



UTAH CENTER FOR PSYCHOLOGICAL SERVICES

Postdoctoral Resident Training Program

The Site

The Utah Center for Psychological Services is a private practice located in the greater Salt Lake City area. Our vision and mission is to be Salt Lake City's premier center for high quality comprehensive psychological evaluations. We serve diverse clients for a variety of concerns. As a result, we conduct a broad spectrum of psychological assessments to address referrals for autism, ADHD, trauma, dissociative, personality, dementia, TBI, learning disorders, etc. across the lifespan. We also provide therapy services, and forensic evaluations.

We value and respect others' autonomy (both employees and clients alike). We implement a strengths-based approach with our clients, focusing on the individual strengths to guide recommendations for accommodations, treatment, and/or support. We are also committed to ongoing learning, and we implement a developmental model for training our staff members. Our goal is to find a balance between supporting our team members while also respecting their autonomy and expertise.

For more information, please visit our website:

<https://www.utahcenterforpsychologicalservices.com/>

Training Overview

The postdoctoral residency is a structured, competency-based training program designed to produce psychologists with advanced skills in psychological and neuropsychological assessment and in individual therapy. To accomplish this, we develop and evaluate competence in 13 core areas of training: professional values and attitudes, individual and cultural diversity, ethical and legal standards, reflective practice, interpersonal relations, knowledge of science, training in research and evaluation, use of evidence-based practices, methods of assessment, approaches to intervention and consultation, experience with interdisciplinary systems and skills of advocacy.

Training in these competencies is achieved primarily through direct clinical experience in which trainees complete approximately four comprehensive evaluations per month

over the life span, including clinical interviews, standardized testing, integration of collateral information, preparation of reports and provision of feedback. In addition, trainees receive optional, individually designed experience with outpatient therapy.

Clinical training is supplemented by a well-structured program of training activities that includes 2 hours per week of individual supervision, weekly didactic seminars and group experiences with supervised discussion of clinical cases, monthly interdisciplinary conferences concerning clinical cases and continuous opportunities for professional development with assigned readings and specialized training experiences.

The program follows a developmental model of training, in which fellows progress from structured support and close supervision to increasing independence in clinical decision-making and professional functioning. Residents receive graduated responsibility in conducting comprehensive psychological evaluations, with increasing autonomy over the course of the training year. Training emphasizes integration of multiple data sources, development of diagnostic clarity, and delivery of actionable, strengths-based recommendations.

While the primary focus of the program is assessment, fellows may also have the opportunity to engage in a limited therapy caseload and gain exposure to forensic evaluations, depending on training goals and availability.

Schedule

This is a full-time position (i.e., 40 hours per week), and the schedule is Monday through Thursday, 8:00 AM to 6:00 PM, allowing for three-day weekends to explore all of Utah's fantastic recreational opportunities! This is a hybrid position, wherein most of the work will be done remotely (i.e., intake, collateral interviews, report writing, and feedback), but some work (i.e., testing) must be done in person at our office. Benefits include two weeks of paid time off (accumulated each pay period), 6 paid holidays, 401(k) with employer match, workers' compensation, and insurance (medical, dental, vision, life).

Admission Requirements

- Doctorate in clinical psychology (PsyD or PhD) or related field to be conferred before the start date of the residency

- Completion of all doctoral degree requirements from a regionally accredited institution of higher education prior to the start date of residency
- APA or CPA accredited internship preferred. APPIC matched internship also accepted.
 - If internship is not accredited, we will conduct a review of internship materials provided by the prospective fellow and will review published information and reach out to program director and/or supervisor as needed to ensure that the internship program meets APPIC standards.
- Will need to obtain a Psychology Resident license through DOPL

Preferred Skills

- Proficiency in special education and working with individuals with developmental disabilities
- Experience administering, scoring, and interpreting psychological tests (cognitive, neuropsychological, achievement, and personality tests)
- Strong background in diagnosis and evidence-based treatment
- Strong report-writing skills
- Good time management (timely notes and reports)
- Good interpersonal skills
- Ability to work independently AND collaboratively
- Strong attention to detail

