HEALTH SCIENCE CENTER

Internship Handbook
Contents, Updated August 18, 2023

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University of Florida Mission Statement

The University of Florida is a comprehensive learning institution built on a land-grant foundation. We are The Gator Nation, a diverse community dedicated to excellence in education and research and shaping a better future for Florida, the nation and the world.

Our mission is to enable our students to lead and influence the next generation and beyond for economic, cultural and societal benefit.

The university welcomes the full exploration of its intellectual boundaries and supports its faculty and students in the creation of new knowledge and the pursuit of new ideas.

- Teaching is a fundamental purpose of this university at both the undergraduate and graduate levels.
- Research and scholarship are integral to the educational process and to the expansion of our understanding of the natural world, the intellect and the senses.
- Service reflects the university's obligation to share the benefits of its research and knowledge for the public good. The university serves the nation's and the state's critical needs by contributing to a well-qualified and broadly diverse citizenry, leadership and workforce.

The University of Florida must create the broadly diverse environment necessary to foster multicultural skills and perspectives in its teaching and research for its students to contribute and succeed in the world of the 21st century.

These three interlocking elements — teaching, research and scholarship, and service — span all the university's academic disciplines and represent the university's commitment to lead and serve the state of Florida, the nation and the world by pursuing and disseminating new knowledge while building upon the experiences of the past. The university aspires to advance by strengthening the human condition and improving the quality of life.
College of Public Health and Health Professions Mission & Vision

PURPOSE
Advance and integrate education, research, and service to meet ongoing and emerging local, regional and global health challenges.

MISSION
We shape tomorrow’s public health and health professionals through dynamic and responsive educational programs, transformational research, groundbreaking discoveries, and equitable health-related service. Our collaborations within the College and beyond advance the breadth of knowledge, the quality of science, and the attainment of professional distinction.

VISION
We will excel in developing and delivering innovative, sustainable solutions to pressing health-related challenges for the greater good of individuals and communities in Florida, the nation, and the world.

PHHP VALUES
- Collaboration
- Diversity & Inclusion
- Excellence
- Integrity
- Respect
- Social Responsibility
- Wellness
CHP Mission and Goal Statements

MISSION STATEMENT

The Department of Clinical and Health Psychology educates tomorrow's leaders in Psychology in the scientist-practitioner tradition, advances psychological science and improves the health and quality of life of all people through excellence in research, education and health service delivery.

VISION STATEMENT

We endeavor to provide a collegial environment that advances scholarship and the pursuit of knowledge while striving for excellence in both graduate education and training, and the delivery of the highest quality of health care services. On a daily basis, we focus upon the integration of science and practice in all our activities. The faculty, staff, graduate students, interns, post-doctoral fellows and alumni of the Department seek to maintain and advance our state-wide, national and international reputation as a "Center of Excellence" in psychological science, education and service delivery.
Signature Page

After reading this Intern Handbook, complete the information below, sign and return to the Program Office in 3158 HPNP. This should be done no later than the 3rd week from the start of internship.

Date: __________________

I, _________________________, have read the Clinical and Health Psychology Intern Handbook and have also reviewed the Intern Handbook. I pledge to consult relevant regulations regarding my enrollment in the program and to comport myself in accordance with these regulations. I also understand that consultation with my supervisors and the Program Director is always encouraged when making decisions about my Clinical Psychology internship at The University of Florida Health Science Center.

________________________
Signature
Statement of Nondiscrimination

The University of Florida is an Equal Opportunity Institution. The Department of Clinical and Health Psychology is strongly committed to respecting and understanding cultural and individual diversity in its admission and training policies. Admission to the program is not limited by age, color, disabilities, ethnicity, gender, national origin, race, religion, sexual orientation, or socio-economic status. The program avoids any actions that would restrict admission on grounds that are irrelevant to successful completion of the internship. Moreover, the Department of Clinical and Health Psychology has an active recruitment program for prospective interns from historically marginalized communities. Applications for the internship program from qualified individuals from historically marginalized communities are encouraged and invited. Those individuals who wish to be considered under this recruitment program are encouraged to indicate their interest on the internship application form.

University Statement on Culture of Care

https://titleix.ufl.edu/about/statements/#:~:text=Culture%20of%20Care&text=The%20University%20of%20Florida%20has%20domestic%20abuse%2C%20or%20stalking

Documentation of Non-discrimination Policies

NON-DISCRIMINATION/HARASSMENT/INVASION OF PRIVACY POLICY

The University is bound by state and federal law on most matters relating to discrimination and harassment. However, UF has adopted its own regulations and standards outlining expectations for conduct that go above and beyond the minimum requirements of the law. For example, the UF Regulation identifying protected classes addresses those who may not be protected by applicable state and federal law.

Protected classes are generally described as groups of people who have historically faced discrimination and harassment. In a university context, the focus is typically on such treatment in employment and education settings. UF Regulation 1.006 expressly prohibits discrimination on the basis of race, creed, color, religion, age, disability, sex, sexual orientation, gender identity.
and expression, marital status, national origin, political opinions or affiliations, genetic information, and veteran status as protected under the Vietnam Era Veterans’ Readjustment Assistance Act.

General Information

The Department of Clinical and Health Psychology offers internship training in clinical psychology to students who are pursuing a doctoral degree in clinical or counseling psychology from programs accredited by the American Psychological Association (APA, Office of Program Consultation and Accreditation, 750 First Street, NE, Washington, DC 20002-4242, 800-374-2721). We seek to prepare interns for the practice of professional psychology consistent with the philosophy embodied in the scientist-practitioner model of training. We endeavor to teach interns how to think scientifically about clinical problems, provide clinical service with skill and appreciation for human diversity and the highest ethical and professional standards, evaluate the clinical relevance of empirical research, and contribute to advancements in psychological knowledge through research and scholarship. Our philosophy of training is consistent with the model espoused by the National Conference on Scientist-Practitioner Education and Training for the Professional Practice of Professional Psychology (1990):

“The scientist-practitioner model of education and training in psychology is an integrative approach to science and practice wherein each must continually inform the other. This model represents more than a summation of both parts. Scientist-practitioner psychologists embody a research orientation in their practice and a practice relevance in their research. Thus, a scientist-practitioner is not defined by a job title or a role, but rather by an integrated approach to both science and practice. This model entails development of interlocking skills to foster a career-long process of psychological investigation, assessment and intervention (p. 7).”

Accordingly, our Departmental Mission Statement directs us to “educate tomorrow’s leaders in psychology in the scientist-practitioner tradition, advance psychological service, and improve the health and quality of life of all people through excellence in research, education, and health service delivery.”

General Goals and Objectives for Internship

Goal 1: To enable interns to develop sufficient knowledge and skill in broad aspects of health service psychology, to allow them to successfully compete for post-doctoral fellowships and/or entry level positions, to obtain licensure and to have entry level skills for the independent practice of psychology.

Goal 1a: Competence in Professionalism

Goal 1b: Competence in the Professional Relationships
Goal 1c: Knowledge and utilization of the evidence base for clinical work

Goal 1d: Competence in theories and methods of assessment and diagnosis

Goal 1e: Competence in theories and methods of effective intervention

Goal 1f: Competence in theories and/or methods of consultation

Goal 2: Prepare interns to deliver professional services to patients and to consume research in a manner that shows dedication to applicable ethical, professional practice and legal standards.

Goal 2a: Interns will be able to apply knowledge of ethical and legal standards into practice.

Goal 3: To prepare interns to be cognizant of major sources of individual and group variation, to understand how such diversity affects psychological processes, clinical presentation, and responsiveness to intervention, and to apply such knowledge in addressing diversity related issues and problems.

Goal 3a: Interns will be respectful of people of all backgrounds.

Goal 3b: Interns will be able to appropriately consider diverse patient backgrounds in both assessment and intervention as appropriate.

Goal 4: We seek to prepare interns for the practice of professional psychology in a manner consistent with the scientist-practitioner model of training, to evaluate the clinical relevance of empirical research and how to apply research findings in solving clinical problems.

Goal 4a: Interns will use science to inform practice.

Goal 4b: Interns will engage in and evaluate science responsibly.

Goal 5: To enable interns to develop sufficient knowledge and skill to utilize and provide clinical teaching and supervision.

Goal 5a: Interns will demonstrate understanding and advance knowledge of supervision roles and processes.

