



Clarity Clinic

Therapy Department

Doctoral Training Manual

WELCOME!

Dear Trainee,

Welcome to the Doctoral Psychological Training Department of Clarity Clinic, LLC. The Psychology Fellowship faculty has worked hard to create a training program for you that will be exciting, enriching, and challenging. We expect this training program will produce a unique training experience and we hope, an evidence-based, acknowledgment that throughout your career in psychology, you will look back upon this year fondly and with warm memories.

This Psychology Training Handbook is meant to serve as a supplement to the materials provided to you during New Employee Orientation and Onboarding which includes specific training for your department. The supplementary material provided herein is meant to aid you in your work in providing psychological services of Clarity Clinic, LLC. It provides detailed information regarding both the professional and logistical aspects of your training year.

We hope that your time with us will be professionally rewarding, intellectually stimulating, and fun! On behalf of the entire Clarity Clinic staff, we welcome you and look forward to working with you.

Sincerely,

Clarity Clinic Leadership Team

Table of Contents

[COVID-19 Information](#)

[The Clarity Clinic Doctoral Training Program](#)

[A Brief Overview](#)

[Diversity and Inclusion](#)

[Our Values](#)

[Clarity Clinic Doctoral Training Goals](#)

[Training Objectives](#)

[Training Methods](#)

[Learning Activities & Resources](#)

[Doctoral Internship Training Program Didactic Calendar](#)

[Sample Weekly Schedules](#)

[Evaluations](#)

[Description of Plan and Sequence of Direct Training Experiences](#)

[Description of Training Curriculum](#)

[Due Process Policy](#)

[Grievance Policy](#)

[Expectations for the Doctoral Assessment/ Advanced Therapy Practicum Year](#)

[Expectations for the Doctoral Internship Year](#)

[ETHICAL PRINCIPLES OF PSYCHOLOGISTS](#)

[AND LAWS RELATING TO THE PRACTICE OF PSYCHOLOGY](#)

[CLARITY CLINIC GRIEVANCE POLICIES](#)

[CLARITY CLINIC ETHICAL CODES OF CONDUCT](#)

[Psychology internship due process, appeal, and grievance procedures](#)

[Due process guidelines](#)

[Insufficient performance](#)

[Problem behaviors](#)

[Due process](#)

[Informal review and resolution](#)

[Formal review](#)

[Acknowledgment and no further action](#)

[Informal action plan](#)

[Formal remediation, suspension, or termination](#)

[Formal remediation plans](#)

[Process for implementing formal remediation plans](#)

[Formal remediation plan progress reviews](#)

[Appeal procedures](#)

[Informal grievance procedures](#)

[Formal grievance procedures](#)

[Lack of resolution: Human Resources](#)

COVID-19 Information

While the COVID-19 pandemic has disrupted many functions of daily life, Clarity Clinic provides an essential service to the community by providing mental health treatment. As such, interns will not have disruptions to their on-site training hours and are considered essential employees if a stay-at-home order is put into place. Clarity Clinic is following guidelines recommended by the Centers for Disease Control and the Illinois Department of Public Health.

Several safety precautions have been put into place, although changes to these precautions may be frequent depending on the local infection rate and hospitalization utilization. All staff, patients, and visitors are screened and have their temperature taken before entering any of our sites. All staff, patients, and visitors are required to wear masks. The operations team has increased the frequency and amount of sanitizing throughout the facility. All staff is required to sanitize shared rooms that they utilize.

Physical distancing is utilized whenever possible. At Clarity Clinic this may mean smaller group sizes, attending meetings virtually, or conducting therapy and testing via telehealth.

If a patient refuses to comply with the above guidelines in place, we will offer telemed services as the alternative option. In-office visits will not be accommodated for anyone refusing to comply with our in-office protocols and procedures as this would put our staff and other patients at risk.

The Clarity Clinic Doctoral Training Program

A Brief Overview

Clarity Clinic was established in Chicago, IL in 2015. The practice now has over 90 therapists with varying specialties and areas of expertise.

Doctoral therapy and psychological testing and evaluation training are offered at our Loop and Arlington Heights locations.

We have a team of experts that combine their capabilities ranging from medication management, individual therapy, couples therapy, family therapy, and group therapy. Specialties include anxiety, depression, trauma, self-esteem, LGBTQ+, and more. The integration of therapy for children, adolescents, and adult therapy for individuals, couples, and families combined with psychological evaluation and medication management sets Clarity Clinic apart from other practices in Chicago.

Clarity Clinic offers doctoral-level student internships; externships in psychological testing and advanced therapy practicum placement; and post-doctoral opportunities.

The Clarity Clinic Doctoral Training Program provides the knowledge and skills necessary for diagnosis, assessment, and intervention with a variety of patients in a diverse outpatient clinical setting. Psychology trainees have the opportunity to provide individual and group therapy, family therapy, training, consultation, evaluation, and assessment from the perspective of evidence-based treatment. Clarity Clinic offers psychotherapy services to children, adolescents, adults, and geriatric patients. In addition, Clarity Clinic offers psychological testing/assessment for children, adolescents, adults, and geriatric populations.

The program emphasizes a practitioner-scholar model and closely integrates research with extensive clinical practice. Empirically based psychotherapy treatment models include but are not limited to: Dialectical Behavioral Therapy, Acceptance and Commitment Therapy, Cognitive Behavioral Therapy, Existential-Humanistic, and more. Trainees are trained in the theory, technique, and implementation of different therapy modalities. Doctoral Level trainees also gain and enhance competence in comprehensive and brief psychological assessments; providing administration, scoring, and interpretation of various cognitive and personality measures. In addition, they

provide consultation while working within a multidisciplinary team. Trainees are provided with didactic seminars, weekly individual and weekly group supervision, and have the opportunity to present clinical cases and teach seminars on various topics. Throughout the year, trainees are trained to display competence in professional conduct, ethics, and legal matters, and develop the necessary skills to become a competent independent clinicians.

Diversity and Inclusion

Clarity Clinic's mission is to thoughtfully guide the whole person on their journey to find clarity and mental wellness by providing exceptional holistic care. We strive to create a culture in which all races, ethnicities, religions, sexual orientations, physical abilities, and socio-economic backgrounds can meet, share, learn, and flourish in an accepting environment.

By creating platforms and opportunities that allow us to come together, we can begin to know and understand each other. And through better understanding, we can effectively meet the needs of our diverse patients and deliver on our mission.

Our Values

Clarity Clinic's values are to inspire growth, empower change and find purpose by making a difference every day, being accountable, challenging and collaborating, embracing change, and enjoying the moment.

Make A Difference Every Day: Our passion is RELENTLESS.

We constantly push ourselves to be our best and arrive every day inspired to make an impact through our talents, passion, and hard work. We value those who speak thoughtfully, encourage and respect the diversity of opinion and listen carefully with an open mind. We have an opportunity to make a difference for so many—our patients, our communities, our teammates, our partners, ourselves—we must seize it

Be Accountable: We do the right thing because there is no alternative.

Given our responsibility to each other and our patients, behaving ethically is a critical—and elemental—part of our success. We take ownership of the quality of our work but also hold each other accountable for what we deliver as a team. When things don't go as planned, we proactively use it as an opportunity to share and learn.

Challenge and Collaborate: Seek first to understand, then be understood.

We welcome hard conversations and do not make assumptions – we ask and answer questions. We rely on each other to find solutions. We are the toughest critics, the biggest challenges, and the loudest supporters of our individual and collective work. We want to inspire each other to achieve great things. As each individual grows, so does the whole organization.

Embrace Change: We will continuously evolve and improve.

We seek out, embrace, and get (un)comfortable in knowing that if we are not continuously changing, evolving, and improving—we're falling behind.

Enjoy the Moment: Find peace and joy in the journey

Be Present. Pausing to ensure we are finding peace and joy along our journey is an invaluable component to sustainable and lasting success. This is not just our job; it's our calling, and we love it!

Locations

Clarity Clinic has five locations across the Chicagoland area with plans for future expansion. Within each location are numerous providers who specialize in a variety of treatment areas such as addiction, depression, eating disorders, anxiety, and couples therapy. Our trained specialists offer services for individuals, groups, couples, families, and adolescents. Clarity Clinic strives to provide a compassionate and healing environment to promote a healthy and mindful lifestyle for our patients.

Clarity Clinic's Doctoral Training Program is offered at our Loop and Arlington Heights locations

The Loop

333 N Michigan Ave #1400,
Chicago, IL
P: (312) 815-9660
F: (312) 235-1999

Arlington Heights

2101 S Arlington Heights Rd #116,
Arlington Heights, IL
P: (847) 666-5339
F: (847) 637-5479

Description of Doctoral Training Program

Training Director/ Primary Supervisor: Casey Noreika, PsyD- Loop Location

Primary Supervisor: Kailyn Bobb, PsyD- Arlington Heights Location

Primary Supervisor: Michael Colombatto, PsyD- Loop and River North Location

Doctoral interns and practicum students are afforded the opportunity to provide therapy and psychological assessment services at Clarity Clinic.

