KAISER PERMANENTE®

Mental Health Training Program
Northern California

Policy and Procedure Manual

Pre-Master's Internships Programs in Social Work, Marriage & Family Therapy, and Professional Clinical Counseling 2026-2027

Issued by Kathryn Wetzler, Psy.D.
Northern California Director, Mental Health Training Programs
Kaiser Permanente Northern California
Department of Mental Health
1761 Broadway Street, Suite 100, Vallejo, CA 94589
Kathryn.Wetzler@kp.org

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1. PRE-MASTER'S INTERNSHIP PROGRAM OVERVIEW

The Pre-Master's Internship Programs in Social Work, Marriage & Family Therapy, and Professional Clinical Counseling are funded by Kaiser Permanente Northern California (KPNC) and are compliant with state and national guidelines. The programs are comprised of three training sites located within the Northern California region. These part-time positions (up to 30 hours/week) start in September and are designed to be completed in 9 to 12 months.

This manual provides the policies and procedures that are applicable to all interns and training faculty. It is posted on the Kaiser Permanente Northern California Mental Health Training Programs website at https://mentalhealthtraining-ncal.kaiserpermanente.org/, the official "bulletin board" of the training programs. The KPNC Mental Health Training Programs' website contains information such as the history of our programs, descriptions of individual training sites and their respective training rotations offered, and training faculty profiles.

1.01 Mission Statement

Kaiser Permanente is an integrated managed care consortium, based in Oakland, California, founded in 1945 by industrialist Henry J. Kaiser and physician Sidney Garfield. Kaiser Permanente operates in eight states and the District of Columbia and is the largest managed care organization in the United States, serving over 12 million members nationally, including 4.5 million members in northern California. Care for members and patients is focused on total health and is guided by personal physicians, specialists, and teams of caregivers.

Kaiser Permanente's stated mission is to provide efficient, affordable, high-quality, evidence-based, healthcare while supporting continuous quality improvement. The organization is dedicated to care innovation, clinical research, health education, and improving community health.

The KPNC Pre-Master's Internship Programs' mission statement declares a commitment "to training graduate students within an integrated healthcare system, in order to prepare them for dynamic roles as practicing mental health professionals in the healthcare system of the future."

1.02 Program Admission Requirements and Procedures

KPNC training directors work with the graduate schools' field placement coordinators to recruit appropriate candidates. KPNC training programs encourage applications from individuals who indicate that they come from diverse, underserved, or disadvantaged backgrounds. All applicants who meet general criteria for the program are included in the selection pool.

Pre-master's interns must be matriculated at an accredited academic institution and in their second year of graduate studies. Clinical Social Work interns must be enrolled in a graduate program accredited by the Council on Social Work Education (CSWE).

Applications are reviewed by the training faculty in the order received, and qualified candidates are identified and invited for interview. Interviews take place in early spring prior to the term beginning each September.

2. PROGRAM INFORMATION

2.01 Seminars and Didactic Training

Didactic seminars are organized by the KPNC Mental Health Training Programs, take place weekly, and are 1 hour in duration. As their academic and training schedule permits, interns are invited to attend the Mental Health Training Program (MHTP) Speaker Series seminars, which feature expert clinicians providing advanced-level training on a specific topic. Current seminar schedules and a list of speakers and topics can be found on the KPNC Mental Health Training Programs website.

2.02 Diversity, Inclusion, and Culturally Competent Care

Diversity issues are considered in every aspect of training as each medical center and clinic serves diverse and unique member populations that include differences in age, disability status, race, ethnicity, immigration experiences, gender, gender identity and expression, sexual orientation, religion and spirituality, socioeconomic status, and family life. Through targeted seminar topics, supervision, and clinical work, interns are informed and sensitized to diversity issues to prepare them to provide effective and culturally responsive mental health treatment.

All interns are required to sign the Kaiser Permanente Mental Health Training Programs' Values Statement (Appendix A) at the beginning of the year, indicating that they are willing to work with any patient who presents for treatment, except in cases where the intern's personal physical safety is actively threatened or where the clinical competence of both the intern and the supervisor would compromise patient care.

3. SUPERVISION OF CLINICAL TRAINING HOURS

3.01 MHTP Supervisor Training Requirements

KPNC Mental Health Training Programs require that supervisors of pre-master's interns adhere to the same Board of Behavioral Sciences (BBS) continuing education (CE) requirements as KPNC supervisors of associate social workers (ASWs), associate marriage and family therapists (AMFTs), and associate professional clinical counselors (APCCs). All BBS licensed mental health professionals supervising for the first time in California must complete a 15-hour course in supervision within 60 days of commencing supervision. Individuals who have not supervised for 2 years or more must take a 6-hour supervision course within 60 days of resuming supervision. All supervisors thereafter must complete 6 hours of continuing professional development in supervision during each license renewal cycle (every 2 years).

3.02 BBS Requirements for Supervisors of MFT Interns

1. Supervisors of MFT interns (pre-master's MFT interns) must have been licensed and practicing psychotherapy for 2 out of the last 5 years OR have provided direct supervision

for 2 years out of the last 5 years prior to the commencement of supervision.

2. The BBS Supervision Agreement must be completed, signed, and dated by the primary supervisor no later than the first day of the training year. A single form is used for all intern/associate types with a space to indicate intern type including MFT intern. The supervisor should give the original document to the intern, who retains them for submission later when applying for licensure. To print a copy of the BBS Supervision Agreement, go to: https://www.bbs.ca.gov/pdf/forms/supervision_agreement.pdf
3. The Remote Supervision Agreement (Appendix H) should be completed, signed, and dated at the same time as the completion of the BBS Supervision Agreement. To complete the agreement, the supervisor must meet with the intern to determine whether remote supervision is an appropriate format for the intern. The Remote Supervision Agreement can be completed as a stand-alone document or can be copied and embedded into the Supervisory Plan section of the BBS Supervision Agreement.
4. Supervisors who began supervising one or more interns after January 1, 2022, must submit a one-time BBS Supervisor Self-Assessment Report Form to the BBS within 60 days of commencing any supervision. Supervisors who were supervising one or more interns prior to January 1, 2022, must submit a Supervisor Self-Assessment Report Form to the BBS by January 1, 2023. Access the Supervisor Self-Assessment Report Form here: https://www.bbs.ca.gov/pdf/forms/supervisor_self_assessment.pdf

3.03 Graduate School Training Agreement

A training agreement provided by the graduate school must be signed and dated by the training director and/or supervisor and/or school field placement coordinator and/or intern before training commences. Interns receive regularly scheduled, face-to-face, individual, or triadic supervision of no less than 1 hour per week by a licensed mental health clinician throughout the year for every 5 hours of direct patient care. KPNC supervisors must meet the training agreement requirements for supervisors of the intern's graduate school.

3.04 Supervised Clinical Hours Log

It is the responsibility of the intern to keep a weekly supervised clinical experience log with hours verified by the primary supervisor's signature to document program participation. Interns may use the Time2Track, another online tracking system, or a paper log.

3.05 Pre-Master's Intern Competency Evaluation Form

Each intern's clinical and professional competencies will be evaluated by their supervisor quarterly or semi-annually in accordance with the requirements of the graduate school. The intern's graduate school will provide training program supervisors with evaluation forms which should be utilized according to the school's field placement policies.

3.06 Methods of Supervision

All interns receive regularly scheduled, face-to-face, individual supervision of no less than 1 hour per week by a licensed mental health clinician throughout the year. Supervisors must provide a minimum of 2 hours of individual supervision for every 20 hours that the intern engages in provision of mental health services.

The functions of the supervisor include monitoring patient welfare, enhancing the intern's clinical skills, promoting professional growth, evaluating their progress, and providing feedback. The supervisor serves as both mentor and monitor/guide for the intern's clinical work and professional development during their tenure at KPNC. Each intern always has access to their supervisor (or

designee), via phone or pager, in case of emergency. The intern will be expected to adjust their scheduled time off in accordance with the availability of the supervisor.

All interns will receive 1 hour per week of group supervision facilitated by a licensed mental health clinician. Topics of group supervision may include case consultation, professional development, interdisciplinary communication and systems issues, and multicultural competence and diversity awareness.

Evaluation of intern clinical and professional competencies must be based on direct observation at least once each quarter and/or during each rotation. Direct observation by the supervisor may be completed live and in-person (e.g., in-room co-therapy with patient, co-led group therapy, in-room observation of an intake evaluation, one-way mirror observation), or by audio-video streaming, or through audio or video recording. If requested to audiotape, videotape, or otherwise record a patient session, interns should download the Consent and Authorization form to be signed by intern and patient, from the "Resources" section of the following web page:
https://wiki.kp.org/wiki/display/CMI/Video+Ethnography+Tool+Kit

3.07 Pre-Master's Intern Evaluation of Supervisors

Each intern evaluates their supervisors quarterly or semi-annually based on rotations using the Pre-Master's Intern Evaluation of Supervisor form (Appendix F). Data from this form is reviewed by the training director and is kept confidential; however, ratings of "1" ("Does Not Meet My Expectations") or "2" ("Needs Improvement") will be brought to the supervisor's attention. Interns and supervisors should review the Evaluation of Supervisor form at the beginning of the training year to ensure a common understanding of the supervisory standards of the internship program. They are then encouraged to use the criteria on this form as a guide for discussion throughout the training year to identify training needs, especially at the time of the intern's performance evaluations.

