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# Gateways Conditional Release Program (CONREP)

## Los Angeles and San Diego County



**Doctoral Psychology Internship Training Manual**

**Forensic Clinician Psychology Intern**

Gateways CONREP Administration

Los Angeles and San Diego County CONREP

Training Director: Dr. Nicole Paglione

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## Introduction to Internship Training Manual

This manual is intended as a guide to the structure and function of the Gateways CONREP's Doctoral Internship Program as well as a formal description of basic policies and procedures. This manual seeks to summarize the pragmatic, functional elements of the training program for both doctoral interns and program staff. Gateways CONREP is also part of the larger agency of Gateways Hospital and Mental Health Centers. As such, some of the information summarized here, especially having to do with personnel issues, may be covered in more detail in other policy documents, which are available for review upon request.

### Accreditation Status

Gateways CONREP's Doctoral Psychology Internship has full APPIC membership; however, it is not APA-accredited. Questions related to the program's accredited status should be directed to the Commission of Accreditation:

Office of Program Consultation and Accreditation

American Psychological Association

750 1<sup>st</sup> Street, NE, Washington, DC 20002

Phone: (202)336-5979

Email: [apaaccred@apa.org](mailto:apaaccred@apa.org)

Web: [www.apa.org/ed/accreditation](http://www.apa.org/ed/accreditation)

## CONREP Mission and Philosophy

The Conditional Release Program (CONREP) is the California Department of State Hospitals' statewide system of community-based treatment and supervision services for judicially-committed individuals (PC 1026, Not Guilty by Reason of Insanity; PC 1370, Incompetent to Stand Trial; WIC 6316, Civilly Committed Mentally Disordered Sex Offender; and PC 2972, Civilly Committed Offender with a Mental Health Disorder), and Offenders with a Mental Health Disorder, Parolees (PC 2962). The primary mission of CONREP is the protection of the public through the reduction, if not prevention, of re-offense by specified forensic patients.

Gateways CONREP also aligns this mission with that of Gateways Hospital and Mental Health Center, which seeks to create and maintain mental health facilities and programs to serve the needs of mentally ill, emotionally disturbed, and maladjusted persons who require inpatient, outpatient, and rehabilitation services, treatment, and care, regardless of race, creed, national origin, or sex. Since 1990 Gateways Hospital and Mental Health Center has contracted with the California Department of Mental Health (now the Department of State Hospitals) to provide Conditional Release Program services to all of Los Angeles County. In 2014, Gateways Hospital expanded their contract with the Department of State Hospitals to provide Conditional Release Program services to San Diego County as well.

Gateways CONREP strives to achieve its mission by providing intensive outpatient mental health treatment, supervision, and assessment services that are consistent with the standards of practice established by the Department of State Hospital's (DSH) CONREP Policy and Procedure Manuals (Volumes I and II) and in adherence with the California Penal Code and court orders for judicially-committed individuals or Board of Prison Hearing (BPH) directives for Offenders with a Mental Health Disorder (OMHD), Parolees. In addition, Gateways CONREP maintains the ability to respond to the needs of individuals in our program on a 24-hour basis. This level of supervision is attained through utilization of a variety of program resources, including on-call staff, residential care, an Emergency Handbook, and rehospitalization to the state hospital if indicated. The forensic client typically first transitions to the community through our 90-day residential program—Gateways Satellite, a Statewide Transitional Residential Program (STRP) level of care. Upon completion of this step-down program, the forensic client then transitions to either San Diego County's community outpatient treatment program (i.e., San Diego CONREP) or Los Angeles County's community outpatient treatment program—Gateways Forensic Community Treatment Program (FCTP).

Gateways CONREP provides training and ongoing supervision to all employees based on the skills they require to carry out our mission. Resources to achieve this goal include DSH Policies and Procedures, the California Penal Code, this manual, and consultation with CONREP Operations. Gateways CONREP employees are also oriented and trained to utilize Gateways Hospital and Mental Health Center policies, procedures, and resources for hospital administration, safety, fiscal management, human resources, and employment practices. Further details of CONREP Program Philosophy are contained in the DSH CONREP Policy and Procedure Manual, Sections 1110.1-1110.2, which is readily available on site.

## Intern Selection and Academic Preparation Requirements Policy

### Application Process

Gateways CONREP's Doctoral Internship Program (DIP) currently offers 4 full-time internship positions—2 in Los Angeles County and 2 in San Diego County. Students interested in applying for the internship program should submit an online application through the APPIC website ([www.appic.org](http://www.appic.org)), using the APPIC Application for Psychology Internships (AAPI). A complete application consists of the following materials:

1. A completed online AAPI
2. Cover letter (as part of your AAPI)
3. An updated Curriculum Vitae (as part of your AAPI)
4. Three Standard Reference Forms, two of which must be from individuals who have directly supervised your clinical work (as part of AAPI)
5. Official transcripts of all graduate coursework

All application materials must be received by the date noted in the current APPIC directory listing in order to be considered.

### Application Screening and Interview Processes

Gateways CONREP's DIP will base its selection process on the entire application package noted above; however, applicants who have met the following qualifications prior to beginning internship will be considered preferred:

1. A minimum of 500 intervention hours;
2. A minimum of 50 assessment hours (preferred, not required);
3. Dissertation proposal defended (preferred, not required);
4. Some experience or special interest in working with diverse populations;
5. Practicum experience with severe mental illness, substance use disorders, and/or forensics (preferred, not required);
6. Current enrollment and good standing in an APA- or CPA-accredited clinical, counseling, or school doctoral program.

All applications are reviewed by the Gateways CONREP DIP's Training Committee using a standard Application Rating Scale and evaluated for potential goodness of fit with the internship program. Of particular interest is the intern's cover letter, delineating why they believe our internship site is a good clinical fit for their interests and skill. In addition, we are eager to learn about the prospective Intern's clinical experiences and expertise, with a special focus on diversity (e.g., ethnicity, sexual orientation, disability). With regard to the letters of reference, we will pay special mind to one's sense of maturity and openness to learning and feedback. The presentation and strength of the written materials are most important to the selection committee, which is comprised of supervisory staff who are invested in finding a good match between the prospective intern's stated goals and background and Gateways CONREP's mission and available training opportunities. It bears mentioning we do not have a specific profile with which we are trying to match; however, our selection process is relatively standardized, pulling for a prospective intern's openness to the forensic focus of our work.

The Training Committee meets to determine which applicants to invite for interviews based upon the results of this review process. Applicants are notified whether they have received an interview by email on or before January 1. Interviews are scheduled in January on a first come, first serve basis.

Interviews take place via videoconference with the Training Director and at least one member of the Training Committee. Interviews are conducted using a standard set of interview questions, although members of the Training Committee may ask additional interview questions of applicants as appropriate. Half of the interview questions are geared toward getting to know the applicant, while the second half is a set of standardized questions graded on a 5-point scale, designed to assess the prospective Intern's knowledge regarding severe mental illness, violence risk assessment, and the provision of treatment with a forensically-involved population. Upon completing the standardized interview, each applicant will end up with a numerical score. The interview will last approximately 45-60 minutes, and prospective Interns will be afforded time to ask questions as well as to tour the facility.

#### *Participation in the APPIC Match*

The Training Committee holds a meeting within one week of the final interviews being completed and before APPIC's Rank Order Deadline to determine applicant rankings. The full application package and information gleaned from the interview process are utilized to determine applicant rankings. As a member of APPIC, Gateways CONREP's DIP participates in the national internship matching process by submitting its applicant rankings to the National Matching Service. Gateways CONREP's DIP abides by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

All interns who match to Gateways CONREP's DIP must provide proof of citizenship or legal residency and must successfully pass a fingerprint-based background check before beginning employment. The history of a felony or misdemeanor may result in a fail in this review process and prevent the intern from working at Gateways CONREP's DIP. Additionally, Gateways CONREP is a drug- and alcohol-free workplace. All interns must pass a drug screen prior to beginning their internship year. This drug test includes screening for marijuana, alcohol, amphetamines, and stimulants. Interns also must provide results from a tuberculosis (TB) screening test from the previous 12-months. Instructions for providing this information or completing the background check, drug screen, and TB screening will be sent out by Gateways Hospital and Mental Health Centers' Human Resource Department to all who match after the match process is complete, typically in July, preceding the internship start date.

Questions regarding any part of the selection process or the Gateways CONREP DIP's academic preparation requirements may be directed to the Gateways CONREP DIP Training Director, Dr. Nicole Paglione ([npaglione@gatewayshospital.org](mailto:npaglione@gatewayshospital.org)).

## Client Population

In addition to being a culturally and clinically diverse population, clients at Gateways CONREP/FCTP also represent a range of individuals involved within the justice system. Specifically, clients have been committed to receive mental health treatment pursuant to California Penal Code (PC) 2962, Offender with a Mental Health Disorder, Parolee; PC 2972, Offender with a Mental Health Disorder, Former Parolee; PC 1026, Guilty, but Not Guilty by Reason of Insanity; or PC 1370, Incompetent to Stand Trial.

PC 2962 (OMHD, Parolee): Those found to be Offenders with a Mental Health Disorder (OMHD) were previously incarcerated for a violent offense and, as a result of their severe mental illness, are still considered dangerous. After completing their prison term, the Board of Parole Hearings (BPH) ordered they receive psychiatric treatment as a special condition of parole. Said treatment can be completed at the state hospital level of care or in Gateways CONREP's community outpatient treatment program. The OMHD Parolee can be ordered to receive treatment for up to three years.

PC 2972 (OMHD, Former Parolee): After the PC 2962 OMHD's parole expires, they can be civilly committed pursuant to PC 2972, OMHD, Former Parolee, should they still pose a danger to the health and safety of others given their mental disorder. This commitment can be extended each year, indefinitely.

PC 1026 (NGI): Individuals found Guilty, but Not Guilty by Reason of Insanity (NGI), were originally found guilty of committing an offense; however, the fact finder then determined, due to their mental illness, they were not guilty. In other words, they committed the physical act, yet their mental illness prevented them from forming the mental state required to hold someone culpable under the law. As a result, instead of being sentenced to prison, those found NGI are ordered to receive psychiatric treatment until they are restored to sanity. Said treatment can be carried out in a state hospital setting or in Gateways CONREP's community outpatient treatment program.

PC 1370 (IST): Individuals found Incompetent to stand trial have yet to face their criminal allegations, as it is determined their constitutional rights to a fair trial would be violated if sent to court, given their lack of foundational knowledge related to the court processes and personnel and/or their compromised ability to rationally assist legal counsel in developing a viable defense. These individuals are ordered by the court to Gateways CONREP's outpatient treatment program to receive restoration to competency training, so they may be returned to court to face their pending charges.

## Diversity and Non-Discrimination Policy

Gateways CONREP's Doctoral Internship Program (DIP) celebrates and values diversity, both for our justice-involved clientele as well as our staff and interns. As such, Gateways CONREP's DIP seeks to create an equitable, hospitable, safe, and inclusive learning environment for its interns. Gateways CONREP appreciates how diversity among our interns, staff, and leadership team enriches the training and learning experience, promotes one's personal and professional development, and strengthens the workplace as a whole while also impacting the community at large. As a result, Gateways CONREP's DIP puts forth much effort to create a climate in which all staff and interns feel respected, comfortable, and in which success is possible and obtainable.

Indeed, Gateways CONREP's DIP serves a justice-involved population with severe mental illness. Thus, the client population disproportionately represents individuals from marginalized and oppressed populations, which further complicates the oppression they already experience simply from being justice-involved and mentally ill. As a result, Gateways CONREP's DIP strives to increase awareness, dispel ignorance, and enhance a sense of comfort surrounding multicultural experiences. Gateways CONREP's DIP includes an expected competency in individual and cultural diversity training, and multiple experiences are provided throughout the year to be sure that interns are both personally supported and well-trained in this area.

In addition, because it is Gateways CONREP's belief that a diverse training environment, both with regard to client population and training staff, contributes to the overall quality of the training experience. As such, Gateways CONREP's DIP welcomes applicants from diverse backgrounds, providing equal opportunity to all prospective interns and not discriminating because of a person's age, disability status, ethnicity, gender identity, gender expression, language, national origin, race, religion, culture, sexual orientation, socioeconomic status, or any other factor that is irrelevant to success as a psychology intern. Instead, Gateways CONREP looks at goodness of fit—meaning Gateways CONREP seeks to recruit interns whose values, skills, experiences, and personalities fit with this internship. This includes Gateways CONREP DIP's efforts toward matching clients to their intern clinicians, when possible, by way of ethnicity, culture, sexual orientation, gender identity, etc.

If an applicant or intern requires accommodation, they are instructed to contact the internship Director of Training/Clinical Director to initiate this process. Gateways CONREP DIP's goal in diversity training is to ensure that interns develop the knowledge, skills, and awareness necessary to provide competent psychological services to all members of the forensic treatment program. Diversity experiences and training are offered throughout the training program to ensure that interns are both personally supported and well-trained in this area. Gateways CONREP DIP's training program actively solicits feedback from interns and staff throughout the training program to evaluate its effectiveness and success in training interns surrounding individual and cultural diversity. To this end, Gateways CONREP DIP's training program complies with APA's expected competency in individual and cultural diversity by ensuring the intern demonstrates acceptable levels of knowledge, skills, and awareness to work effectively with diverse individuals.

## Learning Goals for Training Year

The Gateways CONREP internship ascribes to a practitioner-scholar model through the practical application of theory and knowledge. Thus, this training site's primary mode of education is experiential, supplemented with didactic seminars, modeling, clinical supervision, case consultation, and collaboration with an interdisciplinary team. The goal of this internship is to develop critical thinking, conceptualization, problem-solving, judgment, and other scientific skills that are particularly pertinent to the practice of both clinical and forensic psychology. We understand this is achieved through a variety of activities, including consultation of the professional literature and the use of empirically grounded methodologies and interventions when working with and conceptualizing clients.

The goals of the internship program wed the mission of the agency with the values of the professional psychological community—that is, the training program appreciates that clinical practice within a forensic outpatient setting requires the same core clinical skills and knowledge base as professional practice generally, but takes place within a complex legal, political, and social context. The primary learning goals of this training year include:

Developing General Proficiency in the Provision of Individual and Group Psychotherapy. At the most fundamental level, the primary goal of this internship is to provide broad and general preparation for entry level into the professional practice of psychology. Indeed, we wish to further Psychology as a science by developing and preparing well-rounded practitioners and scholars. This training year is meant to be the culmination of the intern's graduate studies, accrual of skills, and experience/attitudes acquired via practica trainings. The program emphasizes the applicability of training to a wide variety of settings and client populations.

Specialized Knowledge of Forensic Community Outpatient Issues. It is our expectation that most interns who seek a position at our training site are not only hoping for good general training, but also share a common interest in the provision of law, public policy, and social factors related to the practice of forensic psychology, particularly in an outpatient setting. Though development of specific expertise in this area requires additional training and experience after the internship year, this internship serves as a foundation for such specialization.

Service to Diverse and Underserved Clients. The internship program seeks to help develop the intern's appreciation for providing services to a diverse client population, varying in presenting complaints, age, ethnicity, linguistic preference, socioeconomic background, and education, among other areas of variability. Indeed, Gateways CONREP services adults from 18 to 80+, who are judicially committed (e.g., PC 1026, Not Guilty by Reason of Insanity) or under the auspice of the Board of Parole Hearings (e.g., PC 2962, Offenders with a Mental Health Disorder, Parolee). The majority of these individuals discharged from a state hospital and now live under Gateways CONREP's supervision in board and care facilities within Los Angeles and San Diego Counties, though some individuals also live more independently in the surrounding community. Gateways CONREP's population represents many cultural and ethnic backgrounds—the majority having limited financial resources and receiving government assistance, while some are undocumented immigrants who are funded by the State. Most of our clients have a severe and chronic mental illness, including both an affective and psychotic component. In addition, many of these individuals have a secondary substance abuse diagnosis as well as characterological deficits and personality

disorder diagnoses. Through experiential training, it is Gateways CONREP's goal to reinforce the importance of awareness of both self and other within the context of becoming a multiculturally competent practitioner and providing high quality services to underserved and diverse groups.

Professional Development. Consistent with the role of internship as a transition from student to practitioner, Gateways CONREP emphasizes development of attitudes and values consistent with entry into the profession. Throughout the course of internship, the intern is provided much autonomy, and it is expected that, with ample supervision, guidance, and practice, they will become increasingly more independent. Gateways CONREP also recognizes the Forensic Clinician Psychology Interns are essentially "colleagues in training," and therefore, we strive to model the ethical and effective application of knowledge, skill, and competence.

