Program Description
Doctoral Internship in Health Service Psychology

Counseling Center
University of Maryland, Baltimore County (UMBC)

The University

UMBC is a state-run, co-educational university, part of the University System of Maryland. Designated as an Honors University, the campus offers academically-talented students a strong undergraduate liberal arts foundation that prepares them for graduate and professional study, entry into the workforce, community service, and leadership. The university has around 11,000 undergraduate students and an additional 3,000 graduate students. UMBC’s student body is among the most diverse in the United States. About 16% of the student population identify as African or African-American, 18% as Asian or Asian-American, 6% as Hispanic/Latino and about 3% as multiracial. Approximately 8% of students are international students, representing over 150 countries. About 54% of the student body identify as male (UMBC Office of Institutional Research, 2015). The campus is located on 500 acres 15 minutes from Baltimore’s Inner Harbor and 30 minutes from Washington, D.C.

UMBC Non-Discrimination Policy Statement

The University of Maryland, Baltimore County (UMBC) does not discriminate on the basis of race, color, national origin, ancestry, ethnic background, genetics, disability, age, sex, gender identity and expression, marital status, sexual orientation, religion, creed, and/or veteran status in admission to and participation in education programs and activities, or employment practices in accordance with federal laws, including, but not limited to Titles VI and VII of the Civil Right Act, Title IX of the Education Amendments, Section 504 of the Rehabilitation Act, and the Americans with Disabilities Act as amended, as well as state laws, and regulations.

Counseling Center

The mission of the Counseling Center is to foster student’s psychological development and emotional well-being and to support students in attaining their academic and personal goals. This is accomplished through counseling and psychotherapy, preventive and educational programming, consultation and outreach. The staff of the Counseling Center work with students, faculty, staff, academic and Student Affairs departments, student organizations, and other institutions and organizations off campus. The Counseling Center strives to create a supportive, healthy, diverse, and inclusive multicultural learning community and to contribute to the training and development of multi-culturally competent mental health professionals.

Clinical services offered by our multi-disciplinary staff include mental health assessment, short-term individual psychotherapy, group therapy, psychiatric consultation, crisis intervention, and referral assistance. The Counseling Center has a comprehensive and active outreach program and offers workshops, mental health screening, tabling events, and training on a multitude of topics related to mental health. There is a focus on suicide prevention, stigma reduction, and improving access to services to all students. The MindSpa offers students a quiet retreat for meditation and relaxation as well as biofeedback equipment and a massage chair. All counseling services are free and confidential.
The Counseling Center is staffed by seven licensed psychologists, a licensed clinical social worker, and a part-time psychiatrist; two staff members provide administrative support. Staff work from a variety of theoretical orientations, including psychodynamic, interpersonal, family systems, humanistic, and cognitive-behavioral, and emphasize integrating evidence-based practice into their clinical work.

The Counseling Center views training as an essential part of our mission. In addition to the doctoral internship, externship training is offered to graduate students in APA-approved doctoral clinical and counseling psychology programs. Beginning in 2015, a social work internship for Master’s students at the University of Maryland at Baltimore is offered as well. The Counseling Center trainees have the opportunity to gain experience working with a wide variety of presenting concerns and symptoms, including stress, relationship problems, depression, academic concerns, grief and loss, anxiety, sexual assault or abuse, disordered eating, and drug and alcohol use/abuse. The student population offers the opportunity to work with clients from diverse cultural and ethnic backgrounds. In 2015-2016, about 17% of clients identified as African or African American, 15% as Asian or Asian American, 5% as Hispanic/Latino, and about 5% as multi-racial. Approximately 7% of clients were international students and about 28% were transfer students. Clients identify all along the spectrums of gender identity and sexual orientation, although the majority identify as female (58%) and heterosexual (72%).

The Internship Program

The Counseling Center at UMBC offers a Doctoral Internship in Health Service Psychology to qualified graduate students in APA-approved programs in clinical and counseling psychology. First and foremost, our training is designed to achieve the profession-wide competencies necessary for independent practice in psychology as outlined by the American Psychological Association (APA). In addition, there are a number of program-specific competencies, including initial assessment, short-term individual counseling, group therapy, crisis management, supervision, outreach and prevention, consultation, and program development. The internship program is designed to train practitioners who are primarily interested in developing the competencies and confidence for work as psychologists in a comprehensive university counseling center.

The internship program at the Counseling Center was developed in accordance with APA competency benchmarks and accepted its first cohort of two part-time interns in 2009. The program was accepted for membership in APPIC in 2011. In 2013, the Counseling Center offered a full-time internship program, with two positions. Beginning with the 2015-2014 training year, three intern positions were offered. Staff members are excited about the growth of the internship, viewing the interactions with trainees as an integral part of keeping the Counseling Center a vibrant place of professional learning and development. The internship was accredited by the American Psychological Association for seven years in June, 2014. Questions related to the program’s accreditation status should be directed to:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington, DC 20002
Phone: (202) 336-5979
Email: apaaccred@apa.org

Training Model and Philosophy

The Counseling Center operates from a Practitioner-Scholar model of training, focusing on applying the knowledge that interns have gained from courses, seminars, research, and readings into their clinical work. Our training program emphasizes the importance of (1) integrating theory and scientific
knowledge into clinical practice, (2) developing advanced evidence-based clinical skills, (3) advancing multicultural awareness and competency; (4) increasing self-awareness and using the “person of the therapist” to inform their work; (5) attending to interns’ developmental needs (6) enhancing professionalism and collaboration with a multidisciplinary team; and (7) solidifying a professional identity as a psychologist.