Psychological testing is conducted at our Loop and Arlington Heights outpatient clinics with patients for whom psychological testing has been ordered by psychiatrists, physicians assistants, and outside providers. All psychological testing cases are supervised by a licensed clinical psychologist who evaluates the doctoral internships and practicum students in the areas of clinical interviewing, administration, scoring, report writing, and feedback skills. Our training provides a range of psychological assessments, incorporating a variety of cognitive, objective, and projective personality measures, and neuropsychological assessments. In addition to these measures, Clarity Clinic also offers more specialized measures, including mood and personality inventories, developmental/behavioral assessments, executive functioning assessments, and attention-deficit/hyperactivity disorder assessments. Doctoral Interns average 15 assessments in the training year. Assessment practicum students average 10-12 assessments in the training year.

Doctoral Interns and Advanced Therapy Practicum students can do individual, family, group, multi-family therapy/groups, psycho-educational training, and work within an interdisciplinary team. They are supported and work hand in hand with psychiatrists, psychologists, physician assistants, and other staff members. These students will also be exposed to a broad range of assessment and therapy opportunities.

Clarity Clinic Doctoral Training Goals

The goal of our doctoral training program is to provide doctoral-level students with the foundational clinical skills needed to become independent practitioners. Clarity strives to ascertain the following goals that demonstrate competency in the field of clinical psychology:

1. Professionalism

Psychological assessment interns/externs and advanced therapy externs will exhibit behavior and conduct that reflects the values and attitude of the field of psychology, in addition, to independently addressing and resolving challenging situations in a professional manner.

2. Individual and Cultural Diversity

Psychological assessment interns/externs and advanced therapy externs will demonstrate awareness, sensitivity, and empathy when working professionally with individuals, groups, and communities with diverse backgrounds. The externs will acknowledge and incorporate culturally diverse values of patients into their assessment and treatment planning.

3. Ethical Legal Standards and Policy

The interns and externs will demonstrate knowledge and application of the APA Ethical Principles and Code of Conduct and other ethical, legal, and professional standards and guidelines relevant to the field of psychology.

4. Relationships

The interns and externs will develop the skills necessary to maintain professional relationships with patients, therapists, and other treatment providers. They will also have the ability to foster professional relationships throughout the community.

5. Evidence-Based Practice

The interns and externs will develop and apply their knowledge of evidence-based, practice, including empirical bases of interventions (DBT, ACT, CBT, etc.)

6. Intervention

The interns and externs will gain the ability to develop and modify treatment plans, conceptualize cases, and evaluate the treatment progress of patients as needed. Psychological assessment interns and externs will develop skills to provide treatment recommendations based on the results of psychological testing.

7. Consultation and Interdisciplinary Systems

By the end of the year, the interns and externs will demonstrate awareness of multiple and differing worldviews, roles, professional standards, and contributions across roles in the healthcare system. Interns and externs will demonstrate the ability to participate in and initiate interdisciplinary

collaboration towards shared goals.

8. Reflective Practice/Self-Assessment/Self-Care

By year's end, the intern and extern will demonstrate reflectivity both during and after professional activities, act upon reflection, and use the self as a reflective tool. Interns and externs will be able to self-monitor and self-assess at the level of an entry-level provider, acting on needs for self-care appropriately, and seeking supervision when needed.

Training Objectives

1. Conduct comprehensive clinical interviews including establishing rapport, history taking, behavioral observations, and Mental Status Examinations and psychodiagnostic assessments to determine individual's immediate needs and make appropriate treatment recommendations
2. Become familiar with, and skilled in, employing the DSM-V, obtain information from multiple collateral resources (e.g. family, friends, medical records), and integrate into the treatment plan.
 - a. Learn to select and administer appropriate test instruments
 - b. Consult with psychiatrists and therapists

Training Methods

Training methods include direct observations, weekly group supervisions, weekly individual supervision, live supervision, and consultation that is available on-demand. Therapists will be trained in CBT, DBT, ACT, or psychodynamic models of interventions depending on their areas of interest and primary supervisor.

For testing, trainees will be trained to utilize the Therapeutic Assessment ("TA") model to help people understand themselves better and find solutions to the persistent challenges that they have been experiencing. Not only is the goal to assist with diagnostic clarity, treatment planning, and to evaluate the effectiveness of certain interventions; we utilize TA to facilitate positive changes in clients.

Trainees will be given the opportunities to observe and administer assessments, write comprehensive reports utilizing current research to inform their diagnosis, provide treatment recommendations, provide consultations to a multidisciplinary team on findings, and provide comprehensive and coherent feedback to patients.

Learning Activities & Resources

1. Participate in patient-centered, inpatient interdisciplinary care conferences, including chart documentation and supervision notes.
2. Conduct individual, group, and family treatment sessions from a Recovery and Medical model perspective and comply with Legal/Ethical/Clinic standards-doctoral interns and advanced therapy
3. Become familiar with empirically-based research and learn/utilize Cognitive Behavioral Therapy, Didactical Behavioral Therapy, and Acceptance and Commitment Therapy (among others) in an individual and group format
4. Complete psychological assessments - doctoral-level interns and assessment externs. Current assessments used by Clarity Clinic include but are not limited to WAIS-IV, WISC-V, ADOS-2, Vineland, BASC-3, DKEFS, NEPSYS-II, Conners 3, Brief-A, Brief-2, WCST, EDI, CPT3, CATA, Rorschach, TAT, Roberts2, MMPI2, PAI, PAI-A, WIATIII, WRAML2
5. Develop appropriate treatment recommendations and share them with referring provider
6. Interns also have the opportunity to rotate and co-lead at least one group per evaluation period.

Other available resources include:

1. Access to online psychological testing scoring and interpretation websites
2. Private office space(s) with a computer, printer/scanner.
3. Operational/ administrative and IT support
4. Weekly group supervisions
5. Weekly individual supervision
6. Live supervision
7. Consultation that is available on-demand

Doctoral Internship Training Program Didactic Calendar

Intern Didactic:

Description: Once a month, multi-hour, group training led by a multidisciplinary team (including psychologists, psychiatrists, physician assistants, licensed clinical social workers, and licensed clinical professional counselors).

Commitment: Doctoral Interns are required to attend each monthly Intern Didactic. Exceptions must be approved by your Primary Supervisor.

Meeting Frequency: Last Friday of each month; Minimum hours scheduled for training: 5

Topics:

Professionalism- Exhibiting behavior and conduct that reflects the values and attitude of the field of psychology, in addition, to independently addressing and resolving challenging situations in a professional manner.

Individual and Cultural Diversity- Demonstrating awareness, sensitivity, and empathy when working professionally with individuals, groups, and communities with diverse backgrounds; and acknowledging and incorporating culturally diverse values of clients into their assessment and treatment planning.

Ethical Legal Standards and Policy- Demonstrating knowledge and application of the APA Ethical Principles and Code of Conduct and other ethical, legal, and professional standards and guidelines relevant to the field of psychology

Relationships - Developing the skills necessary to maintain professional relationships with clients, therapists, and other treatment providers; and fostering professional relationships throughout the community.

Evidence-Based Practice - Developing and applying knowledge of evidenced-based practice, including empirical bases of interventions (DBT, ACT, CBT, etc.)

Intervention - Gaining the ability to develop and modify treatment plans, conceptualize cases, and evaluate the treatment progress of clients as needed, and develop skills to provide treatment recommendations based on the results of psychological testing

Assessment/Evaluation: Ability to assess, diagnose and conceptualize problems and issues of individuals, groups, and/or organizations: Diagnostic and conceptualization skills, formal assessment skills, Interview Tests/Measurements, Integration Report writing/Communication skills. Demonstrating the skills necessary to conduct a clinical interview, appropriately select and apply evidence-based assessment methods, collect and integrate data, and summarize and report data efficiently that is appropriate and culturally sensitive.

Consultation and Interdisciplinary Systems- Demonstrating awareness of multiple and differing worldviews, roles, professional standards, and contributions across roles in the healthcare system and demonstrating the ability to participate in and initiate interdisciplinary collaboration towards shared goals.

Reflective Practice/ Self-Assessment/Self-Care- Demonstrating reflectivity both during and after professional activities, acting upon reflection, and using the self as a reflective tool. Being able to self-monitor and self-assess at the level of an entry-level provider, acting on needs for self-care appropriately, and seeking supervision when needed.

Clinical Modalities/Topics Didactic

Description: Once a month one hour didactic to discuss various clinical modalities and topics. Example topics include series on DBT, CBT, REBT, ACT and may also include trainings on Engagement, Confidentiality, Transitions/ Levels of Care Referrals, Crisis Management.

Meeting Frequency: 3rd Tuesdays of each month at 1 PM

Eating Disorders Didactic

Description: Twice a month one hour didactic to discuss symptoms of eating disorders, different diagnoses, clients with subthreshold ED or disordered eating patterns, body image issues, treatment approaches, the conceptualization of ED cases, and to review and share helpful resources

Meeting Frequency: 4th Tuesdays at 1 PM

Trauma-Informed Didactic

Description: Once a month one hour didactic on types of trauma (acute, complex, and chronic), identifying symptoms of trauma and long-lasting effects, identifying somatic responses to trauma.

Meeting Frequency: 1st Wednesday of each month at 12 PM

Diversity and Cultural Awareness Didactic

Description: Once a month one-hour didactic group discussing the differences between people (race, ethnicity, religion, sexuality, genders, socioeconomic backgrounds, political affiliations) and different treatment styles/modalities to address various cultural norms and values.