Duties

- Conduct psychological assessments and evaluations using standardized psychological measures
- Conduct intake sessions with adults, adolescents, and children
- Administer and score neuropsychological, cognitive, achievement, and/or personality measures
- Collect and review collateral sources of data (e.g., collateral interviews, record review, school observation)
- Integrate assessment data into a well-written report that is accessible and useful to the reader
- Conduct feedback sessions to review assessment findings
- Complete evaluations in approximately 30 days (intake to feedback)
- Develop and implement personalized treatment plans
- Maintain timely notes and client records
- Uphold legal and ethical requirements
- Utilize telehealth platforms for remote consultations when necessary

Benefits

- Two weeks of paid time off annually
- Six paid holidays each year
- Medical, dental, and vision insurance benefits
- Allotted weekly time for professional development
- Hybrid schedule, able to work remotely for most duties
- 401(k) with employer matching

Training Resources

- Shared office suites for assessment and in-person meetings
- Laptop provided with relevant software for report writing, scoring, etc.
 - Scoring software is provided for all assessments as applicable
 - Paper forms are provided for all measures as applicable
- Shared iPads for assessment
- Billing support
- Administrative staff to assist with scheduling

Program Information

Overview

Setting and Programmed Training Activities

The Utah Center for Psychological Services utilizes a hybrid format for its postdoctoral residency training. Direct psychological testing occurs in person at the clinic, whereas report writing, intake evaluations, collateral interviews and feedback sessions are conducted remotely. Structured training experiences are integrated throughout the year, with 2 hours of individual supervision provided weekly to meet the needs for clinical and professional development. Initial didactic training in assessment is achieved with direct observation, and subsequent training consists of weekly group sessions of supervised learning and interdisciplinary seminars. Attended monthly by trainees, interdisciplinary conferences with the clinical director provide additional experience with case formulation and development of evidence-based treatment recommendations.

Overview, Sequence, and Population

Residents will serve a patient population ranging in age from 5 to 90 in a program of competency-based, developmental training. Comprehensive experience with methods of psychological assessment, techniques of case formulation and procedures for generating empirically supported treatment recommendations represent the major goals of the program. With increasing experience, trainees achieve a degree of independence

and eventually assume responsibility for all phases of clinical care. Although the major emphasis remains on experience with comprehensive psychological assessment, limited opportunities for training in therapy and for experience with forensic evaluations are available according to individual training objectives.

Supervisor

- Residents will be supervised primarily by the Training Director, Tristyn Teel Wilkerson. Psy.D.
 - Dr. Wilkerson is on-site and/or available to fellows 40 hours weekly.
- In addition, the Clinical Director, Dr. Beckie Grgich, and the Site Director, Dr. Casey Mangnall will be available to provide support.

Physical Facility

The Utah Center for Psychological Services is located in West Jordan, Utah. This is a hybrid position, wherein most of the work will be done remotely (i.e., intake, collateral interviews, report writing, and feedback), but some work (i.e., testing) must be done in person at our office. The physical facility features private, shared office suites dedicated to psychological assessment and in-person therapy. To support this hybrid workflow and ensure secure clinical operations, the clinic provides necessary training resources, including shared iPads for test administration, laptops equipped with relevant scoring and report-writing software, and administrative staff to assist with scheduling and billing.

Activities Provided

Evaluation:

- The psychology fellow will conduct psychological assessments and evaluations using standardized psychological measures.
- The fellow will complete roughly 4 evaluations per month.
- We conduct a broad spectrum of psychological assessments to address referrals for autism, ADHD, trauma, dissociative disorders, personality, dementia, TBI, learning disorders, etc. across the lifespan.
- Administer and score neuropsychological, cognitive, achievement, and/or personality measures, collect and review collateral sources of data (e.g., collateral interviews, record review, school observation).
- Collateral interviews and collaboration with other professionals will occur as needed.
- Integrate assessment data into a well-written report that is accessible and useful to the reader.
- Conduct intake sessions with adults, adolescents, and children.
- Conduct feedback sessions to review assessment findings.

