



# **CARES**

# **PSYCHOLOGY FELLOWSHIP**

# **PROGRAM HANDBOOK**

**2024-2025**

Community Assistance Resources and Extended Services, Inc.

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## **Introduction**

Community Assistance Resources and Extended Services Inc. (CARES) Clinical Psychology Fellowship Program (CFP) follows a Practitioner-Scholar Model of clinical training incorporating 4,000 hours of supervised clinical experiences. It is expected that fellows will engage in direct provision of services for a minimum of 20 hours weekly. Weekly individual and group supervision is provided, as well as a robust schedule of didactic seminars to enhance fellows' knowledge and skills. The CARES program meets or exceeds the requirements for licensure in the New York State Office of the Professions, as set forth in Part 72 of the Commissioners Regulations.

1-2 fellows will participate in a 24-month training program starting in the year 2024-2025

## **Accreditation Status**

CARES Psychology Fellowship Program is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC). *Our Program Code is 9202.*

CARES Psychology Doctoral Internship Program has been granted a ten-year accreditation from the American Psychological Association with the date of initial accreditation as February 28, 2023.

*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](mailto:apaaccred@apa.org) Web: [www.apa.org/ed/accreditation](http://www.apa.org/ed/accreditation)*

## **Program Aims**

The aim of the CARES Fellowship Program is to prepare postdoctoral candidates for careers as skilled psychologists who are proficient in providing comprehensive clinical evaluations and therapeutic interventions for individuals with intellectual/developmental disabilities and/or mental health conditions, from young children through adulthood. The importance of personal and professional growth is emphasized in all aspects of the training program. CARES Fellowship Program is dedicated to upholding the highest standards of ethical and professional conduct. Furthermore, CARES Fellowship Program takes pride in its past trainees who have obtained state licensure and employment in a variety of settings.

## **Program Philosophy**

Designed in the Practitioner-Scholar Model, CARES Fellowship Program consists of varied training experiences to facilitate a smooth transition to professional functioning through the acquisition of advanced clinical skills that integrate theory and practice. Fellows carry caseloads of children, adolescents, and/or adults with disabilities and/or mental health diagnoses and provide services to individuals, groups, and/or families.

All fellows obtain advanced training in assessment, diagnosis and evaluation and are exposed to numerous evidence-based intervention and treatment modalities. Fellows gain expertise in behavioral intervention, outpatient assessment and treatment, individual psychotherapy throughout the lifespan, family and group psychotherapy.

Fellows gain skills and knowledge by working side by side with supervising psychologists. This apprenticeship model allows for frequent direct observation of supervisors, as well as immediate consultation, feedback and teaching. Regularly scheduled and intensive supervision is conducted according to cognitive and behavioral theoretical orientations. Throughout supervision, fellows are challenged to explore and self-reflect on their learning and clinical decisions. Supervisors work in close proximity to fellows and are readily available to teach, supervise, mentor, and consult on clinical decisions.

Psychology Fellows work with multidisciplinary teams that include Psychologists, Social Workers, Board Certified Behavior Analysts (BCBA), and Psychiatric Professionals. This working environment provides a unique opportunity for collaborative learning and leads to a more holistic understanding of the individual from various facets.

We believe that the Fellowship Program is a mutual learning experience. Fellows bring a fresh perspective and new ideas that provide the opportunity for supervisors to keep pace with new trends in the field. Fellows’ varied backgrounds and experience add depth to the learning atmosphere in the Fellowship Program and they provide a vital level of energy and enthusiasm to the supervisory process. This allows them to grow professionally and also contribute to the growth of their supervisors.

### **Overall Aim of the Training Program**

The goal of the CFP is to broaden the knowledge and expertise of early career psychologists and transition them into professional clinicians who are proficient in assessment and intervention for children and adults with Autism, Intellectual and Developmental Disabilities, and/or mental health issues, including anxiety, depression, disruptive behaviors, ADHD and PTSD. Particular emphasis is given to intensive training in applied behavior analysis (ABA), cognitive-behavioral therapy, diagnostic testing, and comprehensive report writing. The implementation of evidence-based interventions is supported with fidelity to the models.

A core focus of CFP training is the impact of multicultural values, language and behavioral principles on the therapeutic process. The vast age range of individuals served at CARES (birth through adulthood) allows for a rich experience of disorder manifestation and intervention across the life span. CARES programs serve a historically underserved population of Chinese and Hispanic immigrant families as well as a wide range of NYC residents. Many staff is bilingual and interpretation is provided in the language of the client. Our clinicians develop targeted, culturally sensitive behavioral interventions to help our clients enhance their skills and achieve personal outcomes across multiple settings. This multicultural diversity provides fellows with a profuse opportunity to observe and learn how diversity informs and interfaces with clinical practice.

The fellowship years facilitate a smooth transition to professional functioning through the acquisition of advanced clinical skills that integrate theory and practice. Clinical experience, along with didactics and supervision, assist fellows in developing critical thinking, self-reflection and interpersonal skills to provide the tools and strategies which will be needed throughout the course of their career.

### **CFP Training Competencies**

In accordance with APA guidelines, CFP will provide fellows array of training experiences over the fellowship years which allow them to gain professional competencies expected of qualified psychologists.

<b>Competencies</b>	<b>Outcomes</b>
1- Integration of science and practice	<ul style="list-style-type: none"> <li>• Demonstrate the ability to critically evaluate foundational and current research that is consistent with the program’s focus area(s) or representative of the program’s recognized specialty practice area.</li> <li>• Integrate knowledge of foundational and current research consistent with the program’s focus area(s) or recognized specialty practice area in the conduct of professional roles (e.g. research, service, and other professional activities).</li> </ul>

	<ul style="list-style-type: none"> <li>• Demonstrate knowledge of common research methodologies used in the study of the program’s focus area(s) or recognized specialty practice area and the implications of the use of the methodologies for practice.</li> <li>• Demonstrate the ability to formulate and test empirical questions informed by clinical problems encountered, clinical services provided, and the clinic setting within which the resident works.</li> </ul>
2- Ethical and Legal Standards	<ul style="list-style-type: none"> <li>• Demonstrate knowledge of and act in accordance with each of the following: <ul style="list-style-type: none"> <li>○ The current version of the APA Ethical Principles and Code of Conduct;</li> <li>○ Relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels;</li> <li>○ Relevant professional standards and guidelines.</li> </ul> </li> <li>• Recognize ethical dilemmas that may arise and apply ethical decision-making processes in order to resolve dilemmas that occur.</li> <li>• Conduct self in an ethical manner in all professional activities.</li> </ul>
3- Individual and Cultural Diversity	<ul style="list-style-type: none"> <li>• Demonstrate an understanding of how his or her personal/cultural history, attitudes, and biases may affect how a fellow understands and interacts with people different from themselves.</li> <li>• Demonstrate knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities related to the accredited area including research, training, supervision/consultation, and service.</li> <li>• Integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles (e.g., research, services, and other professional activities). This includes the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered over the course of their careers. Also included is the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own.</li> <li>• Demonstrate the ability to independently apply their knowledge and demonstrate effectiveness in working effectively with the range of diverse individuals and groups encountered during residency, tailored to the learning needs and opportunities consistent with the program’s aim(s).</li> </ul>
4- Professional Values and Attitudes	<ul style="list-style-type: none"> <li>• Behave in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others.</li> <li>• Engage in self-reflection regarding one’s personal and professional functioning</li> <li>• Engage in activities to maintain and improve performance, well-being, and professional effectiveness.</li> <li>• Actively seek and demonstrate openness and responsiveness to feedback and supervision.</li> <li>• Respond professionally in increasingly complex situations with independence.</li> <li>• Use outcome data to monitor effectiveness in professional activities.</li> <li>• Demonstrate an emerging professional identity.</li> </ul>
5- Communication and Interpersonal Skills	<ul style="list-style-type: none"> <li>• Develop and maintain effective relationships with a wide range of individuals.</li> <li>• Produce and comprehend oral, nonverbal, and written communications.</li> <li>• Demonstrate effective interpersonal skills and the ability to manage difficult communication well.</li> </ul>
6- Assessment	<ul style="list-style-type: none"> <li>• Select and apply developmentally appropriate assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics</li> </ul>