4. MEDICAL-LEGAL ISSUES IN PATIENT CARE AND DOCUMENTATION

4.01 Patient Rights and Safety

A patient's rights and responsibilities, as outlined in the KPNC local policies and procedures manual, shall be observed at all times. A patient's safety should be of utmost concern to all interns and staff. For more information, go to: http://kpnet.kp.org:81/california/qmrs/ps/

4.02 Provision of Services by a Pre-Masters Intern and Patient Consent

The title of a pre-master's intern in Social Work is "Social Work Intern." The title of a pre-master's intern in Marriage and Family Therapy is "Marriage and Family Therapy Intern." The title of a pre-master's intern in Counseling is "Counseling Intern." Each intern must clearly identify their title at the first meeting with any patient or potential patient. The intern must also inform the patient or patient's guardian of the intern's last day of training and the name of their supervisor.

The intern must document in the patient's electronic record that the patient received this information and that the patient gave (or refused to give) their consent to be seen by the intern. The electronic medical record "dot phrase" used for documenting patient consent in clinical progress notes is ".traineeinformedconsent." This dot phrase signifies that:

- *"The patient was informed that the undersigned (***) is a (***) working under the supervision of *** and other licensed staff members in the Department of ***, Kaiser Permanente Medical Group, Inc. The patient agreed to receive services by the undersigned."*

Interns are also required to document ongoing patient consent and must add the above dot phrase within all subsequent clinical progress notes.

In addition to the above electronic charting, the intern may complete a "Notice of Provision of Mental Health Treatment Services by a Pre-Master's Intern" (Appendix E) and provide it to the patient and/or guardian for their reference. A hard copy of this provision may be printed for office visits, or a digital copy may be sent electronically through the patient's medical record secure message system.

Patients may refuse therapy or request to be seen by a licensed staff member. In such cases, the intern must document the patient's refusal in the electronic chart, noting that treatment was explained, alternative treatment options were offered, and that the consequences of declining treatment were discussed.

Any misrepresentation of professional identification (for example, as a licensed practitioner) is a violation of California state law, Kaiser Permanente policy, and the ethics code.

Provision of Mental Health Services in Languages Other than English

Interns who are fluent in languages other than English and opt to provide mental health services in that language are required to establish competency in that language by taking the bilingual assessment through the NCAL Bilingual Employee Program at Kaiser Permanente. Interns are not eligible to receive bilingual pay differential.

Department managers can obtain the Request for Bilingual Assessment form by emailing Elizabeth.F.Lavan@kp.org. Department managers should also contact Debbie Ortiz or Rachel Manansala to obtain cost center information for the Mental Health Training Program (MHTP) in order to ensure that the cost for bilingual assessment is recharged to MHTP. The cost for bilingual assessment is covered by MHTP when it is requested for doctoral interns, practicum externs, and pre-master's interns.

4.03 Notification to Supervisor Regarding Treatment of a Minor

Pursuant to California AB 1808, as an unlicensed provider, a mental health intern is required to notify their supervisor before or after any visit in which the intern treats a minor aged 12-17 years old, individually or in a group session, regardless of whether the minor is accompanied by a parent or guardian. This notification must occur within 24 hours, in writing, unless the intern believes the minor to be a danger to self or others. If a danger is present, the intern must notify their supervisor verbally during the session or immediately after the session. Management will determine an appropriate workflow to ensure that this requirement is met, and the intern is expected to adhere to department guidelines.

4.04 Signing Legal Documents as Witnesses for Patients

Interns may not sign wills, power of attorney forms, or other legal documents as witnesses for patients or their families. A request to act as a witness to a document should be courteously, but firmly, refused. In addition, interns may not sign forms, such as state disability forms, which require

the signature of a licensed psychologist or psychiatrist.

4.05 Responding to Legal Documents

Receipt of a subpoena, a summons from a court, a request to examine a patient's medical record or otherwise obtain information from it, or a letter from a lawyer concerning a patient, should be reported immediately to the training director and the intern's supervisor. Interns are not to respond to any requests for documents without explicit instructions from the supervisor(s) and/or training director.

4.06 Medical Record Confidentiality: CMIA and HIPAA

All interns must abide by standards set forth by the California Confidentiality of Medical Information Act (CMIA) and by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). See Obligations Regarding Confidentiality CA 1.09, which is located under HR Policies in MyHR.

Patient information is confidential and protected by law. Accessing the medical records of patients other than those treated by the intern is strictly prohibited and grounds for termination. Medical record confidentiality laws also prohibit the intern from accessing the chart(s) of their own family member(s).

Patient or chart information cannot be released to anyone without the consent of the patient or as authorized by law. The intern should not discuss patient care matters with investigators or attorneys without notice to and in the presence of attorneys representing Kaiser Permanente. The KP Medical-Legal Department is available for consultation.

In the event of a privacy breach or potential breach, the intern is expected to inform the supervisor, the training director, and/or a department manager immediately. Failure to comply with this expectation may result in remedial or corrective action up to and including termination.

4.07 Responsible Use of Artificial Intelligence (AI)

AI-based tools that have been reviewed and explicitly approved by Kaiser Permanente Policies may be used by interns for non-clinical purposes (https://about.kaiserpermanente.org/expertise-and-impact/public-policy/our-key-issues/artificial-intelligence). If an AI tool is required as part of the training curriculum, then interns are expected to use it. AI tools that have not been approved for use by KP are strictly prohibited. When using AI tools, interns must promptly report any concerns, errors, or unexpected results to their primary supervisor and/or training director.

Interns must adhere to all Kaiser Permanente Northern California (KPNC) and HIPAA data privacy policies including, but not limited to, maintaining secure access and reporting any potential breaches. Any use of content generated by AI tools must involve direct oversight by the intern (i.e., "human in the loop"). AI-generated content should never be used to replace clinical judgment and decision-making. Decisions about using AI tools at any point during the training program are based on KP's principles for responsible use: privacy, reliability, positive outcomes, transparency, equity, designed for both patients and KP staff, and building on trust (https://about.kaiserpermanente.org/news/ai-in-health-care-7-principles-of-responsible-use).

4.08 Electronic Charting and Patient Communication in KP HealthConnect

All Kaiser Permanente medical centers use the same electronic medical record database for charting called KP HealthConnect. Through HealthConnect, interns can access hospital records

and perform electronic charting as well as facilitate patient care coordination, such as consultation requests from other care providers. Interns are expected, whenever possible, to incorporate Lucet behavioral health outcomes data gathered electronically at each patient visit into treatment planning. Interns are responsible for receiving training in the use of these databases. In addition, mental health documentation must include only approved abbreviations and symbols.

The patient's treatment progress is to be documented at each contact. All patient care documentation should be sufficiently detailed and organized in accordance with departmental standards so that a staff member can provide appropriate and effective care to the patient. A well-maintained patient record allows a staff member, at a later date, to determine the patient's condition, as well as to review the diagnostic and therapeutic interventions that were implemented. Any changes in the condition of the patient and/or in the results of treatment must be documented. The medical record should enable another clinician to assume care of the patient at any time.

As treatment providers within a patient's care team, interns may receive electronic communication directly from patients through HealthConnect's secure messaging system. Interns must read and reply to all patient secure messages within 48 hours of the time during which they are scheduled to work. The intern is expected to create automatic out-of-office message replies in HealthConnect to ensure that patients are appropriately alerted to the intern's status for when the secure message will be read. If a patient secure message does not require a written reply and/or can be addressed via another form of patient contact (i.e., a telephone call), the intern must "done" the secure message within the timeline above.

Charting Requirements for Group Therapy Documentation

For interns who take part in psychotherapy group facilitation, at least one group note should be completed by the intern to denote their co-facilitation role using the following dot phrase:

- *"*** [trainee name/title, degree], under the supervision of *** [licensed provider name], participated in the facilitation of this group/class.*
  Electronically signed by @SIGNNR@"

4.09 Signing and Closing of Chart Documentation by Supervisor

All interns must complete patient documentation and progress notes in HealthConnect and route the encounter documentation to their clinical supervisor the same day of the patient visit. The supervisor will review the intern's documentation, enter the appropriate CPT code, and sign and close the encounter within 48 hours of the patient visit. During this process of documentation review, the supervisor must add the following documentation acknowledging their role as licensed supervisor for the intern providing services:

- *"Note reviewed with *** [trainee name/title, degree]. I agree with the diagnosis, treatment goals, treatment plan and recommendations.*
  Electronically signed by @SIGNNR@"

If an intern's documentation requires edits prior to note closure, the intern and supervisor should use the following workflow to ensure appropriate note closure timeliness:

1) The supervisor must communicate any documentation changes to the intern within 48 hours of the encounter.

2) The intern will complete edits and route the encounter back to the supervisor by the end of the next day that the intern works.
3) Should additional edits be warranted, the supervisor should provide feedback to the intern within 48 hours of receiving the revised documentation. The intern must complete the additional edits by the end of the next business day after which they receive additional feedback.
4) This documentation revision cycle may be repeated up to 3 times following the stated timeframes of initial note closure above.
5) If further edits are needed after the 3rd revision cycle, the supervisor should do what is needed to close the encounter and escalate intern documentation concerns to the training director to determine whether a focused competency plan is needed to support the intern.

Attaching to HealthConnect In-Baskets

It is acceptable practice for training faculty to periodically attach themselves to an intern's HealthConnect in-basket for monitoring the intern's progress on patient documentation and patient care communications. Supervisors and training directors should attach themselves to interns' in-baskets toward the end of the training year to ensure that all notes have been signed and closed prior to offboarding.

5. DUE PROCESS: REMEDIATION AND APPEAL PROCEDURES

The Pre-Master's Internship Programs' due process policy provides a framework to address the situation in which an intern is not meeting expected performance standards. It ensures that the internship program adheres to fair and unbiased evaluation and remediation procedures, and that the intern is given an opportunity to appeal the internship program's decisions. For all remedial actions, training faculty will maintain clear written records (e.g., memos and/or narratives of meetings) describing what transpired, including any plans that were implemented, with timeframes and outcomes.