Therapy: Small therapy caseload to be determined if it fits with the interests of the fellow. Individual or family therapy, with a broad range of clients, will be tailored to the fellow's interests.

Additional Professional Development: Assigned readings, videos, webinars, in-person and online trainings, didactic seminars, etc. to be discussed weekly in group supervision, and participate in monthly consultation group meetings.

Programmed sequence of postdoctoral psychology training

Activity	Day	Time	Hours
Individual Supervision	TBD	TBD to be determined based on the supervisee's schedule	2 hours weekly
Residents will review clinical cases, review assessment and intervention strategies, explore ethical and professional issues, and reflect on their learning experiences. The licensed psychologist supervisor offers targeted feedback, helps the fellow identify strengths and areas for growth, and assists in developing clinical competencies. The content and focus of supervision are tailored to the fellow's specific training needs, clinical responsibilities, and professional goals.			
Didactic Assessment Training	TBD, September through October	TBD to be determined based on the supervisee's schedule	2 hours weekly
Residents will observe assessments, intake interviews, and feedback sessions conducted by supervisors and other licensed clinicians. The selection of assessment measures and procedures is tailored to the fellows' specific training needs.			
Group Supervised Learning Review	November through August	TBD to be determined based on the supervisee's schedule	1 hour weekly
Residents will engage in collaborative discussion and analysis of educational activities assigned over the preceding week. These activities may include readings, video modules, trainings, or other didactic materials relevant to clinical practice and professional development.			
Didactic Seminars	November through August	TBD to be determined based on the supervisee's schedule	1 hour weekly
Didactic seminars are organized by an interdisciplinary team to address both patient care priorities and staff interests. Psychology fellows attend these sessions alongside providers, trainees, staff, and administrators.			
Consultation Group	First Wednesday of	5pm	1 hour monthly

	each month		
The consultation group is led by the Clinical Director and consists of licensed psychologists, therapists, and fellows to engage in case consultation.			

Typical Weekly Structure

- Clinical services (e.g., intakes, report writing, test administration and scoring, feedback, therapy): 25-30 hours
- Individual supervision: 2 hours
- Group supervision and didactics: 2–4 hours
- Professional development: 2-4 hours

Program Goal

Our goal is to graduate psychologists with advanced competence in psychological and neuropsychological assessments and advanced competence in individual mental health therapy (if applicable).

Competencies for Postdoctoral Residents

1. Professional Values and Attitudes: as evidenced in behavior and comportment that reflect the values and attitudes of psychology.
1A. Integrity - Honesty, personal responsibility and adherence to professional values
Monitors and independently resolves situations that challenge professional values and integrity
1B. Deportment
Conducts self in a professional manner across settings and situations
1C. Accountability

Independently accepts personal responsibility across settings and contexts
1D. Concern for the welfare of others
Independently acts to safeguard the welfare of others
1E. Professional Identity
Displays consolidation of professional identity as a psychologist; demonstrates knowledge about issues central to the field; integrates science and practice

2. Individual and Cultural Diversity: Awareness, sensitivity and skills in working professionally with diverse individuals, groups and communities who represent various cultural and personal background and characteristics defined broadly and consistent with APA policy.
2A. Self as Shaped by Individual and Cultural Diversity (e.g., cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status) and Context
Independently monitors and applies knowledge of self as a cultural being in assessment, treatment, and consultation
2B. Others as Shaped by Individual and Cultural Diversity and Context
Independently monitors and applies knowledge of others as cultural beings in assessment, treatment, and consultation
2C. Interaction of Self and Others as Shaped by Individual and Cultural Diversity and Context
Independently monitors and applies knowledge of diversity in others as cultural beings in assessment, treatment, and consultation
2D. Applications based on Individual and Cultural Context

Applies knowledge, skills, and attitudes regarding dimensions of diversity to professional work

3. Ethical Legal Standards and Policy: Application of ethical concepts and awareness of legal issues regarding professional activities with individuals, groups, and organizations.