	<ul style="list-style-type: none"> <li>• Collect relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient.</li> <li>• Communicate orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences (e.g. parents, caregivers, schools, and medical teams).</li> <li>• Demonstrates awareness of ethical principles in the assessment of individuals across the lifespan.</li> <li>• Demonstrate understanding of human behavior within its context (e.g., family, social, societal, and cultural) as well as functional and dysfunctional behaviors.</li> <li>• Interpret assessment results, following current research and professional standards and guidelines to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective.</li> </ul>
7- Intervention	<ul style="list-style-type: none"> <li>• Use evidence-based strategies to develop, establish, and maintain effective relationships with the recipients of psychological services.</li> <li>• Implement developmentally appropriate interventions informed by the current scientific literature, assessment findings, diversity characteristics, biopsychosocial factors, and contextual variables.</li> <li>• Evaluate intervention effectiveness and adapt intervention goals and methods consistent with ongoing evaluation.</li> <li>• Integrate the family as appropriate in treatment planning and intervention.</li> <li>• Monitor adherence to psychological and/or behavioral interventions and demonstrate skill in addressing issues of compliance, adherence, and motivation within the family context</li> <li>• Apply behavioral and cognitive principles as they relate to case conceptualization, intervention design, application, and assessment of intervention effectiveness.</li> <li>• Demonstrate knowledge of the behavioral and cognitive theoretical underpinnings for specific intervention design and delivery.</li> </ul>
8- Supervision	<ul style="list-style-type: none"> <li>• Demonstrates knowledge of supervision models and practices.</li> <li>• Applies knowledge of supervision in direct practice with psychology trainees or other health professionals.</li> <li>• Teach, supervise, and mentor others by accurately, effectively, and appropriately presenting psychology related information.</li> </ul>
9- Consultation and Interprofessional/ Interdisciplinary Skills	<ul style="list-style-type: none"> <li>• Demonstrate knowledge and respect for the roles and perspectives of other professions.</li> <li>• Conceptualize referral questions that incorporate an understanding of the roles of patients, parents, extended family, culture, other providers, and/or health system to effectively answer consultation questions.</li> <li>• Apply knowledge of consultation in direct consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior.</li> <li>• Engage interprofessional individuals and teams to increase the likelihood of appropriate early referrals to clinical child psychologists.</li> <li>• Demonstrates knowledge of how the practice of Behavioral and Cognitive Psychology integrates into larger organizational systems.</li> </ul>

## **Professional Development over the Fellowship Years**

The major goal of the CFP is to gradually develop fellows' competence in successfully performing their tasks as psychologists. Fellows are expected to increase their autonomy within all components of Training. These competencies are assessed on two levels: Intermediate and Advanced. Each level is defined below as it specifically relates to each competency area. The fellow's competency will be evaluated three to four times throughout the two-year program. Supervision and guidance will be provided accordingly.

### ***Integration of Science and Practice/Research:***

Intermediate: Fellows are involved in data-driven activities and learn to collect and assess clients' behaviors and progress. They learn how to analyze test scores from various resources into a comprehensive report and make adequate recommendations in regard to clinical diagnoses and treatment. Fellows join journal club activities and are expected to actively participate in discussions of critically reviewing updated research literature, and demonstrate knowledge of common research methodologies. At the end of the first year, the fellow will be expected to conduct a two-hour didactic seminar presentation to the entire clinical team.

Advanced: Fellows gain mastery in their ability to collect, integrate, critically analyze data into a comprehensive report, and make clinical diagnoses. They demonstrate an independent ability to select and use evidence based interventions when working with diverse clients. Similarly, they collect and critically assess data from interventions to guide ongoing treatment and recommendations. In the second year, fellows will be expected to take on a training role and conduct two to three training presentations that demonstrate the integration of current research and clinical work.

### ***Ethics and Legal Standards:***

Intermediate: Fellows review with supervisors the current version of the APA ethical principles and code of conduct, the state code of conduct for custodians of people with special needs, as well as the due process and grievance policies during the onboarding and orientation process. As CARES caters to individuals with disabilities, the fellows acquire knowledge and are expected to act in accordance with the APA guidelines for the assessment and intervention of persons with disabilities. Fellows are also expected to actively participate in seminars and journal clubs that specifically address professional ethics and conduct during the training year. Discussion regarding ethical dilemmas is encouraged during individual and group supervision and the fellows learn to apply clinical judgment in recognizing potential ethical dilemmas. At this level, fellows increase their confidence in applying ethical principles to their clinical work.

Advanced: Fellows demonstrate the capacity to apply the APA ethical code to clinical practice and gain confidence in applying ethical principles when interacting with patients, colleagues, and supervisors. They show good clinical judgment in recognizing potential ethical and legal considerations relevant to clinical cases, and engage in collaborative discussions with supervisors to resolve ethical dilemmas. Fellows demonstrate the capacity to apply ethical principles to clinical practice.

### ***Individual and Cultural Diversity***

Intermediate: At this level, fellows are capable of recognizing how cultural diversity may affect the therapist and client in clinical treatment and assessment. They are able to process diversity factors in supervision.

Advanced: At this level, fellows are capable of recognizing how cultural background and views may affect the therapist and client in clinical treatment and assessment. When working with clients from backgrounds different from their own, fellows maintain a stance of openness, curiosity, and respect. Fellows demonstrate the ability to independently apply their knowledge and reconcile diversity factors when performing clinical assessments and interventions.

### ***Professional Values and Attitudes:***

**Intermediate:** Fellows are expected to conduct themselves professionally when interacting with staff and clients. They demonstrate responsible work habits, follow all policies of the agency, meet deadlines, and keep accurate records. At this level, fellows increase their confidence in conducting psychotherapy and psychological assessments, as well as applying ethical principles. They are able to understand and demonstrate their specific role as psychologist on a multidisciplinary team and recognize how their role is distinct from other disciplines. They can accept and effectively utilize feedback from supervisors to improve their clinical skills. They are able to better define career goals and express case conceptualizations based on research and theory.

**Advanced:** Fellows gain competency in their roles as evaluators, diagnosticians, and therapists. They present cases in group supervision and demonstrate the capacity to apply ethical principles and clinical theory to practice. They advance in their confidence and degree of independence when responding to progressively complex situations. In the second year, the fellow is invited to participate in developing the didactic curriculum for the internship program and other clinicians. They will be expected to take on a training role and conduct two to three training presentations.

### ***Communication and Interpersonal Skills***

**Intermediate:** Fellows participate and interact in a work environment with a multidisciplinary team of healthcare professionals. They are expected to develop and maintain effective and professional relationships with colleagues within and outside of the agency, supervisors, supervisees, and those receiving professional services. Fellows present cases during individual and group supervision, develop the ability to write informative notes, and produce comprehensive reports using professional language and concepts.

**Advanced:** At this level, fellows communicate effectively with other professionals within and outside the agency. Fellows are able to demonstrate more of a leadership role in their clinical interactions within the interdisciplinary team. They write comprehensive evaluation reports, informative and well-integrated session notes, and measurable treatment plans. Fellows participate in consultations and meetings with individuals and family members to discuss evaluation results and treatment plans, and share progress. Furthermore, fellows demonstrate a strong ability to build rapport and working relationships and manage difficult conversations with clients.