To achieve the goals of the internship, the program incorporates the following:

- Opportunities to learn through direct clinical experience
- Observation of clinical work through video-recording or co-leading sessions
- Individual, group, and peer supervision
- Seminars and other professional development opportunities to enhance the interns’ knowledge of the current literature and varying theoretical perspectives so as to integrate these into practice
- Opportunities to collaboratively consult with a multidisciplinary team about clinical work
- Mentorship to foster the development of a professional identity and career path as a psychologist

The internship program at the Counseling Center works from a developmental perspective by assessing each individual intern’s entering skill level and working to expand their skills beyond that level. Training proceeds in a sequential fashion, allowing for interns to gradually assume increasing levels of autonomy. Intern seminars are planned so that trainees are introduced in didactic form to topics that coincide with where they are in their developmental process and where they are in the training year. For example, supervision seminars are provided before interns begin supervising externs; group therapy seminars are presented early in the interns’ training before groups are running and then again as the interns have had opportunities to co-lead groups. Another example can be seen in preparing interns to conduct intake assessments. Interns first learn about intakes at the Counseling Center in a seminar format during orientation. After first observing senior staff conduct intakes, they co-lead the intake sessions, taking on an increasingly active role in the session based on their level of competency. Finally, staff observe interns conducting the intake independently before they are permitted to conduct them on their own. Interns with prior experience with intakes may be able to independently conduct their own intakes after three intakes. Interns with little to no experience and/or a lower level of competency will have live supervision for a longer period of time. Likewise, supervision of intakes will be more intensive as the interns initially conduct their own intakes and decrease in intensity as interns become more experienced.

Counseling Center staff members strive to model that professional development extends well beyond the internship year. They strive to demonstrate that theory and research inform clinical work and that clinical work is enhanced through discussion and learning from the experience of others. Staff and interns join together for weekly Case Consultation meetings to share ideas about their work with clients. Professional development programs for clinical staff are integrated throughout the year to enhance knowledge about topics particularly relevant to college students. Staff value and stress the importance of integrating multicultural competency and social justice into all our endeavors.

The training program supports interns in enhancing their sense of professionalism, working within a multidisciplinary setting, and developing administrative skills. Interns are incorporated into staff meetings and meetings with other departments within the Division of Student Affairs. This inclusion allows for interns to truly experience the ins and outs of counseling center operations and the importance of collaborating with the wider campus community. Professional, ethical, and legal issues are addressed in seminars as well as supervision, case consultation, staff meetings, and other professional development programs.
****Please note that we are currently revising our materials to align with the new Standards of Accreditation, which will be effective January 1, 2017. The Goals and Objectives will be reformulated as Aims, Profession-Wide Competencies, and Program-Specific Competencies. However, we do not anticipate that we will be making substantive changes to our training program.*****

Goals and Objectives of the Internship Program

**Goal I: To Produce Graduates who have the Requisite Knowledge and Skills for the Independent Practice of Health Service Psychology**

Objective 1: To Prepare Interns as Practitioners who have Knowledge and Clinical Skills in Assessment

Objective 2: To Prepare Interns as Practitioners who have Knowledge and Clinical Skills in Individual Therapy

Objective 3: To Prepare Interns as Practitioners who have Knowledge and Clinical Skills in Group Therapy

Objective 4: To Prepare Interns as Practitioners who have Knowledge and Clinical Skills in Crisis Intervention

Objective 5: To Prepare Interns as Practitioners who have Knowledge and Skills in Outreach and Consultation

Objective 6: To Prepare Interns as Practitioners who have Knowledge and Skills in Providing Clinical Supervision

**Goal II: To Enhance the Development of Professional Identity as Psychologist**

Objective 1: To further promote interns’ knowledge of and adherence to Professional Behavior and Standards

Objective 2: To prepare interns to engage in Ethical and Legal Professional Practices

Objective 3: To enhance interns’ Commitment to Scholarship and Life-long Learning

Objective 4: To reinforce the value and importance of Supervision and Consultation

Objective 5: To facilitate the development of a professional identity that incorporates an Awareness of Self

Objective 6: To prepare interns with the knowledge, sensitivity, and clinical skills needed to work as a Multiculturally-Competent Professional

Components of the Internship

The internship training is highly experiential. Interns are expected to accrue a minimum of 500 hours of face-to-face direct clinical service. Approximately half of the intern’s hours are spent in direct service: intake, individual therapy, group therapy, crisis intervention, outreach, consultation, and supervision of externs or practicum students. Interns participate in staff meetings, case consultation meetings, and professional development to permit them opportunities to work collaboratively with the staff, seek feedback on their work, and become actively involved in the process of policy decision making. Interns witness staff’s work as they observe intakes, co-lead group therapy, and attend case conference. Mentorship is an important part of the intern’s experience. The wide variety of supervisory experiences enables interns to have individual contact with most, if not all, staff members. As such, the interns have a variety of mentors and role models.

The goals and objectives of the training program are achieved primarily through the supervised activities. Through these activities, interns gain and demonstrate relevant competencies. All intern activities at the
Counseling Center are considered germane to the training program. However, for the purpose of clarity, the training program can be characterized in terms of 1) clinical services, 2) professional training and development, 3) professional identity development, and 4) other administrative and professional activities.