5.01 Rights of Pre-Master's Interns

1. To be informed of the expectations, goals, and objectives of the internship program
2. To be trained by professionals who behave in accordance with the ethical guidelines of their respective professional organizations: the National Association of Social Workers (NASW), the American Association of Marriage and Family Therapists (AAMFT), the California Association of Marriage and Family Therapists (CAMFT), and the American Counseling Association (ACA)
3. To be treated with professional respect in keeping with their level of training
4. To have individual training needs identified and documented
5. To receive ongoing evaluation that is specific, respectful, and pertinent; and to be informed in a timely manner if they are not meeting program standards
6. To engage in ongoing evaluation of the internship program (the internship program will conduct formal surveys at least twice a year)
7. To utilize due process procedures for concerns related to performance standards so that the intern's viewpoint is considered, and so that the intern has an opportunity to remediate problems to successfully complete the program
8. To utilize grievance procedures to resolve non-evaluation-related problems and disputes that may arise during the training year
9. To be granted privacy and respect for one's personal life including respect for one's

uniqueness and differences

5.02 Responsibilities of Pre-Master's Interns

1. To function within the bounds of all state and federal laws and regulations, as well as NASW, AAMFT, CAMFT, or ACA ethical and professional practice standards
2. To adhere to the policies and procedures of KPNC, including KP's Principles of Responsibility (this information is presented during the orientation and onboarding period and can be accessed through the KPNC website, MyHR, located as a link at http://insidekp.kp.org/ncal/portal/, and/or by contacting a KPNC Human Resources consultant)
3. To adhere to the policies and procedures of the KPNC Pre-Master's Internship Programs as outlined in this manual; and to adhere to the policies and procedures of the intern's assigned work department or clinic
4. To attend and participate in didactic trainings and seminars, staff meetings, case conferences, and individual and group supervision meetings
5. To maintain professional, collegial interactions in the workplace, including offering constructive feedback and being receptive to feedback

5.03 Pre-Master's Internship Program Responsibilities

1. To provide information regarding laws, standards, and guidelines governing the practice of counseling/clinical social work and to provide forums to discuss the implementation of such standards
2. To ensure that faculty and staff engage with interns and each other in a respectful, professional, and ethical manner
3. To promote diversity and inclusion in the workplace
4. To provide high-quality clinical experiences, supervision, and didactic trainings and seminars
5. To provide opportunities for interns to offer input into the internship program, including within their supervisory experiences, through meetings with training directors, and in semi-annual written evaluations
6. To communicate internship program expectations and standards for evaluation, including how interns will be evaluated and by whom
7. To provide interns with written and verbal feedback in weekly supervision meetings and in quarterly written evaluations so that they may improve their skills and address competency problems in a timely manner
8. To communicate with interns' graduate schools about how they are progressing in training and whether they are meeting the minimum levels of achievement; and to inform the interns' graduate schools of any remedial actions taken regarding their performance
9. To implement due process and grievance procedures for problems related to intern competencies and professional functioning, program standards, and interpersonal disputes; and to allow interns sufficient time to appeal decisions with which they disagree
10. To make decisions about intern remediation, probation, suspension, and termination utilizing multiple sources of information; to develop remediation plans for performance deficiencies with timeframes; and to clearly communicate to interns the consequences of not correcting the deficiencies
11. To make accommodations for special training needs for interns who qualify under the American with Disabilities Act

5.04 Definition of Problematic Behavior

A Problematic Behavior interferes with intern professional competence and is defined by:

a) An inability or unwillingness to acquire and integrate professional standards into one's repertoire of professional behavior;
b) An inability to and/or unwillingness to acquire professional skills to reach an acceptable level of competence; and/or
c) An inability and/or unwillingness to control personal stress, psychological problems, and/or excessive emotional reactions which interfere with professional functioning.

Training faculty should use their professional judgement in determining when an intern's behaviors, attitudes, or characteristics have become problematic. Problematic Behaviors may include the following features:

a) The intern does not acknowledge, understand, or address the problem when it is identified.
b) The problem is not merely a reflection of a skill deficit, which can be rectified by clinical or didactic training.
c) The quality of services delivered by the intern is sufficiently negatively affected.
d) The problem is not restricted to one area of professional functioning.
e) A disproportionate amount of attention and time by training faculty is required to address the problem.
f) The intern's behavior does not change as a function of feedback, remediation efforts, and/or time.
g) The behavior has potential legal or ethical ramifications if not addressed.
h) The behavior potentially causes harm to patients.
i) The behavior negatively impacts the public view of Kaiser Permanente.
j) The behavior negatively impacts the training cohort or clinic staff.

5.05 Informal Discussion

The first step in the due process procedure is Informal Discussion which is used to address competency or behavioral concern(s) that do not rise to the level of a Problematic Behavior. The intern's supervisor is responsible for providing the intern with feedback about their progress during regularly scheduled supervision meetings throughout the year. If a concern arises, the supervisor should inform, advise, and/or coach the intern to enable them to successfully address the concern. The supervisor may also choose to supplement the Informal Discussion with a Focused Competency Guidance Plan (see Section 5.06) to help organize the actions and behaviors that the intern needs to address for the identified concern(s). The intern should be given a timeframe in which to correct the concern(s), and the intern may be provided with additional support over subsequent supervision meetings as part of the informal remediation plan. Any staff member who observes the intern to be out of compliance with a policy or procedure should inform the intern's supervisor or the training director. The intern's supervisor and/or training director will document their discussion(s) with the intern and any informal remediation plans in their supervision notes. These notes <u>will not</u> become part of the intern's official training file.

5.06 Focused Competency Guidance

A Focused Competency Guidance Plan (Appendix C) is a structured support mechanism designed to assist the intern in gaining skills associated with specific areas of competency deficit. Focused Competency Guidance is typically initiated in the following situations:

1) As part of informal remediation, supplementing an Informal Discussion that takes place during supervision at any time during the training year (see Section 5.05);
2) As part of remediation of unmet competency expectations due to a rating(s) falling below minimum expectations on the intern's competency evaluation form provided by their graduate school (see Section 3.05); or
3) As an outcome of formal due process procedures following a Formal Notification and Hearing (see Section 5.07).

Focused Competency Guidance Plans contain an outline of measures to be undertaken to remediate unmet competency expectations which includes, but is not limited to, additional didactic training, closer mentoring, structured readings, and simulated clinical practice. Focused Competency Guidance Plans may also implement schedule modification, which includes several possible and concurrent courses of action such as: (a) increasing the amount of supervision, either with the same or different supervisor(s); (b) changing the format, emphasis, and/or focus of supervision; (c) recommending personal psychotherapy; (d) reducing the intern's clinical or other workload; and/or (e) requiring specific academic course work.

Focused Competency Guidance Plans should include a timeline for reassessment of the identified concerns. When all unmet competency and performance standards have been rectified, the supervisor, in consultation with the training director, will remove the intern from Focused Competency Guidance and indicate the date of successful completion on the remediation plan document (Appendix C).

Focused Competency Guidance Plans must be signed and dated by the supervisor and intern during the initial and follow-up meetings. When Focused Competency Guidance Plans are part of an Informal Discussion, the supervisor will provide the intern with a copy of the plan, and it will not become part of the intern's training file. When Focused Competency Guidance Plans are triggered by ratings below minimal competency expectations on the intern's evaluation form or as part of formal due process procedures initiated with a Formal Notification and Hearing, the supervisor and training director will provide the intern and the intern's graduate school with copies of the plan, and a copy of the plan will also be placed in the intern's training file.

5.07 Formal Notification and Hearing

If an intern's professional conduct, professional development, or competency issues persist even after an Informal Discussion; or if the intern is demonstrating major competency deficits associated with not meeting minimum expectations on their graduate school's competency evaluation form; or if the intern demonstrates a Problematic Behavior at any point in the training year, then formal due process procedures will be initiated as follows:

1) The intern's supervisor or other concerned staff member(s) will first consult with the training director to discuss the issue. The training director may interview others with relevant information and/or may seek the guidance of HR administrators or the department manager. The training director will notify the intern in writing that a performance or behavioral concern has been raised to the level of formal review and that a Hearing will be held.
2) As soon as possible, but no later than ten (10) business days after the intern receives a Notice of Hearing, the training director (or their designee) will appoint a Hearing Committee and schedule a Hearing. Every effort will be made to expedite the committee formation and hearing process. The committee will be composed of no fewer than two members, typically

the training director and the supervisor. Depending on the scope and seriousness of the issue, the Hearing Committee may also include other members of the training faculty, departmental staff, and/or an HR consultant. The intern may also invite any appropriate licensed KP staff member to attend.

3) At the Hearing, committee members will discuss the competency issue(s) fully, openly, and candidly with the intern. The intern has a right to dispute or explain the concern(s) presented and may provide a written statement or supporting materials of their own. Within five (5) business days from the completion of the Hearing, the committee will determine an Outcome, and the training director and supervisor will present the Outcome to the intern. Possible hearing outcomes are as follows:
    a) The intern was found to be meeting minimum competency expectations and conduct standards, and no further action is needed.
    b) The intern has demonstrated competency, performance, and/or conduct concerns, but they were not significant enough to warrant formal remediation. The concerns will be monitored according to the Informal Discussion process (see Section 5.05).
    c) The intern has demonstrated minor competency deficits. To address these deficits, the intern will be placed on a remediation plan called “Focused Competency Guidance” (see Section 5.06).
    d) The intern has demonstrated major competency deficits. An intern with serious competency, performance, and/or conduct problems may be placed on Probation, which is also a form of remediation (see Section 5.09).
    e) The intern has exhibited Problematic Behavior(s), and associated major competency deficits, involving potential harm to a patient, gross misconduct, legal violations, or serious policy or ethical code violations (see Section 5.04). Any intern demonstrating such behaviors may be suspended from the internship program. The training director and training faculty will follow KPNC HR policies in this situation.