### ***Assessment:***

**Intermediate:** Fellows perform psychological evaluations independently. They are expected to conduct, administer, and score tests accurately, and write organized testing reports in a timely manner. Fellows at this level gain mastery in analyzing test scores and understanding tests in terms of client diagnosis, and behavior. They apply knowledge of functional and dysfunctional behaviors and human behavior within its context to the assessment and/or diagnostic process. Fellows give case presentations of the full process of evaluation, beginning with the reason for referral, assessments conducted, diagnoses, and recommendations.

**Advanced:** Fellows expand their mastery with the array of assessment tools required for diagnostic evaluations across the lifespan. They assume greater autonomy in performing comprehensive assessments. They are expected to fully integrate multiple sources of clinical information in their assessments and diagnoses (test scores, clinical interviews, diversity factors, client history, previous reports, and medical information where appropriate). Fellows give case presentations of the full process of evaluation, beginning with the reason for referral, assessments conducted, diagnoses, and recommendations. In their second year of training, fellows will have the opportunity to gain supervision experience, while being supervised. We believe this is a valuable skill that will benefit fellows in their later careers. They will be able to supervise interns in assessment administration and report writing as well as support interns with assessing and diagnosing varied populations.



### ***Clinical Interventions:***

Fellows are assigned clinical cases with regard to the case complexity and the fellow's ability to address the treatment needs of the client.

Intermediate: Fellows interact independently with clients. Their responsibilities increase to provide individual and group psychotherapy as well as to perform comprehensive psychological assessments. Fellows at this level are expected to successfully carry out treatment plans, write appropriate clinical notes and demonstrate the ability to manage limits/boundaries in the therapeutic relationship, and assess and modify diagnoses as appropriate. Furthermore, fellows evaluate intervention effectiveness, and adapt intervention goals and methods consistent with ongoing evaluation.

Advanced: Fellows at this level are expected to demonstrate increasing autonomy in planning interventions and to assume greater leadership. They are able to develop treatment plans, formulate comprehensive case conceptualizations, treat a variety of diagnoses, and apply research, diversity characteristics, and contextual variables to treatment. In their second year, fellows will have the opportunity to take on cases with greater clinical complexity in areas of their interest. In addition, fellows will lead therapeutic groups and provide peer supervision to their co-facilitators.

### ***Supervision:***

Intermediate: As fellows gain competency with the basic responsibilities of a given program, supervisors will gradually expand the range of clinical opportunities and interventions expected of fellows. At this level, fellows are able to discuss psychotherapy processes, identify obstacles to progress, engage in anticipatory planning of treatment, joint problem solving, and review short and long term treatment strategies. Fellows will also develop their ability to apply research and alternate therapy approaches learned in supervision to therapy cases. Fellows will initially co-lead and later lead multidisciplinary team meetings and group supervision under the observation of a licensed psychologist. Fellows are also provided the opportunity to attain training in a supervisory role; initially, they will supervise an early career healthcare provider (i.e., social worker or mental health counselor).

Advanced: Fellows exhibit a greater level of independence when planning and applying clinical evaluation and assessment. They are able to discuss more complex psychotherapy processes in supervision and apply knowledge to interactions with other health professionals. At this stage, supervision shifts toward a consultative model. In their second year and upon attaining licensure, fellows will supervise one psychology intern as a secondary supervisor. Fellows are provided the opportunity to work with the new internship cohort and supervise interns gaining familiarity with assessment, co-group facilitation, and therapeutic clients.

### ***Consultation and Interprofessional/ Interdisciplinary Skills:***

Intermediate: Fellows participate and interact in a work environment with a multidisciplinary team of health care professionals such as licensed psychologists, social workers, BCBA, and psychiatrists. They are expected to develop and maintain effective and professional relationships with other healthcare professionals. Fellows understand their specific role as psychologists on a multidisciplinary team and recognize how their role is distinct from other disciplines.

Advanced: Fellows are able to demonstrate more of a leadership role in their clinical interactions within the interdisciplinary team. They participate in consultations and meetings with colleagues within and outside of the agency, supervisors, supervisees, and those receiving professional services to discuss evaluation results, develop treatment plans, and share progress.

## **The Content of the Training Program**

### **Agency Background**

CARES is a nonprofit organization, which has served over 8,000 individuals across the life span with Autism Spectrum Disorder (ASD) Intellectual/Developmental Disabilities, and their families, since its inception in 2005. In recent years, CARES has added new clinical programs to diagnose and treat both children and adults with mental health conditions, such as anxiety, depression, disruptive behaviors, ADHD, and PTSD. Fellows spend their time across three of CARES' treatment programs, the Early Intervention/ABA Insurance Program, Clinical Services, and Adult Day Habilitation. In addition, CARES offers opportunities for eligible children and their families to participate in multiple program options including the Children's Health Home, Home and Site based Respite, Community Habilitation, and prevocational programs.

The CARES clinical population is extremely diverse, including individuals from a wide array of cultures, disabilities, ethnicities, religions, and socio-economic levels represented in the New York City Metropolitan area. CARES' programs serve a historically underserved population of recent Chinese and Hispanic immigrant families who are caring for children with significant impairments. Many CARES staff are bilingual. Interpretation of evaluations is provided in the language of the client. Our clinicians develop targeted, culturally sensitive behavioral interventions to enhance skills and achieve personal outcomes across multiple settings.

### **The Fellowship Experience**

#### **Clinical Programs and Placement**

**The Early Intervention/ABA program** serves approximately 300 children and families each year. Early intervention services are provided to children from birth to 3 years. Children can be treated in a variety of settings, including the child's home or community locations. Methods may include Discrete Trial Training, Natural Environment Teaching and Social Skills Groups for children who are diagnosed with Autism. Fellows receive rigorous training in the theory and practice of ABA, provided by Board Certified Behavior Analysts (BCBA) at the beginning of the fellowship year. After completion of the training, fellows are assigned their own cases where they deliver behavioral services as well as provide counseling support for parents and caregivers. Fellow's training and supervision in ABA are matched based on the fellow and family's language and culture.

**Clinical Services** - CARES operates two NYS licensed outpatient clinics for children and adults, one for individuals with intellectual/developmental disabilities (certified by OPWDD under Article 16), the other for individuals with mental health issues (certified by OMH under Article 31). The OPWDD clinic delivers comprehensive evaluations and therapeutic services for children and adults with known or suspected intellectual/developmental disabilities and the OMH clinic delivers services to children and adults with mental health issues, including anxiety, depression, disruptive behaviors, ADHD, and PTSD.

Fellows' caseload includes treating patients in both clinical programs. This enriches the fellows' opportunity to deliver varied therapeutic modalities for individuals across the lifespan, supporting clients and their families, as well as learning to provide group interventions. In addition, fellows will develop clinical proficiency in the theories and methods of psychological assessments and diagnoses. They will administer comprehensive diagnostic evaluations for individuals across the life span with Autism, Intellectual/Developmental Disabilities, and those presenting with varied mental health conditions.

**Adult Day Habilitation Program** serves post-secondary school students with a variety of intellectual/developmental disabilities in both center and community-based settings. Community and day habilitation programs focus on developing and enhancing skills in areas such as activities of daily living, communication and

social interactions, prevocational training, and self-advocacy. Fellows will be trained in a variety of community locations. These can include recreational sites and trips to places of interest. In this program, fellows will be trained in providing individual and group therapy to decrease challenging behaviors, develop treatment plans to achieve personal goals, support individuals to participate in integrated community settings, and provide behavioral consultations.

CARES programs employ multidisciplinary teams consisting of Psychologists, Social Workers, Board Certified Behavior Analysts, and Psychiatric Professionals. This interaction and approach afford fellows a rich array of experiences across a broad range of disciplines and provides fellows with unique exposure to the wide array of professional perspectives that characterize numerous disciplines.

CARES conducts an active ongoing research program. Topics addressed include analyses of various behavioral methodologies, interventions, and curricula to evaluate efficacy. Fellows with a keen interest in pursuing research may participate in ongoing CARES research studies; this may take the form of performing pre or post-assessments, data collection, statistical analyses, literature reviews, and other potential contributions.