Meeting Frequency: 2nd Wednesday of each month at 12 PM

Couples Counseling Didactic

Description: Once a month one-hour didactic group to discuss integrative therapeutic approaches; cognitive-behavioral, solution-focused, emotionally focused, and Gottman approach to treatment. Review and share helpful resources.

Meeting Frequency: Last Wednesday of every month at 12 PM

Topics:

Identifying the stages of couple life and the critical points and issues in couple life that precipitate therapeutic intervention

Identifying and practicing the use of therapeutic approaches in counseling couples

Assessing and treating couples through a specific therapeutic orientation

Identifying challenging couple dynamics (anger, violence, affairs) and selecting appropriate treatment modalities

Note writing and billing questions

Substance Use Disorders Didactic

Description: Once a month one-hour didactic group discussing screening tools, SBIRT, Med Asst Treatment, Naloxone, Suboxone, Methadone, Naltrexone, theories on substance misuse, etc

Meeting Frequency: 3rd Thursday of each month at 11 AM

Exposure and Response Prevention (ERP) Consultation Group

Description: Twice a month one-hour didactic group focused on learning basic principles of ERP, adapting ERP more broadly for any avoidance-based behavior (with or without OCD diagnosis), and learning techniques to assist clients with exposures inside and outside of the therapy session.

Meeting Frequency: Every other Friday from 2-3 PM

Sample Weekly Schedules

For testing:

12-15 hours of direct patient hours

12-15 hours of clinical interpretation, clinical decision making, treatment planning, report writing, note writing

1-2 hours of consultation with other providers

1 hour of individual supervision

1 hour of group supervision

1-2 hours of didactics

1 hour of staff meetings

1-hour various administrative duties

For therapy:

26 direct patient hours

4-8 hours of indirect patient hours

1 hour of individual supervision

1 hour of group supervision

1-2 hours of didactics

1 hour of staff meetings

1-hour various administrative duties

Evaluations

The Process of Evaluation will be prompted by a regular yearly schedule and may be prompted at other times at the supervisor's discretion. Trainees will be evaluated

by the primary supervisors using the forms provided by the trainees' school. Interns will be evaluated three times per training year.

Internship Competency Evaluation

Interns are assessed for competency triannually. Each intern's progress in the program is discussed at the Internship Training Meeting which takes place in four-month intervals after the start of the internship year. In this meeting, psychologist supervisors rate interns on each of the benchmarks outlined in the goals of internship on a 5 point Likert scale (1=not at all meeting competency description, 5= very much meeting competency description). Interns will be rated by a minimum of two psychologists, the primary supervisor, and the secondary supervisor.

See the sequence of evaluations below:

Evaluation 1 (Beginning of December):

Minimal Standards: The intern must not receive any competency rated a value of 1 (not at all competent). The intern must not receive more than five total competencies rated a value of 2 (somewhat competent). The intern must not receive more than five separate competencies rated with a value of 3 regardless of the number of supervisors rating the same competency with that value. That is, if two supervisors rate the same item with a value of 3, it only counts as one rating towards those tallied in the final count of items rated a value of 3. Among all the competencies rated, the intern must receive a minimum of 25% rated at 4 (mostly competent) or 5 (very competent).

Evaluation 2 (Beginning of April)

Minimal Standards: The intern must not receive any competency rated a value of 1 (not at all competent). The intern must not receive more than four total competencies rated a value of 2 (somewhat competent). The intern must not receive more than four separate competencies rated at the competency value 3 regardless of the number of supervisors rating the same competency with that value. That is, if two supervisors rate the same item with a value of 3, it only counts as one rating towards those tallied in the final count of items rated a value of 3. Among all the competencies rated, the intern must receive a minimum of 50% rated at 4 (mostly competent) or 5

(very competent).

Final Evaluation 3 (End of July)

Minimal Standards: The intern must not receive any competency rated a value of 1 (not at all competent). The intern must not receive more than three total competencies rated a value of 2 (somewhat competent). The intern must not receive more than three separate competencies rated at the competency value 3 regardless of the number of supervisors rating the same competency with that value. That is, if two supervisors rate the same item with a value of 3, it only counts as one rating towards those tallied in the final count of items rated a value of 3. Among all the competencies rated, the intern must receive a minimum of 75% rated at 4 (mostly competent) or 5 (very competent).

***It is the duty of the Director of Training to facilitate providing the school's graduate training director with feedback concerning the intern's progress in the training program a minimum of two times a year.*

Description of Plan and Sequence of Direct Training Experiences

Interns and externs acclimate to training programs in a clear sequence of events. Training always begins with orientation. Interns are matched up with a primary supervisor in their program. Their supervisor assists the intern/extern with learning the medical record system and understanding the schedule and daily tasks of the program. The intern/extern then begins shadowing the clinical work of their primary supervisor. Intern/ extern and supervisor will eventually phase into the supervisor shadowing the intern/extern's work.

Along with two hours of individual supervision from licensed clinical psychologists, the doctoral intern will also be shadowed for the group, individual, testing/assessment, and family sessions by their specific supervisors. Eventually, the intern can provide services for cases independently with their supervisors signing notes and closely supervising outside of sessions. As the intern becomes more competent (as evidenced by evaluations mentioned above), their caseload and responsibilities rise. As interns take on their goal number of cases, they will be

challenged with case presentations they have not previously worked with to challenge their clinical skills.

Description of Training Curriculum

At Clarity Clinic, doctoral interns are exposed to a broad range of assessment opportunities. Each patient who presents for services meets with a clinician who performs an in-depth psychosocial assessment which is then used in conjunction with the initial assessment and potential psychiatric evaluation to formulate an individualized treatment plan. Clinicians assess patients on an ongoing basis to determine recommendations.

Other assessments expected include trauma assessment, self-injury assessment, substance abuse assessment, suicide assessment/ Safet-T assessment, PHQ-9, GAD, WAIS-IV, WISC-V, ADOS-2, Vineland, BASC-3, DKEFS, NEPSYS-II, Conners 3, Brief-A, Brief-2, WCST, EDI, CPT3, CATA, Rorschach, TAT, Roberts2, MMPI2, PAI, PAI-A, WIATIII, WRAML2.

Assessment Practicum students and Doctoral Interns are afforded the opportunity to provide psychological assessment services. Psychological testing is conducted at our Arlington Heights and Loop locations. All psychological testing cases are supervised by licensed clinical psychologists in our psychological assessment department who evaluate the assessment practicum students and doctoral interns in the areas of clinical interviewing, administration, scoring, report writing, and feedback skills. Our training provides a range of psychological assessments, incorporating a broad variety of neuropsychological, intellectual, and object, and projective personality measures. Additionally, more specialized measures are also utilized including mood and personality, executive functioning assessments, developmental/behavioral assessments, and attention deficit-hyperactivity disorders assessments.

Doctoral interns and Advanced Therapy practicum students can do individual, family, group, multi-family group, psycho-educational training, and case management in an interdisciplinary and holistic private practice. They are supported by and expected to work hand in hand with psychologists, clinical therapists, psychiatrists, and other support staff.

Doctoral interns are encouraged to develop resources such as manuals for

orientation, training, and administrative responsibilities; develop a group counseling or didactic seminar with the assistance of Clarity Clinic staff; or create/ develop a passion project that is designed, built, and implemented for patients, i.e., behavioral interventions for parents of children with ADHD

How the Therapy Department Training Program is Integrated into the Larger Organization

The Therapy Department training program is crucial to assisting Clarity Clinic with providing premier psychological services to its consumers. Not only are interns and externs a vital part of the interdisciplinary treatment team, but they bring knowledge of current theory and advances in the field of psychology. Interns and externs are encouraged to share their knowledge with staff via training throughout the year.

Doctoral Training Staff

Director of Clinical Training

The Director of Clinical Training (DCT) is responsible for overseeing the activities of doctoral students while at Clarity Clinic. Primary supervisors of the Doctoral Training work in conjunction with the DCT to organize and coordinate the activities of doctoral students.

The DCT's responsibilities include the following:

- Direct and organize the training program and its resources
- Oversee the selection of doctoral interns
- Monitor and evaluate the training program's goals and activities
- Document and maintain intern training records
- Provide at least 2 hours of direct supervision of doctoral interns to oversee their caseload and to discuss professional comportment and activities.
- Provide and oversee 2 hours of didactic training for the doctoral training program each week
- Provide and oversee 1 hour of group supervision weekly
- To oversee at least two evaluations per academic year to the universities for each doctoral intern.
- To provide training and supervision in empirically supported treatment

models.

- To coordinate with the various site supervisors regarding the doctoral intern's activities
- To assure each doctoral intern has the opportunity to meet all requirements for their internship
- To communicate with the Director of Clinical Training from each student's university to discuss their progress, and (if necessary) any disciplinary actions.
- To follow and carry out the due process established for doctoral interns if disciplinary actions are necessary.

Doctoral Training Supervisors

Clarity Clinic's Doctoral Training Supervisors are all licensed clinical psychologists, and their duties include the following:

- To provide all doctoral interns enrolled in the Doctoral Training Program a second weekly one-hour supervision session to oversee their caseload and to discuss professional comportment and activities
- To run the weekly case conceptualization group supervision group for all doctoral interns focusing on the empirically supported treatment in their area of expertise
- To present didactic training topics, focusing on their areas of expertise
- Assist in facilitating group supervision separate from the 2 hour didactic
- To report any concerns with doctoral interns to the Director of Clinical Training.

