

ERIE PSYCHOLOGICAL CONSORTIUM HANDBOOK
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CLINICAL DIRECTOR

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MISSION STATEMENT: The Erie Psychological Consortium (EPC) strives to prepare students in clinical and counseling psychology to become competent and ethical psychology professionals.

The EPC is built upon the premise that intensive experiential training with a variety of age groups under close clinical supervision will facilitate the process of integrating psychological and neuropsychological theory and findings into clinical practice. While each rotation has a particular clinical emphasis, the program is designed to provide a general diverse experience in preparation for clinical practice with a variety of age groups and cultures.

STATEMENT OF DIVERSITY: The Erie Psychological Consortium is fundamentally committed to the principle that cultural and individual differences matter in our efforts to train competent psychologists. The provision of culturally competent psychological services is an important objective of our internship program and we continually strive to enhance our efforts toward attracting diverse faculty and interns. Attracting diverse faculty and interns allows for a more diverse experience and a rich environment and curriculum that embraces individual difference and diversity. This is particularly important in the training of psychological assessment and interventions with diverse groups.

Consistent with these efforts, EPC acts to ensure a supportive and encouraging environment appropriate for the training of diverse individuals. Further, the program avoids any actions that would restrict program access on grounds that are irrelevant to success in the EPC internship training program or a career in psychology. EPC strives to ensure interns will have opportunities to learn about cultural and individual diversity as they relate to the practice of psychology and integrate into their clinical practice as psychologists. Specific goals and objectives are included in the intern's clinical learning objectives.

TRAINING MODEL:

The Erie Psychology Consortium (EPC) is distinctive not so much in terms of its structure i.e. a consortium, but in the unique composition of its members and the services provided. Safe Harbor of UPMC (SHBH) is a multi service outpatient clinic providing a range of clinical services to a more traditional mental health population. Northshore Psychological Associates (NPA) is a private practice of psychology providing integrative care in predominantly health care settings. As such, traditional models of training such as those defined by psychotherapeutic approaches do not adequately grasp the nature of "psychology in action" within the fast paced and changing nature of such practices. EPC has chosen to term its philosophy / model of training as 'experiential' as it is through the immersion of the intern into the culture, science and practice of professional psychology that they acquire not only the technical skill for future practice but also the identity as a psychologist. EPC discusses early in the internship year that interns are "doctors

in training” on a par with other doctoral trained health care professionals. The goal, therefore, is that graduates of EPC will feel technically qualified and professionally prepared for any future employment. How does EPC do this?

Integrating science and practice:

Interns participate in a variety of educational experiences both within the internship and at off campus offerings. These include: Internally- Assigned readings, Monthly journal articles, Case discussion, monthly lectures combining neurology residents and psychology interns and various topic discussions within psychology such as managing diabetes, dementia, depression, intro to traumatic brain injury, stroke and rapidly progressive dementias. Externally - Attendance at the Annual Neuroscience conference, UPMC neurology grand rounds and other community offered programs such as a medical ethics conference sponsored by a local hospital, a social work seminar at a local university etc.

The culture and the profession:

EPC achieves this in several ways. The first relates to modeling. Interns, particularly during their rotation at NPA, are immersed into the private practice world of psychology. Several faculty / supervisors have extensive involvement in the larger profession of psychology, serving as presidents of the regional psychological association (2), presidents of the state psychological association (2), members of various state association committees (6), members of the state psychological political action committee (1), APA Heiser award recipients (2), and APA Council of representatives (1). Interns meet on a monthly basis for a seminar on ethical and professional issues in psychology. Topics in this seminar range from macro issues such as the future of psychological training and internships to individual ethical dilemmas faced during internship. A list of these topics and readings will be provided. Interns, in the company of faculty, attend a yearly, invitation only, Ethics Educators Seminar sponsored by the state psychological association. During this experience, interns are exposed to faculty and supervisors involved in ethical training and education. The interns, in the company of faculty, attend the Annual Advocacy Day activities sponsored by the state association. During this event, interns receive training on legislative and regulatory issues in Pennsylvania that impact on psychology or the patients we serve. Interns then accompany psychologist to the state capitol where they partake in advocacy efforts with state legislators around these issues.

