U of A CAPS Doctoral Internship Program Manual

Last updated: 8/4/2026

Overview of Counseling & Psych Services at the University of Arizona

Counseling & Psych Services (CAPS) at the University of Arizona (U of A) is the primary mental health unit on a large, public university campus in Tucson, where more than 45,000 students are educated. With over 60 staff, CAPS is the largest unit within Campus Health Services, a nationally ranked campus health service. CAPS works within its robust, interdisciplinary context alongside colleagues from Medicine and Health Promotions to meet the health needs of U of A students collaboratively and holistically. CAPS has two locations – one at Campus Health Services and one housed within the North Rec on the opposite side of campus. To meet a broader range of students, especially those who have been historically underserved, CAPS is placing an increasing number of embedded counselors providing site-based services across campus in cultural centers and large academic departments. In the dynamic and everchanging landscape of university counseling, CAPS strives to provide high-quality, inclusive, interdisciplinary, and culturally informed services to meet the mental health needs of all U of A students.

CAPS has two different locations, each housing approximately 20 clinicians. The "Main" clinic is physically housed within Campus Health and the "North" clinic is housed across campus in the Honors Village. Because of available space, interns' primary offices are location at the North clinic. Interns are each provided their own private office and computer. The administrative area is constantly staffed by administrative specialists and has scanners, printers, and a fax machine. In addition, the North clinic has a spacious group room and another multipurpose room. Both of these rooms are outfitted with audio/visual technology to aid with presentations. The North Clinic also has a kitchen/break room in which staff can eat and store/warm up their food. Interns leave the North clinic for two primary reasons during the workweek: They conduct walk-in/crisis shifts at the Main clinic (four hours per week) and also spend time at the location of their Emphasis Placement (five hours). Spaces at the emphasis sites vary, but generally include a private office and a computer for interns.

Overview of the CAPS Doctoral Internship Program

The aim of the U of A CAPS Doctoral Internship Program (CDIP) is to prepare the next generation of health service psychologists to serve as ethical and skilled clinicians in a variety of settings with high degrees of multicultural competence. To accomplish this aim, interns work as generalists in a university counseling center that serves a large public university. Further, training at CAPS, which is housed within U of A's nationally ranked Campus Health Services, comes with ample and consistent opportunities to collaborate with staff across medical, health promotion, and mental health services within a large interdisciplinary center.

CDIP program is built on values of justice, equity, and inclusion as we aim to serve the health needs of U of A's large and diverse campus community. Given our value and aim to serve all students, we aim to provide quality training to a wide variety of staff from different cultural, personal, and academic backgrounds. We deeply value all trainees as critical parts of our team and we want to provide as rich of a training experience as possible. We firmly believe that there is reciprocal benefit between the training we provide and the interns who join us. As a training program, we are tasked with keeping up to date with research, best practice, and our own development as supervisors to facilitate excellent training experiences. Interns (and other trainees) bring fresh perspectives, diverse experiences, and new skill sets that broaden CAPS' capacity to serve our students well.

As a matter of priority, CDIP views training, and university mental health more broadly, as community efforts. While we are proud of our center and centralized team, we work hard to establish connections with our campus partners to more comprehensively meet our students' needs. Unique training opportunities result from these partnerships as interns are able to identify more targeted and specific activities across campus to incorporate into their personal training plan.

In our internship program, each intern is paired with a primary supervisor who serves as their main source of support, consultation, and instruction. Interns also participate in group supervision (e.g., supervision of group, supervision of supervision) and secondary supervision of a specific interest area throughout their training experience. Each intern works with their supervisors and the training team to identify and work toward their training goals across multiple domains. Opportunities abound to develop competencies in direct clinical services, working with specific client populations, outreach, consultation, and multicultural mental health work. Through these opportunities and supervision, trainees develop, coalesce, and integrate their own unique theoretical approach to practice. Psychology interns also have opportunities to supervise trainees from a variety of academic training programs (e.g., social work, counseling, psychology) who are completing their externship at CAPS.
CAPS strives to offer top-tier training. With a constant goal to make our training better, continuous efforts are made to develop the supervisory team (e.g., through training and supervision of supervision), expand training possibilities within CAPS and through campus partners, enhance relevant technology (e.g., CAPS' state of the art video recording system), and to generally make training a priority at the center. We balance didactic learning opportunities and clinical practice to provide a graduated and dynamic structure to meet each trainee's professional needs. We also work from a developmental perspective to meet each trainee where they are and provide developmentally appropriate structure and expectations to prepare them for the next level of training or career.

As a team, CAPS staff consists of psychologists, licensed professional counselors, associate level counselors, licensed clinical social workers, administrative staff, clinical care coordinators, evaluation specialists, psychiatrists, nurse practitioners, doctoral interns, master's level externs,

doctoral psychology externs from the U of A Clinical Psychology program, and graduate assistants. We are a large, dynamic, and fun team that is committed to serving the needs of our community as best as we can. All of us are committed to making training an integral component of that aim and our doctoral internship is the centerpiece of our training program.

Membership and Accreditation Status

CDIP is currently an APPIC member program and participates in the APPIC match cycle as program #2594.

CDIP has been accredited, on contingency by the American Psychological Association since May, 2025. Questions related to the program's accredited status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington, DC 20002
Phone: (202) 336-5979 / E-mail: **apaaccred@apa.org**
Web: **www.apa.org/ed/accreditation**

Initial Post-Internship Positions

NOTE: Since our internship did not begin until the 2024-2025 cohort, only two years of placement data are currently available.

	2024-2025 & 2025-2026	
Total # of interns who were in the two cohorts	5	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	1	
	PD	**EP**
Academic teaching	**PD =**	**EP =**
Community mental health center	**PD =**	**EP =**
Consortium	**PD =**	**EP =**
University Counseling Center	**PD =**	**EP** = 2
Hospital/Medical Center	**PD =**	**EP =**
Veterans Affairs Health Care System	**PD =**	**EP =**
Psychiatric facility	**PD =**	**EP =**
Correctional facility	**PD =**	**EP =**
Health maintenance organization	**PD =**	**EP =**
School district/system	**PD =**	**EP =**
Independent practice setting	**PD** = 2	**EP =**
Other	**PD =**	**EP =**

Note: "PD" = Post-doctoral residency position; "EP" = Employed Position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.

Diversity and Non-Discrimination Policy

The U of A CAPS Doctoral Internship Program (CDIP) is built upon values of diversity and inclusion. Accordingly, we strive to build our foundation as a training program through these values. At CAPS, we work to create a climate where people feel valued and respected, no matter their background.