Goal 5b: Interns will engage in reflection and provide effective tiered supervision.
Telemedicine Guidelines

Interns are required to remain in Gainesville for the provision of telemedicine services through the Department of Clinical and Health Psychology (CHP) and UF Health. All clinical services (in person and telehealth) must be provided from the University of Florida Campus.

Interns cannot provide telehealth services from an alternate location unless the Chair of the CHP changes requirements based on changes in COVID. In addition, telehealth patients must be in the state of Florida to legally receive services because licensed faculty supervisors are only licensed in the state of Florida and are unable to provide services out of state.

Should concerns regarding COVID19 or other public health emergencies arise, we will discuss best practices to keep intern and patient safety a priority.

Departmental/college and UF Zoom Background templates are available (you can find them here)

Setting

The University of Florida is an American public land-grant, sea-grant, and space-grant research university on a 2,000-acre (8.1 km2) campus in Gainesville, Florida. It is a senior member of the State University System of Florida that began in 1853 operating continuously in the Gainesville campus since 1906. The State University System is governed by a Board of Governors, and each university is overseen by a Board of Trustees. The University of Florida is accredited (until the next reaffirmation in 2024) by the Southern Association of Colleges and Schools Commission on Colleges the regional accrediting body for the degree-granting higher education institutions in the Southern states. The University of Florida’s current ranking is 5 among all public universities based on the 2023 Best Colleges rankings by U.S. News & World Report. The University of Florida’s Academic Health Center is the country’s only academic health center with six health-related colleges located on a single campus: Dentistry, Medicine, Nursing, Pharmacy, Public Health and Health Professions, and Veterinary Medicine. The Department of Clinical and Health Psychology is one of eight departments in the College of Public Health and Health Professions (re-accredited by the Council on Education for Public Health in 2021, for the full 7-year term) within the University of Florida’s Academic Health Center. The other seven departments are Biostatistics; Environmental and Global Health; Epidemiology; Health Services Research, Management, and Policy; Occupational Therapy; Physical Therapy; and Speech Language, and Hearing Sciences under the leadership of Dean Beth Virnig.

UF Health Shands is affiliated with more than 50 UF Health Physicians primary care and specialty medical practices located throughout North Central Florida. UF Health Shands has affiliation relationships with four community hospitals located in Lake City, Live Oak, Ocala and Starke. It has built relationships with affiliates throughout the state in services such as
cancer, heart surgery, neurosurgery, pediatrics, pediatric cardiology, pediatric nephrology, vascular surgery and addiction medicine. UF Health Shands also is affiliated with urgent care centers in Gainesville and Ocala and collaborates with other hospitals and health care providers to expand clinical programs and research and education efforts. More than 1,200 UF College of Medicine faculty and community physicians on the UF Health Shands medical staff provide care in more than 100 specialty and subspecialty medical areas, from primary care to highly specialized and complex care, including cancer, heart and vascular, neuromedicine, pediatrics and transplantation services.

The Psychology Internship Program is one of two APA-approved training programs within the Department of Clinical and Health Psychology. In addition to the internship program, the Department also has a doctoral training program in clinical psychology. The Department receives funding from the State of Florida to support its educational mission, and it has enjoyed a long history of strong institutional support for the missions of doctoral education and internship training in clinical psychology. Indeed, the Psychology Internship Program, which has been accredited by APA continuously since 1963, represents an integral part of the mission of the Department, the College, and the Health Science Center. The Internship Program has received strong support at each of these levels for its training mission. This support has manifested itself in the substantial commitments of faculty time, space allocation, and administrative and financial resources provided by the Department, the College, and the Health Science Center.

The administrative structure of the Psychology Internship Program is unique among those situated in academic health science centers. Our program resides in an independent Department of Clinical and Health Psychology rather than in a psychiatry department, the more common location of psychology internship programs in academic health sciences centers. The Chairman of the Department of Clinical and Health Psychology is David Janicke, Ph.D., ABPP

The Department of Clinical and Health Psychology operates the UF Health Psychology Specialties Clinic, which provides comprehensive psychological services to outpatients in the greater Gainesville community and to patients of UF Health Shands Hospital. The FU Health Psychology Specialties Clinic serves as the primary training site for the UF Health Science Center Internship Program. Between 07/01/2022 and 06/30/2023 there were a total of 15,666 outpatient visits. Of the outpatient visits, 3,168 were new intakes and 12,498 were return visits. In person visits accounted for 6060 of the total and telemedicine visits accounted for 9606 of the total.

Child and Adolescent Services provided by the UF Health Psychology Specialties clinic include young child neurodevelopment assessment, parent child interaction therapy (PCIT), adolescent mental health, behavioral pediatrics, pediatric infectious disease, pediatric pulmonology (Cystic Fibrosis clinic), pediatric endocrinology (Type 1 diabetes clinic), pediatric craniofacial anomalies, pediatric gastroenterology (Inflammatory Bowel Disease clinic), pediatric hematology/oncology, pediatric sleep medicine and outpatient child and family therapy.
Adult and adolescent health psychology services provided by the UF Health Psychology Specialties Clinic include solid organ transplant (lung, heart/LVD, kidney, liver), chronic pain, gastroenterological disorders (IBS, IBD), Lupus and chronic migraine disorders, behavioral sleep medicine, psycho-oncology and women’s health and infertility. Additional services include presurgical assessment for spinal cord stimulator and bariatric surgery.

Within the UF Health Psychology Specialties Clinic, pediatric neuropsychology services include assessment of common developmental and acquired neurological conditions in childhood as well as the craniofacial anomalies interdisciplinary clinic. Adult neuropsychology services include inpatient rehabilitation, cross-cultural neuropsychology services, memory disorders, interdisciplinary movement disorders, brief neuropsychology screening exams in conjunction with a neurology dementia specialist, adult acquired neurological injuries, acute adult neurotrauma, adult brain tumor/awake cortical mapping, adult epilepsy/WADA, perioperative cognitive anesthesia network, holistic intervention for brain health and recovery, multidisciplinary BRAIN injury clinic, stroke and other acquired conditions and general adult neuropsychology services.

Interns are able to participate in all of these services through structured assessment rotations and/or intervention training.

Responsibility for the training of interns is shared by 29 faculty members who serve as clinical training supervisors and by a number of other faculty who contribute to the program through educational and didactic offerings. Virtually all of our faculty participate in the clinical, research, and educational mission of the Department, and thus reflect and model the scientist-practitioner tradition on a day-to-day basis. Major decisions regarding the internship, including overall evaluations of program performance and intern progress, are made collectively by the faculty. The Director of the Psychology Internship Program is Lori Waxenberg, Ph.D., ABPP.

Faculty

The term "core faculty" is used to describe faculty who have major education and training functions within the two departmental programs. Some of these faculty members are on the Tenure Track, while others are on the Single Mission or Multi-Mission Track. Core faculty members play integral and varied roles in the education and training of interns. Nearly all core faculty are licensed psychologists who are involved in clinical practice, supervision, teaching and scholarly activities. A number of additional faculty from other units of the Academic Health Science Center or University play roles in the didactic, clinical and research training program. A vita for each faculty member
is available for your review on the department website at [https://chp.phhp.ufl.edu/about-2/people/core-faculty/](https://chp.phhp.ufl.edu/about-2/people/core-faculty/) Many faculty also have individual web pages accessible from the Department’s website.

## Facilities

Each intern has a department record in the Program Office, which is located in the Department’s main office suite in Room 3158 HPNP. Amanda DiTrapani is the Academic Coordinator for the Internship Program. With staff assistance, interns are expected to play an active role in assuring an accurate and up-to-date record-keeping to enable continuous quality improvement efforts. It is the intern’s responsibility to see that this record is up to date with respect to supervisory evaluations. Periodic reminders will be given to interns to review their file prior to quarterly reviews or other major milestones.

**Academic Health Science Center Information Security Policy:** In compliance with the Health Science Center Security Program for the Information and Computing Environment ([UFHSC SPICE](https://spice.ufl.edu)) security policy, interns shall visibly display their UF [GATORONE](https://gatorone.ufl.edu) or other approved identification badge at all times when at an HSC facility unless work requirements specify otherwise. A lab coat with a name is not sufficient; you must wear your name badge. Shands Hospital has a similar requirement and is actively enforcing badge requirements.