5.08 Outcome of the Hearing

The training director and supervisor will communicate the Outcome of the Hearing to the intern both verbally and in writing. The intern will be presented with an “Acknowledgement of Hearing Notice” for outcomes resulting in 1) no further action/return to routine supervision or 2) ongoing monitoring as part of an Informal Discussion, or 3) Focused Competency Guidance.

The essential components of an Acknowledgement of Hearing Notice are:

1. Date of the Hearing and names of the participants
2. Description of the intern’s competency deficits and/or performance issues and date in which the concerns were first brought to the intern’s attention
3. Identification of the targeted competency area(s)
4. Decision of the Hearing Committee with regard to the competency concerns and whether a remediation plan was recommended
5. When Focused Competency Guidance is recommended, an outline of measures to be undertaken to remediate unmet competency and performance concerns include, but are not limited to, schedule modification, provision of opportunities for extra supervision, attendance at additional seminars and/or other training activities, and/or recommendations of training resources (see Section 5.06)
6. Criteria and procedures for determining whether the problem has been adequately addressed
7. Consequences for unsuccessful outcome (which may include the initiation of Probation)

8. Timeline for Focused Competency Guidance Plan completion

For an outcome resulting in Probation, the intern will be presented with a "Letter of Warning" (see section 5.09). For an outcome resulting in Suspension, the intern will be presented with a "Suspension Letter" (see section 5.10).

The intern, training director, and department manager (if appropriate) will be required to sign the letter or notice. A copy of the document will be provided to the intern and to the intern's graduate school and will be placed in the intern's training file. If an intern is dissatisfied with the Hearing Committee's decision, the intern may appeal the decision by following the Appeal Procedure found in Section 5.11.

5.09 Probation

Interns who exhibit major competency deficits or other serious performance or conduct concerns, or who have not remediated identified concerns after a Focused Competency Guidance Plan may be placed on Probation. The decision to place an intern on Probation is made by the Hearing Committee; or in the case of an intern who is still not meeting minimum levels of achievement at the time of a Focused Competency Guidance Plan review, by the training director and supervisor in consultation with the department manager, other training faculty, and HR administration. Probation will include more closely scrutinized supervision for a specified length of time. The intern's graduate school will be notified of the Probation plan determination as soon as possible.

To initiate Probation, the training director and supervisor, with input from other training faculty, the department manager, and HR consultant, will compose a "Letter of Warning" to the intern outlining the internship program's concerns. This letter will also describe the consequence(s) of the intern's failure to show immediate and substantial improvement in the identified competency areas within the planned timeframe.

The essential components of a **Letter of Warning** are:

1. Date of the Hearing and names of participants (if applicable)
2. Description of the intern's competency deficits and/or performance issues and date on which the concerns were first brought to the intern's attention
3. Identification of the targeted competency area(s)
4. Additional reasons for probation, if applicable (see KP National HR Policy on Corrective/ Disciplinary Action, NATL.HR.014):
    a. Severity of the violation
    b. Number of violations and the dates that the violations occurred
    c. Whether the violation was part of a pattern or practice of improper behavior or non-compliance
    d. The intern's past history of non-compliance
    e. Whether the intern should have known the applicable policies, rules, or regulations
    f. Whether the violation was intentional or negligent
    g. Whether the action appeared to be committed for personal gain
5. Notification that this Probationary action may impact whether the intern's supervised hours will be found to be satisfactory
6. An outline of measures to be undertaken to remediate performance including any required Schedule Modification
7. Criteria and procedures for determining whether the problem has been adequately

addressed
8. Consequences of an unsuccessful outcome (may include extension of the Probationary period, Suspension, and/or Termination/Program Dismissal)
9. Timeline for Probation plan completion

The training director and primary supervisor will meet with the intern to review the Letter of Warning to ensure that the intern fully understands the terms of the Probation. The intern may invite any appropriate licensed KP staff member to attend the meeting. The intern will be given an opportunity to respond to the letter and to the group's concerns. The training director will inform the department manager, the HR consultant, and the intern's graduate school of the proceedings of the meeting. The intern and the intern's graduate school will be provided with copies of the letter and a copy will be placed in the intern's training file. If an intern is dissatisfied with the Probation decision, the intern may appeal it by following the Appeal Procedure (see Section 5.12).

During the Letter of Warning meeting, the training director and the supervisor will also present a Probation Plan (Appendix D) to the intern that includes a recording of the competency concern(s) and remedial actions recommended by the training director and training faculty. The plan must be signed and dated by the intern, the supervisor, and the training director. Copies will be provided to the intern and to the intern's graduate school, and a copy will be placed in the intern's training file. Within the time frame outlined in the plan, the intern's supervisor will evaluate the intern's progress and the supervisor will document their findings on the outcomes section of the plan.

When all unmet competency and/or performance standards have been rectified, the training director and supervisor, in consultation with other training faculty, the department manager, and the HR consultant, will remove the intern from Probation, and the training director and supervisor will indicate the date of successful completion on the plan document. If the group determines that insufficient progress has been made by the end of the probationary period, the training director will submit a written explanation of the group's concerns to the intern. In addition, the training director and department manager, with input from the intern's supervisor and the HR consultant, may recommend an extension of the Probation or may initiate Suspension. Copies of the written explanation letter will be provided to the intern and to the intern's graduate school, and a copy will be placed in the intern's training file.

5.10 Suspension

Suspension of an intern is a decision made by either the Hearing Committee; or in the case of an intern who is not meeting minimum levels of achievement at the time of the Probation Plan review, by the training director and department manager, with input from the training faculty, other departmental staff as appropriate, and HR administration. The intern's graduate institution will be notified of the Suspension as soon as possible. The intern may be suspended from all or part of their usual and regular assignments in the internship program.

Suspension of an intern may be initiated as a result of the following:

1. The competency area(s) and/or behavior(s) of concern indicate(s) a question of patient endangerment, gross misconduct, and/or criminal behavior. Factors to be considered include but are not limited to those listed in the Letter of Warning (see Section 5.09).
2. After the probationary period, the intern has not met expectations for improvement in the identified competency domain(s).
3. The intern has failed to comply with state or federal laws, KPNC and/or Pre-Master's

Internship Programs' policies and procedures, and/or professional association guidelines.
4. The removal of the intern from the clinical service is in the best interests of the intern, patients, staff, and/or the internship program.

To initiate Suspension, the training director and department manager, with input from the training faculty, other departmental staff, and HR administration, will compose a **Suspension Letter** to the intern which addresses the following:

1. Date of the Hearing and names of participants (if applicable)
2. Description of the intern's competency deficits and/or performance issues and dates on which the concerns were first brought to the intern's attention
3. Identification of violation(s), including corresponding competency area(s); additional factors to be documented include, but are not limited to, those listed in item four (4) of the Letter of Warning (see Section 5.09)
4. Notice of Suspension and expected duration

The training director, department manager, and supervisor will meet with the intern to review the Suspension Letter to ensure that the intern fully understands the terms of the Suspension. The intern may invite any appropriate licensed KP staff member to attend the meeting. The training director and department manager may either remove the intern temporarily from direct service activities due to concerns for the welfare of patients or may place the intern on an administrative leave of absence. The intern will be given an opportunity to respond to the concerns presented and to the Suspension decision.

The training director and/or the department manager will inform HR administration and the intern's graduate school of the proceedings of the meeting. The intern and the graduate school will be provided with copies of the Suspension Letter, and a copy will be placed in the intern's training file. If an intern is dissatisfied with the Suspension decision, the intern may appeal it by following the Appeal Procedure (see Section 5.12).

In the case of a suspension from direct service activities only, the training director and training faculty will develop a remediation plan following the procedures described in section 5.08 and utilizing the Probation Plan document (Appendix D). The intern may continue to participate in non-direct service activities such as individual and group supervision, case conferences, staff meetings, and didactic trainings and seminars as long as the intern's participation is productive for the intern and for the training cohort. The plan must be signed by the training director, primary supervisor, and intern. Copies will be provided to the intern and the intern's graduate school, and a copy will be placed in the intern's training file.

If all identified concerns are rectified within the agreed upon timeframe, the training director and department manager, with input from other training faculty, departmental staff, and HR administration, will determine when the intern can resume direct service activities under probationary monitoring until minimum levels of achievement are met. A new Probation Plan should be developed following the procedures described in Section 5.09 above.

In the case of a very serious violation, the training director and department manager, in conjunction with HR administration, may choose, with or without warning, to notify the intern that they have been placed on administrative leave from the internship program or to terminate the intern from the internship program.