While licensed clinical psychologists provide all formal supervision, interns may receive more informal supervision from other members of the clinical team as needed. All sites at Clarity Clinic are staffed with Licensed Clinical Professional Counselors and Licensed Clinical Social Workers.

Supervision Philosophy

Each supervisor has the following general responsibilities of collaboratively establishing training goals with each supervisee, completing evaluations of the supervisee's progress, provide direct feedback concerning the supervisee's professional development and clinical abilities in a constructive manner, and being a professional role model for upholding and being in accordance with ethical and professional guidelines outlined by the APA.

Supervision and Didactics

Under ACEPT and APPIC standards, students will receive the following supervision and didactics:

Diagnostic/Assessment Students

- Individual: 1 hour- scheduled with an individual supervisor
- Group: 1 hour- scheduled with group supervisor and fellow practicum students
- Didactic 1 hour- scheduled weekly

Advanced Therapy Practicum Students

- Individual: 1 hour- scheduled with an individual supervisor
- Group: 1 hour- scheduled with group supervisor and fellow practicum students
- Didactic 1 hour- scheduled weekly

Internship Students

- Individual: 2 hours- scheduled separately with individual supervisor(s)
- Group: 1 hour- scheduled with group supervisor and fellow interns
- Didactic 2 hour- scheduled weekly

It is the responsibility of the student to manage their time so that they are prompt to all supervision and didactics, which includes managing clinical work, transportation, etc. It is the responsibility of the supervisor to work with the student during their free time to schedule mandatory training. Individual supervision must be conducted by a licensed clinical psychologist. Supervision should focus on clinical growth as well as the students' professional development. It is up to the supervisor to provide a secondary supervisor in the event they cannot conduct supervision for that week. Supervision notes will be dated, signed, and maintained in the student's file. Any concerns about the quality or quantity of supervision should be addressed with the Director of Training immediately.

Training Opportunities

Clarity Clinic has a strong commitment to continuing education. Training is provided in specialty areas throughout each month and interns/externs are encouraged to take advantage of such offerings. Additionally, there is a wealth of educational opportunities throughout the metropolitan Chicagoland area, and interns/externs will be encouraged to take advantage of some of these opportunities with the understanding that it will not interfere with their training and/or direct patient care.

In addition to the opportunities to attend the aforementioned professional seminars presented at Clarity Clinic, the therapy department offers weekly didactic seminars. The

seminars offer an educational approach to clinical training and theoretical knowledge on a specific topic. Didactics aims to build on previous training and offer clinicians new strategies or scientific research to build off of in practice. The didactic structure includes both a learning and case conceptualization component to apply new knowledge in real-time. Didactics will include (but are not limited to) discussion and education on the newest empirical research, education on a topic (symptoms, prognosis, treatments, specific skills training, etc), exploring trends within various populations, as well as cultural, ethical, and legal considerations. Currently, we have 4 weekly didactics covering the following topics: Substance Use, Trauma, Eating Disorders, and Clinical Modalities, which focuses on various topics including, but not limited to: Suicide Assessments, Billing, Motivation Interviewing, and Conducting an Initial Intake.

Scheduling/Tracking Hours

Assessment/Advanced therapy practicum students will be on site 24 hours a week (3 days total). All requests for days off should be given to the clinical supervisor a month in advance. Time off requests will be honored based on staffing needs. It is the responsibility of the student to ensure proper communication with staff regarding the care of patients.

Doctoral interns will be on site 40 hours a week (5 days total). All requests for days off should be given to the clinical supervisor a month in advance. Time off requests will be honored based on staffing needs. It is the responsibility of the student to ensure proper communication with staff regarding the care of patients.

Cosigning Notes

Notes are cosigned by the assigned licensed clinician within 48 hours of the note being written. The clinical supervisor is responsible for the quality of services offered and should address any issues with the student immediately. If the supervisor is going to be out of the office, it is their responsibility to communicate to both the student and the covering supervisor when coverage is needed for cosigning. Notes must be cosigned by a clinician who is present on-site and cannot be sent to a supervisor out of the office.

Maintenance of Student Files

All trainee files are maintained either by the Director of Training or the Primary Supervisor. It is the responsibility of the student to keep up with all required training and competencies assigned in their program. It is the responsibility of the supervisor to maintain files equivalent to all other staff in the program in which the student is training. All files including supervision notes are maintained for accreditation purposes.

Due Process Policy

The Clarity Clinic Doctoral Training program acknowledges the rights of interns, externs, supervisors, and staff to be treated with courtesy and respect. Clarity Clinic expects that all interactions among interns, externs, training supervisors, and staff be collegial and conducted in a manner that reflects the highest standards of the profession.

To ensure that doctoral interns, assessment externs, and advanced therapy externs are informed of these principles, and the protocols for recourse in the event that problems arise, the *Due Process Procedure* is discussed at the time of interviews and reiterated during the orientation process. During the initial weeks of orientation, interns and externs receive copies of the program's *Due Process Procedure*, and this policy is reviewed with the Director of Training, accordingly. Interns and externs are encouraged to share with the Director of Training any concerns that may arise regarding staff/intern relationship and are encouraged to speak with the Director of Therapy Operations and Compliance should they experience concerns related to the Director of Training.

The *Due Process Procedure* is intended to provide trainees and training staff with a systematized method for both defining and addressing problematic behavior in a trainee. This policy includes a list of intern rights and responsibilities, a definition of problematic behavior, a listing of due process procedures, and remediation and sanction alternatives utilized in the event that problematic behavior is identified in a trainee.

Grievance Policy

The Grievance policy is also discussed with doctoral interns, assessment externs, and advanced therapy externs at the time of the interview and reiterated during the orientation process. Doctoral interns receive copies of the program's Grievance policy during orientation and this policy is reviewed with the Director of Training.

Our Grievance Policy is intended to provide all trainees with an internal process by which they may receive a full and fair hearing on any complaint or unresolved

problem pertaining to their training experience. This formal procedure, which may be activated at the request of a Trainee, may be used only when differences of opinion are not resolved through an informal grievance process.

The training department at Clarity Clinic encourages individuals to work out concerns or complaints on an informal basis, whenever possible. Procedures for formal grievance should be used if informal discussions and/or mediation does not resolve differences, or when a trainee wishes to formally register a complaint. When a trainee disagrees with a training staff member's evaluation, or with any staff member's conduct, and the trainee is unable to achieve resolution through informal discussing or mediation, the trainee may initiate a formal internal grievance procedure to address this disagreement or complaint.

Expectations for the Doctoral Assessment/ Advanced Therapy Practicum Year

The graduate program attended by the applicant is required to have an Active Affiliating Agreement with Clarity Clinic.

- Applicants must commit to the minimum time requirements of 10 months. 24 hours per week with a total of 1200 hours. The hours may exceed the minimum number of hours required by the applicant's school.
- Assessment/Advanced therapy practicum students are required to provide psychological testing, clinical interviewing, administration, scoring, report writing, and feedback sessions. Assessment/Advanced therapy practicum students are required to attend psycho-educational training and work within an interdisciplinary team.
- Advanced therapy practicum students are required to provide individual, family, group, and multi-family therapy.
- Assessment externs will be required to complete a minimum of 10 integrative batteries during the training year.
- Diagnostic/Assessment Students
 - Individual: 1 hour- scheduled with an individual supervisor
 - Group: 1 hour- scheduled with group supervisor and fellow practicum students
 - Didactic 1 hour- scheduled weekly

Advanced Therapy Practicum Students

- Individual: 1 hour- scheduled with an individual supervisor

- Group: 1 hour- scheduled with group supervisor and fellow practicum students
 - Didactic 1 hour- scheduled weekly
- Applicants must obtain NPI before starting the internship

Expectations for the Doctoral Internship Year

The graduate program attended by the applicant is required to have an active Affiliating Agreement with Clarity Clinic.

- Applicants need to have completed their practicum placements (minimally one year of diagnostic and one year of clinical).
- Applicants need to commit to the minimum time requirements of twelve months, 40 hours per week. Successful completion of the program is equal to 2,000 hours. Interns are provided with paid time off accrual equal to approximately 15 days during the training year and may need to extend their training past twelve months to meet the 2,000-hour requirement. The hours of the internship may exceed the minimum number of hours required by your school.
- Approximately 20 hours per week will be in direct patient care.
- Case management, psychosocial evaluation, treatment plan development and review, and individual sessions and family sessions (when applicable).
- Participate in meetings and supervisions as a member of the therapy department which includes other mental health providers (when applicable)
- Interns will be required to complete a minimum of 15 integrative batteries during the training year.
- Interns will be required to present a 1-hour professional-level presentation during the didactic seminar.
- Internship Students
 - Individual: 2 hours- scheduled separately with individual supervisor(s)
 - Group: 1 hour- scheduled with group supervisor and fellow interns
 - Didactic 2 hour- scheduled weekly
- Applicants must obtain NPI before starting the internship

Requirements for Application into the Doctoral Internship, Doctoral Assessment and Advances Therapy Practicum Training Program

- Cover Letter
- CV
- 3 Letters of Recommendation
- Transcript
- Writing Sample (for Doctoral Assessment and Doctoral Internship Applicants Only)

Email Application Materials for Doctoral Assessment and Doctoral Internship to:

doctoraltrainingprogram@claritychi.com

ETHICAL PRINCIPLES OF PSYCHOLOGISTS

AND LAWS RELATING TO THE PRACTICE OF PSYCHOLOGY

You must conduct yourself in an appropriate, professional, and ethical manner in your interactions with patients and staff. The American Psychological Association last published its Ethical Principles of Psychologists and Code of Conduct in 2002. It is the responsibility of psychologists, and those in training at Clarity Clinic, to have a working knowledge of these principles and to ensure that they guide your professional behavior. This document can be viewed at: <http://www.apa.org/ethics/code2002.pdf>. Please familiarize yourself with all of the principles.