CLINICAL SUPERVISION: Interns are provided with three or more hours of supervision per week coordinated through the primary clinical supervisor. Two hours per week are provided at your primary site (Northshore or Safe Harbor) and provided by your primary clinical supervisor and the clinical director of the internship program. Interns also receive an hour of group supervision on a weekly basis with the clinical director. The group supervision will include case presentations, journal club (general article reviews), review of neuropsychological assessment and instruments, literature discussion, issues of cultural diversity, professional development, and general discussion. All supervisory sessions will be documented on the clinical supervision form and signed by the interns and supervisor. Interns will also receive an additional hour of supervision attending various seminars scheduled throughout the month and supervised by other staff psychologists.

INTERN SCHEDULE AND HOURS: During the initial week of internship, an orientation will be completed. You will be provided with an orientation checklist and provided a tour of the facility, and given an opportunity to become familiar with your office and the facilities at your site. Your schedule will also include completion of orientation through HealthSouth of Erie and UPMC Hamot for the Northshore rotation, and Safe Harbor orientation will also be scheduled for the next orientation session.

The internship is based on a 40-hour work week schedule, typically beginning at 8:00 AM and concluding at 4:30 PM. You may work a different schedule based on a client's needs or special events scheduled. Please keep your supervisor informed of any changes in your schedule.

The internship is divided into two six-month rotations. The first rotation typically ends in February, and time is allotted to plan and transition to the next site.

ATTENDANCE: Interns are expected to be at their respective sites as scheduled, unless previously arranged and approved by their clinical supervisor and/or the clinical director. Dress code is generally professional, consisting of slacks and shirt or sweater, or dress/skirt and blouse or sweater. On certain approved days at each site, casual business wear may be appropriate. It is the intern's responsibility to review the dress code for each site with his/her supervisor or the clinical director as to what is considered appropriate dress. Completion of time sheets and pay will be coordinated through Safe Harbor Behavioral Health. Interns are considered employees of Safe Harbor Behavioral Health of UPMC. The internship offers a stipend of \$20,000 dispersed on a bi-weekly basis. It is necessary to complete a time card in advance as directed by Safe Harbor human resources.

HOLIDAYS: EPC observes the following holidays: New Year's Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving, and Christmas. Additional holidays may be observed at the specific site where you are located. Interns are also eligible for these holidays.

SCHEDULING TIME OFF: It is often necessary to schedule time off to prepare for post-doctoral interviews, family emergency issues, or other matters. You need to coordinate this with your primary supervisor and request the time off through the Safe Harbor of UPMC supervisor.

RESEARCH TIME: The EPC offers four hours per week of scheduled research time. You are free to complete dissertation, research projects, or other research consistent with your academic and career goals. Please schedule this time through your clinical supervisor.

PROFESSIONAL DEVELOPMENT: The EPC encourages additional training and professional development throughout the course of the internship year. You are encouraged to attend conferences, workshops, and other educational activities. Many of these activities are located in Erie and Erie County. Please coordinate any requests through your clinical supervisor. Several conferences are scheduled each year and should be incorporated into your schedule in advance. These include UPMC Neurology Conference in November, Pennsylvania Psychological Association Ethics Conference in October, and Pennsylvania Psychological Association Lobby Day in April.