As a training program, we consistently re-evaluate and implement our recruitment strategies to diversify our incoming intern cohorts. Also, we are committed to increasing competence in domains of equity, justice, and inclusion not only in our interns, but also in our staff as a whole. We believe that in order to "live into" our training program's values of non-discrimination and inclusion, that staff and interns alike need to be committed to "doing our own work" and humbly examining how we interact and work together to serve our students.

At CAPS, we welcome intern applicants from diverse backgrounds not only because it is consistent with our values, but also because we believe diversity improves our training program and agency as a whole. Different voices from different experiences, cultural contexts, traditions, and lenses adds to our ability to meet the needs of our diverse campus community. Additionally, having diversity in our interns contributes the growth of our staff. One of the primary benefits of having an internship in our agency is having consistent influx of new and fresh perspectives, thereby promoting the staff's growth, enhancing its competence, and preventing its stagnation. As our trainees and staff become more diverse, we become more equipped to meet the needs of our students.

The CAPS Training Program is also committed to training its interns (and all trainees) in domains of multicultural work with diverse clientele. While we see multicultural sensitivity as foundational to, and interwoven into, all components of our work, we provide tangible diversity training to interns through multiple avenues. For instance, we train our supervisors to provide supervision through multicultural, decolonizing, and feminist frameworks. As a result, interns work with their supervisors to develop competencies in working with individuals from diverse backgrounds and explore their own perspectives, socialization experiences, and biases. We also have a Justice, Equity, Diversity, and Inclusion (JEDI) Seminar as an hourly didactic every week for interns. In the JEDI seminar, interns will learn about principles of cultural humility and JEDI concepts as they relate to practicing effectively as a psychologist. As part of that process, interns will be invited to explore their own cultural lenses, including biases and patterns, that may impact their work. All case-presentations are expected to be appreciative of multicultural and diversity issues. Further, we aim to facilitate interns learning about what it means to live and practice on Tohono O'odham and Pascua Yaqui lands with respect, humility, and honor to the peoples who for centuries stewarded the land on which U of A and Tucson was built.

The CAPS Training Program is also committed to ongoing improvement of its diversity initiatives. Justice, Equity, Diversity, and Inclusion are foundational to our training program. As such, we will continue to engage in multifaceted evaluation (training staff, interns, clients) and resulting development of our training in multicultural diversity.

Training Director – Joel Gaffney, PhD

1. Suggests training policy for review by CAPS senior staff. The Training Director remains responsible for all final training policy decisions.
2. Training Director delegates and supervises the coordination of training activities (e.g., supervision assignments, training seminar facilitation, etc.
3. Integrates input from the training committee and other staff to develop and modify the training program.
4. Reviews and recommends training procedures and oversees their implementation.
5. Arranges all supervisory assignments and coordinates the CAPS staff to fill a variety of training roles (i.e. primary supervisor, secondary supervisor, group supervisor, etc.)

6. Coordinates the Intern supervisory evaluation and feedback process.
7. Coordinates Intern recruitment, application, interview, and selection processes, as well as maintains liaisons with appropriate faculty from the students' academic programs.
8. Serves as liaison between Interns and staff, providing feedback, processing grievances, etc.
9. Documents and maintains Interns' training records including hour logs, evaluation, and due process procedures.
10. Administrator of self-study for APA accreditation and ensures compliance with APA standards.
11. Oversees the management of the doctoral practicum-training program.

Training Committee: The Training Committee serves as a "think tank" for administrative decisions, policy-making, and the development of procedures for our doctoral internship program. The committee is made up of administrative staff positions (Director, Clinical Coordinator, and Training Coordinator) as well as other identified senior staff. The Training Committee meets twice a month.

Supervisors Team: Doctoral interns at CAPS receive formal supervision in a variety of ways: primary supervision, secondary supervision, supervision of group therapy, supervision of supervision, and supervision of behavioral health activities. The Supervisors' Team meeting provides an opportunity for formal supervisors to share information about trainee development, including individual strengths and areas of growth, as well as explore strategies to facilitate trainee progress. Members of the Supervisors' Team meet twice a month.

Telesupervision policy: By default, the CDIP internship takes place in-person, including supervision. All CDIP supervisors are on-site staff who conduct supervision in-person. However, if there are extenuating circumstances that prevent in-person meetings (e.g., weather conditions, remote work, or health risks), supervision via telehealth will be used to ensure sufficient amounts of supervision are provided to interns. Telesupervision is *only* used as a temporary substitute when supervisors or interns are working off-site. CDIP staff take measures to ensure privacy and confidentiality of supervisees and clients. When working off-site and conducting telehealth supervision, supervision is conducted using HIPAA-compliant Zoom software that is managed and held secure by the Campus Health IT team. Supervisors and supervisees ensure that both parties are in private spaces. Telesupervision is only conducted after the supervisory relationship has been established within the in-person dyad. Supervisors inform interns about expectations for privacy during telesupervision in person, prior to telehealth supervision being conducted. Since CDIP does not have any exclusively "off-site" supervisors, they do not handle supervisee files or client documentation anywhere except within the CAPS facility.

Primary Intern Supervisors

Aaron Barnes, PsyD (CAPS Director): Dr. Barnes has worked in the University setting for seven years in a variety of roles within University Counseling Centers. These roles include coordinating areas of public health, outreach, and LGBTQPIA+ programs. Aaron enjoys mentoring students and helping to develop future leaders in mental health care. His clinical work focuses on identity development, substance abuse recovery, crisis support, and LGBTQPIA+ support. He works within Relational-Cultural and ACT frameworks. He believes that the client is the expert on their own life and strives to connect with clients authentically.

Ishani Deo, PhD (CAPS Psychologist)**:** As CAPS ADHD Clinic coordinator, Dr. Deo conducts ADHD evaluations in addition to providing individual counseling and group facilitation. She currently serves as co-chair of the CHS Diversity and Inclusion committee and the CAPS Social Justice Steering Committee.