Integration of Science and Practice. Given the forensic focus of this setting, psychologists are often tasked with justifying the methods, interventions, and procedures used to treat our clients. It is expected our interns have completed extensive coursework in their graduate studies related to the empirical and theoretical bases of applied psychological methods. Thus, this internship seeks to further reinforce the juxtaposition between practice and scholarship, paying special attention to the current literature as it applies to this setting.

Generalized Proficiency in Report Writing Skills with a Focus on Forensic Issues. Report writing is an integral aspect of the Forensic Clinician's work, and as Gateways CONREP views the Forensic Clinician Psychology Intern as a full participant in the provision of services, honing the interns' skills in report writing is of primary focus throughout the internship year. Indeed, clinical staff first seek to develop the interns' ability to coherently and concisely address the topic at hand while paying special attention to the use of good grammar and sentence structure. As the intern receives and applies routine feedback, it is the goal of this internship to develop confidence and quality in the interns' report writing skills, with a specialized focus on forensic issues.

All of these learning goals fold into APA's Profession-Wide Competencies. That is, Gateways CONREP ensures its interns are ready for entry-level practice for each Profession Wide Competency by applying the MLA of "3" or higher at the time of the midpoint evaluation and "4" or higher at the time of the intern's final evaluation to each element associated with all nine Profession Wide Competencies. The methods used in evaluating the interns' competency on each element includes direct observation, case presentations, documentation review, weekly group and individual supervision, and comments from program staff. By ensuring the interns meet the MLA for each element of each Profession Wide Competency at the completion of the training year, the intern will have the ability to independently function in a broad range of clinical and professional activities. In addition, the intern will have the ability to generalize the skills and knowledge learned at Gateways CONREP to new situations as well as the ability to self-assess when to seek additional training, supervision, or consultation.

## Forensic Clinician Psychology Intern Position Overview

Overall, Gateways CONREP's internship program is a full year, offering approximately 2000 hours, though requiring 1750 hours, of supervised training. This includes at least 500 face-to-face client contact hours, though the nature of this work typically requires far more direct client services. Gateways CONREP's Doctoral Internship is a full-year commitment, beginning the last Monday in August and ending the last Friday in August the following calendar year. Interns are expected to maintain an 8:30am-5pm, Monday-Friday work schedule throughout their internship year. Because this is a full-time commitment, the completion of all formal coursework and practicum training is required prior to the Doctoral Psychology Intern beginning their internship with Gateways CONREP. Said coursework must be completed from a degree granting program in professional psychology. Of note, at least 25% of the interns' time will be spent in face-to-face direct service delivery.

The core focus of this internship is professional development and skill building, such that the intern is able to effectively, ethically, and competently work with a diverse client base in treatment for mental health, dual diagnosis, and/or forensic concerns. Additional training opportunities include refinement of clinical interviewing and report writing skills, case conceptualization and diagnosis, and a chance to obtain supervised experience with psychological testing, risk assessment, treatment planning, and risk formulation. The Doctoral Forensic Clinician Psychology Intern is responsible for scheduling and implementing the necessary (i.e., core) services to each client informed by the client's current Level of Care (LOC) and goals specified in his or her treatment plan. Through the implementation of these core services, the Doctoral Forensic Clinician Psychology Intern is expected to achieve the aforementioned training goals. An overview of the services provided by the Forensic Clinician Psychology Intern is as follows:

- Individual Therapy Sessions: typically 45-60 minutes in length and at a frequency that, at a minimum, meets core service requirements. The CONREP program follows the Risk Need Responsivity model, in which clients' services are matched to their criminogenic needs. For example, those clients who are at the Intensive Level of Care receive, at minimum, four individual therapy sessions per month, while clients at the Supportive Level of Care receive, at minimum, two individual therapy sessions per month. Therapy content and interventions are determined given the clients' treatment needs and potential violence risk as outlined in their court reports and treatment plans. Oftentimes, interventions are cognitive behavioral in nature, but other modalities are implemented as indicated and discussed in clinical supervision. The Psychology Intern will begin with a caseload of approximately 6 clients, though they may hold up to approximately 8 clients based on the clients' levels of care and Penal Code commitments.
- Group Therapy Sessions: typically one-hour sessions between a Forensic Clinician Psychology Intern and a group of up to 10 clients, who are usually at a similar level of functioning. These groups also serve to meet the clients' core service requirements. The Forensic Clinician Psychology Interns will be required to facilitate, at a minimum, 5 groups a month; though, as the internship progresses, they will have the opportunity to facilitate 8-to-10 groups monthly. The curriculum for Gateways CONREP's groups is discussed in clinical supervision and often include a compilation of handouts, workbooks, visual media, or other curriculum approved by the clinical supervisor.

- Collateral Contacts: as part of an integrated system of care, the Forensic Clinician Psychology Intern will be required to conduct collateral contacts, which are face-to-face or telephonic discussions with significant persons in the client's life and identified support network (e.g., 12-Step sponsor, family member, volunteer supervisor, board and care manager, etc.). The focus of these contacts is to gather information regarding the client's relationships; psychiatric, behavioral, and vocational functioning; and compliance with his or her terms and conditions of outpatient treatment. The discussions often are also focused on educating those people in the client's life regarding the client's clinical and risk issues. The Psychology Intern will facilitate contact with collaterals at a frequency that meets core service requirements and is indicated by the client's functioning (e.g., at the Intensive level of care the Intern will complete at least two collateral contacts per month for their client).
- Case Management: also as part of an integrated system of care, on occasion, the Forensic Clinician Psychology Intern will be required to provide case management services to their caseload. Specifically, while Gateways CONREP has an assigned Case Aide for many case management issues that arise, the Intern may be involved in the provision of light case management services as special circumstances come about. For instance, when clients are medically hospitalized while receiving outpatient supervision and care through CONREP, the treatment team must mobilize as a whole to ensure the client receives the appropriate medical and psychiatric care and that aftercare/housing is arranged for upon discharge. In other instances, the Intern might assist their clients with obtaining and operating their cellphones through the Lifeline program.

The Forensic Clinician Psychology Intern documents all individual contacts, noting at a minimum the interventions provided and the individual's response. The notes reflect a forensic focus that incorporates how the services are aimed at managing the client's level of risk. These notes are reviewed in supervision, paying attention to the clinical content while also keeping in mind the potential for legal consequences (e.g., cross examination, subpoena duces tecum, etc.), until the Intern demonstrates proficiency in note writing. Such diligent review is meant to ensure the clinical supervisor (a licensed psychologist) maintains clinical responsibility for all intern cases.

Although psychological assessment is not the predominant focus of this internship, there are certainly opportunities for the Forensic Clinician Psychology Intern to hone their assessment skills once their clinical responsibilities are complete. That said, the Psychology Intern will be trained on coding the HCR-20 version 3, a well-known and widely used Structured Professional Judgment risk assessment for violence tool, and the intern will be required to complete a supervised HCR-20v3 on each of their individual cases. However, in addition to this risk assessment tool, the Psychology Intern can also conduct a broad array of psychodiagnostic testing, including administering and scoring the RBANS, WASI, WAIS, TONI, WCST, MCMI, MMPI, PAI, TAT, and select malingering tools (e.g., ILK, DCT, TOMM, SIRS, MFAST). Psychology Interns may also have the opportunity to assess clients' competence to stand trial, pursuant to PC 1370(b)(1)/PC 1372, using tools such as the R-CAI, ECST-R, and CAST-ID. These assessment batteries and subsequent reports will be supervised closely as well as feedback sessions with the clients, in which the Psychology Intern will be tasked with reviewing the results of said assessments with the clients.

### Supervision and Ongoing Risk Assessment of Clients

To facilitate ongoing risk assessment and monitoring of the client's functioning, the Forensic Clinician Psychology Intern will monitor numerous aspects of the client's exposure to the community. Specifically, Psychology Interns will discuss with their clinical supervisors the granting of community passes, home visits, UA frequency, and telephone and internet usage, as described below:

- Passes: Upon admission, clients are on a 30-day restriction period, during which they are not permitted any passes and only visit the program and their board and care facility. The purpose of this restriction is to slowly integrate the client to the CONREP program, their new level of care, and the inherent demands. This period also allows the CONREP treatment team to closely monitor the client's initial adjustment and compliance with program terms and conditions. Upon successful completion of the 30-day restriction period, clients can earn buddy passes (beginning at 30 minutes) and work up to earning solo passes and outings. Clients' current pass allotment is detailed on their weekly schedule, which is monitored and updated by the Forensic Clinician Psychology Intern. Early in the internship, Interns are expected to bring all pass requests to their direct supervisor and/or the greater treatment team for guidance; however, as the Intern grows in their provision of forensic supervision, it is expected they will be more independent in exercising sound forensically-minded judgement with regard to pass approvals and denials, walking through their rationale for such, yet still deferring to the treatment team's final recommendations on said matters.
- Home Passes: Clients are also monitored by random home visits to their residences, conducted by Home Visit Counselors, and at times, facilitated by the Forensic Clinician Psychology Intern, particularly when a client's risk in the community appears to be elevating. Forensic Clinician Interns may join the Home Visit Counselors to shadow said visits and to learn more about their clients' living environments, potential possession of contraband, and any clinical concerns that may arise. Home visits or passes with family or friends are considered only after they have been cleared as a reliable, pro-treatment collateral contact. If deemed appropriate, the Forensic Clinician Psychology Intern will facilitate the Home Visit Counselor coordinating with the collateral contact, conducting a walkthrough of the person's home, discussing program rules and regulations, and discussing any concerns identified. The Home Visit Counselor will then check the home for destabilizers, such as drugs and/or alcohol, weapons, people with whom the client has a conflictual relationship, and signs of illegal or dangerous activity. The Home Visit Counselor will then review his or her findings with the Forensic Clinician Psychology Intern, who will, with the guidance of their clinical supervisor and outpatient treatment team's input, make a determination regarding whether the home passes will be granted. These passes will then be monitored regularly thereafter.
- School and Work Approval and Monitoring: In conjunction with the Intern's clinical supervisor and outpatient treatment team's input, the Forensic Clinician Psychology Intern will determine a client's readiness to seek out volunteer positions, schooling, and/or paid employment. Once this privilege is approved, the Psychology Intern will document the client's volunteer/school/work plan and how they will be monitored while attending such. The Forensic Clinician Psychology Intern will then monitor the client's ongoing suitability to carry these privileges through ongoing assessment of psychiatric and behavioral functioning, engagement in treatment, compliance with supervision, collateral contacts, review of school/work-related documents, and verification of enrollment and performance.

- Internet and Telephone Supervision: Prior to admission to Gateways CONREP, all clients are required to review and sign outpatient terms and conditions, which explicitly restricts the client's access to computers, internet, and all internet-capable devices (e.g., personal computer, cell phone, smart phone, computer tablet, etc.). Subsequent use of such an appliance or internet access is determined by assessing its impact on risk of violence, re-offense, psychiatric stability, compliance with program requirements, and evaluating the client's expressed needs and intent for internet usage. Areas to explore include (but are not limited to) email, social networking, work, study, entertainment, financial management, and retail purchases. Clients who are permitted to use a cell phone must first agree to routine and random searches of their cell phone, browser history, and any social media accounts. This applies to internet usage as well. Over time, with the guidance of their direct supervisor, the Psychology Intern will learn to establish firm boundaries and expectations surrounding these privileges, holding clients accountable for the rules of the program and exercising their assertive communication skills in maintaining these supervision requirements.

The Forensic Clinician Psychology Intern will typically rely heavily on their clinical supervisor and the outpatient treatment team for guidance and input regarding the accrual of client privileges toward the beginning of their training year. However, as the intern becomes more skilled at risk assessment and independent with their judgement and decision making as it relates to their caseload, it is expected the Forensic Clinician Psychology Intern will present to their clinical supervisor and/or the treatment team their position on whether a client privilege should be granted and the rationale supporting such. The Intern is then expected, over time, to independently (though under supervision) implement the treatment teams recommendations and feedback.

#### Annual and Quarterly Court Reports

As required by Gateways CONREP's contract with the Department of State Hospitals, as well as in line with the Penal Code, on a quarterly, annual, and as needed basis, Gateways CONREP provides the court with a written report explaining the client's progress in treatment during the respective reporting period. These court reports are specific to the client and include the data required in the CONREP Policy and Procedure Manual, which is available to the intern on site. Also in accordance with Department of State Hospital mandates, Gateways CONREP has a system in place to ensure the quality of court reports as well as the timely submission of said reports to the court.

The Forensic Clinician Psychology Intern will be responsible for generating the required court reports for each client on their caseload. The intern will use the appropriate report template, which is made available on the network server. The Forensic Clinician Psychology Intern is required to address all areas outlined in the template with an emphasis on issues of risk management and dangerousness. The court report will be submitted to and reviewed by the intern's clinical supervisor within an agreed upon timeframe. The clinical supervisor will review and edit the report, sending it back to the intern, sometimes repeatedly, for revisions. Once all necessary changes have been made, the Forensic Clinician Psychology Intern and his or her clinical supervisor will sign the report, after which the intern will send the completed document to the Administrative Secretary, who will then send the report to the court (with a copy sent to the Deputy District Attorney and the Deputy Public Defender or Private Defense Counsel). A copy of said report is also provided to the client, the state hospital from which the client was discharged, and a copy is then placed in the client's electronic record.

The court report due dates are tracked on the network server and reviewed by Administrative Secretary on a regular basis to ensure compliance. The intern's clinical supervisor will also monitor the flow of court reports and ensure the timely submission of said reports. If exigent circumstances exist, making submission of a court report within the required timeframe unlikely, the clinical supervisor will review the circumstances with the Community Program Director prior to requesting a continuance from the court. It bears mentioning there will be a series of didactic trainings supplied to assist the Intern in developing their forensic court report writing skills as well as individual and group note writing skills.

#### Crisis Intervention, Rehospitalizations, and Necessary Paperwork

Forensic Clinician Psychology Interns continuously monitor and assess their clients for changes in functioning and increases in risk for violence. When appropriate, Forensic Clinician Psychology Interns will provide crisis intervention and assessment and facilitate rehospitalizations and all necessary paperwork accordingly. These procedures are outlined in the Emergency Handbook as well as the network server; however, should such circumstances arise, the direct supervisor, as well as other supervisors, will closely monitor and assist in these instances to ensure client and staff safety as well as to assist the Interns in developing and honing their crisis intervention skills.

#### On-Call

Gateways CONREP Forensic Clinicians rotate as the Officer on Duty on a weekly basis. Forensic Clinicians arrange with the answering services to receive both urgent and non-urgent pages, and collaborate with the clinical supervisory staff to respond to all requests and concerns in a timely manner. Of note, Forensic Clinician Psychology Interns are exempt from participating in On-Call services.

## Stipend, Benefits, and Resources Policy

The annual stipend for all interns at Gateways CONREP's Doctoral Internship Program (DIP) is \$31,000, subject to taxes. This stipend is paid every two weeks in equal increments, regardless of vacation and sick days utilized. The intern will be afforded 10 paid vacation days and six excused sick days for the 12-month internship period. The Intern will also be afforded seven scheduled holidays (i.e., New Year's, Memorial Day, the Fourth of July, Labor Day, Thanksgiving and the day after, and Christmas) and four "floating" holidays, which the Intern can use at their discretion. Questions regarding sick leave and other accommodations can be direct to Gateways Hospital and Mental Health Centers' Human Resources Department Leaves Specialist, Sandra Reyes Rodriguez, at [srrodriguez@gatewayshospital.org](mailto:srrodriguez@gatewayshospital.org). It is preferred interns refrain from taking vacation in the first six weeks or the last four weeks of the training year in order to best avoid disrupting our clients' continuity of care as well as to ensure the completion and timely filing of necessary paperwork.

Interns should submit requests for time off to their primary supervisor at least two weeks in advance of any anticipated leave date(s). Interns are responsible for communicating anticipated absences to all supervisors and administrative staff to ensure ample coverage can be provided to clients as well as the Intern's other job duties. Sick leave must be communicated to the Intern's primary supervisor via email and/or text message as soon as the Intern is able to do so. Supervisors will be available for any questions related to time off requests.

