Professional Counseling Psychology Practicum & Internship Manual Hybrid Program

11200 SW 8th Street
Miami, FL 33199
Phone (305) 348-7076
Fax (305) 348-3879
# Table of Contents

STUDENT RESPONSIBILITIES........................................................................................................3
FIU DEPARTMENT OF PSYCHOLOGY PCP PROGRAM SAFETY POLICY ........................................4
DESCRIPTION OF CLINICAL TRAINING .....................................................................................7
  CLINICAL PRACTICUM & INTERNSHIP SETTINGS..............................................................8
DESCRIPTION OF CLINICAL PRACTICUM ...............................................................................9
  PRACTICUM OBJECTIVES.....................................................................................................10
DESCRIPTION OF CLINICAL INTERNSHIP ..............................................................................12
  INTERNSHIP OBJECTIVES..................................................................................................13
CLINICAL PRACTICUM & CLINICAL INTERNSHIP COURSE REQUIREMENTS .......................15
CLINICAL EXPERIENCE NOTEBOOK ....................................................................................16
CONFIDENTIALITY AGREEMENT ............................................................................................17
PRACTICUM/INTERNSHIP CONTRACT ..................................................................................18
SUPERVISION PLAN ................................................................................................................22
CONSENT TO RECORD ............................................................................................................23
CLINICAL LOG ........................................................................................................................24
APPLYING FOR INTERNSHIP ...................................................................................................25
  STUDENT APPLICATION FOR CLINICAL INTERNSHIP ..................................................26
HOURS LOG ..............................................................................................................................27
SITE SUPERVISOR'S EVALUATION OF STUDENT INTERN ......................................................28
STUDENT FEEDBACK FOR SITE SUPERVISOR .......................................................................29
SEMESTER SUMMARY FORM ................................................................................................30
  INSTRUCTIONS FOR SEMESTER SUMMARY MEETING WITH INSTRUCTOR ..................31
BANKING HOURS DURING SEMESTER BREAKS ....................................................................32
FORMAL EVALUATION OF STUDENT'S PRACTICUM/INTERNSHIP .......................................33
STUDENT'S EVALUATION OF SITE .......................................................................................36
ACA CODE OF ETHICS AND STANDARDS OF PRACTICE ....................................................37
STUDENT RESPONSIBILITIES

You are responsible for the material in this handbook.

Most of the counseling program policies and requirements are explained in the Student Handbook – please read all of it; you are responsible for all of it. You will be asked to sign a form, indicating that you have read all the materials and understand that you are responsible for knowing and complying with program requirements.

This manual is intended to introduce students to the expectations and requirements for satisfactory completion of the practicum experience. It provides information such as forms, as well as guidelines for supervision.

It is the responsibility of the student to:
• to be familiar with site policies for clinical placements,
• to know program requirements, licensure/certification requirements, and complete all forms by stated deadlines
• to become very familiar with and follow ethical guidelines outlined by the American Counseling Association (ACA)

This manual is required reading for all practicum and internship students.

Your supervised field experience is a crucial developmental step in one’s professional preparation. These clinical experiences are intended to assist students in the integration of knowledge learned in other academic experiences, as well as to develop their clinical skills.

Additionally, all candidates must purchase and have student liability insurance activated at the onset and throughout the duration of their practicum and internship experiences. Documentation of the current liability insurance must be turned in and placed in the student file.

Student Liability Insurance can be obtained through,

Healthcare Providers Service Organization: www.HPSO.com

Important Note: Please keep in mind that when you interview and/or begin working at a Site, you are representing FIU as a whole. It is important that collectively, we sustain a good working relationship with all of our sites to maintain our excellent reputation as a program and university of the highest quality.
ACKNOWLEDGEMENT OF RISK

The practice of counseling involves risks inherent in client contact. Students engaged in a practicum or internship experience should engage in behavior that enhances safety and minimizes risk. To assist students in understanding how to minimize risk and enhance safety, the Site Supervisors will orient students to the safety and risk management procedures of the Practicum or Internship Site at the onset of the placement and regularly during supervision.

I, _______________________________________, in consideration of being allowed to participate in a practicum or internship as part of my academic program, hereby acknowledge and agree as follows:

1. I understand and acknowledge that there are certain risks inherent in my participation in counseling practicum or internship, including, but not limited to, risks arising from:

   • Commuting to and from the site, or while in the course of activities;
   • Providing services to clients or their family members who may become unpredictable, angry, or violent;
   • Exposure to communicable or infectious diseases, bodily fluids, medicinal preparations, or toxic substances.

2. I acknowledge and agree that it is my responsibility to understand and follow the Practicum or Internship Site’s safety procedures and safety guidelines as described by the Practicum or Internship Site Supervisor to minimize risks and enhance my safety while placed at the Site. I understand that I will not be forced to engage in assignments in which I feel physically at risk. I agree to report to my Site Supervisor any incidents in which I am or feel physically threatened or unsafe.

3. I understand that in connection with my practicum or internship, I must have the ability to interpret, adapt, and apply safety procedures and guidelines. I must be able to react calmly and effectively in emergency situations and have the ability to establish and maintain effective relationships with a variety of client populations, agency or school staff, faculty, other counseling or health care professionals, and the public.

4. I agree to notify my Site Supervisor of any medical conditions that might necessitate an emergency response by the site.

5. It is my responsibility to comply with the standards, policies, and procedures established by the placement site. The Site will have the right to take immediate temporary action to correct a situation where my actions endanger client care or are unethical, disruptive, or unprofessional.
HEALTH & SAFETY GUIDELINES FOR PRACTICUM & INTERSHIP SITES

Introduction
The FIU Department of Psychology is concerned about the safety and well being of its student interns working in a practicum/internship site. In the event of an incident or situation that involves a threat to the safety or potential safety of an intern, the Site Supervisor should notify the PCP Program Director immediately.