Joel Gaffney, PhD (CAPS Training Director): Dr. Gaffney oversees the Training Program. He also acts as a generalist providing services such as include individual therapy, group therapy, workshops, crisis response, and outreach. He is an active member of the Social Justice Steering
Committee and Groups Committee. Dr. Gaffney has worked in three different university counseling centers and loves working in dynamic, diverse, and vibrant campus communities. He

works from a predominantly psychodynamic lens with other components like mindfulness and ACT integrated into his treatment approach.
Leslie Ralph, PhD (CAPS Psychologist): Leslie is a counselor at CAPS and the coordinator of mental health promotion and communication. She provides individual and couple's counseling and facilitates groups and workshops. She supervises marketing and mental health promotion graduate assistance and interns and is a member of the group committee, eating disorder treatment team, and the CAPS program evaluation team.

Jennifer Jepson, PsyD (CAPS Psychologist): Jennifer is a counselor at CAPS and a member of the Training committee and the Social Justice Steering Committee. She is one of the facilitators of the White Accountability group for CAPS staff. Jennifer provides crisis intervention, biopsychosocial assessment, treatment planning, and trauma-informed therapy services at CAPS. She has also worked at the Student Health and Counseling Center at the University of Alaska, Anchorage.

Training Activities

Interns participate in the following training activities during their internship year **(Number of weekly hours emboldened)**:

Clinical Activities

Counseling and Consultation (C&C): The initial contact with each student. Clients self-schedule C&C meetings on the CAPS website (www.caps.arizona.edu) or by phone. C&C meetings are scheduled for one hour. In C&C meetings, interns gather brief family history, assess for safety, conduct an intervention(s) if applicable, and make appropriate internal and external referrals. C&Cs are designed to allow a range of clinical interventions that are driven by the presentation of the client. C&Cs might include single-session interventions and/or referral to other longer term modalities of treatment (individual counseling, group counseling, psychoeducational workshops, psychiatry, etc.).

*Interns conduct four C&Cs per week **(4 hours).**

Individual counseling: Interns provide individual counseling. While interns are expected to develop and integrate their theoretical approaches during their training year, they are also encouraged to use their preferred approach and evidence-based interventions with their clients. Interns are expected to manage their caseloads based on the allotted time for individual clients. Most cases are considered “short term” (fewer than six sessions) and there is a possibility to carry a limited number of longer term cases. Interns are encouraged to develop their ability to deliver a range of different types of interventions within their individual caseloads to flexibly and efficiently meet the needs of students within the allotted hours for individual therapy.

*Interns are allotted 10 hours per week for individual therapy **(6 hours).**

Assessment: Interns are trained in and conduct thorough clinical assessments of new clients presenting to CAPS, as well as crisis assessments. Interns also utilize the Behavioral Health Measure 43-item questionnaire (BHM-43), a mental health assessment. This tool takes 3.5 minutes to complete and measures domains of well-being, mental health symptoms, and life functioning. The BHM-43 is administered before each scheduled client contact and interns learn to interpret and provide feedback of the results, as well as incorporate them into treatment planning. In supervision, interns discuss the use of other instruments with their ongoing clients. They also learn to identify those clients who need referrals for more comprehensive psychological evaluations.

Interns with an interest in gaining experience with more comprehensive assessments may have the opportunity for this through an emphasis placement through the CAPS ADHD Clinic under Ishani Deo, PhD and Shana Burgos-Destefanis, PhD. Clinicians in the ADHD clinic administer psychodiagnostics batteries aimed at informing diagnosis or diagnostic rule out of ADHD. All clinical and assessment delivery within the ADHD clinic is overseen by an on-site supervisor as well as the intern's primary CAPS supervisor. Assessment training experiences through the ADHD Clinic are not a standard part of CDIP.

Interns are encouraged to use any assessment measure as determined in collaboration with their primary supervisor to help with diagnosis and/or treatment planning for students with more complex presentations. Other assessments might include the YBOCS, BDI, BAI, and others.

*Interns conduct assessment within the context of individual counseling. As such, no additional weekly time is allotted for assessment specifically.

Group therapy: Interns are expected to co-facilitate one process group per semester with a senior staff member. Interns will cofacilitate general process therapy groups (called "Understanding Self and Other" groups) with a licensed staff psychologist. "Groups: Process and Practice" (Corey, Corey, & Corey, 2025) is used as a theoretical framework for group facilitation and in supervision of group.

*Interns co-facilitate one weekly group each semester **(1.5 hours).**

Emphasis area: Interns engage in site-based services at their emphasis area site. Emphasis area sites are identified at the beginning of the training year. Placements are decided based on intern interest, availability at the site, and goodness of fit as determined by the site, the intern, and the Training Committee. Examples of campus community partners that are possible emphasis area sites include cultural centers (African American Student Affairs, LGBTQ Affairs, Native American Student Affairs, etc.), The SALT Center (support for neurodiverse students), Athletics, and others. Clinical activities at each site are defined by the secondary supervisor at the site and may include drop-in or "Let's Talk" hours, conventional individual therapy, groups and workshops, programming, etc.

*Interns spend one day (7 hours plus 1 hour supervision) per week at their emphasis area site. The amount of time that is spent providing direct clinical intervention depends on the site **(7 hours).**

Clinician on Duty: Interns take one "Clinician on Duty" (COD) shift per week at CAPS Main, which is physically located within Campus Health Services. During this shift, interns respond to students in crisis, offer consultation to the campus community (staff, faculty, parents, students), and field miscellaneous encounters that present. Given its location, interns get experience working as crisis clinicians in an integrated health clinic. CODs are responsible to

respond to Campus Health medical staff "walk ups", which involve patients who presented for medical concerns but have also been determined by the medical provider to be in psychological distress.

*Interns complete a weekly 4-hour COD shift **(4 hours).**

Workshop: Interns deliver psychoeducational workshops, renamed in 2026 to "Mental Health Foundations" workshops that have already been developed and used at CAPS to students who are referred. Workshops were developed from evidence-based approaches like Cognitive Behavioral Therapy and Acceptance and Commitment Therapy. They are structured, manualized interventions with some limited time for students to process material.

*Interns provide one hour of Mental Health Foundations per week **(1 hour).**

Provision of supervision: Interns are trained in the domain of supervision as a part of their internship. CDIP has relationships with the Psychology Department and the Mental Health Counseling program at the U of A, two programs that regularly send graduate student externs seeking to satisfy their practicum requirements for their respective degrees. CDIP interns supervise one of these externs one hour per week. As the externs' supervisors, the interns are, in part, responsible for the quality of work of their supervisee. Intern supervisors are the primary source of support for the externs, hold responsibility to help their supervisee get onboarded into our system and ready to see clients, and initial signatures on extern notes. Both the extern's work and the intern's supervision is ultimately overseen by the intern's primary supervisor, a licensed psychologist who signs extern charting after the extern and intern. Interns are supported in providing supervision in the Supervision of Supervision meeting and in consultation with their own supervision with their primary supervisor. Intern supervisors' chart review and other administrative tasks (e.g., recording review) take place during the interns administrative time.

