



CLINICAL PSYCHOLOGY DOCTORAL INTERNSHIP TRAINING BROCHURE 2026-2027

Congratulations on reaching this step in your professional journey, and we're glad you've chosen to take the time to review our materials for our APA-accredited Clinical Psychology Doctoral Internship for individuals completing their doctoral degrees! Below you will find information about MiraCare, followed by more specific information about the internship program, admission criteria, and so on. Please feel free to reach out to us with any questions!

MIRACARE NEURO BEHAVIORAL HEALTH OVERVIEW

MiraCare Neuro Behavioral Health, an outpatient mental health practice designed to assess and treat behavioral health challenges in a patient-focused, collaborative environment, strives to help every child achieve their highest potential. MiraCare Group is the vision of Christopher Higgins, Licensed Clinical Psychologist, and founder of MiraCare (previously Palos Behavioral Health Professionals), a practice that has cared for children, adolescents, adults, and their families for over 20 years.

MiraCare Group represents over 300 years of combined experience in child and adolescent behavioral treatment. The shared aim of its seasoned team is to provide an extensive, multidisciplinary, and coordinated continuum of care for our patients. The organization provides individual, marital, family, and group psychotherapies; psychiatric evaluation and medication management; psychological and neuropsychological assessments; psycho-neurotherapy; and school consultation. We treat a diverse range of patients in terms of race, sexual orientation, gender, age, diagnosis, and acuity.

MiraCare's Mission Statement & Values

MiraCare Neuro Behavioral Health aspires to be the premier provider of comprehensive, multi-interventional, and competent mental health treatment options for individuals and families. Our mission is to increase our patients' ability to accomplish a sense of security, self-value, and connectivity by honoring one's culture and individuality as they process life's challenges and opportunities.

MiraCare upholds the following values:

- Patient & Family Centered: Honoring YOUR voice and choice
- Rowing in the Same Direction: A continuum of care that is dynamic, defined, and dependable
- Committed to Each Other: Listening, bridging, and sharing
- Integrity in ALL We Do: Doing what we say
- Always Chasing More: Empowering through growth & knowledge

MiraCare believes that the competent provision of mental health treatment combines the individual treatment provider's abilities with that of a multi-interventional approach. Our multidisciplinary team and style are core components of the practice. As patients and families require multiple levels of treatment, traditional psychotherapy services, play therapy, psychiatric services, group therapy, psychological testing, and neuro-enhancement services are combined in the provision of comprehensive and compassionate care.

MiraCare Group is committed to promoting an atmosphere of inclusivity and respect for each other. We want our staff, including our interns, to not only represent the diversity of our community, but to feel safe and secure bringing their culture and background to work.

MiraCare Services

Psychotherapy – We currently combine the knowledge of more than 25 clinical staff to offer individual, couples, family, and group therapies. We emphasize the treatment of children, adolescents, and families. Many of our referrals come from primary care physicians, local school districts, other mental health/medical providers, and as recommendations from other patients.

Psychiatry – Psychiatric services are available for children, adolescents, and adults at MiraCare for the evaluation of medication and follow-up medication management. Psychiatrists and advanced nurse practitioners work closely with other MiraCare therapists to enhance patients' treatment plans receiving psychotherapy services.

Neuropsychological & Psychological Assessment – Neuropsychological and assessments at MiraCare are based on a combination of cognitive, intellectual, personality, and neuropsychological instruments. These evaluations are utilized for diagnostic clarification, as well as assisting in the development of treatment planning for both MiraCare providers and external referral sources.

Psycho-neurotherapy (PNT) – PNT involves combining psychotherapy with techniques that work to directly affect the neural functioning of the brain by stimulating or enhancing cognitive functioning while decreasing symptoms.

MiraCare is accredited through APA to provide Continuing Education credits. We offer a wide variety of training experiences and presentations, including but not limited to ethics and legal trainings, specialized therapeutic and assessment topics, and professional issues. While we weave multicultural and diversity into each presentation, we also offer specific diversity seminars focused on bringing awareness and understanding to our providers.

CLINICAL PSYCHOLOGY DOCTORAL INTERNSHIP PROGRAM

MiraCare Neuro Behavioral Health is committed to providing comprehensive training and believes that the internship is an integral part of the practice. The training experience includes clinical exposure, supervision, didactic training, theoretical exploration and development, and consultations with multiple members of the clinical team. We strive to develop psychologists who will competently and compassionately provide psychotherapeutic services as part of the MiraCare team to treat mental illness, especially in children, adolescents, and family systems.

