

PSYCHOLOGY INTERNSHIP PROGRAM

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Association

Internship Brochure

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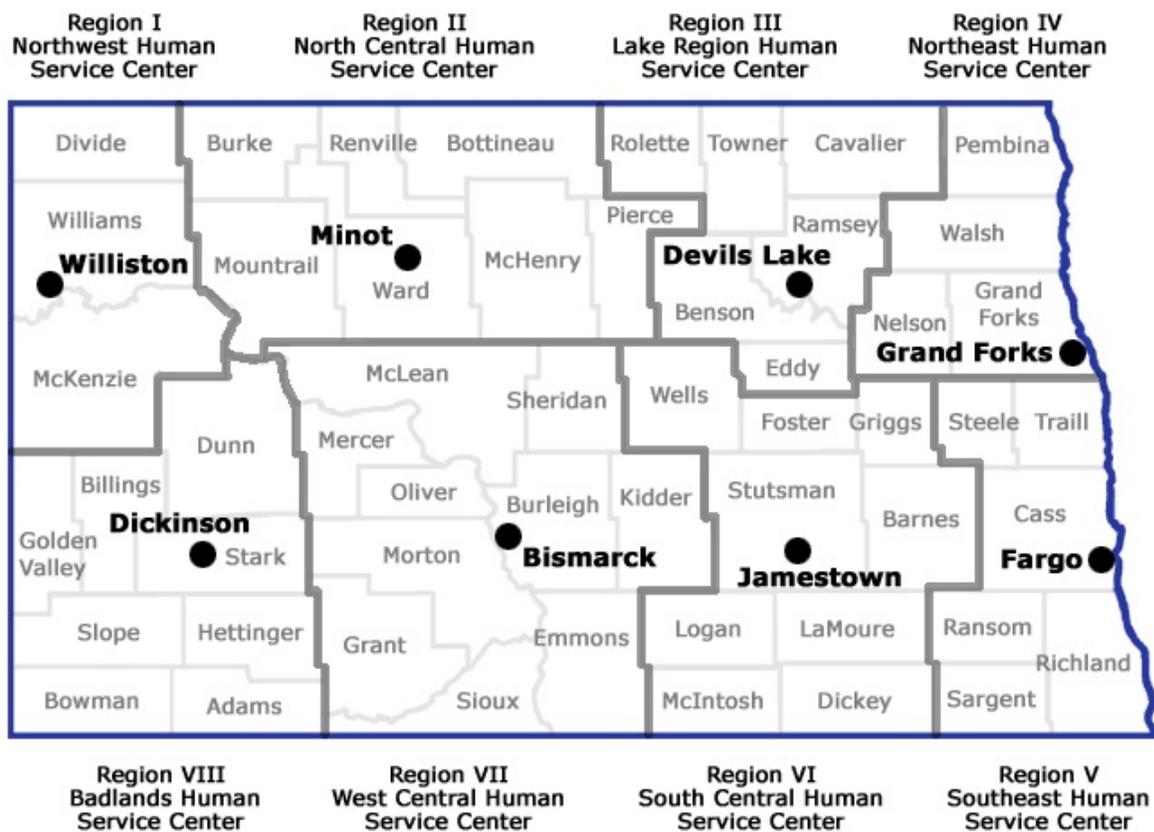
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INTRODUCTION

The North Dakota Department of Human Services (ND DHS) is an umbrella agency headed by an Executive Director who is appointed by the Governor. The department is organized into three major subdivisions consisting of Field Services, Program and Policy Management, and Managerial Support. Field Services includes the human service centers, the North Dakota State Hospital, and the Life Skills and Transition Center (formerly the Developmental Center). There are eight human service centers in North Dakota to include: Badlands Human Service Center, Lake Region Human Service Center, North Central Human Service Center, Northeast Human Service Center, Northwest Human Service Center, South Central Human Service Center, Southeast Human Service Center, and West Central Human Service Center. ND DHS employs approximately 2,200 employees located throughout the state. Seventy-eight percent of the department's employees work at the human service centers, the State Hospital, and the Life Skills and Transition Center.