As a professional in training you must familiarize yourself with the following documents as well:

- General Guidelines for Providers of Psychology Services (American Psychological Association. (1987). General Guidelines for Providers of Psychology Services. *American Psychologist*.712-723.
- APA's Standards for Educational and Psychological Tests (<http://www.apa.org/science/standards.html>)
- Guidelines for Psychotherapy with Lesbian, Gay, & Bisexual patients (<http://www.apa.org/pi/lgbcc/guidelines.html>)

Questions:

Please feel free to contact doctoraltrainingprogram@claritychi.com if you have any questions or concerns.

CLARITY CLINIC GRIEVANCE POLICIES

POLICY: Employee Grievances

It is the policy of Clarity Clinic to assist employees in resolving conflicts between themselves. While we certainly hope that these will be infrequent, we recognize that they do occur. Our goal is to support a respectful cohesive team and to that end, we expect each employee to maintain the professionalism that supports a safe and healthy working environment.

PROCEDURE:

1. We encourage employees to try to resolve issues between themselves and to communicate in a respectful manner that will facilitate a timely and healthy resolve.
2. If it is not possible to have a comfortable or productive conversation concerning the grievance/issue, the staff's supervisor and/or the site-specific Director of Clinical Therapy may be invited to mediate.
3. If the employee prefers, they may submit a grievance in writing to the appropriate staff supervisor and/or the site-specific Director of Clinical Therapy, who will endeavor to resolve the grievance quickly.

Appeals Procedure:

If the employee is not satisfied with the outcome, he/she may appeal to **Human Resources** and the Medical Director, Director of Operations, or Director of Therapy Operations and Compliance (based on department).

Procedure for Ethical Violations:

1. Ethics violations should be reported in writing immediately to **Human Resources** and the Director of Operations, Director of Therapy Operations and Compliance, or the Chief Medical Officer (based on department).
2. All reports of violations will be investigated and will be responded to by the appropriate person promptly.
3. A staff member may report an ethics violation without fear of retaliation.

CLARITY CLINIC ETHICAL CODES OF CONDUCT

It is the policy of Clarity Clinic that all full and part-time employees, contractors, students, volunteers (collectively referred to as “personnel”), and members of the governing authority are expected to perform their designated functions in a manner that reflects the highest standards of ethical behavior. The ethical standards contained in this policy shape the culture and norms of Clarity Clinic’s administrative operations and clinical practices, and both personnel and members of the governing authority will be held fully accountable to these standards. In addition to the specific guidelines contained in the policy, professionals are expected to follow the ethical standards required by their specific licensing, certification boards, or other job description.

PURPOSE:

The Code of Conduct Policy is to ensure that the actions of all personnel reflect a competent, respectful, and professional approach when serving consumers, their families, and/or representatives, working with other providers, and interacting in the communities we serve. It is expected that personnel and members of the governing authority will perform their duties in compliance with all federal, state, and local regulations following guidelines outlined in this policy. Violation of guidelines within the Code of Conduct Policy can lead to disciplinary actions, including termination of employment.

PROCEDURES:

A. Professional Conduct:

- 1) Personnel will respect the rights of persons served by demonstrating full integration of the guidelines contained in the Rights and Responsibility Policy. This includes the right of the consumer to make autonomous decisions and fully participate in every aspect of the service delivery process.
- 2) Personnel will provide services in a manner that fully respects the confidentiality of consumers, by demonstrating a functional knowledge of confidentiality policies and guidelines.
- 3) Personnel will be fair and honest in their work. They will not exploit, mislead, or violate the rights of persons served. All personnel will be faithful to their contractual obligations, their professional boundaries, corporate responsibilities, and their word.
- 4) To prevent and avoid unethical conduct, personnel will consult with, refer to, and participate in supervision or treatment team meetings with other professionals.

5) Personnel will clarify their professional role or license details, training, and experience, treatment obligations, and be accountable for upholding professional standards of practice.

B. Personal/Professional Conduct:

1) All prior personal relationships between staff and persons engaging in services, shall be disclosed by personnel and may be subject to review by the appropriate supervisor.

2) Personnel will limit relationships with persons served to their defined professional roles.

3) Personnel will not establish ongoing personal or business relationships with consumers receiving services.

4) Personnel will conduct themselves in a professional, ethical, and moral manner based on the values of the organization.

5) Sexual relationships between personnel and persons served are never appropriate. Sexual relationships include but are not limited to the following: engaging in any type of sexual activity, flirting, advances and/or propositions of a sexual nature, comments of a sexual nature about an individual's body, clothing, or lewd sexually suggestive comments.

6) Personnel will not accept gifts of value from a consumer, family member, or stakeholder, and cannot accept personal favors or benefits that may be reasonably construed as influencing their conduct or creating an imbalance of power.

7) Personnel will not take, borrow or remove agency property or personal property not belonging to them from the agency without the permission of the property owner.

8) Personnel will not solicit persons served for personal causes including but not limited to soliciting funds for a personal or community cause, political fundraising, selling candy and cookies for their children, friend's children, or other such fundraising items for the personnel's children.

9) Personnel involved with clinical care will not serve as a witness of any document for that patient including but not limited to: the power of attorney, advance directives, or guardianship.

C. Business Practices:

- 1) Clarity Clinic will utilize the Chief Operating Officer (or designated staff) to ensure that it ethically conducts business and ensure that any questionable business practices are thoroughly investigated utilizing the investigation procedures outlined below.
- 2) All financial practices, facility development, information technology, advocacy efforts, corporate citizenship, and data collection and management practices shall comply with local, state, and federal law and guidelines. They will align with standard field operations.

D. Marketing Practices:

- 1) Clarity Clinic will conduct marketing practices honestly and factually. Marketing materials and practices will in no way mislead the public or misrepresent Clarity Clinic's services, providers, contracts, or capabilities.
- 2) Clarity Clinic will not claim any service outcomes unless represented by reliable data collection methods and valid research results.
- 3) Clarity Clinic will utilize clear and consistent methods of communicating information to consumers, family members, third-party entities, referral sources, funding sources, and community members, and will exhibit sensitivity to the educational and cultural considerations when distributing information.
- 4) Clarity Clinic will not utilize monetary rewards or gifts to any potential consumer of services in an attempt to entice them to enter programs.

E. Clinical Practices:

- 1) Personnel will adhere to all professional codes of conduct and ethical standards for specified professional discipline as well as any other professional certification or job description.
- 2) Professional boundaries are to be utilized in all businesses related to the organization.
- 3) As part of orientation, personnel and other stakeholders will read the Ethical Codes of Conduct and demonstrate knowledge of the guidelines as evidenced by proper administrative documentation, following policies and procedures, participation in training or continuing education for organization and professional requirements, and conformance to the clinical standards.

F. Quality of Care:

- 1) Clarity Clinic will provide quality behavioral health care in a manner that is appropriate, determined to be necessary, efficient, and effective.

- 2) Health care professionals will follow current ethical standards regarding communication with consumers (and their representatives) regarding services provided.
- 3) Clarity Clinic will inform consumers about alternatives and risks associated with the care they are seeking and obtain informed consent before any clinical interventions.
- 4) Clarity Clinic recognizes the right of consumers to make choices about their care, including the right to go without recommended care or to refuse care.

G. Necessity of Care:

- 1) Clarity Clinic shall submit claims for payment to governmental, private, or individual payers for those services or items that are clinically necessary and appropriate.
- 2) When providing services, Clarity Clinic personnel shall only provide those services that are consistent with generally accepted standards for treatment and are determined by the professional to be clinically necessary and appropriate.
- 3) Service providers may determine that services are clinically necessary or appropriate; however, the funding source may not cover or approve those services. In such a case, the consumer may request the submission of a claim for the services to protect their rights concerning those services or to determine the extent of coverage provided by the payer.
- 4) Coding and documentation will be consistent with the standards and practices defined by the organization in its policy, procedures, and guidelines.

H. Coding, Billing, and Accounting:

- 1) Clarity Clinic personnel involved in coding, billing, documentation, and accounting for consumer care services for governmental, private, or individual payers will comply with all applicable state and federal regulations and organizational policies and procedures. Training will be provided as needed.
- 2) Clarity Clinic will only bill for services rendered and shall seek the amount to which is contracted.
- 3) Supporting clinical documentation will be prepared for all services rendered. If the appropriate and required documentation has not been provided, then the service has not been rendered.
- 4) All services must be accurately and completely coded and submitted to the appropriate payer in accordance with applicable regulations, laws, contracts, and organizational policies and procedures. Federal and state regulations take precedence, and organizational policies and procedures must reflect those regulations.