MiraCare's Clinical Psychology Doctoral Internship Training Program Mission Statement

MiraCare's Internship Training Program strives to be a superior clinical psychology internship in both private practice and hospital settings. We are unique and able to offer multiple experiences within the full continuum of care. We train competent health service psychologists who provide evidence-based therapy and assessment services to a variety of clientele of children, adolescents, and their families in the south suburbs of Chicago. Our diverse supervisory staff is committed to providing a supportive environment for interns to meet competency-based goals in clinical skills, multiculturalism, and professional development on an interdisciplinary team.

Our APA-accredited Clinical Psychology Doctoral Internship Program is a significant component in the development of exceptional and independently licensed clinical psychologists. Our internship, based upon the Practitioner-Scholar training model, provides a challenging combination of experiences, offering interns both breadth and depth in their training that is rooted in a balance of theoretical orientation, empirically-based methods, and our staff's wealth of clinical experience. Through exposure to various theoretical orientations, clinical experiences, and feedback from clinicians within the practice, interns learn and develop proficiency in core clinical and professional competencies; treat a broad range of clinical presentations as a provider and member of a team; and develop their own clinical psychology identity. Clinical experiences

include exposure to multiple types of modalities (individual, group, and family psychotherapy), psychological assessment, supervision, case conferences, didactic training, and consultations with multiple members of the clinical team.

Competencies

All Clinical Training tracks will train to the following competencies and objectives, as they form the foundation of the internship program:

Competency #1: Research

Objectives: Demonstrate an ability to investigate, evaluate, integrate, and disseminate clinically relevant research and material to others via case presentations and other scholarly activities

Competency #2: Ethical & Legal Standards

Objectives: Demonstrate an understanding and application of clinical psychological services within accordance of the APA Code of Ethics and Illinois law; be able to recognize ethical dilemmas and apply an appropriate decision-making process to ethical and legal issues; and act in an ethical manner in all professional activities

Competency #3: Individual & Cultural Diversity

Objectives: Demonstrate an awareness of and show respect for individual and cultural diversity issues; reflect upon how one's own culture and bias may affect our beliefs and methods; and integrate this knowledge within the provision of various psychological services

Competency #4: Professional Values, Attitudes, & Behaviors

Objectives: Demonstrate the attitudes and behaviors that reflect the values of psychology, including but not limited to cultural humility, integrity, accountability, and concern for others; and demonstrate self-reflection, self-awareness, openness, and responsiveness across contexts and interactions

Competency #5: Communication & Interpersonal Skills

Objectives: Demonstrate effective communication and positive relationships with a range of individuals across professional settings and formats, including managing challenging situations; utilize appropriate verbal, non-verbal, and written communication skills throughout the various aspects of the profession

Competency #6: Assessment

Objectives: Demonstrate an understanding of human behavior and how that relates to individuals' functional and dysfunctional behaviors; demonstrate the ability to gather information and apply it appropriately to make informed clinical decisions, including but not limited to diagnostic impressions and level of risk and care assessments; and adaptively communicate such information with appropriate parties

Competency #7: Intervention

Objectives: Demonstrate proficiency in establishing positive therapeutic relationships; develop, implement, evaluate, and modify comprehensive treatment plans accordingly, using theoretically- and evidence-based interventions

Competency #8: Provision of Supervision

Objectives: Demonstrate an understanding of supervision models and application of observation, evaluation, and providing feedback to a supervisee in a simulated context

Competency #9: Consultation & Interprofessional/Interdisciplinary Skills

Objectives: Demonstrate an appreciation for and ability to work within and contribute to a multidisciplinary team to provide comprehensive treatment

Clinical Psychology Doctoral Internship Tracks

Our internship emphasizes the importance of building foundational skills to support competence for a generalist approach, with interns working with children, adolescents, and adults. And, as our site focuses on child/adolescent and family work, we are excited to offer clinical training experiences compromised largely of child and adolescent work. For the 2026-2027

training year, two tracks are being offered. Applicants may apply to one or both tracks; instructions for making preferences clear is listed below and applicants will be considered individually for each track they indicate.