The Counseling Psychology Program will provide:
- An orientation for all practicum & internship students about safety while working at their site.
- Copies of this Safety Policy for all students, and Site Supervisors.
- Case material in practicum & internship classes that address issues of safety when working with individuals with mental illness.

The Site will provide:

A safety plan of action and to orient all students to the agency’s safety policy and plan detailing exactly what to do in case of an emergency. Student Interns should also be given assurance that they are not expected to work on their own with potentially violent clients. The safety plan should include the following.
- When and how to attempt de-escalation of aggressive client.
- When and how to use non-violent self-defense, physical evasion, force.
- When and how to call security or police.
- When and how to evacuate the building.

The Counseling Psychology Program will train students in the following.
- How to recognize signs of agitation.
- What to do at first signs of agitation.
- Format for ongoing assessment of a client’s level of dangerousness.

SAFETY TIPS FOR STUDENTS IN THE FIELD

Security of Belongings
All students in the field are expected to have a secure place to keep handbags and other belongings while at placement. It is preferable that the space be one that can be locked, and could be in a desk drawer or filing cabinet. It is best not to leave handbags and other personal articles visible and unattended, even in an office with the door closed.

Safety Issues Related to Working with Clients
When working with clients, it is important to remember that the treatment process often makes people feel vulnerable and may challenge their usual coping mechanisms. With some people, this can contribute to problems with impulse control, and can raise issues of safety for the client, and the intern. There may be times when student works with individuals who have difficulty with reality testing, dealing with overwhelming emotions,
and controlling their anger. Some of them may be prone to violence and may possess a weapon. Other clients may be intoxicated, under the influence of drugs, in withdrawal, or may have other medical or neurological disorders. Again, we would like to emphasize that all students should consult with agency supervisors regarding preparation for and handling of specific situations that are potentially difficult or threatening, such as medical emergencies, suicide or homicide risks, potential abuse of others, and the presence of weapons.

Students should never keep information about potentially dangerous clients to themselves, even if they believe that they have a good relationship with their client(s). This includes information related to danger to self and others, and/or suspected abuse or neglect. ALWAYS notify your Site Supervisor immediately.

Safety Tips for Office Meetings
If a student will be meeting with a client with whom the student does not feel safe, it is important to discuss the situation fully with the agency supervisor. When considering the location of the meeting, it might be helpful to think about what is in the room, whether there is more than one exit, and where each person might sit. It may also be helpful to think about whether to include someone else in the meeting, and what to wear. When discussing the time of the appointment, it can be helpful to think about whether or not many people are around at the time being considered for the meeting. Also important to discuss is the plan for backup and assistance in the event that the client becomes agitated. A student should never see a potentially dangerous client alone without someone else in the agency knowing about the situation.

Safety Tips for Travel by Car
When a student is traveling by car to an agency or to home visits, it is advisable to know clearly where you are going, and to obtain directions before driving to unfamiliar areas and to carry a cell phone if possible. In general, remember to be alert, and to lock doors and close windows.

Post-Incident Protocol
If an incident occurs in which a student is personally threatened or hurt, the student should immediately inform the Site Supervisor and the PCP Program Director.

Health Concerns
It is the responsibility of all internship sites to notify the PCP Program of any known health risks, required or suggested health screenings, immunizations, etc. that students should be aware of.

I have read and understand risk and safety guidelines outlined above and agree to follow the recommended safety tips for students.

Name of Student: ____________________________________________________________

Student Signature Date: ________________________________________________
DESCRIPTION OF CLINICAL TRAINING

Students pursuing a professional license as a mental health counselor in the state of Florida must complete a 1000 hours of supervised clinical experience as a part of their graduate training. This experience is divided into 400 hours of Clinical Practicum and 600 hours of Clinical Internship over a period of 5 semesters.

The CACREP Standards require:

1. Hours spent in clinical training must be 40% direct client contact and 60% indirect clinical experience.

   **Direct Hours** - such as individual, couple, family, group counseling, parent training, consultation with parents or teachers, testing/assessment administration, intakes.

   **Indirect Hours** - this includes any work students do in preparation for work with clients, reviewing files, case notes, preparing practicum class or supervision activities, attending workshops, conferences, reading, research and other activities agreed upon by on-site supervisor (on or off site).

2. Audio/video recordings of sessions are to be submitted for use in supervision or supervisors conduct live supervision of sessions each semester.

3. Evaluation of students’ performance throughout the practicum and internship.

4. Minimum weekly supervision must include:
   - Individual Supervision with Site Supervisor: 1.0 Hour/week
   - Group Supervision with Faculty Supervisor: 1.5 Hours/week
   - Ongoing collaboration between the two supervisors
CLINICAL PRACTICUM & INTERNSHIP SETTINGS

Practicum Setting
Students enrolled in the Professional Counseling Psychology program have the unique opportunity to receive hands-on clinical training in our very own FIU Center for Children & Families (CCF). The clinic offers a wide range of state-of-the-art services to children and families in South Florida. As a student you will be participating in clinical training that will allow you to gain experience in the delivery of evidence-based interventions with highly trained experts in the field of child and adolescent clinical psychology.

About CCF
The mission of the CCF is to study the etiology, mechanisms, and treatment of mental health and learning difficulties of children and adolescents, and to provide education and services for their families and the professionals who work with them.