3A. Knowledge of ethical, legal and professional standards and guidelines

Demonstrates advanced knowledge and application of the APA Ethical Principles and Code of Conduct and other relevant ethical, legal and professional standards and guidelines

3B. Awareness and Application of Ethical Decision Making
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Independently utilizes an ethical decision-making model in professional work
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3C. Ethical Conduct

Independently integrates ethical and legal standards with all competencies
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4. Reflective Practice/Self-Assessment/Self-Care: Practice conducted with personal and professional self-awareness and reflection; with awareness of competencies; with appropriate self-care.
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4A. Reflective Practice

Demonstrates reflectivity both during and after professional activity; acts upon reflection; uses self as a therapeutic tool
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4B. Self-Assessment

Accurately self-assesses competence in all competency domains; integrates self-assessment in practice; recognizes limits of knowledge/skills and acts to address them; has extended plan to enhance knowledge/skills
4C. Self-Care (attention to personal health and well-being to assure effective professional functioning)
Self-monitors issues related to self-care and promptly intervenes when disruptions occur
4D. Participation in Supervision Process
Effectively participates in supervision, Independently seeks supervision when needed

5. Relationships: Relate effectively and meaningfully with individuals, groups, and/or communities.
5A. Interpersonal Relationships
Develops and maintains effective relationships with a wide range of clients, colleagues, organizations and communities
5B. Affective Skills
Manages difficult communication; possesses advanced interpersonal skills
5C. Expressive Skills
Verbal, nonverbal, and written communications are informative, articulate, succinct, sophisticated, and well-integrated; demonstrate thorough grasp of professional language and concepts

6. Scientific Knowledge and Methods: Understanding of research, research methodology, techniques of data collection and analysis, biological bases of behavior, cognitive-affective bases of behavior, and development across the lifespan. Respect for scientifically derived knowledge.
6A. Scientific Mindedness
Independently applies scientific methods to practice
6B. Scientific Foundation of Psychology
Demonstrates advanced level knowledge of core science (i.e., scientific bases of behavior)
6C. Scientific Foundation of Professional Practice
Independently applies knowledge and understanding of scientific foundations independently applied to practice

7. Research/Evaluation: Generating research that contributes to the professional knowledge base and/or evaluates the effectiveness of various professional activities
7A. Scientific Approach to Knowledge Generation
Demonstrates development of skills and habits in seeking, applying, and evaluating theoretical and research knowledge relevant to the practice of psychology, Generates knowledge
7B. Application of Scientific Method to Practice
Applies scientific methods of evaluating practices, interventions, and programs

8. Evidence-Based Practice: Integration of research and clinical expertise in the context of patient factors.

8A. Knowledge and Application of Evidence-Based Practice

Independently applies knowledge of evidence-based practice, including empirical bases of assessment, intervention, and other psychological applications, clinical expertise, and client preferences

9. Assessment: Assessment and diagnosis of problems, capabilities and issues associated with individuals, groups, and/or organizations.