MISSION STATEMENT

To provide quality, efficient, and effective human services, which improve the lives of people.

DEPARTMENT'S ROLE

Provide services that help vulnerable North Dakotans of all ages to maintain or enhance their quality of life, which may be threatened by lack of financial resources, emotional crises, disabling conditions, or an inability to protect themselves.

Support the provision of services and care as close to home as possible to maximize each person's independence while preserving the dignity of all individuals and respecting their constitutional and civil rights.

SOUTHEAST REGION AND DEMOGRAPHICS

Southeast Human Service Center (SEHSC) is among the eight regional human service centers of the North Dakota Department of Human Services. The Southeast region has a population of approximately 191,775 and a geographical area of 6,499 square miles and covers the counties of Cass, Ransom, Richland, Sargent, Steele, and Traill.



SEHSC is located in Fargo, North Dakota and under the purview of Cass County. The agency serves approximately 5,000 children, adolescents and adults per year, as well as provides services to schools, community agencies, organizations, and families. SEHSC serves clients in all age categories, ranging from birth to 80 and above. The following racial groups are served by SEHSC that include, but are not limited to: Caucasian, Hispanic, African American, American Indian, Korean, Vietnamese and Native Hawaiian, as well as individuals who define themselves in two or more racial categories. Additionally, Fargo is a designated refugee relocation site and home to one of the only federally-recognized and approved refugee resettlement organizations in the state. The organization's New American Services Program resettled about 300 refugees in the Fargo / West Fargo area over the past two years. In all, North Dakota accepts about 400 refugees each year across the state. As such, in recent years Fargo's population has grown and become increasingly diverse. The largest resettlement groups are currently Bhutanese and Iraqis and refugees from Somalia, Eritrea, Sudan, DR Congo and Liberia. Despite the growing refugee population, North Dakota is comprised of 90.1% Caucasian, 5.5% American Indian and Alaska Native, 1.7 % Hispanic or Latino, 2.5% African American, and 1.1% Asian individuals.

SEHSC DEPARTMENTS

<p>ADMINISTRATION</p> <ul style="list-style-type: none"> • OFFICE OF THE DIRECTOR • BUSINESS OFFICE • SUPPORT STAFF • SERVICE RECORDS • TECHNICAL SUPPORT • MAINTENANCE <p>ADMISSIONS/RIS</p> <p>CENTRAL ASSESSMENT</p> <p>DISABILITY SERVICES</p> <p>PSYCHOLOGY</p>	<p>MEDICAL SERVICES</p> <p>BEHAVIORAL HEALTH SERVICES</p> <ul style="list-style-type: none"> • EXTENDED CARE • TREATMENT MALL • INTENSIVE OUTPATIENT • MST • LOCAL OUTREACH <p>VOCATIONAL REHABILITATION</p> <p>PARTNERSHIPS</p>
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SEHSC CORE SERVICES

<p>Admissions/Crisis Response</p> <p>Adult Substance Abuse Treatment Services</p> <p>Psychiatric Nursing Services</p> <p>Extended Care-Seriously Mentally Ill (SMI)</p> <p>Residential Services</p> <p>North Dakota Health Tracks Program</p>	<p>Therapy Services</p> <p>Psychological Services</p> <p>Psychiatric Services</p> <p>Quality Control Review</p> <p>Children & Family Services</p> <p>Adolescent Substance Abuse Treatment Services</p> <p>Rehabilitation Consulting and Services</p> <p>Developmental Disabilities Services</p>	<p>Regional Aging Services</p> <p>Economic Assistance Program</p> <p>State Ombudsman Program</p> <p>Partnerships Program for Children's Mental Health</p> <p>County Services For Children & Families</p> <p>Early Intervention Services</p>
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PSYCHOLOGY SERVICES

The Psychology Department is supervised by a Chief Psychologist, who is also the Training Director of the Psychology Internship Program. In addition to this position, the Psychology Department is comprised of one doctorate level licensed psychologist, a master's level license exempt psychologist, a psychology resident, a psychometrist, and three pre-doctoral Interns.