Our goals are (1) to increase knowledge of mental health and learning problems of youth, (2) to promote the development of effective treatments and prevention, and (3) to disseminate this information to professionals in mental health, education, and primary care.

Internship Setting
During the second year of clinical training, following the successful completion of the Practicum, students are given the opportunity to apply for placement in off-campus community sites such as hospitals, community mental health centers, schools, and private practice. Specific information about the available sites will be given during the internship application period.
DESCRIPTION OF CLINICAL PRACTICUM
(400 Hours over 3 Semesters)

Semester 1: CLP 6945 Beginning Practicum (100 Hours)
Beginning Practicum is the first supervised professional experiences that the counseling student will engage in. This first experience will allow students to apply knowledge about basic interviewing, assessment, and counseling skills and techniques to work with clients. The emphasis of Beginning Practicum focuses on students practicing assessment, individual and group counseling skills under supervision. Students are also expected to expand their knowledge of indirect counseling-related professional activities such as administrative tasks, note taking, staffing, trainings, and other related activities.

Beginning Practicum consists of **100 clock hours** of experience at the Center for Children and Families. The Practicum is taken during the first semester where students can begin to apply their basic skills and knowledge in the field from what they are learning in the core courses: Ethics and Psychopathology.

During the Beginning Practicum experience the Faculty Supervisor works closely with the Site Supervisor. Faculty Supervisors can be expected to visit the program you are working in at least once and consult regularly with the Site Supervisor throughout the semester.

Semester 2: CLP 6943 Advanced Practicum (150 Hours)
Advanced Practicum is taken during the second semester after successful completion of the first semester Practicum. It is expected that students will continue applying basic skills and techniques in counseling under supervision. Students must complete **150 hours and accumulate at least 80 of these hours in direct service from the beginning of their practicum experience.**

Semester 3: CLP 6943 Advanced Practicum (150 Hours)
Advanced Practicum is taken during the third semester after successful completion of the previous two semester Practicums. It is expected that students will continue applying basic skills and techniques in counseling under supervision. Students must complete **150 hours and accumulated at least 160 hours in direct service from the beginning of their practicum experience.**

Hour allocation subject to change based on client load each semester.

Student must pass Practicum successfully to continue in the program.
PRACTICUM OBJECTIVES

Training Outcomes
Counselors in training need to acquire proficiency and gain confidence by applying their emerging skills under the supervision of experienced counselors.

Practicum students will participate in direct service and demonstrate appropriate skill-level competence in at least 2 of following areas:

1. Intake/Assessment
2. Individual Counseling
3. Group Counseling
4. Couple/Family Counseling
5. Parent/Teacher Training/Consultation
6. Development and implementation of behavior plan
7. Social Skills training
8. Implementation of treatment manual/protocols

Students will participate in non-direct professional activities and demonstrate appropriate skill-level competence in at least 3 of the following areas:

1. Case Notes
2. Formulation of Treatment Goals
3. Participation in Supervision
4. Case Staffing/training
5. Administrative duties
6. Outreach

Learning Outcomes
At the completion of the 400 hours of Practicum experience students will be able to:

1. Demonstrate the ability to establish rapport and maintain a working alliance with clients while maintaining appropriate boundaries;
2. Assess clients from a multicultural perspective to understand their worldview, values, family structure and behavioral norms;
3. Demonstrate sensitivity for legal and ethical dilemmas and conduct themselves in a professional and ethical manner as outlined by the ACA and APA code of ethics
4. Demonstrate verbal communications that are clear and concise in daily interactions with clients, co-workers and other professionals;
5. Demonstrate effective communication skills with clients that includes an ability to maintain appropriate boundaries with clients; understand content and context of information;
6. Engage in consultation with professionals and during interdisciplinary team meetings;
7. Educate clients on such issues as self care, daily living skills, parenting, education and other support services;
8. Demonstrate effective referral and collaboration skills;
9. Demonstrate an openness to feedback and supervision
10. Demonstrate appropriate interpersonal skills.
DESCRIPTION OF CLINICAL INTERNSHIP
(600 Hours over 2 Semesters)

Internship is taken after the successful completion of the Clinical Practicum. The Internship experience will allow students to apply more advanced knowledge and skills such as interviewing, testing, assessment, and counseling skills and techniques to work with clients. The Internship focuses on allowing the student to become familiar with and engage in a variety of activities related to those of a professional counselor practicing assessment, individual and group counseling skills under supervision. Students are also expected to expand their knowledge of indirect counseling-related professional activities such as administrative tasks, insurance reimbursement, note taking, treatment planning and discharge, staffing, trainings, and other related activities.

Semester 1: CLP 6948 Internship (300 hours)
During the first semester of Internship, Students should work with the Site Supervisor to begin to identify a client for the Case Conceptualization, which will require the Student to complete an episode of treatment with the client along with pre and post assessment to measure treatment outcome to be written up and presented in a formal presentation during the second semester of Internship. Student must complete 300 hours with 120 in direct client contact.

