



Psychology Practicum and Supervision Program Manual

Updated March 2026

11 St Peters Road Charlottetown, PE C1A 5N1 P: (902) 367-4722 F: (902) 367-4724

info@CarrPsych.com | CarrPsych.com

Content

Content.....	2
Introduction.....	4
About the Practice.....	4
Office Locations.....	4
Hours.....	4
Parking.....	5
Technology.....	5
Accreditation.....	5
Remuneration.....	5
Our Treatment Approach.....	5
Services.....	6
Adult Services.....	6
Child & Teen Services.....	6
Our Commitment to Creating a Diversity-Positive Space.....	6
Training Goals.....	6
1. Develop Evidence-Based Intervention and Consultation Skills.....	7
2. Develop Skills in Assessment, Diagnostic Formulation, and Communication of a Diagnosis.....	7
3. Develop Knowledge of Ethics, Legal Standards, and Policy.....	8
4. Develop Reflective Practice/Self-Assessment/Self-Care.....	9
5. Develop Professional Identity as a Mental Health Clinician.....	9
6. Develop Advanced Relationship Skills.....	9
7. Develop Diversity Skills and Sensitivity.....	10
8. Develop Education & Supervision Skills & Knowledge.....	10
Structure of the Program.....	11
Time Frame.....	11
Evaluation.....	12
Supervision.....	12
Live and Recorded Observation.....	13
Clinical Training Seminars.....	13
Supervisors and Staff.....	13
Procedures.....	14
Client Selection.....	14
Intake and Screening.....	15
Testing/Assessment.....	15
Responsibilities & Policies.....	15
Administrative.....	15
Social Media.....	16

Other Information..... 18

- Time off and Illness..... 18
- Animals and Allergies..... 18
- Dress Code.....18
- Cleaning..... 19

Complaints Policy..... 19

- Complaints Against a Staff Member or Consultant at the Practice..... 19
- Recommended steps for managing disputes and complaints at the practice:..... 19

To-Do List..... 20

Introduction

Whether you are considering or have accepted a placement at Sarah Carr Psychological Services (CarrPsych), this manual is for you. It is intended to outline expectations and requirements for practicum interns at CarrPsych and answer some frequently asked questions.

This is a demanding but rewarding practicum that requires significant self-motivation and involves rigorous supervision.

Training at CarrPsych focuses on evidence-based and theoretically grounded clinical psychology practice. Our approach to supervision and training is competency-based, experiential, supportive and relational. We want interns to finish their practicum with a solid foundation in the Core Competencies (see Training Goals).

This is an exciting time in your career development. We hope your time here will be enriching and rewarding.

About the Practice

CarrPsych is a private psychology practice in Charlottetown, PE. Our team of registered psychologists, counsellors and clinical social workers aims to provide evidence-based, effective clinical care for our clients. Our clinicians are passionate, engaged, growth-oriented, non-judgmental, and professional. All clinical service providers at the practice are licensed to provide psychological or psychotherapy services in Prince Edward Island or are supervised by a licensed provider.

We believe in collaboration. We work with several sites in and around Charlottetown, and you will likely work with physiotherapists, occupational therapists, lawyers, counsellors, and other professionals in the community.

Office Locations

Head Office

CarrPsych	info@CarrPsych.com
11 St Peters Rd	CarrPsych.com
Charlottetown, PE	(p) 902-367-4722
C1A 5N1	(f) 902-267-472

Hours

Main reception hours are Monday through Friday, 8 am-4 pm. Evening reception staff is offered on our busier nights, but not guaranteed. There are some opportunities for evening and weekend counselling hours, but most practicum hours are completed during weekdays. All interns must be available on

Wednesdays from 2 pm to 3 pm **and** Thursdays from 9 am to 10 am for group supervision and training. You must attend both sessions.

The office is closed on storm days when school is cancelled. Clients may be seen online or by phone when the office is closed.

