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Mission Statements

Counseling and Wellness Center Mission Statement
The Mission of the Counseling and Wellness Center at the University of Florida is to facilitate the total development of students by reducing psychological problems and distress and by enhancing mental health, well-being, quality of life, and optimal functioning, through the delivery of high quality, culturally sensitive services to UF students and the larger campus community. Our primary focus is on providing brief, confidential counseling aimed at helping students succeed academically and interpersonally.

Multicultural Mission Statement

We value acceptance and appreciation for all differences among people, including those of national origin, race, gender, gender expression, sexual orientation, ethnicity, functional ability, socio-economic status, age, and religious affiliation. We believe that valuing cultural diversity from a global perspective maximizes human growth and development, and enhances the quality of life in our community, on our campus, and throughout the world.

Training Mission Statement
The practicum training program is an integral part of the mission of the University of Florida Counseling and Wellness Center (CWC), and the entire professional and support staff is involved in the supervision and training of our practicum counselors. The practicum training program is designed to prepare trainees to function competently as a counselor in training. Our goals are: to help develop counselors who are competent, highly ethical, and culturally sensitive. The program follows a practitioner-scholar model of professional training for counselors, which emphasizes experiential learning. As a practitioner, the trainee applies the knowledge gained from scholarly and scientific evidence to clinical practice. As a scholar, the trainee is engaged in study of the science of psychology, and is encouraged to contribute to the profession through involvement in scholarly activities. Although the training staff represents a variety of theoretical orientations, there is a shared valuing of experiential, developmental and humanistic approaches to training.

Training Philosophy
Practicum is a time to develop one’s professional skills and identity as a counselor. The practicum training program offers training in a variety of areas related to the counseling profession. We attempt to provide an atmosphere that is conducive to learning by providing trainees with an appropriate blend of support and challenge. We see trainees as emerging professionals and treat them accordingly, giving them a balance of autonomy and structure. At the same time, we try to provide the professional and emotional support necessary to allow for growth and development. We focus on trainees' "growth edges"
and attempt to facilitate trainees' growth throughout the course of the year.

Evaluation and feedback is an important part of the practicum training program experience. Clinical supervisors, group supervisors, and members of the training staff evaluate and provide feedback to trainees twice each semester (at mid-term and again at the end of the semester). This feedback focuses on the development and progress of each trainee, with the focus always being on helping trainees identify areas of strength and areas for growth. Trainees, in turn, evaluate their clinical supervisors and the training program once each semester.

Depending on their contract, trainees will have the opportunity to engage in the multiple roles of working at a counseling center, which include counseling services (individual, couples, and group therapy), assessment, crisis intervention, referral, consultation, outreach workshops, participation in training seminars and professional development activities.

**Professional Ethics**
Trainees are expected to follow ethical guidelines and principles as established by the American Psychological Association (APA) and the American Counseling Association (ACA). They are expected to be aware of and adhere to pertinent Florida laws governing professional practice. All trainees must maintain ALL client information confidential as required by law and the APA and ACA ethics codes. Ethical issues are presented as a component of the trainee seminar. Ethical issues are integrated into all discussions regarding service delivery and into all training opportunities, including seminars, individual and group supervision sessions.

**Training Committee**
Administratively, the practicum training program is under the direction of the Practicum Coordinator, the Training Director, and the Training Committee. The Training Committee is comprised of Training Director, Practicum Coordinator, other clinicians on staff, and intern representatives.

**Service Activities**

**Areas of Concentration (Advanced Practicum)**
Although advanced practicum counselors are being trained as generalist counselors, some of their direct hours may be used to focus on a chosen area of concentration. These areas of areas of concentration include the following categories:

- Student Population – International students or 1st generation students,
- Presenting issues - Eating disorders, anger management, social anxiety, substance abuse, sexual abuse and trauma recovery, or gender issues, or
- Psychotherapeutic Approaches/Interventions - Hypnosis, psychodynamic therapy, mindfulness, crisis intervention, or outreach/consultation.
Each counselor will create a contract with their supervisor and the practicum coordinator that will determine their weekly schedule.