Semester 2: CLP 6949 Advanced Internship (300 Hours)
Advanced Internship is taken as the second semester of Internship. It is expected that students will continue working in their site under supervision and continue working on the Case Conceptualization, which is due during the final semester of internship. Students must complete 300 hours with 120 of the hours in direct client contact.
INTERNSHIP OBJECTIVES

Training Outcomes
Counselors in training need to acquire proficiency and gain confidence by applying clinical skills under the supervision of experienced counselors. Internship students will participate in direct service and demonstrate appropriate skill-level competence in at least 2 of the following areas with completion of at least one complete treatment episode with an actual client:

1. Intake/Assessment
2. Individual Counseling
3. Group Counseling
4. Couple/Family Counseling
5. Parent/Teacher Training/Consultation

Students will participate in indirect professional activities and demonstrate appropriate skill-level competence in at least 6 of the following areas:

1. Case Notes
2. Formulation of Treatment Goals
3. Development of Treatment Plans
4. Conduct treatment plan reviews
5. Develop discharge summaries
6. Make recommendations and referrals
7. Participation in Supervision
8. Case Staffing
9. Administrative duties
10. Outreach

Learning Outcomes
At the completion of the 600 hours of Internship experience students will be able to:
1. Demonstrate skills in developing and maintaining a counseling relationship while maintaining appropriate boundaries;
2. Articulate a counseling approach that is consistent with theoretical beliefs;
3. Accurately conceptualize client concerns and issues;
4. Assess clients from a multicultural perspective to understand their worldview, values, family structure and behavioral norms;
5. Demonstrate the appropriate use of assessment instruments based on a familiarity with the validity and reliability of these instruments;
6. Interpret data about clients regarding diagnosis and treatment planning and demonstrate familiarity with the DSM-V classification of disorders
7. Provide individual and group counseling services
8. Demonstrate sensitivity for legal and ethical dilemmas and conduct themselves in a professional and ethical manner
9. Demonstrate verbal communications that are clear and concise in daily interactions with clients, co-workers and other professionals;
10. Engage in consultation with professionals and during interdisciplinary team meetings;
11. Educate clients on such issues as self care, daily living skills, parenting, education and other support services;
12. Demonstrate effective referral and collaboration skills;
13. Write reports required by the site supervisor including progress notes and written client records;
14. Communicate with other professionals using appropriate terminology pertaining to counseling, psychopathology, special services and psychotropic medication.
CLINICAL PRACTICUM & CLINICAL INTERNSHIP COURSE REQUIREMENTS

Students must complete all assignment, turn in paperwork in a timely manner and participate in evaluations throughout the clinical training. Specific assignments and paperwork are as follows.

**Assignments**
- Taped & transcribed sessions (at least one per semester)
- Participation in supervision
- Assigned reading
- Client SOAP Notes
- Agency Analysis

**Evaluations**
- Mid-Semester
- End of Semester
- Formal Evaluation of Practicum (End of Practicum Only)
- Formal Evaluation of Internship (End of Internship Only)
- Student Feedback of Supervision
- Student Evaluation of Site

**Paperwork**
- Supervision Plan (Each Semester)
- Hours Log
- Clinical Log
- SOAP Notes
- Practicum & Internship Semester Contract

**Final Project**
- Case Conceptualization (last semester of internship)

The final Case Conceptualization serves as the final project for students, which consists of a review of the literature regarding the selected clinical problem and treatment, pre and post assessment data, treatment plan, treatment summary, limitations, and recommendations. The paper is completed with the supervision and support of a two-person faculty committee. Client selection must be done in collaboration with the Site Supervisor. A formal presentation of the case conceptualization will also be held. Site Supervisors are required to be present for the presentation.
CLINICAL EXPERIENCE NOTEBOOK

All Students are responsible for maintaining a Clinical Experience Notebook. The Clinical Experience Notebook is a record of all the clinical training experience that the student was involved in throughout the program (including Clinical Practicum, Clinical Internship). The notebook should be a 3” three ring binder with dividers, which contains:

A. Clinical Log Spiral
B. Clinical Experience Hours Logs
C. Student and Supervisor Feedback Forms
D. Formal Evaluations
E. Semester Contracts
F. All Course Syllabi
G. Copies of Liability Insurance Coverage Policies

This notebook will be reviewed at the end of each semester of Practicum & Internship as part of the requirements for successfully completing CLP 6945, CLP 6943, CLP 6948, and CLP 6949.
CONFIDENTIALITY AGREEMENT

I understand that participation in the Practicum and Internship supervision courses will require me to record client sessions, present cases, and discuss information about my clients, myself, my site, and my supervisor. I understand that I must not use any identifying information when discussing clients, and that any and all information discussed about myself and/or my classmates is strictly confidential. All tapes of recorded sessions must be destroyed following presentation in supervision.

_________________________________  ______________________________
Student Name                      Student Signature & Date
FIU Department of Psychology
PRACTICUM/INTERNSHIP CONTRACT

Student Name: ___________________________ Phone # ___________

Email: ____________________________________________

Practicum Internship (circle one) Semester: __________ Year____

Hours Needed for the Semester: (Direct)_________ (Indirect)_________

Program/Agency Name: _____________________________________________

Address: _______________________________________________________

Site Supervisor Name: _______________ Phone# ___________

Email: ____________________________________________

Faculty Supervisor Name: _______________ Phone# ___________

Email: ____________________________________________

Emergency Contact (Site): ________________________________

Emergency Contact (Faculty): _________________________________

Student Work Schedule:

(Days) _____ _____ _____ _____

(Times) _____ _____ _____ _____

Individual Supervision: Day _____________ Time __________

Group Supervision: Day _____________ Time __________

The best way for the Site Supervisor to reach the Faculty Supervisor is by:

(Circle one) Phone    Email

The best way for the Faculty Supervisor to reach the Site Supervisor is by:

(Circle one) Phone    Email
**Site Supervisor (please initial each item to indicate agreement)**

___The Site Supervisor will provide clinical training to the Student under the joint supervision of the Facility Supervisor with regular ongoing consultation.

___The Site Supervisor will provide the Student with a minimum of 1-hour of individual face-to-face supervision that shall occur at least one time per week.