A. Clinical Services

1. Assessment. Interns conduct an average of four initial evaluations, or intakes, each week. Intakes are conducted using a semi-structured format. Intakes form the basis for establishing rapport, clarification of client needs and goals, behavioral observation, diagnostic assessment, and treatment and disposition planning. The number of intakes will vary over the course of the internship to assist interns in building an initial caseload and to maintain a reasonable number of cases. All clients complete a variety of self-report measures when they arrive for their intake appointment, including the 43-item Behavioral Health Measure (BHM-43) College Counseling Version. In addition to intakes, interns assess client symptoms and progress at each session using the 20-item version of the BHM. Interns will be trained in BASICS, which is used for Alcohol and Other Drug (AOD) assessments. Opportunities for career and vocational assessment may also be available.

2. Psychotherapy. Psychotherapy is primarily with individual clients, although the intern may have the opportunity to conduct couples therapy depending on availability of such cases. Interns will typically continue to work with clients they saw for an intake; infrequently, exceptions are made if there is a need for a referral to another staff member. The Counseling Center employs a short-term treatment model. Although statistically, the average number of sessions a little over five (5), there is a wide range in length of treatment, with many students having only one or two sessions and a smaller number having in excess of 10. Clinical staff take an individualized approach to treatment planning, taking into account client treatment needs, overall clinical demand, and staff availability. Interns may have the opportunity to carry one or two long-term clients. Interns are typically expected to see an average of 10-14 clients per week, although the number may be higher in times of peak demand and lower during winter and summer breaks.

3. Group Therapy. The Counseling Center has offered a variety of therapy groups, including interpersonal process groups, population-specific support groups, and skill building groups. Typically at least two interpersonal process groups are offered each semester. Interns are expected to co-lead at least one interpersonal process group, with an option to co-lead one additional group. Interns may have the option to develop a group in their area of interest with the guidance of staff, depending on availability of clients. Developing and sustaining additional groups cannot be guaranteed. However, staff members are committed to maintaining the strength of the group program, and group experience for interns is a priority.

4. Crisis Intervention and Consultation. Interns provide daytime urgent assessment and after-hours on-call consultation services throughout the internship. They provide consultation to students, faculty, staff, and parents, and conduct brief evaluations, triage, and crisis intervention for students. Seminars on crisis management and consultation are offered prior to their undertaking this experience. In the Fall semester, interns start with daytime urgent assessment, where they will see students in crisis or they will consult with faculty, staff, parents or even other students about students of concern. Senior clinical staff are available for immediate consultation. After demonstrating sufficient competency, interns assume an increasingly more independent role at their supervisors’ discretion, eventually assuming responsibility for after-hours emergency coverage, with backup provided by a licensed staff member. Supervision of the interns’ crisis intervention work will be provided by the intern’s individual supervisor and/or the staff psychologist providing after-hours’
backup. The Training Director and/or the Director of the Counseling Center are also available for consultation. If they are unavailable, any senior staff member can be consulted.

5. Outreach. Interns are actively involved in the Center’s Outreach and Consultation Services to students, faculty, staff and others within the UMBC campus around mental health issues. Outreach activities may include tabling at resource fairs, training of residence hall assistants, participation in student and parent orientation programs, campus-wide mental health screenings, and topic-focused presentations and workshops. Interns are expected to offer a minimum of 30 hours of outreach activities. Interns may have the opportunity to supervise externs on the development and delivery of outreach. Program development and evaluation are integral parts of the Outreach experience, and interns are expected to develop a specialized Intern Project based on their interests.

6. Consultation. Consultation will consist of providing assistance to faculty, staff, and parents who are concerned about a student; consultation may also be provided to UMBC students who are concerned about another student (e.g., their roommate). Interns are paired with a Community Director and meet periodically throughout the year to provide consultation related to residential student mental health needs and concerns. Interns may also be involved in consultation by working with student organizations or developing liaison relationships with other campus offices or departments.

7. Supervision of Externs. Interns provide individual clinical supervision for one extern in the spring semester. They will meet with their supervisee for one hour a week and will be responsible for the oversight of the extern’s clinical cases, viewing recordings of the client sessions, reviewing and signing case notes, and completing the weekly Supervision Log. Interns are responsible for completing the formal extern evaluation form, in conjunction with other supervisors. Interns will be supervised on their supervision by a licensed staff psychologist.

B. Professional Training and Development:

1. Supervision. Supervision is rooted in evidence-based practice and will consider a variety of theoretical approaches. Interns attend a minimum of two hours of individual supervision per week with licensed psychologists. Interns will have two different individual supervisors, switching mid-year, to offer a variety of theoretical orientations and supervisory styles. Weekly Supervision Logs will summarize the discussion of client issues as well as supervisor feedback on the intern’s performance, skills, and areas of concern. Interns meet weekly for one hour of peer group supervision, which will be facilitated by a senior staff member. When groups are actively running, interns will receive an hour of individual supervision by their group co-leader. Interns attend one hour of individual Supervision of Supervision when they are supervising externs in the spring semester. Finally, interns will meet with the Outreach Coordinator periodically for supervision as needed. An integral part of individual, group, and supervision of supervision is the review of video-recorded sessions.

2. Case Consultation Meeting. During this weekly, one-hour meeting, senior staff and interns have the opportunity to informally present new clients for the purpose of consultation, treatment planning, and disposition. There is also the opportunity for all staff to receive peer consultation for ongoing clients.