**Individual Counseling**
Trainees typically see 4-6 clients per week. After an initial assessment of the trainees' needs, supervisors work with each trainee to select cases that will facilitate development in particular areas. The Counseling and Wellness Center endorses a brief psychotherapy model (1-15 sessions) and incorporates a variety of theoretical orientations, such as humanistic, feminist, psychodynamic, and cognitive-behavioral. All trainees will see a range of cases that include work with individuals who require very short term (1-6 sessions) problem-oriented interventions as well as brief psychotherapy (7-15 sessions) involving more complex therapeutic interventions. Trainees make individual presentations of cases in a weekly group supervision meeting, and receive supervision from their individual supervisor each week. Both individual and group supervision provide ongoing monitoring of case conceptualization, treatment planning, and intervention. Trainees are asked to integrate the application of career counseling interventions in their individual therapy as needed. This may include applications of interest and career counseling inventories (such as the Myers-Briggs Type Indicator, Strong Interest Inventory, and the DISCOVER program).

**Group Counseling and Couples Counseling**
All trainees have the opportunity to co-lead a group and/or engage in couples therapy each semester if they satisfy the following training requirements:

a. Didactic training in the fall through the practicum seminars.

b. Process observation of a couple or a group over the course of the fall semester.

c. Supervision with the group leaders or couples therapist after each session.

d. Advanced practicum students – They should have taken the groups or couples course, or done the group or couple’s seminar before seeing a couple or doing a group.

e. A practicum or advanced practicum student should be paired with a staff member experienced in couples or group therapy. The staff member will also serve as their group or couples supervisor.

**Clinical Assessment (Advanced Practicum – Second Semester)**
The first method of assessment is the triage. Clients are assessed for severity, appropriateness for Center services, recommended mode of treatment (individual, couples, group counseling, etc.), and referral options.

If the client remains at the Center, a new client appointment is scheduled in which a formal clinical assessment interview takes place. The triage session helps inform and direct the nature of this assessment.
Practicum counselors will receive didactic and experiential training through their individual supervisors during the fall semester. Trainees will “shadow” their supervisors in the fall and eventually begin conducting them on their own during the spring semester.

**Crisis Intervention**
Crisis intervention strategies and techniques are presented during practicum seminar. A clinician is always available for crisis consultation. Trainees are expected to develop referral skills as an appropriate extension of assessment and counseling techniques. During orientation, the trainees become familiar with the supportive resources available on the campus and in the community. A directory of such services is made available, and the procedure for referral is discussed. All trainee referrals are monitored by the individual supervisor.

Advanced practicum counselors may choose this as an area of concentration. Specific training and duties will be negotiated with the individual supervisor and practicum coordinator.

**Consultation (Advanced Practicum)**
Advanced practicum counselors may choose this as an area of concentration. Specific training and duties will be negotiated with the individual supervisor and practicum coordinator.

**Outreach Workshops (Advanced Practicum)**
Advanced practicum counselors may choose this as an area of concentration. Specific training and duties will be negotiated with the individual supervisor and practicum coordinator.

**Training Activities**

**Practicum Seminars**
Practicum seminars are an integral part of the training program. The format is both didactic and discussion/process oriented in nature. A wide variety of topics are covered that pertain to major areas of knowledge needed to be a competent clinician. Diversity is infused in all presentations. Particular diversity seminars are also highlighted throughout the year.

Trainee Seminar: 1 Hour every week
Topics covered may include, but are not limited to:
- Intake Interviewing
- Lethality Assessment
- Group Therapy
- Crisis Intervention
- Eating Disorders
- Substance Abuse
- Couples Therapy
- LGBTQ
- International Students
- Sexual Assault and Abuse Recovery
- Biofeedback
- Psychotropic

Continuing Education
Trainees are welcome to participate in the continuing education workshops provided at the CWC or in the community.