___Clinical training provided by the Site Supervisor will involve the Student with direct experience in the practice of counseling (40% of time spent at the facility each semester).

___The facility and its licensed supervisor shall maintain ultimate responsibility and authority regarding client care, and will ultimately sign off as the responsible clinician on each case, noting the student’s involvement.

___The Site Supervisor will inform the Faculty Supervisor immediately when a student is not performing satisfactorily or is demonstrating behavior that is detrimental or disruptive to the Facility and participate in the remediation plan of the Student (if one is implemented).

___The Site Supervisor agrees to report on the student’s performance and provide an evaluation of such on forms provided by the University.

___The Site Supervisor will develop a Supervision Plan each semester with the student to outline specific goals and objectives for the semester.

___The Site Supervisor will sign the Student’s Clinical Log & Hours Log each week.

___The Site Supervisor will provide access to Supervisor at all times while the Student is on site in case of emergency.

___The Site Supervisor will provide students an orientation to the agency and specific instruction on protocols for managing crisis situations that may arise along with a safety plan of action to orient all students to the agency’s safety policy and plan detailing exactly what to do in case of an emergency.
**Student (please initial each item to indicate agreement)**

___The Student shall handle all confidential information in a professional and ethical manner; under no circumstance will a student discuss a patient or client with anyone other than the appropriate Supervisors.

___The Student shall adhere to all rules, policies, and procedures of the Facility to which they are assigned.

___Students will adhere to all Program Policies and follow ACA ethics codes while at the Facility.

___The Student shall be responsible for obtaining student liability insurance prior to beginning clinical training at the Facility.

___The Student will provide and share with supervisors a formal evaluation of site and feedback to supervisor.

___The Student will keep a log of all activities, hours, and supervision in the Clinical Log Spiral and present to the Site Supervisor and Faculty Supervisor each week for signature.

**Faculty Supervisor (please initial each item to indicate agreement)**

___The Faculty Supervisor will conduct a minimum of 1.5 hours per week of group supervision.

___The Faculty Supervisor will work in collaboration with the Site Supervisor and maintain regular ongoing contact and site visits to monitor and evaluate Student’s progress.

___The Faculty Supervisor will review and sign the Clinical Log Spiral each week.

___The Faculty Supervisor will review taped sessions and provide feedback.

___The Faculty Supervisor, in collaboration with the Site Supervisor, will provide a formal evaluation of the Student at the end of the Clinical Practicum and Clinical Internship.

___The Faculty Supervisor collects and monitors paperwork with a formal review of the Clinical Experience Notebook and the end of each semester.
The Faculty Supervisor will provide access to the Student for individual supervision with Faculty Supervisor as needed and for emergency contact.

**Plan for Taping Client Session (Student & Site Supervisor Initial)**

__________I have discussed with my Site Supervisor a plan for recording at least one client session this semester to be reviewed in supervision.

**Informed Consent with Clients (Student & Site Supervisor Initial)**

__________I understand that I must inform my clients that I am an intern working under supervision, the limitations of confidentiality, and how long I will be working at the facility. I have discussed with my Site Supervisor how this should be communicate to clients I will be working with.

It is the Student’s responsibility to obtain all of the above information and signatures, and provide copies for Site Supervisor and Student. The original must be turned into the Faculty Supervisor by the second week of the semester and maintained in the Student’s file.
Supervision Plan (Developed in collaboration with Student, Site Supervisor, & Faculty Supervisor)

Focus area(s) (counselor skills & competencies to be developed):

<table>
<thead>
<tr>
<th>Goals/Objectives</th>
<th>Modality</th>
<th>Progress toward goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Goal 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Goal 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Goal 4</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The supervision plan should be developed between the Student, Site Supervisor, & Faculty Supervisor at the beginning of the semester. Progress toward each goal/objective will be reviewed at the end of the semester.

The signatures below bear agreement to all of the terms above.

Site Supervisor: ___________________________ Date: _____________
Faculty Supervisor: ______________________ Date: ______________
Student: _________________________________ Date: ______________

Revised August 2020
CONSENT TO RECORD

I, __________________________ hereby give consent for audio or video recording of this session by __________________________. I understand that the recordings are strictly confidential and that no identifying information will be contained on them. I understand that the recordings are used for training purposes only and will be shared in supervision with other students or supervisors for feedback. Further, I understand every attempt will be made to keep the tape or memory card secure by keeping it in a locked container only accessible by the counselor intern and all recordings will be deleted following the supervision session.

__________________________

Client Signature & Date

__________________________

Guardian Signature (if a minor) & date

__________________________

Counselor Intern Signature & Date

__________________________

Site Supervisor Signature & Date
CLINICAL LOG

Week # _____Date: From _______ to ___________

Total Direct Hours: _____

Total Non-direct Hours: _____

__ Individual/Family/Couple Counseling
__ Group Counseling
__ Intake/assessment
__ Parent/Teacher Training/Consultation
__ Other ________________

Individual Supervision (issues discussed):

Follow up/Supervisor Recommendations:

Focus Question(s) for Group Supervision:

Signatures:

Site Supervisor: ________________________________

Student: ________________________________

Faculty Supervisor: ________________________________
APPLYING FOR INTERNSHIP

Prerequisite: Successful completion of Clinical Practicum.

Step 1: Applying for & Selecting a Site

- Fill out the Application for Internship and turn in to the Program Coordinator the semester during the Internship Application Period.

- Schedule a meeting with the Program Coordinator to discuss your area of interest and identify possible sites for placement.

Step 2: Interview with site

- Once the Program Coordinator has contacted the site(s) that you are interested in and confirmed availability for placement, you should arrange an interview with the Site Supervisor.