3. Intern Seminars. Interns will attend a weekly, one-and-a-half-hour seminar that is designed to provide didactic and experiential opportunities to explore topics relevant to working in a university counseling center in greater detail. Senior staff as well as professionals from outside the Counseling Center provide these seminars. (See Appendix VII. Intern Seminar Schedule). Interns are expected to
prepare for the seminars by reading professional references provided by the presenters to enhance discussion during the seminars. It is likely that there will not be sufficient time to complete all the readings during normal business hours, particularly during periods of high clinical demand.

4. Professional Development. Senior staff and interns regularly meet as a group for the purpose of furthering professional development. Activities may include didactic presentations, discussion of journal articles, peer supervision, and case conference. During case conference, an individual case is presented in detail for consultation and peer supervision. Interns are expected to provide peer supervision and other feedback to the staff member or trainee who presents a case. Interns will present at least one case each semester, including clinical and didactic information based on one or more theoretical frameworks. Intern presentations will include pre-selected video-recording(s) to illustrate themes.

C. Professional Identity Development

1. Professional Behavior and Standards. Interns are expected to demonstrate behavior consistent with UMBC’s Staff Handbook and the Counseling Center Policies & Procedures Manual. These standards include taking responsibility for their schedules, meeting expectations of the work place, working cooperatively and courteously with others, representing the department well, and demonstrating sensitivity to diversity issues in their interactions within and outside the department. Furthermore, externs are expected to conform their professional behavior to state legal statutes regarding the practice of psychology. They are also expected to follow the Guidelines for Professional Attire (see Appendix XV). Professional staff model these behaviors for interns and provide necessary instructive information and feedback regarding expected standards.

2. Ethical and Legal Practices. Interns are expected to be aware of, and behave in a manner consistent with, ethical standards established by the American Psychological Association and the State of Maryland. They must follow all Maryland state legal statutes regarding the practice of psychology. Interns receive training in ethical, legal, and professional standards through interns seminars, supervision, case consultation, and professional development programs.

3. Scholarly Activity. Interns are expected to demonstrate a commitment to scholarly activity. They remain current with the scientific basis for clinical practice in health service psychology through reading, intern seminars, supervision, and professional development programs. They demonstrate scholarly activity and competence by working to complete research requirements for their degree, participating in intern seminars, and practicing in a manner that is informed by theory and research. Interns are required to complete an Intern Project that is based on theory and research and serves to promote the mission of the Counseling Center. Program evaluation will be an essential component of the Intern Project.

4. Supervision and Consultation. Supervision and consultation are necessary components of effective clinical practice regardless of one’s level of training and experience. As described above, interns will receive both individual and group supervision by licensed staff members. Interns are expected to discuss their clients and provide peer supervision to other trainees and staff members in group supervision and case conferences. When dealing with clients in crisis, it is the expectation that interns will consult with their supervisor and/or other senior staff members in a timely manner, particularly early in the internship as they build competency in crisis intervention.

5. Evaluation and Feedback. The Counseling Center recognizes the importance for interns to receive timely feedback regarding their progress and performance in their clinical work and
professional behaviors. Informal feedback is an integral part of supervision. In addition, mid-way through each semester, the Intern Evaluation Form will be reviewed in an informal manner to help interns evaluate their progress. Formal assessment of the interns’ progress will be made twice a year, in January and July; these evaluations will become a part of the intern’s file. Interns are evaluated on all of the objectives and competencies listed herein. The Intern Evaluation Form will be reviewed during Orientation and with relevant supervisors. The Training Director will gather and submit all evaluation forms and send a copy to the Intern’s Director of Clinical Training.

6. **Awareness of Self.** Training staff at the Counseling Center value the power and complexity of the therapeutic relationship. Although Center staff and interns come from a variety of theoretical backgrounds, therapists’ awareness of themselves and their reactions to clients inform all our clinical work. Consequently, in our intervention, supervision, and training activities there is a focus on the “person-of-the-therapist” and how this may impact the quality and effectiveness of work with clients and consultees. Self-awareness is essential for therapists to provide accurate empathy and to ensure that therapists meet the ethical imperative to “do no harm”. Self-awareness minimizes the possibility that therapists will gratify their own needs at the expense of their clients.

The Counseling Center training program views supervision as a means for trainees to learn how to assess and intervene with clients as well as to recognize, understand, and manage their personal reactions to those under their care. We believe that the therapist’s response to the client “in the room” can be an important vehicle for understanding and helping the client. As such, an integral part of supervision is exploration of such issues. Interns are expected to explore and reflect upon their feelings and reactions to clients both individually and in supervision. Interns are encouraged, but not required, to participate in their own therapy to enhance their self-awareness and self-care.

7. **Multicultural Competency.** Staff and interns need to work from a multicultural perspective. Knowledge of, and sensitivity to, diversity issues are essential in all areas of practice and are included in didactic intern seminars as well as in supervision, group work, and outreach programming. The multicultural competency component of the training program is designed to develop more intensive and comprehensive knowledge, understanding, and skills in working with students from diverse backgrounds and under-represented groups. A commitment to working with students from a multicultural perspective is particularly important given the diverse student population and staff at the Counseling Center. As such, participation in the internship training program will not only involve increasing one’s skills and knowledge base with regard to multicultural competency, but will involve self-exploration as well as some level of self-disclosure within the context of furthering personal awareness and professional development. Additionally, interns are strongly encouraged to incorporate multicultural perspectives into supervision of externs, group therapy, outreach programming, and case conference.

Interns are expected to familiarize themselves with, and follow, the University of Maryland System’s Policies of Non-Discrimination (see page 2). Diversity issues and multicultural competency are attended to in seminars, individual and group supervision, case consultation, and case conference meetings.