All interns of the Health Science Center and affiliated entities are reminded that our current HIPAA compliant privacy policies **prohibit** e-mail forwarding outside the ufl.edu domain. Therefore, interns of the Health Science Center and its affiliated entities may **NOT** use the auto-forward function of the UF e-mail system because of the likelihood it will result in an unauthorized disclosure. To review current privacy-related e-mail policies, visit the privacy website. To review information on how to properly de-identify Protected Health Information (PHI), please review information about [HIPAA Identifiers](https://privacy.ufl.edu) and consult the checklist to properly deidentify PHI.

**Important Note Regarding e-mail Forwarding:** You **can** forward your ufl.edu GatorLink e-mail to your PHHP e-mail, but you may **not** forward any ufl.edu e-mail to an outside e-mail server (i.e. Yahoo, AOL, Gmail, etc.).

Your [GATORONE](https://gatorone.ufl.edu) Card serves as a picture ID and contains a barcode that is used to access a variety of university services. Beyond security, interns and staff use the GATORONE card for fare-free access to the RTS bus service, to use UF Library services, to access pre-paid vending, and to obtain many other campus services. This ID must be worn in patient care areas and is also used for access to labs, libraries, recreation facilities, check cashing, after-hours access to the HPNP building, and many
more things, including the purchase of coveted football tickets. ID cards will be created for you and presented to you during orientation week.

Storage of Records and Data: Regarding the storage of confidential research or patient data, no research or patient data are to be stored on local drives or personal computers; interns should use network drives (H:\, P:\, S:\) or other UF-approved platforms (e.g., Microsoft Teams) exclusively for the storage of confidential information.

Communication Policies: Consistent with University of Florida policy, interns are required to have access to a desktop personal computer to support their academic work within CHP. The computer should have an office suite, a web browser, statistical analysis packages, and internet access.

General Communication: Department and University communications infrastructure (e.g., computers, phones, printers) are intended for official business only. Each intern will have access to an intern workspace that contains such infrastructure.

Primary Communication: Department communication happens primarily through email. It is expected that interns will stay informed by checking their email regularly. Interns receive a PHHP e-mail account (user@phhp.ufl.edu) and a GatorLink account (user@ufl.edu), but both receive the same emails.

Communication Related to Research Participations and Clinic Patients: Interns conducting patient-oriented research that requires telephone contact should make specific arrangements through their supervisors for telephone access. UF Health Psychology Specialties Clinic phones are to be used for communication with patients. Interns are expected to maintain knowledge and understanding of the interface between electronic communication and relevant privacy laws (HIPAA, FERPA).

Email signatures: Interns are encouraged to follow UF’s email signature policy.

Email and HIPAA: HIPAA compliant privacy policies PROHIBIT e-mail forwarding outside the ufl.edu domain. Do NOT use the auto-forward function of the UF e-mail system because of the likelihood it will result in an unauthorized disclosure. You may not forward any ufl.edu e-mail to an outside e-mail server (e.g., Yahoo, AOL, Gmail). See: Privacy Policies.

Post Office: There is a full service U.S. Postal Office located on the Ground Floor of the Academic Health Center. The sending or receiving of personal mail through the Department is discouraged. The Department does not provide postage for intern mail, mail related to research, internship applications or other personal matters.

Mailboxes: Interns are assigned one mailbox located in the Psychology Specialties Clinic.
**Letterhead:** CHP and UF Health Psychology Specialties Clinic letterhead is restricted to DEPARTMENT OR CLINIC USE ONLY. Intern use of letterhead for official communications proceeds through the supervisor, and interns should consult with their supervisor regarding appropriate uses. If the intern wishes to use letterhead for communications not involving the supervisor, a supporting request must be approved by either the Chair or Internship Director. Psychology Specialties Clinic letterhead is to be used for PATIENT CARE ONLY and must have the endorsement of the supervising faculty.

**UF Logos:** The University has strict, evolving policies on the use of the UF logo and signature system.

**Technology Policies:** CHP strives to be state of the art in access to biomed informatics, software, and networking. Interns are expected to show a high level of competence in all software and applications that are required for the successful completion of their internship. With a GatorLink ID and duo factor authentication all interns receive membership access to secure Dropbox, OneDrive and GoogleDrive services.

**Computer Literacy:** Computer literacy policies are evolving. Interns, in the context of their formal training, acquire the knowledge and skills to use computer technology in the service of their professional and clinical activities.

**VPN Access and Terminal Server Access:** See PHHP IT procedures about installing VPN on computers to access campus resources, Connecting to Network Storage from a Mac, Setting up the UF VPN, Using the Terminal Server, Remoting to your Desktop, and PHHP Network Storage. It is very important to log into these services; personal cloud storage is not to be used for clinical/professional purposes.

**Reproduction of CHP Computer Programs:** Unauthorized reproduction of departmental computer programs for personal use is prohibited.

**Software on Computers:** Loading of outside software programs is restricted and requires administrative rights; if there is justification for adding such software to departmental computers, interns may work PHHP Information Technology.

**Copyright:** CHP, UF Health Psychology Specialties and UF Health Science Center adhere to all copyright rules and regulations. Copies of copyrighted material for training purposes, with permission obtained through direct approval or through fair use policies, should not be recreated or distributed. Photocopying of books, chapters, articles or other written material without the author's approval is governed by specific legal standards with which interns are expected to be familiar. Copyright regulations also apply to computer programs.

**Photocopy machines and printers:** are available in the Department and on every floor of the Health Science Center (HSC) Library. To use the Library facilities, interns must set up a vending
account on their **GATORONE** card and have the card with them when making copies. Value can be added to the **GATORONE** card online using a credit card ($15 minimum) and should appear on the account in approximately 10 minutes. More information on the process can be found at [https://print.at.ufl.edu/help/frequent-printing-questions/](https://print.at.ufl.edu/help/frequent-printing-questions/). Phone numbers for various components of the HSC libraries can be found at [http://library.health.ufl.edu/about-us/contact/](http://library.health.ufl.edu/about-us/contact/). The main website address for the HSC libraries is [http://www.library.health.ufl.edu/](http://www.library.health.ufl.edu/).

**Parking:** is available for interns in commuter lots. Decals may be purchased in the UF Transportation and Parking Services (TAPS) office located at 1273 Gale Lemerand Drive (corner of Mowry Road and Gale Lemerand Drive). TAPS office is open from 8:00 AM - 4:30 PM weekdays. Please bring your **GATORONE** card and license plate number. Payment may be made in the form of check, cash or debit. Decals may be purchased online. For more information visit [http://www.parking.ufl.edu/](http://www.parking.ufl.edu/) or call (352) 392-PARK (7275).

**Consumer Information Disclosure for License Preparing Programs:** The United States Department of Education requires all license-preparing programs, which CHP is, to disclose if the program curriculum is sufficient to meet licensure requirements in all states. The CHP website lists each state, whether or not our [program meets the educational requirements for licensure in that state](http://www.library.health.ufl.edu/), and a link to the State Professional Association or License Authority for each state.

**Salary and Benefits**

The base salary for interns in the class of 2023-2024 will be $29,000 per annum. Interns may purchase a health plan provided to students by the University or they may select a private policy of their choice. Interns have 25 days per year of personal leave, which may be used for vacation, for personal illnesses or to care for family members who are ill. They also have five days to use for professional leave (conferences, educational workshops, employment interviews). In addition, there are ten paid holidays: New Year’s Day, Martin Luther King Day, Memorial Day, Juneteenth, Independence Day, Labor Day, Veterans Day, Thanksgiving Day and the day after, and Christmas Day. Interns are not officially enrolled graduate students at the University of Florida, and are classified as OPS (Other-Personal-Services) employees.

**Bloodborne Pathogen Policy**

All interns are required to participate in blood borne pathogen education and have this documented on a yearly basis. Training is provided online in the [MyTraining](http://library.health.ufl.edu/) portal, login using your
Gatorlink credentials and search for “UF_EHS850G_OLT” or “BLOODBORNE PATHOGENS (BBP)” and complete the course.

**Immunization Requirements**

UF is dedicated to preserving the health and wellness of our campus. The most effective way to preserve and protect our campus from outbreaks of these infections is by establishing [immunization requirements](#). Therefore, UF interns shall be required to show documentation of specific vaccinations or proof of immunity as set forth in Florida statutes 1006.69, Florida Board of Governors Regulations Chapter 6 as well as recommended by the Advisory Committee on Immunization Practices (CDC).