Step 3: Notify Program Coordinator of Outcome

- Once the student has interviewed with the selected site’s supervisor, the Program Coordinator should be notified of the outcome of the interview.

Step 4: Obtain Student Liability Insurance

- Obtain student liability insurance and provide a copy to the Program Coordinator during the first week of the semester (can be obtained through APA, ACA or HPSO).

- To use HPSO you can apply online at http://www.hpso.com/quick_quote/
STUDENT APPLICATION FOR CLINICAL INTERNSHIP

Please attach your resume and take this form with you when you interview with your site.

I. Student Information

Student name: ___________________________ Student ID#: ____________
Email address: ___________________________ Phone #: ____________

II. Program/Agency Name:
__________________________________________________________________________________________________________________

Supervisor Name: ______________________
Supervisor Contact information: __________________

III. Interview Guidelines:
• Students are expected to dress appropriately and conduct themselves in a professional manner that is reflective of the standards of our program
• Students are expected to take an updated resume with them to the interview.
• Students are expected to communicate appropriately and professionally during their interview and must discuss their availability and their internship training needs, including supervision.

IV. Clinical Internship Requirement:
Clinical Internship will begin in the Fall and will require a 2 semester commitment set by the PCP program. Additionally, you are required to complete 10-20 hours weekly, as agreed between the student, Faculty Supervisor, and Site Supervisor.

V. Outcome of Interview
Describe below any details discussed during the interview with the Site Supervisor.

FOR OFFICE USE ONLY

Comments:

Site Approved for Placement: ________________________________

Date to Begin Placement: ________________________________

Approved by: ________________________________ Date: ________________________________
## HOURS LOG

<table>
<thead>
<tr>
<th>Student Name:</th>
<th>Site:</th>
<th>Supervisor:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Inake/assessment</th>
<th>Parent Training</th>
<th>Individual Counseling</th>
<th>Group Counseling</th>
<th><strong>Total Direct</strong></th>
<th>Outreach</th>
<th>On-line Assignments</th>
<th>Client prep/Paperwork</th>
<th>INDIVIDUAL SUPERVISION</th>
<th>GROUP SUPERVISION</th>
<th>Training</th>
<th><strong>Total Non-Direct</strong></th>
<th><strong>Total</strong></th>
<th><strong>WEEKLY TOTAL</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>WEEK 1:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEEK 2:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEEK 3:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEEK 4:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEEK 5:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEEK 6:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEEK 7:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEEK 8:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEEK 9:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEEK 10:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEEK 11:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEEK 12:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEEK 13:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEEK 14:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEEK 15:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEEK 16:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SEMESTER TOTAL:**

Date of Final Review:  
Student Signature:  
Supervisor Signature:
FIU Department of Psychology
Counseling Psychology Masters Program
SITE SUPERVISOR’S EVALUATION OF STUDENT INTERN

Student Name: ____________________________________ Site: ____________________________

Circle one:  Mid-semester  End of Semester

1. Demonstrates a personal commitment in developing professional competencies.
   1  2  3  4  5

2. Accepts and uses constructive criticism to enhance self-development and counseling skills.
   1  2  3  4  5

3. Engages in open, clear and comfortable communication with peers and supervisors.
   1  2  3  4  5

4. Recognizes own deficiencies and actively works to overcome with peers & supervisors.
   1  2  3  4  5

5. Completes paperwork on time.
   1  2  3  4  5

6. Quality of paperwork.
   1  2  3  4  5

7. Arrives to site on time and is prepared.
   1  2  3  4  5

8. Presents self in a professional manner with peers, supervisors, and clients.
   1  2  3  4  5

9. Demonstrates ethical behavior.
   1  2  3  4  5

10. Participates actively supervision sessions.
    1  2  3  4  5

11. Participates actively in team meetings.
    1  2  3  4  5

12. Demonstrates sound clinical judgment.
    1  2  3  4  5

13. Seeks out supervision when necessary and appropriate.
    1  2  3  4  5

14. Demonstrates knowledge of DSM-5 and is able to accurately diagnose.
    1  2  3  4  5

15. Demonstrates comfort and confidence in working with clients.
    1  2  3  4  5

16. Demonstrates a willingness to engage in new experiences to improve skill level.
    1  2  3  4  5

17. Comments/Suggestions to improve performance:

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Supervisor’s Signature & Date ____________________________________________________________________________________________

Student’s Signature & Date ________________________________________________________________________________________________