Parking

Staff and interns are responsible for their own transportation. Free parking is available at most locations, and several buses stop nearby.

Technology

Interns will be provided with a laptop or Chromebook for use during their practicum. Some interns choose to use their own devices, which they may do at their own risk.

Confidential information should never be accessed via public or insecure Wi-Fi connections.

Devices used for work/practicum purposes must always be kept secure. They may not be left in vehicles, shared with others, or placed in areas accessible to others.

Interns will be provided with a CarrPsych email address for work- and practicum-related communications.

Accreditation

The Psychology Practicum Program at CarrPsych is not accredited. Applicants are encouraged to speak with their Director of Clinical Training regarding the acceptability of our practicum program for their specific program requirements.

Remuneration

Practicum interns and supervisees are deemed to be in clinical training and are not employees or independent contractors at the practice. They are not paid a stipend, fee, or salary.

Our Treatment Approach

- Evidence-based, best-practices approach to assessment and treatment
- Biopsychosocial and trauma-informed care
- Ongoing assessment yields the best results
- Cognitive behavioural therapy (CBT), Cognitive Processing Therapy (CPT), Prolonged Exposure Therapy (PE), Dialectical Behaviour Therapy Skills Training (DBT), Solution Focused Therapy (SFT), Mindfulness- and Somatic-based therapies, and Acceptance and Commitment Therapy (ACT)
- Sensitivity to issues of diversity; LGBTTIQ positive space
- Collaboration with teams, outside professionals, and families
- In-person and video counselling and assessment

Services

Adult Services

We offer evidence-based individual and group treatment to address issues related to depression, anxiety, ADHD, posttraumatic stress and trauma-related disorders, somatic disorders, chronic pain and illness, personality disorders, and high-conflict personalities. We also offer counselling and relational psychotherapy to address issues related to relationships, self-esteem, and identity. Services for adults include psychotherapy and return-to-work planning, as well as psychological and psychoeducational assessments.

Child & Teen Services

Psychologists and therapists at our practice help children aged 10 and over, teens, and parents learn to cope adaptively with a range of issues, including anxiety and depression, coping with parental separation and divorce, ADHD, behavioural difficulties, relationship difficulties, self-esteem issues, identity issues, and traumatic stress disorders. Services for children and teens include psychotherapy and parental consultation. Psychological assessments are available for those aged 16 and up.

Our Commitment to Creating a Diversity-Positive Space



Our office is a place where human rights and diversity are respected. We understand that each client is unique and presents with complex identities in terms of ancestry, family status, dis/abilities, socioeconomic status, sex, gender identity and expression, and sexual orientation.

Training Goals

The primary aim of the practicum program is to ensure the intern's development of Core Competencies (as outlined by the Canadian Psychological Association, the Prince Edward Island Psychologist Registration Board and/or the Canadian Counselling and Psychotherapy Association) so that they are prepared to begin practicing at the Master's or Doctoral level. The goals for the program are as follows:

1. Develop Evidence-Based Intervention and Consultation Skills

Competency goals:

- Applies knowledge of evidence-based practice, including empirical bases of assessment, intervention, and other psychological applications, clinical expertise, and client preferences.
- Formulates and conceptualizes cases and plans interventions utilizing at least one consistent theoretical orientation.
- Displays clinical skills.
- Implements evidence-based interventions.
- Evaluate treatment progress and modify treatment planning as indicated, utilizing established outcome measures.
- Demonstrates knowledge of the consultant's role and its unique features as distinguished from other professional roles (such as therapist, supervisor, and teacher).
- Demonstrates knowledge of and ability to select appropriate means of assessment to answer referral questions.
- Identifies literature and knowledge about the process of informing consultees of assessment findings.
- Identifies literature relevant to consultation methods (assessment and intervention) within systems, clients, or settings.