Outpatient Therapy Track

This track consists of 100% outpatient clinical services in our Palos Heights office. In addition to carrying a full outpatient therapy caseload, interns will be trained to utilize some assessment tools (including scoring, interpretation, and brief summaries) to enhance their ability, knowledge and skills in the application of testing to therapy services; they will not be completing full, integrated testing batteries. Candidates who want to focus on outpatient services in a private practice are encouraged to apply to this track.

Testing & Outpatient Therapy Track

Interns matched to the Testing and Outpatient Therapy track will spend 75% of their clinical hours focused on neuropsychological and psychological testing services, and 25% of their clinical hours providing outpatient psychotherapy. This track requires and attracts candidates with strong writing skills who have a career interest in assessment services, while wanting additional training in psychotherapy.

Course of Internship

Our program follows a developmental model: it is sequential and cumulative clinical exposure and graded in complexity. At the beginning of the year, we expose and train in basic knowledge and skills at the doctoral internship level. This includes considerable time with didactics, seminars, reviews of lectures from masters in our field, scholarly articles, and training in MiraCare's philosophy and methods. Caseloads will then build respectively within each track, with the goal of interns building full caseloads as well as continued participation in required didactics, trainings, and group supervision.

Our Internship Program follows MiraCare's commitment to inclusivity as well, celebrating and embracing cultural differences, identities, and backgrounds. To support our interns, we continually review our processes and systems to mitigate unintentional bias knowing that change and growth are always necessary. We have also prioritized interns' individual and cultural diversity growth through intern participation on MiraCare's People & Culture Committee and in JEDI Seminar, which focuses on cultural awareness, cultural humility, and integrating diversity into treatment planning.

Towards the end of the internship year, interns are performing as competent members of our multi-disciplinary team and addressing clinical challenges. Upon completion of the year, interns are prepared to provide doctoral-level clinical psychological services.

Internship Training Supervisors and Faculty

- Christopher Higgins, Psy.D., Licensed Clinical Psychologist; Practice Founder/Owner & Seminar Leader
- Julie Johnson, Psy.D., SEP, Licensed Clinical Psychologist; Clinical Director, Training Director; Individual Therapy Supervisor, Group Supervision for Therapy Co-Leader, Facilitating Therapy Groups Supervisor, & Seminar Leader
- Jessica Mikulecky, Psy.D., SEP, Licensed Clinical Psychologist; Clinical Director, Co-Training Director; Individual Therapy Supervisor, Group Supervision for Therapy Co-Leader, Assessment Supervisor, & Seminar Leader
- Jessica Cruz, Psy.D, Licensed Clinical Psychologist; Individual Therapy Supervisor, Group Supervision for Therapy Co-Leader, & Didactic Presenter
- Breanne Gremillion, Psy.D., Licensed Clinical Psychologist; Training Coordinator; Individual Therapy Supervisor, & Group Supervision for Therapy Co-Leader
- Catherine Jackson, Psy.D., BCN, Licensed Clinical Psychologist; Individual Therapy Supervisor, & Justice, Equity, Diversity, and Inclusion (JEDI) Seminar/Supervision Leader
- Mandy Jenkins, Psy.D., Licensed Clinical Psychologist; Individual & Group Assessment Supervisor, & Seminar Leader
- Patrick Kaulen, Psy.D., Licensed Clinical Psychologist; Individual Therapy Supervisor, & Seminar Leader
- Tiffany Keller, Psy.D., Licensed Clinical Psychologist; Individual & Group Assessment Supervisor, & Seminar Leader

- Cynthia Rangel, Psy.D., BCN, Licensed Clinical Psychologist; Training Coordinator; Individual Therapy Supervisor, & Group Supervision for Therapy Co-Leader

As needed, other qualified Faculty may join to offer additional didactics and presentations, and we encourage applicants to review biographies on our website!

Admission Criteria

We encourage enthusiastic, team-oriented doctoral psychology students, enrolled in an APA- or CPA-accredited doctoral program, who wish to work children and adolescents to apply. Before internship starts, we look for applicants to have completed at least 3 practical experiences for a combined 550 direct-service clinical care hours with patients. The Training Directors, Supervisors and the entire Training Team encourage applicants of all identities and backgrounds to apply. Global applicants eligible to work in the United States are also encouraged to apply.