INTERN PERFORMANCE EVALUATION AND FEEDBACK: Intern performance and feedback are evaluated by:

- Direct observation of clinical practice
- Direct observation of participation in meetings
- Review of clinical case documentation
- Review of psychosocial assessments
- Review of psychological evaluations and neuropsychological evaluations
- Review of psychological and neuropsychological testing reports
- Evaluation of case formulation, as well as diagnostic and treatment plans
- Evaluation of adherence to ethical and professional standards throughout observation and supervisory sessions
- Evaluation of sensitivity to diversity and multicultural issues
- Evaluation of ability to interpret and apply empirical findings, and treatment strategies
- Written review and feedback are provided throughout the internship experience and at the conclusion of the internship period. A variety of evaluation forms is utilized and included in this orientation handbook
- Evaluation of ability to integrate current treatment theory and methods
- Intern feedback is offered through completion of the supervisor evaluation form and final analysis evaluation

APPLICATION REQUIREMENTS: As noted, the internship is a full-time one-year clinical experience, beginning the first week of August and ending the last week of July. Applicants must have completed course work for doctoral-level training in clinical or counseling psychology, and successfully completed their comprehensive examinations. They must be in good standing with their doctoral programs and have completed at least 1200 hours of supervised practicum training. A letter of readiness written by the director of training for the doctoral program is required and part of the APIC application. Applicants should submit three copies of their curriculum vitae, three letters of professional reference, including one from the director of clinical training, graduate transcripts, and a clinical work sample as defined on the APIC site. The work sample should include completion of a psychological and/or neuropsychological assessment. The application deadline is November 16, 2018. Individual interviews are typically offered on or prior to December 21, 2018.

EPC FACULTY: Current EPC faculty includes

Northshore Rotation:

Donald McAleer Psy.D ABPP. Licensed Psychologist, Board-certified in clinical psychology—American Board of Professional Psychology (ABPP). Dr. McAleer received his graduate training at Indiana University of Pennsylvania and completed his internship in Clinical Psychology and Neuropsychology at Hamot Medical Center. He has been a member of the Consortium since its inception in 2003 and provides a variety of clinical supervision and administrative services. Dr. McAleer provides a monthly seminar on ethics and professional issues in Psychology. His clinical interests include behavioral medicine, rehabilitation, and various topics in neuropsychology. He is a past president of the Pennsylvania Psychological

Association.

Mark Hogue Psy.D./Licensed Psychologist. Dr. Hogue is a clinical supervisor with EPC. He completed his doctoral training at Indiana University of Pennsylvania. His clinical interests include sports psychology, faith-based psychology, behavioral medicine, concussion, and sleep psychology. He is a past president of the Pennsylvania Psychological Association.

Tammy Kordes PhD./Licensed Psychologist. Dr. Kordes is a graduate of Gannon University. She is a clinical supervisor with EPC and has provided supervision and guidance since 2005. Her professional interests include sports psychology, dementia, traumatic brain injury, treatment of stroke, concussion and multiple sclerosis.

Robert Mailliard Psy.D./Licensed Psychologist. Dr. Mailliard is a graduate of the Philadelphia College of Osteopathic Medicine. He provides clinical supervision and didactic training for EPC. His clinical interests include chronic disease management, cognitive, behavioral, and reality-based psychology, ADD and ADHD, and pre-bariatric psychological evaluations. Dr. Mailliard has been a faculty member with EPC since 2009.

Jon Glass Ph.D./Licensed Psychologist. Dr. Glass is a graduate of Gannon University and clinical supervisor and faculty member since 2012. His clinical interests include neuropsychology, sports psychology, concussion, and dementia.

Debra Gilroy Ph.D./Licensed Psychologist. Dr. Gilroy completed her graduate training in Counseling Psychology from Gannon University in 2004. She completed her predoctoral internship training at the Carruth Center for Counseling and Psychological Services at West Virginia University. Her clinical interests include learning disorders, ADHD disorders for those 12 and older, grief counseling and memory assessment. She joined the EPC faculty in 2015.