**D. Administrative and other Professional Activities**

1. **Case Management.** Interns are expected to complete case management activities relevant to the clients with whom they are working. These activities include writing intake reports, case notes, termination summaries, and necessary correspondence in a timely and professional manner. Interns make appropriate referrals to, and collaborate with, Counseling Center colleagues, other medical or
mental health professionals, and other on- and off-campus resources as relevant. Interns consult with faculty, staff, administrators, other treatment professionals, and family members as appropriate and only as allowed by ethical standards and legal statutes. Interns work with their supervisors to conduct case management in an ethical and legal manner, with special attention to confidentiality. They are responsible along with their supervisors for making sure that relevant documents are counter-signed.

2. Staff Meetings. Interns are expected to attend and participate in weekly staff meetings.

3. Committees or Task Forces. Interns may have the opportunity to be a member of Counseling Center committees and/or a committee or Task Force within the Division of Student Affairs. Membership and/or participation will be at the discretion of the Director of the Counseling Center.

4. Monthly Meetings with Training Director. This forum will provide a regular, scheduled opportunity to discuss matters related to the internship year, examine intern cohort dynamics, and stay informed about professional and/or other developments within the Counseling Center, the university, or the community outside of UMBC.

Intern Evaluations

1. Evaluation and Feedback to Interns. The Counseling Center recognizes the importance of interns receiving timely feedback regarding their progress and performance. Informal feedback is an integral part of supervision. Additionally, formal assessment of the interns’ progress will be made twice a year, in January and July. Interns are evaluated on all of the goals, objectives, and competencies for the internship. On the mid-year evaluation, interns must achieve an average rating of 3 out of 5 (“Satisfactorily Proficient”) on the Intern Evaluation form to maintain good standing and to progress through the program. Ratings of 1 (“Not Proficient”) or 2 (“Minimally Proficient”) will result in remediation efforts. By the end of the internship, interns are expected to achieve ratings of 3 out of 5 (“Satisfactorily Proficient”) on 95% of the items, with no ratings of 1 out of 5 (“Not Proficient”). In order to successfully pass the internship, the average score for each of the competencies and objectives must be a minimum of 3, which would indicate that the intern’s level of competency is “Satisfactorily Proficient” overall.

2. Evaluation and Feedback from Interns. As with feedback to interns, interns are encouraged to offer informal feedback about their supervisors, Training Director, and the internship program throughout the year. In addition, interns formally evaluate and provide feedback to their supervisors twice a year and the Training Director at the end of the internship. Interns will discuss these in meetings with the supervisor and Training Director. Interns evaluate and provide feedback on intern seminars. They also complete a formal evaluation on their overall internship experience at the end of the training year. Counseling Center staff are eager for and highly value constructive feedback in order to continually monitor the quality of the training program and make changes as needed.

Self-Disclosure Policy

At the Counseling Center, trainees are expected to reflect upon and share the ways that their own personal qualities, experiences, and reactions influence and are impacted by their clinical work in supervision and other training settings. Such exploration and disclosure is not intended to serve as psychotherapy for the trainee and is focused on enhancing self-awareness and professional development as related to the trainee’s clinical practice during the internship. Supervisors and other training staff are expected to explore relevant information in a respectful, non-coercive manner, within the context of a
safe and supportive professional relationship. The staff believes that the decision as to how much or how little to share is a choice that needs to be made by the trainee. However, in accordance with APA Ethical Principle 7.04, the intern will be expected to share personal information “if the information is necessary to evaluate or obtain assistance for students (interns) 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.”

Also in accordance with APA Ethics Code, Section 7.05, it is important for trainees to be aware that the due process procedures for our training programs indicate that the staff may require trainees to obtain psychotherapy in those cases in which a trainee or his/her behavior is deemed problematic.

**Internship Hours**

At a minimum interns are expected to be at the Counseling Center from 8:00 a.m. to 5:00 p.m. Monday through Friday. Interns (as well as senior staff) are encouraged to take one hour for lunch as part of their self-care. There will be times during the year when it is necessary to work additional evening or weekend hours. It is likely that interns will find that they need to work extra hours in order to keep up with clinical and administrative demands, particularly during peak client weeks during the Fall and Spring semesters. Interns are expected to complete seminar readings on their own time.

Interns are required to complete a minimum of 2000 hours, including a minimum of 500 hours of direct clinical service, which includes individual and group therapy, outreach presentations, consultation, crisis intervention, and supervision of trainees. As noted above, it is unlikely that interns will be able to meet the 2000 hour minimum without working more than 40 hours a week. Interns who intend to accrue more than 2000 hours as required for licensure in other states can be readily accommodated.

**Typical Intern Weekly Schedule**

<table>
<thead>
<tr>
<th>Clinical Services</th>
<th>Hours per Week</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Counseling Services</strong></td>
<td></td>
</tr>
<tr>
<td>• Intakes</td>
<td>4</td>
</tr>
<tr>
<td>• Individual Counseling/Therapy</td>
<td>10-14</td>
</tr>
<tr>
<td>• Group therapy</td>
<td>1.5</td>
</tr>
<tr>
<td>• Day-time On-Call</td>
<td>3</td>
</tr>
<tr>
<td><strong>Other Clinical Services</strong></td>
<td></td>
</tr>
<tr>
<td>• Outreach</td>
<td>1-2</td>
</tr>
<tr>
<td>• Consultation</td>
<td>0-1</td>
</tr>
<tr>
<td>• Supervision of Trainee</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total Clinical Service Hours</strong></td>
<td>20-25</td>
</tr>
</tbody>
</table>