Application Process

We require the APPI Online Application with essays, three letters of recommendation, a sample psychological testing report that has been fully de-identified (for those applying to the testing track), graduate transcripts, a CV, and a cover letter describing how the applicant's experiences and/or future goals match our training program. We require at least two of the three recommendation letters to be from direct clinical supervisors, and we prefer one of these two are from an applicant's current clinical site.

Our Training Committee reviews all applicants' "Anticipated Practicum Hours" section and factors this into our decision-making process when offering interviews. If an applicant has any questions or concerns about this, we encourage them to message us directly via email.

Applicants may apply to either or both tracks. In the cover letter (submit one in the space indicated on the APPI), applicants are asked to clearly indicate which track(s) they would like to be considered for, as well as reasons why each track is of interest to them, a good fit, etc. If an applicant has not worked directly with children/adolescents in a clinical capacity and are still interested in our internship program, they are encouraged to address that this is a population of strong interest. If there are any questions about this, we hope prospective applicants do not hesitate to reach out and ask!

Internship applications are due on November 9, 2025. Applicants invited for interviews will receive an email notification by December 12, 2025, with additional information about our virtual interview process. We hope that by exclusively offering virtual interviews, applicants will be more likely to attend given reduced financial and time constraints that an in-person interview often requires.

Interviews will take place during January 2026, and applicants will have multiple days/times from which to choose. Applicants meet with various members of the Training Team, including supervisors, Training Director(s), and current trainees in group and individual formats. Due to the high number of candidates we interview, as a memory aid, we take pictures of interviewees; these are discarded after Match Day.

Selection Process

For the 2026-2027 training year, MiraCare plans to offer 8 full-time internship positions: 4 in the Outpatient Therapy track and 4 in the Testing + Outpatient Therapy track.

As our site heavily services children, adolescents, and their families across both tracks, we look for applicants that have varied experience and interests treating these populations. We do not expect all interns' experiences to directly align with our track options, as we believe we can teach and develop these clinical skills through our training and supervision. We also strongly believe internship is a year of generalist training, so we work to expose all interns to clinical services for adults too as referrals allow. With that in mind, interns who are enthusiastic, committed to learning and challenging themselves through new experiences and feedback, want to embrace a team-based clinical care approach, and are open to further developing self-awareness and cultural humility do well within our training program.

MiraCare Neuro Behavioral Health is a member of APPIC and designed to meet clinical psychology doctoral level graduate and licensing requirements. This internship site 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. For a full description of the APPIC Match Policies, please refer to <http://www.appic.org/>.

Requirements for Completion

The training program start date is August 3, 2026, and requires 12 months to complete. Each intern will be provided with two weeks of vacation time (10 working days) and one additional day for dissertation defense, graduation, or an off-site training experience; they are required to take these prior to the last month of internship unless otherwise approved. Applicants are encouraged to check with their academic institution to understand the impact and, if needed, address any conflicts with completing internship requirements on July 31, 2027.

We believe that experiential learning is the most effective strategy to develop the attitudes, knowledge, and skills to become competent psychologists. Therefore, we expect interns to accrue a substantial proportion of their hours providing direct services to patients. We aim for interns on all tracks to build and maintain an average of 18 direct clinical care hours per week. Interns are expected to complete *at least 2,000 hours* with mandatory evening hours. This high number of hours supports our robust training program, allowing for didactics and trainings that previous cohorts have recommended be offered while maintaining a strong caseload.

We also believe that we best learn in an atmosphere of support and safety. Supervision and trainings are offered to support interns in their experiential work. All interns receive 4 weekly hours of supervision from licensed clinical psychologists: This includes 2 hours of individual supervision with a licensed clinical psychologist and 2 hours of group supervision with a cohort. Much of our supervision is in person; however, there are times when we determine telesupervision is beneficial and appropriate. Intern meetings, professional development seminars, cultural/diversity seminar, and all-staff meetings are attended by all interns. On a rotating basis, all interns will also spend six months of the year serving on MiraCare's People & Culture Committee, an institution-level committee focused on instilling a culture of belonging and creating a diverse and inclusive work environment while gaining program development experience.