9A. Knowledge of Measurement and Psychometrics

Independently selects and implements multiple methods and means of evaluation in ways that are responsive to and respectful of diverse individuals, couples, families, and groups and context

9B. Knowledge of Assessment Methods

Independently understands the strengths and limitations of diagnostic approaches and interpretation of results from multiple measures for diagnosis and treatment planning

9C. Application of Assessment Methods

Independently selects and administers a variety of assessment tools and integrates results to accurately evaluate presenting question appropriate to the practice site and broad area of practice

9D. Diagnosis

Utilizes case formulation and diagnosis for intervention planning in the context of stages of human development and diversity

9E. Conceptualization and Recommendations
Independently and accurately conceptualizes the multiple dimensions of the case based on the results of assessment
9F. Communication of Assessment Findings
Communicates results in written and verbal form clearly, constructively, and accurately in a conceptually appropriate manner

10. Intervention: Interventions designed to alleviate suffering and to promote health and well-being of individuals, groups, and/or organizations.
10A. Intervention planning
Independently plans interventions; case conceptualizations and intervention plans are specific to case and context
10B. Skills
Displays clinical skills with a wide variety of clients and uses good judgment even in unexpected or difficult situations
10C. Intervention Implementation
Implements interventions with fidelity to empirical models and flexibility to adapt where appropriate
10D. Progress Evaluation

Independently evaluates treatment progress and modifies planning as indicated, even in the absence of established outcome measures

11. Consultation: The ability to provide expert guidance or professional assistance in response to a client's needs or goals.

11A. Role of Consultant

Determines situations that require different role functions and shifts roles accordingly to meet referral needs

11B. Addressing Referral Question

Demonstrates knowledge of and ability to select appropriate and contextually sensitive means of assessment/data gathering that answers consultation referral question

11C. Communication of Consultation Findings

Applies knowledge to provide effective assessment feedback and to articulate appropriate recommendations

11D. Application of Consultation Methods

Applies literature to provide effective consultative services (assessment and intervention) in most routine and some complex cases

12. Interdisciplinary Systems: Knowledge of key issues and concepts in related disciplines. Identify and interact with professionals in multiple disciplines.

12A. Knowledge of the Shared and Distinctive Contributions of Other Professions

Demonstrates awareness of multiple and differing worldviews, roles, professional standards, and contributions across contexts and systems; demonstrates intermediate level knowledge of common and distinctive roles of other professionals
12B. Functioning in Multidisciplinary and Interdisciplinary Contexts
Demonstrates beginning, basic knowledge of and ability to display the skills that support effective interdisciplinary team functioning
12C. Understands how Participation in Interdisciplinary Collaboration/Consultation Enhances Outcomes
Participates in and initiates interdisciplinary collaboration/consultation directed toward shared goals
12D. Respectful and Productive Relationships with Individuals from Other Professions
Develops and maintains collaborative relationships over time despite differences

13. Advocacy: Actions targeting the impact of social, political, economic or cultural factors to promote change at the individual (client), institutional, and/or systems level.
13A. Empowerment
Uses awareness of the social, political, economic or cultural factors that may impact human development in the context of service provision, Intervenes with client to promote action on factors impacting development and functioning
13B. Systems Change
Promotes change at the level of institutions, community, or society

Evaluation Procedures

Timing and Structure:

- Mid-Year Evaluation: Conducted approximately 6 months into the residency.
- End-of-Year Evaluation: Conducted at the conclusion of the training year.

Evaluation Components:

- Competency Assessment: Residents are evaluated on core competencies such as assessment, intervention, consultation, supervision, ethics, cultural competence, and professionalism.
- Supervisory Feedback: Primary supervisors provide structured feedback, often using standardized evaluation forms aligned with APA or program-specific benchmarks.
- Self-Assessment: Residents complete self-evaluations to reflect on strengths, areas for growth, and progress toward training goals.
- Direct Observation/Review: Supervisors may review session recordings, observe clinical work, and assess documentation for quality and adherence to best practices.
- Case Review: Residents may present cases or participate in case conferences as part of the evaluation.

Process:

- Data Collection: Input from supervisors, multidisciplinary team members, and sometimes clients (via satisfaction surveys).
- Evaluation Meeting: A formal meeting between the fellow and supervisor(s) to discuss the evaluation, provide feedback, and set goals.