*Interns provide one hour of supervision per week **(1 hour).**

Didactics

Justice Equity Diversity and Inclusion (JEDI) Seminar: Interns meet weekly in the JEDI seminar to learn about and discuss issues surrounding justice, equity, diversity, and inclusion. Topics and syllabi (including names of presenting staff) are provided at the beginning of the year.

*JEDI Seminar occurs for one hour every week **(1 hour).**

Rotating Seminar: The Rotating Seminar involves staff presenting and facilitating discussion on topics relevant to university mental health. Topics and syllabi for Rotating Seminar (including names of presenting staff) are provided at the beginning of the year.

* Rotating Seminar occurs biweekly. Each biweekly meeting is one hour **(1 hour).**

Journal Club: Interns take turns selecting readings on topics relevant to university mental health for discussion as a group. Interns will distribute their chosen reading to the rest of the group two weeks prior to the discussion date. Topics often involve the intern's clinical or research interests, multicultural topics, evidence-based approaches to treatment, etc.

*Journal Club occurs biweekly. Each biweekly meeting is one hour **(1 hour).**

Outreach: Outreach is an core area of service delivery in university mental health. Interns are expected to participate in outreach to the U of A Campus community. Outreach requests will come from the CAPS outreach coordinator. Interns are expected to participate in at least four outreach events per semester at CAPS. These events can come in the form of tabling, presentations, and other engagements.

*Interns are expected to participate in four outreach events per semester.

Supervision

Primary Supervision: Interns are paired with a primary supervisor with whom they will meet for supervision for two hours each week. **(2 hours)**

Supervision of Group: Interns meet with their group co-facilitator who is a licensed CAPS staff member for 30 minutes of supervision of group each week. Supervision of group will focus on issues related to group therapy. **(.5 hours)**

Emphasis Area Supervision: Interns meet with an identified secondary supervisor at their emphasis area site for one hour of supervision per week. Emphasis area supervision will focus on clients seen and work done at the emphasis area site. **(30 minutes to 1 hour)**

Group Supervision: Interns will engage in one hour of biweekly group supervision in which topics related to clinical work with students at CAPS, administration, and professional development will be discussed. Recording review of intern sessions is also regularly used in Group Supervision. (**1 hour)**

Supervision of Supervision: Interns will engage in one hour of biweekly supervision of supervision (alternating with group supervision) in which interns will discuss topics related to provision of supervision to externs and group supervision. **(1 hour)**

Other

Administration: Interns have eight hours of administrative time spread out through each week in which they can complete charting, consult with colleagues, review recordings, engage in administrative tasks to do with supervising an extern, complete trainings, take a break, eat, etc. One hour of administration is estimated for each intern's emphasis placement **(8 hours)**

Supervision of Extern: Interns supervise an extern each semester. Externs are trainees completing part-time placements for their graduate level training programs (e.g., psychology, counseling, social work). The intern is the primary supervisor to their assigned extern supervisee. All supervisory work provided by the extern will be supervised by the intern's primary supervisor. As a supervisor, interns are responsible for reviewing clinical documentation, reviewing the extern's recorded sessions, general administrative support for the extern, collaborating with the extern to work toward their training goals, and evaluation of the extern.

*Interns meet with their assigned supervisee for one hour per week **(1 hour)**

All staff meeting: Interns will attend a weekly all-staff meeting in which important CAPS announcements are delivered by leadership and discussed. Twice per semester, these meetings will consist of all Campus Health staff. **(1 hour)**

Interdisciplinary consult: Interns are invited (not expected or required) to attend interdisciplinary case consultation with other CAPS staff once per week. **(1 hour, optional)**

Sample Weekly Intern Schedule

Activity	Hours	Description
Staff Meeting	1	Meeting with all CAPS staff.
Counseling & Consultation	4	Initial point of contact for students. Single session therapy, assessment, referral to appropriate resources.
Available (individual therapy)	6	Ongoing clients
Psychoeducational workshops	1	CBT and ACT based workshop delivery.
Group Therapy	1.5	Cofacilitation of process group.
Supervision of Group	.5	Supervision with group co-facilitator.
Administration	7	Time for charting, consultation, other administration. CAT meeting attendance included in this number.
Individual Supervision	2	With primary supervisor
Supervision of Trainee	1	Providing primary supervisor for extern
Supervision of Supervision	1	Supervision focused on intern supervision of trainee.
Group Supervision	1	Clinical group supervision.
Journal Club	.5	Intern led reading and discussion. One hour every week. Alternates with Rotating Seminar
Rotating Seminar	.5	Didactic on topics relevant to university mental health. One hour every week. Alternates with Journal Club
Emphasis Area	7	Time at emphasis site (>3-4 hrs direct, 1 hr admin)
Emphasis Area Supervision	1	With emphasis site supervisor
JEDI Seminar	1	Didactics on Justice, Equity, Diversity, and Inclusion
Clinician On-Duty	4	Crisis/on-call responder within an integrated health clinic. Total time on-shift, not necessarily all direct hours
Total Weekly Hours:	**40**	
Weekly Supervision Total:	5.5	
Weekly Direct service estimated total:	19.5	
Weekly Didactic Total:	2	

Training Program Policies

Interns will be introduced to the following policies and procedures during orientation. Supervisors in the CAPS Training Program expect all trainees to understand and adhere to these policies throughout their time at CAPS, in addition to all CAPS and Campus Health policies and procedures. If a trainee is ever unsure about any policy, they are expected to consult their supervisor to ensure proper understanding and compliance.

DOCUMENTATION

Forms

Consent to Treat and Authorization to Bill - All CAPS students must consent to treatment before initiating any service

- Consent to Treat and Auth to Bill forms are issued through Point and Click (PnC; Electronic Medical Record).
- Front desk staff typically issue and collect these forms at student check-in.
- In rare exceptions, CAPS trainees may issue Consent to Treat and Auth to Bill forms directly through PnC.

Consent to Work with a Counselor-in-Training

- Required for all students working with a trainee.
- Trainee manually issues through PnC (NOT ISSUED BY FRONT DESK).