## **Supervision of Fellows**

Fellows receive regularly scheduled and intensive supervision, including two hours of individual supervision and two hours of group supervision provided by licensed psychologists weekly throughout the fellowship years. In addition, fellows receive supervision from a Board Certified Behavior Analyst (BCBA) to support their delivery of ABA with fidelity. Supervision is such that it becomes less prescriptive and more consultative in the second year of fellowship. During individual and group supervision, fellows are challenged to thoughtfully explore and reflect on their learning and clinical decisions. This allows fellows to present cases, expand their repertoire of clinical interventions and assessments, plan treatment and evaluate the treatment progress. Pre-pandemic all supervision was provided in person. Presently, supervision is a combination of in person and Telesupervision.

*For additional information see Appendix 6.*

## **Training Resources and Facilities**

Fellows will be provided with access to all of the assessment materials, scoring materials, computers and forms needed to provide comprehensive clinical evaluations and related reports. Some measures can be implemented via iPads which are available for use when clinically indicated. Services are provided at varied sites in the home/community as well as at CARES' three community sites. One is located in Manhattan, one in Brooklyn, and one in the Hudson Valley, in Monticello, New York.

*For additional information see Appendix 3.*

## **Curriculum Training Topics**

Weekly didactic seminars focus on core issues in mental health, intellectual/developmental disabilities, assessment and diagnostic strategies, cultural diversity, as well as clinical interventions. The robust schedule of didactic seminars is targeted to enhance fellows' knowledge and skills in the areas of mental health, intellectual/developmental disabilities, treatment and assessment. The didactic seminars are provided by seasoned professionals and in a wide range of material. They cover the theories which guide treatment methodologies, provide strategies for active implementation, as well as facilitate differential diagnoses. As some of the didactic seminars reoccur each year, in the second year of training, the fellows only attend the new didactics and focus most of the training on clinical service delivery. Furthermore, in the second year the fellows are expected to partake in co-leading or leading a few didactics.

Previous didactic seminars have addressed the following topics.

**ADHD Assessment and Treatment**

**ADOS-2 Training**

**Applied Behavior Analysis RBT Training - workshop Series**

**Assessment of Developmental Disabilities**

**Bayley Scales of Infant and Toddler Development - 4<sup>th</sup> Edition**

**Challenging Behaviors**

**Child Abuse and Sexuality**

**Cognitive Behavioral Therapy for Depression and Anxiety**

**CP and Motor Disorders**

**Cultural Competency and Diversity**

**Dialectical Behavior Therapy**

**Developmental Milestones and Red Flags**

**Early Intervention in NYS - Assessment and Intervention**

**Enhancing the Therapeutic Process through Strengths-Based Expressive Creative Arts Modalities**

**Ethical Issues in Clinical Practice**

**Evolution of the DD field**

**Genetic Causes of ID/DD**

**Mandated Reporting**

**Mindfulness**

**Nutrition & Feeding Disorders in People with DD**

**Parent-Child Relationships**

**Person-Centered Planning**

**Postural Care/PT for Children and Adults with ID/DD**

**Program Evaluation**

**Psychopharmacology**

**Speech and Language Disorders**

**Substance Abuse and Addictions**

**Suicidal Prevention Assessment**

**Toxic Stress and the Science behind Brain Development**

**Trauma-Informed Therapy**

## **Fellow Selection Criteria**

The CARES Psychology Fellowship Program follows the standard Association of Postdoctoral Psychology Internship Centers (APPIC) guidelines. This fellowship site agrees to abide by the APPIC policy that no person at the training facility will solicit, accept, or use any ranking-related information from any fellow applicant.

Applicants should provide information, including a graduate school transcript, curriculum vitae, a (redacted) psychological evaluation, and three letters of reference. Acceptance to the program is conditional upon successful completion of pre-employment drug screening and a background and FBI fingerprint check in accordance with applicable law. Random drug testing may also be conducted to the maximum extent allowed by applicable law. A current medical form and the required vaccinations are necessary for participation in the CARES Fellowship program due to NYS Department of Health regulations.

Members of the Training Committee review all applications submitted. Special focus is given to applications that show that the candidate possesses a strong interest in individuals with Developmental Disabilities and Mental Health. Admission requirements include completion of all professional doctoral degree requirements from a regionally accredited institution of higher education or an APA/CPA-accredited program and pre-doctoral internship meeting APPIC standards. This is defined as having on the first day of the fellowship either the diploma in hand or a letter from the Director of graduate studies verifying the completion of all degree requirements pending the institution graduation ceremony. Candidate applications from Clinical, Counseling, School, Developmental or Neuropsychology programs (Ph.D. and PsyD) may be accepted. Preference is given to applicants from APA and CPA accredited programs. Applicants from minority backgrounds or who are fluent in another language are strongly encouraged to apply.

Qualified applicants are contacted by email or phone for interviews. Candidates are invited to an in-person or Zoom interview (for candidates located outside the Tristate area) with representatives of the Training Committee. Interviews typically last between 60 and 75 minutes. During the interview, applicants are to respond to general questions related to their prior experience, training, assessment and therapy. In addition, applicants are asked to respond to a selection of questions after reviewing two vignettes. Following the interview process, applicants are rated based on their demonstration of clinical knowledge, experience, self-awareness, organization skills, professionalism, and expressed interest in learning and mastering new skills.

Candidates must have completed all academic courses, including comprehensive examinations, pre-doctoral internship, dissertation defense, and graduation from academically accredited institutions prior to the start of the fellowship. Pre-doctoral internship should have included a minimum of 1,600 hours of supervised clinical experience in a child or adult setting. At least 40% of those hours should be spent in face to face services. Supervision should have been provided by a licensed psychologist with a minimal amount of one hour a week. Didactic seminars to enrich and broaden the applicant's experience are desirable.

Questions regarding the program or application procedure may be addressed to:

Sharon Shkedi, PsyD, Training Director

CARES

465 Grand Street, 2nd Floor New York, NY 10002

[sshkedi@caresnys.org](mailto:sshkedi@caresnys.org)

*For additional information see Appendix 1.*

## **Benefits and Human Resources**

Fellows receive a stipend at the annualized rate of \$54,000 for the first year and a stipend at the annualized rate

of \$60,000 for the second year, which is paid semimonthly. An additional increase of \$5,000 will be provided following successfully passing the licensure exam. All required deductions for federal, state, and local taxes and all authorized voluntary deductions are withheld automatically from the paycheck. Arrangements for direct deposit of paychecks can be made through Human Resources. This position includes eligibility for employer-sponsored health insurance (subject to the terms and conditions of the applicable plan as may be amended from time to time), \$25/month towards your cellphone expenses, and a subsidy towards a monthly MetroCard (for public transportation) for community-based travel. Funds for the fellowship come from the clinical services, donations, and state contracts which CARES maintains.

The agency provides vacation time to ensure that its employees have adequate rest from their job responsibilities. Fellows are eligible to accrue two weeks of paid vacation and up to 56 sick/personal paid hours per year, all subject to and in accordance with applicable CARES policy. CARES observes many national and Jewish holidays and provides time off with pay. Additional time off may be available for work-related conferences or bereavement, where applicable.

*For additional information see Appendix 3.*

## **Cultural Diversity and Statement of Nondiscrimination**

### **Cultural and Individual Diversity**

CARES is committed to supporting cultural and individual diversity. CARES' didactic and clinical trainings are designed to increase understanding and sensitivity of cultural and individual diversity. We welcome candidates from various racial, ethnic, religious, and cultural backgrounds. Both client population and staff are representative of the diverse composition of New York City. CARES Fellowship Program makes ongoing efforts to recruit and maintain a diverse staff.