The Psychology Department is responsible for the completion of a variety of psychological assessment, behavioral assessment and intervention, participation in multidisciplinary treatment planning, individual and group psychotherapy, consultation to SEHSC staff and outside agencies, in-service training, community education, supervision, program development and implementation, and program evaluation.

PSYCHOLOGY INTERNSHIP PROGRAM

Internship admissions, support, and initial placement data is available online at <https://www.nd.gov/dhs/info/pubs/docs/sehsc-psychology-internship-admissions-support-initial-placement-data.pdf>

INTERNSHIP PROGRAM PHILOSOPHY AND TRAINING MODEL

The Internship Program provides Interns with exceptional generalist training in order to prepare them for entry level clinical practice in a wide variety of employment settings. The Internship Program follows the practitioner-scholar training model wherein the professional practice of psychology is informed by scholarly and scientific inquiry. As such, the Intern is encouraged to integrate clinical practice and science by utilizing clinical research and theory to guide clinical thinking and practice. More specifically, the Internship Program involves didactic seminars of a variety of clinical issues and empirically validated treatments, experiential activities, and clinical supervision. Furthermore, each Intern is expected to review scholarly journals and facilitate a monthly research seminar on relevant clinical issues.

The SEHSC Internship Program not only has a firm commitment to the integration of clinical science and practice, but it strongly considers the developmental progression implicit in an Intern's professional development. As such, the SEHSC Internship Program emphasizes a developmental training approach where the Intern moves along a continuum from a classroom based graduate student, to an inexperienced supervisee in the field, and finally to a competent entry level psychologist. To achieve this, the Internship Program provides clinical supervision that is tailored to match the Intern's skill acquisition and professional development over the course of the training year. This concept of supervision involves the supervisor assuming the various roles of teacher, model, coach, counselor, and peer (Whiting, Bradley, & Planny, 2001).

The training year is sequential and graded in complexity. As such, the training experience is designed to initially offer an Intern the necessary structure and supervision based on their beginning skill level, style, and clinical experience. Interns are provided considerable structure, direction, and support from the clinical supervisor to increase the Intern's confidence and reduce anxiety (Whiting et al., 2001). Likewise, the complexity of the cases Interns are assigned are commensurate with their skill level and knowledge base. At the outset of their training experience, cases are screened to ensure Interns are assigned less severe or complex cases, but as the Interns demonstrate increased knowledge of clinical issues and stronger skills and abilities, they will be responsible for cases that are more complex and demanding, e.g., treating a straightforward depression versus co-morbid conditions and personality disorders. Didactic seminars are also planned to follow a developmental model with the introduction of basic topics and movement towards more complicated issues and treatment approaches. The final trainings focus on professional development, licensure, and preparation for post-doctoral residency positions.

The Internship Program functions in a manner consistent with the American Psychological Association's 2010 Ethical Standard 7.04 (Student Disclosure of Personal Information) as contained in the Ethical Principles of Psychologists and Code of Conduct (APA, 2010).

PROGRAM GOALS AND OBJECTIVES

It is the intent of the Internship Program to provide a flexible and balanced set of learning experiences necessary for the emergence of competent professional psychologists. These experiences enable Interns to practice and enhance previously learned skills, develop new skills, and facilitate personal and professional growth.

Training goals and objectives are as follows:

