410-532-5379

Address: 4701 N. Charles Street

Baltimore, MD 21210

Web Address: www.ndm.edu/resources/campusresources/nd_stRes_counselingcenter.cfm

Appl. Due: Late February

20 hours. Externs receive weekly individual and group supervision, audiotape all sessions, present outreach workshops, consult, and have the opportunity to lead therapy groups. Externs carry a full case load. The program includes a weekly training seminar focused on counseling issues pertinent to the college population. To apply email or mail a CV, cover letter, and 2 letters of recommendation to Amy S. Provan.

Program: Community Connections

Contact Person: Lori L. Beyer, LICSW, Director of Student Programs

Phone: 202-608-4788

Address: 801 Pennsylvania Ave., S.E., Suite 201

Washington, DC 20003

Web Address: www.communityconnectionsdc.org

Appl. Due Date: ***

Extern provides community support services, group and/or psychotherapy to clients. Externs provide office and community-based services. At least 1 hour of weekly supervision, weekly training seminars, and weekly clinical team meeting. Submit resumes or inquiries to Lori L. Beyer. Email: lbeyer@ccd1.org

Program: DC Department of Mental Health

Contact Person: Sidney Binks, Ph.D.

Phone: 202-255-5187

Address: St. Elizabeth's Campus Barton Hall

2700 Martin Luther King Jr., Avenue

Washington, DC 20032

Appl. Due Date: ***

16 hours. 2 externs. Neuropsychological assessment of forensic and non-forensic inpatients and outpatients with supervision by a forensic neuropsychologist and weekly seminars by forensic experts. Biweekly neuropsychological case conference. Send CV, application, and 2 letters of recommendation to Dr. Binks.

Program: D.C. Superior Court
Contact Person: Michael Barnes. Ph.D.

Phone: 202-508-1816

Address: 409 E Street, NW, Room 330

Washington, DC 20001

Web Address: www.dccourts.gov Appl. Due Date: March 1, 2014

16 hours. Juveniles ages 6-18. Minimum of 1 evaluation per week. Conducting youth and family assessments. Dr. Barnes by March 16, 2007. Send CV, cover letter, one recent assessment report (prefer personality and psychoeducational assessments with adolescents), and 2 letters of recommendation to Dr. Barnes.

Program: Fairfax County Juvenile Detention Center

Contact Person: Menetta E. Myers, Ph.D.

Phone: 703-246-2893

Address: Post Disposition Beta Program

10650 Page Avenue Fairfax, VA 22030

Web Address: http://www.fairfaxcounty.gov/courts/jdr/jdc/

Appl. Due Date: ***

1 extern. Court-involved youth. Psychodiagnostic evaluations, individual, group, and family therapy, consultation to court personnel, and case presentations. Weekly individual supervision. Send cover letter with training goals, vita, 2 letters of recommendation, and transcript to Dr. Myers. *Please call about inquiries

Program: Fairfax Juvenile Forensic Evaluation Program

Contact Person: ***

Phone: 703-246-3457

Address: 4080 Chain Bridge Road

Massey Annex Fairfax, VA 22030

Web Address: ***
Appl. Due Date: ***

3 externs. Court-involved youth. Psychodiagnostic evaluations, short-term therapy, consultation to court personnel, and case presentations. Weekly individual supervision. Send cover letter with training goals, CV, 2 letters of recommendation, transcript, and writing sample from a comprehensive battery to Dr. Daleena.

Program: Gallaudet University

Mental Health Center

Contact Person: LaNiña Mompremier, Ph.D., Coordinator of Training

Phone: 202-651-6080

Address: Kellogg Conference Hotel Room 3202

800 Florida Avenue, NE Washington, DC 20002

Web Address: http://mhc.gallaudet.edu/

Appl. Due Date: February 21, 2014

To apply submit a CV or resume, letter of interest, 2 letters of recommendation (with at least one letter from your department), 10-15 minute videotape of a mock session (volunteer "client) conducted in American Sign Language, copy of ASLPI results from Gallaudet University showing a 3 or better rating. For information on training opportunities contact LaNiña Mompremier. Email: lanina.mompremier@gallaudet.edu

Program: George Mason University Counseling Center
Contact Person: Marlena Wu, Psy.D., Assistant Director of Training

Phone: 703-993-2380

Address: 4400 University Drive, MS 2A2

SUB I, Room 364 Fairfax, VA 22030

Web Address: http://www.gmu.edu/departments/csdc/

Appl. Due Date: February 5, 2014

16 hours per week. Each extern is expected to carry seven direct client hours and be on site for two full days per week. Consultation and outreach, group co-facilitation, and workshop presentations are possible. Didactic seminars, case presentations, individual and group supervision. At least two hours of administrative time. To apply submit a cover letter, CV, unofficial transcript and two letters of recommendation to Marlena Wu, Psy.D.

