



**Clinical Psychology Doctoral Fellowship
Training Manual
2024-2025**

Table of Contents

Introduction.....	3
People Inc.....	3
Partners and Affiliates	3
Agency Contracts.....	4
Agency Lethality Policy.....	4
Training Opportunities	5
Policy and Procedures for Fellowship Training.....	5
Training Philosophy and Aims	5
Training Faculty	6
Description of Populations Served.....	7
Description of Departments Served.....	7
Residential Services	7
Day Services.....	7
Family Support Services	8
Training Goals and Objectives	8
Direct Service Experiences	10
Program Resources	11
Training Curriculum.....	11
Didactic Activities.....	12
Training Sites	12
Administrative Overview.....	13
Prerequisites of Training.....	13
General Requirements	13
Supervision	13
Performance Evaluation	14
Procedures for Addressing Remediation (Due Process Procedures)	14
Appeals Process.....	17
Grievance Procedures	18

Introduction

This manual provides an outline of People Inc. and the policies and procedures for the clinical psychology doctoral fellowship program. Please feel free to talk with the Director of Training if you have any additional questions related to policies or procedures. The title used for doctoral psychology interns within the program is “fellow.”

People Inc.

People Inc. is the region’s leading not-for-profit health and human services organization that plays a unique and valuable role in the communities we serve by assisting our most vulnerable populations, those with intellectual and developmental disabilities, special needs, and seniors, in leading healthy, independent and productive lives. People Inc. provides services to over 10,000 people annually and operates over 200 locations for services throughout Western New York.

Partners and Affiliates

Deaf Access Services: Deaf Access Services (DAS) is a not-for-profit organization that responds to the interests of Deaf and Hard of Hearing people by promoting communication access, awareness and opportunities in the greater community. DAS is the only local community organization solely dedicated to serve the Deaf and Hard of Hearing communities. DAS serves over 600 people through various programs, has 12 employees, 100 contract interpreters and partners with over 700 service providers. Services include: In-Person Interpreting, Video Remote Interpreting (VRI), American Sign Language classes, community services navigation and advocacy, Communication Access Realtime Translation (CART), assistive technology supports, employment placement, specialized Deaf refugee services, and Life Skills and Literacy adult education classes. DAS joined People Inc. as an affiliate in 2019.

Headway: Headway of WNY Inc. was established in 1985 and became affiliated with People Inc. in 2012. Headway’s mission is to ensure that individuals in Western New York with brain injuries, other disabilities, and seniors have access to advocacy, resources, and support systems to enable them to live as independently as possible. It seeks to educate the broader community about the causes, consequences and means of prevention of brain injury. Headway serves as a regional center and manages the nursing home transition and diversion, as well as Traumatic Brain Injury, waiver programs.

Lothlorien: Lothlorien Therapeutic Riding Center was established in 1983 with a mission to assist individuals to develop their highest potential through therapeutically based equine activities. The program provides a safe and fun environment for individuals to experience the benefits of horseback riding and horsemanship skills. In 2019, LTRC became an affiliate of People Inc., further expanding day and therapeutic services, and benefitting from administrative supports.

Home Health Care Services: People Inc. Home Health Care licensed and certified were established in 1993. People First Mobility durable medical equipment company was established as a separate entity in 2015. Virtual Medical Care telemedicine firm was established as a separate entity in 2019. Medical Practitioner Services was established as a separate entity in 2020.

Other: In 2012, DePaul Developmental Services transferred its Rochester-based OPWDD-regulated residential and respite programs to People Inc. The same year, Baker Victory Services transferred several OPWDD-regulated residential programs to People Inc. A number of smaller not-for-profits with aligned missions have been merged in to People Inc., including: Rivershore Inc. in 2014, with several OPWDD-regulated group homes and a day program fully merged; Southeast Work Center Inc. in 2016, with several OPWDD and VESID regulated day programs and group homes fully merged; and Agape Parents Fellowship Inc. in 2013, with several OPWDD regulated day and family support programs fully merged. By mid-2022, a number of residential programs from Ibero American Action League, a primarily Latino-serving organization in Rochester, will transfer to People Inc.