All interns are required to have an annual TB (tuberculosis) test (or documentation from a physician that this test is contraindicated). This must be documented in your intern file and you are expected to keep this up to date each year in order for you to maintain patient contact. The department pays for the test when obtained at the Student Health Care Center’s Health Science Center branch (Dental Towers, Room D2-49). You can call (352) 294-5700 for an appointment. Interns must also complete the hepatitis B vaccination series before beginning clinical training experiences that bring them into contact with patients. Since the hepatitis B series takes six months to complete, you should initiate the series as soon as you begin your internship year. These are paid for by the intern and can be obtained from the Student Health Care Center, or a private physician. Please provide the Academic Coordinator with documentation of completion on each of these requirements as they become available. Failure to maintain current immunization documentation will result in suspension from clinical activities and potential disciplinary action until updated documentation is provided.

**Influenza Vaccination:** All interns are strongly encouraged to receive a seasonal influenza vaccination (flu shot) at the time the annual flu vaccine becomes available to UF employees. Documentation must be provided to your internship program.

Any intern who has a medical contraindication preventing one or more required immunization or test must provide the academic program with medical documentation verifying each contraindication (e.g. allergic, etc.). This documentation is due at the same time as compliance documentation for any relevant initial and annual requirement.

**COVID Vaccination and Masking Requirements**

On Thursday, May 31st, 2023, the Centers for Medicare & Medicaid Services, or CMS, eliminated the health care worker vaccine mandate requirement for certain individuals to be vaccinated for COVID-19. UF Health Science Center is required to comply with the CMS-dictated vaccine mandate as UF Health serves a large number of patients covered by Medicare and/or Medicaid insurance.
Effective immediately, COVID-19 vaccination is no longer required for faculty, staff, students, volunteers, vendors and other individuals working in our health care facilities. Additionally, masks are no longer required to be worn for those who are not vaccinated for COVID-19.

COVID-19 vaccines remain available for staff interested in getting vaccinated. Please contact one of our UF Health pharmacies, your primary care provider or your local pharmacy for availability.

**Dress Code**

In addition to being a research and teaching setting, this is also a professional setting where patient services are rendered. All personnel working in the Academic Science Center facilities are required to display their ID Badge when on premises. Interns should note that their appearance matters when representing our department in front of patients, interprofessional colleagues and fellow trainees.

Interns should dress appropriately for the physical setting in which they work. Appropriate business attire should be worn when engaged in patient service activities. The wearing of white coats is optional. Even when not engaged in direct patient contact, interns should use discretion when in patient care areas (clinic, hospital, etc.). No shorts or logo t-shirts should be worn in patient care areas. Please refer to the [Shands Dress Code](#).

**Things to consider when dressing professionally:**

- Grooming styles dictated by religion and ethnicity are not restricted.

- Clothing should be work appropriate, professional in presentation, clean and in good condition.

- Workout clothing, jeans, clothing that is revealing in nature, or have discernible rips, tears or holes are not considered to be suitable attire.

- Please avoid clothes with stamps that may be considered offensive or inappropriate.

**Intern Leave Policy**

Taking time away from work and studies for restoration, in the form of paid leave, is important for everyone’s health and well-being. We strongly encourage you to make sure you are taking advantage of your paid leave, and scheduling it at times that work best for you. To make sure
that clinical responsibilities are professionally handled during your absence, please be sure to communicate your planned leave with as much notice as possible, working with supervisors and mentors to ensure continuity of patient care.

The following types of intern leave are recognized by the Department:

a) Paid Leave

- Interns are entitled to 200 hours (25 days) of paid leave per year. This includes both vacation and sick leave. Additional leave can be requested in extenuating circumstances. Cash payment is not provided for unused personal leave days. Any unused personal leave days expire at the end of each fiscal year.

b) Professional Development Leave

- Interns are eligible to take up to 40 hours (five professional development days) per year for travel to professional psychology/health care conferences, educational workshops, or employment interviews. Use of professional leave days must be approved prior to travel by the area head and intern program director.

Interns have a total of 240 hours available for personal and professional leave.

Clinical Leave Notification Policies

Professional patient care responsibilities require advance planning to facilitate continuity of care. Please be sure to communicate your planned leave with as much notice as possible.

Short-Term Notice of Illness or Emergency: If an intern is ill and not able to attend clinic, they should notify clinic staff and their faculty supervisor as soon as possible that they are ill and taking a sick day. It is the responsibility of the clinical supervisor, not the intern, to find and verifying that another trainee can provide coverage when an intern is absent for illness leave. Therefore, it is of the utmost importance that trainees notify faculty as soon as possible that they will be absent. The sooner the intern notifies their supervisor, the sooner the supervisor can secure clinical coverage or reschedule the impacted patients.

The same protocol as above applies if an intern has a family or other emergency.

COVID-19: We follow the CDC guidelines.

Advanced Notice for Planning Personnel Day or Professional Leave Day: Interns are strongly encouraged to discuss with clinical supervisors any known personnel leave requests at the beginning of each clinical rotation.
The expectations for finding coverage in your absence depend on the lead time you provide to your supervisor.

a) **More than 2 months’ advanced notice:** If an intern provides at least two months advanced notice, they are not responsible for finding coverage. The faculty supervisor(s) will adjust their clinic schedule or will take responsibility to find another source of coverage.

b) **Less than 2 months advanced notice:** If an intern provides less than 2 months’ notice, then the intern is expected to find clinical coverage during their absence.

**Holidays:** It should be noted that if the University is closed for a state holiday or a declared emergency these days are not to be counted as leave days. This includes all Federal or University holidays (e.g., Martin Luther King Day, Memorial Day, Juneteenth, Independence Day, Labor Day, Homecoming, Veterans’ Day, Thanksgiving, Christmas), the Winter break (the week between Christmas and New Year’s Day), and other days designated by the University. For a complete list of holidays please refer to the [UF Holiday Leave Calendar](#). Holiday leave does not require pre-approval.

**Emergency Closures:** Permissibility of leave due to emergency closures is determined by the Dean of the College of Public Health and Health Professions, who follows guidelines set forth by the Senior Vice President for Health Affairs. Interns with clinical assignments are classified as essential personnel, and they may be required to perform clinical duties on site, even when other trainees have been exempted from classroom and other on-campus attendance. The Director for Clinical Training and Clinic Director will advise whether interns are to report for clinical duties in a timely fashion.

**Reporting Time For Planned Leave:** Interns can request/submit leave (PTO) or professional development to chp-payroll@phhp.ufl.edu. Please indicate the type of leave you are requesting (PTO or professional development), the dates you will be out (may just be one day, may be more) and the total number of hours you will be out.

NOTE: Nothing in this policy is intended to require interns to take personal leave time to engage in reasonable activities necessary to meet internship training requirements. Participation in rare but intensive training activities should involve prior discussion with clinical supervisors.

**End of Year Expectations**

**Interns are required to remain at work during the last 10 business days of the internship year – no vacation days are allowed during this time.** Interns can petition the internship director if this is absolutely needed (dissertation defense for example). It is imperative that interns be available to complete end of year paperwork and wrap up reports, notes, transfer/termination summaries, etc.
Personal Therapy

Many interns decide to seek personal therapy in the course of their education, but this is NOT a requirement of our program. No stigma is associated with the decision to seek therapy. It is the policy of the program that no intern can enter a therapeutic relationship with a faculty member in the Department, even if that faculty member does not participate in the intern’s education or training.

Employee Assistance Program

The Employee Assistance Program (EAP) provides a wide range of mental health services, including individual employee evaluation and referral, consultation services for supervisors, workshops, training sessions and support groups.

Interns are eligible for up to six visits for individual consultation. Licensed mental health professionals employed by the University of Florida provide these confidential sessions. If additional counseling is necessary, EAP professionals will refer employees to community providers and agencies that accept University health insurance plans or charge fees based on income level. Any contact you have with the EAP will remain confidential.

To speak with a licensed counselor (24/7), please call 833-306-0103 (TTY: 800-697-0353) or email eap-help@ufl.edu.

PHHP Wellness Resources: Wellness » College of Public Health and Health Professions » University of Florida (ufl.edu)

Practica and Academic Preparation Requirements

Minimum requirements of intern applicants include enrollment in an accredited Ph.D. or Psy.D. program in Clinical or Counseling Psychology. Applicants must have passed their doctoral qualifying examination and to have proposed their dissertation. In addition, all coursework and practicum must be passed according to the requirements of their graduate program. Preference is given to those applicants whose course work, practicum and research experience have prepared them best for working in an academic healthcenter. We prefer intern applicants who completed supervised experiences within the four areas of concentration offered (i.e., Clinical Child, Pediatric, Med/Health, Clinical Neuropsychology). Minimal requirements include some prior
exposure to the types of patients, assessment protocols and treatment within the multidisciplinary inpatient and outpatient settings of a large teaching hospital.