5.11 Termination and Program Dismissal

Termination of an intern will be initiated if the competency area(s) and/or behavior(s) of concern indicate(s) a certainty of patient endangerment, gross misconduct, and/or criminal behavior on the part of the intern. Termination may also be invoked for any other egregious offense on the part of the intern, including but not limited to:

1. Violation of federal or state laws, including HIPAA and CMIA, and in which imminent harm to a patient either physically or psychologically is a major factor
2. Serious violation of KPNC policies, including Pre-Master's Internship Programs' policies and procedures or professional association guidelines
3. Serious violation of the NASW, AAMFT, CAMFT, or ACA ethical principles and code of conduct
4. Unprofessional, unethical, or other behavior that is otherwise considered unacceptable by the internship program
5. Attempts at remediation, after a reasonable period of time, have not rectified the competency problems
6. The intern is unable to complete the internship program due to serious physical, mental or emotional illness
7. Serious or repeated act(s) or omission(s) compromising acceptable standards of patient care

Termination involves the permanent withdrawal of all privileges associated with the KPNC Pre-Master's Internship Programs. The decision to dismiss an intern is not made lightly and is made by the training director, department manager, and HR consultant (as needed), with notice given to the intern's graduate school.

The intern will be informed of the decision in a **Termination Letter** that addresses the following:

1. Description of intern's competency deficits and/or performance issues
2. Identification of violation(s), including corresponding competency area(s) (and may include details listed in the Suspension Letter)
3. Notice that the intern is dismissed from the internship program and that some or all of the training hours were not successfully completed.
4. Expectation that the intern will complete all patient documentation prior to leaving the training site.

If the intern does not wish to appeal the termination decision, the intern may choose to voluntarily resign from the internship program.

5.12 Appeal Procedure

The purpose of the Appeal Procedure is to provide a mechanism by which all decisions made by the internship program regarding an intern's performance evaluations and remediation plans, as well as an intern's status in the internship program, can be promptly and fairly reviewed. Interns will not be subject to reprisal in any form as a result of participating in the Appeal Procedure.

In order to challenge an internship program decision, the intern must notify the training director in writing as soon as possible after receipt of the decision. This written notification shall include the following information:

1. Name of intern
2. Current date
3. Date and description of decision under dispute
4. Explanation of intern's disagreement with decision, including supporting information
5. Description of the intern's objective/goal for resolving the dispute

As soon as possible, but no later than fifteen (15) business days after receipt of the intern's written notification, the training director (or their designee) will appoint a Hearing Committee. Every effort will be made to expedite the committee formation and hearing process. The Hearing Committee:

1. Will be composed of no fewer than three members
2. Will include individuals from the training faculty, departmental management, and HR administration as appropriate
3. May include any appropriate licensed KP staff members requested by the intern
4. In no case shall any training faculty who has participated in the decision in question up to this point be a member of the committee

Once the Hearing Committee members have been appointed, a hearing shall be conducted within fifteen (15) business days. The intern has the right to hear all facts related to the concerns, as well as to present supporting materials of their own. The intern also has the right to dispute or explain the concerns presented.

Within ten (10) business days from completion of the hearing, the Hearing Committee will make a final decision. Decisions will be made by majority vote of the committee members and be submitted to the intern, the training director, and the intern's graduate school.

If an intern is dissatisfied with the Hearing Committee's decision, they may appeal the decision to the KPNC Director of Mental Health Training (or their designee), who will consult with management personnel including those who were not part of the committee.

The intern must submit their written appeal, along with a copy of the original written challenge to the KPNC Director of Mental Health Training (or their designee) within ten (10) business days from the date of the Hearing Committee's decision. This written appeal shall include the following information:

1. Name of intern
2. Current date
3. Date and description of Hearing Committee decision under appeal
4. Explanation of intern's disagreement and basis for appeal
5. Resolution sought

Within ten (10) business days after receipt of the appeal, the KPNC Director of Mental Health Training (or their designee) will review the decision along with the intern's appeal and either accept or reject the committee's recommendations.

If the KPNC Director of Mental Health Training (or their designee) accepts the Hearing Committee's recommendations, they will inform the training director who, in turn, will inform the intern, the supervisor, and the intern's graduate school of the decision. If the KPNC Director of Mental Health Training (or their designee) rejects the Hearing Committee's recommendations,

they may either refer the matter back to the Hearing Committee for further consideration (such as to gather more information) or make a final decision at that time.

The KPNC Director of Mental Health Training (or their designee) will inform the training director of any rescission. The training director will in turn inform the intern, the intern's graduate school, and the intern's supervisor and training faculty. The intern may appeal the KPN Director of Mental Health Training's final decision by contacting an HR consultant and the department manager.

6. DISPUTE RESOLUTION POLICIES

6.01 Pre-Master's Intern Grievance Overview

It is the goal of the KPNC Pre-Master's Internship Programs to provide a learning environment that fosters congenial professional interactions among training faculty and interns based on mutual respect. However, it is possible that situations will arise that cause interns to file grievances. This policy is intended to facilitate the prompt resolution of a problem identified by an intern as requiring attention. Interns will not be subject to reprisal in any form as a result of utilizing this grievance procedure.

6.02 Verbal Grievance Communication

If an intern has any disagreement with a supervisor, another staff member, a fellow intern, or a matter of program policy, they will be encouraged to communicate openly with the person involved, if possible, or with their own supervisor first about the issue. At any time before or during this process, the intern may discuss their concerns directly with the training director and/or a department manager.

The intern is responsible for communicating openly, specifically describing how they intend to gain satisfactory resolution to the problem. If the intern has chosen to address the issue with their supervisor, the supervisor is responsible for exploring the issue fully with the intern and offering ideas for resolving it. If the intern is dissatisfied with the outcome of the verbal discussion, they are directed to follow the procedure for Written Grievance Communication as outlined below.

6.03 Written Grievance Communication

If the Verbal Grievance Communication has been utilized and the issue has not been resolved to the intern's satisfaction, the intern may submit a written document to the training director and/or department manager (or designee), describing the grievance in detail. However, in no case shall any staff member who has participated in the Verbal Grievance Communication also participate in the review of the Written Grievance Communication.

As soon as possible, but no later than ten (10) business days from receipt of the written grievance, the training director and/or department manager(s) should meet with the intern (and supervisor, if appropriate) to discuss the issue. After this discussion, the training director and/or department manager(s) (or designee) will, if necessary, investigate and respond to the intern's grievance in writing within ten (10) business days. If the intern is dissatisfied with the outcome of the review of the Written Grievance Communication, the intern is directed to follow the procedure for Grievance Appeal as outlined below.

6.04 Pre-Master's Intern Grievance Appeal

If the Verbal and Written Grievance Communication procedures have been utilized and the issue has not been resolved to the intern's satisfaction, the intern may file a written Grievance Appeal

with the KPNC Director of Mental Health Training and/or department manager(s). The KPNC Director of Mental Health Training may choose to appoint/designate the Assistant KPNC Director of Mental Health Training or a senior service area training director to review the appeal and render a decision.

The intern's appeal shall include the following information:

1. Name of intern and training location
2. Current date
3. Copy of the original written grievance
4. Explanation of intern's disagreement with the decision and basis for appeal
5. Resolution sought

As soon as possible, but no later than ten (10) business days from receipt of the grievance appeal, the KPNC Director of Mental Health Training (or their designee) and/or department manager(s) should meet with the intern to discuss the issue. In no case shall any staff member who has participated in the grievance processes up to this point also participate in the review of the appeal. After the discussion, the KPNC Director of Mental Health Training (or their designee) and/or department manager(s) will, if necessary, investigate and respond to the intern's appeal in writing within ten (10) business days.

Before responding to the intern, the KPNC Director of Mental Health Training (or their designee) will meet with the training director and/or department manager and supervisor to review the dispute and discuss the issues involved. Additionally, before responding, the KPNC Director of Mental Health Training (or their designee) will review their findings with the intern's graduate school field placement coordinator and an HR consultant and/or KP legal counsel, as appropriate.

6.05 Training Supervisor Dispute Resolution Overview

KPNC provides processes to secure impartial and prompt resolutions of disputes among staff members. If a training supervisor has a disagreement with another supervisor or intern, or wishes to dispute a matter of program policy, they should utilize the process outlined below. Training supervisors will not be subject to reprisal in any form as a result of participating in this dispute resolution process.

At any time, the training supervisor may discuss their concerns about the issue directly with a Human Resources consultant. If the issue pertains to the department but not to the training program, the supervisor is directed to follow KPNC policy and to contact their local HR consultant for guidance.

6.06 Supervisor Dispute Resolution Procedure – Step 1

The training supervisor should first discuss the problem with the person with whom the problem is identified, if possible. The supervisor is responsible for specifically describing how they intend to gain satisfactory resolution in the area identified.

If the initial discussion proves unsatisfactory to the training supervisor, they should address the issue fully with the training director. The training director is responsible for offering ideas for resolving the issue and for providing the supervisor with a time estimate in which to expect a response if one cannot be provided immediately. The training director will then gather any information needed and respond to the supervisor verbally or in writing. The response will be

given in a timely manner, usually within ten (10) business days after the discussion.

6.07 Supervisor Dispute Resolution Procedure – Step 2

If Step 1 has been completed and the issue has not been resolved to the training supervisor's satisfaction, the supervisor may contact the department manager and the KPNC Director of Mental Health Training (or their designee) and detail their concerns. The department manager and the KPNC Director of Mental Health Training (or their designee) should follow the procedure outlined in Step 1, including meeting with the supervisor, establishing a timeframe for response, conducting any necessary investigation, and responding to the supervisor. The response should be given within twenty (20) business days after the discussion.