Agency Contracts

Person Centered Services of WNY: PCSWNY is a collaborative endeavor of 12 service agencies in the WNY area to meet the changing demands of the developmental disability service system. In 2012, PCSWNY introduced a pilot care coordination program for people with developmental disabilities and chronic medical, psychiatric, and/or behavioral health needs. People Inc. entered an Independent Contractor Agreement with PCS-WNY in 2019 to have psychological assessments and trainings completed by People Inc. psychologists.

Agency Lethality Policy

People Inc. has procedures and resources in place to support individuals expressing suicidal ideation and/or making lethality statements. Note that several individuals have lethality protocols incorporated into their behavior support planning. Upon hearing a lethality statement or witnessing an attempt to inflict self-harm, provide for the safety of the individual by moving the person to a safe location and/or removing objects that could be used by the person to harm him/herself. If the individual is in imminent danger, call 911; otherwise, contact the on-call nursing service and report that there is a current behavioral health challenge. Be prepared to report what the individual specifically said/did, what specific intervention strategies were implemented and how they worked, and how the individual is doing at that time. The person on call will advise additional safeguards to support the individual.

Training Opportunities

The Behavioral Health Department of People Inc. provides clinical support to individuals with developmental disabilities, their families, and their support teams. Interventions include psychological assessment, functional behavioral assessments, developing behavior support plans, and working with teams to develop skills to successfully support individuals with challenging behaviors. The Behavioral Health Department is staffed with licensed clinical psychologists, licensed and/or certified social workers, mental health counselors, and behavior intervention specialists. A licensed psychologist with experience in forensic psychology provides consultative support to the program.

Policy and Procedures for Fellowship Training

Policies and procedures formulated in regard to fellowship training are consistent with the criteria standards for Standards for the Providers of Psychological Services, the Ethical Standards of Psychologists and Code of Conduct of the American Psychological Association, and the Association for the Treatment of Sexual Abusers (ATSA) Code of Ethics and Practice Guidelines.

Training Philosophy and Aims

The Office for People with Developmental Disabilities (OPWDD) supports clinically sound, evidence-based practices that can support people with developmental disabilities to lead meaningful and productive lives in the least restrictive setting possible. People with developmental disabilities benefit from assessment and treatment planning, but there are limits to what can be accomplished by existing systems. Service providers find themselves with increased responsibilities and decreased supports. Both the service providers and people with disabilities look to outside services for clinical assessment and treatment; however, people with developmental disabilities experience a number of barriers to accessing clinical services, including insurance limitations and limited access to providers who are competent in providing clinical support to this population. Ancillary providers often ask for additional support, such as enhanced treatment planning and in-house counseling, which is unavailable in the current system. There is also a glaring deficit in clinical treatment options in the areas of sexuality, healthy relationships, trauma counseling, emotional regulation, and healthy coping. Fellows can help meet the clinical needs of people applying for and/or receiving services from People Inc. and its affiliates. Likewise, People Inc. can provide fellows with a rich training experience.

Fellows will have a variety of training opportunities, including

- Psychological assessment, including cognitive, autism, differential, sexuality, dementia, lethality, and risk assessment
- Functional Behavior Assessment
- Behavior Support Planning

- Individual counseling (office and site-based)
- Group counseling (office and site based)
- Research
- Clinical supervision (practicum students and masters level clinicians)
- Consultation within the department, as well as with other departments and agencies
- Developing/providing training to staff responsible for direct care and/or for developing behavior supports
- Additional psychological assessment out of our Article 16 Clinic for those who meet New York State requirements to work as a Testing Technician

Fellows have the opportunity to work within a treatment team to provide essential clinical supports designed to promote independence and person-centered care. People Inc. is dedicated to providing a rich training experience in order to support fellows in becoming clinical psychologists. The program embraces a scholar-practitioner model, and prioritizes the acquisition of clinical skills and emphasizes practical, hands-on training. All fellows in the fellowship program receive training in clinical psychology that is informed by trauma-informed treatment practices. Fellows will be encouraged to apply a variety of psychological theories in case conceptualizations and will utilize evidence-based interventions.