We offer many psychological interventions along a continuum of care and support. Interns will, at minimum, be exposed via didactics to various services during Orientation while most of the service-specific trainings are completed within track cohorts. These may include:

- Level-of-Care Assessments
- Working with Self-Injury and Suicidality
- Providing Group Therapy
- Understanding & Treating Social Anxiety
- Neuropsychological Testing Seminar
- Diagnostic Impressions in an Outpatient Setting
- Play Therapy Series
- Introduction to Somatic Experiencing®

While there may be times when the Training Director(s) determine distance learning is appropriate and accessible, this training program is an *on-site experience, which includes being on location for both service delivery and support hours*. This will be further reviewed during Orientation, including expectations and examples.

The minimum level of achievement for successful completion of internship is a "Proficient" rating for each element and overall competency listed on the "Clinical Psychology Doctoral Internship Evaluation." We believe this achievement prepares our graduates for success in becoming clinical psychologists.

Clinical Resources & Support

All interns, regardless of track, have access to clinical resources and support. These include technology (e.g., system emails, Microsoft 365, computers/laptops in workspaces), clerical and billing support, and devoted workspaces for clinical and administrative duties.

The stipend for the next training year is \$31,000. MiraCare also provides an optional health care insurance plan. Interns are provided with professional liability insurance through MiraCare *and are also required* to maintain any private insurance they may carry and/or insurance coverage through their graduate school. Proof of coverage by academic institutions needs to be received prior to seeing patients.

Evaluations

Feedback is an essential element of learning and training. To support this, the Training Program offers written, quarterly evaluations during internship. Evaluations are based upon supervisors' case reviews, the training team's (including didactic, group supervisors and seminar leaders) observations and interactions with the interns during clinical case review, trainings, seminars, presentations, consultations, etc. At the end of the first quarter, a baseline evaluation is completed to identify the intern's strengths and growth edges. It is a time to discuss and plan for any notable challenges or concerns. At the six-month mark, interns are given a formal evaluation of all competencies that is also emailed to the intern's academic institution; feedback is provided regarding noted strengths and ongoing areas for further development during the second half of the training year. The nine-month evaluation is used to identify growth and any skills that need to be addressed in the last three months. During the last month of the training year, interns present a clinical case demonstrating their clinical style and professional growth to staff. Interns' final, formal evaluation is reviewed with the intern and provided to the academic institution at the conclusion of internship. The minimum level of achievement for successful completion of internship is a "Proficient" rating for each element and overall competency listed on the "Clinical Psychology Doctoral Internship Evaluation."

Clinical Psychology Doctoral Internship APA-Accreditation

MiraCare Neuro Behavioral Health's Internship Training Program has been APA-accredited since November 8, 2016 (at that time, our name was Palos Behavioral Health Professionals). We are pleased to share that as of August 14, 2025, we have been re-accredited and our next site visit is scheduled to be held in 2035.

*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, DC 20002
Phone: (202) 336-5979 / E-mail: apaaccred@apa.org
Web: <http://www.apa.org/ed/accreditation/>

Questions regarding training at MiraCare can be directed to Dr. Julie Johnson at jjohnson.psyd@miracaregroup.com.

Clinical Psychology Post-Doctoral Fellow Opportunities

MiraCare also offers Clinical Psychology Post-Doctoral Fellowships. We strongly believe that this year of advanced training promotes early-career psychologists' growth and experience by offering support with greater independence. For those who join us as interns, they can apply for a position to continue their work and learn to navigate the process of longer-term psychotherapy. Post-doctoral fellows also are encouraged to develop professional niches, offer supervision to interns, and receive support navigating the licensure process.

Our post-doctoral program is designed to follow APA guidelines for this training level and meet licensure requirements in the state of Illinois. *Importantly, matching to our site for internship is not a guarantee from applicants or the site to make the commitment for a post-doctoral position. There is an interview and application process for these positions.*

STATEMENT OF NONDISCRIMINATION

MiraCare Group is committed to non-discriminatory practices, and this policy states MiraCare's position on nondiscrimination. This policy applies to all MiraCare employees, trainees, and clients.

MiraCare follows an equal employment policy; it does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities or operations. These activities include, but are not limited to, the hiring and firing staff and provision of services. We are committed to and successful in providing an inclusive and welcoming environment for all members of our staff and clients.

This policy also applies to internal promotions, training, opportunities for advancement, terminations, clients, and dealings with the general public. MiraCare will take affirmative action measures to ensure against discrimination in employment, recruitment, advertisements for employment, compensation, termination, upgrading, promotions, and other conditions of employment against any employee or job applicant.