Program: Georgetown University

Counseling Center

Contact Person: Susan Gordon, Ph.D.

Phone: 202-687-6985

Address: Counseling and Psychiatric Service

One Darnell Hall, Box 571105

37th & "O" Streets, N.W.

Washington, DC 20057-1105

Web Address: http://caps.georgetown.edu/

Appl. Due Date: February 15, 2014

3 externship positions available. Psychotherapy with university students. Externs receive individual supervision, and participate in the CAPS case Seminars on psychodynamic therapy, eating disorders, contemporary psychoanalytic theory, group therapy, and ethnocultural factors in psychotherapy. Minimum of one and one-half days per week at CAPS. Externs must be entering their third year of graduate study and must have previous experience. Send a CV and three letters of reference (at least one from current clinical supervisor & one from the director of training of the applicant's graduate program). Send application to Susan Gordon.

Program: Hospital for Sick Children

Contact Person: Carolyn Wurm, Ph.D.

Phone: 202-635-6178

Address: 1731 Bunker Hill Road, N.E.

Washington, DC 20017

Web Address: http://www.sickkids.on.ca/

Appl. Due Date: ***Not accepting applications 2014-2015

16 hours. Infancy to 21. Assessment, consultation, and therapeutic interventions to patients and families. Send letter of interest, vita, 2 letters of recommendation, and a sample report to Dr. Wurm

Program: **Howard University Counseling Services** Marcus Hummings, Psv.D., Coordinator **Contact Person:** (202) 806 – 6870 or (202) 806 – 6423 Phone:

6th and Bryant Street, N.W. Address:

Washington, DC 20059

Web Address: http://www.howard.edu/services/counseling/

Late February-Early March Appl. Due Date:

14 to 22 hours. Intakes, diagnostic assessments, case conferences and psychoanalytic training seminars. Group and individual psychotherapy. Outreach programs on and off campus. Supervised 1-1.5 hours individually. Send application, vita, transcript, and 3 letters of recommendation to Marcus Hummings. Email: mhummings@howard.edu

INOVA Kellar Center Program:

Attention and Learning Disorders Service

Contact Person: Mark Haves Phone: 703-218-8504

Address: 11204 Waples Mill Road

Fairfax, VA 22030

Web Address: http://www.inova.org/inovapublic.srt/ifhc/kellar.html

Appl. Due Date:

Attention and Learning Disorders Service. 16 hours. A minimum of 8 hours per week devoted to assessment is required. A maximum of 8 hours devoted to therapeutic services. Specific clinical experiences are mutually agreed upon by the trainee and the Inova Kellar Center program coordinators. Group therapy sessions generally take place between the hours of 4:00 - 5:30 p.m. weekdays except Friday while groups for parent are generally offered on Tuesday evenings between the hours of 6:00 - 8:00 p.m. Individual and family therapy sessions as well as intake appointments are scheduled on a more flexible basis during weekdays. 1 hour of individual and 1 hour of group supervision is provided by a licensed psychologist. Send letter of interest, resume, and 2 letters of recommendation to Mark Hayes to apply in 2008.

Program: **Jewish Social Service Agency**

Contact Person: Susan Loughman Phone: 301-816-2617

Address: 6123 Montrose Road

Rockville, MD 20852

Web Address: http://www.jssa.org/

Appl. Due Date:

For inquiries call Susan Loughman or email: traininginstitute@jssa.org

Program: Kennedy Krieger Family Center

Contact Person: Elizabeth Thompson, Ph.D.

Phone: 443-923-5918

Address: 2901 E. Biddle Street

Baltimore, MD 21213

Web Address: http://www.kennedykrieger.org/kki_cp.jsp?pid=1400

Appl. Due Date: ***

2 Externs. 16 hours per week. Stipend provided for 9 months. Outpatient services for children and families in or at risk for out of home placement. Responsibilities include psychological assessments, play therapy, family and group therapy, multidisciplinary case discussions, and home and school visits. Optional seminars in neuropsychological assessment. Supervised 1 hour per week on assessments and 1-1.5 hours per week on psychotherapy. Send CV and letter of interest to Dr. Thompson.

Program: Kingsbury Center
Contact Person: Dr. Cheryl Smith
Phone: 202-722-5555

Address: 2138 Bancroft Place, N.W.