Training Faculty

Karen Battaglia, PsyD
NYS Licensed Psychologist
Principal Psychologist

Elizabeth Randall, PsyD, LMHC
NYS Licensed Psychologist
Director of Training

Dr. Karen Battaglia and Dr. Elizabeth Randall are full time licensed psychologists and the primary supervisors of the fellowship training program. They complete assessments, provide clinical supervision to department clinicians, and provide consultation and support to treatment teams. Dr. Battaglia specializes in risk assessments and working with individuals with high risk sexual and violent behavior; Dr. Randall specializes in dementia support and suicidality assessment. Dr. Battaglia serves as the agency's Principal Psychologist, and Dr. Randall serves as the Director of Training for the fellowship training program.

In addition, People Inc. contracts with another psychologist as a part time consultant who provides supervision specific to forensic evaluation and counseling. Fellows will also have the opportunity to interact with other licensed mental health professionals (MSW/LMSW/LCSW, MHC/LMHC) within the behavior health department and experience working with a number of mental health disciplines as part of a clinical support team.

Description of Populations Served

People Inc. and its affiliates are funded in part by New York State's Office for People with Developmental Disabilities (OPWDD) and individual's receiving OPWDD-regulated services must be diagnosed with a developmental disability in order to be eligible for services. The definition of disability, as outlined in New York State Section 1.03(22) of the New York State Mental Hygiene Law (Maul, 2001; New York State Division of Administrative Rules) is as follows:

A disability of a person that:

1. Is attributable to mental retardation, cerebral palsy, epilepsy, neurological impairment or autism;
2. Is attributable to any other condition of a person found to be closely related to mental retardation because such condition results in similar impairment of general intellectual functioning or adaptive behavior to that of mentally retarded persons or requires treatment and services similar to those required for such persons; or
3. Is attributable to dyslexia resulting from a disability described in (1) or (2);
 - (a) Originates before such person attains age twenty-two;
 - (b) Has continued or can be expected to continue indefinitely; and
 - (c) Constitutes a substantial handicap to such person's ability to function normally in society

Description of Departments Served

People Inc. and its affiliates provide a comprehensive array of services to people with developmental disabilities, including residential services, day habilitation services (site-based and community), behavioral intervention services (site-based and in-home), and vocational services. Fellows work within the behavior health department and provide support to all agency/affiliate programs.

Residential Services

People Inc. operates more than 100 group homes across Western New York. Residential opportunities include Intermediate Care Facilities (ICFs), group-style Individual Residential Alternatives (IRAs), and supervised apartments. Fellows provide support to individuals and residential teams by conducting capacity assessments (i.e. medical, sexual), risk assessments (i.e. sexual aggression, violence), lethality assessments, differential diagnoses, functional behavior assessment, behavior support planning, and cognitive assessment. Fellows also provide individual and/or group counseling to individuals living in the residences and provide training and support to residential staff regarding clinical issues.

Day Services

People Inc. and its affiliates operate a number of day services and vocational programs throughout Western New York. Fellows provide support similar to what is outlined in the Residential Services section.

Family Support Services

Family Support Services assist families who are caring for a family member with disabilities. These services promote family unity by enabling people with disabilities to remain at home.

Training Goals and Objectives

The training program's primary purpose is to develop skilled practitioners competent in the field of intellectual and developmental disabilities, with specific skills that include providing evidence-based services, accurate diagnosis, and appropriate support and treatment planning. Fellows are given opportunities to develop skills in education and training regarding the intellectual/developmental disabilities population, assessment experience, and developing appropriate interventions and treatment planning. Fellows are also given opportunity to provide clinical supervision to practicum students and masters level clinicians. These overall goals are executed through the following specific program goals and objectives.

Goal 1: The fellow will establish and maintain positive, constructive, and effective working relationships with individuals receiving services and their support teams, including family members, friends, advocates, and service providers.