Gateways CONREP's Doctoral Interns have access to numerous resources. All Interns are provided with individual offices, a desk, a laptop computer, an office phone, voicemail, printers, software, an ID badge, office keys, an alarm button, and basic office supplies. Intervention manuals, assessment supplies, additional training materials, and access to the DSM-5-TR and California Penal Code book are provided by Gateways CONREP's DIP. Additional materials needed or requested may be purchased using Gateways CONREP's funding with the Director of Training's and Executive Director's approval. The Interns will be encouraged to volunteer at the Forensic Mental Health Association of California's annual conference, hosted in San Diego, where their conference attendance and accommodations will be paid, as Gateways CONREP partners with FMHAC each year to provide student volunteers. Each Intern will also have access to administrative and IT support.

## Training Locations

**Los Angeles County CONREP FCTP:** The majority of the Doctoral Forensic Clinician Psychology Intern's training will be received at the FCTP main office, located at 621 S. Virgil Avenue, Suite 300, in Los Angeles, CA 90005. The FCTP building is a strictly outpatient facility, in that it is a large office suite with a number of therapy offices as well as a large Day Room and lobby; however, it is open only between the hours of 8:30am and 5:30pm, and the majority of clients all live within an approximately 2-to-10-mile radius of this office building. At the FCTP building, Interns will conduct their individual and group therapy sessions, case management duties, team meetings, case conferences, and the shadowing of other activities and clinical interactions.

That said, some of the interns' training might also occur at local board and care facilities where the FCTP clients reside in the community. One such facility is Gateways Satellite North, located at 440 N. Hoover Street, in Los Angeles. Gateways Satellite North is a Gateways-owned licensed board and care facility which houses approximately 20 male clients. This board and care facility shares a campus with the Statewide Transitional Residential Program (STRP), Gateways Satellite. At the Satellite facility, clients receive medication management, meals and snacks, occupational therapy services, life skills groups, case management services, and other organized activities. Thus, it is not uncommon for the Forensic Clinician Psychology Interns to receive some training at this site, which might include shadowing home visits, delivering therapeutic services at the clients' residence, and observing their clients in the greater milieu.

In addition to Gateways Satellite North, the Interns might receive training at the largest board and care facility utilized by the FCTP program, Oxford Villa, which is located at 223 N. Oxford Avenue, in Los Angeles. Oxford Villa is a 65-bed facility, and the FCTP program occupies approximately 45 of said beds. This board and care facility provides clients with meals, medication administration, light housekeeping services, a furnished room, and supervision in the form of sign-in sheets and a curfew. Interns might visit clients at this residence to see how the clients maintain their living space or to take the clients for a "walking therapy" session, as we have found this to be a helpful way to connect with this population. Interns will also regularly connect with the board and care manager to gather collateral information with regard to how their clients are functioning in the community and abiding by the rules of the facility.

Similar to Oxford Villa, some clients are housed at Commonwealth Royale Guest Homes, which is located at 150 S. Commonwealth Avenue, located in Los Angeles. This is a 99-bed licensed board and care facility which houses approximately 20 FCTP clients. Commonwealth Royale is unique in that it is licensed to house clients over the age of 64 years old and who are more medically compromised (e.g., requiring assisted walking devices). This is also the only facility we use with an elevator. Commonwealth Royale provides all of the same services as Oxford Villa, but also provides the residents with laundering and cleaning services. This facility is also willing to work with in-home health/supportive services, which the Intern might coordinate for their clients depending on the clients needs.

Last, the Intern might train at a Skilled Nursing Facility, Manchester Manor, located at 837 W. Manchester Avenue, in Los Angeles. This facility houses the aging and medically fragile population who require a higher level of medical intervention and support, such as clients with dementia diagnoses, ambulatory concerns, renal failure, severe COPD, and hospice care. At this facility, the

Intern will have the chance to closely liaison with nursing staff and line staff to ensure their clients are receiving optimal medical and psychiatric care.

**San Diego County CONREP:** The majority of the Doctoral Forensic Clinician Psychology Intern's training will be received at the San Diego CONREP main office, located at 450 A Street, Suite 500, in San Diego, CA 92101. The San Diego CONREP building is a strictly outpatient facility, in that it is an office suite with a number of therapy offices, which is open only between the hours of 8:30am and 5:30pm, and the majority of clients all live within an approximately 2-to-17-mile radius of this office building. At the San Diego CONREP building, Interns will conduct their individual and group therapy sessions, case management duties, team meetings, case conferences, and the shadowing of other activities and clinical interactions.

That said, some of the interns' training might also occur at local board and care facilities where the San Diego CONREP clients reside in the community. One such facility is Nelson Haven, located at 1268 22nd Street, in San Diego. This is a licensed board and care facility owned by an outside company (not Gateways), which houses approximately 49 female and male clients, of which approximately 6 are CONREP clients. At Nelson Haven, clients receive medication management, meals and snacks, laundry services, and supervision. Thus, it is not uncommon for the Forensic Clinician Psychology Interns to receive some training at this site, which might include shadowing home visits, delivering therapeutic services at the clients' residence, and observing their clients in the greater milieu. Similarly, approximately 6 CONREP clients reside at Rosies' Board and Care, another local licensed board and care facility which houses approximately 15 clients in total. They offer similar services as noted above.

Additionally, some clients are housed at Barbara's Independent Living Facility (ILF), which is located at 447 I Street, located in Chula Vista. This is a nine-bed ILF, which houses approximately five CONREP clients. Unlike the board and care facilities, there is not staff at the ILF 24/7; rather, ILF staff visit the residence approximately once per week to deliver groceries or complete maintenance requests. As such, clients are required to have more independent living skills, such as managing their own medication, laundering services, and cooking. Similar to the board and care facilities, the Forensic Clinician Psychology Interns may receive some training at this site, which might include shadowing home visits, delivering therapeutic services at the clients' residence, and observing their clients in their home environment.

Because San Diego CONREP Forensic Clinician Psychology Interns will also be conducting forensic evaluations as part of their training year, it is possible the Interns might travel to a state hospital facility (i.e., DSH-Patton, located in San Bernardino, California) or to local jail facilities to conduct evaluations of inmates deemed Incompetent to Stand Trial. The Psychology Intern might also travel to the local mental health court to shadow court testimony.

## Training Resources

In order to carry out their day-to-day responsibilities, the Doctoral Forensic Clinician Psychology Intern is afforded a number of training resources to assist them in making their work and learning experience easier. For instance, all Interns are provided with parking passes the day they first arrive to this training facility, such that they will have free parking in the garage when they come to the office. Interns are also given a key to the office suite as well as a specific key for their individual office space, the latter of which they can use to conduct therapy sessions, other clinical activities, assessments, and where they can complete their documentation. With regard to documentation, Interns are provided Gateways laptops, which are encrypted and connected to the network drives to allow for the use and storage of protected healthcare information. This laptop will include access to the clients' Electronic Health Record (EHR), Medication Administration Record (MAR), Outlook profile, and all previous legal records for each CONREP client. The laptop will also connect the intern to their own personal network drive, where they can store documents, such that the documents are accessible by every Gateways computer and backed up accordingly. The Intern will also have IT support with regard to the operation of their laptops, their office phone lines and voicemails, as well as the use of our EHR system (i.e., Carelogic). In addition, given the forensic and high-risk nature of the population we serve, each office, including the interns' offices, have personalized "panic alarms," which the interns can use to alert the greater office suite of any emergency that might occur. These alarms are routinely tested and trainings are held early in the interns' orientation to ensure understanding of the processes surrounding the use of these alarms. Each office is supplied with an updated California Penal Code book as well as a DSM-5-TR manual. In the front office, each intern will have their own personal mailbox where staff can provide them with important documentation. Moreover, there are a number of assessment tools Interns can check out and use to bolster their assessment skills.

## Intern Evaluation and Supervision Policy

The Gateways CONREP Doctoral Internship Program (DIP) requires that interns demonstrate minimum levels of achievement across all competencies and training elements. Interns receive ongoing feedback from their supervisors throughout the training year and are formally evaluated by their primary supervisor twice annually—once, at the midpoint (i.e., the 6-month mark), and once, at the end of the internship year (i.e., the 12-month mark). Evaluations are conducted using a standard rating form, which includes comment spaces where supervisors include specific written feedback regarding the interns' performance and progress. The evaluation form includes information about the interns' performance regarding all of Gateways CONREP's DIP's expected training competencies and the related training elements. Each evaluation is based, in part, on direct observation by the individual supervisor. Supervisors review these evaluations with the interns and provide an opportunity for discussion at the time of each evaluation.

The minimum level of achievement at the mid-year evaluation is a 3 on all learning elements. At the 12-month evaluation, the minimum level of achievement is a 4 on all learning elements. The rating scale for each evaluation is a 5-point scale, with the following rating values: 1 = Remedial; 2 = Beginning/Developing Competence; 3 = Intermediate Competence; 4 = Proficient Competence; 5 = Advanced Competence. If an intern receives a score less than 3 on any training element at the mid-year evaluation, or if supervisors have reason to be concerned about the student's performance or progress, the program's Due Process procedures will be initiated. The Due Process guidelines can be found in the Gateways CONREP DIP Handbook.

In order to successfully complete the internship program, at the end of the year evaluation, interns must receive a rating of 4, which indicates readiness for entry-level practice, or above on all training elements. Additionally, all Gateways CONREP DIP interns are expected to complete 2000 hours of training during the internship year. Meeting the hours requirement and obtaining sufficient ratings on all evaluations demonstrates that the intern has progressed satisfactorily through and completed the internship program.

In addition to the evaluations described above, interns complete an evaluation of their supervisor and a program evaluation at the end of the training year. Feedback from these evaluations is reviewed by the Gateways CONREP DIP Director of Training, which is then used to inform changes or improvements to the training program. All evaluation forms are available in the Gateways CONREP DIP Training Manual, which is also posted on the Gateways CONREP website.

All interns at the Gateways CONREP Doctoral Internship Program receive at least four hours of supervision each week throughout the year. Interns receive a minimum of two hours of face-to-face individual supervision each week from a doctoral-level licensed psychologist. Individual supervisors maintain overall responsibility for all supervision, including oversight and integration of supervision provided by other professionals. Interns receive two hours of group supervision each week. Interns may receive additional supervision based on their individual training needs and client concerns that may arise throughout the training year. All individuals receive supervision from at least 2 doctoral-level licensed psychologists over the course of the year. Interns have access to consultation and supervision at all times. Contact information for all supervisors is provided to interns at the

beginning of the year and is available via the Gateways CONREP DIP Training Manual and shared drive. All supervisors are appropriately credentialed for their role in the program.

## Telesupervision Policy

Gateways CONREP's Doctoral Internship Program (DIP) provides hybrid group supervision (i.e., a combination of videoconferencing and in-person supervision) every other week in order to promote interaction and socialization between the interns located in San Diego and those located at the Los Angeles office. Specifically, the Los Angeles and San Diego clinicians, interns included, sit together in their respective conference rooms, which then meet as a larger group in a virtual conference room via Microsoft Teams. This way, both groups of trainees interact via high-quality, real-time transmission of simultaneous video and audio. Group supervision in this format is required for all current Gateways CONREP DIP interns for two (2) hours every other week, at a regularly scheduled time. During the alternating weeks, the Los Angeles and San Diego interns meet separately, in-person in their respective conference rooms, without the virtual component, allowing for a more intimate discussion of cases, professional development, and other clinical/work-related matters.

In addition, Los Angeles and San Diego interns meet in a virtual conference room via Microsoft Teams for one (1) hour of trainee group supervision weekly at a regular scheduled time. A member of the supervisory staff facilitates this meeting, which is intended to offer trainees an opportunity to connect without the greater clinical treatment teams, so they can feel comfortable and have more space to discuss matters related not only to their clinical practice, but also to their professional development and other training topics. Gateways CONREP's DIP places high value on cohesion and socialization of intern cohorts, and virtual meetings via videoconferencing are an effective way to foster connection between the intern cohorts and when in-person meetings are not available. Telesupervision may also be utilized in place of in-person supervision for emergencies, such as those related to the COVID-19 pandemic or other infectious outbreaks (e.g., norovirus, influenza) or when the supervisory staff's schedule and location conflicts with that of the intern(s).

Telesupervision is also used to connect San Diego-based interns to the Director of Evaluations and Evaluation Manager, who serves as their primary supervisors on forensic evaluations. Each intern is scheduled for at least one (1) hour of telesupervision per week with these supervisors to discuss, prepare for, and review evaluations and reports. This also provides interns the opportunity to experience a breadth of supervisory relationships and supervision modalities.

The use of videoconference technology for supervisory experiences is consistent with Gateways CONREP's DIP's training aim of developing the interns' multicultural competence by ensuring interns are equipped to navigate the diverse backgrounds and needs of the forensically-involved population, which often includes expanding access to behavioral healthcare and evaluations in underserved areas and judicially-involved institutions. It is also used to ensure continued quality of training in the event supervisors and trainees cannot be in the same location together, improving work life balance and making the work more accessible to the interns, as needed. All interns participate in an introduction to telesupervision during the internship orientation and are provided with instruction regarding the use of the videoconferencing equipment at the outset of the training year. Additionally, all supervisors work with the Gateways IT Department annually to ensure they are sufficiently trained to use telesupervision.

Gateways CONREP's DIP recognizes the importance of supervisory relationships. Group supervision is led by members of the Training Committee, on a rotating basis, providing interns further opportunity in experiencing diverse supervisory relationships and supervision modalities. It is expected that the foundation for these supervisory relationships is cultivated initially during Gateways CONREP's DIP's orientation, such that interns have formed relationships with the entire Training Committee prior to engaging in videoconference group supervision. Of note, the Director of Evaluations is a member of the Training Committee; thus, interns will also have an established relationship with this supervisor prior to beginning any evaluations and related telesupervision. Interns are asked to give feedback on their experiences with telesupervision in the program and supervisor evaluations they complete at the mid-year point as well as at the end of the training year.

For all clinical cases discussed during group supervision, full professional responsibility remains with the intern's primary supervisor, and any crises or other time-sensitive issues are reported to that supervisor immediately. Interns are provided contact information for all Gateways CONREP DIP supervisors including email addresses and office and cellphone numbers, so crises and time-sensitive information can be reported as necessary. For all forensic evaluations conducted by the interns, responsibility remains with the Director of Evaluations or the Evaluation Manager (i.e., the evaluation supervisor who oversaw said evaluation).

All Gateways CONREP DIP videoconferencing occurs over a secure network using site-administered videoconferencing technology. Supervision sessions using this technology are never recorded, thus protecting the privacy and confidentiality of all trainees. It is important that all interns have access to telesupervision, and the training committee is committed to ensuring this is possible without burden to the intern. Indeed, each intern is provided a laptop equipped with a camera and microphone, so telesupervision can be joined without difficulty, so long as the intern has access to an internet connection. Interns are also permitted to use their smart phones to join meetings whenever necessary. Interns who may not have access to the technology required to participate in telesupervision (e.g., Wifi, smart phone) should meet with the Training Director and/or their primary supervisor to implement any supports necessary to access telesupervision. Technical difficulties that arise during telesupervision and cannot be resolved on site are directed to Gateways Information Technology (IT) Support Team.

## Communication and Records Maintenance Policy

Communication between Gateways CONREP's DIP and interns' home doctoral programs is of critical importance to the overall development of competent new psychologists. The internship is a required part of the doctoral degree and, while internship supervisors assess intern performance during the internship year, the doctoral program is ultimately responsible for the evaluation of readiness for graduation and entrance into the profession. Therefore, it is the responsibility of the Training Director to initiate contact with interns' home doctoral program Directors of Clinical Training (DCT) at the following time points, and as needed, throughout the training year:

- A Match letter is sent to both the intern and their DCT within 5 business days of learning of a successful match to verify the terms of the internship (i.e., start and end dates, stipend).
- At each evaluation period, Gateways CONREP's DIP shares a copy of the formal written evaluations of the intern with their DCT via email.
- Doctoral programs are contacted within one month following the end of the internship year and informed that the intern has successfully completed the program.
- If successful completion of the program comes into question at any point during the internship year, or if an intern enters into the formal review step of the Due Process procedures due to a concern by a faculty member or an inadequate rating on an evaluation, the home doctoral program is contacted.
- The home doctoral program may also be contacted if the intern files a formal Grievance to ensure the rights of the intern are protected and the graduate institution can serve as a support, if deemed necessary by the Gateways CONREP DIP Training Director (or if requested by the intern).

This contact is intended to ensure that the home doctoral program, which also has a vested interest in the interns' progress, is kept engaged in order to support an intern who may be having difficulties during the internship year. The home doctoral program is notified of any further action that may be taken by Gateways CONREP's DIP as a result of the Due Process procedures, up to and including termination from the program.