5) If a billing or coding error occurs, documentation must be logged and properly corrected. Appropriate documentation will be reported to proper authority and action will be taken according to corporate compliance standards.

6) Consumers shall be consistently and uniformly charged, and government payers shall not be charged more than the provider's usual charges.

7) Billing and collections will be recorded in the appropriated accounts and proper review will occur.

8) An accurate and timely billing structure and medical records system will ensure that Clarity Clinic effectively implements and complies with required policies and procedures.

I. Personal and Confidential Information:

1) Clarity Clinic will protect personal and confidential information concerning the organization's system, personnel, and consumers.

2) Clarity Clinic personnel shall not disclose confidential consumer information unless at the consumer's request and/or when authorized by law. Appropriate consent for use of consumer information for research purposes must be obtained with full disclosure regarding research purpose and use.

3) Confidential information will only be discussed with or disclosed to persons and entities outside the organization through the request of the consumer. Third-party disclosures are not allowed. Persons outside the organization include the family, business, or social acquaintances of the consumer.

4) Consumers can request and are entitled to receive copies or summaries of their records except for minors and consumers being treated for alcohol and drug abuse, who may be provided with copies of their record if it is judged appropriate by the provider charged with their care.

5) Personnel will be familiar with all organizational policies and procedures regarding confidentiality, record keeping, and traveling with documentation, as appropriate.

J. Creation and Retention of Records:

1) All records are the property of the organization. Personnel shall not destroy or remove records from the premises.

2) Respective staff responsible for the preparation of records shall ensure they are accurately prepared, maintained in a lawful manner, and reside in a location as prescribed by law and policy.

3) Personnel will not knowingly create records that contain any false, fraudulent, fictitious, deceptive, or misleading information. Personnel will not sign someone else's signature or initials on a record. Appropriate clinical language and documentation are always to be used.

4) Personnel will not delete any entry from a record. Records can be amended and material added to ensure the accuracy of a record in accordance with policy and procedures. If a record is amended, it must indicate that the notation is an addition (or correction) and document the actual date the additional entry was made.

5) The organization maintains record retention and destruction policies and procedures consistent with federal and state requirements. Premature destruction of records could be misinterpreted as an effort to destroy evidence or hide information.

K. Government Investigation:

1) Clarity Clinic personnel shall cooperate fully with appropriately authorized governmental investigations and audits.

2) Clarity Clinic will respond in an orderly fashion to the government's request for information through interviews and documentation review.

3) Clarity Clinic will respond to the government's request for information in a manner that enables the organization to protect both the organization's and consumer's interests while cooperating fully with the investigation.

4) When a representative from a federal or state agency contacts Clarity Clinic personnel at home or at their office for information regarding the organization or any other entity with which the organization does business, the individual will contact the CEO immediately. If the CEO is not available, the individual will contact the next appropriate staff member.

5) Clarity Clinic personnel will ask to see the government representative's identification and business card if the government representative presents in person. Otherwise, personnel should ask for the person's name, office, address, phone number, and identification number and then contact the person's office to confirm identity.

L. Prevention of Improper Referrals or Payments:

1) Personnel will not **accept**, for themselves or the organization, anything of value in exchange for referrals of business or the referral of consumers.

2) Personnel will not **offer**, for themselves or the organization, anything of value in exchange for referrals of business or the referral of consumers.

3) Federal law prohibits anyone from offering anything of value to a Medicare or Medicaid consumer that is likely to influence that person's decision to select or receive care from a behavioral health care provider.

4) The organization shall establish procedures for the review of all pricing and discounting decisions to ensure that appropriate factors have been considered and that the basis for such arrangements is documented.

5) Development or the initiation of joint ventures, partnerships, and corporations within the organization must be reviewed and approved by appropriate management to ensure compliance with organizational policy and federal regulations.

M. Antitrust Regulations:

1) Personnel will comply with all applicable federal and state antitrust laws.

2) Personnel shall not agree with a competitor to artificially set prices or salaries, divide markets, restrict service output, block new competitors from the market, or share pricing information that is not normally available to the public.

3) Personnel shall not deny privileges to qualified practitioners or agree to participate with competitors in a boycott of government programs, insurance companies, pharmaceutical drugs, or other products.

N. Avoiding Conflicts of Interest:

1) All personnel shall conduct clinical and personal business in a manner that avoids potential or actual conflicts of interest.

2) Personnel shall not use their official positions to influence an organizational decision in which they know or have reason to know, that they have a financial interest.

3) If there is a known conflict of interest, written disclosure must be made during the onboarding process or as soon as possible after becoming aware. The discussion will occur with appropriate staff members to determine a plan of action, if necessary.

4) Personnel must be knowledgeable about activities that may be an actual or potential conflict of interest. Examples of such activities may include, but are not limited to the following:

a. Giving or receiving gifts, gratuities, loans, or other special treatment of value from third parties doing business with or wishing to do business with the organization. Third parties may include but are not limited to, consumers, vendors, suppliers, competitors, payers, carriers, and fiscal intermediaries.

b. Using facilities, resources, or other confidential and private information for reasons other than organization sanctioned activities or one's gain.

c. Using Clarity Clinic's name to promote self inappropriately, sell products, or sell personal services.

d. Contracting or entering an employment relationship with a competing interest.

O. External Relations:

1) Personnel shall adhere to fair business practices and accurately and honestly represent themselves and the organization's services.

2) Personnel will be honest and truthful in all marketing and advertising practices about the business practices of the organization's service delivery system.

3) Vendors who contract to provide goods and services to the organization will be selected based on quality, cost-effectiveness, appropriateness for the identified task or need, and conform to the organization's policies, procedures, and standards of operation.

4) Clarity Clinic shall engage in advocacy and corporate citizenship efforts to reduce stigma in the community. Additionally, conformance to utilizing person-centered organizations or "people first" language is evident in our publications, operations, and activities. Clarity Clinic will document participation in advocacy and corporate citizenship by utilizing meeting logs, meeting notes, or other publications.

P. Workforce Development and Management:

1) Discrimination is prohibited in any work-related decision based on race, color, national origin, religion, sex, physical or mental disability, ancestry, marital status, age, sexual orientation, citizenship, or status as a covered veteran. The organization is committed to providing equal employment opportunities in a work environment where personnel is centered organizations treated with fairness, dignity, and respect.

2) Clarity Clinic will make reasonable accommodations to the known physical, mental, or cultural implications of otherwise qualified individuals with disabilities.

3) Clarity Clinic does not tolerate harassment or discrimination by anyone based on the diverse characteristics or cultural backgrounds of those who work for the organization under the organization's affirmative action policy.

4) Any form of sexual harassment, workplace violence, and inappropriate professional responsibility is prohibited.

Q. Code of Conduct Procedures:

- 1) All personnel, students, volunteers, and governing authority members, as part of the organization's orientation and onboarding process, will review the Code of Conduct, including the procedures for investigating and acting on alleged ethical or conduct violations.
- 2) All personnel will receive a copy of the Code of Conduct, sign a form acknowledging their review and full understanding of the code, and return the form to be filed in the individual's personnel file.
- 3) To ensure awareness of ethical practices, review and continued education will be conducted annually for personnel and other stakeholders.

R. Procedures for Investigating and Acting on Suspected or Alleged Ethical Violations:

- 1) When any consumer, family member, authorized representative, advocate or other person believes that an ethical violation has occurred within the operations of the facility, they may report such suspicion directly to any staff member or management.
- 2) When personnel believes a Code of Conduct violation has occurred they are obligated to report in one of the following ways:
 - a. Immediate notification of the alleged incident or violation utilizing organizational reporting mechanisms.
 - b. Immediate reporting to their supervisor, or Human Resources, if the suspected or alleged violation involves their supervisor.
- 3) Supervisors who have been informed of a suspected or alleged violation are required to immediately inform Human Resources (or designated staff member) of the suspected violation.
- 4) If the alleged violation involves a direct and immediate threat to the safety of persons served, personnel, or other visitors, staff are obligated to report the alleged violation immediately to their supervisor and follow appropriate safety procedures, if necessary.
- 5) Personnel are required to report any alleged or suspected Code of Conduct violation that they have knowledge of. However, they are not required to investigate reported violations or follow up with results. That process will be completed by a designated staff member.

6) Once the alleged violation has been brought to the attention of the supervisor or reported through organization procedures, the person reporting the situation will no longer have a responsibility for being involved with the investigation other than providing additional information through a requested interview by the investigator.

7) Personnel must report each alleged or suspected violation of the Code of Conduct separately, should a violation that has been reported occur again.

8) When any suspected or alleged violation of the Code of Conduct is reported to a supervisor, Human Resources or the designated person will begin an investigation of the matter immediately. While investigating the complaint, the following issues should be considered and action taken depending on the situation:

a. Is any patient or personnel in any harm or potential harm because of this behavior?

b. Does the complaint require immediate action to restrict personnel from contacting patients or other persons?

c. Does the complaint put Clarity Clinic in a potentially liable situation that needs legal consultation?

9) Code of Conduct investigations and timelines will follow the guidelines outlined in the Clarity Clinic Policies and Procedures.

S. General Ethical Guidelines and Considerations:

1) The Code of Conduct is shared with persons served during orientation and is posted throughout public areas in all owned, leased, or rented facilities.