Informed consent for video recording

- Required for all ongoing therapy with a trainee.
- Trainee manually issues through PnC (NOT ISSUED BY FRONT DESK).
- Trainees should request consent for video recording for all clinical services, including Counseling and Consultation (C&C) sessions.
    - If a student does not consent to being recorded at a C&C, the trainee should proceed with the appointment.
    - The trainee must consult with a supervisor as soon as possible afterward.
    - The trainee would not be able to work with the student in ongoing counseling.

Discussion of consent

- All consent forms must be reviewed with the student at the start of each course of treatment / initial clinical encounter.

- Trainees must obtain verbal consent before initiating services.

Informed Consent Charting Expectations

- The informed consent process is to be documented in each first clinical encounter with a CAPS student. Information that needs to be covered and then documented in that encounter includes:
    - Description of therapy, including techniques, goals, and anticipated duration.
    - Confidentiality and limits
        - Status as a mandated reporter of abuse of vulnerable people (children, elderly, etc.,).
        - Duty to attempt to help keep people safe when a risk to self or other is identified.
    - Risks and benefits of treatment (e.g., disclosure of the potential emotional impact).
    - Fees and policies, including no-show and late cancellation policies.
    - Voluntary nature of treatment and the student's right to withdraw at any time without penalty.
    - Emergency procedures including providing CAPS 24-hour crisis support line.
    - Status as an unlicensed trainee clinician.
    - Name and contact information of licensed supervisor.

Treatment Plans

- Trainees, like all clinical CAPS staff, are expected to complete a treatment plan with ongoing clients by the third session.
- Treatment plan templates can be selected in "Encounter Pad" within PnC.
- Trainees should work with supervisors to develop competency in collaborative treatment planning with students.
- When treatment plan is completed, the trainee sends a copy of the plan via Secure Message within PnC (NOT EMAIL) in which the trainee also asks the student if they agree to the treatment plan. An affirmative response from the student serves as the student's signature. Trainees must make an attempt at retrieving a signature to formalize a collaborative treatment agreement, but a signature is not necessary to proceed with treatment.

Discharge Notes

- Trainees must complete a discharge note for all cases on caseload that are discontinued.

    - Students are considered on caseload following a second contact in ongoing counseling.
- Discharge notes must be manually generated through Encounter Pad within the student's chart.

ASESSMENT OF RISK

- CAPS staff, including trainees, assess risk (homicidal and suicidal ideation) upon:
    - First meeting an individual client.
    - Anytime that risk is indicated on BHM43 or in-session.
- Suicidality is specifically assessed using the Columbia-Suicide Severity Rating Scale (CSSRS) upon first meeting an individual client and anytime suicidality is otherwise indicated.
    - If a CSSRS score is elevated, the trainee is expected to follow written guidelines in PnC chart and in accordance with CAPS policies and procedures. The trainee is also expected to consult with a licensed supervisor as soon as possible, should CSSRS/risk assessments be elevated.
- Trainees will cover CAPS polices and best practices surrounding risk assessment in both group and individual supervision.
- Should a trainee have any questions or uncertainties about risk assessment at any point, they are expected to ask a supervisor for clarification.

CLIENT FOLLOW UP

- If a student misses an appointment (cancellation or no-show) and does not contact the provider, the provider must reach out by the end of the same day to check in and offer to reschedule.
- If there are concerns about risk to self or others, or other factors that suggest urgency, trainees must consult with their supervisor by the end of the day to develop an appropriate follow-up plan
- At a minimum, providers must make **at least two follow-up contact attempts**. If there is any concern about safety, trainees should work with their supervisor to determine the appropriate frequency, number, and method of outreach (e.g., secure message, phone call).
- If a student is nonresponsive to attempts at follow up, in the final outreach, the provider must indicate that this will be the final time that the they will be extending follow up, that the student's care will be discharged, and that the student is welcome to reinitiate care at CAPS at any point so long as they remain eligible for services.

Intern Selection and Academic Preparation Requirements Policy

Application Process
The U of A CAPS Doctoral Internship currently offers 2 full-time internship positions. Students interested in applying for the internship program should submit an online application through the APPIC website (www.appic.org) using the APPIC Application for Psychology Internships (AAPI).

A complete application consists of the following materials:

1. A completed online AAPI
2. Cover letter (as part of AAPI)
3. A current Curriculum Vitae (as part of AAPI)
4. Three Standard Reference Forms, two of which must be from persons who have directly supervised your clinical work (as part of AAPI). ***Please submit no more than three SRFs.***
5. Official transcripts of **all** graduate coursework

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

Application Screening and Interview Processes
The CAPS Doctoral Internship Program will base its selection process on the entire application package noted above; however, applicants who have met the following qualifications prior to beginning internship will be considered preferred:

1. A minimum of 500 direct clinical contact hours (up to 100 assessment hours can be used to count toward this).
3. Dissertation proposal defended;
4. Some experience and/or special interest in working with diverse populations;
5. Practicum experience working with young adults. Experience working in university counseling is especially preferred.
6. Current enrollment and good standing in an APA- or CPA-accredited doctoral program.

All applications are reviewed by U of A CAPS Training Committee using a standard Application Rating Scale and evaluated for potential goodness of fit with the internship program. The Training Committee meets to determine which applicants to invite for interviews based upon the results of this review process.

Applicants are notified whether they have received an interview by email on or before December 15. Interviews are scheduled in January on a first come, first served basis. Interviews take place via videoconference with the entire Training Committee. Interviews

are conducted using a standard set of interview questions, although members of the Training Committee may ask additional interview questions of applicants as appropriate.

Participation in the APPIC Match

The Training Committee holds a meeting within two weeks of the final interviews being completed and before APPIC's Rank Order Deadline to determine applicant rankings. The full application package and information gleaned from the interview process are utilized to determine applicant rankings. As a member of APPIC, the U of A CAPS training program participates in the national internship matching process by submitting its applicant rankings to the National Matching Service. The U of A CAPS training program 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.

All interns who match to the U of A CAPS Doctoral Internship must provide proof of citizenship or legal residency and must successfully pass a fingerprint-based background check before beginning employment. Interns also must provide results from a tuberculosis (TB) screening test from the previous 12-months. Instructions for providing this information or completing the background check and TB screening will be sent out to all who match after the match process is complete.

Questions regarding any part of the selection process or U of A CAPS Doctoral Internship academic preparation requirements may be directed to the U of A CAPS Training Director.