Washington, DC 20009

Web Address: http://www.kingsbury.org/

Appl. Due Date: ***

Program: Loudoun County Mental Health Center

Contact Person: Stacey Waring, Ph.D.

Phone: 703-771-5100

Address: 102 Heritage Way, Suite 302

Leesburg, VA 20176

Web Address: http://www.loudoun.gov/mhmr/mh.htm

Appl. Due Date: ***

2 -3 externs. At least 16 hours including Tuesdays. Outpatient services to children, adolescents, adults, and families. Evaluation and treatment in Outpatient, Substance Abuse, Emergency and Community Support, adult day treatment, and forensics. Variety of theoretical perspectives including Psychodynamic and Object Relations, Cognitive-Behavioral, and Family Systems orientations. Send a cover letter, vita and two letters of reference to Dr. Waring.

Program: Maryland House of Corrections

Contact Person: Dr. Henry Musk 410-799-8188 Address: P.O. Box 534

Jessup, MD 20794-0537

Web Address: http://www.dpscs.state.md.us/

Appl. Due Date:

Program: **Marymount University Counseling Center Contact Person:** Megan Telfair, LPC, Training Coordinator

Phone: 703-526-6861

Address: 2807 North Glebe Road

Arlington, VA 22207-4299

Appl. Due Date: February 7, 2014

9 months (late August through mid-May) with 16-21 hours per week (depending upon graduate program requirements). Half of time spent in providing direct clinical services. Observe and cofacilitate counseling and psycho-educational groups; consult with members of the campus community; and design and implement psycho-educational programs and workshops. In addition to their clinical experiences, trainees will receive the following educational and supervision experiences: individual supervision (1 hour per week), group supervision (1 hour per week), case conference (periodically through the training year), and didactic seminar (90 minutes each week). To apply submit a cover letter, CV, and at least 2 letters of recommendation to Megan Telfair. Email: meg.telfair@marymount.edu

Mount Washington Pediatric Hospital Program:

At Prince George's Hospital Center

Contact Person: Kimberly Derrickson, Ph.D.

301-618-6933 Phone:

Address: 3001 Hospital Drive

Cheverly, MD 20785

Web Address: http://www.mwph.org

Appl. Due Date:

Caseload of 6-8 outpatient children with physical and behavioral disorders and their families. Consult with inpatient unit and children with physical disorders. Complete 4 to 5 psychological batteries on school age children. 1 to 2 hours of supervision per week and weekly pediatric rounds.

Neuropsychology Associates of Fairfax Program:

Contact Person: Cynthia Sullivan, Ph.D.

Phone: 703-876-0966

Address: 3020 Hamaker Court, Suite 103

Fairfax, VA 22031

Web Address:

Appl. Due Date: ***

16 hours per week. Externs will have the opportunity to conduct neuropsychological evaluations with a diverse population. Batteries range from brief (2 hours) to full (5-6 hours). Extern will be trained in all aspects of evaluation, including: clinical interview, test administration, test selection, test interpretation, report write-up, the development of treatment recommendations, consultation with referral sources, and feedback sessions. The patient population is heterogeneous with regard to culture, ethnicity, and diagnosis. Supervision will be tailored to skill level of extern. Minimum of 1 hour per 3-4 hours of client contact. Group supervision is also provided. To apply send letter of interest, 2 letters of recommendation, transcript (unofficial ok.), C.V., and a sample test report to Dr. Sullivan.

Program: Northern Virginia Mental Health Institute
Contact Person: Laurence R. Levine, Psy.D. or Dr. Ron Boggio

Phone: 703-645-3100 or 703-207-7444

Address: 3302 Gallows Road

Falls Church, VA 22042-3398

Web Address http://www.nvmhi.dmhmras.virginia.gov

Appl. Due Date: ***

16 hours (one day is Wed.). Inpatient psychosocial rehabilitation with persistently mentally ill persons. 2 to 3 individual therapy cases, co-lead a group, and some psychological evaluations. 1 to 2 hours of individual supervision, grand rounds, and seminars. Send a letter of interest, a CV, and 1 letter of recommendation to Dr. Levine.