Any employee or client who believes that he or she or any affiliate of MiraCare Group has been discriminated against is strongly encouraged to report this concern promptly to the Clinical Director or Training Director.

Due Process and Grievance Procedures for Intern Problems/Concerns

This document provides the interns and staff at MiraCare Neuro Behavioral Health an overview of the identification and management of intern problems and concerns, a listing of possible sanctions and an explicit discussion of the due process procedures. Also included are grievance procedures for interns and staff.

I. Definition of Problematic Behavior

Problematic Behavior is defined broadly as an interference in professional functioning which is reflected in one or more of the following ways: 1) an inability and/or unwillingness to acquire and integrate professional standards into one's repertoire of professional behavior; 2) an inability to acquire professional skills in order to reach an acceptable level of competency; and/or 3) an inability to control personal stress, strong emotional reactions, and/or psychological dysfunction which interfere with professional functioning.

It is a professional judgment as to when an intern's behavior becomes problematic rather than of concern. Trainees may exhibit behaviors, attitudes, or characteristics, which while of concern and requiring remediation, are not unexpected or excessive for professionals in training. Problems typically become identified when they include one or more of the following characteristics:

1. the intern does not acknowledge, understand, or address the problem when it is identified.
2. the problem is not merely a reflection of a skill deficit which can be rectified by academic or didactic training.
3. the quality of services delivered by the intern is sufficiently negatively affected;
4. the problem is not restricted to one area of professional functioning;
5. a disproportionate amount of attention by training personnel is required; and/or
6. the trainee's behavior does not change as a function of feedback, remediation efforts, and/or time.

II. Remediation and Sanction Alternatives

It is important to have meaningful ways to address problematic behavior once it has been identified. In implementing remediation or sanction interventions, the training staff must be mindful and balance the needs of the intern, the clients involved, members of the intern training group, the training staff, and other agency personnel. The following steps align with our Due Process guidelines:

- 1.0 Verbal Warning/Coaching: The purpose of a verbal warning is to clarify policies and expectations. This is the first step for correcting performance and/or behaviors. No written documentation is made.
- 2.0 Written Warning: The purpose of a written warning is to document the gaps in performance and/or expectations while agreeing on next steps to address concerns. The written letter is placed in the intern's file.
- 3.0 Remediation/Performance Improvement Plan and Suspension: The Training Director or Manager documents and discusses the gaps in performance and expectations and together with the employee will create a specific, documented plan to meet expectations.
 1. This includes a course of action and weekly touchpoints to discuss progress towards goals.
 2. The written plan and follow up action items are placed in the employee's file.
 3. Problems typically become identified when they include one or more of the following characteristics:
 - 3.3.1 Lack of acknowledgement, understanding, or addressing of the problem when it is identified.
 - 3.3.2 The problem is not merely a reflection of a skill deficit which can be rectified by additional training.
 - 3.3.3 The quality of services delivered by the employee is sufficiently negatively affected;
 - 3.3.4 The problem is not restricted to one area of professional functioning;
 - 3.3.5 A disproportionate amount of attention by training personnel is required; and/or
 - 3.3.6 The employee's behavior does not change as a function of feedback, remediation efforts, and/or time.
 4. Some performance or behavioral issues are so problematic and harmful that the most effective action may be the temporary removal of the employee from the workplace.
 - 3.4.1 When immediate action is necessary to ensure the safety of the employee or others, the immediate supervisor may suspend the employee pending the results of an investigation.
 - 3.4.2 Pay will be restored to the employee if an investigation of the incident or infraction does not substantiate any wrongdoing.
- 4.0 Termination: Employment is terminated with Mira Care Neuro Behavioral Health.
 1. Misconduct that involves dishonesty, violation of the law, or a significant risk to patient care and operations is grounds for immediate termination of employment.
 2. Examples include but are not limited to:

- 4.2.1 Violations of anti-harassment, anti-discrimination, non-retaliation, and drug and alcohol policies
- 4.2.2 Sleeping on the job
- 4.2.3 Violence in the workplace
- 4.2.4 Violation of Clinical Code of Ethics
- 4.2.5 Imminent physical or psychological harm to a patient