Below are specific practicum experiences applicants should acquire to prepare for internship:

**In the Clinical Neuropsychology area:** requirements include: (1) prior graduate level coursework in brain behavior relationships, neuroanatomy, and (at least) one survey course in behavioral manifestations of neurological disorders; and (2) prior practicum level experiences and/or placement experiences that have exposed them to practice issues in Clinical Neuropsychology.

**In the Clinical Child and Pediatric area:** requirements include: (1) prior graduate level coursework emphasizing areas related to child development, child psychopathology, and family and child interventions; (2) prior practicum supervised experiences in child assessment and intervention; and (3) for those who are interested in pediatric psychology, prior supervised assessment and/or intervention experiences in pediatric health care settings.

**In the Health area:** requirements include: (1) prior graduate level coursework containing coursework in medical/health Psychology, physiology or anatomy, or pathophysiology; and (2) prior practicum supervised experiences in assessment and intervention with patients with primary or co-morbid medical conditions.

**Intern Review and Selection Process**

Determining the interns’ overall interests, aptitudes and appropriateness of qualifications is a two-step process. The Internship Admissions Committee, which is chaired by the Internship Director and includes representatives from each of the concentration areas makes the initial review of the APPIC materials submitted by the applicants, then selects applicants to be invited for interviews. Internship interviews are held virtually on the first three Fridays in January. Typically, the invited applicant will connect with multiple faculty members for interviews and discussions. Intern applicants also meet with current interns in their area of interest track for an hour-long discussion as part of the virtual interview day, although this is exclusively for the applicant’s benefit. We do not include information from interactions with current interns in our process, unless a current intern shares significant concerns about an applicant's behavior.

Following the interviews, faculty members within each of the areas of concentration (Child/Pediatric, Health, Neuro) conduct a final review of materials and interview feedback to make intern selections. Below are specific factors assessed by the selection committee in each of the Major Areas of Study:

**Neuropsychology:** Requirements include: (1) sample reports of supervised Neuropsychological assessments; (2) a career goal to obtain post-doctoral training and board certification in Clinical Neuropsychology; (3) letters of reference from psychologists who have supervised their pre-
doctoral training experiences in neuropsychology and clinical psychology; and (4) a dissertation topic within the domain of Clinical Neuropsychology

**Clinical Child and Pediatric:** Requirements include: (1) sample reports of supervised Child/Pediatric assessments; (2) a career goal of professional practice that emphasizes work with children and families; (3) letters of reference from psychologists who have supervised their pre-doctoral training experiences; and (4) a dissertation topic within the domain of Clinical Child/Pediatric Psychology.

**Health:** Requirements include: (1) sample reports of supervised Health Psychology assessments; (2) a career goal of professional practice that emphasizes work with adults who have medical illness or helping to prevent adults from developing medical illness; (3) letters of reference from psychologists who have supervised the applicant’s pre-doctoral training experiences, preferably in a Health Psychology setting; and (4) a dissertation topic within the domain of Clinical Health Psychology.

Of note, the Clinical Psychology Internship program does have up to 3 slots open to our current students as a captured internship. As we are very familiar with applicants matriculating through our graduate program, the applicant process for the captured internship reflects that knowledge base. Applicants for the captured slots submit a letter of interest, curriculum vitae, and recommendation letter from their mentor in late Spring of the application year. The Internship Admissions Committee meets and determines the appropriateness of the match and provides a decision to the applicant by July of that year, allowing the applicant to apply to other programs if not matched with us. The number of interns in the class does not change based on whether the captured internship slots are filled.

**Intern Performance Evaluation, Feedback, Advisement, Retention, Minimal Requirements**

Intern progress is assessed on an ongoing basis through a variety of methods including live observations of intern assessment activities, reviews of digital recordings of therapy sessions, detailed reviews of the intern's written assessment reports and treatment progress notes, observations of required intern presentations of case formulations and treatment planning, and
informal feedback from interprofessional team members. Feedback to interns about their progress in achieving competence in professional skills is accomplished in several ways. First, each supervisor provides interns with verbal feedback about performance during the course of assessment rotations or therapy cases. Second, all supervisors complete written evaluations of the performance of each intern supervised during the quarter. This exceeds the requirement of Standard III.B of semi-annual written feedback. Third, the entire faculty conducts quarterly reviews of intern progress and makes recommendations for individualized training experiences for the following quarter. Such recommendations address specific training needs (e.g., the need for the intern to obtain more intensive video supervision to address aspects of the therapy relationship; a plan to better learn standardized test administration techniques). If the faculty recommend a more structured intervention for improvement, then a formal remediation plan is created and reviewed monthly. Fourth, the Internship Director meets individually with each intern to review the formal feedback from the faculty evaluations and to assist the intern in conducting a self-assessment of progress. Finally, at mid-year (or sooner if warranted by the presence of a significant concern about competency) and at year-end, the Internship Director writes a letter to the Director of Clinical Training of each intern's doctoral program, which summarizes the intern's progress. Each intern is asked to read this letter and to sign it prior to mailing. The intern is encouraged to indicate points of agreement or disagreement either in the letter or in a separate correspondence to his or her Director of Clinical Training.

We rate the frequency with which interns demonstrate profession-wide competencies on the following scale on a quarterly basis: 0=Never (0% of the time), 1=Rarely (less than 30% of the time), 2=Sometimes (greater than 30% but less than 50%), 3=Often (greater than 50% but less than 80%), 4=Almost Always (80% of the time or greater) NI (needs improvement) and N/O (cannot rate this item; either an expected skill at this level but unable to evaluate due to no opportunity to observe or not expected at this level and thus not observed). It is expected that interns demonstrate each competency at a minimum of “3”, between 50% and 80% of the time to indicate readiness for entry-level practice. While a rating of “3” is the minimum level of competence, we strive to have all interns at a “4” level at year’s end. It is expected that interns begin internship demonstrating competency at a lower rate with increases over the course of the year. Therefore, some lower scores at the first quarter would not necessarily result in a “needs improvement” rating. But if the frequency does not improve over time, a “needs improvement” is added and a formal remediation plan is put in place.

Competence in the understanding and application of ethical principles and state practice regulations are stressed and assessed throughout the internship year. Interns are exposed early and often to the wide array of ethical issues that arise in clinical practice. Discussion of ethical issues is an important feature of didactic training and individual and group supervision. In didactic meetings, interns are required to demonstrate an ability to apply the APA Ethical Principles and Code of Conduct in a clinical context. Application of these principles is fostered through group discussions (during the intern didactic seminar series) of the possible courses of actions to be taken in specific case scenarios. Knowledge and sensitivity to issues of individual
and cultural diversity in psychological practice is ensured through a variety of means. Interns are prompted by the faculty to discuss these issues as they relate psychological assessment and treatment in individual and group supervision. A series of didactic and experiential presentations is devoted specifically to key issues of cultural and individual diversity. All interns complete a required 4-hour course in cultural diversity within the first quarter.

Feedback Regarding Progress:

At the end of each quarter the faculty convenes to discuss the progress of each intern as summarized in the individual evaluation forms completed by their supervisors. Recommendations regarding any changes in supervisory requirements for the next rotation are developed by consensus of the faculty and relayed to the intern by the Director of the Internship. Feedback from their individual supervisors at the completion of each quarter is provided directly by individual faculty and in summary by the Director of Internship who shares the hard copies of the individual supervisor evaluations of their performance.

At mid-year (or sooner if warranted by the presence of a significant issue) and at year-end, the Internship Director writes a letter to the Director of Clinical Training of each intern's doctoral program. This letter summarizes the intern's progress. Each intern is asked to review and sign this letter prior to mailing. The intern is encouraged to indicate points of agreement or disagreement either in the letter itself or in a separate correspondence to his or her Director of Clinical Training.

Minor deficiencies in intern preparation or performance are generally remediated through the course of normal interaction with the intern's supervisor(s). The remediation may consist of didactic supervisory instruction, modeling of techniques by the supervisor, and/or readings in the appropriate literature. When the deficiency is in the domain of experience, the intern may be assigned additional relevant cases to provide the needed exposure. Minor deficiencies in experience, training, or performance are communicated to the Director of Clinical Training from the intern's home program in the context of the mid-year evaluation letter. Since interns undergo ongoing informal evaluation and receive formal quarterly evaluations from faculty, major deficiencies are generally detected early, usually during the first quarter of training.