Rating scale:  5-Exceptional Performance  4- Acceptable Performance  3-Requires Assistance  2-Needs Improvement  1- Unable to assess
<table>
<thead>
<tr>
<th>Circle one: Mid-semester</th>
<th>End of Semester</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I was clear about what to present during supervision sessions.</td>
<td>1. I was clear about what to present during supervision sessions.</td>
</tr>
<tr>
<td>2. My supervisor was clear about the criteria for evaluating my work.</td>
<td>2. My supervisor was clear about the criteria for evaluating my work.</td>
</tr>
<tr>
<td>3. The feedback I received from my supervisor was clear and constructive.</td>
<td>3. The feedback I received from my supervisor was clear and constructive.</td>
</tr>
<tr>
<td>4. The lines of communication were always open with my supervisor.</td>
<td>4. The lines of communication were always open with my supervisor.</td>
</tr>
<tr>
<td>5. I felt comfortable bringing up issues about my clients and the site with my supervisor.</td>
<td>5. I felt comfortable bringing up issues about my clients and the site with my supervisor.</td>
</tr>
<tr>
<td>6. I felt as though my supervisor was available to me when needed.</td>
<td>6. I felt as though my supervisor was available to me when needed.</td>
</tr>
<tr>
<td>7. I was satisfied with the quality of my supervision sessions.</td>
<td>7. I was satisfied with the quality of my supervision sessions.</td>
</tr>
<tr>
<td>8. My supervisor allowed me some autonomy in my work with clients.</td>
<td>8. My supervisor allowed me some autonomy in my work with clients.</td>
</tr>
<tr>
<td>9. When instructed to use a new technique, I was given clear instructions on how to implement the technique and the criteria for evaluation.</td>
<td>9. When instructed to use a new technique, I was given clear instructions on how to implement the technique and the criteria for evaluation.</td>
</tr>
<tr>
<td>10. I felt that my supervisor provided me opportunities for personal and professional growth.</td>
<td>10. I felt that my supervisor provided me opportunities for personal and professional growth.</td>
</tr>
<tr>
<td>11. I felt comfortable disagreeing with my supervisor.</td>
<td>11. I felt comfortable disagreeing with my supervisor.</td>
</tr>
<tr>
<td>12. Comments:</td>
<td>12. Comments:</td>
</tr>
</tbody>
</table>

---

**Student name:** ___________________________  **Site:** ___________________________

---

**Student Signature & Date**    **Supervisor Signature & Date**

---

3- Strongly agree  2- Agree  1- Would like to improve this area of supervision
SEMESTER SUMMARY FORM

Bring two copies of this completed to the End of Semester Meeting with your Faculty Supervisor each semester.

Name: ____________________________ Semester: __________________

Site Name: _________________________ CLP 694___ # of Credits _____

Please complete the following information regarding the number of hours you completed for the semester.

Clinical Experience

<table>
<thead>
<tr>
<th>Number of Direct Hours</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of non-Direct Hours</td>
<td></td>
</tr>
<tr>
<td>TOTAL FOR SEMESTER</td>
<td></td>
</tr>
</tbody>
</table>

| Total of Direct Hours including previous semesters |   |
| Total of non-Direct Hours including previous semesters |   |
| TOTAL INCLUDING PREVIOUS SEMESTERS |   |

Clinical Supervision

Number of Individual Supervision Hours_______

Number of group supervision Hours ________
If no, explain___________________________________________________________

TO BE COMPLETED BY INSTRUCTOR

___Hours Logs
___Activity Logs
___Assignments
___Feedback to Supervisor
___Feedback from Supervisor
___Supervision Plan

Comments:

Grade____

Student Signature ___________________ Date: __________

Instructor Signature____________________ Date: __________

Revised August 2020
INSTRUCTIONS FOR SEMESTER SUMMARY MEETING WITH INSTRUCTOR

Bring your Clinical Experience Notebook containing all of your forms and logs.

Bring **COPIES OF THE FOLLOWING** documents

- Hours Log
- Feedback from Supervisor
- Feedback to Supervisor
- Completed Supervision Plan
- Semester Summary
BANKING HOURS DURING SEMESTER BREAKS

Students may continue practicum or internship at their sites during semester breaks and bank the hours towards internship in the following semester as long as the following criteria are met:

- You are continuing at the same site they interned during the semester.
- You are receiving onsite supervision for a minimum of one hour each week.
- You have made prior arrangements with a faculty supervisor to be in contact with them for supervision on an as needed basis.

You must keep a separate Hours Log and complete Clinical Logs for during this period time. The logs will be turned in during the end of semester meeting of the following semester.

Please complete the following information with your Site Supervisor and turn into your Faculty Supervisor during the end of semester meeting.

Student Name: ____________________________ Date: _______________

Site: ________________________________________________

Supervisor: __________________________________________

I have discussed banking hours during the semester break with my Site Supervisor. We have agreed to continue meeting for weekly supervision. I have made arrangements with my faculty supervisor to be available for supervision on an as needed basis.

Signatures

Student: ____________________________ Date: _______________

Site Supervisor: ____________________________ Date: _______________

Faculty Supervisor: ____________________________ Date: _______________
FORMAL EVALUATION OF STUDENT'S PRACTICUM/INTERNSHIP

Student Name: __________________________________________ Date: ____________________________

Site: __________________________________________ Total # of Hours: __________

# of Direct Hours: __________________________ # of Non-direct Hours: __________

The Student participated in **direct service** and demonstrated appropriate skill-level competence **in at least 2 of following areas**. Please rate the Student on each on the items below using the following scale:

A. Outstanding  B. Acceptable  C. Needs Improvement  D. Unable to assess

Site Supervisor    Faculty Supervisor

___  ___  Intake/Assessment
___  ___  Individual Counseling
___  ___  Development & Implementation of Behavior Plan
___  ___  Social Skills Training
___  ___  Implementation of treatment manual/protocols
___  ___  Group Counseling
___  ___  Couple/Family Counseling
___  ___  Parent /Teacher Training/Consultation

The Student participated in **indirect professional activities** and demonstrated appropriate skill-level competence **in at least 3 of the following areas**. Please rate the Student on each on the items below using the following scale:

A. Outstanding  B. Acceptable  C. Needs Improvement  D. Unable to assess

Site Supervisor    Faculty Supervisor

___  ___  Case Notes
___  ___  Formulation of Treatment Goals
___  ___  Participation in Supervision
___  ___  Case Staffing
___  ___  Administrative duties
___  ___  Outreach

Comments:

______________________________________________________________________________________________________________
______________________________________________________________________________________________________________
______________________________________________________________________________________________________________
______________________________________________________________________________________________________________
**Practicum/Internship Learning Outcomes**