5.0 When applicable, the following accommodations could be considered:

- a. Schedule Modification is a time-limited, remediation-oriented closely supervised period of training designed to return the intern to a more fully functioning state. Modifying an intern's schedule is an accommodation made to assist the intern in responding to personal reactions to environmental stress, with the full expectation that the intern will complete the internship. This period will include more closely scrutinized supervision conducted by the regular supervisor in consultation with the TD. Several possible and perhaps concurrent courses of action may be included in modifying a schedule. These include:
 - i. Increasing the amount of supervision, either with the same or other supervisors;
 - ii. Change in the format, emphasis, and/or focus of supervision;
 - iii. Recommending personal therapy (a list of community practitioners and other options will be provided);
 - iv. Reducing the intern's clinical or other workload;
 - v. Requiring specific academic coursework.

The length of a schedule modification period will be determined by the TD in consultation with the primary supervisor and the Director. The termination of the schedule modification period will be determined, after discussions with the intern, by the TD in consultation with the primary supervisor and the Director.

- b. Probation is also a time limited, remediation-oriented, more closely supervised training period. Its purpose is to assess the ability of the intern to complete the internship and to return the intern to a more fully functioning state. Probation defines a relationship that the TD systematically monitors for a specific length of time the degree to which the intern addresses, changes and/or otherwise improves the behavior associated with the inadequate rating. The intern is informed of the probation in a written statement which includes:
 - i. The specific behaviors associated with the unacceptable rating;
 - ii. The recommendations for rectifying the problem;
 - iii. The time frame for the probation during which the problem is expected to be ameliorated, and
 - iv. The procedures to ascertain whether the problem has been appropriately rectified.

If the TD determines that there has not been sufficient improvement in the intern's behavior to remove the Probation or modified schedule, then the TD will discuss with the primary supervisor and the Director possible courses of action to be taken. The TD will communicate in writing to the intern that the conditions for revoking the probation or modified schedule have not been met. This notice will include the course of action the TD has decided to implement. These may include continuation of the remediation efforts for a specified time period or implementation of another alternative. Additionally, the TD will communicate to the Director that if the intern's behavior does not change, the intern will not successfully complete the internship.

- c. Suspension of Direct Service Activities requires a determination that the welfare of the intern's client has been jeopardized. Therefore, direct service activities will be suspended for a specified period as determined by the TD in consultation with the Clinical Director. At the end of the suspension period, the intern's supervisor in consultation with the TD will assess the intern's capacity for effective functioning and determine when direct service can be resumed.
- d. Temporary Leave involves the temporary withdrawal of all responsibilities and privileges in the agency. If the Probation Period, Suspension of Direct Service Activities, or Administrative Leave interferes with the successful completion of the training hours needed for completion of the internship, this will be noted in the intern's file and the intern's academic program will be informed. The TD will inform the intern of the effects that the temporary leave will have on the intern's stipend.
- e. Dismissal from the Internship involves the permanent withdrawal of all agency responsibilities and privileges. When specific interventions do not, after a reasonable time period, rectify the problem behavior or concerns and the trainee seems unable or unwilling to alter her/his behavior, the TD will discuss with the Director the possibility of termination from the training program or dismissal from the agency. Either administrative leave or dismissal would be invoked in cases of severe violations of the APA Code of Ethics, or when imminent physical or psychological harm to a client is a major factor, or the intern is unable to complete the internship due to physical, mental, or emotional illness. When an intern has been dismissed, the TD will communicate to the intern's academic department that the intern has not successfully completed the internship.

III. Procedures for Responding to Inadequate Performance by an Intern

If an intern receives an "unacceptable rating" from any of the evaluation sources in any of the major categories of evaluation, or if a staff member has concerns about an intern's behavior (ethical or legal violations, professional incompetence) the following procedures will be initiated:

1. The staff member will consult with the Training Director (TD) to discuss the inadequate rating and determine if there is reason to proceed and/or if the behavior in question is being rectified. If it is the TD who has the concern, the TD will discuss the issues with the Clinical Director.
2. If the staff member who brings the concern to the TD is not the intern's primary supervisor, the TD will discuss the concern with the intern's primary supervisor.
3. If the TD and primary supervisor determine that the alleged behavior in the complaint, if proven, would constitute a serious violation, the TD will inform the staff member who initially brought the complaint.
4. The TD will meet with the Intern Supervisors to discuss the performance rating or the concern.
5. The TD will meet with the Clinical Director to discuss the concerns and possible courses of action to be taken to address the issues.
6. The TD, primary supervisor, and Director may meet to discuss possible course of actions. The possible course of actions includes the remediation and sanction alternatives listed above.
7. Whenever a decision has been made by the Clinical Director or TD about an intern's training program or status in the agency, the TD will inform the intern in writing and will meet with the intern to review the decision. This meeting may include the intern's primary supervisor and other relevant staff members. If the intern accepts the decision, any formal action taken by the Training Program may be communicated in writing to the intern's academic department. This notification indicates the nature of the concern and the specific alternatives implemented to address the concern.
8. The intern may choose to accept the conditions or may choose to challenge the action. The procedures for challenging the action are presented below.
9. Once the problem has been resolved, either by the end of the remediation period or by the next evaluation, the interns' school will be notified in writing of the student's progress. A copy of this letter will also be sent to the student.
10. It is the hope of MiraCare that disagreements can be processed through a cooperative effort of the student, supervisor, MiraCare Training Director, Director of Clinical Services, and/or the intern's school Director of Training. ***Students are always encouraged to seek support and advice from their school's Director of Training.***

IV. Due Process: General Guidelines

Due process ensures that decisions about interns are not arbitrary or personally based. It requires that the Training Program identify specific evaluative procedures, which are applied to all trainees, and provide appropriate appeal procedures available to the intern. All steps need to be appropriately documented and implemented. General due process guidelines include:

1. During the orientation period, the program's expectations related to professional functioning are discussed with the intern in both group and individual settings.
2. Stipulating the procedures for evaluation, including when and how evaluations will be conducted. Such evaluations should occur at meaningful intervals.
3. Articulating the various procedures and actions involved in making decisions regarding the problem behavior or concerns.
4. Communicating, early and often, with graduate programs about any suspected difficulties with interns and when necessary, seeking input from these academic programs about how to address such difficulties.
5. Instituting, when appropriate, a remediation plan for identified inadequacies, including a time frame for expected remediation and consequences of not rectifying the inadequacies.
6. Providing a written procedure to the intern, which describes how the intern may appeal the program's action. Such procedures are included in the Intern Orientation Binder. The Intern Orientation Binder is provided to interns and reviewed during orientation.
7. Ensuring that interns have sufficient time to respond to any action taken by the program.
8. Using input from multiple professional sources when making decisions or recommendations regarding the intern's performance.
9. Documenting, in writing and to all relevant parties, the actions taken by the program and its rationale.

V. Due Process: Procedures

The basic meaning of due process is to inform and to provide a framework to respond, act or dispute. When a matter cannot be resolved between the TD and intern or staff, the steps to be taken are listed below.

1. **Grievance Procedure** There are two situations in which grievance procedures can be initiated.

- a. In the event an intern encounters any difficulties or problems (e.g. poor supervision, unavailability of supervisor, evaluations perceived as unfair, workload issues, personality clashes, other staff conflict) during his/her training experiences, an intern can:
 - i. Discuss the issue with the staff member(s) involved.
 - ii. If the issue cannot be resolved informally, the intern should discuss the concern with the TD (or the Clinical Director if the grievance is with the TD). At this time the academic Director of Clinical Training may be contacted for assistance without beginning a formal process.
 - iii. If the TD or Clinical Director cannot resolve the issue, the intern can formally challenge any action or decision taken by the TD, the supervisor or any member of the training staff by following this procedure:
 - 1. The intern should file a formal complaint, in writing and with all supporting documents, with the TD. If the intern is challenging a formal evaluation, the intern must do so within 5 days of receipt of the evaluation.
 - 2. Within three days of a formal complaint, the TD must consult with the Clinical Director(s), MiraCare Owner, and a representative of the intern's choosing to review and discuss the issues. A final decision will be made by the MiraCare Owner.
- b. If a training staff member has a specific concern about an intern, the staff member should:
 - i. Discuss the issue with the intern(s) involved.
 - ii. Consult with the TD.
 - iii. If the issue is not resolved informally, the staff member may seek resolution of the concern by written request, with all supporting documents, to the TD for a review of the situation. When this occurs, the TD will:
 - 1. Within three days of a formal complaint, the TD must consult with the Clinical Director and Director of Human Resources and make a recommendation to dismiss the complaint or to follow an accommodation, remediation, or sanction above.