The Training Director is also responsible for maintaining intern records. Intern evaluations, certificates of completion, board of psychology documentation, and each intern's individual training plan are maintained indefinitely by the Training Director in a secure digital file as well as in a secure paper file. Records related to Due Process procedures are also maintained in intern files, as described in the Gateways CONREP DIP Due Process Procedures. Records related to grievances or complaints are kept in a separate secure digital file, as described in the Gateways CONREP DIP Grievance Procedures.

## Supervision Considerations for License Eligibility

The intern is directed to the Board of Psychology website, where they must obtain a blank Supervised Professional Experience form to be signed on the first day of internship:

- ❖ [http://www.psychology.ca.gov/forms\\_pubs/sup\\_agreement.pdf](http://www.psychology.ca.gov/forms_pubs/sup_agreement.pdf)

In addition, at the close of the internship year, the intern is again directed to the Board of Psychology website, where they must obtain a blank Verification of Experience form to be signed upon the intern's successful completion of the internship.

- ❖ [http://www.psychology.ca.gov/forms\\_pubs/prior\\_verofexp.pdf](http://www.psychology.ca.gov/forms_pubs/prior_verofexp.pdf)

## Doctoral Psychology Intern Sample Weekly Schedule: Los Angeles

# Gateways CONREP Los Angeles Intern Schedule 2024-2025

TIME	MON	TUE	WED	THU	FRI	SAT	SUN
	<b>START TIME:</b>		<b>8:30 AM</b>	<b>TIME INTERVAL:</b>		<b>30</b>	
8:30 AM	Case Management	Case Management	Case Management	Case Management	Case Management		
9:00 AM	Individual Therapy Session	Individual Therapy Session	Individual Therapy Session	Individual Therapy Session	Trainee Group Supervision		
9:30 AM							
10:00 AM	Group Therapy	Note and Court Report Writing	Note and Court Report Writing	Group Therapy			
10:30 AM							
11:00 AM	<b>15-minute Break</b>	<b>15-minute Break</b>	<b>15-minute Break</b>	<b>15-minute Break</b>	Didactic Training		
11:30 AM	Note and Court Report Writing	Individual Supervision	Individual Therapy Session	Individual Therapy Session			
12:00 PM							
12:30 PM	Lunch	Lunch	Lunch	Lunch	Lunch		
1:00 PM	Collateral Phone Calls	Individual Supervision	Shadow Home Visit Counselor	Note and Court Report Writing	Open Office Hours		
1:30 PM							
2:00 PM	Case Management	Annual Staffing/Case Conceptualization	Collateral Phone Calls	Annual Staffing/Case Conceptualization	Individual Supervision		
2:30 PM	<b>15-minute Break</b>		<b>15-minute Break</b>				
3:00 PM							
3:30 PM		<b>15-minute Break</b>		Annual Staffing/Case Conceptualization	Collateral Phone Calls		
4:00 PM	All Staff Meeting/Grand Rounds	Annual Staffing/Case Conceptualization	Clinical Group Supervision	Annual Staffing/Case Conceptualization	<b>15-minute Break</b>		
4:30 PM		Case Management			Note and Court Report Writing		
5:00 PM						Note and Court Report Writing	
5:30 PM							

## Doctoral Psychology Intern Sample Weekly Schedule: San Diego

# Gateways San Diego CONREP Intern Schedule 2024-2025

	<b>START TIME:</b>	<b>8:30 AM</b>	<b>TIME INTERVAL:</b>	<b>30</b>	<b>S</b>	<b>S</b>
<b>TIME</b>	<b>MON</b>	<b>TUE</b>	<b>WED</b>	<b>THU</b>	<b>FRI</b>	<b>A</b>
8:30 AM	Case Management	Case Management	Case Management	Case Management	Case Management	<b>T</b>
9:00 AM	Individual Therapy Session	Individual Therapy Session	Individual Therapy Session	Individual Therapy Session	Trainee Group Supervision	
9:30 AM	Group Therapy	Note and Court Report Writing	Note and Court Report Writing	Group Therapy	Didactic Training	
10:00 AM						
10:30 AM	15-minute Break	Individual Supervision	Individual Therapy Session	Individual Therapy Session	15-minute Break	
11:00 AM						
11:30 AM	Note and Court Report Writing	Individual Supervision	Individual Therapy Session	Individual Therapy Session	15-minute Break	
12:00 PM						
12:30 PM	Lunch	Lunch	Lunch	Lunch	Lunch	
1:00 PM	Collateral Phone Calls	Individual Supervision	Evaluations & Eval Report Writing	Note and Court Report Writing	Individual Supervision	
1:30 PM						

## Didactics Overview

Didactic trainings will be provided weekly throughout the internship year, averaging two hours per week, which will be delivered in a lecture-based format. Overall, didactics are aimed at complimenting the Psychology Intern's clinical work, supervision as well as the program's training goals. To ensure integration of current scientific literature and standards of practice, didactic seminars are often supplemented with additional readings. Didactics will be facilitated by the Director of Training, incorporating other CONREP staff and supervisors, as well as outside guest lecturers, from psychology and other disciplines (e.g., nursing, occupational therapy, police department, court personnel, the Department of State Hospitals, etc.).

The following broad topics will be covered:

1. Introduction to CONREP: Covering the history of the CONREP program as well as the Penal Codes which guide our work, including discussions of relevant case law and other topics specific to the CONREP program.
2. Theory and Methods of Diagnosis: Focused on empirically validated methods for diagnosing individuals including the use of structured interviews and validated assessment tools.
3. Developing Effective Treatment Plans and Interventions: Covering individual and group treatment employed at this site, as well as current literature regarding empirically-validated treatments and issues relevant for clinical forensic practice.
4. Conducting Forensic Evaluations: Discussing theory and methods used when conducting forensic evaluations, both specific to the population served and more broadly.
5. Risk Assessment: Covering general approaches to risk assessment, as well as the use of specific empirically-validated risk assessment tools (e.g., HCR-20-V3, PCL-R, LS/CMI).
6. Cultural and Individual Diversity: Focused on increasing intern awareness and skills in the provision of culturally competent psychological services.
7. Supervision Theory and Strategies: Covering ways to most effectively utilize supervision as well as methods of providing supervision to others.
8. Professional Consultation: Covering when to seek out such consultation and with whom (e.g., psychiatry, nursing, etc).
9. Professional Conduct, Ethics, and Legal Matters: Covering both general ethical and legal issues that arise as well as those specific to working within a forensic population.
10. Professional Development: Covering topics such as post-doctoral fellowships, licensure, and transitioning from student to practitioner.

11. Special Topics in Forensic Community Based Treatment and Supervision: Assisting the intern in navigating the fine line between client advocate and supervision geared toward ensuring community safety.
12. Report Writing: Developing the intern's skills regarding drafting a concise, yet comprehensive psychosocial history, robust and meaningful mental status examination, and overall conceptualization, tying together the record, one's own clinical observations, and theory, with a focus on risk assessment, management, and other forensic issues.
13. Assessment Tutorial: Introduction to psychodiagnostic, malingering, personality, and risk assessment, with the use of empirically-validated assessment tools.

In addition to these two-hour traditional didactic seminars, Interns will have other, more interactive-based training opportunities, averaging about two additional hours of didactic activities each week:

1. Participate in weekly grand rounds aimed at discussing clinical and forensic/violence risk concerns with individual clients as well as among the greater milieu. This will occur with the multidisciplinary treatment team to ensure all staff are well-informed and working collaboratively.
2. Participate in weekly group supervision aimed at addressing ongoing clinical and supervisory concerns with individual clients.
3. Conduct formal case presentations to the Gateways CONREP treatment team. These will occur during their clients' annual treatment staffings or when the intern has a challenging clinical case.
4. Shadow a Forensic Evaluator conducting evaluations of individual(s) within the state hospital. This could include visiting the state hospital, attending subsequent meetings with the Evaluation Unit team, writing a shadow-report, and observing related expert testimony.
5. Present their dissertation to Gateways CONREP staff.
6. Shadow expert testimony and participate in mock trials to allow for the development of verbal testimony skills and the communication of violence risk in a courtroom, or mock courtroom, setting.

Interns will also be encouraged to attend and, perhaps, volunteer at the Forensic Mental Health Association of California's (FMHAC) annual conference, which is held in April, over the course of three days.

To ensure we are implementing effective training methods, the format and content of each didactic session will be evaluated and amended accordingly. Interns will have the opportunity to complete written feedback forms as well as provide verbal feedback during routine performance reviews.

## Didactics Calendar

All interns are required to attend the weekly internship didactic series. Seminars are held from 1:00PM to 3:00PM every Monday. For interns placed at the Los Angeles County site, didactics will be held in the Forensic Community Treatment Program Conference Room. For those interns placed at the San Diego County office, didactic seminars will be joined virtually, via Zoom. See “*Addendum A*” for more detailed abstracts associated with each scheduled presentation.

Date	Topic	Presenter
09/04/24	CONREP Academy	Nicole L. Paglione, Psy.D.
09/09/24	CONREP Academy continued	Nicole L. Paglione, Psy.D.
09/16/24	Court Report and Forensic Note Writing	Nicole L. Paglione, Psy.D.
09/23/24	Court Report and Forensic Note Writing continued	Nicole L. Paglione, Psy.D.
09/30/24	Court Report and Forensic Note Writing continued	Nicole L. Paglione, Psy.D.
10/07/24	Violence Risk Assessment and HCR-20, version 3	Nicole L. Paglione, Psy.D.
10/14/24	Violence Risk Assessment and HCR-20 version 3 Training Continued	Nicole L. Paglione, Psy.D.
10/21/24	Violence Risk Assessment and HCR-20 version 3 Training Continued	Nicole L. Paglione, Psy.D.
10/28/24	Violence Risk Assessment and HCR-20 version 3 Training Continued	Nicole L. Paglione, Psy.D.
11/04/24	Violence Risk Assessment and HCR-20 version 3 Training Continued	Nicole L. Paglione, Psy.D.
11/11/24	AWOL and Rehospitalization Procedures	Nicole L. Paglione, Psy.D.
11/18/24	AWOL and Rehospitalization Procedures Continued	Nicole L. Paglione, Psy.D.
11/25/24	Case Management Decision Making	Cynthia Lermond, Psy.D.
12/02/24	Forensic Treatment and Supervision Tactics -	Nicole L. Paglione, Psy.D.
12/09/24	Forensic Treatment and Supervision Tactics continued	Nicole L. Paglione, Psy.D.
12/16/24	Working with the Forensically-Involved, Court-Mandated Client	Nicole L. Paglione, Psy.D.
12/23/24	Working with the Forensically-Involved, Court-Mandated Client, Continued	Nicole L. Paglione, Psy.D.
12/30/25	Working with the Forensically-Involved, Court-Mandated Client, Continued	Nicole L. Paglione, Psy.D.
01/06/25	Working with the Forensically-Involved, Court-Mandated Client, Continued	Nicole L. Paglione, Psy.D.
01/13/25	Working with the Forensically-Involved, Court-Mandated Client, Continued	Nicole L. Paglione, Psy.D.
01/20/25	Law and Ethics with a Forensic Focus and Addressing Cultural Biases	Melinda Wolbransky, J.D., Ph.D.
01/27/25	Law and Ethics with a Forensic Focus and Addressing Cultural Biases, Continued	Melinda Wolbransky, J.D., Ph.D.

02/03/25	Law and Ethics with a Forensic Focus and Addressing Cultural Biases, Continued	Melinda Wolbransky, J.D., Ph.D.
02/10/25	Law and Ethics with a Forensic Focus and Addressing Cultural Biases, Continued	Melinda Wolbransky, J.D., Ph.D.
02/17/25	Law and Ethics with a Forensic Focus and Addressing Cultural Biases, Continued	Melinda Wolbransky, J.D., Ph.D.
02/24/25	Expert Witness Testimony	Nicole L. Paglione, Psy.D.
03/03/25	Expert Witness Testimony, Continued	Nicole L. Paglione, Psy.D.
03/10/25	Expert Witness Testimony, Continued	Nicole L. Paglione, Psy.D.
03/17/25	Expert Witness Testimony, Continued	Nicole L. Paglione, Psy.D.
03/24/25	Mock Trial - Intern 1	Nicole L. Paglione, Psy.D.
03/31/25	Mock Trial - Intern 2	Nicole L. Paglione, Psy.D.
04/07/25	Mock Trial - Intern 3	Nicole L. Paglione, Psy.D.
04/21/25	Mock Trial - Intern 4	Nicole L. Paglione, Psy.D.
04/28/25	Mock Trial – staff/practicum student	Nicole L. Paglione, Psy.D.
05/05/25	Mock Trial – staff/practicum student	Nicole L. Paglione, Psy.D.
05/12/25	Threat Assessment – A Case Study	Nicole L. Paglione, Psy.D.
05/19/25	Threat Assessment – A Case Study	Nicole L. Paglione, Psy.D.
06/02/25	Malingering	Melinda Wolbransky, J.D., Ph.D.
06/09/25	Psychopathy and the PCL-R	Nicole L. Paglione, Psy.D.
06/16/25	Psychopathy and the PCL-R, Continued	Nicole L. Paglione, Psy.D.
06/23/25	Psychopathy and the PCL-R, Continued	Nicole L. Paglione, Psy.D.
06/30/25	Mental Status Examinations in Forensic Reports	Nicole L. Paglione, Psy.D.
07/07/25	Mental Status Examinations in Forensic Reports, Continued	Nicole L. Paglione, Psy.D.
07/14/25	Termination	Nicole L. Paglione, Psy.D.
07/21/25	Conducting a CONREP Hospital Liaison Visit	Nicole L. Paglione, Psy.D., and Melinda Wolbransky, J.D., Ph.D.
07/28/25	Neuropsychology and Incompetent to Stand Trial	Tamanna Shah, Psy.D.
08/04/25	Differential Diagnoses	Nicole L. Paglione, Psy.D.
08/11/25	Professional Development and What's Next	Cynthia Lermond, Psy.D.
08/18/25	What have we learned in CONREP	Nicole Paglione, Psy.D.

## Due Process Policy

The following guidelines describe Psychology Intern performance concerns that would be cause for formal review, informal action, formal remediation, and which could potentially result in termination of the employment and training of the intern if not corrected to satisfaction. These procedures are a protection of the rights of both the intern and the Doctoral Internship Program and carry responsibilities for both.

### Intern Rights and Responsibilities

When the intern's performance is determined to be insufficient and/or other noteworthy problematic behaviors transpire, a performance improvement/remediation plan may be implemented. While this may occur at the time of the intern's formal performance review, Due Process Procedures may also be enacted at any point in the intern's training year. These procedures are not meant to be punitive; rather, an informal action plan or performance improvement/remediation plan is meant to address an Intern's performance deficiencies or other problematic behaviors that are non-egregious and appear amenable to timely and adequate change. This Due Process Policy is thus meant to protect an Intern's rights and is implemented to afford the Intern a reasonable opportunity to correct specific concerns while provided support and assistance to do so. Interns have the right to appeal performance improvement/remediation decisions. The intern has the right to participate in the Due Process procedures by having their viewpoint heard at each step in the process. The intern has the right to appeal decisions with which they disagree, within the limits of this policy. The responsibilities of the intern include engaging with the training program and the institution in a manner that is respectful, professional, and ethical, making every reasonable attempt to remediate behavioral and competency concerns, and striving to meet the aims and objectives of the program.

### Expectations of Interns

Gateways CONREP does not expect their Interns to be perfect. Indeed, even the most well-prepared and well-intentioned Interns are likely to lack experience and knowledge in some areas. Thus, should a supervisor perceive an Intern as having a deficiency in skills or performance, the supervisor will first recommend remedial actions. Often, said deficiencies are minor matters easily and informally addressed through regular supervision, extra reading or practice, or other training. Some examples of insufficient performance include, but are not limited to, the following:

- The Intern does not acknowledge, understand, address, or correct a problem when it has been identified;
- The problematic behavior has not changed regardless of feedback, remediation efforts, and/or experience;
- An Intern presents with a skill deficit which negatively impacts the Intern's clinical work and the quality of other services rendered, reflecting competency below that which is expected at the point of the internship year;
- The Intern demonstrates an inability and/or unwillingness to learn and appropriately integrate professional ethical standards into their professional work;
- The Intern demonstrates an inability to effectively manage personal stress, emotional reactions, etc., which then impedes the Intern's professional functioning;
- The problematic behavior is not restricted to one area of professional functioning;
- The problematic behavior has potential legal or ethical ramifications if not addressed;

- The Intern's behavior negatively impacts other Interns/trainees, treatment team members, clients, and/or Gateways Hospital and Mental Health Centers;
- The Intern requires a disproportionate amount of attention from training/supervisory personnel.

