

**KAISER PERMANENTE NORTH BAY CONSORTIUM
POSTDOCTORAL RESIDENCY PROGRAM
IN CLINICAL PSYCHOLOGY**

**COMPETENCIES QUARTERLY PROGRESS REPORT
AND
INDIVIDUAL TRAINING CONTRACT
2008-2009**

Resident: _____
 Primary Supervisor: _____
 Delegated Supervisor: _____
 Assessment Supervisors: _____
 Other Supervisors: _____

Adult Team _____
 Child Team _____
 Other Program _____
 Dates: _____

The following grid is designed to be an interactive communication tool for the resident and supervisors. It is intended to provide an initial evaluation of the resident's skills as an entry-level postdoctoral resident, with subsequent quarterly reviews and re-evaluations. The Baseline rating is taken from the resident's self-assessment, and serves as a fluid starting point for developing the individual training plan. Identification of areas of focus for supervision should be marked with an S. The resident will obtain supervised experience and demonstrate competencies in the following checked skill areas by the end of the quarter.

Competency Assessment Rating Scale:

- 5 = Outstanding : Resident's performance meets expectations of a licensed, eligible psychologist.
- 4 = Exceeds Expectations: Resident's performance significantly exceeds expectations of his/her position as an entry-level postdoctoral resident.
- 3 = Meets Expectations: Resident's performance meets expectations of his/her position as an entry-level postdoctoral resident.
- 2 = Needs Improvement: Resident's performance is below the expectations of his/her position as an entry-level postdoctoral resident.
- 1 = No experience or Not applicable
- S = Current area targeted as a focus of supervision

CORE COMPETENCY AREAS	ASSESSMENT RATINGS			
GOAL I: PROFESSIONAL SKILLS	Baseline 09/01/08	12/1/2008	3/1/2009	6/1/2009
Objective A: Provides therapy to individuals, families, and groups				
THERAPY SKILLS:				
• Demonstrates an ability to conduct intake evaluations that lead to well-developed diagnoses				
• Appropriateness of treatment plans				
• Establishment of rapport and effective working relationship with patient				
• Demonstrates a sensitivity to the patient's frame of reference				
• Demonstrates conceptualization of patient's intrapersonal processes				
• Sensitive to therapy process issues and demonstrates an ability to use them				
• Sensitive to countertransference issues				
• Demonstrates the ability to utilize community resources in delivering therapeutic services				
• Demonstrates the ability to coordinate treatment with psychiatrist, primary care physicians, and emergency medicine				
• Demonstrates appropriate handling of termination				
• Demonstrates flexibility in application of a variety of treatment modalities/interventions				
Objective B: Treats a broad range of clients, carrying a progressively larger caseload and managing increasingly complex cases	Baseline 09/01/08	12/1/2008	3/1/2009	6/1/2009
ADVANCED THERAPY SKILLS:				
• Demonstrates confidence in evaluating a wide range of diagnoses and client populations				
• Demonstrates increasing competence to conceptualize more complex cases and co-morbidities				
• Demonstrates competence to evaluate risk and safety issues and make appropriate recommendations to patients who are in crisis				
• Demonstrates competence in conducting intake evaluations that lead to well developed diagnoses and appropriate treatment plans that are realistic and collaborate with patients' goals				
• Understands own emotional reactions to the patient constructively and seeks consultation for complex cases				