Intern Salary, Benefits, and Resources

Interns are paid an annual salary of $37,500. Interns are classified as staff at Campus Health Services and therefore receive employee benefits that include medical, dental, vision, retirement, short-term disability and life insurance, and qualified tuition reduction. Interns also receive $600 to use for professional development opportunities such as attending conferences or other trainings during the internship year. Interns also have access to the facilities in the new (2019) campus recreation center in which their offices are housed.

Interns also have access to the University of Arizona Library System. With five campus libraries, interns are connected to a vast range of resources, including academic journals and multimedia databases. Members of the CAPS Training Program use materials from the libraries for training in clinical supervision and didactics. Interns are also welcome to freely access resources in the libraries independently. Additionally, interns have access to the CAPS Training Library, located at CAPS North.

CAPS staff, including interns, are supported by administrative units. Campus Health Services, in which CAPS is housed, has a dedicated Information Technology Team and Facilities

Management. Both CAPS offices are also staffed by robust administrative support teams.

In 2022, the CAPS Training Program sought and received grant funding to purchase a state-of-the-art recording system, which was installed in 2023. The system offers interns access to high-quality audio and visual recordings of their clinical work for review in supervision and other training contexts. With the software, interns and supervisors can easily place timestamps, make comments, and evaluate recordings with secure user-friendly software.

Evaluation, Retention, and Termination Policy

The U of A CAPS Doctoral Internship Program (CDIP) requires that interns demonstrate minimum levels of achievement across all competencies and training elements. Interns are formally evaluated by their primary supervisor twice annually, at the midpoint and end of the internship year. Evaluations are conducted using a standard rating form, which includes comment spaces where supervisors include specific written feedback regarding the interns' performance and progress. The evaluation form includes information about the interns' performance regarding all of U of A CDIP expected training competencies and the related training elements. Supervisors review these evaluations with the interns and provide an opportunity for discussion at each timepoint.

A minimum level of achievement on each evaluation is defined as an average rating of "4" for each competency, with no element rated less than a 3. The rating scale for each evaluation is a 5-point scale, with the following rating values: 1 = Remedial, 2 = Beginning/Developing Competence, 3 = Intermediate Competence, 4 = Proficient Competence, 5 = Advanced Competence. If an intern receives a score less than 3 on any training element at the mid-year evaluation, or if supervisors have reason to be concerned about the student's performance or progress, the program's Due Process procedures will be initiated. The Due Process guidelines can be found in the U of A CDIP Training manual. Interns must receive an average rating of 4 or above on all competencies and no ratings below a 3 on all training elements to successfully complete the program.

Additionally, all U of A CDIP interns are expected to complete 2000 hours of training during the internship year. Meeting the hours requirement and obtaining sufficient ratings on all evaluations demonstrates that the intern has progressed satisfactorily through and completed the internship program. Intern evaluations and certificates of completion are maintained indefinitely by the Training Director in a secure digital file. Intern evaluations and any other relevant feedback to the interns' home doctoral program is provided at minimum at the mid-point and end of the internship year. Doctoral programs are contacted within one month following the end of the internship year and informed that the intern has successfully completed the program. If successful completion of the program comes into question at any point during the internship year, or if an intern enters the formal review step of the Due Process procedures due to a concern by a staff member or an inadequate rating on an

evaluation, the home doctoral program is contacted. This contact is intended to ensure that the home doctoral program, which also has a vested interest in the interns' progress, is kept engaged to support an intern who may be having difficulties during the internship year. The home doctoral program is notified of any further action that may be taken by U of A CDIP because of the Due Process procedures, up to and including termination from the program. In addition to the evaluations described above, interns complete an evaluation of their supervisor and a program evaluation at the mid-point and end of the training year. Feedback from these evaluations is reviewed by the U of A CDIP Training Committee and used to inform changes or improvements made to the training program. All evaluation forms are available in the U of A CDIP training manual and via the U of A CDIP intranet.

Leave Policies

Interns are granted PTO time in accordance with full-time employees at the University of Arizona, which are outlined here: www.hr.arizona.edu/pto#sick.

Leave hours are composed of paid sick time (8 hours accrued per month), paid vacation time (22 vacation days per year).

Interns also receive 5 days of professional development time during their year, which might accommodate conference attendance, dissertation defenses, graduation ceremonies, etc., Supervisor approval is need to take professional development time.

Interns are expected to report all leave to primary supervisors for and approval if needed. In addition, interns or their supervisors are expected to report unexpected absences to the "Daily Schedule Updates" channel on teams and indicate if any help is needed for client rescheduling.

Due Process Procedures

Due Process Procedures are implemented in situations in which a supervisor or other faculty or staff member raises a concern about the functioning of an intern and **Grievance Procedures** are initiated when an intern raises a concern involving a CAPS staff member or the training program itself. CAPS Due Process and Grievance procedures occur in a step-wise fashion, involving greater levels of intervention as a problem increases in persistence, complexity, or level of disruption to the training program. Due Process procedures will be used when an intern's behavior is problematic. In each case, the Training Committee will consider whether the involved party had "legitimate reasons to deviate from training practice (e.g., ADA accommodations)" (Aosved, 2017) and Due Process will not be applied if the Training Committee considers the behaviors to be explained by these reasons.

Rights and Responsibilities

These procedures are a protection of the rights of both the intern and the doctoral internship training program, and also carry responsibilities for both.

Interns: The intern has the right to be afforded with every reasonable opportunity to remediate problems. These procedures are not intended to be punitive; rather, they are meant as a structured opportunity for the intern to receive support and assistance in order to remediate concerns. The intern has the right to be treated in a manner that is respectful, professional, and ethical. The intern has the right to participate in the Due Process procedures by having their viewpoint heard at each step in the process. The intern has the right to appeal decisions with which they disagree, within the limits of this policy. The responsibilities of the intern include engaging with the training program and the institution in a manner that is respectful, professional, and ethical, making every reasonable attempt to remediate behavioral and competency concerns, and striving to meet the aims and objectives of the program. Interns also have the right to file grievances through CAPS Grievance procedures in cases when they experience harm inflicted by another staff member or have concerns about some aspect of the training program.

CAPS Training Program: CDIP has the right to implement these Due Process procedures when they are called for as described below. The program and its faculty/staff have the right to be treated in a manner that is respectful, professional, and ethical. The program has a right to make decisions related to remediation for an intern, including probation, suspension, and termination, within the limits of this policy. The responsibilities of the program include engaging with the intern in a manner that is respectful, professional, and ethical, making every reasonable attempt to support interns in remediating behavioral and competency concerns, and supporting interns to the extent possible in successfully completing the training program.