Problematic behaviors include, but are not limited to, the following:

- Sexual harassment
- Insubordination
- Exploitative or abusive behavior
- Violation of professional code of conduct for ethical professional practice (i.e., APA Ethical Principles of Psychologists & Code of Conduct, APA Professional Practice Guidelines, APA Specialty Guidelines for Forensic Psychology)
- Any behavior that infringes upon the rights, privileges, and responsibilities of other Interns, professionals, employees, community members, and/or CONREP clients
- Egregious behavior, including illegal and/or unethical behavior, as well as behavior which demonstrates poor judgment

Egregious behaviors may result in notification of the Intern's graduate program and may lead to the Intern's termination from employment and the training site.

#### Due Process Procedures

Due Process is integrated within the formal review and performance improvement/remediation process. Due Process ensures Interns are treated justly and afforded a reasonable opportunity to hear about, respond to, and correct identified problems. It also ensures Interns receive support and assistance throughout the remediation process and, should the Intern have concerns regarding the problems raised and/or performance/remediation process, Due Process protects the Intern's right to appeal. This process is intended to ensure all Intern expectations are clear and known and evaluation policies and procedures for remediation are effective, timely, and fair. Due Process is upheld by the following:

- Program Expectations. The Training Director will provide Interns with the training program expectations in writing at the beginning of the internship training year. These expectations will then be reviewed in detail during the Intern's orientation.
- Procedures for Evaluation. The Training Director will inform the Intern about the evaluation procedures, including when, how, and by whom the Intern will be evaluated.
- Procedures for Evaluation of Performance and Problematic Behavior. The Training Director will inform Interns when their performance and/or problematic behaviors become significant and, therefore, how they will be addressed.
- Data for Performance Evaluation. The Training Director will seek out collateral data from multiple professional sources to the extent feasible when making decisions and/or recommendations regarding the Intern's performance.
- Communication with Graduate Program. Should the Intern present with clinical deficiencies or deficits in other skills or behaviors, the Training Director will communicate clearly, early, and often with the Intern as well as the Intern's graduate program to address the concerns raised/identified.
- Remediation Plan. If warranted, the Training Director will develop and provide a performance improvement/remediation plan for Interns to address skill deficits or problematic behaviors. The Intern will be given a clear timeline as to when they must

complete the requirements for remediation as well as the consequences should they neglect or fail to meet said requirements by the end of the proposed timeline.

- Appeal. The Training Director will provide Interns with a written statement of the appeal policy and procedures highlighting the steps that will occur should they choose to exercise their right to an appeal.
- Timely Process. The Training Director will ensure that a sufficient amount of time will be provided for interns to respond to any actions taken by the program.
- Documentation. The Training Director will document in writing the actions to be taken if an intern has deficiencies in skills and/or problematic behaviors. The Training Director will also document the rationale for said actions as well as the criteria the Intern must meet to successfully resolve their performance improvement/remediation plan. The documentation will be provided to all relevant parties, and it will be kept in the Intern's file in a secure electronic and paper file.

### Informal Review

When a supervisor or other staff member believes that an Intern's behavior is becoming problematic, or when said Intern consistently performs below the expected level of competence, the first step in addressing the identified issue is to speak openly and directly with the Intern about the issue as soon as feasible in an effort to informally and expeditiously resolve the problem. This may include requiring the Intern to participate in increased supervision, didactic training, and/or structured reading. The supervisor and/or staff member who raised the concern should monitor the outcome. This process will be documented in writing in supervision notes and discussed with the Training Director as well as other supervisory staff; however, said documentation will not become a part of the Intern's professional file.

### Formal Review

If the Intern's problematic behavior or performance deficiencies persist beyond the informal review and resolution phase, if it is found that the intern is performing below expectations per the six-month evaluation (i.e., receipt of a rating below a "3" on any learning element on a supervisory evaluation), or if the problem behavior is so egregious an informal review would be insufficient, the following process is initiated:

- *Notice.* The Intern will be notified in writing (Notice of Formal Review) that the issue has been raised to a formal review level and a formal hearing will be held within 14 calendar days.
- *Hearing.* The Training Director will hold a hearing with the Intern's supervisor, the supervisory staff member who raised the concern, and the Intern within 14 calendar days of when the Notice of Formal Review was issued. If the Training Director is the person raising the issue, another supervisory staff member will be present at the hearing. At the hearing, the intern will be afforded the opportunity to present their perspective and/or to provide a written response to the identified problem outlined in the Notice of Formal Review document.
- *Outcome and Next Steps:* Outcomes and next steps will be determined at the close of the hearing by the Training Director and the other supervisory staff member present. This outcome will then be communicated in writing to the Intern within 5 working days of the hearing. Potential outcomes include:
  1. Issue an "Acknowledgement Notice," which formally acknowledges the Training Director and other supervisory staff are aware of and concerned with the problem; calls the issue to the direct attention of the Intern; provides the Intern with specific

steps necessary to remediate the problematic behavior or skill deficit(s) identified; and determines that the problem is not significant enough to warrant further remedial action at this time.

2. The Intern can be placed on a “Performance Improvement Plan,” which clearly defines the problematic behavior(s) and/or skill deficiencies that will be monitored by a specific supervisory staff member (e.g., the Training Director) for a predetermined period of time (i.e., 30, 60, or 90 days, depending upon the nature of the problem, and which will be decided by the Training Director in conjunction with the involved supervisory staff) to ensure the Intern is improving upon and/or changing the identified areas of concern. This Performance Improvement Plan will represent a probationary period for the Intern, and the written plan will be provided to the Intern as well as the Director of Clinical Training at the Intern’s graduate program. Of note, the length of this probationary period can be extended should it be indicated and should all involved parties agree. At the end of the Performance Improvement Plan, the Training Director will provide a written statement indicating whether the Intern sufficiently remediated the identified problematic area(s). This written statement will become part of the Intern’s professional file and will also be forwarded to the appropriate parties at the Intern’s graduate program.
3. If the problems identified are not rectified through the above processes, or if the problem represents an egregious act which stands in contrast to our ethical code, the Intern may be terminated from this training site. The decision to terminate an Intern’s placement will be made by the Training Director, the related supervisory staff member, and a representative from Human Resources. This decision will be made during a meeting held within 10 working days of the previous step completed in this process (or of learning about the egregious behavior). Until a final decision is made, the Training Director may suspend the Intern’s clinical privileges while awaiting a formal decision. Immediately upon reaching a final decision, the Training Director will notify the Association of Psychology Postdoctoral and Internship Centers (APPIC) as well as the Intern’s graduate program (e.g., Director of Clinical Training) of said decision.

### Appeal

In the event the Intern disagrees with and wishes to challenge a decision made at any step in the Due Process procedures, the Intern may appeal that decision, by requesting an Appeals Hearing in front of the Training Director, involved supervisory staff, and the Community Program Director (i.e., Executive Director of Gateways CONREP). At least three supervisory staff will be present at the hearing, and the Intern may request the presence of one specific member of the supervisory staff in addition to or in lieu of those already directly tied to the raised concern. Said request of appeal must be submitted in writing, clearly and specifically outlining the rationale for the appeal and any proposed alternative actions. This must be submitted within seven calendar days of the date of the decision which the Intern wishes to challenge or with which the Intern was dissatisfied. The Appeals Hearing will occur within 10 working days of the Intern’s written appeal. The Review Panel (i.e., the supervisory staff comprising of the Appeals Hearing panel) will review all written materials related to the appeal. They will also have the opportunity to interview any involved parties or other individuals with relevant information. The review panel will reply in writing within the ensuing five working days, either upholding the previous decision made or modifying said decision. A copy of the review panel’s response/decision will be provided to both the Intern and shared with the Intern’s graduate institution. This decision is final.

## Grievance Policy

The Gateways CONREP Doctoral Internship Program year is a pivotal time in the Intern's growth and professional development, as they transition from their roles as students to increasingly independent, competent professionals. The evaluation and feedback process is critical in ensuring this growth process, not only for Interns, but also for the supervisory staff and training program as a whole. In most cases, evaluation and feedback serves to create a growth mindset among supervisors and supervisees, fostering excitement, motivation, confidence, and competence, which hopefully increases throughout the internship experience. However, there are times in which serious circumstances may arise, calling for additional action. Indeed, Grievance Procedures were developed for events in which an intern encounters difficulties or problems that are not evaluation related, per se. Such instances may include, but are not limited to:

- Poor supervision by way of quality guidance, investment, and/or time spent with the intern
- Unavailability of supervisor(s)
- Workload concerns
- Personality clashes
- Discriminatory practices
- Other staff conflicts

Gateways CONREP DIP's Grievance Procedure is intended to empower the Intern to effectively and professionally address situations through direct communication with supervisors, whenever possible.

The Intern can make their concerns and requests known at any time during their internship year in three ways:

- ❖ **Informal Review:** Interns may make requests or complaints to relevant staff at any point in their training year. Interns meet with clinical supervisors several times per week and may raise issues directly with these people. Interns also meet with the Training Director regularly, which also provides the opportunity to voice concerns or complaints. In general, the Intern should raise the issue as soon as feasible with the involved supervisor, staff member, other trainee, or Training Director in an effort to resolve the problem informally. This step should be taken first, if possible, prior to requesting intervention from other staff, though it is also recognized this is not always an option.
- ❖ **Formal Concern/Complaint via Evaluation:** As a routine aspect of the Intern's internship year, the Intern will be asked to complete an evaluation of the supervision they receive and the program as a whole on a bi-annual basis (i.e., mid-year and final evaluation). This is a formal and documented way the Intern may raise concerns and make requests. These evaluations will be reviewed by the Training Director as well as the Community Program Director. They will also be made available for review by Program Review officials, Graduate Program Directors of Clinical Training, and visitors from other sanctioning agencies. The Training Director will maintain these records for a period of 10 years.
- ❖ **Formal, Established Grievance Procedure:** The agency reserves the right to first attempt to resolve problems informally. However, if the issue raised has not or cannot be resolved informally, then the Intern is encouraged to pursue the formal grievance procedure. In such a case, it is recommended the Intern maintain clear documentation of their pursuit.
  - The first step is to submit a written request to the Training Director, stating clearly, specifically, and factually the nature of the problem as well as the proposed

- resolution. If the Training Director is the object of the grievance, then the grievance should be submitted to another supervisory staff member (e.g., the Community Program Director, the intern's direct supervisor if not the Training Director).
- Upon receiving the formal grievance, the individual being grieved will be asked to submit a response in writing within 10 working days.
  - The Training Director (or alternative supervisory staff member) will meet with the Intern and individual being grieved within 10 working days of receiving the grieved individual's written response. Depending on the situation, this meeting may occur separately or with both parties involved (i.e., the Intern and the individual being grieved). The aim of this/these meeting(s) is to identify a plan of action to resolve the matter.
  - Should the grievance be more about the internship program rather than an individual, the Training Director and another supervisory staff member will meet with the Intern jointly to develop a plan of action aimed at resolving the grievance.
  - This plan of action developed between the Intern and the Training Director and/or other supervisory staff will include:
    1. Identification of the behavior/concern associated with the grievance
    2. The specific steps that will be taken to address the problem
    3. Procedures designed to ascertain whether the problem has been sufficiently resolved
  - The Intern and the person being grieved will be asked to report back to the Training Director (or other supervisory staff member) in 10 working days to discuss whether the issue has been sufficiently addressed/resolved.
  - If it is determined, however, the issue was not resolved in a satisfactory/timely manner, the Training Director or Community Program Director will convene a review panel consisting of the Training Director and at least two other members of the training faculty within 10 working days. The Intern may request a specific member of the training faculty to serve on the review panel. The review panel will review all written materials and have an opportunity to interview the parties involved or any other individuals with relevant information. The review panel has final discretion regarding outcome.

If it is determined the grievance cannot be or is not appropriate to resolve internally, Interns are afforded the right to pursue all remedies generally available to Gateways Hospital and Mental Health employees, including escalating their complaint to Gateways' Human Resource department in order to initiate the agency's due process procedures.

All documentation related to grievances will be maintained in a secure electronic file, separate from the intern's file.

## Intern Mid-Point and End-of-Year Evaluation Form

**Intern Evaluation:** *To be completed by supervisor*

Intern: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Dates of Evaluation: \_\_\_\_\_ to \_\_\_\_\_ Training Site: \_\_\_\_\_

Methods used in evaluating competency:

\_\_\_\_\_ Direct Observation      \_\_\_\_\_ Case Presentation      \_\_\_\_\_ Documentation Review  
 \_\_\_\_\_ Supervision      \_\_\_\_\_ Comments from other staff

**Scoring Criteria:**

<b>1- Remedial</b> Significant skill development required; remediation necessary
<b>2 - Beginning/Developing Competence</b> Expected level of competence pre-internship; close supervision required on most cases
<b>3 - Intermediate Competence</b> Minimal Level of Achievement (MLA) at midpoint of training program; routine or minimal supervision required on most cases
<b>4 - Proficient Competence</b> Minimal Level of Achievement (MLA) at completion of training program; ready for entry-level practice*
<b>5 - Advanced Competence</b> Rare rating for internship; able to function autonomously with a level of skill representing that expected beyond the conclusion of internship training

\*Ready for entry-level practice is defined as (IR C-8 I):

1. the ability to independently function in a broad range of clinical and professional activities;
2. the ability to generalize skills and knowledge to new situations; and,
3. the ability to self-assess when to seek additional training, supervision, or consultation.

<b>Competency 1: Intern will achieve competence in the area of Research</b>	
Demonstrates the substantially independent ability to critically evaluate research or other scholarly activities (e.g., case conference, presentation, publications)	
Disseminates research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.	
Demonstrate understanding of research or other scholarly activities (e.g., presentations, publications) as it's associated with violence risk assessment and management.	
<b>AVERAGE SCORE FOR BROAD AREA OF COMPETENCE:</b>	0
Comments:	

<b>Competency 2: Intern will achieve competence in the area of Ethical and Legal Standards</b>	
Demonstrates knowledge of and acts in accordance with the current version of the APA Ethical Principles and Code of Conduct	
Demonstrates knowledge of and acts in accordance with relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels	
Demonstrates knowledge of and acts in accordance with relevant professional standards and guidelines.	
Demonstrates knowledge of and acts in accordance with the APA Specialty Guidelines for Forensic Psychology	
Recognizes ethical dilemmas as they arise and applies ethical decision-making processes in order to resolve the dilemmas	
Conducts self in an ethical manner in all professional activities	
<b>AVERAGE SCORE FOR BROAD AREA OF COMPETENCE:</b>	0
Comments:	
<b>Competency 3: Intern will achieve competence in the area of Individual and Cultural Diversity</b>	
Demonstrates an understanding of how their own personal/cultural history, attitudes, and biases may affect how one understands and interacts with people different from oneself	
Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities	
Integrates awareness of and knowledge of individual and cultural differences in the conduct of professional roles	
Applies a framework for working effectively with areas of individual and cultural diversity	
Works effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own	
<b>AVERAGE SCORE FOR BROAD AREA OF COMPETENCE:</b>	0
Comments:	
<b>Competency 4: Intern will achieve competence in the area of Professional Values and Attitudes</b>	
Behaves in ways that reflect the values and attitudes of psychology, including cultural humility, integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others	

Engages in self-reflection regarding personal and professional functioning	
Engages in activities to maintain and improve performance, well-being, and professional effectiveness	
Actively seeks and demonstrates openness and responsiveness to feedback and supervision	
Responds professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training	
<b>AVERAGE SCORE FOR BROAD AREA OF COMPETENCE:</b>	0
Comments:	
<b>Competency 5: Intern will achieve competence in the area of Communication and Interpersonal Skills</b>	
Develops and maintains effective relationships with a wide range of individuals	
Demonstrates a thorough grasp of professional language and concepts	
Produces, comprehends, and engaged in communication (oral, nonverbal, and written) that are informative and well-integrated	
Demonstrates effective interpersonal skills and the ability to manage difficult communication well	
Demonstrates ability to communicate (orally and in writing) violence risk and related management strategies	
<b>AVERAGE SCORE FOR BROAD AREA OF COMPETENCE:</b>	0
Comments:	
<b>Competency 6: Intern will achieve competence in the area of Assessment</b>	
Demonstrates current knowledge of diagnostic classification systems and functional and dysfunctional behaviors, including consideration of client strengths and psychopathology	
Demonstrates understanding of human behavior within its context	
Applies knowledge of functional and dysfunctional behaviors, including context, to the assessment and/or diagnostic process	
Selects and applies assessment methods that draw from the best available empirical literature	
Collects relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient	

Interprets assessment results to inform case conceptualization, classification, and recommendations while guarding against decision-making biases	
Communicates the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences	
Demonstrates ability to use presence and relevance of violence risk factors to effectively scenario plan to prevent risk as well as to achieve desistance scenarios	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE:	0
Comments:	
<b>Competency 7: Intern will achieve competence in the area of Intervention</b>	
Establishes and maintains effective relationships with recipients of psychological services	
Develops evidence-based intervention plans specific to the service delivery goals	
Implements interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables	
Demonstrates the ability to apply the relevant research literature to clinical decision making	
Modifies and adapts evidence-based approaches effectively	
Evaluates intervention effectiveness and adapts intervention goals and methods consistent with ongoing evaluation	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE:	0
Comments:	
<b>Competency 8: Intern will achieve competence in the area of Supervision</b>	
Applies overall knowledge of supervision in direct or simulated practice with psychology trainees or other health professionals	
Applies supervisory skill of observing in direct or simulated practice	
Applies supervisory skill of evaluating in direct or simulated practice	
Applies supervisory skill of giving guidance and feedback in direct or simulated practice	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE:	0
Comments:	

<b>Competency 9: Intern will achieve competence in the area of Consultation and Interprofessional/Interdisciplinary Skills</b>	
Demonstrates knowledge and respect for the roles and perspectives of other professions	
Applies knowledge about consultation in direct or simulated (e.g., role played) consultation	
<b>AVERAGE SCORE FOR BROAD AREA OF COMPETENCE:</b>	<b>0</b>
Comments:	
<b>Overall Rating (average of broad competence area scores):</b>	
	<b>0</b>
Comments on overall performance of intern:	

I acknowledge that my supervisor reviewed this evaluation with me.