7. TRAINING FACULTY ROLES AND RESPONSIBILITIES

7.01 Supervisor Qualifications and Responsibilities

- Minimum of two (2) years of experience as a licensed psychologist, LCSW, LMFT, or LPCC preferred
- Minimum of one (1) year of employment at the training site preferred
- Relates to interns, clinic colleagues, and department managers in a collegial and professional manner that is conducive to a positive learning environment
- Respects individual differences among interns, including cultural or individual diversity issues
- Models ethical, professional behavior including recognition of and respect for differences among patients and colleagues
- Models commitment to the mission of Kaiser Permanente
- Models commitment to the mission and training model of the KPNC Pre-Master's Internship Programs
- Maintains agreed upon times for supervision and consultation
- Clearly communicates expectations of interns and gives appropriate timely feedback regarding their progress
- Consults regularly with other professional staff who may have contact with the interns and provides knowledge about their competencies and general performance
- Contacts the training director when questions or concerns arise regarding interns' program requirements
- Attends all program-related meetings and keeps abreast of any changes in the internship program that may impact the interns and communicates these in a direct, timely fashion to reduce any inconvenience to the interns
- Follows all outlined grievance policies and due processes if problems arise concerning interns
- Supervisors must be in good standing within their department and must be approved by both the training director and departmental management

7.02 Training Director Qualifications

- Must work a minimum of 32 hours per week
- Minimum of five (5) years of experience as a licensed professional preferred
- Minimum of two (2) years of experience as a primary supervisor preferred
- Minimum of one (1) year of employment at the training site preferred
- Member of a professional association (i.e., APA, NASW, AAMFT, CAMFT, ACA)

recommended
- Evidence of effective, collaborative working relationships with interns, training faculty, clinic management teams, and KPNC local and regional administration
- Demonstrated abilities in leadership
- Commitment to ongoing learning and innovation in mental health treatment
- Demonstrated abilities in teaching and scholarship preferred (i.e., publications, presentations, course instruction, workshops, intern seminars, etc.)
- Department managers may advise on training director appointments; however, the KPNC Director of Mental Health Training conducts the interviews and makes the final selection

7.03 Training Director Responsibilities

- Reports to KPNC Director of Mental Health Training
- Attends all region-wide, pre-master's internship program-related meetings
- Coordinates and directs the training supervisors
- Ensures that KPNC Pre-Master's Internship Programs policies and procedures are followed and a high standard of training is maintained
- Ensures that support and resources for interns and supervisors are provided
- Organizes the interview and selection process for new candidates
- Ensures timely quarterly or semi-annual performance evaluations of interns
- Ensures timely evaluations of supervisors, utilizing the Pre-Master's Intern Evaluation of Supervisor
- Participates with department managers in decision-making on issues concerning intern schedules, placements on teams, and the candidate interview process
- Implements modifications to the internship program per feedback from interns and faculty
- Ensures that all termination and exit procedures are conducted at the conclusion of the training year, including returning all KP assets, completion of required exit survey sent by region, and conducting exit interview (optional -- sample exit interview questions can be found in Appendix G)
- Ensures availability and coverage during the interviewing of prospective candidates, during the onboarding process of incoming interns and at other crucial periods of the training year

7.04 Administrative Hours for Training Faculty – KPNC Mental Health Training Standards

- All supervisors are allocated a minimum of 1 hour per week for each intern they supervise for chart review and note closing. This administrative time is in addition to the 1 hour face-to-face individual supervision time for each intern.
- All training directors are allocated 3½ hours per week including office hours of administrative time, funded by the local medical center, to manage their programs.
- Each training site receives administrative staff support hours funded by the KPNC Mental Health Training Programs.

At certain points in the year, including for interviews and on-boarding, training directors may need additional administrative time to effectively manage their internship programs. Department managers are asked to grant training directors schedule flexibility and to allow the necessary accommodations. training directors, in turn, are asked to work closely with their department managers to ensure minimal impact on patient care and are expected to engage in their usual clinic duties as much as possible during these times of the year.

7.05 Training Program Administrative Meetings

The following training staff meetings occur regularly throughout the training year:

Weekly
Informal meetings among training director and supervisors

Monthly
Formal training faculty meetings (minutes are recorded) among training director and supervisors to discuss interns' performances and issues related to the overall program as well as develop plans and make decisions related to the administration of the internship program (includes review of due process and grievance procedures at the beginning of each training year)

Semi-Annually
Meetings of all training directors across the Northern California region with the KPNC Director of Mental Health Training to discuss new internship program developments, curriculum changes, and other internship program administrative matters

7.06 Maintenance of Pre-Master's Intern Training Records

The training director and program coordinator should establish a file for each intern and review all documents prior to filing them. Training files must be treated confidentially, retained indefinitely, and stored securely for future reference and credentialing purposes. Files are maintained in either hard copy or in e-file format. If/when the training director and program coordinator run out of storage space for hard copy files, these files are scanned and archived as e-files and stored on a shared computer drive.

The training file should include the following documents:

1. Resume
2. Letters of Recommendation
3. Values Statement signed by the intern
4. Copy of the graduate school training agreement, signed by all parties
5. Signed Student Checklist document attesting to completion of student pre-admission screenings
6. Graduate school evaluation forms (Quarterly or Semester)
7. Copies of all completed/signed summary of experience logs (Weekly/Quarterly or by Semester)
8. Documentation of any grievances, remediation, corrective actions, or due processes filed by or on behalf of the intern, including the conclusions of such actions
9. Any relevant correspondence pertaining to the intern

**It is recommended that interview notes be kept in a separate file.*

Upon advance request, interns may inspect their local training file in the presence of the training director or a designated representative. The intern may also request a correction of a record by submitting a request to the training director who, in consultation with the department manager, will notify the intern whether the request has been granted or denied. The training director will work with the KPNC Director of Mental Health Training and follow the KPNC Director's recommendations if the intern expresses any dissatisfaction with their record. The training director may also consult the graduate school field placement coordinator.

8. KAISER PERMANENTE HUMAN RESOURCE POLICIES

8.01 Finding Policies on inside KP and Contacting HRSC

The following are a sampling of KPNC's HR policies that pertain to interns. The full Principles of Responsibility, which is Kaiser Permanente's code of conduct, can be accessed using this link: https://wiki.kp.org/wiki/display/por/Home. To speak to a representative directly about any KPNC policy, interns may contact the Human Resources Services Center (HRSC), at 1-877-457-4772.

- Harassment-Free Work Environment
- Equal Employment Opportunity (EEO)
- Accommodation for Disabilities (ADA)
- Drug Free Workplace
- Social Media Policy

In addition, interns are expected to comply with all health and safety employment requirements, such as an annual TB test, annual flu vaccination (or declination of vaccination), compliance training, and safety training. Failure to observe these regulatory standards may result in administrative leave until the standards are met.

8.02 KP Non-Discrimination and Harassment-Free Workplace Policies

The KPNC Pre-Master's Internship Programs are based on merit, qualification, and competence. Training practices are not unlawfully influenced or affected by a person's ethnicity, religion, color, race, national origin, ancestry, physical or mental disability, veteran's status, medical condition, marital status, age, gender, or sexual identity. This policy governs all employment, including hiring, compensation and benefits, assignment, discharge and all other terms and conditions of the internship. Additionally, it is the policy of KPNC to provide a work environment free of sexual and other forms of unlawful harassment. This policy applies to employees, applicants for employment, and independent contractors, and includes managers, supervisors, physicians, co-workers, and non-employees.

8.03 Professional Appearance Policy

All interns who work in clinical and non-clinical areas are expected to follow the Professional Appearance policy and project a well-groomed, professional image in order to:

- Allow for identification by patients, visitors, and other staff at your medical centers
- Provide safe patient care
- Protect staff from personal injury
- Demonstrate respect for Kaiser Permanente members and colleagues
- Represent Kaiser Permanente in a professional and business-like manner while recognizing we are a diverse community
- Enhance security within the medical centers and clinics

**Exceptions to dress standards must be approved by senior leadership at each medical center and/or clinic.*

Name Badges:

- Name Badges must be always worn and displayed above the waist and must be easily visible to patients, staff and other visitors to the medical centers and clinics.

- Name Badges must not be altered or covered and kept current and in good repair. No attachments or pins are allowed, unless they are KP or healthcare related.
- If an intern affixes their badge to a necklace lanyard, the lanyard must be consistent with Kaiser Permanente's brand (i.e., Thrive, KP HealthConnect, etc.). No other branding is allowed (i.e., professional sports teams, political messages, schools, etc.).

Workplace Professional Attire and Professional Appearance

- The general dress code for all services is "Workplace Professional." Informal clothing such as t-shirts, tank tops, shorts, sweatshirts, sweatpants, jogging clothes, and hats are not permitted. Dress should be conservative and should not have the intentional or unintentional effect of distracting the patient from the task of therapy and assessment.
- Earrings and jewelry that pose a possible risk of injury and excessive piercing (including facial piercings), are not permitted.
- Jeans (denim) of any kind or color are not permitted.
- Hospital-provided scrubs are acceptable only for direct patient care roles where required by job description.
- Strong fragrances are prohibited.
- Shoes which are inappropriate to the extent that they put an individual at risk for needle sticks, heavy objects falling on their feet or expose them to blood and body fluids, shall not be worn. Any individual involved in direct patient care may not wear shoes that expose their toes and/or heels.
- All staff must keep their hair clean and neat. Rainbow colored hair (i.e., blue, green, purple or any combination of color) is not permitted. Facial hair is to be clean, neat, and well-groomed.
- If a laboratory coat is issued to an intern, the intern should wear the coat when in the hospital, Emergency Department, or other inpatient setting. Lab coats are to be returned at the end of the training year.
- If a pager is issued to an intern, the intern is expected to carry it at all times when on site or traveling between sites. Pagers are to be returned at the end of the training year.
- Local polices at each medical center or clinic may include demands on dress that exceed the above. Interns are expected to follow the professional appearance code requirements in their respective medical center or clinic.