Administrative Activities

Collaborative Case Management Team
Trainees are expected to attend the CCM Teams weekly. It is where cases are discussed, reviewed, and at times distributed when clinicians’ caseloads are full. Clinicians use this time to consult about difficult and complex cases and explore referral options.

Meeting with the Practicum Coordinator (Second Semester)
The Practicum Coordinator meets with the trainees 1-2 times during the semester on an individual basis. This is a time to clarify questions, address problems, and discuss ongoing concerns. It provides an important opportunity to keep lines of communication open between trainees and the Practicum Coordinator.

Trainee Contract
Each semester trainees will complete an individual Contract with the Practicum Coordinator specifying how their time will be allocated among their various activities. Trainees are encouraged, as is staff, to keep track of their hours to make sure they are meeting their contracted hours.

Supervision

Philosophy of Supervision
The philosophy of supervision is to encourage the growth and development of each trainee. Over the course of the practicum training program year, each trainee works with two individual supervisors (one in the Fall, the other in the Spring). Other opportunities for supervision occur in group supervision, seminars, co-therapy, and case consultation.
Trainees receive a minimum of 1 ½ hours of supervision per week. Evaluation focuses upon the strengths and "growth edges" (areas for improvement) within the context of minimal competencies. Individual supervision focuses on developing the trainee's clinical skills (incorporating code of ethics) and professional identity. In addition, trainees are provided with the opportunity to perform many of the roles of a university counseling center clinician, and are given feedback on their performance in the areas of individual/couples/groups counseling, outreach, consultation, case management, and professionalism in the workplace.

**Awareness and Use of Self**
We strongly value knowledge and awareness of self as being critical to the development of professional skills, identity and behavior. We encourage trainees to reflect on and disclose personal experiences that are directly tied to an understanding of their interpersonal dynamics as professionals. We encourage trainees to reflect on and disclose personal experiences that lead to an understanding of their interpersonal dynamics as professionals. We believe that trainers and trainees share responsibility for creating a safe and respectful environment in which this exploration can occur. It is the training staff’s responsibility to create a safe and trusting environment, and the trainees’ responsibility to engage in self-reflection and exploration as it relates to their professional development as clinicians. Within this context the training program assists trainees in developing and setting boundaries appropriate to their personal values and self-care, which include respect for individual cultural differences. In this regard, all training activities, including individual and group supervision, and training seminars are designed to promote awareness and use of self. It is important to note that growing as a professional through the awareness of self is not the same as engaging in psychotherapy.

**Personal Therapy**
Although personal therapy is not required of trainees, trainees are strongly encouraged to engage in their own personal therapy while on practicum training program with therapists in the community. The practicum training program year is taxing both personally and professionally; and in times of stress, therapy can be an excellent source of increased awareness and understanding. It can also enhance the therapy that trainees conduct with clients as the trainee sits on the other side of the therapy process. A therapists’ referral list is available for trainees.

**Goal Statements**
The trainee is responsible for developing a goal statement for practicum training program in consultation with his/her individual supervisor at the outset of the practicum training program. The goal statements include an overview for goals for the year, as well as setting goals for each semester. The supervisor works collaboratively with the trainee in formulating goals and identifying areas of strength and "growth edges".

**Individual Supervision**
Trainees receive a minimum of 1.5 hours per week of individual supervision by a
licensed psychologist or licensed mental health counselor. The supervision focuses most intensely on clinical work with individuals, couples, and groups. Trainees digitally record all counseling sessions (not triages) via webcam and are expected to show these recordings in supervision as cases are discussed. Observation of live work is essential to high quality supervision. All trainees are expected to show tapes in both individual and group supervision. Cases are listed on the Training Caseload Log which is maintained by the trainee, and signed off by the supervisor at the end of the semester. Supervisors keep track of cases on an ongoing basis by way of the electronic scheduling system, Titanium. All notes are reviewed and signed by the individual supervisor.

In addition to clinical work, supervision encompasses the broad range of training activities: work in consultation and outreach, ethics and professional development. Trainees change supervisors in the Spring semester, thereby giving them the opportunity to experience two different primary supervisors over the course of the year. In the spring, practicum counselors are supervised by interns.