How this will be achieved:

- Interns will be exposed to a wide range of client populations and presenting problems.
- Interns will receive didactic training and supervision in a range of modalities, including evidence-based and client-centred modalities.
- Interns will prepare treatment progress notes for clinical purposes and for non-clinical readers (e.g., insurers, lawyers, WCB).
- Interns will administer, score, and clinically employ treatment response and therapeutic alliance measures.
- Interns will be exposed to communicating with family doctors, insurance adjusters, and other clinical professionals.
- Interns may participate in an Interdisciplinary Program (IDP) team of counsellors, psychologists, occupational therapists, and physiotherapists.
- Interns will have the opportunity to provide feedback on a consultation to clients, family members, treatment providers, or community members.

2. Develop Skills in Assessment, Diagnostic Formulation, and Communication of a Diagnosis

Note: on PEI, only psychologists and doctors (including psychiatrists) can diagnose. Competencies related to diagnosis are intended for psychologist-track interns only. Counsellors and Clinical Social Workers will assess within their individual scope of practice, including administering and interpreting Level A and B assessments, outcome measures, and screening tools.

Competency goals:

- Selects assessment measures with attention to issues of reliability and validity.
- Demonstrates awareness of the strengths and limitations of administration, scoring and interpretation of traditional assessment measures and related technological advances.
- Selects appropriate assessment measures to answer diagnostic questions.
- Applies concepts of normal/abnormal behaviour to case formulation and diagnosis in the context of stages of human development and diversity.
- Utilizes systematic approaches to gathering data to inform clinical decision-making.
- Writes adequate assessment reports and progress notes and communicates assessment findings verbally to clients.

How this will be achieved:

- Interns will receive didactic training and supervision in selecting, administering, and interpreting primary measures used in clinical psychology and/or counselling psychology.
- Interns will prepare a minimum of one comprehensive written psychological assessment report including an understanding of the referral questions, background history, behavioural observations, results of structured diagnostic interviewing (psychologist-track interns only), results of validity testing, psychometric test clinical findings, diagnostic conclusions (psychologist-track only), case formulation, and treatment recommendations. This is often completed as part of the intern's master's program.

3. Develop Knowledge of Ethics, Legal Standards, and Policy

Competency goals:

- Demonstrates intermediate-level knowledge and understanding of their registering body's Ethical Principles and Code of Conduct and other relevant ethical/professional codes, standards and guidelines, laws, statutes, rules, and regulations.
- Demonstrates knowledge and application of an ethical decision-making model; applies relevant elements of ethical decision-making to a dilemma.
- Integrates own moral principles/ethical values in professional conduct.

How this will be achieved:

- Interns will participate in regular training seminars and discussions in supervision regarding the application of the CPA Code of Ethics, the PEI Standards of Professional Conduct, and legislation relevant to the practice of psychology and/or therapy in Prince Edward Island.

- Through seminars, supervision, and exposure to a group psychology practice, the intern will be exposed to knowledge about issues central to the field of psychology and will be supported in the provision of evidence-based practice.

4. Develop Reflective Practice/Self-Assessment/Self-Care

Competency goals:

- Displays broadened self-awareness; utilizes self-monitoring; displays reflectivity regarding professional practice (reflection-on-action); uses resources to enhance reflectivity; demonstrates elements of reflection-in-action.
- Demonstrates broad, accurate self-assessment of competence; consistently monitors and evaluates practice activities; works to recognize limits of knowledge/skills and seeks means to enhance knowledge/skills.
- Monitors self-care-related issues with supervisor; understands the central role of self-care in an effective practice.
- Effectively participates in supervision.

How this will be achieved:

- Interns will participate in clinical training seminars and discussions in supervision about issues pertaining to self-care, work-life balance, and prevention/management of burnout.
- The practice has policies in place to support clinicians and interns experiencing burnout or strain associated with their clinical work.