1. **Goal:** Prepare Interns for the competent and ethical provision of assessment.
Objective: Integrate the knowledge and skills required in the use of a wide array of psychological assessments to appropriately match test(s) in addressing the referral question and/or concerns.
2. **Goal:** Prepare Interns for the competent and ethical provision of therapeutic intervention.
Objective: Interns will gain the knowledge and develop the skills in the implementation of psychotherapy. This includes having a broad knowledge of Empirically Supported Treatments and demonstrating the ability to apply them, using the flexibility needed to best fit the patient's needs. This also includes the ability to establish and maintain an effective therapeutic alliance.
3. **Goal:** Prepare Interns for the competent and ethical provision of consultation.
Objective: Gain the knowledge and develop the skills necessary to provide effective consultation to individuals in a wide array of settings, and with varying levels of education.
4. **Goal:** Provide Interns with the opportunity to develop skills and experiences necessary for effective delivery of psychological services in a culturally appropriate manner.
Objective: Interns will obtain the knowledge and skills necessary to provide culturally appropriate clinical services.
5. **Goal:** Encourage a sense of responsibility to the profession for increasing the clinical knowledge base of psychology and to expose each Intern to the professional requirement to continually update the knowledge base from which clinical decisions are made, including both current research and clinical experience.
Objective: Interns will contribute knowledge to the field of psychology.
6. **Goal:** Prepare Interns for the professional roles they may encounter in future employment such as supervision, clinical quality assurance, administrative oversight, and as a professional psychologist.
Objectives: Interns will receive training in clinical and administrative supervision. Interns will have the opportunity to provide clinical supervision to masters level practicum students.

SUPERVISION

Supervision is considered the major modality by which the Intern learns to function as a psychologist in clinical settings. Internship Program supervisors are committed to ensuring the Program's primary focus is on training and supervision, not service delivery, and as such work to create a safe environment for the Intern to develop the necessary skills. Initial emphasis is placed on assessing the Intern's previously developed skills and knowledge, the Intern's comfort level in their new role as Intern, and the degree to which the Intern is able to translate this knowledge into practical, applicable, ethical client care.

Clinical supervision of the Interns is sequential and graded in complexity. As such, the amount and intensity of supervision is expected to vary with the Intern's skill acquisition and level of autonomy over the course of the training year. Although Interns are guaranteed two hours of individual supervision every week, there may be additional supervisory sessions scheduled on an as-needed basis earlier in the training experience or as needs arise over the course of the year.

The Intern begins the training year under the close, direct supervision of his/her clinical supervisor and initially assumes a less active role in clinical practice while he/she shadows or observes the clinical supervisor engaged in various clinical activities of the particular rotation. This direct supervision is instructional, didactic, and focused on skill acquisition. After the Intern has been involved in shadowing and observation of the clinical supervisor, he/she is encouraged to take a more active role in the clinical activities under direct supervision. As the Intern acquires increased responsibility and autonomy in clinical practice, he/she is video recorded in the provision of clinical services (i.e., intakes, therapy, clinical interview, test administration, test feedback) for review by his/her clinical supervisor in individual and/or group supervision. The Internship Program also has the capacity for in vivo supervision through the use of an observation room and bug-in-the-ear supervision.

Although it is the expectation that an Intern's clinical skills and clinical decision making progresses over the course of the training year, the Intern's clinical abilities and independence are informally and formally assessed throughout the year to ensure the congruence between skill level and provision of clinical services. Interns are formally evaluated at the end of each rotation by the respective clinical supervisor and are informally evaluated by the clinical supervisor during each rotation to address skill deficits and fund of knowledge concerns.

While rotations and ongoing clinical duties may provide Interns with an opportunity to work with and learn from other mental health professionals, all of an Intern's clinical activities are performed under the supervision of a licensed psychologist who is a primary supervisor in the Internship Program.

TRAINING DIRECTOR AND CLINICAL SUPERVISORS



Dr. Nancy Hein-Kolo is the Chief Psychologist and Training Director for the Psychology Internship Program. Dr. Hein-Kolo received her PsyD in clinical psychology from the Minnesota School of Professional Psychology in 1999. She completed her internship with the Federal Bureau of Prisons in the Federal Medical Center in Rochester, Minnesota, and was licensed as a psychologist in Minnesota in 1995 and in North Dakota in 2010. Her areas of interest include forensic evaluation, specifically risk assessments on sexual offenders.