A Supervision Informed Consent Form is signed by the client and trainee informing the client that the trainee is supervised and the name(s) of the trainee’s supervisor(s). This form must be filled out at the beginning of each new client appointment and when supervisor changes occur.

**Group Supervision**
In this meeting, trainees meet as a group (with a licensed clinician) and discuss cases, make case presentations, and review digital recordings of clinical work. A formal case presentation is required, as is the showing of at least one recording each semester. It is also an environment to explore and develop an awareness of self as it informs trainees’ work professionally. Great effort is made to make this a trusting environment so that trainees can explore new and creative avenues in their clinical work.

**Limits on confidentiality in supervision**
Supervisors vary in their emphasis on transference-counter transference issues in supervision. Work with trainees on these issues could involve personal disclosures from the trainee. Most supervisors wish to respect privacy on personal issues, yet retain a responsibility for evaluation of trainee performance. Supervisors occasionally may need to consult with their peers on a supervision issue, and would discuss this with the trainee. Supervisors also have opportunities to consult in "peer supervision" on their own supervision issues. Supervision is not to be confused with a therapy relationship, although there may be aspects of supervision which are therapeutic. Trainees are encouraged to discuss the limits of confidentiality with their supervisors. Privacy on personal issues is respected, and if these issues are affecting work performance, the performance issues will be addressed.

**Evaluation**
Comprehensive Evaluation of Trainee Competence

As a Training Committee we believe we have a professional, ethical, and potentially legal obligation to: (a) establish criteria and methods through which aspects of competence other than, and in addition to, a student-trainee's knowledge or skills may be assessed (including, but not limited to, emotional stability and well being, interpersonal skills, professional development, and personal fitness for practice); and, (b) ensure—insofar as possible—that the student-trainees who complete our program are competent to manage future relationships (e.g., client, collegial, professional, public, scholarly, supervisory, teaching) in an effective and appropriate manner. Because of this commitment, and within the parameters of our administrative authority, we strive not to advance, recommend, or graduate trainees with demonstrable problems (e.g., cognitive, emotional, psychological, interpersonal, technical, and ethical) that may interfere with professional competence to other programs, the profession, employers, or the public at large.

As such, within a developmental framework, and with due regard for the inherent power difference between students and training staff, trainees should know that their training staff and supervisors will evaluate their competence in areas other than, and in addition to clinical skills and knowledge. These evaluative areas include, but are not limited to, demonstration of sufficient: (a) interpersonal and professional competence (e.g., the ways in which student trainees relate to clients, peers, faculty, allied professionals, the public, and individuals from diverse backgrounds or histories); (b) self-awareness, self-reflection, and self-evaluation (e.g., knowledge of the content and potential impact of one's own beliefs and values on clients, peers, faculty, allied professionals, the public, and individuals from diverse backgrounds or histories); (c) openness to processes of supervision (e.g., the ability and willingness to explore issues that either interfere with the appropriate provision of care or impede professional development or functioning); and (d) resolution of issues or problems that interfere with professional development or functioning in a satisfactory manner (e.g., by responding constructively to feedback from supervisors or program faculty; by the successful completion of remediation plans; by participating in personal therapy in order to resolve issues or problems).

This policy is applicable to settings and contexts in which evaluation would appropriately occur (e.g., practicum training program activities and supervision), rather than settings and contexts that are unrelated to the formal process of education and training (e.g., non-academic, social contexts). However, irrespective of setting or context, when a student-trainee’s conduct clearly and demonstrably (a) impacts the performance, development, or functioning of the student-trainee, (b) raises questions of an ethical nature, (c) represents a risk to public safety, or (d) damages the representation of psychology to the profession or public, appropriate representatives of the program may review such conduct within the context of the program’s evaluation processes.