*For additional information see Appendix 2.*

### **Statement of Nondiscrimination**

CARES is committed to the principle of equal employment opportunity. Under no circumstances will CARES discriminate on the basis of sex, race, creed, color, religion, national origin, ancestry, age, marital status, sexual orientation or preference, disability which can be reasonably accommodated, veteran status, or any other protected characteristic as established by law. This policy of Equal Employment Opportunity applies to all policies and procedures related to recruitment and hiring, compensation and benefits, termination, and all other terms and conditions of employment.

*For additional information see Appendix 2.*

## **The Training Program Faculty**

Sharon Shkedi, PsyD - Training Director

Danielle Russo, PsyD

Jacqueline DeGroat, M.S.Ed. PsyD

Deniz Sidali PhD

Leah Esther Lax, PhD

## **Policies and Procedures**

CARES Fellowship Program Policies and Procedures are appended to this Handbook (Appendices 1-7). The Agency's Policy and Procedure Manual is given to fellows during orientation. Key policies and procedures are reviewed with fellows. Policies and procedures are available for fellowship applicants upon request. To ensure the fellow is well informed, all policies are reviewed and any resulting questions of the fellow are addressed at the initiation of their fellowship.

## **Performance Evaluation of Fellows**

Fellows are formally evaluated by their supervisors twice annually, at each midpoint and at the end of each fellowship year. Evaluations are conducted using a standard rating form, which includes specific feedback regarding the fellows' performance and progress. It is an important process of the fellowship to provide feedback, guidance and evaluations to fellows to inform their practice.

- a. The evaluation will include written summary information of fellow's performance in all major competence areas that are a focus of fellowship training.
- b. Fellows have the opportunity to review their written evaluation with supervisors to ensure the fullest possible communication between supervisors and fellows.
- c. Evaluation procedures provide written feedback that validates trainees' achievements by noting areas of unusual strength and excellence and facilitate trainees' further growth by identifying areas that would benefit from additional training.

*For additional information see Appendices 4 and 8.*

## **Appendix 1 Fellow Selection and Academic Preparation Requirements Policy**

### ***Application Process***

CARES Psychology Doctoral Fellowship Program (CFP) offers 1-2 full-time fellowship positions. The number of available fellowship's positions each year is a function of supervisor availability and postdoctoral students accepted. Students interested in applying for the Cares Fellowship Program should create an account and submit their online application through the APPIC website ([www.appic.org](http://www.appic.org)) using the APPA CAS (APPIC Psychology Postdoctoral Application).

A complete application consists of the following materials:

1. Cover letter
2. A current Curriculum Vitae
3. Three Standard Reference Forms, two of which must be from persons who have directly supervised your clinical work
4. A sample de-identified Assessment Report
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***

CFP will base its selection process on the entire application package noted above; however, applicants who have met the following qualifications prior to beginning the fellowship will be considered preferred:

1. A minimum of 1,600 intervention hours;
2. A minimum of 10 comprehensive assessments;
3. Bilingual and multicultural background;
4. Dissertation defended;
5. Experience or interest in working with individuals with intellectual/developmental disabilities;
6. Experience or interest in working with children and families;
7. Some experience or interest in working with diverse populations across the lifespan;
8. Completion of an APA- or CPA-accredited doctoral program.

All applications will be reviewed by CFP's Training Committee using a standard Applicant Rating Scale and evaluated for potential goodness of fit with the 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 are invited to interview by email on or before January 20. Interviews are scheduled on a first come, first served basis and will occur in person or via Zoom (for candidates located outside the Tristate area) with representatives of the Training Committee. Interviews are conducted using a standard interview protocol, although members of the Training Committee may ask additional interview questions of applicants as they deem appropriate.



### ***Participation in the APPA CAS Process***

The Training Committee holds a meeting within two working weeks of the completion of interviews 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, CARES participates in the APPIC Postdoctoral process. CFP abides by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any applicant. Questions regarding any part of the selection process or CFP's academic preparation requirements may be directed to Dr. Sharon Shkedi, Training Director.

All fellows must provide proof of eligibility to work in the United States in accordance with applicable law and must successfully pass a fingerprint-based background check before beginning employment. Additionally, CARES is an alcohol, tobacco, marijuana, and drug-free workplace. All fellows must pass a drug screen. Fellows also must provide results from tuberculosis (TB) screening test from the previous 12-months; however, it must cover their fellowship year. Instructions for providing this information or completing the background check, drug screen and TB screening are sent out to all accepted applicants. This information is also covered in the Fellowship Handbook which is available via link on CARES' website as well as in the APPIC Directory. It is available upon request from any applicant via email to the Training Director.

## **Appendix 2 Diversity and Non-Discrimination Policy**

The CARES Psychology Fellowship Program (CFP), like all CARES' programs, actively supports diverse applicants. Diversity is respected and celebrated across CARES. Fellows and all staff function within a safe, learning environment which is inclusive and geared to enriching the field of psychology. It is CARES' belief that ensuring a diverse environment promotes personal growth, strengthens the workplace and communities. Staff and fellows are supported to feel comfortable and respected in a climate where success is achievable. Fellows are supported to gain fluency and competency with a diverse population as this is a cornerstone of the programs and services CARES provides.

CARES is located in NYC which is home to speakers of over 200 languages, 40% of whom are born outside the United States. Providing multilingual and multicultural services for underserved populations is a hallmark of CARES programs, enabling CFP to include competency in diversity. CARES serves children and adults with intellectual/developmental disabilities, medical conditions and/or emotional needs. Since its inception, CARES always sought staff for recruitment who reflect the many cultures of the families served. Providing support to families by clinicians from their ethnic, racial and linguistic backgrounds has been documented to result in enhanced client comfort, better treatment compliance and fewer hospital readmissions.

As CARES' clients are diverse, it is essential to facilitate a diverse training environment. This benefits fellows from diverse backgrounds and ensures that they are supported throughout their training. CFP believes that a diverse environment contributes to the overall quality of the training provided and enriches opportunity for all participants. Fellows are expected to acquire the skills, perspective, knowledge and awareness needed to provide competent services to all who seek services. Competency is expected across linguistic and cultural parameters. Fellows' acquisition of such competencies is evaluated both at the midpoint and in their summative assessments.

CARES does not discriminate based on an applicant's race, color, religion, gender, sexual orientation, age or disabilities unless such factor represents a barrier to successfully treating our clients. Applicants are evaluated based on their experiences, the quality of their training and practicum and their perceived fit within the CARES Fellowship Program.

## **Appendix 3 Stipend, Benefits, and Resources Policy**

The fellowship is a two years program. The annual stipend for all fellows at CARES Psychology Doctoral Fellowship Program (CFP) is \$54,000 for the first year and \$60,000 for the second year. An additional increase of \$5,000 will be provided following successfully passing the licensure exam. As employees of CARES, fellows are eligible to receive comprehensive health benefits (subject to the terms and conditions of the applicable plans), 10 days of Paid Time Off (PTO), up to 56 sick/personal hours\* and 7 additional paid holidays annually. Questions regarding specific benefits packages can be directed to CARES' Human Resources Department at [hr@caresnys.org](mailto:hr@caresnys.org). Fellows should submit requests for time off to their primary supervisor at least two weeks in advance of the anticipated leave date, in particular during holiday periods, such as year-end, to ensure coverage of patients on their caseload. Fellows are responsible for communicating anticipated absences to all supervisors for whom work will be missed. Sick leave must be communicated to the fellow's primary supervisor as soon as the fellow is physically able to do so. Supervisors are available for any questions related to time off or release time. In the event a fellow experiences a personal or family emergency which renders them unable to complete their fellowship on schedule, CFP will use its best efforts to extend such fellowship and training to afford the fellow the opportunity to complete their fellowship.

\*Please note sick time is accrued for every 30 hours worked you earn 1 hour of sick/personal leave that must be taken in at least 8 hour increments.