Objectives

- Fellows will be active participants, providing clinical support to interdisciplinary teams.
- Demonstrate empathy, reflective listening, recognize and respond appropriately to the individual/teams using a person-centered approach.
- Maintain professional boundaries.
- Demonstrate an understanding of cultural, economic, and geographic barriers to accessing psychosocial support.
- Demonstrate sensitivity to diversity in clinical practice.
- Utilize supervision to address concerns and/or difficulties that arise in therapist/client relationships.

Goal 2: The Fellow will develop accurate case conceptualizations and treatment plans.

Objectives

- Conduct thorough clinical interviews that assess overall functioning (home, school, work), developmental history, presenting problems, family dynamics, trauma, substance use, medical/health concerns, medications prescribed, utilization of social services, strengths, social supports, previous mental health treatment.
- Utilize appropriate diagnostic codes (DSM-5-TR and ICD-10).
- Collect and integrate information from collateral contacts.
- Accurately administer, score, and interpret psychological assessments.
- Actively monitor therapeutic progress.

Goal 3: The fellow will engage in best practices in assessment of people with developmental disabilities.

Objectives

- The fellow will review and develop an in-depth understanding of New York State Eligibility Criteria, Behavioral Regulations, and best practices for (sexual/violence) risk assessment.
- Choose assessment batteries that meet both OPWDD and Western New York Developmental Disability Regional Office's (WNY DDRO) eligibility standards.
- Demonstrate proficiency in choosing appropriate assessment batteries as determined by the referral question and assessed problem.

Goal 4: The Fellow will utilize appropriate psychological interventions.

Objectives

- Practice from a trauma-informed perspective.
- Review and develop an in-depth understanding of New York State Eligibility Criteria and Behavioral Regulations.
- Identify and utilize a range of interventions to address specific clinical concerns and diagnostic conditions.
- Utilize empirically supported interventions whenever possible.
- Develop knowledge regarding sexual development and support individuals and their teams in fostering healthy and supportive relationships

Goal 5: The fellow will conduct him/herself as a responsible professional and in accordance with the Ethical Principles and Practice Guideline of the American Psychological Association.

Objectives

- Fulfills professional responsibilities – timely attendance; active participation in educational opportunities and supervision; timely completion of all paperwork.
- Practice according to the ethical principles of Beneficence and Nonmaleficence, Fidelity and Responsibility, Integrity, Justice, and Respect for People's Rights and Dignity.
- Follow OPWDD compliance standards.

Goal 6: The fellow will develop supervisory skills and provide beneficial clinical feedback to practicum students and masters level clinicians.

Objectives

- Demonstrates good knowledge of supervision techniques and employs these skills in an effective and consistent manner, seeking consultation as needed.
- Builds good rapport with supervisee.
- Utilizes metasupervision appropriately, discussing progress with supervisory relationship and is open to feedback and constructive criticism.

Goal 7: The fellow will utilize education, knowledge, and expertise to provide clinical insight when consulting with different departments within the agency.

Objectives

- Demonstrates good understanding of clinical concerns and provides appropriate feedback.
- Develops positive relationships within consulting role.
- Represents the BHD in a positive manner and conducts him/herself professionally when representing the department.

Fellows are expected to achieve competency in the areas outlined by the American Psychological Association Profession-Wide Competencies, established within the Standards of Accreditation for Health Service Psychology (APA, 2015). PWCs comprise the following areas:

1. Research
2. Ethical and legal standards
3. Individual and cultural diversity
4. Professional values, attitudes, and behaviors
5. Communication and interpersonal skills
6. Assessment
7. Intervention
8. Supervision
9. Consultation and interprofessional/interdisciplinary skills

Fellows are understood to have successfully completed fellowship when they have scored a minimum of 4/5 (i.e., "Independent Practice") in each of the above nine competency areas in the final fellow evaluation. This reflects the level of competence demonstrated by an entry level professional.

Direct Service Experiences

Fellows conduct psychological assessments (i.e. cognitive, autism, adaptive behavior) to aid in the service eligibility process, provide support to individuals, families, and support teams by conducting capacity assessments (i.e. medical, sexual), differential diagnoses, risk assessment, lethality assessment, dementia assessment, functional behavior assessment, counseling, crisis intervention, and behavior support planning.