Feedback and Remediation:

- Strengths and Areas for Growth: Specific feedback is provided, highlighting competencies achieved and areas needing improvement.
- Remediation Plans: If a deficiency is identified, due process procedures would be initiated, which may lead to a remediation plan with clear objectives, timelines, and follow-up to be established.

Documentation and Reporting:

- Signature and Acknowledgment: Residents acknowledge receipt and discussion of evaluations, typically by signature.

- Program Director Review: Evaluations are reviewed by the training director or program leadership to ensure consistency and address concerns.

Our program fulfills the licensure requirements for postdoctoral supervised practice in the state of Utah.

Overview of Licensure Requirements for Utah Psychologists

To practice as a licensed psychologist in Utah, applicants must meet the following requirements as set by the Utah Division of Occupational and Professional Licensing (DOPL):

1. Education

- Earn a doctoral degree (PhD, PsyD, or EdD) in psychology from a program accredited by the American Psychological Association (APA) or the Canadian Psychological Association (CPA), or from a program meeting equivalent standards.

2. Supervised Experience

- Pre-Doctoral Internship: Completion of at least 2,000 hours of supervised experience in an APA/CPA-accredited or APPIC-member internship (or equivalent).
- Post-Doctoral Supervision: Completion of an additional 2,000 hours of supervised postdoctoral experience, typically over a minimum of one year.

3. Examinations

- Examination for Professional Practice in Psychology (EPPP): Pass the national EPPP exam.
- Utah Psychology Law and Ethics Exam: Pass the state-specific jurisprudence exam covering Utah laws and ethical standards.

4. Application

- Submit a completed application form to DOPL.
- Provide official transcripts, verification of supervised experience, and examination scores.
- Pay the required application and licensing fees.

5. Background Check

- Submit to a fingerprint-based criminal background check.

6. Additional Requirements

- Demonstrate good moral character and professional fitness as determined by DOPL.
- Applicants educated outside the U.S. or Canada must have credentials evaluated for equivalency.

7. License Maintenance

- Complete continuing education (CE) requirements to maintain licensure (currently 48 hours every two years, including specific ethics and suicide prevention training).
- Renew license biennially.

How our Program meets licensure requirements:

- 2000 hours of supervised work in the year-long full-time residency program
- 2 hours weekly individual supervision (exceeds the 1 hour required)
- Time built in to weekly schedule, which can be used to study for the EPPP and the Utah Psychology Law and Ethics Exam

Due Process Procedures

Due Process Procedures are implemented in situations in which a supervisor or other faculty or staff member raises a concern about the functioning of a psychology fellow. The fellowship's Due Process procedures occur in a step-wise fashion, involving greater levels of intervention as a problem increases in persistence, complexity, or level of disruption to the training program.

- **Rights and Responsibilities**
 - These procedures are a protection of the rights of both the fellow and the postdoctoral fellowship training program; and they carry responsibilities for both.
- **Fellows**
 - The Postdoctoral fellow has the right to be afforded with every reasonable opportunity to remediate problems. These procedures are not intended to be punitive; rather, they are meant as a structured opportunity for the fellow to receive support and assistance in order to remediate concerns.

- The fellow has the right to be treated in a manner that is respectful, professional, and ethical.
- The fellow has the right to participate in the Due Process procedures by having their viewpoint heard at each step in the process.
- The fellow has the right to appeal decisions with which they disagree, within the limits of this policy.
- The responsibilities of the fellow include engaging with the training program and the institution in a manner that is respectful, professional, legal, and ethical, making every reasonable attempt to remediate behavioral and competency concerns, and striving to meet the aims and objectives of the program.

- **Postdoctoral Fellowship Program**

- The program has the right to implement these Due Process procedures when they are called for as described below.
- The program and its faculty/staff have the right to be treated in a manner that is respectful, professional, legal, and ethical.
- The program has a right to make decisions related to remediation for a fellow, including probation, suspension and termination, within the limits of this policy.
- The responsibilities of the program include engaging with the fellow in a manner that is respectful, professional, legal, and ethical, making every reasonable attempt to support fellows in remediating behavioral and competency concerns, and supporting fellows to the extent possible in successfully completing the training program.