Definition of a Problem

For purposes of this document, a problem is defined broadly as an interference in professional functioning which is reflected in one or more of the following ways: 1) an inability and/or unwillingness to acquire and integrate professional standards into one's repertoire of professional behavior; 2) an inability to acquire professional skills in order to reach an acceptable level of competency; and/or 3) an inability to control personal stress, psychological dysfunctions, and/or excessive emotional reactions which interfere with professional functioning.

Issues and problems that require remediation typically can be differentiated as “Insufficient Professional Competence,” “Inadequate Performance,” and “Egregious Infractions,” which are defined below.

Insufficient Professional Competence, Inadequate Performance, and Egregious Infractions

"Insufficient professional competence" is defined as interference in professional functioning which is reflected in one or more of the following ways:

- An inability and/or unwillingness to acquire and integrate minimum professional standards into one's professional behavior at the workplace.
- An inability to acquire professional skills in order to reach an acceptable level of competency.
- An inability to control personal stress, psychological dysfunction, and/or excessive emotional reactions which interfere with professional functioning and clinical/counseling work.

"Inadequate performance" can be differentiated from "insufficient professional competence" in that it merely reflects a skill deficit, while insufficient professional competence reflects behavior and/or attitudes that prevent an intern from reaching competent practice.

"Egregious Infractions" represent behaviors that, even if observed a single time (i.e., do not require observation of a pattern), must be immediately addressed to prevent further harm to clients and/or colleagues. Examples of Egregious Infractions include but are not limited to: Hate speech, bias, physical violence, emotional abuse, harassment, and intoxication at the workplace.

Problems that require intervention: It is a professional judgment as to when an issue becomes a problem that requires intervention. Issues typically become identified as problems that require intervention when they include one or more of the following characteristics:

1. The intern does not acknowledge, understand, or address a problem when it is identified.
2. A problem is not merely a reflection of a skill deficit which can be rectified by academic, didactic training, or supervision.
3. The quality of services delivered by the intern is negatively affected to a significant degree.
4. A problem is not restricted to one area of professional functioning.
5. People from vulnerable, underserved, and/or systemically oppressed populations are harmed by an intern's problematic behavior.
6. A disproportionate amount of attention by senior staff is required.
7. The intern's behavior does not change as a function of feedback, remediation efforts, and/or time.
8. A problematic behavior has potential for ethical or legal ramifications as defined by the supervisor's ethical code, if not addressed.
9. The intern's behavior negatively impacts the public reputation of the agency
10. The problematic behavior potentially causes harm to a patient; and/or,

11. The problematic behavior violates appropriate interpersonal communication with agency staff.

Insufficient Professional Competence, Inadequate Performance, and Egregious Infractions are each addressed using CAPS Due Process Procedures.

Due Process Procedures
Due Process procedures are activated when one of the following occurs:

- An intern earns an unacceptable rating on any evaluation form element as defined by the form completed by a supervisor.
- A supervisor documents a written concern recommending Due Process procedures on a formal evaluation.
- Any member of the CAPS staff documents a written concern with the Training Director (likely to happen in cases of Egregious Infractions or problems so serious that they must be addressed prior to next formal evaluation period).

Informal Review
When a supervisor or other staff member believes that an intern's behavior is becoming problematic or that an intern is having difficulty consistently demonstrating an expected level of competence, the first step in addressing the issue should be to raise the issue with the intern directly and as soon as feasible in an attempt to informally resolve the problem. This may include increased supervision, didactic training, and/or structured readings. The supervisor or staff member who raises the concern should monitor the outcome.

Formal Review
If an intern's problem behavior persists following an attempt to resolve the issue informally, or if an intern receives a rating below a "3" on any competency on a supervisory evaluation, the following process is initiated.

Notice:
The intern will be notified in writing that the issue has been raised to a formal level of review, and that a Hearing will be held.

Hearing:
The reporting supervisor or staff member will form a two-person committee with the Training Director (TD) to hold a hearing with the intern within 10 working days of issuing a Notice of Formal Review to discuss the problem and determine what action needs to be taken to address the issue. If the TD is the supervisor who is raising the issue, or if the TD deems it necessary for another reason, a larger committee will be formed. The larger committee will consist of three CAPS staff members who are not the intern's current

individual supervisor. Committee members will gather information from any parties connected to the situation, either verbally during the Hearing or in writing, including the intern and the intern's current individual supervisor. The committee will discuss the case and arrive at a consensus on one of the following actions. When appropriate, committee members will suggest steps to resolve the issue. The intern will have the opportunity to present their perspective at the Hearing and/or to provide a written statement related to their response to the problem.

Outcome and Next Steps:
The result of the Hearing will be any of the following options, to be determined by the Training Director and other staff member(s) who was present at the Hearing. This outcome will be communicated to the intern in writing within five working days of the Hearing.

1. **No Action**
   No action will be taken when the committee determines that no action is necessary. In circumstances where an intern has already addressed the issue or the committee deems the initial concern to be unfounded, no further action will be taken. The intern will be verbally informed of the committee's decision to not take further action.

2. **Verbal Warning**
   A verbal warning will be given to the intern to discontinue the behavior in question. Verbal warnings will be used in response to one-time or infrequent infractions (not patterns of behavior) to clearly communicate that CAPS considers the behavior to be problematic. In the verbal warning, the intern will be informed that if the problematic behavior does not stop, they will be placed on remediation. The verbal warning differs from the informal review described above in that it will be documented in the intern's CAPS file. Documentation of the verbal warning will not be sent to their home doctoral program.

3. **Remediation**
   Remediation is defined as a specific period of time when supports determined by the committee to aid the intern in correcting the problematic behavior or increasing competency will be implemented. A remediation plan created by the committee will be provided to the intern within five working days of the hearing (along with outcome). Remediation may consist of such actions as increased didactic work, increased readings, increased supervision time, decreased clinical load, etc. The intern will be closely monitored by their supervisors and the training director during this time. The outcome of remediation is determined by the training committee at the date specified on the remediation plan. If the

intern has not adequately addressed the concerns by the specified date, the committee may choose to extend the remediation period or some other sanction may be implemented. The intern will be given a written statement of the remediation conditions. A report of the remediation will be made to the intern's home doctoral department either immediately or at the next scheduled report time.