Dr. Kelly Smith is a licensed clinical psychologist at Southeast Human Service Center, and is a clinical supervisor to the Internship Program. She completed her undergraduate education in Psychology at Colorado State University. She obtained her master's and doctoral degrees in Clinical Psychology from Pacific University's School of Professional Psychology. She completed an APA-accredited internship at Southeast Human Service Center and a psychology residency at Benson Psychological Services. She was licensed as a psychologist in North Dakota in 2012. Dr. Smith's interests include clinical and forensic assessment, evidence-based treatment, and psychological consultation.

INTERNSHIP PROGRAM DESCRIPTION

OVERVIEW

The Internship Program consists of required and elective components and it is organized into two separate, six-month rotations. Both rotations share a focus on general psychological assessment, with emphasis on more specialized psychological assessment such as sex offender and violence risk assessments and parental capacity assessments. The assessment rotation is supervised by a licensed psychologist, who is a clinical supervisor of the Internship Program. In addition, Interns have year-long training assignments in the area of intervention and are assigned a clinical supervisor that follows their intervention cases throughout the training year. There are other ongoing clinical duties, which the Intern is involved in throughout the Internship year.

Psychological assessment makes up a large portion of the responsibilities of the pre-doctoral Interns. Approximately 40% of Intern training focuses on assessment, all of which is supervised by a licensed psychologist. Interns can expect to conduct evaluations utilizing psychological testing, behavioral analyses, and clinical interviews and are required to complete 25 psychological evaluations over the course of the training year.

Approximately 20% of the Intern's time will be spent in psychological interventions. This will generally be in the form of individual psychotherapy for varied presenting problems including, but not limited to: mood disorders, anxiety disorders, habit disorders, anger management, grief issues, and personality disorders. Interns will also have the opportunity to lead or co-lead group psychotherapy throughout the training year. An Intern may also develop of behavior plans for either children with serious emotional disturbances, with developmentally disabled populations, or indirectly with agencies providing services and care to individuals with developmental disabilities. This may include attending team meetings, Individual Program Plan (IPP) meetings, or other meetings relevant to the client.

Approximately 5% of the Intern's time is spent in various consultative roles. Formal consultation is also supervised and co-attended by a licensed psychologist. Consultation is facilitated within SEHSC to programs such as the addiction services treatment mall, alcohol and drug staffing, therapy staffing, and Off Main staffing. The role of the Intern during these meetings is to provide diagnostic clarification, program recommendations, and therapeutic direction to multidisciplinary teams within SEHSC. Informal consultation is also an expectation of the Interns and may occur when staff call or drop by the office to discuss a case and request direction.

Approximately 15% of the Intern's time is spent in individual and group supervision as the program requires each Intern receive four hours of supervision each week, at least two hours of which must come from individual supervision. Approximately 13% of the Intern's time is spent in didactic learning experiences. The remaining 7% is spent in various administrative responsibilities and time allowed for working on their dissertation.

INTERNSHIP COMPLETION REQUIREMENTS

- Total training time should be equivalent to 2,000 hours,
- A minimum of 1,200 hours spent in client related contacts and activities,
- Competency-based evaluations indicative of Intern performance that is commensurate with that expected of an Intern in this program,
- Competency requirements for both rotations have been met during the Internship training period,
- A minimum of 4 hours per week spent in regularly scheduled, formal, face-to-face supervision, at least 2 of which were on an individual basis,
- Demonstration of an ability to complete evaluations and paperwork with minimal supervisory changes,
- Completion of all clinical and administrative paperwork.

PROGRAM CURRICULUM

PSYCHOLOGICAL ASSESSMENT

- The Intern will be assigned to an assessment rotation supervisor for the duration of that assessment rotation.
- The Intern will complete a minimum of 25 assessments over the course of the year
- Assessments will include:

Psychodiagnostic assessment	Pathological psychological problems
Intellectual abilities	Memory functioning
Functional skills/deficits	Personality traits
Eligibility for services	Neuropsychological screening
Risk assessment	Parental capacity
- Common referral sources:

SEHSC, interdepartmental	Court (adult/juvenile)
Parole and Probation	Division of Juvenile Services
Social Services	Schools
Healthcare Agencies	Various Community Providers

PSYCHOTHERAPY

INDIVIDUAL

- Each Intern is assigned a clinical supervisor for therapy and this supervisory arrangement is maintained throughout the training year.
- Interns are expected to have 8-10 therapy clients on their caseload
 - May include a composition of adults, children/adolescents, and families and varies according to the Intern's interests and clinical experience.