Although the purpose of this policy is to inform trainees that evaluation will occur in these areas, it should also be emphasized that our program's evaluation processes and content include: (a) information regarding evaluation processes and standards (e.g., procedures will be consistent and content verifiable); (b) information regarding the primary purpose of evaluation (e.g., to facilitate student or trainee development; to enhance self-awareness, self-reflection, and self-assessment; to emphasize strengths as well as areas for improvement; to assist in the development of remediation plans when
necessary); (c) more than one source of information regarding the evaluative area(s) in question (e.g., across supervisors and settings); and (d) opportunities for remediation, provided that training staff, and supervisors conclude that satisfactory remediation is possible for a given student-trainee. Finally, the criteria, methods, and processes through which student-trainees will be evaluated are clearly specified in the practicum training program's handbook, which also includes information regarding due process policies and procedures (e.g., including, but not limited to, review of our program's evaluation processes and decisions).

Evaluation Meetings
Evaluation occurs at several points during the practicum training program year, at the midterm and the end of each semester. The purpose of the evaluation session is to integrate feedback on trainee performance from as many sources as possible. The trainee, after discussion with the individual supervisor, invites several staff members to the evaluation feedback session. The usual configuration includes: trainee, trainee's individual supervisor, practicum coordinator, group supervision leader, and selected co-therapists or group co-leaders (about 4-6 persons). The trainee and supervisor ordinarily discuss trainee progress prior to the evaluation meeting. The usual time allowed for evaluation meetings is 15-20 minutes.

Written Feedback
The individual supervisor is responsible for writing up an evaluation report which describes the trainee's performance in the evaluation period to date, including feedback obtained in the evaluation meeting. At the end of each term, the individual supervisor completes an Evaluation of Trainee Competencies form. All evaluation reports will conclude with one of the following evaluation statements:

1. The trainee is performing within general standards. Any problems encountered are seen as appropriate professional developmental issues.

2. Problems identified in this evaluation have been noted and are significantly below minimum competencies expected. A plan of remediation has been devised and implemented, with review in subsequent evaluations.

3. Trainee has failed to achieve minimum competencies which requires further action by the Training Committee, in accordance with established policies and procedures (see section on Disciplinary Actions).

The supervisor and trainee will discuss the report prior to its submission to the practicum coordinator for inclusion in the trainee's file. The report will be signed by the individual supervisor and the trainee. The trainee's signature on this document does not necessarily reflect agreement with the content, but rather that the document has been presented to the trainee. The trainee may provide a written reaction to the evaluation report. The evaluation report and any additional material must be submitted to the practicum coordinator for inclusion in the trainee's file.
In addition to the individual supervisor completing an evaluation form, the trainee also receives written feedback from their group supervisor co-leader, couples supervisor, outreach co-presenter, and any other supervisors who worked closely with the trainee.

Trainees are expected to evaluate their Individual Supervisor at the end of each term. Also, trainees rate their Overall Training Experience each semester, in addition to evaluating the Practicum Coordinator.

We maintain lines of communication open with trainees’ home department as needed. The training staff and the counseling psychology program faculty meet twice a year to review trainee progress (this is for counseling psychology students only). The Practicum Coordinator will provide a copy of the evaluation to the trainee’s academic training director twice per year. This is in addition to any documents required by the trainee’s academic unit.

**Disciplinary Actions**

**Probation**
In the event a trainee fails to meet or make satisfactory progress toward meeting the general expectations of the training program, s/he may be placed on probation. This action would ordinarily occur in the context of a regularly or a specially scheduled evaluation session. Probation will be for a specified period of time. During the probation, the trainee would operate under a remediation program approved by the Training Committee. Probation will be terminated by action of the Training Committee following a special review session. (Note: In the context of the Appeals, Grievance Procedures and Disciplinary Actions the Training Committee means the senior staff clinicians only.)

**Temporary suspension**
If there is reason to believe that a trainee has violated the APA Code of Ethics and/or is not competent, s/he may be temporarily suspended from engaging in any and all activities associated with the practicum training program. Such suspension can be ordered either by the Practicum Coordinator or by the Director of the CWC. Temporary suspension will go into effect immediately upon informing the trainee of the suspension, either orally or in writing. If informed orally, a written notification including the reasons for suspension is expected to be sent to the trainee, the trainee's primary supervisor, home department and the Training Committee within one working day. The Practicum Coordinator is required to call a special meeting of the Training Committee within five working days of the temporary suspension. The Training Committee will set a date for a special review meeting and will then proceed under the normal procedures outlined in the Trainee Evaluation and Appeals Procedures of this manual.