<ul style="list-style-type: none"> • CompQuartProgRprt ITC • Demonstrates flexibility in applying a variety of treatment modalities/interventions 				
GOAL I: PROFESSIONAL SKILLS (CONTINUED)	Baseline 09/01/08	12/1/2008	3/1/2009	6/1/2009
Objective C: Enhances abilities to integrate science and practice				
<ul style="list-style-type: none"> • Demonstrates competence in applying Evidence-Based Treatment (EBT) to inform clinical practice 				
<ul style="list-style-type: none"> • Uses theoretical and research knowledge to conceptualize cases and form appropriate treatment goals 				
<ul style="list-style-type: none"> • Demonstrates competence in making case presentations to peers in group supervision and staff case conferences 				
<ul style="list-style-type: none"> • Demonstrates competence to use outcome measures to improve program efficacy by participating in one research project or program evaluation project over the course of the training year 				
GOAL II: SENSITIVITY TO DIVERSITY	Baseline 09/01/08	12/1/2008	3/1/2009	6/1/2009
<ul style="list-style-type: none"> • Demonstrates competence in building rapport quickly with all patients regardless of the issues of diversity or socioeconomic backgrounds. 				
<ul style="list-style-type: none"> • Identifies potentially challenging patients and seeks supervision/consultation 				
<ul style="list-style-type: none"> • Demonstrates an awareness of how one's own cultural/ethnic identity may impact patients and is committed to exploring this within relationship to clinical work. 				
<ul style="list-style-type: none"> • Demonstrates competence and sensitivity to the issues relevant to the treatment and assessment of individuals from diverse ethnic groups, religious backgrounds, gender identities, and sexual orientations. 				
<ul style="list-style-type: none"> • Discusses individual differences with patients, when appropriate; acknowledges and respects differences between self and patient 				
GOAL III: ASSESSMENT SKILLS	Baseline 09/01/08	12/1/2008	3/1/2009	6/1/2009
<ul style="list-style-type: none"> • Demonstrates competence to administer and interpret intelligence tests, the MMPI-2 and select, administer, and interpret other tests in his/her area of practice 				
<ul style="list-style-type: none"> • Completes a minimum of two test batteries that address referral questions and augment more refined treatment plans 				
<ul style="list-style-type: none"> • Demonstrates competence to write and organize reports that answer referral questions and give specific recommendations to the referring provider 				
<ul style="list-style-type: none"> • Demonstrates competence in timely administration, scoring, and report writing and completes two psychological test reports 				
<ul style="list-style-type: none"> • Demonstrates competence to conduct a feedback interview explaining the test results and recommendations 				
<ul style="list-style-type: none"> • Demonstrates competence to write reports and gives feedback in a manner that is sensitive to the patient as reader and understandable to the patient and/or caregiver 				
GOAL IV: INTERDISCIPLINARY COLLABORATIONS	Baseline 09/01/08	12/1/2008	3/1/2009	6/1/2009
<ul style="list-style-type: none"> • Demonstrates a professional manner and respectful interactions with other staff members (treatment teams, supervisors, and seeks peer support as needed) 				
<ul style="list-style-type: none"> • Forms reciprocal consulting relationships with health care professionals from other disciplines (physicians, psychiatrists, nurses and social workers) and uses this information to facilitate case conceptualization and treatment 				
<ul style="list-style-type: none"> • Demonstrates professional leadership skills as a consultant and/or psychological liaison in multidisciplinary teams 				
<ul style="list-style-type: none"> • Demonstrates competence in providing supervision, builds good rapport with supervisee, and demonstrates knowledge of supervision techniques, employing these skills in a consistent and effective manner, and seeking consultation as needed 				
<ul style="list-style-type: none"> • Demonstrates competence in effective time management, keeps scheduled appointments and meetings on time, and keeps supervisors aware of whereabouts as needed; minimizes unplanned leave whenever possible 				
<ul style="list-style-type: none"> • Demonstrates responsibility for accurately and efficiently documenting key patient care tasks (phone contacts, letters, intakes and progress notes) in a timely manner, seeks consultation with high risk issues 				
GOAL V: ETHICS & LAW	Baseline 09/01/08	12/1/2008	3/1/2009	6/1/2009
<ul style="list-style-type: none"> • Demonstrates competence to identify the ethical issues relevant to clinical cases 				
<ul style="list-style-type: none"> • Functions in a manner consistent with the highest ethical standards as outlined by the APA; issues include but are not limited to confidentiality, scope of practice, and personal 				
<ul style="list-style-type: none"> • Seeks consultation as needed 				
<ul style="list-style-type: none"> • Demonstrates understanding of California laws and national practices, and APA policies that apply to the practice of clinical psychology. 				
<ul style="list-style-type: none"> • Demonstrates competence in the utilization of legal resources/consultation to inform clinical practice 				

GOAL VI: MANAGING PERSONAL PROCESSES, PROFESSIONAL & EDUCATIONAL GOALS	Baseline 09/01/08	12/1/2008	3/1/2009	6/1/2009
• Demonstrates competence to understand own emotional reactions, uses them constructively, and seeks consultation when necessary				
• Demonstrates positive coping strategies with personal and professional challenges; maintains professional functioning and quality patient care				
• Demonstrates self-direction to expand knowledge and skills (independently seeks out information to enhance clinical practice), utilizing available databases, professional literature, seminars and training sessions, and other resources				
• Models a commitment to educational and scholarly endeavors to keep current with the most recent research within areas of interest to inform and enhance professional practice				
• Demonstrates commitment seek out supervision to refine and enhance professional skills				
	Date	Date	Date	Date
Resident's Initials:				
Supervisor's Initials:				