- **Definition of a Problem**

- For purposes of this document, a problem is defined broadly as an interference in professional functioning, which is reflected in one or more of the following ways:
 - An inability and/or unwillingness to acquire and integrate professional standards into one's repertoire of professional behavior
 - An inability to acquire professional skills in order to reach an acceptable level of competency
 - An inability to control personal stress, psychological dysfunctions, and/or excessive emotional reactions which interfere with professional functioning.
- It is a professional judgment as to when an issue becomes a problem that requires remediation.

- Issues typically become identified as problems that require remediation when they include one or more of the following characteristics:
 - 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 by training personnel is required.
 - The fellow's 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 other trainees.
 - The problematic behavior potentially causes harm to a patient.
 - and/or the problematic behavior violates appropriate interpersonal communication with agency staff.

- **Informal Review**
 - When a supervisor or other faculty/staff member believes that a fellow's behavior is becoming problematic or that a fellow is having difficulty consistently demonstrating an expected level of competence, the first step in addressing the issue should be to raise the issue with the fellow directly and as soon as feasible in an attempt to informally resolve the problem. This may include increased supervision, didactic training, and/or structured readings. The supervisor or faculty/staff member who raises the concern should monitor the outcome.

- **Formal Review**
 - If the fellow's problem behavior persists following an attempt to resolve the issue informally, the following process is initiated
 - Notice: The fellow will be notified in writing that the issue has been raised to a formal level of review and that a Hearing will be held.
 - Hearing: The supervisor or faculty/staff member will hold a Hearing with the Training Director (TD) and the fellow within 10 working

days of issuing a Notice of Formal Review to discuss the problem and determine what action is needed to address the issue. If the TD is the supervisor who is raising the issue, an additional faculty member who works directly with the fellow will be included at the Hearing. The fellow will have the opportunity to present their perspective at the Hearing and/or to provide a written statement related to their response to the problem.

■ Outcome and Next Steps:

- The result of the Hearing will be any of the following options, to be determined by the Training Director and other faculty/staff members who were present at the Hearing. This outcome will be communicated to the fellow in writing within 5 working days of the Hearing:
- Issue an "Acknowledgement Notice" which formally acknowledges:
 - that the faculty is aware of and concerned with the problem
 - that the problem has been brought to the attention of the fellow
 - that the faculty will work with the fellow to specify the steps necessary to rectify the problem or skill deficits addressed by the inadequate evaluation rating
 - that the problem is not significant enough to warrant further remedial action at this time.
- Place the fellow on a "Remediation Plan," which defines a relationship such that the faculty, through the supervisors and TD, 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 implementation of a Remediation Plan will represent a probationary status for the fellow. The length of the probation period will depend upon the nature of the problem and will be determined by the fellow's supervisor and the TD.
 - A written Remediation Plan will be shared with the fellow in writing and will include:
 - The actual behaviors or skills associated with the problem
 - The specific actions to be taken for rectifying the problem

- The time frame during which the problem is expected to be ameliorated
 - The procedures designed to ascertain whether the problem has been appropriately remediated.
- At the end of this remediation period as specified in 'c' above, the TD will provide a written statement indicating whether or not the problem has been remediated. This statement will become part of the fellow's permanent file.
- If the problem has not been remediated, the Training Director may either terminate the position or extend the Remediation Plan.
- The extended Remediation Plan will include all of the information mentioned above and the extended time frame will be specified clearly.
- Place the fellow on suspension
 - which would include removing the fellow from all clinical service provision for a specified period of time, during which the program may support the fellow in obtaining additional didactic training, close mentorship, or engage in some other method of remediation.
 - The length of the suspension period will depend upon the nature of the problem and will be determined with the fellow in writing and will include
 - the actual behaviors or skills associated with the problem
 - the specific actions to be taken for rectifying the problem
 - the time frame during which the problem is expected to be ameliorated
 - the procedures designed to ascertain whether the problem has been appropriately remediated.
 - At the end of this remediation period, the TD will provide a written statement indicating whether or not the problem has been remediated to a level that indicates that the suspension of clinical activities can be lifted. The statement may include a recommendation place the fellow on a probationary status with a Remediation Plan.
- 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 program may be terminated.