Please rate the Student on each on the items below using the following scale:

**A. Outstanding  B. Acceptable  C. Needs Improvement  D. Unable to assess**

<table>
<thead>
<tr>
<th>Site Supervisor</th>
<th>Faculty Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>____  ____</td>
<td>Demonstrates active listening skills</td>
</tr>
<tr>
<td>____  ____</td>
<td>Avoids giving advice or imposing personal values onto clients</td>
</tr>
<tr>
<td>____  ____</td>
<td>Assesses clients from a multicultural perspective to understand their worldview, values, family structure and behavioral norms;</td>
</tr>
<tr>
<td>____  ____</td>
<td>Demonstrates sensitivity for legal and ethical dilemmas and conducts self in a professional and ethical manner as outlined by the ACA and APA code of ethics</td>
</tr>
<tr>
<td>____  ____</td>
<td>Demonstrates verbal communications that are clear and concise in daily interactions with co-workers and other professionals;</td>
</tr>
<tr>
<td>____  ____</td>
<td>Educates clients on such issues as self care, daily living skills, parenting, education and other support services;</td>
</tr>
<tr>
<td>____  ____</td>
<td>Demonstrate effective referral and collaboration skills;</td>
</tr>
<tr>
<td>____  ____</td>
<td>Demonstrate openness to feedback and supervision</td>
</tr>
<tr>
<td>____  ____</td>
<td>Demonstrates proficiency in applying their emerging skills under the supervision of experienced counselors</td>
</tr>
<tr>
<td>____  ____</td>
<td>Demonstrates a reasonable amount of confidence in self as a developing counselor</td>
</tr>
</tbody>
</table>
Based on your observation and experience with the Student, please provide a brief comment on each of the following areas (each supervisor should initial comment):

The Student expresses a clear understanding of personal needs, values, strengths, weaknesses, feelings, and motivations that affect him/her as a counselor.

*Comment:*

Student demonstrates ability to apply theoretical concepts to counseling situations.

*Comment:*

Student demonstrates ability to engage clients in a counseling relationship and develop a collaborative plan of action.

*Comment:*

Student works as a team player in cooperation with others remaining open to others’ values, attitudes, and feelings.

*Comments:*

Student demonstrates comfort in giving and receiving both positive and constructive feedback.

*Comments:*

---

**This section is to be completed by the Practicum Supervisor.**

**Overall evaluation of Student’s readiness to continue on to internship**
(An overall evaluation of B or better is required to continue on to the Internship)

**A. Outstanding  B. Acceptable  C. Needs Improvement**

Site Supervisor          Faculty Supervisor

____       ____

---

Signatures below indicate that the evaluation was a collaborative effort between the Site Supervisor and Faculty Supervisor, and was thoroughly explained to the Student.

**Student:** ___________________________  **Date:** ____________

**Site Supervisor:** _____________________  **Date:** ____________

**Faculty Supervisor:** ___________________  **Date:** ____________
STUDENT'S EVALUATION OF SITE

Directions: Student completes this form at the end of the Practicum and Internship. This should be turned in to the Faculty Supervisor.

Name (Optional)________________________________ Site ______________________

Dates of placement ______________________

Site supervisor ____________________________

Faculty Supervisor ___________________________

Rate the following questions about your site and experiences with the following scale:

A. Very satisfactory  B. Moderately satisfactory  C. Moderately unsatisfactory  D. Very unsatisfactory

1. _____ Amount of on-site supervision
2. _____ Quality and usefulness of on-site supervision
3. _____ Usefulness and helpfulness of faculty supervisor
4. _____ Relevance of experience to career goals
5. _____ Exposure to and communication of school/agency procedures
6. _____ Exposure to professional roles and functions within the agency
7. Rate all applicable experiences that you had at your site:
   _____ Report writing
   _____ Intake interviewing
   _____ Administration and interpretation of tests
   _____ Staff presentation/case conferences
   _____ Individual counseling
   _____ Group counseling
   _____ Family/couple counseling
   _____ Psychoeducational activities
   _____ Consultation
   _____ Career counseling
   _____ Other ________________________________

8. _____ Overall evaluation of the site

Comments: Include any suggestions for improvements in the experiences you have rated moderately (C) or very unsatisfactory (D).

____________________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________
Students are expected to conduct themselves in a professional manner at all times in the classroom and at your Practicum Site, and to follow the guidelines for ethical behavior as outlined by the American Counseling Association.

Please be sure to arrive on time to your site and dress in a professional manner. It is your responsibility to arrange for time off and notify your supervisor immediately if there are any interruptions in your schedule that may effect your time at the site.

About ACA

The American Counseling Association (ACA) is a nonprofit professional and educational organization dedicated to the growth and enhancement of the counseling profession. Founded in 1952, ACA is the world’s largest association representing professional counselors in various practice settings. By providing professional development, leadership training, publications, continuing education opportunities, and advocacy services to nearly 45,000 members, ACA helps counseling professionals develop their skills and expand their knowledge base.

ACA is instrumental in setting professional and ethical standards for the counseling profession. The Association has also made considerable strides in accreditation, licensure, and national certification. In addition, ACA represents the interests of the profession before Congress and federal agencies and strives to promote recognition of professional counselors to the public and the media.

It is strongly encouraged that all students become members of the ACA. You can find more information on the ACA website at http://www.counseling.org.

ACA members agree to abide by the rules, regulations, and enforcement of the terms of the ACA Code of Ethics.

It is the student’s responsibilities to know and follow the ACA Code of Ethics as a standard for professional behavior.

You can find the Code of Ethics at