Michael Schwabenbauer Ph.D ABPP./ Licensed Psychologist. Dr. Schwabenbauer received his graduate training at United States International University and completed his post doctoral residency in Neuropsychology at Lake Erie Institute of Rehabilitation. Dr. Schwabenbauer has been clinical director of EPC since its inception in 2003. He is board-certified in clinical psychology. His professional interests include neuropsychology, dementia, Parkinson's disease, and projective techniques. Specific topics covered in supervision include post-stroke depression, bedside assessment, differential diagnosis of dementia, and psychopharmacology.

Safe Harbor Rotation:

Lisa May Ph.D./Licensed Psychologist. Dr. May is a graduate of Gannon University. Dr. May provides clinical supervision and didactic training, including a monthly interdisciplinary discussion on topics related to treating weight loss and bariatric topics. Her clinical interests include women's issues, behavioral medicine, dementia, neuropsychology and pre-bariatric evaluations. She has been a clinical supervisor with EPC since 2010.

Mandy Fauble PhD/LCSW. Dr. Fauble is the Executive Director at Safe Harbor Behavioral Health of UPMC. Dr. Fauble completed her PhD at Case Western Reserve University, where her research focused on how maternal childhood maltreatment impacts children's mental health outcomes. Dr. Fauble has been providing clinical supervision since 2004, and is experienced in community mental health outpatient therapy, crisis intervention and case management services. Her clinical interests include serious and persistent mental illness, crisis intervention, recovery from abuse and trauma, attachment and intergenerational family dynamics as well as social systems and social functioning.

Consultant

Parris Baker PhD./Cultural Diversity Consultant. Dr. Baker is the cultural diversity consultant for EPC interns. He is director of the Social Work program at Gannon University. He provides training throughout the year on a number of selected topics related to cultural diversity and cultural competence.

Clinical Competencies and Expectations

The EPC expects interns to master established clinical competencies by the conclusion of the program. These competencies reflect the basic performance necessary to function as a psychologist in a clinical setting. Specific goals are as follows and identified in the **Erie Psychological Consortium Evaluation of Intern** form and completed at the conclusion of each six month rotation by your primary supervisor.

GOALS:

1. Ethical and legal standards:

Objective 1 Knows and adheres to APA Ethical Principles of Psychologists and Code of Conduct and applicable state and federal law.

Objective 2 Understands ethical principles and professional/legal duties that pertain to cases that involve complicated roles and responsibilities.

Objective 3 Recognizes ethical dilemmas and applies ethical decision making to resolve those dilemmas.

Objective 4 Seeks consultation from appropriate professional resources when clarification and assistance are needed to determine appropriate course of action.

2. Intercultural effectiveness:

Objective 1 Demonstrates an understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves.

Objective 2 Demonstrates an awareness of the variables including power dynamics, that affect culture and identity and how those intersect to affect client functioning.

Objective 3 Engages with clients in a way that shows sensitivity and respect for identity and cultural differences and the context in which the client lives.

Objective 4 Demonstrates skill in discussing with clients the nature of both the client's and the clinician's identity differences and how those influence the therapeutic relationship.

Objective 5 Applies sensitivity and humility in addressing dimensions of diversity in all facets of professional work.

Objective 6 Demonstrates knowledge and skill in addressing dimensions of diversity in all facets of professional work. This includes the ability to apply a framework for working effectively with forms of diversity not previously encountered.

Goal 3: Professional Values and attitudes

Objective 1 Knows and adheres to both Northshore Psychological Associates and Safe Harbor Behavioral Health of UPMCs policies and guidelines.

Objective 2 Meets professional obligations and supports site functioning by making reasonable efforts in assigned tasks.

Objective 3 **Completes** professional documentation in a timely manner.

Objective 4 **Prepares** for supervision.

Objective 5 **Demonstrates** self-reflection, an openness to learning, and an awareness of personal and professional strengths and limitations.

Objective 6 **Demonstrates** awareness of and ability to discuss personal emotional functioning as it affects performance of duties.

Objective 7 Able to receive corrective feedback, apply it and modify behavior accordingly.