Program: Northern Virginia Training Center

Contact Person: Dr. Mary Von Witzleben,

Phone: 703-323-4021

Address: 9901 Braddock Road

Fairfax, VA 22032

Web Address: http://www.nvtc.dmhmrsas.virginia.gov

Appl. Due Date: ***

16-20 hours. Persons with developmental disabilities and dual diagnoses. Behavioral assessment, psychological testing, individual and group psychotherapy. Contact Dr. Mary Von Witzleben for more information. Email: Mary.VonWitzleben@dbhds.virginia.gov

Program: Northwest Center for Community Mental Health

Contact Person: Ellen Kiel 703-481-4100

Address: 1850 Cameron Glen Drive, Suite 600

Reston, VA 20190

Web Address: http://www.fairfaxcounty.gov/csb

Appl. Due Date: ***

Use the following email address for any additional questions or concerns and include a phone number that you may be reached at. Email: www.csb@fairfaxcounty.gov.

Program: Northwest Family Center ADHD Clinic
Contact Person: Richard Gontang, Ph.D. or Dr. Leola Jenkins

Phone: 202-671-1266 or 202-671-1272

Address: 1536 U Street, NW

Washington, DC 20009-

Web Address: http://www.dmh.dc.gov/

Appl. Due Date: ***

10-16 hours per week on Wednesday evenings and Fridays (includes report writing). Work cooperatively with psychologists, psychology trainees, and psychiatrist who comprise the ADHD clinic team. Work in pairs to complete ADHD evaluations of children ages 6 to 18. Colead parent and child psychoeducational groups. Send a cover letter, CV, and a sample report (preferably with emotional testing) to Dr. Gontang.

Program: Progressive Life Center
Contact Person: Peter Fitts, Program Director

Phone: 202-842-2016

Address: 1933 Montana Avenue,

NE Washington, DC 20002

Web Address: http://www.plcntu.org/behavioral-wash.php

Appl. Due Date: ***

For further details email Peter Fitts. Email: pfitts@plcntu.org or dcps@ntuplc.org

Program: The Psychiatric Institute of Washington
Contact Person: Kendra Ward, Psy.D., Director of Psychology

Phone: 202-244-6216

Address: 4228 Wisconsin Avenue, N.W.

Washington, DC 20016

Web Address: http://www.psychinstitute.com/

Appl. Due Date: February 1, 2014

16 to 20 hours a week from August to June. Psychological assessments with a diverse population of children, adolescents, and adults. Individual supervision and a weekly testing seminar. Group therapy. Treatment planning with a multidisciplinary team for the patients that are tested. ~or~ 16 to 20 hours a week from August to June. Short-term therapy with a diverse inpatient population of children, adolescents and adults. Individual and group supervision. Weekly seminar. Send a letter of interest, CV, and two letters of recommendation, description of testing experience (including the number & name of tests administered, the number of tests scores, & the number of reports written), and a sample testing report. Call or email for more information regarding which track you are interested in and what is required for the application. Email: kward@piw-dc.com

Program: Reginald S. Lourie Center for Infants

and Young Children

Contact Person: Dr. Delease Williams

Phone: 301-984-4444

Address: 12301 Academy Way

Rockville, MD 20852

Web Address: http://www.adventisthealthcare.com/LC/

Appl. Due Date: ***

Program: Rose School

Contact Person: Dr. Anne Naber/Dr. Stein (psychoanalytic track)

Phone: 202/282-0005

Address: 4820 Howard Street, N.W.

Washington, DC 20009

Web Address: http://www.rosecshool.it

Appl. Due Date: ***

Program: Shady Grove Mental Health Services

Contact Person: **

Phone: 301/424-8300

Address: 500 W. Montgomery Avenue

Rockville, MD 20850

Web Address: ***
Appl. Due Date: ***

Program: St. John's Community Services

Clinical and Children's Services

Contact Person: Steven Kane, Ph.D. **Phone:** 202-237-6500

Address: 2201 Wisconsin Ave., NW, Suite 120

Washington, DC 20007

Web Address: www.sjcs.org

Appl. Due Date: ***

2 externs for 16 hours over 10 months. Stipend of \$1,250. Ages 3 to 22. Psychotherapy, psychoeducational support, and psychological assessment. 1 hour of psychotherapy supervision and 1 hour of assessment supervision weekly. Seminars for 1 to 3 hours weekly. Send CV, personal statement explaining interest in program, and 2 letters of recommendation to Dr. Kane.

Program: Towson University

Counseling Center

Contact Person: Dr. Betty Fletcher or Dr. Mollie Jaschik-Herman

Phone: 410/704-2512 **Address:** 8000 York Road

Baltimore, MD

Web Address: http://wwwnew.towson.edu/counseling/externship.htm

Appl. Due Date: ***

College students. Individual and group therapy, outreach and consultation. Supervised 2 hours individually. Send letter of interest, CV, graduate transcript, and 3 letters of reference to Dr. Fletcher.