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 Intern Signature

Date

---

 Supervisor Signature

Date

**Note:**

Doctoral Intern Forensic Clinician's signature indicates that (s)he has reviewed this evaluation and does not necessarily indicate agreement. Doctoral Intern Forensic Clinicians who dispute rating are encouraged to use the grievance procedure. The undersigned acknowledges that all changes, cross outs and additions after signature must be initialed and dated by the trainee and Supervisor. No white out maybe used on this document.

Original:      Personnel File  
 CC:              Supervisee  
                     Supervisor

## Gateways CONREP DIP Intern Evaluation of Supervisor

### **Intern Evaluation of Supervisor:** *To be completed by Intern*

This Supervisor Evaluation is to be completed by the Gateways CONREP DIP Intern at the end of the training year (concurrent with the Intern's end-of-year evaluation) and discussed with the supervisor and/or Training Director during or about the Intern's evaluation meeting

Intern: \_\_\_\_\_

–

Supervisor: \_\_\_\_\_

Training

Dates of Evaluation: \_\_\_\_\_ to \_\_\_\_\_

Site: \_\_\_\_\_

#### **Scoring Criteria:**

<b>1 - Significant Development Needed</b> - Significant improvement is needed to meet intern needs
<b>2 - Development Needed</b> - Improvement is needed to meet intern needs
<b>3 - Meets Intern Needs and Expectations</b>
<b>4 - Exceeds Expectations</b> - Above average expectations
<b>5 - Significantly Exceeds Expectations</b> - Exceptional experience
<b>N/A</b> - Not applicable/Not observed/Cannot say

*\*\*Note: This Supervisor Evaluation is used by Gateways CONREP's DIP to continually improve and enhance the training program. All responses are reviewed by the Training Committee, and all feedback is carefully considered. Any score below a 3 on any item will result in corrective action as deemed appropriate by the Training Committee in order to improve the interns' supervisory experiences. Please include detailed explanatory comments wherever applicable to help us respond most effectively.*

<b>General Characteristics of Supervisor</b>	
Is accessible for discussion, questions, etc.	
Treats intern with respect and courtesy.	
Supports the intern's successful completion of the internship program.	
Presents as a positive professional role model consistent with the program's aims.	
Schedules supervision meetings and is available at the scheduled time.	
Allots sufficient time for supervision.	

Keeps sufficiently informed of case(s).	
Is interested in and committed to supervision.	
Sets clear objectives and responsibilities throughout supervised experience.	
Is up-to-date in understanding of clinical populations and issues.	
Maintains appropriate interpersonal boundaries with patients and supervisees.	
Provides constructive and timely feedback on supervisee's performance.	
Encourages appropriate degree of independence.	
Demonstrates concern for and interest in supervisee's progress, problems, and ideas.	
Communicates effectively with supervisee.	
Interacts respectfully with supervisee.	
Maintains clear and reasonable expectations for supervisee.	
Promotes recognition and effective navigation of individual and cultural diversity.	
Provides a level of case-based supervision appropriate to supervisee's training needs.	
Comments:	
<b>Development of Clinical Skills</b>	
Assists in coherent conceptualization of clinical work.	
Assists in translation of conceptualization into techniques and procedures.	
Is effective in providing training in behavioral health intervention.	

Is effective in providing training in assessment and diagnosis.	
Supports intern in navigating and responding to clients' cultural and individual differences.	
Is effective in helping to develop short-term and long-term goals for clients.	
Promotes clinical practices in accordance with ethical and legal standards.	
Promotes intern's general acquisition of knowledge, skills, and competencies.	
Promotes intern's acquisition of specialized forensic knowledge, skills, and competencies.	
Comments:	
<b>Summary</b>	
Overall Rating of supervision with this supervisor	0
Describe how this supervisor contributed to your learning:	
Describe how supervision or training experience could be enhanced:	
Any other suggestions/feedback for your supervisor:	

I acknowledge that my supervisor reviewed this evaluation with me.

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

---

Intern's Signature

Date

## Intern Evaluation of the Gateways CONREP Doctoral Internship Program

### **Gateways CONREP Doctoral Internship Program Evaluation:** *To be completed by Intern*

This Program Evaluation is to be completed by the Gateways CONREP DIP Intern at the end of the training year and is used to continually improve and enhance the training program. All responses are reviewed by the Training Committee, and all feedback is carefully considered. Any ratings of "Poor" or "Fair" will result in action by the Training Committee to address the problematic area/item. Please include detailed explanatory comments wherever applicable to help us respond most effectively.

Intern: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates of Evaluation: \_\_\_\_\_ to \_\_\_\_\_ Training Site: \_\_\_\_\_

#### Scoring Criteria:

**1 - Bad**

**2 - Poor**

**3 - Fair**

**4 - Good**

**5 - Excellent**

#### OVERALL INTERNSHIP EXPERIENCE

Overall quality of training.

Opportunities for professional socialization with intern cohort.

Breadth of clinical intervention and assessment experience.

Satisfaction with number of client contacts.

Clarity of expectations and responsibilities for interns.

Climate of training environment as it relates to respect for diversity.

Caseload was appropriate to meet educational needs.

Please provide any additional comments/feedback about your experience and provide explanations for any "bad," "poor," or "fair" ratings:

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**WEEKLY GROUP TRAINING OPPORTUNITIES**

Weekly Didactic Seminars	
Group Supervision	
Intern Supervision	

Please provide any additional comments/feedback about your experience and provide explanations for any "bad," "poor," or "fair" ratings:

**OVERALL QUALITY OF TRAINING WITHIN REQUIRED COMPETENCY AREAS:** *For the following items, please rate the quality of the training you received in each. Please consider your experience with **didactic seminars, professional development opportunities, and supervision, as well as direct clinical experiences and other experiential training.***

**Research**

Quality of Training	
Comments:	

**Ethical and Legal Standards**

Quality of Training	
Comments:	

**Individual and Cultural Diversity**

**Quality of Training**

Comments:

**Professional Values, Attitudes, and Behaviors****Quality of Training**

Comments:

**Communication and Interpersonal Skills****Quality of Training**

Comments:

**Assessment****Quality of Training**

Comments:

**Intervention****Quality of Training**

Comments:

**Supervision** (Note: for the purpose of this evaluation, you are rating the training you received in this required area of competence, NOT the supervision you received)

Quality of Training	
Comments:	

**Consultation and Interprofessional/Interdisciplinary Skills**

Quality of Training	
Comments:	

Please provide additional comments/feedback about Gateways CONREP's DIP's overall training in the major areas of professional functioning, as well as the DIP's ability to incorporate a forensic focus into the above competencies:

**Please answer the following questions regarding your experiences with receiving supervision:**

Helpfulness of supervision	
Availability of supervisor(s)	
Frequency of supervision	
Supervisors as professional role models	
Effectiveness of training	

Please provide additional comments/feedback about your supervision experience and provide explanations for any "poor" or "fair" ratings above:

**Please provide any other feedback and/or recommendations that you believe might be helpful or might improve the Gateways CONREP Doctoral Internship Program:**

Please provide any feedback you think would be helpful to improve this program evaluation survey:

Supervisor's Signature

Date

Intern's Signature

Date

## Post Internship Considerations

Following completion of the internship program, former Psychology Interns are encouraged to maintain contact with the Training Director. This is often a pragmatic necessity, as issues such as licensing often require certification of internship training and potential employers may require to vouch for candidates. Aside from these needs, however, Gateways CONREP staff would simply like to know about former interns and are gratified to hear about their successes. In addition, as part of our program evaluation and quality assurance efforts, as well as to maintain accreditation, the Training Director will submit post-internship data and satisfaction surveys. Acknowledging that interns are our main “consumers” of training services, these surveys aim to assess satisfaction after the intern has had some time away from our site, have hopefully conquered the hurdles of beginning their practice, and at which time the intern may have a fuller basis to judge the adequacy of their doctoral training experience.

## Doctoral Internship Forensic Clinician Reading List

Borum, R. (1996). Improving the clinical practice of violence risk assessment: Technology, guidelines, and training. *American Psychologist, 51*(9), 945-956.

Douglas, K. S., Ogloff, J. R. P., Nicholls, T. L., & Grant, I. (1999). Assessing risk for violence among psychiatric patients: The HCR-20 violence risk assessment scheme and the Psychopathy Checklist: Screening Version. *Journal of Consulting and Clinical Psychology, 67*(6), 917-930.

Douglas, K. S. & Skeem, J. L. (2005). Violence risk assessment: Getting specific about being dynamic. *Psychology, Public Policy, and Law, 11*(3), 347-383.

Elbogen, E. B., Huss, M. T., Tomkins, A. J., & Scalora, M. J. (2005). Clinical decision making about psychopathy and violence risk assessment in public sector mental health settings. *Psychological Services, 2*(2), 133-141.

Gray, N. S., Hill, C., McGleish, A., Timmons, D., MacCulloch, M. J., & Snowden, R. J. (2003). Prediction of violence and self-harm in Mentally Disordered Offenders: A prospective study of the efficacy of HCR-20, PCL-R, and psychiatric symptomatology. *Journal of Consulting and Clinical Psychology, 71*(3), 443-451.

Grisso, Thomas & Tomkins, A.J. (1996). Communicating violence risk assessments. *American Psychologist, 51*(9), 928-930.

Monahan, J. & Steadman, H. J. (1996). Violent storms and violent people: How meteorology can inform risk communication in mental health law. *American Psychologist, 51*(9), 931-938.

Schopp, R. F. (1996). Communicating risk assessments: Accuracy, efficacy, and responsibility. *American Psychologist, 51*(9), 939-944.

Skeem, J. L. & Mulvey, E. P. (2001). Psychopathy and community violence among civil psychiatric patients: Results from the MacArthur violence risk assessment study. *Journal of Consulting and Clinical Psychology, 69*(3), 358-374.

Kiehl, K. A. (2014). *The psychopath whisperer : inside the minds of those without a conscience*. Crown Publishers.

\*\*These articles are optional and can be provided to the intern upon request

## Addendum A

### Didactic Calendar Addendum: Abstracts and Learning Objectives

#### **CONREP Academy**

##### *Seminar Description:*

This didactic seminar provides an overview of California's Conditional Release Program (CONREP), a statewide system designed to manage the community reintegration of individuals found Not Guilty by Reason of Insanity (NGRI) and other forensic populations. The seminar introduces interns to the historical development and structural components of CONREP, including key Penal Codes—such as PC 1026, PC 2962/2972, and PC 1600–1615—which guide CONREP's legal framework. Participants will explore the multidisciplinary approach to treatment and supervision within CONREP, emphasizing risk management, psychiatric stabilization, and legal accountability. Case examples will illustrate common factors contributing to client success in the program, such as sustained medication adherence and insight into mental illness, as well as challenges that lead to setbacks, including psychiatric decompensation and noncompliance with treatment plans/terms and conditions. By the end of the seminar, interns will have a foundational understanding of how CONREP balances public safety with client rehabilitation in a forensic context.

##### *Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Identify the primary penal code classes of offenders with whom Gateways CONREP works
2. Identify the different levels of care with the Department of State Hospitals and CONREP, specifically
3. Demonstrate basic knowledge about the CONREP system, related terms, and acronyms
4. Explain the minimum criteria of clients admitted to the program and who is most likely to have success in the program by way of treatment and/or supervision
5. Identify the clients who are likely to struggle in the program by way of treatment and/or supervision

#### **Court Report Writing and Forensic Note Writing**

##### *Seminar Description:*

This didactic seminar introduces interns to the essential components of documentation within the CONREP system, with a focus on clarity, structure, and forensic relevance. Interns will learn the standard templates, formatting, and content expectations for 90-Day and Annual Court Reports, including strategies to prepare for potential cross-examination by anticipating legal scrutiny of their clinical opinions. The seminar also provides guidance on writing effective Forensic Progress Notes, with particular attention to the “Assessment” section of the Forensic Individual Progress Note. Emphasis will be placed on articulating clinical impressions related to dangerousness, risk factors, and treatment responsiveness in a manner that supports both clinical and legal decision-making.

##### *Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Identify and apply the standard structure and content requirements for CONREP 90-Day and Annual Court Reports

2. Demonstrate understanding of common cross-examination tactic and how to write court report that are clear, defensible, and legally sound
3. Differentiate between clinical versus forensic documentation, with a focus on the purpose and tone appropriate for each
4. Accurately construct Forensic Progress Notes using CONREP's format, including detailed and relevant observations, interventions, and assessments
5. Formulate concise and clinically supported assessments of dangerousness in the "Assessment" section of the Individual Progress Note, integrating relevant risk and protective factors

### **Violence Risk Assessment and the HCR-20, Version 3**

#### *Seminar Description:*

The Violence Risk Assessment and the HCR-20, Version 3 seminar is designed to enhance interns' competency in identifying and evaluating risk factors associated with violent behavior using the HCR-20 V3, a leading structured professional judgment tool in forensic mental health. This training will provide a comprehensive overview of the development and empirical foundations of the HCR-20, emphasizing its utility in risk assessment, treatment planning, and supervision. Interns will learn to apply relevance ratings and scenario planning to real-world clinical cases, with a focus on dynamic risk factors and indicators of escalating violence risk. Through didactic instruction and case-based application, this seminar equips interns with a structured, research-informed approach to assessing and managing violence risk in forensic settings.

#### *Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Describe the historical development and empirical foundations of the HCR-20, Version 3, as a validated tool for assessing violence risk
2. Identify and explain the 20 risk factors across the Historical, Clinical, and Risk Management domains of the HCR-20 V3
3. Demonstrate the ability to assign relevance ratings to risk factors and engage in structured scenario planning for future violence risk
4. Apply the HCR-20 V3 to case material involving escalating risk, integrating structured clinical judgment to guide treatment planning and supervision.
5. Differentiate between static and dynamic risk factors and articulate how these inform individualized risk management strategies in forensic practice

### **AWOL and Rehospitalization Procedures**

#### *Seminar Description:*

This didactic seminar provides an in-depth overview of crisis intervention procedures and the determination process for returning clients to a higher level of care, in accordance with the Department of State Hospitals (DSH) and CONREP Operations policy and procedure manual. Interns will gain a clear understanding of the steps taken when a client goes AWOL, including notification protocols, documentation standards, and legal considerations. The seminar will also explore the clinical and administrative processes involved in rehospitalizing clients—whether to a state hospital or a secure facility such as Golden Legacy—including risk assessment, treatment needs, and public safety concerns. Through the use of case examples, interns will learn how to evaluate critical incidents, determine the necessity of higher care, and effectively communicate these decisions to the court and relevant agencies.

*Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Describe the appropriate procedures and documentation steps to follow when a CONREP client goes AWOL, as outlined by DSH and CONREP Operations policies
2. Identify key clinical, legal, and safety factors that inform the decision to return a client to a higher level of care or custody
3. Demonstrate understanding of the rehospitalization process, including coordination with the state hospital or Golden Legacy and completion of required documentation.
4. Analyze case examples to apply crisis intervention protocols and evaluate the appropriateness of higher-level placement decisions
5. Develop clear and legally sound communication strategies for informing the court and relevant stakeholders of critical incidents and subsequent clinical decisions

**A Focus on Neuropsychology and Incompetent to Stand Trial Findings***Seminar Description:*

This didactic seminar explores the complex challenges of evaluating and managing individuals found Incompetent to Stand Trial (IST) due to neurocognitive disorders, such as dementia, traumatic brain injury, or intellectual disability. The seminar provides a neuropsychological framework for understanding these conditions and their impact on competency, with a focus on appropriate assessment tools and evaluation practices used in forensic settings. Particular attention will be given to the systemic gaps in resources for this underserved population, including barriers to appropriate housing and the limitations of current competency restoration models. Interns will also examine approaches to cognitive remediation and consider ethical and practical strategies for supporting individuals with chronic or non-restorable conditions.

*Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Describe the neuropsychological underpinnings of neurocognitive disorders and how they affect adjudicative competence
2. Identify and evaluate common assessment tools and practices used in determining IST status for individuals with neurocognitive impairments
3. Discuss the systemic and logistical challenges in housing and managing IST individuals with chronic cognitive conditions.
4. Examine the role and limitations of cognitive remediation in efforts to restore competency in this population
5. Develop strategies to advocate for appropriate treatment planning, placement, and legal outcomes for IST individuals with neurocognitive disorders

**Forensic Treatment and Supervision Tactics***Seminar Description:*

This didactic seminar offers a comprehensive review of the forensic treatment and supervision strategies utilized within the CONREP program to manage and mitigate client risk in the community. Interns will learn about the integration of surveillance and monitoring tactics—such as random urinalyses, sign in/sign out sheets, home visits, and AA/NA verification cards—alongside evidence-based treatment interventions and modalities tailored to forensic populations. Through the examination of real case examples, both successful and unsuccessful, the seminar will highlight the critical factors that contribute to risk mitigation, treatment engagement, and community safety.

Interns will analyze what interventions were effective, what supervision efforts fell short, and how improved practices could enhance outcomes in future cases.

*Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Describe the key treatment modalities and supervision tactics used in the CONREP program to manage forensic clients in the community
2. Explain how surveillance and monitoring tools contribute to public safety and support treatment compliance
3. Analyze case examples to identify factors that led to successful reintegration or program failure
4. Evaluate the effectiveness of specific clinical and supervisory interventions in mitigating violence and recidivism risk
5. Develop strategies for improving forensic treatment and supervision based on lessons learned from past case outcomes

**Working with the Forensically-Involved, Court-Mandated Client**

*Seminar Description:*

This didactic training is an extension of the previous training, taking a more general look at evidence based practice, research, and theory surrounding the adaptation of theoretical models and interventions typically used with voluntary consumers such that they can be useful and effective when working with the more challenging milieu of those who are involuntarily required to attend treatment. This training educates interns on contemporary issues regarding the law and ethics of working with court-mandated individuals, walking the fine line between clinical and forensic issues that frequently arise, therapeutic intervention and assessment techniques, and understanding how to work with involuntary consumers with a history of dangerousness and/or substance abuse. Other topics address affecting behavioral and attitude change, including among those who have histories of trauma and/or are members of oppressed groups, and aligning a forensically-involved client's level of service and criminogenic needs with their risk for reoffending.

*Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Explain how evidence-based treatment models and interventions can be adapted for use with involuntary, court-mandated clients in forensic settings
2. Identify key ethical and legal considerations when balancing clinical goals with forensic responsibilities in work with mandated individuals
3. Demonstrate strategies for engaging resistant or challenging clients, including those with histories of trauma, substance abuse, and/or system oppression
4. Apply assessment and intervention techniques that promote behavioral and attitudinal change in clients with elevated risk factors and criminogenic needs.
5. Evaluate how to align treatment planning with an individual's level of service, risk for reoffending, and responsivity factors in accordance with the Risk-Need-Responsivity (RNR) model

**Law and Ethics with a Forensic Focus and Addressing Cultural Biases**

*Seminar Description:*

This multiweek didactic training is geared toward developing the interns' competency in individual/cultural diversity and applying said competency in practice with justice system-involved

clientele. This seminar focuses on the law and ethics surrounding forensic populations, paying specific attention to multiculturalism and biases. Under the broad ethical guidelines of maintaining competency and integrity in the work we do, this training highlights the need for cultural sensitivity and humility and the exploration of one's biases using a person-oriented conceptualization. It is broadly broken down into three parts where interns explore one's knowledge of world views, culturally different clients, the skills needed to provide assessment and treatment with cultural humility and sensitivity, and reflecting on the ways in which one's own cultural identity impacts their work and interactions with clients of similar and different backgrounds. Much time is spent in this didactic discussing and practicing strategies to reduce one's biases and how to account for said biases in both therapeutic practice and written therapeutic work. It is hoped this didactic will assist interns in learning how to navigate value conflicts or other tensions that arise in their work both with the clients they serve as well as alongside the program's diverse staff.

*Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Demonstrate an understanding of cultural humility and its application in the assessment and treatment of justice system-involved clients from diverse backgrounds
2. Identify and evaluate the impact of personal cultural identity, values, and biases on clinical decision-making and therapeutic interactions in forensic settings
3. Apply culturally sensitive and person-oriented conceptualization strategies in written and verbal clinical work with forensic populations
4. Analyze ethical and legal considerations related to multicultural competence, with particular attention to maintaining integrity and avoiding harm in forensic practice
5. Practice bias-reduction strategies and culturally responsive interventions to navigate value conflicts and enhance collaboration with both clients and interdisciplinary teams

### **Expert Witness Testimony**

*Seminar Description:*

This didactic seminar offers a crash course in expert witness testimony, specifically tailored for clinicians working within the CONREP system. The training provides an overview of relevant legal standards, including key Federal Rules of Evidence, California Evidence Codes, and Case Law, that govern expert testimony. Interns will learn the distinctions between fact witnesses and expert witnesses, with emphasis on how a clinician's role may shift depending on the context of their testimony. Practical components of the seminar include how to respond to subpoenas, prepare for court appearances, and effectively communicate clinical findings—particularly violence risk assessments—both in written reports and verbal testimony. Foundational strategies for maintaining professionalism, credibility, and clarity under cross-examination are also covered to build intern confidence in forensic court settings.

*Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Differentiate between fact and expert witness roles, and describe how each applies to the clinician's potential testimony in forensic contexts
2. Identify and explain relevant Federal Rules of Evidence and California Evidence Codes that guide the admissibility and scope of expert witness testimony
3. Demonstrate knowledge of proper procedures for responding to subpoenas and preparing for court appearances

4. Apply best practices for presenting clinical opinions—especially violence risk assessments—in both written reports and oral testimony
5. Practice effective communication techniques to maintain clarity, professionalism, and composure during direct and cross-examination.

### **Mock Trials**

#### *Seminar Description:*

This interactive didactic seminar utilizes a mock court format to provide interns with hands-on experience delivering expert witness testimony in a simulated courtroom environment. Each week, one intern is selected to testify regarding an individual case, addressing elements of their client's treatment progress, supervision status, and relevant CONREP policies. The Director of Training serves as both District Attorney and Public Defender, conducting direct and cross examinations to simulate real-world legal questioning. Fellow interns and staff participate as jury members, offering structured feedback on the intern's clarity, professionalism, and ability to communicate clinical findings under legal scrutiny. This training is designed to build confidence, reinforce legal knowledge, and strengthen testimony skills in a supportive, practice-oriented setting. Because there are four interns, and the opportunity is also opened up to staff and practicum students, this didactic seminar series lasts six weeks.

#### *Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Demonstrate the ability to clearly and professionally present clinical findings and treatment progress in the role of an expert witness
2. Practice responding effectively to both direct and cross examination questions, including those challenging clinical opinions or treatment decisions
3. Apply knowledge of CONREP rules, supervision procedures, and legal standards relevant to testimony in a forensic setting
4. Identify areas for growth through peer and supervisor feedback on courtroom demeanor, clarity, and communication style
5. Develop greater confidence and fluency in articulating risk assessments, treatment rationale, and forensic considerations in a legal context

### **Threat Assessment – A Case Study**

#### *Seminar Description:*

This didactic training is designed to enhance interns' ability to understand the juxtaposition between threat assessment and violence risk assessment, as well as risk mitigation. In doing so, this training will educate interns on the pre-incident indicators of substantive threats, understanding what differentiates a transient threat from a substantive threat, and how to accurately assess individuals who are escalating and/or pose a threat of violence. This training will use a case study of a threat assessment conducted at a major university, looking at risk management recommendations and how to communicate risk to key players

#### *Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Describe the differences between threat assessment and risk assessment
2. Identify the difference between transient and substantive threats
3. Identify and define pre-incident indicators of a potential threat

4. Explain the importance of how cultural and/or demographic issues relate to risk/threat assessment

### **Malingering**

#### *Seminar Description:*

This didactic seminar focuses on the identification and assessment of malingering in mental health court cases, with particular attention to the feigning or exaggeration of psychiatric symptoms, cognitive impairments (e.g., memory deficits), and deficits in legal knowledge. Interns will learn to differentiate genuine presentations from deceptive ones by examining behavioral indicators, clinical inconsistencies, and external motivators. The seminar will introduce evidence-based assessment tools commonly used to detect malingering, such as symptom validity tests and performance validity measures, and will discuss collateral strategies for substantiating diagnostic impressions. Through case examples and guided discussion, interns will enhance their ability to evaluate malingering in forensic evaluations and articulate their findings clearly and ethically.

#### *Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Define malingering and differentiate it from other forms of symptom presentation, including factitious disorder and genuine psychopathology
2. Identify common behavioral and clinical indicators of malingering across psychiatric, cognitive, and legal domains
3. Describe commonly used assessment instruments for detecting malingering, including symptom and performance validity tests
4. Apply strategies for corroborating malingering through collateral data, behavioral observations, and inconsistencies in presentation
5. Evaluate and communicate diagnostic impressions of malingering in a clear, ethical, and defensible manner within forensic reports and testimony.

### **Psychopathy and the PCL-R**

#### *Seminar Description:*

This didactic seminar focuses on the *Psychopathy Checklist-Revised (PCL-R)* and its use in forensic assessment. Interns will be introduced to the construct of psychopathy, including its historical development, core features, and relevance in forensic populations. The training will provide a detailed overview of the PCL-R, its administration, scoring, and interpretation, as well as its utility in risk assessment, treatment planning, and legal decision-making. Through the review of case examples, interns will explore how psychopathic traits manifest in clinical presentations and how the PCL-R can inform forensic evaluations within the CONREP setting.

#### *Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Describe the theoretical construct of psychopathy and its relevance in forensic psychology and criminal behavior
2. Identify the 20 items of the PCL-R and understand their association with the interpersonal, affective, lifestyle, and antisocial features of psychopathy
3. Explain the procedures for administering, scoring, and interpreting the PCL-R, including considerations for reliability and validity
4. Apply the PCL-R framework to real or mock cases to identify psychopathic traits and assess implications for treatment and risk management

5. Evaluate the role of the PCL-R in informing clinical decision-making, risk assessment, and legal testimony within forensic settings

### **Mental Status Examinations in Forensic Reports**

#### *Seminar Description:*

This didactic seminar is designed to enhance interns' skills in conducting and documenting Mental Status Examinations (MSEs) within a forensic context. Interns will learn the key components of a comprehensive MSE, including appearance, behavior, mood, affect, thought processes, thought content, cognition, insight, and judgment. The training will cover effective interviewing techniques and targeted questions used to elicit relevant clinical information during a mental health evaluation. Emphasis will be placed on the art of writing MSEs that vividly and accurately portray the client, enabling other practitioners to understand the individual's presentation and identify deviations from baseline functioning. Through discussion, case examples, and practical exercises, interns will develop the clinical judgment and writing skills necessary to produce clear, concise, and informative MSE narratives.

#### *Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Identify the essential components of a comprehensive Mental Status Examination and their relevance in forensic assessment.
2. Demonstrate effective interviewing strategies to elicit information for each domain of the MSE.
3. Develop clear, descriptive, and clinically meaningful MSE write-ups that accurately reflect the client's current functioning.
4. Differentiate between baseline and acute changes in mental status that may have forensic or treatment implications.
5. Apply MSE findings to inform diagnostic impressions, risk assessments, and treatment recommendations in forensic reports

### **Conducting a CONREP Hospital Liaison Visit**

#### *Seminar Description:*

This didactic seminar introduces interns to the procedures and clinical reasoning involved in conducting a CONREP Hospital Liaison Visit. Interns will learn the purpose and structure of these evaluations, including how to complete a thorough record review and conduct a semi-structured interview with hospitalized individuals being considered for step-down to community-based forensic outpatient treatment. The training will focus on identifying relevant clinical, behavioral, and risk-related data to assess barriers to discharge, evaluate violence risk, and determine readiness for transition to a lower level of care. Interns will apply their learning through a collaborative review of video-recorded mock interviews, engaging in a simulated forensic evaluation to determine whether the client is appropriate for CONREP placement.

#### *Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Describe the purpose and structure of a CONREP Hospital Liaison Visit, including key components such as record review and client interviews
2. Identify clinical and forensic factors relevant to assessing violence risk, treatment progress, and barriers to discharge from the hospital

3. Demonstrate the ability to formulate forensic opinions regarding suitability for step-down to CONREP based on gathered data
4. Apply structured interview techniques to evaluate risk factors and treatment responsiveness in a hospital setting
5. Collaborate with peers to analyze case information, formulate risk assessments, and support or oppose transition to community-based care

### **Termination**

#### *Seminar Description:*

This didactic seminar focuses on the clinical and ethical considerations involved in terminating with clients in a forensic setting. Interns will learn the importance of thoughtful and structured termination, with an emphasis on fostering closure, reinforcing treatment gains, and maintaining appropriate boundaries. The training will address when to initiate termination planning, what topics to prioritize during final sessions, and how to manage client reactions—including resistance or emotional responses—to the end of the therapeutic relationship. Additionally, the seminar will explore the professional handoff process, highlighting what critical information should be communicated to the next clinician to ensure continuity of care and risk management. Termination in a forensic context requires balancing empathy with structure, and this training aims to prepare interns for this nuanced task.

#### *Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Explain the importance of structured and clinically sound termination practices, particularly within forensic treatment settings
2. Identify appropriate timing and indicators for initiating termination planning with forensic clients
3. Describe key themes and goals to address during termination sessions to promote closure and reinforce therapeutic progress
4. Apply strategies for maintaining clear boundaries and managing emotional responses during the termination process
5. Demonstrate understanding of effective case handoff procedures, including how to communicate risk-relevant and treatment-critical information to the next provider

### **Case Management and Decision-Making**

#### *Seminar Description:*

This didactic seminar, *Case Management and Decision-Making*, provides interns with structured guidance on navigating complex clinical decisions in forensic outpatient settings. Interns will learn how to use a decision tree model to evaluate pass and privilege requests, weighing factors that support client progress against those that may elevate violence risk or compromise community safety. The seminar will also address how to assess and respond to medical concerns raised by clients, including when to refer for advanced medical care. Emphasis will be placed on the importance of clinical judgment, seeking supervision, professional consultation, and recognizing when issues require escalation to the leadership team. Additionally, the training will provide strategies for triaging and prioritizing cases based on the severity and urgency of presenting problems.

*Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Apply a structured decision tree to assess the appropriateness of forensic client requests for passes and privileges in relation to risk and treatment goals
2. Identify red flags and clinical indicators that suggest a pass or privilege may pose an elevated risk to public safety or treatment compliance
3. Evaluate medical concerns presented by clients and determine when referral for advanced or emergent care is warranted
4. Demonstrate understanding of when and how to seek supervision, engage in consultation, or escalate concerns to program leadership
5. Prioritize client cases effectively by recognizing and responding to emergent or high-risk situations in a timely and clinically appropriate manner

**Differential Diagnoses***Seminar Description:*

This didactic seminar explores the process of differential diagnosis with a focus on disorders commonly seen in forensic mental health settings. Interns will review relevant sections of the DSM-5-TR, paying particular attention to personality disorders and how they present in forensic populations, including traits that may complicate treatment or elevate risk. The training will also address psychotic-spectrum and major mood disorders, emphasizing key differentiating features—especially in distinguishing mood disorders with psychotic features from primary psychotic disorders such as Delusional Disorder. Additionally, the seminar will highlight the frequent presence of comorbid substance use disorders and how substance use can obscure or mimic psychiatric symptoms. Through discussion and case examples, interns will strengthen their ability to make accurate, defensible diagnostic formulations in complex forensic cases.

*Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Identify distinguishing features of personality disorders, psychotic-spectrum disorders, and major mood disorders commonly seen in forensic clients
2. Differentiate between Delusional Disorder and mood or psychotic disorders with overlapping clinical presentations
3. Evaluate the impact of comorbid substance use on diagnostic clarity and risk assessment
4. Apply DSM-5-TR criteria to complex forensic cases using a differential diagnostic framework
5. Formulate accurate, clinically and forensically relevant diagnoses that consider co-occurring disorders and contextual risk factors

**Professional Development and What's Next***Seminar Description:*

This didactic seminar is designed to support interns in the critical transition from student to early-career psychologist as they near the completion of their doctoral training. The seminar emphasizes the importance of shedding the student identity and confidently stepping into the professional role of a psychologist. Topics will include professional comportment, cultivating healthy and respectful workplace relationships, and embracing the responsibilities and expectations of licensure-track clinicians. Special attention will be given to navigating professional dynamics with colleagues and supervisors, embodying clinical leadership, and maintaining ethical integrity. This training aims to

foster a confident, professional identity and prepare interns for the demands of postdoctoral practice and beyond.

*Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Recognize the shift in identity from trainee to early-career psychologist and what this transition entails professionally and interpersonally
2. Demonstrate an understanding of appropriate professional conduct, including maintaining collegial relationships and communication with staff
3. Identify key aspects of professional development relevant to postdoctoral and early-career success, including setting goals and pursuing licensure
4. Apply strategies for self-reflection and self-presentation that align with the ethical and professional standards of the field
5. Develop confidence in one's clinical role, decision-making, and contributions as a psychologist-in-training entering independent practice.

**What Have We Learned in CONREP**

*Seminar Description:*

The culminating didactic seminar, "*What Have We Learned in CONREP*," offers interns an opportunity to reflect on their growth and consolidate key lessons learned throughout their training year. This seminar will review foundational concepts related to working with forensic populations living with severe mental illness in community-based settings, emphasizing risk mitigation, ethical decision-making, and treatment within a public safety framework. Interns will revisit best practices in documentation, time management, and organizational strategies essential for maintaining effectiveness and professionalism. Additionally, this training will explore the evolving responsibilities that come with transitioning into the postdoctoral year and, ultimately, licensed practice—including ongoing professional development and ethical comportment. Time will also be devoted to saying goodbye as an internship cohort.

*Learning Objectives:*

By the end of the seminar, trainees should be able to:

1. Review core clinical and forensic concepts related to treating individuals with serious mental illness in community forensic settings
2. Identify best practices for documentation, time management, and organizational skills that support effective and ethical clinical practice
3. Discuss the changing ethical and professional responsibilities as one transitions from intern to postdoctoral fellow and, eventually, licensed psychologist
4. Apply strategies for professional development, including goal setting, supervision utilization, and continuing education
5. Reflect upon how they have grown throughout this important training year

## Addendum B

### Internship Admissions, Support, and Initial Placement Data

Date Program Tables are updated:

Program Disclosures

<b>Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution's affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>If yes, provide website link (or content from brochure) where this specific information is presented:</b>	

## Internship Program Admissions

**Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements:**

Gateways CONREP's Doctoral Internship Program (DIP) currently offers 4 full-time internship positions. Gateways CONREP's DIP bases its selection process on the entire application package submitted through AAPI; however, applicants who have met the following qualifications prior to beginning their internship are considered preferred:

1. A minimum of 500 intervention hours;
2. A minimum of 50 assessment hours (preferred, not required);
3. Dissertation proposal defended (preferred, not required);
4. Some experience or special interest in working with diverse populations;
5. Practicum experience with severe mental illness, substance use disorders, and/or forensics (preferred, not required);
6. Current enrollment and good standing in an APA- or CPA-accredited clinical, counseling, or school doctoral program.

**Does the program require that applicants have received a minimum number of hours of the following at time of application? If Yes, indicate how many:**

Total Direct Contact Intervention Hours	Yes	Amount: 400
Total Direct Contact Assessment Hours	No	Amount: Preferred number, 50 hours

**Describe any other required minimum criteria used to screen applicants:**

Interns who match to the site are required to successfully complete a fingerprint-based background check as well as a pre-employment health screening performed by Kaiser, a TB screening, and a urinary drug screen, the latter of which tests for substances including alcohol, marijuana, amphetamines, and other stimulants. Presence of these substances could constitute a failure and jeopardize hiring.

### Financial and Other Benefit Support for Upcoming Training Year<sup>1</sup>

Annual Stipend/Salary for Full-time Interns	\$31,000	
Annual Stipend/Salary for Half-time Interns	N/A	
Program provides access to medical insurance for intern?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>If access to medical insurance is provided:</b>		
Trainee contribution to cost required?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Coverage of family member(s) available?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Coverage of legally married partner available?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Coverage of domestic partner available?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	112	
Hours of Annual Paid Sick Leave	48	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>Other Benefits (please describe):</b> Gateways CONREP's Doctoral Interns have access to numerous resources. All Interns are provided with individual offices, a desk, a laptop computer, an office phone, voicemail, printers, software, an ID badge, office keys, an alarm button, and basic office supplies. Intervention manuals, assessment supplies, additional training materials, and access to the DSM-5-TR and California Penal Code book are provided by Gateways CONREP's DIP. Additional materials needed or requested may be purchased using Gateways CONREP's funding with the Training Director's and Executive Director's approval. The Interns are encouraged to volunteer at the Forensic Mental Health Association of California's annual conference, hosted in San Diego, where their conference attendance and accommodations will be paid, as Gateways CONREP partners with FMHAC each year to provide student volunteers. Each Intern also has access to administrative and IT support. Interns are afforded a free parking pass for the entirety of their internship year so they can park for free in the office garage.</p>		

<sup>1</sup> Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table



## Initial Post-Internship Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

	2020-2023	
Total # of interns who were in the 3 cohorts	5	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	<b>PD</b>	<b>EP</b>
Academic teaching	PD = 0	EP = 0
Community mental health center	PD = 0	EP = 3
Consortium	PD = 0	EP = 0
University Counseling Center	PD = 0	EP = 0
Hospital/Medical Center	PD = 0	EP = 1
Veterans Affairs Health Care System	PD = 0	EP = 0
Psychiatric facility	PD = 0	EP = 0
Correctional facility	PD = 0	EP = 0
Health maintenance organization	PD = 0	EP = 0
School district/system	PD = 0	EP = 0
Independent practice setting	PD = 0	EP = 1
Other	PD = 0	EP = 0

Note: "PD" = Post-doctoral residency position; "EP" = Employed Position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.

## Addendum C

GATEWAYS HOSPITAL AND MENTAL HEALTH CENTER 	PAGE 1 OF 1	NUMBER 100.09A	REVIEWED April 1, 2024	ORIGINATING DEPT. Human Resources
SUBJECT:  MANAGEMENT OF INTERNS AND STUDENTS	EFFECTIVE DATE			
	APPROVED:  			
	Edgar Poureshagh, Chief Human Resources Officer      Date 04/01/2024			

### POLICY

Clinical supervision is a mutually agreed upon relationship between two professionals, or an academic institution, to provide experience and improve the knowledge, skills, and educational level of the student or professional.



### PROCEDURE

Preceptorship experiences for healthcare students may be established through collaboration with each department who assumes responsibility for establishing agreements with the academic institution and administration.

Students shall comply with the hospital's policies and procedures as they relate to Patient Care and Employee Conduct.

Students are under supervision of a licensed clinician when they provide patient care, treatment, and services as a part of their training.

The assignment of students to patient care may be considered in the scheduling of staff patient care responsibilities, however, at no time is care provided by students to preclude scheduling of a staff member to the patient population, as the staff member retains responsibility of patient care and safety.

<p style="text-align: center;">GATEWAYS HOSPITAL AND MENTAL HEALTH CENTER</p> 	<p style="text-align: center;">PAGE 1 OF 2</p>	<p style="text-align: center;">NUMBER 100.00</p>	<p style="text-align: center;">REVISED 04/08/2024</p>	<p style="text-align: center;">ORIGINATING DEPT. Human Resources</p>
<p>SUBJECT:</p> <p><b>EQUAL OPPORTUNITY COMMITMENT (ADA)</b></p>	<p>EFFECTIVE DATE 05/01/2024</p>			
	<p>APPROVED:</p> 			
	<p>EDGAR POURESHAGH, Chief Human Resources Officer</p> <p>Date: 04/08/2024</p>			

## PURPOSE

Gateways Hospital and Mental Health Center provides equal employment opportunities to all employees and applicants for employment and strictly prohibits discrimination based on race, color, creed, ancestry, national origin, citizenship, sex or gender (including pregnancy, childbirth, breastfeeding and related medical conditions), gender identity or expression, sexual orientation, marital or domestic partner status, religion (including religious dress and grooming practices), natural hairstyle, age, mental or physical disability, genetic information or characteristics, medical condition, service in the military, or any other characteristic protected by applicable federal, state, or local laws and ordinances. Equal employment opportunity applies to all terms and conditions of employment, including hiring, placement, promotion, termination, layoff, recall, transfer, leave of absence, compensation, and training. Gateways Hospital also prohibits discrimination based on the perception that anyone has any of the characteristics listed above, or is associated with a person who has or is perceived as having any of the characteristics.

## POLICY

Gateways Hospital expressly prohibits any form of unlawful employee harassment or discrimination based on any of the characteristics mentioned above. Improper interference with the ability of other employees to perform their expected job duties is not tolerated.

## PROCEDURE

- Any employees with questions or concerns about equal employment opportunities in the workplace are encouraged to bring these issues to the attention of the Human Resources department.
- The company will not allow any form of retaliation against individuals who raise issues of equal employment opportunity.
- Employees who feel they have been subjected to any such retaliation should bring it to the attention of the HR department immediately.

GATEWAYS HOSPITAL AND MENTAL HEALTH CENTER	PAGE 1 of 2	NUMBER 400.01	REVISED 03/2020	ORIGINATING DEPT. HUMAN RESOURCES
SUBJECT :  Employee Conduct and Work Rules Policy	EFFECTIVE DATE 03/11/2020			
	APPROVED: (ELECTRONICALLY SIGNED)			
	SINDY GONZALEZ		03/11/2020	
	SINDY GONZALEZ, DIRECTOR OF HUMAN RESOURCES		DATE	

### Objective

Gateways Hospital adopts this Employee Conduct and Work Rules Policy to ensure orderly operations and provide the best possible work environment. Gateways Hospital expects employees and others who are engaged to provide services, such as temporary personnel, consultants and independent contractors, to follow these rules of conduct while on company premises, attending company functions or otherwise performing work-related activity.

In addition to maintaining and enforcing this policy to protect the interests and safety of all employees and the organization, Gateways Hospital complies with all applicable federal, state and local laws and regulations concerning employer/employee rights and obligations.

### Procedures

Gateways Hospital is responsible for providing a safe and secure workplace and strives to ensure that all individuals associated with the Hospital are treated in a respectful and fair manner. Though it is not possible to list all forms of behavior that are unacceptable in the workplace, the following are examples of behavior that would be considered infractions of Gateways Hospital rules of conduct. Such behavior may result in disciplinary action, up to and including termination of employment. This list is not intended to be exhaustive:

1. Theft or inappropriate removal or possession of company property or the property of a fellow employee.
2. Willful destruction of company property or the property of a fellow employee.
3. Working under the influence of alcohol or illegal drugs.
4. Possession, distribution, sale, transfer or use of alcohol or illegal drugs in the workplace, while on duty or while operating employer-owned vehicles or equipment.
5. Fighting or threatening violence in the workplace.

GATEWAYS HOSPITAL AND MENTAL HEALTH CENTER	PAGE 1 of 5	NUMBER 400.02	REVISED 04/2020	ORIGINATING DEPT. HUMAN RESOURCES
SUBJECT:  <b>Anti-Harassment Policy and Complaints Procedure</b>	EFFECTIVE DATE 04/27/2020			
	APPROVED: (ELECTRONICALLY SIGNED)			
	SINDY GONZALEZ <hr/> SINDY GONZALEZ, HUMAN RESOURCES DIRECTOR			

### **Harassment, Discrimination & Retaliation Prevention Policy and Complaint Procedure**

Gateways Hospital and Mental Health Center strives to create and maintain a work environment in which people are treated with dignity, decency and respect. The environment of the Hospital should be characterized by mutual trust and the absence of intimidation, oppression and exploitation. Gateways Hospital and Mental Health Center will not tolerate unlawful discrimination or harassment of any kind. Through enforcement of this policy and by education of employees, Gateways Hospital and Mental Health Center will seek to prevent, correct and discipline behavior that violates this policy.

All employees as well as third parties who conduct business with the Hospital, regardless of their positions, are covered by and are expected to comply with this policy and to take appropriate measures to ensure that prohibited conduct does not occur, including the prompt reporting to one's supervisor, manager or Human Resources of any conduct that violates this policy, whether the conduct is directed at the employee personally or another employee. Appropriate disciplinary action will be taken against any employee who violates this policy. Based on the seriousness of the offense, disciplinary action may include verbal or written reprimand, suspension, or termination of employment.

Directors and supervisors who knowingly allow or tolerate discrimination, harassment or retaliation, including the failure to immediately report such misconduct to human resources (HR), are in violation of this policy and subject to disciplinary action up to and including termination.

#### **Prohibited Conduct under This Policy**

Gateways Hospital and Mental Health Center, in compliance with all applicable federal, state and local anti-discrimination and harassment laws and regulations, enforces this policy in accordance with the following definitions and guidelines:

#### **Discrimination**

It is a violation of Gateways Hospital and Mental Health Center's policy to discriminate in the provision of employment opportunities, benefits or privileges; to create discriminatory work conditions; or to use discriminatory evaluative standards in employment if the basis of that discriminatory treatment is, in whole or in part, the person's race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status or civil partnership/union status, sex, gender (including pregnancy, childbirth or related medical conditions), gender identity, gender expression, age, sexual orientation, or military and veteran status.

GATEWAYS HOSPITAL AND MENTAL HEALTH CENTER	PAGE 1 of 1	NUMBER 400.23	REVISED	ORIGINATING DEPT. HUMAN RESOURCES
SUBJECT:  Diversity, Equity, and Inclusion Policy	EFFECTIVE DATE 4/1/2021			
	APPROVED: (ELECTRONICALLY SIGNED)			
	SINDY GONZALEZ SINDY GONZALEZ, HUMAN RESOURCES DIRECTOR			

Gateways Hospital is committed to fostering, cultivating, and preserving a culture of diversity, equity, and inclusion.

Our human capital is the most valuable asset we have. The collective sum of the individual differences, life experiences, knowledge, inventiveness, innovation, self-expression, unique capabilities, and talent that our employees invest in their work represents a significant part of not only our culture, but our reputation and organization's achievement as well.

We embrace and encourage our employees' differences in age, color, disability, ethnicity, family or marital status, gender identity or expression, language, national origin, physical and mental ability, political affiliation, race, religion, sexual orientation, socio-economic status, veteran status, and other characteristics that make our employees unique.

Gateways Hospital's diversity initiatives are applicable—but not limited—to our practices and policies on recruitment and selection; compensation and benefits; professional development and training; promotions; transfers; social and recreational programs; layoffs; terminations; and the ongoing development of a work environment built on the premise of gender and diversity equity that encourages and enforces:

- Respectful communication and cooperation between all employees.
- Teamwork and employee participation, permitting the representation of all groups and employee perspectives.
- Employer and employee contributions to the communities we serve to promote a greater understanding and respect for the diversity.

All employees of Gateways Hospital have a responsibility to treat others with dignity and respect at all times. All employees are expected to exhibit conduct that reflects inclusion during work, at work functions on or off the worksite, and at all other Gateways-sponsored and participative events. All employees are also required to complete on an annual basis the diversity training to enhance their knowledge to fulfill this responsibility.

Any employee found to have exhibited any inappropriate conduct or behavior against others may be subject to disciplinary action.

Employees who believe they have been subjected to any kind of discrimination that conflicts with the company's diversity policy and initiatives should seek assistance from a supervisor or an HR representative.