Objective 8 Appropriately manages personal stress and emotions in a way that job performance is not unduly affected.

Objective 9 Demonstrates awareness of personal impact on co-workers, other professionals, and clients, and alters behavior and presentation appropriately (e.g., language, dress, conduct).

Objective 10 Demonstrates an ability to take up authority appropriate to the role, goal, and context of professional activities.

Goal 4: Communication and Interpersonal Skills

Objective 1 Demonstrates effective interpersonal skills and the ability to manage difficult communication well.

Objective 2 Produces and comprehends oral, nonverbal, and written communications that are informative and well-integrated; demonstrate an effective grasp of professional language and concepts.

Objective 3 Develops and maintains effective relationships with a wide range of individuals, including colleagues, supervisors, supervisees, and those receiving professional services.

Objective 4 Develops and maintains effective relationships with a wide range of individuals, including community members and organizations.

Goal 5: Assessment:

Objective 1 Provides rationale and sufficient data from multiple sources for conceptualization and diagnosis.

Objective 2 Conceptualizes cases grounded in psychological theory, evidence based practices, and an understanding of the client's context.

Objective 3 Demonstrates flexibility in modifying conceptualization based on client responsiveness to interventions and functioning.

Objective 4 Demonstrates ability to administer and score psychological and neuropsychological measures appropriately.

Objective 5 Demonstrates effective integration of test data with other information (clinical interview/review of other records).

Objective 6 Organizes and writes clear, well supported intake reports, progress notes, evaluation reports, and other documentation that communicates information effectively to the intended audience.

Objective 7 Demonstrates a working knowledge of ICD 10 / DSM V criteria.

Objective 8 Demonstrates knowledge of biological / psychiatric issues and appropriately refers for psychiatric and other medical assessment.

Goal 6: Intervention

Psychotherapeutic alliance and intervention:

Objective 1 Listens carefully and reflects accurately what the client communicates.

Objective 2 Shows sensitivity to emotional tone and client concerns.

Objective 3 Is physically and emotionally present with client.

Objective 4 Establishes appropriate therapeutic boundaries and therapeutic framework.

Objective 5 Sets and implements appropriate goals with client.

Objective 6 Demonstrates awareness of underlying issues and directs interventions to these issues.

Objective 7 Makes interventions in response to client's reactions (goal – corrected attunement).

Objective 8 Effectively utilizes cognitive interventions (e.g., framing, normalizing, etc.)

Objective 9 Recognizes client somatic information and directs interventions toward somatic awareness and regulation.

Objective 10 Shows awareness of own thoughts and feelings (including countertransference).

Objective 11 Demonstrates skill in dealing with relationship issues (e.g., ruptures, transference).

Objective 12 Challenges and provides feedback when useful.

Objective 13 Integrates theory and practice.

Objective 14 Utilizes outcome and process data to inform therapy.

Objective 15 Handles termination process appropriately.

Crisis Intervention:

Objective 16 Appropriately evaluates client's level of distress and functioning.

Objective 17 Assess risk effectively (e.g., self-harm, suicidality, homicidally, substance use).

Objective 18 Provides appropriate level of intervention including grounding, stabilization, and other interventions as needed (e.g., referral to crisis services).

Objective 19 Effectively utilizes appropriate resources to ensure safety.

Goal 7: Consultation and interprofessional / interdisciplinary skills

Objective 1 Demonstrates knowledge of and respect for the roles and perspectives of other professions.

Objective 2 Identifies consultee and object of consultation appropriately.

Objective 3 Clarifies consultee's presenting concerns.

Objective 4 Responds effectively to both content and relational issues in consultation.

Objective 5 Identifies appropriate resources and communicates these effectively to consultee and referral source.

Objective 6 Follows up on consultation as necessary and appropriately documents consultation.