Major deficiencies in preparation or performance are addressed using a three-step process. First, the intern is placed on "probationary status" to communicate clearly that significant improvement in performance is needed for successful completion of the internship and failure to remediate the deficiency could result in dismissal from the internship program. Second, a remediation plan is developed by the faculty and the Internship Director to ameliorate the noted deficiency. Such plans typically involve increased supervisory contacts (for both training and evaluation) along with intensive variations of the remediation methods used to deal with minor deficiencies. The
remediation plan specifies the required changes in performance along with a timetable for re-evaluation of progress. Third, the Director of Clinical Training at the intern's home program is notified by the Internship Director, first by telephone and then, through written correspondence with a copy provided to the intern. The input of the Director of Clinical Training is sought in the remediation plan, and they are kept abreast of the intern's progress through follow-up contacts both by telephone and mail. If the deficiency is remediated, probationary status is lifted. If the intern fails to remediate the deficiency, the faculty carefully reviews evaluations from the intern's supervisors as well as the intern's self-evaluation of progress. The faculty then decides whether sufficient progress has been made to warrant continuation of the probationary status, with the expectation that the deficiency will be remediated, or whether dismissal from the program is warranted by the intern's failure to demonstrate progress.

**Supervision Requirements**

Interns are required to have at least 2 hours of individual supervision per week. This can be supervision for therapy or assessment. A minimum of 4 hours per week total of supervision is expected.

**Tele-supervision policy:**

Interns often engage in telesupervision for a variety of reasons (the assessment patient is telehealth, the supervisor requests telesupervision for therapy supervision, back-to-back meetings mean more meaningful time can be spent in supervision if it is by zoom). When participating in telesupervision, it is required that each person should be in a private room, on a secure network, and on a HIPAA-compliant platform (i.e., UF Health-managed Zoom) to protect patient confidentiality. Interns are advised to aim for at least 50% of assessment/therapy supervision in person, with the understanding that the amount of telesupervision may change over the course of the training year because of rotation changes.

**Program Expected Competencies**

Interns will be evaluated every quarter by their faculty supervisors on how often they demonstrate the following profession wide competencies on the following scale:

0=Never (0% of the time)
1=Rarely (less than 30% of the time)
2=Sometimes (greater than 30% but less than 50%)
3=Often (greater than 50% but less than 80%,
4=Almost Always (80% of the time or greater)
NI (needs improvement)
N/O (cannot rate this item; either an expected skill at this level but unable to evaluate due to no opportunity to observe or not expected at this level and thus not observed).

It is expected that interns demonstrate each competency at a minimum of “3”, between 50% and 80% of the time to indicate readiness for entry-level practice. While a rating of “3” is the minimum MLA, we strive to have all interns at a “4” level at year’s end. It is expected that interns begin internship demonstrating competency at a lower rate with increases over the course of the year. Therefore, some lower scores at the first quarter would not necessarily result in a “needs improvement” rating. But if the frequency does not improve over time, a “needs improvement” is added and a formal remediation plan is put in place.

Research: Scientific Mindedness, Scientific Foundation of Psychology, Scientific foundation of professional practice, Scientific approach to knowledge generation, application of scientific method to practice

Ethical and legal standards: Application of ethical concepts and awareness of legal issues regarding professional activities with individuals, groups, and organizations.

Individual and cultural diversity: Applies knowledge, skills, and attitudes regarding intersecting and complex dimensions of diversity for example, the relationship between one’s own dimensions of diversity, and one’s own attitudes towards diverse others to professional work

Professional values, attitudes and behaviors: Accountability, Concern for welfare of others, Professional Identity; Self-Assessment/Self-Care/Participation in Supervision

Communication and interpersonal skills, Interpersonal relationships, Affective Skills, Expressive Skills

Assessment: Knowledge of Measures & psychometrics, knowledge of assessment methods, application of assessment methods, diagnosis, conceptualization and recommendations, communication of assessment findings

Intervention: Intervention planning, clinical skills, intervention implementation, progress evaluation

Supervision: Expectations and roles, processes and procedures, skills development, supervisory practices
Consultation and interprofessional/interdisciplinary skills: Role of consultant, addressing referral question, communication of consultation findings, application of consultation methods; Knowledge of shared distinctive contributions of other professions, functioning in multidisciplinary and interdisciplinary contexts, understanding how participation in interdisciplinary collaboration/consultation enhances outcomes; respectful and productive relationship with individuals from other professions

By the end of the internship year, interns are expected to demonstrate competency in these areas greater than 50% of the time.

Intern Termination

The two major reasons why termination from the internship would be considered are: (1) irremediable incompetence in professional performance or (2) the intern has committed a serious lapse of professional judgment that has resulted in a violation of federal law (such as HIPPA) or state statutes regarding professional conduct, or a violation of the ethical principles of the American Psychological Association.

(1) Termination from the internship might arise when, in the judgment of the clinical supervisors of that intern, there has been little to no progress in the competencies evaluated as deficient according to quarterly evaluations. An intern would be considered for termination if they demonstrably fail to show improvements in clinical performance and judgment, despite the implementation of a remediation plan. Termination would occur by a consensus vote of the faculty and if approved by the Chair of the Department and Dean of the College and the procedures met required legal criteria of the University.

(2) Termination might also arise when a complaint by a patient, supervisor or other trainee regarding the individual’s conduct is filed. This complaint is shared with the intern to provide an opportunity to respond or add context. Details of the complaint and intern response are then brought to the Major Area of Study Head and Director of the Internship and ultimately end up with the general faculty for deliberation and plan for remediation, if possible. If the intern fails to remediate, a faculty vote on dismissal is taken. Any action taken at this point would be reviewed by the Chair of the Department, Dean of the College and Attorneys to ensure due process.

Record Maintenance

Your internship performance records will be maintained on a secure share drive with access limited to the department chair, internship director and academic coordinator. The security of the
site is maintained through the college Information Technology infrastructure. These records will be available to verify your internship training for future licensure and employment documentation. Any formal complaints received would also be maintained indefinitely in the same secure drive.

**Ethical Conduct**

Integrity and ethical conduct are the foundation for everything the professional psychologist does. The intern must acquaint him/herself with the APA ethical standards/code of conduct of psychologists concerning issues such as responsibility to the public, conduct of research, dissemination of information, confidentiality, patient welfare, and professional relationships. This responsibility of the intern extends to knowledge of rules, regulations, and policies of the Department, Psychology Clinic, Academic Health Center, and the University. APA ethics and standards of practice are binding on all interns. The current version of the APA Ethical Principles. The intern should consult the following sources for ethical and professional standards:

- Ethical Principles of Psychologists and Code of Conduct
- Guidelines for Providers of Psychological Services to Ethnic, Linguistic, and Culturally Diverse Populations
- APA Professional Practice Guidelines
- Florida Statute 490: Psychological Services
- Protecting Human Research Participants (PHRP)
  - [https://phrp.nihtraining.com/users/PHRP.pdf](https://phrp.nihtraining.com/users/PHRP.pdf)
Professional Practice: An intern must not engage in professional practice except under the direct supervision of a qualified person designated by the Program Director. Any activity involving psychological counseling, psychotherapy or the delivery of professional psychological services that exists in addition to those required by the program must be approved in writing by the Program Director.

Internet & Social Media Policy

Intern activities on websites, blogs, e-mail, social media sites, and other electronic media should be thoughtful, appropriate and conducted professionally.

When interns post personal information on publicly available electronic media sites, they unfortunately forfeit control over the manner in which the information is used, or reflects on them or their training program. Recent example highlight concerns and the potential implications of maintaining an online presence, including:

1) Postdoctoral programs have disclosed that they regularly conduct web searches on applicants prior to inviting them for interviews and ranking them for selection or matching.

2) Clients may conduct web searches on trainees’ names in order to find out about them. There have been many documented instances in the health professions of patients subsequently refusing to be seen in a clinic based on what they have found.

3) Potential employers often conduct online searches of potential employees prior to interviews and job offers.

4) Legal authorities search websites for evidence of illegal activities. Some prima facie evidence may be gained from websites such as photographs, but text may also alert authorities to investigate further.