| Professional Training and Development    |                |
| **Supervision**                          |                |
| • Individual Supervision                 | 2              |
| • Group Supervision                      | 1              |
| • Group Therapy Supervision              | 1              |
| • Supervision of Supervision             | 1.5            |
| • Case Consultation Meeting              | 1              |
| **Total Supervision**                    | 6.5            |
| **Professional Development**             |                |
| • Professional Development Hour (e.g. Case Conference) | 1     |
| • Intern Seminar                         | 1.5            |
| • Reading Time                           | 1-2            |
### Total Professional Development

| Total Professional Development | 3.5-4.5 |

### Total Professional Training and Development

| Total Professional Training and Development | 10 - 11 |

### Administrative Activities

- **Staff Meeting**: 1
- **Case Management/Note Writing**: 5
- **Supervision Administrative Tasks (weekly logs, note review)**: 2
- **Review of session recordings (intern’s and externs)**: 1-2
- **Outreach Preparation**: 0-2
- **Other Projects (more during Summer and Winter breaks)**: Varies

| Total Administrative Activities | 9-10+ |

| Total Weekly Hours | 40+ |

## Compensation and Benefits

****Please note that we are currently working on confirming the employment status of interns for the 2017-2018 year. It is unclear at this time whether interns will be exempt based on the Fair Labor Standards Act (FLSA) or whether they will fall under the rules for regular, non-exempt employees. We anticipate that a final decision will be made in December, 2016****

The internship is scheduled to begin on the third Monday in July and end on the second Friday in July of the following year. The current internship stipend is $24,500. Interns will have the status of Contingent I employees. Given this status, interns are not eligible for State benefits. However, interns are eligible to purchase subsidized health and dental insurance, prescription drug coverage, life insurance, and accidental death and dismemberment policies. These premiums will be billed to the intern on a regular basis and are post-tax given the employment status of the interns. Interns are able to purchase a staff parking pass (for a yearly fee paid in advance); they have free access to UMBC transit (http://www.umbc.edu/ocss/com_resources/umbc_trans.html) as an alternative. Interns have full access to library and recreation facilities at no cost.

Although not formally eligible for state leave benefits, the Counseling Center has offered the following internal benefits for the interns. Paid time off benefits include 14 University-recognized holidays; some of these holidays must be taken during the week between Christmas and New Year’s Day, when the university is closed. Interns are eligible for 10 days of vacation; however, it is expected that interns save 5 days of vacation for the final week of the internship. Interns are strongly discouraged from taking extended vacation time during the Fall or Spring semester due to the clinical demand. Interns are eligible for 5 sick days. Bereavement time can count as sick time or vacation. Up to 5 days of professional time to attend conferences/workshops, dissertation defense, and/or to attend graduation or job interviews may be granted in consultation with, and at the discretion of, the Training Director and the Director of the Counseling Center. There may be funds available for professional development programs.

All decisions regarding paid time off will take into account clinical needs and intern progress towards meeting the requirements for clinical (500) and total (2000) hours necessary for successful completion of the internship. It is imperative to understand that interns will not meet the minimum of 2000 hours if they only work 40 hours a week and if all paid time off is taken. Administrative time out will be granted whenever UMBC is closed for inclement weather or other conditions. Interns will be exempted from any furlough days and will receive administrative time to cover related time out.

Interns are provided with their own office, which includes, at a minimum, a desk and office chair, two therapy chairs, file cabinet, and book case. They are provided with an office telephone and a university computer with internet access and the capacity for video-recording. Titanium is used for scheduling and
maintaining electronic records. Thumb drives are provided to store videotaped sessions. Administrative assistance is available as needed.

Parental Leave

The Counseling Center acknowledges that many individuals may choose to have or adopt children during the internship year. To help accommodate intern’s possible need for appropriate parental leave to allow for bonding with new children, post-partum recuperation, and/or establishment of breast feeding, while also ensuring that interns meet the program’s requirements, the Counseling Center will work with interns regarding parental leave. In the event that parental leave is required, UMBC, local, state, and federal regulations will be considered. The Counseling Center acknowledges that psychology interns are not required to disclose a need for parental leave prior to Match Day.

In consideration of client needs and overall needs of the center, the Counseling Center requests that any intern requesting parental leave provide as much advance notice as possible. Interns are strongly encouraged to consider their own training needs and the need to complete specific hour requirements when making requests for parental leave. A written agreement will be developed that addresses the amount of leave time that will be taken, the extent to which paid leave is available, and a plan for the intern to complete the requirements of the training program. Upon return from parental leave, the Counseling Center will work with interns to provide for space for expression and storage of breast milk (if a mother chooses to breast feed) or leave to accommodate care for sick children.

Record Keeping Policy

The program documents and permanently maintains accurate records of the interns’ training experiences, evaluations, and certificates of internship completion for evidence of the interns’ progress through the program and for future reference and credentialing purposes.

The program also keeps information and records of all formal complaints and grievances of which it is aware that have been submitted or filed against the program and/or against individuals associated with the program since its last accreditation site visit. The Commission on Accreditation will examine a program’s records of intern complaints as part of its periodic review of the program.