CFP has access to numerous resources. All fellows are provided with individual desk space, access to a computer, office phone, voicemail, printers, software, ID badges and basic office supplies. Therapeutic toys, intervention manuals, assessment materials, other training materials and access to the DSM 5 and ICD-10 are provided by CFP. Additional materials that may be needed may be purchased with advanced supervisory and or Training Committee written approval. Each fellow additionally has access to administrative and IT support and receives training and support on the Agency's EHR as well as client scheduling support.

## **Appendix 4 Evaluation, Retention and Termination Policy**

All fellows are expected to complete 4,000 hours of training during their fellowship years. It is essential for fellows to meet the hour requirement and obtain sufficient ratings on all evaluations in order to demonstrate that they have progressed satisfactorily through and completed the CARES Fellowship Program. Fellow evaluations, certificates of completion and a copy of the program handbook are maintained by the Training Director in a secure digital file, indefinitely. Fellow evaluations and any other relevant feedback is provided to the fellow at a minimum of twice annually, once at the mid-point and at the end of each fellowship year.

Fellows are required to demonstrate minimum levels of achievement across all competencies and training elements. Fellows are formally evaluated by their supervisors twice annually, at each midpoint and at the end of each fellowship year. Evaluations are conducted using a standard rating form, which includes specific written feedback regarding the fellows' performance and progress. The evaluation form includes information about the fellows' performance regarding all of their expected training competencies and the related training elements. The Training Director along with the supervisors are expected to review these evaluations with the fellows and provide an opportunity for discussion at each time point.

At the midpoint, 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. Successful completion of the fellowship is contingent upon achievement of a minimum competency of 4, with no element rated less than a 4. 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 a fellow 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.

In addition to the evaluations described above, fellows complete a written evaluation of their supervisor and a written program evaluation at the mid-point and at the end of each training year. Feedback from these evaluations is used to inform changes or improvements to the training program.

## Appendix 5 Due Process and Grievance Procedures Policy

### *Fellow's Rights and Responsibilities*

- Fellows have the right to make a grievance about any element of the training program or the agency at all times during the fellowship.
- Fellows have the right to remediate problems and receive support and assistance in resolving concerns
- Fellows have the right to be treated in a respectful manner throughout the due process and grievance procedures
- Fellows have the right to have their concerns and viewpoints heard in the process
- Fellows have the right to appeal decisions with which they disagree.
- Fellows are responsible to engage and respond professionally and make attempts to remediate competency concerns.

### *The Program's Rights and Responsibilities*

- The program has the right to make decisions about the best way to support a fellow in remediating behavioral or competency concerns
- The program has the right to implement the due process policies and procedures (outlined below) at any time during the fellowship.
- The program has the right to be treated respectfully throughout the due process and grievance procedures
- The program is responsible to engage with the fellow in a respectful manner
- The program is responsible to support the fellow to achieve the competencies and aims of the program.

## Due Process

### *Definition of Problematic Behavior*

During the course of the fellowship, situations may arise in which the fellow's level of performance, attitude, and willingness to perform duties or inability to control personal reactions may interfere with the fellow's professional functioning to a degree that rises to a level of a problem in the opinion of the fellow's supervisor. Such behaviors may include but are not limited to:

- Failure to follow through on supervisor's recommendation(s) as identified in supervision
- A skill deficit that cannot be improved by intervention through supervision
- Behavior(s) that require an inordinate amount of attention from the supervisory staff
- Behavior(s) that negatively impacts client care
- Behavior(s) that negatively affects the fellow's ability to function on a team
- Behavior(s) that violates agency standards

#### 1. **Informal Initial Discussion:**

If a fellow exhibits problematic behavior (see above) which is identified by the supervisor and/or Training Director, the supervisor and/or Training Director will initially conduct an informal discussion with the fellow regarding the problematic behavior and the fellow will be provided with the opportunity to respond to the concerns, including providing any documentation in support of the fellow's position.

#### 2. **Notice:**

In the event that the problematic behavior continues despite the informal discussion, the fellow will be provided with written notice to attend a meeting with the Training Committee (Training Director, a Senior Clinical Supervisor, and the Program Director) to be convened within 2 working weeks.

#### 3. **Hearing:**

At this meeting, the fellow will be provided with the opportunity to hear the concerns regarding his or her problematic behavior(s) and to respond to them. The action for remediation and a timetable for correction will be reviewed at this meeting as well. If necessary, the meeting will be adjourned for a maximum of 3 business days, or such alternative time established by the Committee, in order to allow the fellow to prepare a more comprehensive response or to provide documentation.

#### **4. Findings:**

Findings from the hearing can include a determination that the fellow will be placed on formal notice, will receive a written warning in their file, will be provided with additional support, or that a formal remediation plan is needed. In the event the conduct of a fellow is an ethical violation or one which places the integrity of the program or the health and safety of patients at risk, the fellow may be subject to immediate dismissal from the program.

#### **5. Remediation:**

##### *A. Remediation Plan –*

- i. If the Training Committee concludes that the behavior is amenable to remediation, a remediation plan will be prepared in writing and agreed to by the Training Committee and the fellow within 7 business days of the meeting.
- ii. The remediation plan will specify any support the program will put in place to address the situation (e.g., additional supervision, scheduling changes, etc.) as well as the behavioral alterations which are expected from the fellow.
- iii. The remediation plan will be in place for 30 days, or such alternative timeframe set by the Committee and will be reviewed thereafter by the Training Committee with the fellow. During the implementation of the remediation plan, the fellow will be notified that he/she is in a Probationary Period.

##### *B. Probationary Period –*

The fellow will be advised that s/he is in a probationary period pending his or her adherence to the remediation plan. At the end of the probationary period, which will continue for the duration of the remediation plan, the Training Committee will reconvene and review what has occurred, i.e., either the matter has been fully resolved, progress has occurred or the behavior is continuing. In the event the behavior has been resolved, the fellow will be notified that the probationary period has concluded successfully. In the event substantial progress has occurred, but the problematic behavior still continues, the committee may consider extending the probationary period. In the event the problematic behavior continues with minimal or no improvement during the probationary period, the Training Committee will consider the dismissal of the fellow.

#### **6. Appeal Procedures:**

- a. Within 7 working days of each step identified above, except with respect to dismissal from the program, the fellow will be provided with the opportunity to appeal the actions taken by the program in respect of the identified problematic behavior. Notice of the appeal and the basis for the appeal with any supporting documentation must be submitted by the fellow in written form to the Training Committee members. The appeal process will involve a senior licensed psychologist who did not participate in the initial hearing and who is not the Training Director of the program.
- b. Within 14 working days of receiving the appeal from the fellow, a meeting with the Senior Licensed Clinician will be held.
- c. A formal written decision will be provided to the fellow within 7 business days of this meeting. This decision will be final and not subject to further Appeal.
- d. All steps of the remediation process may be appealed by the fellow, except for dismissal for cause or the final determination below.

#### **7. Final Determination:**

At the conclusion of the probationary period, as was defined initially by the Training Committee, or as extended by the Training Committee, a meeting will be held to review the initial presenting issue and to discuss the progress made by the fellow. A final decision will be made whether sufficient improvement has occurred to permit the fellow to complete their training or whether dismissal is warranted. As noted above, this decision is not subject to appeal.

#### **8. Dismissal from the Fellowship:**

Dismissal of the fellow from their training can occur in either of two instances. One is the immediate dismissal described under 4 above. The second is, after multiple corrective measures have been implemented and all stages of due process have occurred and the fellow remains unable or unwilling to correct his/her problematic behavior.

# Grievance Procedures

At all times during the fellowship, fellows have the right to make a grievance about any element of the training program. Some examples may include, but are not limited to, a fellow experiencing problems with the training program due to allegations of poor or absent supervision, unreasonable workload, and/or unreasonable scheduling. In the event a grievance does not relate to staff within the Fellowship Program, the Training Director may involve the Agency's HR Department in the Grievance process.