Secondary Competencies

A specific level of competence is not required on Secondary Competencies to successfully complete internship. Interns do not always have the opportunity to provide services that would allow them to develop skill in nor do they always arrive at the internship with training in these areas. Secondary competencies are important to our work at the Erie Psychological Consortium and are often applicable in counseling centers as well as other mental health agencies. Interns will receive training and feedback in developing competencies in the following areas.

Goal 8 Outreach and collaboration:

Objective 1 Develops original or updated programs and workshops.

Objective 2 Demonstrates competency in program delivery (e.g., assess need accurately, prepares appropriately, delivers high-quality program, etc.).

Objective 3 Demonstrates professional public speaking skills.

Objective 4 Participates in program delivery and outreach related activities.

Objective 5 Maintains and reports data regarding individual programming activities and outcomes.

Objective 6 Makes contact with and establishes relationships with collaboration sites.

Objective 7 Informs and involves Erie Psychological Consortium staff about collaboration opportunities and/or challenges.

Objective 8 Understands organization structure, limitations/abilities, and the needs of the collaborator.

Goal 9 Group Facilitation:

Objective 1 Establishes effective co-facilitator relationship.

Objective 2 Discriminates content from process in group.

Objective 3 Demonstrates ability to recognize individual versus group level interventions.

Objective 4 Demonstrates ability to reflect whole or subgroup themes to the group.

Objective 5 Demonstrates ability to support and challenge in group context.

Goal 10 Administration (E.G., Committee Work):

Objective 1 Focuses on appropriate tasks and process in meeting.

Objective 2 Contributes meaningfully / effectively to tasks.

Objective 3 Follows through on assignments.

EEOC AFFIRMATION

Erie Psychological Consortium in recognition of its responsibility to its clients, family members, staff and the communities it serves affirms its policy in compliance with all applicable federal, state and local laws to hire qualified applicants and treat employees during their employment without regard to race, color, religion, sex, age, national origin, disability, sexual orientation or any other characteristic protected by law.

The successful achievement of a non-discriminatory employment policy requires cooperation between the agency administration and its employees. In fulfilling its part in this cooperative effort, administration is committed to setting the example by establishing and implementing affirmative practices, which ensure the objective of equitable employment opportunities for all.

In order for the Erie Psychological Consortium to fulfill this policy, all vendors, customers and employment services are required to comply with all applicable federal, state and local laws in their association with the Erie Psychological Consortium.

EEOC POLICY

An open and equitable personnel system will be established and maintained. Personnel policies, procedures and practices will be designed to prevent discrimination on the basis of race, color, religious creed, disability, ancestry, national origin, age or sex.

Employment opportunities shall be provided to applicants and reasonable accommodation(s) shall be made to meet the physical or mental limitations of qualified applicants or employees.

Any employee who believes he/she has been discriminated against may file a complaint of discrimination with any of the following:

Bureau of Equal Opportunity
Department of Public Welfare
Room 223 Health and Welfare Building
P.O, Box 2675
Harrisburg, PA. 17105

Office of Civil Rights
U.S. Department of Health and Human Services
Office of Civil Rights Region III
Suite 372 Public Ledger Building
150 South Independence Mall West
Philadelphia, Pa. 19106-9111

Pennsylvania Human Relations Commission
Pittsburgh Regional Office

Eleventh Floor, Pittsburgh State Office Building
300 Liberty Street
Pittsburgh, Pa. 15222

Bureau of Equal Opportunity
Department of Public Welfare
Western Field Office
Room 702 Pittsburgh State Office Building
300 Liberty Street
Pittsburgh, Pa. 15222

EMPLOYMENT POLICY

In order to ensure the orderly induction of staff and interns and to establish general guidelines for the employment relationship between Erie Psychological Consortium and employees and interns, the following practices and policies have been established. It is the policy of the Erie Psychology Consortium:

To employ the best qualified person for each job opportunity regardless of race, creed, religion, national origin, sex, sexual orientation, age or handicap.