2) Clarity Clinic believes in the importance of ethical practices within the organization. Any person who reports waste, fraud, abuse, or any other questionable practices will not be subject to reprisal by the management of the organization. To assure that reprisal is not used, the managing staff will serve as advocates for personnel who report questionable practices. Human Resources and The Chief Operational Officer (or designated person) will provide assurance and oversight that there are no adverse actions toward person reporting.

T. Media Relations Procedures:

1) All personnel will receive a copy of the organization's Media Policy (Employee Handbook) and sign a form acknowledging their review and full understanding of the policy and return the form to be filed in the individual's personnel file.

Psychology internship due process, appeal, and grievance procedures

At Clarity Clinic, our primary responsibility is to the welfare of our patients. Therefore, we maintain high standards of patient care and ethical and professional conduct. On rare occasions, intern performance is insufficient, and/or intern problem behaviors occur. When these problems are identified, the training program assesses the nature of the problem and formulates a plan to support the intern in effectively remediating it, with the goal of the intern demonstrating a sufficient level of competency and/or correcting the behavior to successfully complete the internship.

This section describes potential insufficient performance criteria and other problem behaviors, how due process is ensured, how interns can appeal if they disagree with decisions, and how interns can file a complaint (grievance). An intern, staff member, patient, or another person may activate a formal review of an intern at any time based on insufficient intern performance and/or other problem behaviors. A formal review may also be triggered by an intern evaluation by a supervisor.

Due process guidelines

The following guidelines describe intern performance concerns that would be cause for formal review, informal action, formal remediation and could potentially result in termination of the employment and training of the intern if not corrected.

When formal review determines that intern performance is insufficient and/or other significant intern problem behaviors occur, a remediation plan may be implemented. Informal action plans and formal remediation plans are implemented when the intern's performance deficits (or other problem behaviors) present a low risk to stakeholders, and the situation is amenable to adequately timely change. These procedures are not

intended to be punitive.

Due Process procedures protect intern rights and are implemented to afford the intern with a reasonable opportunity to remediate problems and to receive support and assistance. Interns have the right to appeal remediation decisions. Interns may also file a complaint (grievance) at any time during the internship.

Standard clinic procedures as stated in the Clarity Clinic Employee Handbook, the Therapy Department Processes and Procedures Manual, or the Clarity Clinic Code of Conduct may also be applied to the process of identifying insufficient performance and/or problem behaviors during formal review as well as to remediation, appeal, and grievances. In the event of a conflict between the Manuals and Code of Conduct, the Clarity Clinic Employee Handbook will take precedence.

Insufficient performance

Performance problems that may be cause for formal review and subsequent informal action plan, formal remediation, or termination from internship include skills deficits, failures to perform at the level of competency expected, and problems of ethical and/or professional conduct. Examples of insufficient performance include but are not limited to situations that include the following:

1. The intern does not acknowledge, understand, address, or correct a problem when it is identified.
2. An intern problem is assessed:
 - a. as a skill deficit that negatively impacts the intern's clinical work and the quality of other services and reflects competency below that which is expected at the point of the internship year and which likely requires remediation for correction (e.g., increased didactic, experiential training)
 - b. as being more than a skill deficit that negatively impacts the intern's clinical work and the quality of other services, that has not been corrected by didactic or experiential training;
3. The intern's behavior has not changed as a function of feedback, remediation efforts, and/or additional experience
4. The intern demonstrates an inability and/or unwillingness to learn and appropriately integrate professional ethical standards into all professional work
5. The intern demonstrates an inability to effectively manage personal stress,

psychological distraction, and/or excessive emotional reactions that interfere with professional functioning

6. The problematic behavior has the potential for ethical or legal ramifications if not addressed
7. The intern's behavior negatively impacts the public view of Clarity Clinic
8. The problematic behavior negatively impacts the other interns
9. The problem is not restricted to one area of professional functioning
10. A disproportionate amount of attention by training personnel is required
11. An intern obtains ratings below that which is expected for the time of year, as specified in the evaluation form.

Problem behaviors

Problem behaviors subject to a formal review and subsequent informal action, formal remediation, or termination from internship include several situations that may include, but are not limited to when an intern engages in any of the following behaviors:

1. Sexual Harassment
2. Violation of professional codes of conduct for ethical and professional practice (APA Ethical Principles of Psychologists & Code of Conduct, APA Professional Practice Guidelines)
3. Insubordinate behavior
4. Exploitive or abusive behavior
5. Other behaviors not listed elsewhere in this document but that represent an infringement on the rights, privileges, and responsibilities of interns, professionals, other volunteers/employees, other members of the community, and/or patients of Clarity Clinic
6. Egregious behaviors include illegal behavior, unethical behavior, behavior that likely indicates poor judgment. Egregious behaviors may result in termination of the intern's employment and notification of the intern's graduate program.

Due process

Due Process is integrated within the formal review and remediation process. Due Process ensures interns are treated justly, given a reasonable opportunity to hear about, respond to, and remediate problems; receive support and assistance, and have the right to appeal and file a grievance. The Training Program is structured to include due process so behavior and performance expectations are clear, and evaluation processes and procedures for remediation are effective, timely, and fair.

- **Program Expectations.** Clarity Clinic's Therapy Department Training Program will provide interns with the training program expectations for professional functioning in writing at the beginning of the internship training year.
- **Procedures for Evaluation.** Clarity Clinic's Therapy Department Training Program will inform interns about the evaluation procedures including the when, how, and who will conduct evaluations.
- **Procedures for Evaluation of Performance and Problem Behavior.** Clarity Clinic's Therapy Department Training Program will inform interns when performance and problem behaviors are identified as truly problematic and how they will be addressed.
- **Data for Performance Evaluation.** Clarity Clinic's Therapy Department Training Program will use input from multiple professional sources to the extent that it is feasible when making decisions or recommendations regarding the intern's performance.
- **Communication with Graduate Program.** If an intern has skills deficits and/or problem behaviors, Clarity Clinic's Therapy Department Training Program will communicate early and often with the intern, and their graduate program when needed and as specified in the Due Process procedures, to address these problems.
- **Remediation Plan.** If it is determined to be warranted, Clarity Clinic's Therapy Department Training Program will provide a remediation plan (see remediation section) for interns to address skill deficits and/or problem behaviors, a timeline to complete requirements for remediation, and consequence for failure to meet these by the end of the timeline.

- **Appeal.** Clarity Clinic's Therapy Department Training Program will provide interns with a written statement of the appeal policy and procedures in the training manual should interns choose to exercise their right to an appeal (see Appeal section).
- **Timely Process.** Clarity Clinic's Therapy Department Training Program will ensure that a sufficient amount of time is provided for interns to respond to any action(s) taken by the program.
- **Documentation.** Clarity Clinic's Therapy Department Training Program will document in writing the action(s) to be taken if an intern has skills deficits and/or problem behaviors, the rationale for action(s), the criteria for resolving the remediation, and Clarity Clinic will provide this information to all relevant parties, and documentation will be kept in the intern's file in the case of formal remediation.

Informal review and resolution

When a Clarity Clinic staff member believes that an intern's performance or behavior is problematic, the first step in addressing the issue should be to raise the issue with the intern directly if feasible and appropriately consistent with the [APA Ethics Code](#). The person who raises the concern should raise the issue with the intern directly and as soon as feasible in an attempt to informally resolve the problem. The same person should monitor the outcome. If the person who raises the concern is a person outside Clarity Clinic, they should inform a Clarity Clinic supervisor or staff member, who will take up the addressing and monitoring role.

Formal review

When an intern, Clarity Clinic staff member, patient, or other person informs the Training Committee, Director of Training, or Director of Therapy Operations and Compliance that intern performance is insufficient and/or a problem behavior has occurred, and informal review has not resolved the issue or is not appropriate or feasible, a formal review of the intern is activated.

Notice: The intern will be notified in writing that a formal review hearing will be held within 10 working days of when it is held.

Hearing: Formal review is conducted by the Training Committee, the Director of Training, and the Director of Therapy Operations and Compliance (or the designee of the Director of Training or Director of Therapy Operations and Compliance) within 10 working days of notifying the intern of the concern. The intern supervisor or supervisors may also be involved at any step of this process, and at least one supervisor will be involved in a formal remediation plan is implemented.

Outcomes: The outcome of a hearing will be communicated to the intern within 5 working days of the hearing decision and will include one of the following:

- Acknowledgment & No Further Action
- Informal Action Plan
- Formal Remediation
- Suspension
- Termination

Any time limits listed above may be extended by mutual consent within a reasonable timeframe. If new information is discovered after a review has occurred, even if no further action was previously required, the formal review process may be restarted and a new outcome will result.

Acknowledgment and no further action

Acknowledgment and no further action occurs when the Director of Training, Clarity Clinic Director of Therapy Operations and Compliance, and the Training Committee decide by simple majority vote the psychology internship is aware of the problem; it has been brought to the attention of the intern; the problem is not significant enough to warrant an informal action plan, formal remediation plan, suspension, or termination; and either a) no further action is required to address the concern or problem or b) if the problem needs to be rectified, the supervisor or other staff member will work with the intern to rectify the problem.

Informal action plan

An informal action plan is implemented when the Director of Training, Clarity Clinic Director of Therapy Operations and Compliance, and the Training Committee decide by simple majority vote that an intern's performance deficits or other problem behaviors

present a low risk to stakeholders, the situation is amenable to adequately timely change, the deficits or problem behaviors are more significant than those appropriate for acknowledgment and no further action, and that no further action could result in the problem worsening without an informal action plan.