INDIVIDUAL TRAINING CONTRACT

I. CORE COMPETENCY AREAS (See Competencies Quarterly Progress Report, above)

Competency areas rated 3 & above:

Competency area(s) rated as focus of supervision:

Core Competency Area:

Objective:

Plan:

Core Competency Area:

Objective:

Plan:

II. TRAINING AGREEMENTS

A. Primary Supervision: I agree with the plan for Dr. _____ to be my primary supervisor for my post doctoral residency year. My primary supervisor's role is as a mentor/guide for my professional development and clinical work. The emphasis during this training year, in addition to the Basic Requirements, will be on, for example, group therapy, crisis intervention, advanced therapy skills, research, case conceptualization, etc.

B. Delegated Supervision: Supervisory experiences will be provided by Dr. _____ who will meet with me one hour per week and will also monitor my case-load and provide guidance in particular areas of interest. In addition I will receive group supervision with _____ Dr. _____ for _____, and Dr. _____ for _____.

C. Additional Supervision: (to meet my career/training objectives) Additional supervisory experiences may include supervision of special populations, groups, or research projects. Dr. _____ has agreed to supervise _____ to meet the objective of _____ (e.g., research project).

D. Assessment Supervision: I agree with the plan for Dr. _____ (&/or) Dr. _____ to supervise the completion of my required psychological test batteries and provide guidance during group supervision. The emphasis during this supervisory experience will be any remaining area of core competency and may provide advanced experience in a specialized assessment (s).

E. Additional Supervision or Training Experiences (to meet objectives regarding core competencies): The supervisory team sees the following experiences as helpful in increasing competency in specific areas:

Example of Core Competency Area: Resident had one of his patients commit suicide in his internship which has decreased his confidence to assess risk.

Example of Objective: Increase confidence in risk management

Example of Plan: Resident has agreed to plan with primary supervisor to shadow more On-Call, review suicidal assessment instruments, and attend outside seminar on risk management.

Core Competency Area:

Objective:

Plan:

III: RESPONSIBILITIES AND EXPECTATIONS

I understand the basic requirements and expected competencies of this postdoctoral program, and I have read the Orientation Manual that details other expectations and responsibilities of the program. My progress with these responsibilities and expectations will be informally evaluated at quarterly intervals and formally evaluated semi-annually. This information will be confidential with the exception that it will be reported by my primary supervisor to the supervisory team. Numerical data is collected from semi-annual evaluations and collated by training site and by the consortium for the purpose of program evaluation.

These responsibilities and expectations are to:

- Maintain professional and ethical standards, including but not limited to adherence to reporting laws, confidentiality, and respect for boundaries
- Maintain a log of supervisory hours (individual and group), treatment team documentation and completed assessments
- Present **challenging** cases at case conferences, group supervision & fishbowl supervision
- Demonstrate preparedness for supervision
- Present Best Practices Research
- Complete Required Assessments (2)
- Complete Required Research Project or Program Evaluations
- Attend Training Seminars (90%)
- Complete assigned readings
- Model professional behavior by timeliness of record keeping, report writing, meetings, supervision, patient care, etc.

I also understand and agree that:

- Supervisors bear liability in supervision regarding the standard of patient care/client welfare, and need to have complete information regarding clients and files
- In supervision, attention to personal factors such as values, belief systems, biases, conflicts, and predispositions may be discussed in relation to patient care/client welfare.
- In the event that my own personal process(es) do disrupt patient care, the supervisory team and/or training director may suggest that I seek my own personal therapy.
- If any area is incomplete or unsatisfactory, the supervisory team and training director will specify strategies to meet these competencies.

Resident acknowledges that, by signing this form, he/she understands and agrees to the above Responsibilities and Expectations.

The Individual Training Plan has been agreed to on this _____ of _____, 20_____

Signatures

Resident: (Required) _____ Date _____

Primary Supervisor: (Required) _____ Date _____

Training Director: (Required) _____ Date _____

Delegated Supervisor: _____ Date _____

Additional Supervisor: _____ Date _____

Additional Supervisor: _____ Date _____

* Adapted by L. Kittredge, Kaiser Permanente North Bay Consortium Postdoctoral Residency Program, from Falender & Shafranske, *Clinical Supervision: A Competency-Based Approach*. American Psychological Association, Washington, D.C., 2004, and various models posted on the APPIC Website