GROUP

- Psychotherapy, Psychoeducation, and Skill-based groups
- There are several options for obtaining group experience and the Intern should consult with his/her supervisor to determine which group experiences will most enhance the Intern's training given their individual goals.
- Possible group experiences:
 - Skill-based groups for clients with developmental disabilities.
 - Psychoeducation groups for clients involved in the Alcohol and Drug Treatment Mall.
 - The Intern may also develop his/her own group as long as it is within the scope of the agency's services and the Intern has a treatment manual/protocol and a supervisor willing to co-lead the group. The Intern is encouraged to consult with his/her clinical supervisor and the Training Director about this option if interested.
- Family
 - Opportunities to facilitate or co-facilitate family therapy is not guaranteed during any training year. If an Intern is strongly interested in family therapy, he/she is

- encouraged to talk with the therapy clinical supervisor to determine if that can be arranged.
- SEHSC does not provide marital counseling.

CONSULTATION

- Case Consultation for agency staff
 - Staff consultation meetings occur twice a month and involve the Interns, Program supervisors, and other agency staff.
 - The Intern is expected to assist in providing consultation and suggestions during these meetings.

SUPERVISION

INDIVIDUAL SUPERVISION

- The Intern is required to have four hours of supervision each week, with at least two hours of individual supervision.
- Individual supervision will be conducted by the Intern's primary (therapy) supervisor and the Intern's rotation supervisor. During a rotation, the Intern's therapy and rotation supervisor will be the same individual and so, the Intern will spend two hours of individual supervision per week with that supervisor.

GROUP SUPERVISION

PSYCHOLOGY GROUP SUPERVISION

- This is a regularly scheduled psychology group supervision that occurs 2-3 times per month.
- Attendees include:
 - Internship Program Supervisors
 - Psychology Resident
 - Psychology Interns
 - Non-agency Interns and/or Residents
- The Intern will be required to present cases in different formats, i.e., case presentations, video presentations, and role-plays/reenactments.

PSYCHOLOGY/PSYCHIATRY GROUP SUPERVISION

- This is a regularly scheduled bimonthly group supervision meeting led by two Licensed Psychologists affiliated with the SEHSC Psychology Internship Program.
- Attendees include:
 - Psychology Interns
 - Psychology Residents
 - Psychiatry Residents
 - Licensed Psychologists
- Each Intern will present one case and provide consultation for the other members.

THERAPY GROUP SUPERVISION

- This is a regularly scheduled bimonthly group supervision meeting for psychologists and therapy staff.
- Attendees include:
 - Psychology Interns
 - Psychology Resident
 - Licensed Psychologists
 - Internship Program Supervisor(s)
 - Therapists
- All staff members and Interns are expected to present cases.

DIDACTIC SEMINARS

AGENCY DIDACTIC SEMINARS

- Participation in internal didactic seminars is required and seminars are led by supervisors, other psychology staff, therapy staff, and/or collaborating psychologists in the community
- Internal didactics occur in 1-2 hour blocks

OFF-SITE DIDACTIC SEMINARS

- Grand Rounds at Neuropsychiatric Research Institute- required
- Prairie St. John's Professional Series- required
- Ethics Group- required
- North Dakota State University Colloquium Series- elective
- Local Conferences and Workshops- some are required and this will depend on the particular training

OTHER INTERNSHIP EXPECTATIONS

RESEARCH SEMINAR

- Interns are required to review scholarly journals and select a clinically relevant article, prepare a 1-2 page summary of the research article, and present this information to colleagues in a monthly staff meeting.

IN-SERVICE PRESENTATIONS

- Interns will provide education or training to an identified professional group and this will be based on agency or community need and/or interest area for Interns.