5) Unprofessional postings on listservs, blogs, social media sites, etc. may reflect poorly on you or on the training program in which you are enrolled. It is NEVER appropriate to discuss your patients, your personal reactions to patients or supervisors, or other aspects of the healthcare provider-patient relationship on social media sites or other digital media not explicitly designed for discussions of this type.
6) Although signature lines and e-mail addresses are ways of indicating uniqueness or personal philosophy, the lack of control over e-mail forwarding makes it impossible to know who will read electronic postings. Signature lines and expressive e-mail addresses may affect how others view your professional standing. Quotations on personal philosophy, religious beliefs, or political attitudes might cause adverse or unpredictable reactions in some people.

7) Answering machine messages might be entertaining to your peers, may express your individuality, and be indications of your sense of humor. However, they may not appeal to all callers. Greetings on voice-mail services and answering machines should be thoughtfully constructed. If cell phones are used for professional communications (e.g., research, teaching, or clinical activities), be sure your greeting is appropriate to the context in which it is used.

There is now ample documentation of instances in training programs and at universities where students/interns have been negatively affected by material on websites, e-mails, and answering machine messages. There are examples of e-mails from faculty and trainees getting published in newspapers, causing harm to recipients, senders, or others.

Information that seems to be fun, informative, and candid might put the program and the intern at risk for adverse consequences. What might be seen as private self-disclosure may actually be very public. This includes information posted on blogs, personal pages in Facebook, Twitter or other similar sites, including ones started before undergraduate or graduate school. Anything on the World Wide Web is potentially available to all who seek.

Trainees are reminded that, if you identify yourself as an intern in Clinical and Health Psychology, we have an interest in how you portray yourself. If you report doing or are depicted on a website or in an e-mail as doing something unethical, illegal or if the data depicts behavior that threatens your ability to fulfill your professional role, then this information may be used by the Program to determine your standing or retention. As a preventative measure the Program advises that interns and faculty approach online blogs and websites, including listservs sponsored by professional organizations, very carefully. Is there anything posted that you would not want the program faculty, employers, family members, or clients to read, view, or share amongst themselves? Interns are advised to engage in “safe” web practices and be concerned now about professional demeanor and presentations.

**Jobs**

Any interns receiving any funds from the University (grants, graduate assistantships, etc.) must not accept other employment of any kind without the written permission of the Internship Program.
Director. The Internship Director's written approval is required prior to acceptance of any other position or job inside or outside of the department.

Generally, the department discourages interns working for the faculty (even paid work) when the work is not professional in nature, except in extraordinary circumstances, or in situations where peer review suggests minimal risk of negative outcomes due to dual relationships.

Policy for Language Translation

Policy for Trainee as-needed OPS positions for Translator and Foreign Language Services

Trainees:

Trainees are defined as graduate students, interns, and post-doctoral residents/fellows who are certified translators, may be hired in as-needed, OPS positions to provide services under the following conditions:

   a) Trainee, as a service to Psychology Specialties, is providing one-time Clinical Interview and/or Psychodiagnostic/Neuropsychological test administration to include test administration, scoring, report writing, feedback session and associated documentation:
      (1) For a faculty or service line other than those to which the trainee is currently assigned, OR
      (2) For a case that is above what is expected or required of other same-level peers on the rotation.
   b) Trainee has been approved as a translator in the language in which they will be providing translation or testing services, as outlined in UF Health Psychology Specialties' Foreign Language and Deaf Interpreter Policy (in progress).

Payment:

Trainees will be paid $25 per hour to include all related documentation (e.g., notes, test reports).

   a. Trainees who are Graduate Assistants are responsible for assuring that these hours will not cause them to exceed the per week limit, currently at 29.6 hours (i.e., only 9.6 OPS hours can be accrued per week above the 20 hours of funding already provided through assistantships and fellowships).

   b. Translation services and all related note and assessment report writing shall not exceed eight hours per each patient.

Exclusions:

   a. Ongoing psychotherapy cases in a language other than English.
b. Patient cases on services to which the trainee is currently assigned, AND

c. Patient cases the trainee would have otherwise been expected to see on assigned service.

**Procedure:**

a. Interested trainees shall contact Shands Patient Experience Office at 352-594-5004 to request to schedule a certification test. Shands has agreed to cover the cost of the first exam. If unsuccessful at the first attempt, retesting for certification is at the expense of the trainee.

b. Upon successful completion of the test, the trainee should forward the certificate to Vera Hemphill and Dinah Delhomme, HR Generalist I.

c. Vera Hemphill will maintain a list of certified trainees and will schedule those who have completed the OPS hiring process.

d. Faculty in need of translation services will contact Vera Hemphill, and copy Dr. Lisa King, at least two weeks in advance to request names of approved trainees.

e. Vera Hemphill, or other Clinic Staff, will contact approved trainees and inform the provider and of whom accepted the assignment.

f. Trainee will work with office staff and Faculty to schedule the patient. Trainee is responsible for assuring that translation services and all related note and assessment report writing **shall not exceed eight hours** per each patient.

g. Upon completion of all administration, documentation, and feedback, Trainee will submit their hours into their timesheet via MyUFL->Self-Service-> Time Reporting -> Report Time --> Timesheet.

h. The Faculty member will confirm hours, verify, and approve time. This can be done by submitting an email to CHP-PHHP@phhp.ufl.edu the week of payroll close. Translation services and all related note and assessment report writing **shall not exceed eight hours** per each patient.

**Due Process, Grievances and Conflict Resolution**

A stepped-approach is used in the resolution of disputes and grievances. These steps are outlined in detail for interns during the orientation period. Interns are encouraged to resolve problems directly with the individual(s) involved, if at all possible. Interns may seek the advice and
guidance of the Internship Director in resolving problems at this level. If this procedure is not successful, the intern may ask the Internship Director to intervene. In such a case, the Internship Director collects all relevant information from the intern and other parties and consults with other faculty and staff as is appropriate to the specific situation. Subsequently, the Director brings the relevant individuals together and presents a plan for problem resolution. The Director then follows up with the intern and other relevant parties to determine whether a successful resolution has been achieved. If the grievance is such that the intern believes that the complaint cannot be brought to the Internship Director, or if the intern wishes to appeal the Director's decision, the intern may bring the problem to the Department Chair for resolution. Finally, if appropriate redress of the problem cannot be achieved within the Department, the intern may pursue a grievance or appeal procedure to the Dean of the College of Public Health and Health Professions.

**Grievance Procedure:**

The University of Florida is committed to a policy of treating all members of the university community fairly in regard to their personal and professional concerns. To ensure that each intern is given adequate opportunity to bring complaints and problems of an academic nature, exclusive of grades, to the attention of the University administration with the assurance that each will be given fair treatment, a formal grievance procedure exists. Individual departments or colleges may have more detailed grievance procedures. The intern should check with his or her department Academic Coordinator.

A grievance is defined as dissatisfaction occurring when an intern thinks that any condition affecting him or her is unjust or inequitable or creates unnecessary hardship. Areas in which intern grievances may arise include scientific misconduct, sexual harassment, discrimination, employment-related concerns, and academic matters. The University has various mechanisms available for handling these problems when they arise, and it can sometimes be confusing for an intern to navigate. In general it is desirable to settle grievances in an informal fashion rather than initiating a formal grievance. Communication is the key element. As soon as a grievance issue arises, the intern should speak with either their clinical supervisor, Internship director or the department Academic Coordinator. If these individuals are not available, the department Chair is the next alternative. In most cases these individuals can work with the intern and the person causing the grievance to resolve the issue informally, as specified below.

Interns must first attempt to resolve the issue through the Department of Clinical and Health Psychology and then the College of Public Health and Health Professions. Only if the issue cannot be resolved may interns contact the Ombudsman for an appointment. Documentation must be provided of all formal actions taken to resolve the issues. The Ombudsman for interns is located in 31 Tigert Hall, 352-392-1308.

**Informal Stage**
In the informal phase of the academic grievance procedure, oral discussion between the intern and the person(s) alleged to have caused the grievance is strongly encouraged. The discussion should be held as soon as the intern first becomes aware of the act or condition that is the basis of the grievance. Additionally, or in the alternative, the intern may wish to present his or her grievance in writing to the person(s) alleged to have caused the grievance. In either case, the person alleged to have caused the grievance must respond to the intern either orally or in writing.

**Formal Stage**

If the intern considers the response to the discussion to be unsatisfactory and feels that the grievance still exists, the grievance should be brought in writing, with all supporting documentation, to the department chair or a designated representative of the department. The response of the department to the intern’s grievance must be given in a timely fashion.