- The decision to terminate a fellow's position would be made by the Training Committee and a representative of Human Resources and would represent a discontinuation of participation by the fellow within every aspect of the training program.
- The Training Committee would make this determination during a meeting convened within 10 working days of the previous step completed in this process, or during the regularly scheduled monthly Training Committee meeting, whichever occurs first. The TD may decide to suspend a fellow's clinical activities during this period prior to a final decision being made, if warranted. All time limits mentioned above may be extended by mutual consent within a reasonable limit.

- **Appeal Process**

- If the fellow wishes to challenge a decision made at any step in the Due Process procedures, they may request an Appeals Hearing before the Training Committee. This request must be made in writing to the TD within 5 working days of notification regarding the decision with which the fellow is dissatisfied.
- If requested, the Appeals Hearing will be conducted by a review panel convened by the TD and consisting of the TD (or another supervisor, if appropriate) and at least two other members of the training faculty who work directly with the fellow. The fellow may request a specific member of the training faculty to serve on the review panel. The Appeals Hearing will be held within 10 working days of the fellow's request.
- The review panel will review all written materials and have an opportunity to interview the parties involved or any other individuals with relevant information. The review panel may uphold the decisions made previously or may modify them.
- If the fellow is dissatisfied with the decision of the review panel, they may appeal the decision, in writing, to the Site Director. Each of these levels of appeal must be submitted in writing within 5 working days of the decision being appealed. The Site Director has final discretion regarding outcome.

Grievance Procedures

- Grievance Procedures are implemented in situations in which a psychology fellow raises a concern about a supervisor or other faculty member, trainee, or

any aspect of the fellowship training program. Residents who pursue grievances in good faith will not experience any adverse professional consequences.

- Informal Review

- First, the fellow should raise the issue as soon as feasible with the involved supervisor, staff member, other trainee, or the TD in an effort to resolve the problem informally.

- Formal Review

- If the matter cannot be satisfactorily resolved using informal means, the fellow may submit a formal grievance in writing to the TD. If the TD is the object of the grievance, the grievance should be submitted to the Site Director
- The individual being grieved will be asked to submit a response in writing. The TD (or Site Director, if appropriate) will meet with the fellow and the individual being grieved within 10 working days. In some cases, the TD or The Site Director may wish to meet with the fellow and the individual being grieved separately first. In cases where the fellow is submitting a grievance related to some aspect of the training program rather than an individual (e.g. issues with policies, curriculum, etc.) the TD and the Site Director will meet with the fellow jointly.
- The goal of the joint meeting is to develop a plan of action to resolve the matter. The plan of action will include:
 - the behavior/issue associated with the grievance
 - the specific steps to rectify the problem
 - procedures designed to ascertain whether the problem has been appropriately rectified.
- The TD or Site Director will document the process and outcome of the meeting. The fellow and the individual being grieved, if applicable, will be asked to report back to the TD or Site Director in writing within 10 working days regarding whether the issue has been adequately resolved.
- If the plan of action fails, the TD or Site Director will convene a review panel consisting of themselves and at least two other members of the training faculty within 10 working days. The fellow may request a specific member of the training faculty to serve on the review panel. The review panel will review all written materials and have an opportunity to interview the parties involved or any other individuals with relevant information. The review panel has final discretion regarding outcome.
- If the review panel determines that a grievance against a staff member cannot be resolved internally or is not appropriate to be resolved internally, then the issue will be turned over to Human Resources in order to initiate the agency's due process procedures.