PROGRAM EVALUATION

- Interns will participate in program evaluation in a service area outside of the Psychology Department, and this may vary by need each year or biennium. Examples of this include AOD, IMR, or PSR
 - If this experiential opportunity is not available during the Intern's training year, the Intern will be expected to propose an evaluation of an agency program via a

paper. The paper will include which program and will state realistic objectives and methods that could be implemented.

MOCK TRIAL

- The Intern is expected to provide expert testimony in a mock trial. This training opportunity occurs near the end of the Internship and follows a didactic seminar on expert witness testimony.
 - The Intern is provided a mock subpoena to notify them of the upcoming trial and testimony.
 - Interns are required to process the subpoena per agency policy and seek supervision.
 - Interns present to a county courthouse, where the mock trial is held.
 - All members of the psychology department will play a role in the court proceedings and Interns are debriefed following their testimony.

SHADOWING

- Interns will be expected to shadow an agency psychiatrist for one day.
- Interns will be expected to shadow members of the Off Main IDDT over a period of two days.

INTERN EVALUATION

- The Internship Program will provide written evaluations of the Intern's progress at the completion of each rotation in order to facilitate Interns' change and growth as professionals. Evaluations will address the Interns' knowledge of and adherence to professional standards, their professional skill competency, and their personal functioning as it relates to the delivery of professional services.
- The Intern evaluation form is completed by the intern's primary supervisor during the last week of the rotation. The primary supervisor consults the rotation supervisor and incorporates this information into the evaluation. This form is reviewed directly with the Intern, and then given to the Training Director for review and placement into the Intern's file.
- At midpoint of each rotation, the assessment rotation supervisor and Intern will participate in a feedback session in order to identify areas for further development for the Intern. Interns will also complete the mid-rotation evaluation at that time and this will be reviewed in the feedback session in order to identify areas the Intern would like more emphasis. As noted above, supervisors formally evaluate Interns via structured forms at the end of each rotation. Likewise, Interns complete a written evaluation of the supervisor at the end of the rotation.
- The Training Director meets with the Interns on the first Monday every other month to discuss the program and any challenges the Interns may have at that point. Interns are also encouraged to meet individually with the Training Director at any time to raise concerns about the Internship.

GRIEVANCE AND DUE PROCESS

- The Internship Program will provide appropriate mechanisms by which inappropriate Intern behavior affecting professional functioning is brought to the attention of the Intern. The Internship Program will also maintain Intern procedures, including grievance and due process guidelines, to address and remediate perceived problems as they relate to professional standards, professional competency and/or professional functioning. Criteria which link this definition of Intern problem areas to particular professional behaviors and attitudes are incorporated into the program's evaluation procedures at several levels during the evaluation process.

ADMINISTRATIVE INFORMATION

Interns are fully supported from an administrative standpoint and have the same support staff access as other employees. Interns share a large office, consisting of modular furniture and separate work stations. Interns have private phones, computers, and file cabinets. Additionally, SEHSC provides interns access to multiple psychological and psychiatric journals and other reference materials.

Interns in the Internship Program are paid at an hourly rate of \$14.19 an hour. As state employees, Interns will be paid on a monthly basis. The stipend is designed to assist the Interns in offsetting the expense of their internship year. Interns are not eligible for SEHSC employee benefits such as annual or sick leave, holiday pay, or health insurance.

Internship Application

APPLYING TO SEHSC INTERNSHIP PROGRAM

APA-ACCREDITED PROGRAM

The Psychology Internship Program at Southeast Human Service Center is accredited by the Commission on Accreditation of the American Psychological Association. Questions related to the program's accredited status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street NE, Washington, D.C. 20002
Phone: (202) 336-5979 Email: apaaccred@apa.org
Web: www.apa.org/accreditation

ACADEMIC REQUIREMENTS

Applicants to the Internship Program at SEHSC must be students in good standing with an APA accredited clinical or counseling psychology program, and must have already been admitted to doctoral candidacy. SEHSC's Internship Program requires 300 intervention and assessment hours and 1000 grand total practicum hours. Additionally, all comprehensive exams must be passed by the ranking deadline. Candidates with a solid understanding of assessment, theoretical backgrounds, ethical and clinical issues, diagnostics, and treatment solutions are considered to be highly desirable. In addition, SEHSC requires three letters of recommendations, one of which must be from a clinical practicum supervisor. Copies of transcripts from all academic institutions are also required (undergraduate transcripts are not necessary).