**Please Note: the above expectations remain in place even when working virtually throughout the training year*

Workplace Attire in Specialty Clinics

While working in certain departments (such as Behavioral Medicine), interns who are placed in these departments are to be provided with the same attire as other mental health clinicians who work in these departments. For example, in departments where mental health staff typically wear white coats, interns are asked to be provided with the same attire and apparel as their supervisory staff.

An intern who does not meet the standards of Professional Appearance will be counseled and may be instructed to change clothing (including being sent home to change clothing, if necessary). If an intern is counseled more than once about professional appearance, then the supervisor will inform the training director who will begin remediation. Failure to follow the remediation plan may result in dismissal. Exceptions to this standard will be made for bona fide religious activities on a

case-by-case basis.

8.04 Social Media Policy

Members of the internship program (both interns and faculty) who use social media (e.g., Instagram, Snapchat, Facebook, Twitter, etc.) and other forms of electronic communication should be mindful of how these communications may be perceived by patients, colleagues, training faculty and others. Interns and faculty should make every effort to minimize material that may be deemed inappropriate for a mental health professional in a training program, including derogatory comments about the employer, inappropriate language, etc. In these mediums, all interns and faculty are expected to abide by professional guidelines (e.g., APA, NASW, etc.) related to ethics and conduct.

To this end, it is recommended that all members of the internship programs set their security settings to "private" and consider limiting the amount of personal information posted on these sites. Patients should never be included as part of one's social network, and any information that might lead to the identification of a patient or compromise patient confidentiality in any way is prohibited. If an intern is reported doing or is depicted on a social media site or in an email as doing something unethical or illegal, that information may be used by the training program to determine corrective action, up to and including termination. Greetings on voicemail services and answering machines used for professional purposes should be thoughtfully constructed as directed by supervisors.

8.05 HR Job Codes and Titles for Mental Health Trainees

The following chart shows the Primary HR Types for KPNC Mental Health Trainees. It is important that trainees are coded correctly, as the codes determine whether KP patients are charged co-pays for their treatment.

MHTP Trainee Job Code	MHTP Trainee Job Title	Primary HR Type Code	Primary HR Type "Job Title"
----	Psychology Practicum Extern	DU-Student	Psychologist Trainee
----	Pre-Master's Mental Health Intern	DU-Student	Mental Health Trainee
025420	Psychology Doctoral Intern	BP	Psychologist Trainee
025430	Psychology Postdoctoral Resident	BP	Psychologist Trainee
025471	Neuropsychology Postdoctoral Resident	BP	Psychologist Trainee
025472	Associate Post-Masters MH Fellow [Associate Clinical Social Worker (ASW)]	CI	Psychiatric Social Worker Trainee
025472	Associate Post-Masters MH Fellow [Associate Marriage & Family Therapist (AMFT)]	DG	Marriage & Family Therapist Trainee
025472	Associate Post-Masters MH Fellow [Associate Professional Clinical Counselor (APCC)]	GC	Assoc Prof Clinical Counselor

Appendix A

Kaiser Permanente Mental Health Training Program Values Statement

Respect for diversity and values different from one's own is a core tenet of the Mental Health Training Program at Kaiser Permanente (KP). This value is also consistent with the guidelines set forth by the American Psychological Association's Ethical Principles and Code of Conduct (2002) and reflected in the Standards of Accreditation set forth by the APA (APA, 2016). Mental Health interns within Kaiser Permanente provide services to a diverse patient population, often consisting of members of social groups different from their own. As such, we strive to ethically and effectively treat a wide range of patients from varying social backgrounds.

The Kaiser Permanente Mental Health Training Program (which includes postdoctoral residencies, doctoral internships, post-master's fellowships and psychology externships, and pre-master's internships) exists within multicultural communities that contain people of diverse ethnic, racial, and socioeconomic backgrounds; national origins; religious, spiritual, and political beliefs; physical abilities; ages; genders; gender identities, sexual orientations, physical appearance and more. At KP, we believe that training programs are enriched by our collective openness to learning about others who are different from ourselves, as well as striving for acceptance of others. Mental health training faculty as well as interns agree to work together to create training environments characterized by respect, trust, and safety. Additionally, training faculty and interns are expected to be supportive and respectful of all individuals, including patients, staff, and peers, regardless of differences in background or worldviews.

The Kaiser Permanente Mental Health Training Program recognizes that no individual is free from all forms of prejudice or bias. Along these lines, we anticipate that each training environment will evidence a wide range of beliefs, behaviors, and attitudes. All members of the training programs (staff and interns alike) are expected to be committed to the values of respect, equity, and inclusion. Furthermore, they are asked to demonstrate critical thinking and self-examination so that biases may be evaluated in light of scientific data and standards of the profession. Therefore, faculty and interns alike are expected to exhibit a genuine desire to examine their own assumptions, attitudes, values, and behaviors and to work effectively with "cultural, individual and role differences including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status" (APA Ethics Code, 2002, Principal E, p. 1063). In short, all members of the training program are expected to be willing to examine their own values and to gain knowledge and skills regardless of their beliefs, attitudes, and values.

Over the course of the training year, training faculty will engage in and model self-disclosure and introspection with their interns as appropriate. This can include discussions around personal experiences, attitudes, beliefs, feelings, opinions, or personal histories. All members of the training program are committed to lifelong learning relative to multicultural competence. When deemed appropriate, self-disclosure is done in the service of optimizing patient care and improving professional knowledge, skills, and attitudes.

In summary, all members of the Kaiser Permanente Mental Health Training Program are committed to a training process that facilitates the development of professionally relevant knowledge and skills focused on working effectively with all individuals inclusive of demographics, beliefs, attitudes, and values. Members agree to engage in a mutually supportive process that examines the effects of one's beliefs, attitudes, and values on one's work with all clients. Such training processes are consistent with Kaiser Permanente's core values, respect for diversity and for values similar and different from one's own.

As an incoming mental health intern at Kaiser Permanente, it is the expectation that you:

- Show willingness to work with a wide range of patient populations and presentations often different from yourself
- Demonstrate respect for differing worldviews and value systems, even when they are in conflict with your own
- Work effectively and with respect with colleagues whose views may be different and/or in conflict with your own
- Within reason, you are expected to be willing to work with any patient who presents for treatment, except in cases where your personal physical safety is actively threatened or where *the clinical competence of both the intern and the supervisor* would compromise patient care.
- Seek out supervision, consultation, and training when issues around competency emerge pertaining to a particular population and/or presenting problem

I have read and agree to abide by Kaiser Permanente's Mental Health Training Program Values Statement.

Name: _____

Signature: _____

Date: _____

(Adapted from the Counseling Psychology Model Training Values Statement Addressing Diversity, Council of Counseling Psychology Training Programs)

KAISER PERMANENTE®

Appendix B

KAISER PERMANENTE NORTHERN CALIFORNIA
PRE-MASTER'S INTERNSHIP PROGRAMS IN SOCIAL WORK, MARRIAGE & FAMILY THERAPY, AND PROFESSIONAL CLINICAL COUNSELING

PRE-MASTER'S INTERN PREREQUISITES CHECKLIST

[Rev APR 2024]

Intern Name:	**Date:**
Training Year:	**Training Site:**
Primary Supervisor:	**Training Director:**
Team(s):	

Before any pre-master's intern sees patients in individual or group psychotherapy, they must have prior training in the areas listed below. The pre-master's intern, and supervisor and/or training director will document that these competencies have been met by completing the following table. The training director will then file the original prerequisites checklist in the pre-master's intern's training file.

Training Area	Date(s) of Training	Location of Training
1. Mental Status Examination		
2. Mandated Reporting (CPS, APS, etc.)		
3. Suicide/Homicide/Danger Assessment (Tarasoff, etc.)		
4. Ethics (confidentiality, HIPAA, professional boundaries, etc.)		
5. Psychopathology & Abnormal Psychology		
6. Theories & Practices of Psychotherapy		
7. Personality & Psychological Development		
8. Domestic Violence		
9. Chemical Dependency		

Name of Training Faculty Member who completed this form: _____

Appendix C

KAISER PERMANENTE® | Mental Health Training Program Northern California

PRE-MASTER'S INTERN REMEDIATION: FOCUSED COMPETENCY GUIDANCE PLAN

[Rev AUG 2026]

To be signed by the SUPERVISOR and the PRE-MASTER'S INTERN

Policy Statement:

Focused Competency Guidance is typically triggered when an intern demonstrates the need for improvement in any clinical competency domain(s), such as when the intern is exhibiting a minor competency deficit(s) that can be easily ameliorated by added training. Focused Competency Guidance may also be initiated at any point in the training program if competency concerns have been identified by the supervisor or other training faculty and it has been determined that structured support should be implemented prior to the next evaluation timepoint. During the third or fourth quarter of the training year, if an intern continues to exhibit competency deficits, the supervisor may choose to initiate Probation.

When initiation of Focused Competency Guidance is triggered by falling below minimum expectations on their competency evaluation or is an outcome of a Hearing in the formal due process procedures, the training director and supervisor will present the Focused Competency Guidance Plan below, identifying the competency element(s) to be targeted and the recommended remedial actions. The remediation plan will include a timeline for reassessment of the identified concerns. If the timeline calls for reassessment before the next evaluation timepoint, an assessment is undertaken at the appointed time, and follow-up remarks are detailed. This remediation plan must be signed and dated by the supervisor and intern during the initial and follow-up meetings with a copy provided to the intern and the intern's graduate school. A copy of the remediation plan will also be placed in the intern's training file.

The intern acknowledges that by signing this Focused Competency Guidance plan at the initial meeting, they understand that if Focused Competency Guidance is not successfully completed, some or all of the intern's supervised hours may not be counted (i.e., will be found to be unsatisfactory) from the date of the commencement of this plan.