**Termination**
In the event the Training Committee determines that a trainee is insufficiently competent
to the extent s/he is not able to meet the minimal standards of the training program during the practicum training program year, s/he may be terminated from the program.

1. Insufficient competency is defined as interference in professional functioning that is reflected in one or more of the following ways:

   - an inability or unwillingness to acquire and integrate professional standards and ethics into one's repertoire of professional behavior;
   - an inability to acquire professional skills and reach an acceptable level of competency;
   - an inability to control personal stress, psychological dysfunction or emotional reactions which interfere with professional functioning;
   - A health problem which interferes with the delivery of clinical service, or leads to an extended work leave that jeopardizes the fulfillment of the minimum time requirements as stated in the Practicum training program Contract.

2. Distinguishing problematic behavior from insufficient competency: While it is professional judgment as to when an trainee's behavior is considered insufficiently competent rather than just problematic or in need of improvement, the latter refers to behaviors, attitudes or characteristics, which, while of concern and requiring development, are not unexpected or excessive for professionals in training. Insufficient competency functioning, on the other hand, typically includes one or more of the following characteristics:

   - The trainee does not acknowledge, understand, or address the problem when it is identified.
   - The problem of area of concern is not merely a reflection of a skill deficit which can be improved with academic or didactic training.
   - The quality of services delivered by the trainee is negatively affected to a significant degree; or, as a result of the problem, the quantity of services falls short of the minimum required in the Practicum training program Contract.
   - The problem is likely to be manifested in more than one area of professional functioning.
   - A disproportionate amount of attention by training staff is required by the trainee.
   - The trainee's behavior does not change as a function of feedback, setting individual training goals, applying a remediation program, and/or time.
   - The problematic behavior has potential for ethical or legal ramifications if not
addressed.

3. In the event there are serious problems as the result of an trainee's violation of ethical standards or inability to perform his/her practicum training program duties, the Practicum Coordinator will notify the trainee's doctoral training program of the problems and the actions being taken by the Training Committee. A copy of any report or letter sent to the home university on behalf of the training program will be placed in the trainee's permanent file maintained by the Practicum Coordinator.

4. In the event of sufficiently egregious behavior, a trainee may be terminated from the practicum training program without three reviews (of the situation) being required.

Appeals and Grievance Procedures

The appeals process may be used by a trainee who is in disagreement with an evaluation and/or disciplinary action. There are three possible steps in the grievance procedure, designated as "first", "second", and "third" review, as follows:

First Review

1. In the event that a trainee disagrees with his or her overall evaluation report, s/he may initiate the appeals process. A written request for a review must be submitted to the Practicum Coordinator within 10 working days of receipt of the supervisor's written evaluation report.

2. A meeting will be scheduled in which the Training Committee and the primary supervisor will meet in a closed session to review the written evaluation report and any letters of addendum submitted by the trainee or others. The trainee is not present in this session. (Note: In the context of the Appeals, Grievance Procedures and Disciplinary Actions the Training Committee means the senior staff clinicians only.)

3. The Training Committee will review the evaluation and any supplementary materials that have been provided. Based on their review, the Committee may take any action it deems appropriate. Such action is not limited to, but may take the form of the following:

- Accept the supervisor's evaluation report of problems and recommended program of remediation.

- Amend the supervisor's evaluation report to include specified changes in the statement of deficits or program of remediation. This may include a reversal of the need for a program of remediation or it may specify additional activities required for remediation.
- Place the trainee on probation for a specified period of time during which changes in the trainee's behavior will be expected as specified in the remediation program.

- Suspend or dismiss the trainee from the program.

4. Following the review meeting, the Practicum Coordinator will communicate in writing to the trainee the decision of the Training Committee, including any amendments or changes to the evaluation report, if any.