- To encourage promotion of current Erie Psychological Consortium employees who demonstrate leadership skills and exceptional abilities.
- To foster individual development as directly related to the goals of the agency.
- To provide working conditions free from unnecessary hazards.
- To provide hours of labor and conditions of employment in accordance with federal, state and local regulations.
- To foster in each employee a sense of pride in the Erie Psychological Consortium and its mission to the clients it serves.

EPC Performance / Grievance Policy and Procedure:

Please refer to UPMC Hamot HR Policy on the info net as well as the following policy.

POLICY:

It is the policy of the Erie Psychological Consortium to respond to performance problems of pre-doctoral candidates in a timely manner according to the procedure below.

PROCEDURE:

1. Any questions or concerns about intern performance should be presented verbally to the respective site and clinical supervisor. The site and clinical supervisor has the discretion to request a meeting with the person or persons submitting the concern to gather additional information.
2. The site and clinical supervisor will convene a meeting with the respective intern to:
 - a) Discuss the questions or concerns about performances that were raised.
 - b) Determine the level of severity of the performance concerns.
3. If the behavior is determined to be that of a serious ethical or legal nature, the clinical supervisor will consult with the site supervisor and the Consortium Director.
4. The intern will be given **written notice** of a pending hearing by the hearing committee (composed of clinical and site supervisors and Consortium Director), as well as the nature of the concern. Action that may be implemented may consist of:
 - a) Corrective Action Plan
 - b) Probation
 - c) Suspension – Pending further investigation
 - d) Termination from the Consortium
 - i. The Consortium Director will make contact (oral and / or written) with the respective intern's University Director of Training from which the intern is registered.
 - ii. The Consortium Director will also evaluate the need to make contact (oral and / or written) with the respective professional body (i.e. APA) with which the intern is registered.
5. If the behavior warrants a corrective action plan, the Hearing Committee will develop a measurable corrective plan of action with the intern that may consist of:
 - a) A written description of the specific performance concern.
 - b) A manner in which to quantify or measure the performance concern.
 - c) Specific requirements delineated to allow the intern an opportunity to correct his/her performance (re-training, taped therapy sessions with review, test review and practice, ethics reading/review/discussion with clinical supervisor.
 - d) A manner in which to quantify or measure improvement in the intern's performance (certification of trainings received, number of tapes recorded and reviewed, hours of

- productivity, number of practice test administrations).
- e) A time frame in which the intern is to improve his/her identified area of performance.
6. Appeal of the Committee's decision:
Appeal by the student:
The alleged violator may request a review of the Committee's decision by submitting to the Committee in writing, within 30 days of that decision, a request of appeal of the decision, including the reasons (s)he disagrees with the Committee's decision on the complaint.
- Committee's Response to the Appeal:
- a) The Committee, for the purpose of review of student's appeal, will consist of 2 Clinical Supervisors, who are not the student's direct supervisors and the Agency CEO/Executive Director. This Committee will review any additional information submitted since the outset of the hearing.
- b) The Committee may or may not conduct additional investigation, may or may not direct the original committee to re-evaluate all pertinent information.
- c) The Committee then may take one or more of the following actions on the appeal:
- i. It may uphold, over turn or modify its original decision and will communicate in writing this decision to the complainant and the alleged violator.
 - ii. It may authorize a challenge to its original decision by
 - a) Authorizing a filing of a new complaint, waiving the time limits, as necessary, or
 - b) Inviting the alleged violator and the complainant to attend one of its regularly scheduled meetings to present their cases.
 - c) The Hearing Committee then will make the final written determination on the case and will communicate (in writing) the results to all parties involved.
7. All areas of performance identified via this process will continue to be reviewed with the intern and the clinical supervisor during his/her quarterly performance evaluation.
8. Repeated infractions of previously identified and corrected performance concerns could result (at the discretion of the Consortium Director, site and clinical supervisors) in termination from the Consortium.