Program: University of Maryland

Counseling Center, Counseling Service

Contact Person: Dr. Yi-Jiun Lin
Phone: 301-314-7651
Address: Counseling Service

Shoemaker Hall

College Park, MD 20742

Web Address: http://www.counseling.umd.edu

Appl. Due Date: ***

12-14 hours. University students. Individual and group therapy, consultation and outreach to campus community. 2 hours of supervision, weekly case conferences, and monthly seminars. Send vita, 2 letters of recommendation from clinical supervisors and 1 recommendation from advisor or training director, and a statement of interest. Preference is given to applicants who have completed a minimum of 3 clinical practica. Questions about the externship may be directed to Dr. Yi-Jiun Lin. Email: ylin1234@umd.edu

Program: University of Maryland

Counseling Center, Parent Consultation and Child Evaluation

Service

Contact Person: Beth S. Warner, Ph.D.

Phone: 301-314-7673 Address: Counseling Center

College Park, MD 20742

Web Address: http://www.counseling.umd.edu

Appl. Due Date: ***

1 or 2 externs. 16 hours. Children and parents. The externship offers supervised training in psychological assessment, individual and group therapy, parent counseling, and teacher consultation. Training is both clinic- and school-based. Possible school-based training sites are the on-campus preschool and a local high school. Send vita, 2 letters of recommendation, and a cover letter including a statement of interest.

Program: V.A. Medical Center, Washington, DC

Psychology

Contact Person: Dr. Bien

Phone: 202-745-8000 ext. 7251

Address: Psychology Service (116B)

50 Irving Street, NW Washington, DC 20422

Web Address: http://www.va.gov/

Appl. Due Date: ***

12 to 16 hours per week. Neuropsychological evaluations with a diverse population. Multi-disciplinary meetings and neurology rounds. Can start in Summer or Fall and it lasts until May. Possible Summer funding. Send letter of interest, 2 letters of recommendation, unofficial transcript, and sample test report to Dr. Wilken.

Program: Washington Assessment and Therapy Services (WATS)

Contact Person: Ronald Wynne, Ph.D., ABPP

Phone: 202-537-1780; 301-322-4243; 301-588-8881 - 4455 Connecticut Avenue, N.W., Suite 4400

Washington, DC 20008

- West Office Bldg., Landover Mall, Suite 203

Landover, MD 20785

- 8830 Cameron Street, Suite 502

Silver Spring, MD 20910

Web Address: ***
Appl. Due Date: ***

Program: Whitman-Walker Clinic

Mental Health and Addiction Treatment Services

Contact Person: Linda McCollough
Phone: 202-939-1533
Address: 1432 U Street, N.W.

Washington, DC 20009

Appl. Due Date: ***

Program: The Women's Center Contact Person: Cathy Love, LPC/LMFT

Phone: 703-281-2657 ext. 266 or 202-293-4580

Address: 133 Park Street, NE

Vienna, VA 22180

1101 15th Street, NW, Suite 202

Washington, DC

Web Address: www.thewomenscenter.org

Appl. Due Date: ***

16 to 20 hours per week. Reduced fee clients for assessment and psychotherapy. Group modality seminar. Group and individual supervision. Send CV, cover letter, and 3 letters of recommendation (one from a professor and two from supervisors) to Ms. Love.

Program: Woodburn Center for Community Health

Contact Person: Ellen Kiel 703-573-0523

Address: 3340 Woodburn Road

Annandale, VA 22003

Web Address: http://www.fairfaxcounty.gov

Appl. Due Date: ***

Program: Expressive Therapy Center

Contact Person: Stephanie Natter, M.A. ATR CGP, Director

Phone: 301-869-1017 ext. 1

Address: 14808 Physicians Lane, suite 111

Rockville, MD 20850

5910 Goldsboro Road Bethesda, MD 20817

1320 Vincent Place McLean, VA 2201

Web Address: http://www.expressivetherapycenter.com/

Appl. Due Date: ***

Externs may provide individual, group, couples, and family therapy. Many clients are children and adolescents with problem areas such as: ADHD, depression, anxiety, behavioral problems, parent-child conflict, autism and more. Externs participate in weekly group supervision, 1-2 hours of individual supervision per week, and seminars. Externs may have an opportunity to conduct some psychological assessments. Advanced level students preferred, previous counseling experience preferred. To apply send a cover letter, CV, and 2 letters of recommendation to Stephanie Natter. Email: stephanie@expressivetherapycenter.com