If the grievance is still considered to be unresolved, the intern may then file the grievance in writing with the dean of the college, who shall investigate the matter and respond to the intern within a reasonable time.

The right of appeal in writing to the Ombudsman for interns, as the authorized representative of the President of the University, shall be the final appeal but only after the prescribed administrative channels and grievance procedures have been exhausted.

Issues of research misconduct are covered by Rule 6C1-1.011, Florida Administrative code. Any allegations of research misconduct should be brought to the attention of the administrative officer (e.g. department chair, dean) to whom the accused party reports. Interns may wish to seek advice from the Director & UF Research Integrity Officer, Gringer Hall, 352-392-1582, before making a formal complaint.

**Complaint Process:** If you proceed to a formal complaint process, details of the procedure are at the UF Complaint Process website, which distinguishes between formal vs. informal complaints, complaints and grievances, and possible pathways to resolution. You may be asked to re-tell your story several times. CHP is not permitted to file a complaint for you, even if you fully reported the event to CHP.

**Anonymity and Retaliation:** Under some circumstances, detailed on the Complaint Process website, you may not be able to maintain anonymity.
Reporting Bias or Hate Crimes

RESPECT Team: The purpose of the RESPECT Team is to provide impacted parties of bias incidents with opportunities to be heard and supported; understand and respond to situations that affect the University of Florida; educate and inform the community; and create awareness of ignorance and intolerance. The RESPECT Team provides services to witness(es), bystander(s), targeted individual(s), offender(s), or a member(s) of the community. The RESPECT Team does not investigate, adjudicate, or take the place of other UF processes or services. Rather, the RESPECT team complements and works with campus entities to connect impacted parties and communities with appropriate support and resources.

Reporting Bias or Hate Crimes: You can report alleged incidents of bias or hate crime through the RESPECT Team, which also includes a link to the UF Police Department. You have the option to submit a report anonymously.

Microaggressions Committee: We have an informal CHP Support Committee (i.e., this is not a formal grievance process) for interns who need assistance navigating microaggressions. Faculty Microagression Mentors serving on the Committee are subject to change. Microagression Mentors do not address intern concerns with faculty or report concerns to the chair. The Committee exists to provide professional development advice about handling potentially difficult situations.

Microaggression Mentors commit that should you bring any information to them about ways in which they may have engaged in microaggression they will: 1) receive this information positively with a mindset oriented towards growth and improvement; 2) validate your experience and any harm that may have come from their behavior; 3) seek to understand how their interaction impacted you and your training; 4) seek support and guidance on ways to improve their behavior in the problematic area; 4) continue their efforts in learning how to improve multicultural competence as a researcher, clinician, supervisor, and mentor.

In their role as a resource for microaggression reporting, Microaggression Mentors will: 1) maintain your confidentiality to the extent that feels comfortable to you; 2) validate your experience and any harm that may have come from your experience(s) of microaggression; 3) provide you emotional support and guidance for next steps; and 4) collaborate with you to identify if any action needs to occur in response to the reported event.

Helpful Resources During Your Internship

Key Contacts:
Maps:

Shands

HPNP Building

Campus

Parking:

Decals and Maps

Webpages:

PHHP

CHP

PeopleSoft/myUFL

ONE.UF

Contains links to: GatorLink account, time reporting, and paycheck viewing.

CHP Intranet (requires connection to VPN)

Contains links to: Clinic Policies and Procedures Manual, Clinic Reports, Clinic Schedule, Florida Statutes, HIPAA Guidelines, and Letterhead (Department and Clinic)

Technology Services:

PHHP IT

Responsible for maintenance of computers and related equipment used by staff and trainees

Photocopying/fax: Clinic has its own Xerox and fax services available to interns and trainees for clinic related business.

EPIC – UF Health’s ERM system that includes scheduling, billing and patient records
PHHP IT – responsible for maintenance of computers and related equipment used by staff and trainees

Photocopying/fax – Clinic has its own Xerox and fax services available to interns and trainees for clinic related business.

## Department Administrative Resources

<table>
<thead>
<tr>
<th>Title</th>
<th>Name</th>
<th>Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Administrative Staff:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Academic Program Specialist</td>
<td>Amanda DiTrapani</td>
<td>25% time on internship related duties such as organizing applications and interview schedule for intern applicants, helping to prepare orientation schedule, and serving as the intern administrative contact person</td>
</tr>
<tr>
<td>Assistant Director,</td>
<td>Karen Billings</td>
<td>Manages business aspects of the department and clinic ensuring funding is available.</td>
</tr>
<tr>
<td>Administrative Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Human Resources Generalist</td>
<td>Dinah Delhomme</td>
<td>Manages hiring of interns and any personnel issues that arise helps; ensure interns receive their salaries and benefits.</td>
</tr>
<tr>
<td>Clinic Director</td>
<td>Lisa King, PSY.D., ABPP</td>
<td>Oversees all clinic policies and procedures to ensure compliance with both federal and state HIPPA regulations and standards for clinics under Joint Commission and APA.</td>
</tr>
<tr>
<td>Clinic Staff:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>------------------------------------</td>
<td>--------------------------------------</td>
<td>-----------------------------------------------------------------</td>
</tr>
<tr>
<td>Clinic Manager</td>
<td>Keri Merchant</td>
<td>Responsible for day-to-day operations directly related to patient care and services</td>
</tr>
<tr>
<td>Clinical Coder</td>
<td>Mike Sampson</td>
<td>Maintains the fiscal records regarding billing and revenue issues as well as tracks insurance related policy changes (e.g. recent medicare decision re: PQRS.)</td>
</tr>
<tr>
<td>Financial Assistance Counselor</td>
<td>Doug Martin</td>
<td>Responsible for patient insurance verification, pre-certification, collections, and therapy requests. Serves as a resource for interns to obtain financial and insurance information for their patients.</td>
</tr>
<tr>
<td>Clinic Services Representatives</td>
<td>Lorraine Burgos, Tammy Craig, Amanda Gillis, Ashant Givens, Victoria Godbee, Vera Hemphill</td>
<td>These individuals handle patient check-in, patient records, response to phone and fax consultations and maintain contact via paging and test messages with faculty, interns, and other trainees.</td>
</tr>
<tr>
<td>Part Time Clerk</td>
<td>Savannah Selph</td>
<td>Assistants with record keeping, tracking evaluations, academic support</td>
</tr>
</tbody>
</table>
UF Police Department

The University of Florida Police Department provides 24 hour per day security for Shands Hospital and the Health Science Center (HSC) on the campus of the University of Florida. In an effort to better meet the needs of such a large complex, the department provides a uniformed police officer and a minimum of 2 Police Service Technicians every day to patrol both inside and outside. The police department also maintains an office on the ground floor of the Health Science Center. The Health Science Center Police Office is permanently staffed by UFPD Captain Eric Rice.

You can reach the Health Science Center Police Office by calling (352) 846-3825, or give us an email at: erice@ufl.edu.

University of Florida Police Department Contact Numbers

<table>
<thead>
<tr>
<th>Service</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main Line</td>
<td>392-1111</td>
</tr>
<tr>
<td>Information</td>
<td>392-5447</td>
</tr>
<tr>
<td>Administration</td>
<td>392-5444</td>
</tr>
<tr>
<td>Patrol</td>
<td>392-5154</td>
</tr>
<tr>
<td>Personnel</td>
<td>392-2880</td>
</tr>
<tr>
<td>Office of Victim Services</td>
<td>392-5648</td>
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<tr>
<td>Community Services</td>
<td>392-1409</td>
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<tr>
<td>Office of Professional Standards</td>
<td>392-9584</td>
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<tr>
<td>Investigations</td>
<td>392-4705</td>
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<tr>
<td>Training</td>
<td>392-8949</td>
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<tr>
<td>Communications</td>
<td>392-5449</td>
</tr>
<tr>
<td>Records</td>
<td>392-6651</td>
</tr>
</tbody>
</table>

Email: updinfo@admin.ufl.edu
Research Contract

Written Contract for Research Participation during Internship

Intern: __________________________

Research Supervisor: __________________________

I met with ___________________________ to discuss opportunities for research.

Plan for Research Activities

_____________________________  ________________________
Intern Signature                Date

_____________________________  ________________________
Supervisor Signature           Date

_____________________________  ________________________
Internship Director Signature  Date