## **1. Informal Initial Discussion:**

The fellow should first try to settle the grievance through informal discussion with his or her supervisor. In the event the grievance relates to staff outside of the Fellowship Program, the Training Director will facilitate an informal meeting with the individual involved. If the Training Director feels it is appropriate he or she will facilitate meetings with the aggrieved parties.

## **2. Complaint:**

In the event that the grievance cannot be settled through informal discussion, the fellow can submit a written complaint to the Training Director. Such complaint shall set forth any and all details alleged by the fellow. If the grievance is with respect to an alleged action of the Training Director, the fellow will be advised to bring the grievance to the Program Director. The recipient of the complaint shall convene a meeting of the Training Committee within 7 business days of receipt. The Agency's HR department may be asked to participate if the subject of the grievance is outside of the Fellowship Program.

## **3. Initial Review Process:**

To facilitate a review of the grievance, the Training Committee will meet to formally hear the fellow's grievance. Any member about whom the grievance is made, whether the Training Director or another member of the Training Committee will be excused from this meeting. At this meeting, the Committee will determine a subsequent course of action and by whom it will be conducted. This may include a meeting with the parties independently, or jointly, to collect additional information or to verify or dispute the alleged grievance. This shall take no longer than 14 working days. All parties will be notified by the Committee and invited to present any additional or supporting information.

## **4. Second Review Process:**

Within 7 working days of receipt of any subsequent information, the Training Committee shall reconvene to review the written complaint and any relevant data which has been gathered (with any member about whom the grievance is made, whether the Training Director or another member of the Training Committee excused from this meeting). The Committee shall prepare a report, setting forth its recommendations, and provide it to the fellow, within 7 working days of the meeting.

## **5. Appeal Procedure:**

- a. The fellow will be afforded the opportunity to appeal any decision of the committee within 7 working days of receiving the report and recommendations. Notice of the appeal and the basis for the appeal with any supporting documentation must be submitted by the fellow in written form, to the Training Committee members, excluding a member about whom the grievance has been made. The appeal process will involve a senior licensed psychologist who did not participate in the hearing conducted at the Second Review Process.
- b. Within 14 business days of receiving the appeal, a meeting with the fellow and the Senior Licensed Clinician will be held. The Program Director shall be informed and invited to attend this meeting.
- c. A final formal written decision will be provided to the fellow within 7 working days of this meeting. This decision is not subject to further appeal.

## **Appendix 6 Telesupervision Policy**

The CARES Psychology Doctoral Fellowship Program (CFP) uses videoconferencing to provide supervision to all fellows. Previous to the COVID-19 Pandemic, at CFP, all supervision, both individual and group, was provided in person. The pandemic introduced social distancing, quarantining and posed other challenges to continuing to meet in person. As a result, Telesupervision, using simultaneous video and audio was implemented. At this time, it is also being used; however it is anticipated that at some point in the future in person supervision will resume. Using the lessons learned from telehealth, it is likely a combination of Telesupervision and in person supervision will be utilized once the pandemic has abated.

Telesupervision is utilized in order to promote interaction and socialization among fellows, since fellows are frequently dispersed across separate training sites. Fellows and a faculty facilitator meet in a virtual conference room and interact via high-quality real-time transmission of simultaneous video and audio. Individual and/or group Supervision in this format is required for all current CFP fellows for two (2) hours each week, at a regularly scheduled time. CFP places high value on cohesion and socialization of fellow cohorts and virtual meetings via videoconferencing are an effective way to foster connection during the intervals between in-person meetings. The use of videoconference technology for supervisory experiences is consistent with CFP's model and training aim as CFP places a strong training emphasis on access to behavioral healthcare in underserved areas, which often includes the use of telehealth services, as well as during public health emergencies, national disasters or weather emergencies where travel is curtailed or unavailable.

CFP recognizes the importance of supervisory relationships. Individual and/or group Supervision is led by members of the CFP Training Committee, on a rotating basis, in order to provide fellows with the opportunity to experience a breadth of supervisory relationships and supervision modalities. It is expected that the foundation for these supervisory relationships will be cultivated initially during CFP's orientation, such that fellows will have formed relationships with the entire Training Committee prior to engaging in supervision via videoconference. For all clinical cases discussed during group supervision, full professional responsibility remains with the fellow's primary supervisor and any crises or other time- sensitive issues are reported to that supervisor immediately. Fellows are provided contact information for all CFP supervisors including email and phone numbers, so crises and time-sensitive information can be reported as necessary.

All CFP videoconferencing occurs over secure network using site-administered videoconferencing technology and is HIPAA compliant. Supervision sessions using this technology are recorded only if appropriate for training purposes and all participants are notified if this is deemed to be the case, thus protecting the privacy and confidentiality of all trainees. All fellows are provided with instruction regarding the use of the videoconferencing equipment at the outset of the training and are offered the use of secure devices. Technical difficulties that cannot be resolved on site are directed to the CARES Information Technology Department.



## Appendix 7 Parental Leave Policy<sup>1</sup>

Birth, adoption and parenting of children are common phenomena among psychology interns and postdoctoral trainees and may impact their training. It is important to consider what is appropriate and reasonable for parents, what is practical and feasible for the site and how to ensure that the trainee receives the full benefit of the training experience.

The CARES Fellowship Program (CFP) would like to arrive at a mutually agreeable solution to accomplish the following:

- Allow appropriate parental leave for parents and their new children.
- Provide sufficient time for bonding with new children and postpartum recuperation (in the event of birth) for mothers, which may include physical healing, establishing breastfeeding (should a mother choose to do so) and managing with postpartum depression or anxiety.
- Ensure that trainees meet CFP's aims, training goals, competencies and outcomes.
- Comply with state, federal and institutional standards regarding parental leave.

### Considerations:

Issues may arise relating to the structure, content and process of the training experience for those individuals who miss some of their internship or postdoctoral fellowship for family reasons. These include, but are not limited to: orientation to the site, consideration of responsibilities upon their return, the clinical needs of the population served, participation in didactics and cohort issues.

Applicants should remember the binding nature of the APPIC Process when accepting positions. Trainees and sites often ask about the possibility of deferment of their postdoctoral fellowship. Pregnancy and adoption, in and of themselves, are not grounds for deferment.

It is important for trainees who request parental leave to understand that while CARES will try to be as accommodating as possible, there are real considerations that may restrict the amount of leave that can be granted. For example, the training program must ensure that trainees have achieved the program's aims, training requirements, competencies and outcomes and have received a sufficient number of hours of training.

### Range of Options:

The timing of leave being requested during the fellowship will have a direct bearing on the options that may be considered. In some cases, it will be determined that the trainee may take a leave from the training and extend the training period as necessary. As CARES' training is sequential, a delayed start of more than 2-3 weeks will impact the fellow's ability to benefit from the required training hours. Similarly, early termination of more than 2-3 weeks will create a gap in patient treatment. Each of these scenarios will require a written plan to determine how the trainee will complete the required number of hours of training and to achieve the program's requirements. Such a plan will involve the Director of Clinical Training from the trainee's doctoral program as well as the CARES HR Department.

While APPIC does not endorse a standard amount of parental leave, it is strongly recommended that both parties be as flexible and creative as possible when establishing an agreement. This applies to arrangements for birthing, non-birthing and adopting parents. CARES will encourage fellows to first use their vacation or personal days earned to date, with the birth parent able to file for disability (insurance carrier provides for 6 weeks after a vaginal birth and 8 weeks after a cesarean delivery) and either parent is able to take up to 12 weeks of leave under the Family Medical Leave Act (FMLA). The disability is available after 30 business days of full-time employment. The disability insurance policy will pay up to 66% of the fellow's average weekly wage or stipend. Paid Family Leave is available after 26 weeks of full-time employment.

CARES will work with fellows to thoughtfully and collaboratively match the needs of both the trainee and the program. It might be possible for the trainee to conduct some activities at home, such as report writing. Some arrangements may include a number of full weeks of leave combined with some weeks of part-time leave.