APPLICATION TIMELINE

- SEHSC follows the APPIC match policy and our program code number is **178911**
- The deadline for application submission is **NOVEMBER 13**
- Candidates will be notified about interview status by **DECEMBER 13**

SELECTION POLICY

The Internship Program complies with the standards and regulations developed by SEHSC for the selection of employees. However, we do acknowledge that searching and selection procedures for Interns (i.e., APPIC Computer Match Program) do differ from those policies of SEHSC itself. As such, applications are reviewed by the SEHSC selection committee which includes the clinical supervisors of the Internship Program.

Interns are rank-ordered based on their interest in the sponsoring agency's clinical services and population served; their prior academic and training experience; quality of endorsements; goodness of fit between Interns' internship goals and the Internship Program's goals and

training model. In reviewing the applications of prospective Interns, we specifically examine assessments administered, assessment hours, number of psychological assessment reports, and interest in the assessments we use most, as the SEHSC Internship Program has an emphasis on psychological assessment.

The application review and ranking process is objectified by utilizing a 10-point scale to rate each prospective Intern on four overarching areas (Intern Application, Endorsements, Clinical Interests and Training Experience, and Education). Subsumed under these areas are a total of 10 factors considered to be the most important for matching Interns' experiences, interests, and aptitudes with the goals of our training program. The Internship Program agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

INTERNSHIP OPEN HOUSE

Qualified applicants are invited to the Internship Program's Interview Open House. This is scheduled over the course of two days and involves a prospective Intern selecting a four-hour morning or afternoon time period wherein they can expect to meet with Internship Program staff, participate in an interview with Internship Program supervisors, tour the facility, and participate in a presentation by the current Interns where they can ask the current Interns questions about their experience in the program, etc. Skype interviews can be arranged in situations where the applicant is unable to be present for an in-person interview. Those not chosen by the selection committee to interview will receive a letter notifying them of this decision as soon as it has been made. When an applicant has been matched to our Internship Program and has accepted the offer, completion of our state application and background check is mandatory.

All Interns are expected to have an understanding of the program's philosophy, goals, and training model after their review of the APPIC Directory Site information, Internship Program Brochure, interview process with supervisor(s) from the Internship Program, and peer consultation with our current Interns. They are encouraged to ask questions before, during, or after the interview process in order to better understand the Internship Program's goals and training approach. Individuals who would like further information on the SEHSC Internship Program or application procedures may contact:

Dr. Nancy Hein-Kolo, Training Director
Southeast Human Service Center
2624 9th Ave S
Fargo, North Dakota 58103
701.298.4547
nheinkolo@nd.gov

NON-DISCRIMINATION STATEMENT

The Department of Human Services makes available all services and assistance without regard to race, color, religion, national origin, age, gender, disability, or status with respect to marriage or public assistance in accordance with Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, the Americans with Disabilities Act of 1990, and the North Dakota Human Rights Act of 1983. Persons who contract with or receive funds to provide services for the North Dakota Department of Human Services are obligated to abide by the provisions of these laws. The Department of Human Services makes its programs accessible to persons with disabilities. Persons needing accommodation or who have questions or complaints regarding the provision of services according to the Acts may contact Theresa Snyder, Program Civil Rights Officer, North Dakota Department of Human Services, or the U.S. Department of Health and Human Services, Office for Civil Rights, Region VIII, Federal Office Building, 1961 Stout Street, Denver, CO 80294, (303) 844-2028 voice or (303) 844-3439 TTY. The Southeast Human Service Center is an Equal Opportunity Employer.