Eligibility and Intern Selection

Applicants must be enrolled in an APA-accredited graduate program in Clinical or Counseling Psychology. Academic coursework and preparation must be in accordance with APA accreditation standards, and all required coursework must be completed prior to the start of internship. To be considered for the internship, applicants should have passed their comprehensive examinations, successfully submitted their proposal for dissertation, and accrued a minimum of 500 intervention hours prior to submitting their application. The Counseling Center values diversity and encourages applicants of diverse ethnic, racial, age, religious, sexual orientation, and other backgrounds to apply. Successful applicants have a strong interest in working with young adults and college student mental health, particularly within a highly multi-culturally diverse setting. They are typically interested in increasing their breadth of knowledge and clinical experience not only in individual and group counseling, but also in outreach, consultation, and supervision. Most have an interest in working in a university counseling center after graduation, although past interns have gone on to careers in other settings as well. It is strongly preferred that applicants have clinical experience in a college counseling setting, although we will consider those with relevant experience if a strong case is made for why the applicant is interested in such an internship setting.
The Doctoral Internship program at the UMBC Counseling Center is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and participates in the APPIC National Match Process. All internship applications must be submitted via the on-line APPIC Applications for Psychology Internship (AAPI On-line) system, available at www.appic.org (click on "APPI On-Line"). The program code for this internship is 208711. The deadline for application is November 1. We ask that recommenders use the Standardized Reference Form (SRF), which is available on the AAPI website.

Applications are initially reviewed by at least two staff members (potentially including a current intern) who each assign an initial rating based on the applicant’s educational preparation, clinical experience, personal essays, and letters of recommendation. The Selection Committee will then narrow this down to approximately 25-30 applicants who seem to be the best match based on their training needs and interests and the Counseling Center’s training and clinical opportunities.

Applicants will be notified via email whether or not they will be offered an interview no later than December 15th. Interviews will be scheduled for the beginning of January; in-person interviews are strongly preferred, but video-conferencing interviews are available without prejudice. Interviews will last a half day (either a morning or afternoon session) and will include one-on-one interviews with the Training Director as well as two groups of staff members. Applicants will also interview with the current interns and will have plenty of opportunity to ask them about their internship experiences. An optional tour of campus will be offered for those who are interested.

The Counseling Center abides by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

**Successful Completion of the Internship**

Successful completion of the internship will be dependent on a number of factors, including, but not limited to, accruing a sufficient number of clinical (500) and total (2000) hours to meet thresholds for licensure in most states. In order to successfully pass the internship, interns need to achieve ratings of 3 out of 5 (“Satisfactorily Proficient”) on 95% of items on the end-of-the-year Intern Evaluation, with no ratings of 1 (“Not Proficient”). Furthermore, the mean rating on each of the competencies must be at least a 3 (“Satisfactorily Proficient”). (See Appendix I for a detailed listing of the Goals, Objectives, and Competencies). A minimum of 30 hours of outreach programs or presentations, co-leading at least one therapy group, two case conference presentations, and active participation in meetings, seminars, and supervision are required. In addition, interns are required to complete an Intern Project (see Appendix XIV for details). There can be no serious ethical violations or legal breaches. The internship will not be considered complete until all client notes are completed, signed, and reviewed by their supervisor. (See Appendix II: Criteria for Completion of Internship.)

Although designed as a one-year internship, we understand that there may be extenuating circumstances (e.g., extended leave of absence for illness, accident, parental or other family leave) when this is not possible. While we will work with interns to meet all criteria (including number of clinical and total hours) for completion of the internship, all hours and other criteria must be completed within two years.

**Counseling Center Clinical Staff**

**Doha Chibani, MSW, LCSW-C, Case Manager.** Ms. Chibani is a magna cum laude undergraduate alumna of UMBC’s psychology program. She went on to graduate with a Master’s in clinical social work
from the University of Maryland Baltimore. Prior to joining the Counseling Center, Ms. Chibani provided therapeutic services to individuals on the Autism Spectrum, refugees, survivors of torture and trauma as well as victims of sexual abuse. In addition to clinical practice, she spent several years involved in mental health and social service research. Ms. Chibani espouses an integrative approach to therapy that incorporates trauma focused cognitive behavioral, developmental and existential components within a solution focused brief model. She has a strong interest in supporting the multicultural and international students, the transfer, commuter and non-traditional returning student body, as well as the LGBTQ population. She is fluent in English, Arabic and French.

**Jon Gorman, Psy.D., Psychologist.** Dr. Gorman completed his doctorate in clinical psychology from Loyola University Maryland in 2013. He completed his pre-doctoral internship at the Towson University Counseling Center. Dr. Gorman then worked as a staff psychologist at Chase Brexton Health Care for three years, specializing in individual and group therapy with individuals experiencing significant life transitions, individuals with diverse multicultural backgrounds, and individuals identifying as LGBTQ. Dr. Gorman is also an affiliate faculty member at Loyola University Maryland’s clinical psychology doctoral program. Dr. Gorman uses an integrative approach to therapy that includes mindfulness, self-compassion, client-centered therapy, and solutions-focused interventions.

**Susan Han, Ph.D., Assistant Director, Mental Health Promotion, Outreach and Evaluation.** Dr. Han graduated from Yale University and earned her doctoral degree in Clinical Psychology from George Mason University. She completed her Doctoral internship at the University of Michigan Counseling Center and a post-internship residency year at Cornell University’s Counseling and Psychological Services. She became licensed as a Psychologist by the State of Maryland in 2013. Dr. Han draws upon Cognitive-Behavioral and Humanistic theories in her approach to therapy. Her special interests include cross-cultural counseling, multicultural identity development, and the college adjustment process.