People Inc. licensed psychologists provide clinical insight on several regularly scheduled committee meetings within the agency. Fellows may also be asked to attend the following meetings:

Human Rights Committee
Risk Management
Clinical Advisory Team
Support Team Meetings

Enhanced Treatment Team Meetings Staff Meetings

The Behavioral Health Department of People Inc. provides clinical support to individuals with developmental disabilities, their families, and their support teams. Interventions include psychological assessment, functional behavioral assessments, developing behavior support plans, and working with teams to develop skills to successfully support individuals with challenging behaviors.

Assessments can be completed in an office setting or in individual residences. Many assessments require observation of identified behavioral concerns, which typically requires meeting individuals in their environments at the times when behavior typically occurs.

The training program is integrated into the Behavioral Health Department, which acts as a support department within the agency. Fellows will work alongside BHD clinicians, clinical supervisors, and the BHD leadership team. The BHD's purpose is to provide behavioral support as needed to those receiving services through People Inc.

Program Resources

Fellows have access to a variety of psychological assessment materials including cognitive assessments (Wechsler assessments, Leiter, TONI, RBANS, TOPF), personality assessments (PAI, EPS, Rorschach), adaptive functioning measures (Vineland, ABAS, SIB-R, ICAP), behavior rating scales (Conners, BRIEF), and forensic risk assessments (STATIC-99, RSVP, SOTIPS, HCR-20, LSI). The Behavioral Health Department maintains a supply of frequently used assessment instruments which fellows and qualified staff can access. Fellows are permitted to audio and video record sessions, with individual/guardian permission, for training purposes and in accordance with agency policy pertaining to such. All recorded material must be destroyed immediately after review by supervisor/school personnel. Fellows have access to telephones, computers, individual email accounts, internet, printers, photocopiers, fax machines, and office space.

Training Curriculum

At the start of the training program, fellows will be provided with training on People Inc. Behavioral Health Department (BHD) policies and procedures and OPWDD behavior regulations. Fellows will also be provided with recorded trainings related to Functional Behavior Assessment and specific assessment tools commonly used for psychological assessments. These items will be reviewed in weekly individual supervision to determine appropriateness of moving to application of this information.

Fellows typically observe psychologists completing assessments before conducting their own assessments. Fellows are then assigned their first cases and clinical supervision

closely monitors each step of the assessment process. Fellows are expected to increase independence with assessments as they become more familiar with the process. Ancillary trainings and didactic activities are included throughout the training program to enhance learning.

Didactic Activities

Fellows are provided diverse opportunities for enhanced learning on a variety of topics through a combination of scheduled training activities and self-guided training. Training activities include, but are not limited to, the following:

Grand Rounds

University at Buffalo Department of Psychiatry offers Grand Rounds open to all local professionals covering a variety of professional topics. Grand Rounds occur Friday mornings 8-9:30am three weeks of each month.

OPWDD trainings

OPWDD offers recorded webinars on various topics through the Statewide Learning Management System. Recommended trainings include:

Functional Behavior Assessment

Suicidality Associated with Intellectual and Developmental Disabilities

Clinical Assessment of Substantial Diminution

Evaluating Capacity to Consent in Individuals with Intellectual and Developmental Disabilities

MOLST: End of Life Decision Making for Individuals with I/DD

Dementia training

Dr. Randall is an approved trainer through both the Alzheimer's Association and the National Task Group on Intellectual Disabilities and Dementia Practice. Fellows will complete training curriculum for both programs.

SF-TIC training

People Inc. offers a two-day training on Solution-Focused Trauma Informed Care on a recurring basis. All BHD staff complete this training and its principles are integrated into all levels of support throughout the agency.

Webinars

Several webinars have been identified as useful learning tools for department work. Topics include basics of intellectual disabilities, dementia, trauma, and specific assessment tools. Access to these webinars will be provided to fellows to supplement training as appropriate.