Although the amount of time granted for leave varies from site to site, most often, birth mothers and adoptive parents are able to take between 6 and 12 weeks of parental leave. It can be very difficult to complete a full training experience when a longer leave (such as 12 or more weeks) is taken which most sites are not able to accommodate. It is important to ask for what one needs while at the same time being collaborative and flexible as there may be structural, human resources, budgetary, clinical considerations and other types of constraints that training programs must manage.

While not all mothers want or are able to breastfeed, CARES will work with breastfeeding women who may need to express breast milk while onsite. In such a case, a private area will be provided with adequate time to express milk. Sites and trainees will need to discuss the amount of time needed and how it may impact the daily schedule.

## Appendix 8 Fellow Evaluation Form

### CARES Fellowship Program - Fellow Evaluation Form

To be completed by the supervisors

Fellow: \_\_\_\_\_ Supervisor \_\_\_\_\_

Dates of Evaluation: \_\_\_\_\_ to \_\_\_\_\_ Training site: CARES

Methods used in evaluating competency:

- Direct Observation     
  Review of Audio/Video     
  Case Presentation  
 Documentation Review     
  Supervision     
  Comments/Scoring from other Staff/Faculty

<b>1 -- Remedial</b>	
Significant skill development is required; remediation is necessary	
<b>2 -- Beginning/Developing Competence</b>	
Expected level of competence pre-fellowship; close supervision required in most cases	
<b>3 -- Intermediate Competence</b>	
Expected level of competence for the fellow by mid-point of the training program; routine or minimal supervision required in most cases	
<b>4 – Proficient Competence</b>	
Expected level of competence for the fellow at the completion of the training program; ready for entry-level practice	
<b>5 – Advance Competence</b>	
Rare rating for fellows; able to function autonomously with a level of skill representing that expected beyond the conclusion of the fellowship	
<b>Competency 1 - Fellow will achieve competence in the area of: <i>Research</i></b>	
<ul style="list-style-type: none"> <li>Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities via professional publication or presentation at the local, regional, or national level.</li> <li>Utilizes scholarly literature and other resources to inform practice with diverse clients.</li> <li>Demonstrates independent ability to collect, integrate and critically assess data from interventions to guide ongoing treatment and recommendations.</li> </ul>	Score
	Score
	Score
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	Score
Comments:	

<b>Competency 2 - Fellow will achieve competence in the area of: Ethical and Legal Standards</b>	
<ul style="list-style-type: none"> <li>• Demonstrates knowledge of and acts in accordance with each of the following: <ul style="list-style-type: none"> <li>○ The current version of the APA Ethical Principles and Code of Conduct;</li> <li>○ Relevant laws, regulations, rules and policies governing health service psychology at the organizational, local, state, regional, and federal levels;</li> <li>○ Relevant professional standards and guidelines.</li> </ul> </li> <li>• Recognizes ethical dilemmas which may arise and applies ethical decision-making processes in order to resolve dilemmas which occur.</li> <li>• Conducts self in an ethical manner in all professional activities.</li> </ul>	Score
	Score
	Score
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	Score
Comments:	
<b>Competency 3 - Fellow will achieve competence in the area of: Individual and Cultural Diversity</b>	
<ul style="list-style-type: none"> <li>• Demonstrates an understanding of how his or her personal/cultural history, attitudes and biases may affect how an fellow understands and interacts with people different from him or herself.</li> </ul>	Score
<ul style="list-style-type: none"> <li>• Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity.</li> </ul>	Score
<ul style="list-style-type: none"> <li>• Integrates awareness and knowledge of individual and cultural differences in the conduct of professional roles.</li> </ul>	Score
<ul style="list-style-type: none"> <li>• Demonstrates the ability to independently apply his or her knowledge and approach in working effectively with the range of diverse individuals and groups encountered during the fellowship.</li> </ul>	Score
<ul style="list-style-type: none"> <li>• Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity.</li> </ul>	Score
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	Score
Comments:	
<b>Competency 4- Fellow will achieve competence in the area of: Professional Values and Attitudes</b>	
<ul style="list-style-type: none"> <li>• Behaves in ways that reflect the values and attitudes of psychology.</li> </ul>	Score
<ul style="list-style-type: none"> <li>• Engages in self-reflection regarding personal and professional functioning.</li> </ul>	Score
<ul style="list-style-type: none"> <li>• Engages in activities to maintain and improve performance, well-being and professional effectiveness.</li> </ul>	Score
<ul style="list-style-type: none"> <li>• Actively seeks and demonstrates openness and responsiveness to feedback and supervision.</li> </ul>	Score
<ul style="list-style-type: none"> <li>• Responds professionally in increasingly complex situations with a greater degree of independence as he/she progresses across levels of training.</li> </ul>	Score

AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	Score
Comments:	
<b>Competency 5- Fellow will achieve competence in the area of: Communication and Interpersonal Skills</b>	
<ul style="list-style-type: none"> <li>• Develops and maintains effective relationships with a wide range of individuals.</li> <li>• Produces and comprehends oral, nonverbal and written communications.</li> <li>• Demonstrates effective interpersonal skills and the ability to manage difficult communication well.</li> </ul>	Score Score Score
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	Score
Comments:	
<b>Competency 6- Fellow will achieve competence in the area of: Assessment</b>	
<ul style="list-style-type: none"> <li>• Demonstrates current knowledge of diagnostic classification systems, functional and dysfunctional behaviors.</li> <li>• Demonstrates an understanding of human behavior within its context (e.g., family, social, societal and cultural).</li> <li>• Applies knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process.</li> <li>• Selects and applies assessment methods that draw from the best available empirical literature.</li> <li>• Collects relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient.</li> <li>• Interprets assessment results to inform case conceptualization, classification and recommendations while guarding against decision-making biases.</li> <li>• Communicates orally and in written documents the findings and implications of comprehensive assessments in an accurate and effective manner.</li> </ul>	Score Score Score Score Score Score
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	Score
Comments:	

<b>Competency 7- Fellow will achieve competence in the area of: Intervention</b>	
<ul style="list-style-type: none"> <li>Establishes and maintains effective relationships with recipients of psychological services.</li> <li>Develops evidence-based intervention plans specific to the service delivery goals.</li> <li>Implements interventions informed by the current scientific literature.</li> <li>Demonstrates the ability to apply the relevant research literature to clinical decision making.</li> <li>Modifies and adapts evidence-based approaches effectively.</li> <li>Evaluates intervention effectiveness.</li> </ul>	Score
	Score
	Score
	Score
	Score
	Score
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	Score
Comments:	
<b>Competency 8- Fellow will achieve competence in the area of: Supervision</b>	
<ul style="list-style-type: none"> <li>Demonstrates knowledge of supervision models and practices.</li> <li>Applies knowledge of supervision in direct or simulated practice with psychology trainees or other health professionals.</li> <li>Demonstrate the ability to reflect on the supervision process and assume a more consultative approach as he or she progresses across levels of training.</li> <li>Provides psychology trainees or other health professionals with appropriate feedback during group supervision.</li> </ul>	Score
	Score
	Score
	Score
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	Score
Comments:	
<b>Competency 9- Fellow will achieve competence in the area of: Consultation and interprofessional/interdisciplinary skills</b>	
<ul style="list-style-type: none"> <li>Demonstrates knowledge and respect for the roles and perspectives of other professions.</li> <li>Applies knowledge about consultation in direct or simulated (e.g. role play) consultations.</li> </ul>	Score
	Score
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	Score
Comments:	
<b>OVERALL RATING (average of broad competence area scores)</b>	
	Score
Comments on Fellows overall performance:	

I acknowledge that my supervisors have reviewed this evaluation with me.

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Fellow Signature

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Supervisor's Signature

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Supervisor's Signature

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Training Director's Signature