In the event that a vote results in a tie, the Director of Training will break the tie. An informal action plan may include increased supervision, didactic training, and/or structured readings. This process will be documented in writing and discussed with the Director of Training and Training Committee, but will not become part of the intern's professional file. The informal action plan will not be shared with the intern's home doctoral program unless requested by the intern or agreed upon by the intern and the Director of Training. Progress reviews will be conducted as part of the intern's action plan within a specified timeframe. One or more progress reviews may be conducted.

Formal remediation, suspension, or termination

The key difference between an informal action plan and a formal remediation plan includes the following:

1. The formal remediation plan becomes part of the intern's professional file
2. The Director of Clinical Training of the intern's home doctoral program is informed when a formal remediation plan is enacted
3. Formal remediation is a probationary status
4. Successful remediation is necessary for the intern to successfully complete the internship

A formal remediation plan is implemented when an intern's performance deficits (or other problem behaviors) present a low risk to stakeholders, the situation is amenable to adequately timely change, and the remediation is necessary for the intern to successfully complete the internship.

Formal remediation plans

A formal remediation plan will include the following:

1. The actual behaviors or skills associated with the problem
2. The specific actions to be taken for rectifying the problem
3. The time frame during which the problem is expected to be ameliorated

4. The procedures for determining whether the problem has been appropriately remediated

If a simple majority (with or without a Director of Training tie-breaker) votes to implement a formal remediation plan, the plan will be developed by the Director of Training, Training Committee, and the intern's Supervisor, and forwarded to the Director of Therapy Operations and Compliance for approval. If the Director of Therapy Operations and Compliance agrees with the plan, it will be implemented, otherwise, it will be revised until accepted by the Director of Therapy Operations and Compliance. A formal remediation plan will include communication to the graduate program, one or more specific periods for a progress review, criteria for resolving the remediation plan successfully so the intern exits the remediation, and consequences if the remediation plan is not completed successfully.

Process for implementing formal remediation plans

The process for implementing the formal remediation plan is as follows:

1. The supervisor (or a designated member of the Training Committee) verbally informs the intern that formal remediation procedures will be implemented and shares the formal remediation document with the intern within 5 working days of the remediation decision.
2. The formal remediation plan is placed in the intern's file. This decision will be documented in writing, and the Director of Training will forward a copy of the document to the home doctoral institution within ten (10) working days of sharing the document with the intern.
3. The Director of Training will share and discuss the formal remediation plan with the parties involved including the intern primary clinical and/or emphasis area supervisor in addition to the Director of Clinical Training (DCT) of the home doctoral institution within ten (10) working days of sharing the document with the intern.
4. The formal remediation plan will state the specific behavioral conditions for the continuation of the internship if the intern is suspended from some or all of their activities until specified steps are taken, and criteria needed to resolve the

remediation successfully and periods for a progress review, and deadlines for completing these criteria.

Formal remediation plan progress reviews

Progress reviews will be conducted as part of the intern's remediation plan within a specified timeframe. One or more progress reviews may be conducted.

A formal evaluation of progress under the remediation plan will be conducted by the Director of Training, Training Committee, and the intern's supervisor and will ultimately decide by simple majority, with a tie-breaker by the Director of Training if necessary, whether to do the following:

1. Resolve the formal remediation plan upon its successful completion;
2. Reduce the formal remediation plan to an informal action plan;
3. Extend the formal remediation plan for a later formal remediation evaluation with or without progress reviews
4. Terminate the intern's involvement in the internship and notify the intern's graduate program and APPIC. The intern will need to complete the normal procedures for ending the internship including completion of all patient documentation. The evaluation decision will be forwarded to the Director of Therapy Operations and Compliance for approval. If the Director of Therapy Operations and Compliance approves, it will be implemented. If the Director of Therapy Operations and Compliance does not approve, the Director of Therapy Operations and Compliance will join the Director of Training, Training Committee, and the intern's Supervisor for another remediation plan evaluation vote, which will be resolved by simple majority, with a tie-breaker by the Director of Therapy Operations and Compliance if necessary.

The formal remediation plan evaluation decision will be documented in writing and will be shared with the intern within ten (10) working days of the meeting. This documentation will become a part of the intern's professional file. The decision will be shared with the intern's home doctoral institution. If the decision involves continuation in the training program, the Director of Training may assign a new clinical supervisor and meet with them to plan the monitoring of the conditions in the decision. If the Director of Training is the supervisor of the intern, the Clarity Clinic Director of Therapy Operations

and Compliance will take up the role(s) of the Director of Training, listed above. Any time limits listed above may be extended by mutual consent within a reasonable timeframe.

Appeal procedures

In the event that an intern does not agree with and wishes to challenge any of the aforementioned Due Process Procedures including remediation, sanctions, or with the handling of a grievance – the following appeal procedures should be followed:

1. The intern should file a formal appeal in writing (email will suffice) to the Director of Therapy Operations and Compliance with all supporting documents that refute the evidence regarding the evaluative decision made. The intern must submit this appeal within ten (10) working days from the notification of the subject of the appeal (i.e., notification, remediation or sanctions, or handling of a grievance). The intern may also request a personal interview with the Director of Therapy Operations and Compliance during this ten-day period.
2. The Director of Therapy Operations and Compliance will convene a formal review panel, consisting of the Director of Therapy Operations and Compliance, the Director of Training, and at least two other members of the Training Committee within ten (10) working days of receipt of a formal written appeal from an intern. The intern may request a specific member of the Training Committee to serve on the formal 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 will reach a decision based on a simple majority vote, with a tie-breaker vote from the Clarity Clinic Director of Therapy Operations and Compliance, if necessary. In the event of a conflict of interest, the Director of Training or the Clarity Clinic Director of Therapy Operations and Compliance may designate a substitute representative.
3. In the event that an intern is filing a formal appeal in writing to disagree with a decision that has already been made by the formal review panel and supported by the Director of Therapy Operations and Compliance, then that appeal is

reviewed again by the Director of Therapy Operations and Compliance. The Director of Therapy Operations and Compliance will determine if a new formal review panel should be formed to reexamine the case, or if the decision of the original decision is upheld. At that point, the decision of the Director of Therapy Operations and Compliance is final.

Informal grievance procedures

A grievance is a formal term for a complaint. A grievance procedure is a process that is invoked when an intern has a complaint against the training program or an individual involved in the training program. Interns may initiate an informal or formal grievance about the conduct of another intern, staff member supervisor, the Training Committee, the Director of Training, the Clarity Clinic Director of Therapy Operations and Compliance as well as the Clarity Clinic Department, the Training Program and their policies and procedures.

Grievances must be raised by interns and others in good faith consistent with APA Ethics Standard 1.07, which states that psychologists do not file or encourage the filing of (ethics) complaints that are made with reckless disregard for or willful ignorance of facts that would disprove the allegation. Interns who pursue grievances in good faith will not experience any adverse professional consequences.

For situations in which an intern raises a grievance about a supervisor, staff member, trainee, or the internship program, first, the intern should raise the issue as soon as feasible and appropriate directly with the person or persons to resolve the problem informally consistent with APA Ethics Standard 1.04 on informal resolution (also see informal resolution policy above).

Formal grievance procedures

If the matter that is the subject of a grievance cannot be satisfactorily resolved using informal means, the intern may submit a formal grievance in writing to the Director of Training. If the Director of Training is the object of the grievance, the grievance should be submitted to another member of the Training Committee. The individual being grieved (or Director of Training if the subject of the grievance is the training program) will be asked to submit a response in writing within ten (10) working days.

The Director of Training (or Training Committee member, if appropriate) will then meet with the intern and the individual being grieved within ten (10) working days of the

response. In some cases, the Director of Training or other Training Committee member may wish to meet with the intern and the individual being grieved separately first. The goal of the joint meeting will be to develop a plan of action to resolve the matter. The plan of action will include the following:

1. The behavior associated with the grievance
2. The specific steps to rectify the problem
3. The procedures are designed to ascertain whether the problem has been appropriately rectified.

The Director of Training or other Training Committee member will document the process and outcome of the meeting. The intern and the individual being grieved will be asked to report back to the Director of Training or other Training Committee member in writing within ten (10) working days regarding whether the issue has been adequately resolved.

Lack of resolution: Human Resources

If the formal review panel or Director of Therapy Operations and Compliance determines that an appeal or grievance cannot be resolved internally or is not appropriate to be resolved internally, then the issue will be turned over to the Clarity Clinic Human Resources Department to initiate the Clarity Clinic Employee Grievance/Due Process procedures. If the formal review panel determines that an appeal or grievance potentially can be resolved internally, the panel or Director of Therapy Operations and Compliance will develop a second action plan that includes the same components as mentioned above.

The process and outcome of the panel meeting will be documented by the Director of Training or other designated Training Committee member. In the case of a grievance, the intern and the individual being grieved will again be asked to report back in writing regarding whether the issue has been adequately resolved within ten (10) working days. The panel will reconvene within ten (10) working days to again review written documentation and determine whether the issue has been adequately resolved. If the issue is not resolved by the second meeting of the panel, the issue will be turned over to the Clarity Clinic Human Resources Department to initiate the Clarity Clinic Grievance/Due Process procedures.