Performance Evaluation Quarter and Training Year and/or Plan initiation Date:
Pre-Master's Intern Name (print):
Supervisor Name (print):

Statement of Plan Completion:

On _____ (date), _____ (intern name) successfully completed the Focused Competency Guidance Plan and is now meeting training program minimum competency expectations.

_____ _____

Supervisor Name (signature) Date

FOCUSED COMPETENCY GUIDANCE PLAN		
A. Competency Issues discussed during Informal Discussions or at Formal Hearing	**B. Recommended remedial actions**	**C. Reassessment status of actions/competency**

Timeline/Date of Next Assessment	**Pre-Master's Intern Signature & Date**	**Supervisor Signature & Date**
Initial Meeting	Signature:	Signature:
	Date:	Date:
Reassessment Meeting	Signature:	Signature:
	Date:	Date:
Reassessment Meeting	Signature:	Signature:
	Date:	Date:
Reassessment Meeting	Signature:	Signature:
	Date:	Date:

Appendix D

KAISER PERMANENTE® | Mental Health Training Program Northern California

PRE-MASTER'S INTERN REMEDIATION: PROBATION PLAN

[Rev AUG 2026]

To be signed by TRAINING DIRECTOR, SUPERVISOR, and PRE-MASTER'S INTERN

Policy Statement:

Probation is typically triggered when an intern fails to achieve timely and/or sustained improvement after completing a formal Focused Competency Guidance Plan or as an Outcome of a Hearing in formal due process procedures when an intern exhibits a major competency deficit(s).

To initiate Probation, the training director and supervisor, with input from other training faculty, the department manager, and an HR consultant, present the intern with a **Letter of Warning**. The training director and the supervisor will also present the intern with the Probation Plan below, which includes a recording of competency concern(s) and the recommended remedial actions. After the remediation plan is signed by all parties, copies will be provided to the intern and the intern's graduate school, and a copy will be placed in the intern's file.

Within the timeframe outlined in the Probation Plan, the intern's supervisor will evaluate the intern's progress and document their findings on the outcomes sections of this form. If insufficient progress has been made by the end of the probationary period, the training director and department manager, in consultation with the intern's supervisor and HR administration, may extend the Probation or may Suspend the intern.

The intern acknowledges that by signing this Probation Plan at the initial meeting, they understand that if the Probation is not successfully completed, some or all of the intern's supervised hours may not be counted (i.e., will be found to be unsatisfactory) from the date of the commencement of this plan.

Performance Evaluation Quarter and Training Year and/or Plan Initiation Date:
Pre-Master's Intern Name(print):
Supervisor Name (print):
Training Director Name (print):

Statement of Plan Completion:

On _____ (date), _____ (intern name) successfully completed the Probation Plan and is now meeting training program minimum competency expectations.

_____ _____

Training Director Name (signature) Date

_____ _____

Supervisor Name (signature) Date

Component of Probation Plan	Outcome
1. Description of intern's competency deficit(s), performance issue(s), and/or conduct concern(s):	
2. Identification of targeted clinical competency area(s):	

Component of Probation Plan (cont'd)	Outcome
3. Outline of measures to be undertaken to remediate intern's unmet competency expectation(s), performance issue(s), and/or conduct concern(s), including but not limited to: schedule modification; provision of opportunities for the extern to receive additional supervision, and/or to attend additional seminars and/or other training activities, and/or recommendation of training resources:	
4. Expectations for successful outcome:	

Component of Probation Plan (cont'd)	Outcome
5. Consequences for unsuccessful outcome (which may include initiation of Suspension):	
6. Timeline for completion:	

Appendix E

The Permanente Medical Group, Inc.

NOTICE OF PROVISION OF MENTAL HEALTH TREATMENT SERVICES BY A PRE-MASTER'S INTERN

This is to inform you that the mental health treatment services you are receiving are provided by an unlicensed Pre-Master's Intern in:

☐ Social Work ☐ Marriage & Family Therapy ☐ Counseling

Intern Name: _____

Intern Contact #: _____

Internship Completion Date: _____

This intern is working under the supervision of:

Supervisor Name: _____

Supervisor License #: _____

Supervisor Contact #: _____

in addition to other licensed staff members in the Department of Mental Health at Kaiser Permanente Medical Group, Inc.

Appendix F

KAISER PERMANENTE NORTHERN CALIFORNIA
PRE-MASTER'S INTERNSHIP PROGRAMS IN SOCIAL WORK,
MARRIAGE & FAMILY THERAPY, AND PROFESSIONAL CLINICAL COUNSELING

PRE-MASTER'S INTERN EVALUATION OF SUPERVISOR

[Rev APR2024]

Training Site/Team:			Date Completed:	
Intern Name:			Training Year:	
Evaluation Period:	☐ 1st Qtr ☐ 2nd Qtr ☐ 3rd Qtr ☐ 4th Qtr		☐ Mid-Year	☐ End-of-Year
Supervisor Name:		Supervisor's Status:	☐ Primary ☐ Delegated ☐ Group	
If Group Supervisor, please indicate group:	☐ Case Conference ☐ Assessment ☐ Other: _____			

Please evaluate your supervisors using the criteria and rating scale below. The purpose of this evaluation is to inform the training program of your supervisors' strengths and weaknesses, and to help the supervisors improve in the practice of supervision. This evaluation process is optimally an ongoing part of the supervisory relationship, and the criteria below can be used to guide discussion throughout the training year. Both supervisors and supervisee should strive to talk openly about how the supervision is going, how well learning is taking place, and what needs improving.

Please indicate the degree to which the following behaviors are characteristic of your supervisor using the following rating scale:

Numerical Rating	Level of Satisfaction
1	Does Not Meet My Expectations
2	Needs Improvement
3	Meets My Expectations

Supervisor Provides Atmosphere for Professional Growth

Demonstrates a sense of support and acceptance
Establishes clear and reasonable expectations for my performance
Establishes clear boundaries (i.e., not parental, peer, or therapeutic)
Makes an effort to understand me and my perspective
Encourages me to formulate strategies and goals without imposing his/her/their own agenda
Recognizes my strengths
Conveys active interest in helping me to grow professionally
Is sensitive to the stresses and demands of the externship/internship
Helps me to feel comfortable to discuss problems
I feel comfortable talking to my supervisor about my reactions to him/her/them and the content of our meetings

Supervisor's Style of Supervision

Makes supervision a collaborative process
Balances instruction with exploration; sensitive to my style and needs

Encourages me to question, challenge, or doubt my supervisor's opinion
Admits errors or limitations without undue defensiveness
Openly discusses and is respectful of differences in culture, ethnicity, or other individual diversity
Enables the relationship to evolve over the year from advisory to consultative to collegial

Supervisor Models Professional Behavior

Keeps the supervision appointment and is on time
Is available whenever I need to consult
Makes decisions and takes responsibility when appropriate
Makes concrete and specific suggestions when needed
Assists me in integrating different techniques
Addresses transference/countertransference/emotional reactions between me and patient
Raises cultural and individual diversity issues in supervisory conversation

Impact of Supervisor

Provides feedback that generalizes or transcends individual cases to strengthen my general skill level
Shows concern for my personal development as well as my performance
Facilitates my confidence to accept new challenges

The most positive aspects of this supervision are:

The least helpful or missing aspects of this supervision are:

This supervision experience might improve if:

Adapted 2008 by L. Kittredge & K. Lenhardt & modified 2014 by R. Gelbard, Kaiser Permanente Northern California Postdoctoral Residency Program, from Supervisor Feedback Form by S. Hall-Marley (2001), in Falender & Shafranske. *Clinical Supervision: A Competency-Based Approach*. APA, 2004, pp 273-275.

Appendix G

KAISER PERMANENTE | Mental Health Training Program Northern California

Mental Health Training Program Exit Interview Questions

(optional)

Intern Name: _____ Site/Affiliated Medical Center: _____

Please take a few moments to provide your valuable feedback to any or all the questions listed below:

What were your favorite parts of the training experience?

What were some of the biggest challenges you faced during your training year?

What are you most looking forward to in your new role/where you're going next?

Did you feel adequately supported, respected, and recognized in your role as part of the team this year?

Did you feel like you had the tools, resources, and working conditions necessary to be successful in your job? If not, what could be improved?

Was your training experience consistent with your expectations from when you interviewed and accepted the offer? If not, what changed?

Would you recommend training at our program to a peer? Why or why not?

Please tell us any areas you see for improvement in the training program:

Appendix H

KAISER PERMANENTE® | Mental Health Training Program Northern California

PRE-MASTER'S INTERNSHIP REMOTE SUPERVISION AGREEMENT

In signing this supervision agreement, both the named supervisor and intern attest that a meeting has been conducted on _____ within 60 days of the start of supervision on _____ to assess the appropriateness of allowing the named intern to receive supervision via two-way, real-time videoconferencing.

The assessment of the appropriateness of supervision via two-way, real-time videoconferencing included the consideration of (1) the current abilities of the named intern; (2) the preferences of both the intern and supervisor; and (3) the ability of both parties to attend supervision from locations that ensure the necessary level of privacy.

☐ I, the named supervisor, attest that supervision via two-way, real-time videoconferencing has been determined to be APPROPRIATE based on my assessment.

☐ I, the named supervisor, attest that supervision via two-way, real-time videoconferencing has been determined to be INAPPROPRIATE based on my assessment. All supervision required as part of this supervision agreement will be provided in person.

Intern Name:	**Date:**
Intern Signature:	
Supervisor Name:	**Date:**
Supervisor Signature:	