Training Sites

Fellows will work in the Behavioral Health Department office, currently located at 280 Spindrift Avenue Williamsville, NY 14221. All department employees are permitted to

work remotely for a portion of the week when in-person and on-site work is not necessary, and fellows will be given appropriate technology to facilitate remote work. Fellows may provide clinical interventions at the Williamsville office and/or in residences at locations throughout Western New York (Erie, Niagara, Orleans, Genesee, Chautauqua, Cattaraugus, Allegany, Wyoming, and Monroe counties).

Administrative Overview

Fellows are offered a stipend of \$40,000 annually for a 40 hour work week. Fellows will also receive the same benefits package offered to all People Inc. employees at the start of the fellowship.

Prerequisites of Training

- Completion of all formal academic coursework at a degree-granting program in professional psychology
 - Clinical Psychology and Counseling Psychology concentration
 - PhD or PsyD degree
- Completion of program comprehensive/clinical competency examination
- Dissertation proposal approved
- Minimum of two academic years of supervised training (assessment and/or intervention)

General Requirements

- Fellows work a 40 hour work week.
- Fellows dedicate a minimum of 10 hours weekly to face-to-face psychological services.
- Fellows will complete a minimum of 1750 hours in 12 months, consistent with NYS Licensing requirements.
- Fellows are responsible for maintaining a record of total hours and face-to-face hours.
- Paid Time Off is included in the fellow benefits package; fellows are responsible for ensuring that time off does not interfere with meeting minimum hour requirements.

Supervision

Fellows receive a minimum of two hours of individual face-to-face supervision per week by the supervising psychologists. An additional two hours of weekly supervision will be comprised of group supervision and supervision with other department licensed professionals. Metasupervision will also be offered if fellows are supervising and practicum students and/or masters level clinicians.

Case Oversight

Cases are assigned through a referral system, which includes assigning a specific supervisor to each case. People Inc. Behavioral Health Department (BHD) adheres to

OPWDD regulations for behavioral interventions and plan development, which includes the requirement that clinical supervisors provide oversight through the assessment and plan development process, and must co-sign any written documents developed by fellows or masters level clinicians.

Performance Evaluation

Fellows will be formally evaluated at least twice each year with regard to performance and attainment of competencies. To successfully complete the fellowship program, students must demonstrate ability to effectively practice independently across all required training competencies, sufficient to reflect levels of competence demonstrated by entry level professionals. Evaluations are conducted using a standard rating form, which includes comment spaces where supervisors include specific written feedback regarding the fellows' performance and progress. Supervisors will review these evaluations with the fellows and provide an opportunity for discussion if the fellow has questions or concerns about the feedback. Completed evaluations will be shared with each fellow's home Doctoral program.

Fellows are expected to demonstrate progress throughout the duration of the fellowship. At the midyear evaluation, minimum level of achievement will be defined as a rating of "3" (Intermediate Skill). If a fellow receives a score less than 3 on any competency, or if supervisors have reason to be concerned about the fellow's performance, professionalism, or progress, the program's due process procedures will be initiated. A minimum level of achievement on the final evaluation for successful completion of fellowship is defined as a rating of "4" (Independent Practice) for each competency. The rating scale for each evaluation is a 5- point Likert scale.

If successful completion of the program comes into question at any point during the fellowship year, or if a fellow enters into the formal review step of the due process procedures due to a grievance by a supervisor or an inadequate rating on an evaluation, the Doctoral program's training director will be notified. This contact is intended to ensure that the Doctoral program is kept engaged in order to support a fellow who may be having difficulties during the fellowship year. The Doctoral program is notified of any further action that may be taken by the fellowship program as a result of the due process procedures, up to and including termination from the Program. See the Due Process procedures for more information about the process of and conditions for termination.

Procedures for Addressing Remediation (Due Process Procedures)

Due process procedures are implemented in situations in which a supervisor raises a concern about the performance of a fellow. These procedures are enacted in an effort to adhere to the rights and responsibilities of both the program and the fellows in regards to ethical practice with the population served, as well as the responsibility of the program to provide, and the fellow to receive, a safe and productive learning environment. These procedures are intended to afford the fellow with every reasonable opportunity to remediate problems and to receive support and assistance. These procedures are not intended to be punitive.