**Bruce Herman, Ph.D., Executive Director of University Health Services and the Counseling Center.** Dr. Herman graduated from Cornell University with a degree in Industrial and Labor Relations. He obtained his Ph.D. in Counseling Psychology from the University of Illinois at Champaign-Urbana. He came to UMBC in July 2012. Before coming to UMBC, he worked at Towson University Counseling Center from 1999-2012. From 1991-1998 Dr. Herman worked as a Psychologist at Loyola College in Maryland. Dr. Herman has taught in the Psychology and/or Education Departments at Towson University, Loyola College and University of Illinois. For many years, he also maintained a private psychotherapy practice. He led the Towson University Suicide Prevention Program and obtained grant support from the Substance Abuse and Mental Health Administration Garret Lee Smith Suicide Prevention Grant. He is interested in the integration of mindfulness in psychotherapy, campus suicide prevention and mental health promotion, and interpersonal psychotherapy.

**Whitney Hobson, Psy.D., Psychologist.** Dr. Hobson is a licensed psychologist who graduated from the American School of Professional Psychology at Argosy University, Washington, D.C. with a PsyD in Clinical Psychology. Dr. Hobson completed her doctoral internship at Basics Group Counseling, LLC through the Mid-Atlantic Internship Consortium providing individual and family therapy as well as psychological assessments to individuals of varied ages. She completed a postdoctoral fellowship followed by a position as a Behavioral Health Consultant at Chase Brexton Health Care in Randallstown, MD. During her time there Dr. Hobson spent two years providing clinical and outreach services in the form of individual, family, and couples therapy to both general and pediatric populations, serving individuals from diverse and varied backgrounds and within the LGBTQ community. Dr. Hobson uses an integrative approach to therapy and conceptualization primarily derived from cognitive-behavioral and relational-culture theories. Dr. Hobson’s interest and clinical experience include the treatment of anxiety and
depression, grief and loss and its broader application to adjustment and life transitions, establishment of identity and empowerment, interpersonal effectiveness, and culturally/socially focused issues.

Soonhee Lee, Ph.D., Externship Coordinator. Dr. Lee is a licensed psychologist who earned her doctoral degree in Clinical Psychology from the University of Rochester. She completed her doctoral internship and postdoctoral fellowship at the University of Rochester Counseling Center and then worked at the University of Delaware as a staff psychologist before joining the UMBC. Dr. Lee uses a mindfulness-based integrative approach in therapy that includes modern brief psychodynamic therapy, interpersonal psychotherapy, emotionally-focused therapy, and dialectical behavioral therapy. Her special interests include couples/relationship issues, multicultural/diversity issues, anxiety-spectrum disorders, life transition, grief, supervision and training.

Bruce Regan, M.D., Consulting Psychiatrist. Dr. Regan graduated from Harvard University with a degree in Social Relations and the University of Maryland Medical School with a medical degree. Dr. Regan is Board Certified in Psychiatry and Neurology and is a Distinguished Fellow of the American Psychiatric Association. He has held positions as Assistant Professor at UMB, staff psychiatrist at the Baltimore VA Hospital, Psychiatric Residency Training Director for the Maryland Mental Hygiene Administration, Acting Clinical Director of Springfield Hospital Center, Superintendent of Spring Grove Hospital Center, Medical Director of Queen Anne’s County Mental Health Center and Medical Director at Way Station, Inc. Throughout his career he has maintained a private practice.

Kristin Sagun, Ph.D., Associate Director, Clinical Services. Dr. Sagun is a licensed psychologist who graduated from Temple University with a Ph.D. in counseling psychology. She completed her doctoral internship at the Johns Hopkins University Counseling Center and a post-doctoral fellowship at the Center for Eating Disorders at Sheppard Pratt Hospital in Baltimore. In addition to her training and professional experiences in college counseling at a variety of institutions, Dr. Sagun has experience working in other college student affairs settings such as residential life, disability services, and health promotion. Dr. Sagun maintains an integrative orientation towards therapy that utilizes a humanistic, cognitive-behavioral, and psychodynamic foundation. Her special interests include college adjustment, group counseling, anxiety issues, LGBT identity development, and working with student athletes.

Emilie Stuber-Lawson Psy.D., Groups Coordinator. Dr. Stuber-Lawson earned her Bachelor’s degree from Loyola University Maryland and received her doctoral degree in Clinical Psychology from the George Washington University. She completed her doctoral internship at The Counseling Center at UMBC and became licensed as a Psychologist by the State of Maryland in 2013. In addition to previous clinical experience in university counseling centers, she has worked in private practice and community mental health settings. Dr. Stuber-Lawson works primarily from a psychodynamic foundation, and her special interests include identity development, relationship struggles, and mood disorders.

Patricia L. Wick, Ph.D., Assistant Director/Training Director. Dr. Wick graduated from the State University of New York, Stony Brook with a Bachelor’s Degree in Psychology, with a minor in Child and Family Studies. She received her doctorate in Clinical Psychology from the University of Miami (FL) after completing a doctoral internship at Taylor Manor Hospital. She completed a post-doctoral fellowship in Eating and Affective Disorders at the Sheppard and Enoch Pratt Hospital. She has been licensed as a Psychologist in Maryland since 1991 and has worked in out-patient, in-patient, clinic, government, and academic settings. She has maintained a private practice since 1992. Dr. Wick is integrative in her work, with specific emphases on psychodynamic, interpersonal, and family systems approaches. She has interests in training and supervision, mood and anxiety disorders, eating disorders, trauma, and women’s issues.