4. **Temporary Withdrawal of Activity Privileges**

If the welfare of the intern, clientele, and/or colleagues is at risk, the intern will receive a temporary withdrawal of relevant activity privileges to prevent harm. This will occur for a specified time period and is accompanied by remediation activities, both to be specified by the committee. If the intern can demonstrate that the problem has been sufficiently addressed by the end of this period, activities will be resumed and the intern's performance will continue to be monitored closely. The intern will be informed in writing of the conditions of the temporary suspension. This action will be communicated to the intern's home doctoral program immediately.

Temporary withdrawal of activity privileges may be immediately and temporarily implemented by the Training Director to prevent imminent harm when necessary. In these cases, temporary withdrawal of activity privileges will be revisited as soon as possible by the committee where it may be removed or formalized. Academic departments shall not be notified until the status is formalized by the Committee.

5. **Dismissal**

Dismissal from CAPS may be initiated if it is determined by the committee that imminent harm may occur to the clientele of CAPS if the intern continues or if remediation is found to be unsuccessful. The committee will make a recommendation for suspension and dismissal to the Director of CAPS who will make the final decision. The intern will receive written notice of the dismissal. The intern's home doctoral program will be informed that the intern has not and will not successfully complete the internship.

Any significant concerns requiring formal remediation will need to be communicated with an intern's home doctoral program as well as noted on any references provided by CAPS staff for future jobs, licensure, or other opportunities outside of CAPS.

Due Process Appeal Procedures

If the intern wishes to appeal a due process decision, they may request an Appeals Hearing before the Training Committee. Appeals Hearing requests must be made in writing within 5

working days of the notification of the decision with which the intern is dissatisfied. If requested, the Training Director will chair a review panel consisting of the Training Director, one senior staff member chosen by the intern, and a senior staff member chosen by the Training Director. If possible, both newly selected senior staff members in the Appeal Hearing will not have participated in the preceding due process procedures. If the TD is the supervisor who is raising the issue, or if the TD deems it necessary for another reason, in the Appeal Hearing, the CAPS Director will appoint an alternate chair for the Appeal Hearing. The Appeals Hearing will be held within 10 working days of the intern's appeal request. The review panel will review all written materials and have an opportunity to interview the intern and any other individuals with relevant information. The review panel may uphold the decisions made previously or may modify them. Decisions made by the review panel will be shared with the intern and the intern's home doctoral program.

If the intern is dissatisfied with the review panel's decision, they may appeal the decision, in writing, to the CAPS Director. If the intern is dissatisfied with the decision of the CAPS Director, they may appeal the decision, in writing, to the Medical Director of Campus Health. Each of these levels of appeal must be filed in writing within five working days of the decision being appealed. The Medical Director of Campus Health has finale discretion regarding outcome. Decisions made during this appeal process will be shared with the intern and their home doctoral program.

Grievance Procedures

Grievance Procedures are designed to address intern grievances against an individual, supervisor, other staff, or the Training Program as a whole. Example reasons for grievances include but are not limited to: Poor supervision, unavailability of the supervisor, workload issues, personality clashes, unethical behavior, lack of training experiences, and other staff conflict. If possible, interns are encouraged to informally resolve grievances with staff by first discussing their concerns directly with the involved staff member(s). If this discussion produces insufficient results or is not possible, the intern may also discuss the concern with the Training Director or CAPS Director who may assist in resolving the conflict. Should a grievance be directed toward the Training Program, to prevent a conflict of interest, grievances should be presented to the CAPS Director. Similarly, if the Training Director is the staff in question, the intern can present grievances to the CAPS Director.

<u>Informal Review</u>

As a first step, the intern should raise the issue as soon as feasible with the involved supervisor, staff member, other trainee, the Training Director, or the CAPS Director in an effort to resolve the problem informally.

<u>Formal review</u>

If the intern is unsuccessful in resolving the concern informally, a formal grievance may be filed at any time using the procedures that follow.

Notice:
The intern's grievance should be communicated to the Training Director (or CAPS Director if the Training Director is the object of the grievance) in writing. If possible, the grievance should be filed within 10 working days of the event in question. As soon as possible, the individual being grieved will be asked to submit a response in writing within 10 days of the grievance filing.

Hearing:
The Training Director will chair a review panel consisting of the Training Director, one senior staff member chosen by the intern, and a senior staff member chosen by the Training Director. If the Training Director is the training staff member against which the grievance is filed, the CAPS Director will appoint an alternate staff member to chair the panel and appoint the committee member.

The intern and any staff involved will be given time to present information relevant to their positions to the panel at a hearing. Hearings will be limited to the panel and individuals involved. Each party will meet with the panel separately to promote a felt sense of safety by all parties in reporting. If possible, these two (or more) meetings will occur on the same day. Should it not be possible to hold the meetings on the same day, attempts should be made to hold the meetings as close together as possible. The goal of the panel meetings is to develop a plan of action to resolve the matter. The plan of action will include:

- The behavior/issue associated with the grievance.
- The specific steps to rectify the problem.
- Procedures designed to ascertain whether the problem has been appropriately rectified.

After hearing from all involved parties, the panel will determine a plan of action recommendation and will submit this recommendation to the CAPS Director within 5 working days of the hearing. This recommendation will include a summary of information described in the hearing, which will also be provided to the intern and staff member. The CAPS Director will then make a final decision regarding the action to be taken and will communicate this decision to all parties within 5 working days.

The Training Director or CAPS Director will document the process and outcome of the hearings. The intern and the individual being grieved, if applicable, will be asked to report back to the Training Director in writing within 10 working days regarding whether the issue has been adequately resolved. If the panel determines that a different timeline for follow-up reports is appropriate, that timeline will be communicated along with the decision.

If the plan of action fails and the issue is not resolved, the Training Director or CAPS Director will convene a review panel consisting of the Training Director and at least two other members of the training faculty within 10 working days. The intern may request a specific member of the training faculty to serve on the review panel. The review panel will review all written materials and have an opportunity to interview the parties involved or any other individuals with relevant information. The review panel has final discretion regarding outcome.

If the review panel determines that a grievance against a staff member cannot be resolved internally or is not appropriate to be resolved internally, then the issue will be turned over to the Campus Health Human Resources to initiate the agency's due process procedures.

Records Retention Policy

Each CDIP intern has a file in which all evaluations, due process and grievance documentation, and intern project information are stored. These records are stored on Box, which is used by CAPS and CHS for document storage. Only the Training Director and CAPS Director have access to the files, which can be requested by the interns at any point following the internship. Should CAPS move away from Box at any point, the Training Director will ensure that the files are transferred to the new system.