1. Notice

When problematic behavior is identified and must be addressed, fellows are first notified through informal discussion in individual supervision. Fellow is encouraged to respond to concerns during this informal discussion.

2. Informal Review

When a supervisor has identified problematic behavior and believes it requires increased support, he/she will raise the issue with the fellow directly during individual supervision in an attempt to informally resolve the problem. Increased support may include higher frequency of supervision, didactic training, and/or structured readings. The fellow is encouraged to respond to identified concerns and work collaboratively with supervisor to identify beneficial supports. This process is documented in writing but will not become part of the fellow's professional file.

3. Review of Progress

The supervisor and fellow will engage in discussion during individual supervision about the identified problematic behavior and steps that have been taken to resolve it.

If a fellow's problem behavior persists following an attempt to resolve the issue informally, a formal review may be required. The decision to move from informal to formal procedures is frequently based upon professional judgment. The following guidelines are used to support this determination:

- the fellow does not acknowledge, understand, or address the problem when it is identified
- the problem is not merely a reflection of a skill deficit which can be rectified by the scheduled sequence of clinical or didactic training
- the quality of services delivered by the fellow is sufficiently negatively affected
- the problem is not restricted to one area of professional functioning
- a disproportionate amount of attention is required
- the fellows' behavior does not change as a function of feedback, and/or time
- the problematic behavior has potential for ethical or legal ramifications if not addressed
- the fellow's behavior negatively impacts the public view of the agency
- the problematic behavior negatively impacts the fellow's cohort
- the problematic behavior has the potential to cause harm to a client
- the problematic behavior violates appropriate interpersonal communication with agency staff

4. Formal Review

Formal review is required if a fellow receives a rating below a "3" on any competency on the mid-year supervisory evaluation, or if the review process in step 3 has determined that formal intervention is warranted.

If a formal review is initiated, the following process will occur:

- a. The supervisor will notify the fellow within day 10 working days that a formal review is being initiated, and will discuss the nature of the problematic behavior.
- b. The fellow will have the opportunity to provide a written statement related to his/her response to the problem. This response must be submitted to the supervisor within 3 working days of the notification of the problem.
- c. After discussing the problem and the fellow's response, the supervisor will choose one of the following remediation approaches:
 - Issue a "Performance Memo," which formally acknowledges that the supervisor is aware of and concerned with the problem; that the problem has been brought to the attention of the fellow; that the supervisor will work with the fellow to specify the steps necessary to rectify the problem or skill deficits identified by the inadequate evaluation rating; that the problem is not significant enough to warrant further remedial action at this time.

OR

- Place the fellow on "Probation," which defines a relationship such that the supervisor will actively and systematically monitor, for a specific length of time, the degree to which the fellow addresses, changes and/or otherwise improves the problematic behavior or skill deficit. The length of the probation period will depend upon the nature of the problem and will be determined by the supervisor. A written probation statement is shared with the fellow and the principal psychologist and includes a description of the problem behavior. This notice will be issued within 5 working days of the meeting (described in step a).
- d. The fellow is notified of the supervisor's remediation approach. The fellow is given opportunity to respond to the identified remediation approach, and may document any concerns in writing.
 - e. If the problem is not rectified through the above processes, or if the problem represents gross misconduct or ethical violations that have the potential to cause harm, the fellow's placement within the fellowship may be terminated. The decision to terminate a fellow's placement is made by the principal psychologist in conjunction with the supervisor and Human Resources personnel. This determination would be made within 10 business days of the original meeting discussed in step a. The principal supervisor may decide to temporarily suspend a fellow's clinical activities during this period prior to a final decision being made, if warranted. In the event of dismissal, the principal psychologist will alert the fellow's doctoral program. The fellow is given the opportunity to respond to this decision in writing, and will be referred to the Appeals Process if they object to this decision.