**Second Review**

1. In the event that a trainee is not satisfied with the outcome of the first review, a second appeal may be initiated by the trainee, in a written request to the Practicum Coordinator within 10 working days from notification of the first review decision.

2. The trainee and his/her primary supervisor will be notified in writing by the Practicum Coordinator that a second review meeting will be held. The trainee may submit to the Training Committee any written statements s/he feels appropriate and/or request that the Training Committee interview other individuals who might have relevant information. The Training Committee may request the presence of and/or written statements from individuals as it deems appropriate.

3. The Training Committee, the trainee and the trainee's primary supervisor will be present at the second review meeting. The trainee has the option of having an advocate present. The advocate may be a clinician from the CWC or from the trainee's home department, or may be a past clinical supervisor who is familiar with the trainee's work.

4. Following the second review meeting, the Training Committee may take any action it deems appropriate. Such action is not limited to, but may take the form of the following:

   - Accept the supervisor's evaluation report of problems and recommended program of remediation.

   - Amend the supervisor's evaluation report to include specified changes in the statement of deficits or program of remediation. This may include a reversal of the need for a program of remediation or it may specify additional activities required for remediation.

   - Place the trainee on probation for a specified period of time during which changes in the trainee's behavior will be expected as specified in the remediation program.

   - Suspend or dismiss the trainee from the program.

5. Following the review meeting, the Practicum Coordinator will communicate in
writing to the trainee the decision of the Training Committee, including any amendments or changes to the evaluation report, if any. The second appeal and review will be completed within 30 working days of the receipt of the written request for appeal.

**Third Review**

1. If a trainee is dissatisfied with the decision of the Training Committee in the second appeal, s/he may request a third and final review. The request for a third review must be submitted to the Practicum Coordinator in writing within 10 working days from the date of notification of the second review decision.

2. An Appeals Panel will be convened, comprising three people: the CWC director, the Training Director, the associate director, and a representative from the senior staff.

3. The trainee will be notified in writing that a third review meeting will be held. The trainee may submit to the Appeals Panel any additional written statements s/he feels appropriate and/or request that the Appeals Panel interview other individuals who might have relevant information. The Appeals Panel may request the presence of and/or written statements from individuals as it deems appropriate, including the individual supervisor and/or the Practicum Coordinator.

4. The trainee will be present at the hearing. The trainee has the option of having an advocate present. The advocate may be a clinician from the CWC or from the trainee's home department, or may be a past clinical supervisor who is familiar with the trainee's work.

5. Following the third review meeting, the Appeals Panel may take any action it deems appropriate. Such action is not limited to, but may take the form of the following:

   - Accept the evaluation report of problems and recommended program of remediation.

   - Amend the evaluation report to include specified changes in the statement of deficits or program of remediation. This may include a reversal of the need for a program of remediation or it may specify additional activities required for remediation.

   - Place the trainee on probation for a specified period of time during which changes in the trainee's behavior will be expected as specified in the remediation program.

   - Suspend or dismiss the trainee from the program.
6. Following the third review meeting, the director of the Center will communicate in writing to the trainee the decision of the Appeals Panel. Copies of the decision will be sent to the Practicum Coordinator and the individual supervisor. The report will be placed in the trainee's file. The third review will be completed within 30 working days of the receipt of the written request for the appeal. The decision of this Appeals Panel (the third review) is final.

**Practicum training program files**

The training file will be housed in the training files cabinets and securely stored electronically. These files will be maintained by the Practicum Coordinator, Training Director, and the Program Assistant. In addition to these files, the Practicum Coordinator, Training Director, and Program Assistant will maintain confidential records of the trainees' evaluations of their supervisor and of the practicum training program.

**Training File to include:**

- Application Materials
- Trainee Contracts
- Mid-semester evaluations
- End of semester evaluations
- Training Caseload Logs
- Letters of recommendation
- Practicum training program completion certificate

I have read and agree to the terms of training for this practicum training program year.

X

Practicum Counselor Signature