Hearing

The process by which fellows are notified of the supervisor's concerns and given opportunity to respond to concerns is included within each level of the process for addressing remediation. Fellows are given opportunity to hear identified concerns and respond to the concerns, as outlined above, in the following manners:

1. Notification: fellows are notified of the supervisor's identified concerns informally during individual supervision and are given opportunity to respond in discussion with supervisor.
2. Informal Review: fellow are notified of the identified need for increased support to informally address identified concerns. Fellows are encouraged to respond to identified concerns and to work collaboratively with supervisor to develop a plan for increased support that the fellow views as beneficial.
3. Review of Progress: fellow is included in discussion about informal attempts to resolve identified concerns and their effectiveness. Fellow is encouraged to share personal feedback about the supports put in place, how effective the fellow feels that they were, whether they believe they would benefit from ongoing support, and whether they believe the identified concerns persist or have been resolved.
4. Formal Review: as this process is more detailed, fellows are given several opportunities to hear concerns and respond within this step. This includes when fellows are first notified that the formal review process is being initiated, when the supervisor has determined a remediation approach, and if/when the supervisor has recommended dismissal.

Discussion of concerns will primarily occur between the fellow and their immediate supervisor. The fellow is encouraged to document any responses and/or concerns in writing to be included in their professional file. Fellows may also request that another member of the training faculty and/or People Inc. Human Resources staff attend any individual supervision sessions with immediate supervisor.

Appeals Process

If the fellow wishes to challenge the decisions made, he or she may request an Appeals Hearing before the Human Resources Department. This request must be made in writing to the supervisor within 5 working days of notification regarding the decision made in step c or d above. The Appeals Hearing will be held within 10 business days of the fellow's request. The Human Resources representative will review all written materials and have an opportunity to interview the parties involved or any other individuals with relevant information. Human Resources may uphold the decisions made previously or may modify them. Human Resources has final discretion regarding the outcome.

The principal psychologist will inform the fellow's doctoral program within 5 working days of being placed on probation or termination from the fellowship program, indicating the nature of the inadequate rating, the rationale for the action, and the action taken by program. The fellow shall receive a copy of the letter to the sponsoring university.

Once the Performance Memo or Probation is issued by the principal psychologist, it is expected that the status of the problem or inadequate rating will be reviewed no later than the next formal evaluation period or, in the case of probation, no later than the time limits identified in the probation statement. If the problem has been rectified to the satisfaction of the principal psychologist and the fellow, the doctoral program and other appropriate individuals will be informed and no further action will be taken.

Grievance Procedures

A. Concerns and Complaint Procedures

If a fellow has a concern or complaint about an element of the training program, it should first be brought to the fellow's immediate supervisor and/or the Training Director. In the event that the complaint involves the Training Director, the complaint should be directed to the Principal Psychologist. Fellows may consult with their immediate supervisor or the Training Director on avenues for informal resolution. Typically, complainants should first take their concerns to the person(s)/body with whom they take issue and attempt an informal resolution. If this is not feasible or if the complainant is not satisfied with the resolution, he/she should enlist the assistance of the Training Director or the immediate supervisor in facilitating informal discussion and conflict resolution. If the matter remains unresolved or if a resident is uncomfortable employing informal resolution, the fellow may file a formal grievance.

B. Grievances

If complaints or concerns cannot be resolved informally, the fellow may file a formal grievance. Formal grievances should be submitted in writing to the Training Director or, if the grievance involves the Training Director, to the Principal Psychologist. The fellow must also notify their Doctoral program. Within 5 working days of receipt of the grievance, training faculty will consult with the People Inc. Behavioral Health Department Leadership Team and Human Resources Department. The following steps will then be taken:

1. When needed, the Training Director will convene a review panel. The panel will consist of two members of the BHD Leadership Team and one HR representative.
2. Within ten (10) work days of the formal complaint, a hearing will be conducted in which the challenge is heard and relevant material presented. Within five (5) work days of the completion of the hearing, the Review Panel submits a written report to the Training Director, including any recommendations for further action. Recommendations made by the Review Panel will be made by majority vote.
3. Within two (2) work days, the Training Director informs the fellow and the fellow's Doctoral program of the decisions made. The fellow and the Doctoral program will receive a copy of the written report submitted by the Review Panel.
4. If the fellow disputes the Review Panel's decision, the fellow has the right to consult with the People Inc. BHD Clinical Vice President and/or Human Resources for further action.