5. Develop Professional Identity as a Mental Health Clinician

Competency goals:

- Adherence to professional values infuses work as a clinician in training and recognizes situations that challenge adherence to professional values.
- Communication and physical conduct (including attire) are professionally appropriate across different settings.
- Accepts responsibility for their own actions.
- Acts to understand and safeguard the welfare of others.
- Displays emerging professional identity as a psychologist or counsellor; uses resources (e.g., supervision, literature) for professional development.

How this will be achieved:

- Through clinical training seminars, supervision, and exposure to a group psychology practice, the intern will be supported in developing advanced interpersonal skills and their professional identity as a psychology practitioner.

6. Develop Advanced Relationship Skills

Competency goals:

- Forms and maintains productive and respectful relationships with clients, peers/colleagues, supervisors and professionals from other disciplines.
- Negotiates differences and handles conflict satisfactorily; provides effective feedback to others and receives feedback non-defensively.
- Communicates clearly using verbal, nonverbal, and written skills in a professional context; demonstrates a clear understanding and use of professional language.

How this will be achieved:

- Interns will advance their relational skills through participation in teams, constructive discussion regarding therapeutic and supervisory relationships, group seminars, and exposure to a range of clients and presenting problems.

7. Develop Diversity Skills and Sensitivity

Competency goals:

- Monitors and applies knowledge of self as a cultural being in assessment, treatment, and consultation.
- Applies knowledge of others as cultural beings in assessment, treatment, and consultation.
- Applies knowledge of the role of culture in interactions in assessment, treatment, and consultation of diverse others.
- Applies knowledge, sensitivity, and understanding of individual and cultural issues to effectively work with diverse others in assessment, treatment, and consultation.

How this will be achieved:

- Through clinical training seminars, assigned readings and discussions during supervision, interns will learn to monitor and attend to issues of identity and diversity.

8. Develop Education & Supervision Skills & Knowledge

Competency goals:

- Demonstrates knowledge of, purpose for, and roles in supervision.
- Identifies and tracks progress in achieving the goals and tasks of supervision; demonstrates basic knowledge of supervision models and practices.
- Demonstrates knowledge of the supervision literature and how clinicians become skilled professionals.
- Provides helpful supervisory input in peer and group supervision.
- Demonstrates awareness of theories of learning and how they impact teaching.

- Demonstrates knowledge of the application of teaching methods.

How this will be achieved:

- Through clinical training seminars, assigned readings, and participation in and discussion during clinical supervision, interns will develop an understanding of basic models and methods of supervision.
- Interns will provide a minimum of one clinical training seminar during the clinical training seminar.

Structure of the Program

Time Frame

Practicums at CarrPsych are tailored to the requirements of each intern's academic program. Typically, a practicum placement is at least 300 hours, requiring a minimum of 120 direct client hours. Supervision is provided at 1 hour for every 10 direct client hours, and at least once a week. **Interns are responsible for knowing their practicum requirements and ensuring they are met.**

Counselling (e.g. MACP) interns wishing to register on PEI should know that registration with CCTPEI requires 750 total hours, including 450 direct client hours. Interns wishing to complete these hours during their practicum by taking on more hours than required by their practicum program may be able to do so upon request, subject to office space availability.

Interns completing a 300-hour practicum are typically at the practice three days a week. The schedule is flexible (according to office space availability), but we ask that interns keep a consistent schedule. Evening and weekend hours may be available; interns may only practice when another clinician is in the building.

NB: Interns **must attend group supervision and clinical training**, which are mandatory components of the practicum and are held on Wednesdays from 2 pm to 3 pm and Thursdays from 9 am to 10 am.

An **example of a typical practicum week** is as follows:

- 8.0-12.0 hours individual therapy or co-therapy
- 1.0-2.0 hours assessment and/or report writing (treatment updates, diagnostic interviewing, testing, report writing, and/or feedback)
- 0.5-1.0 hours of individual supervision
- 0.0-1.0 hours being observed*
- 1.0 hours of group supervision
- 1.0 hours of clinical training

- 2.0 hours prep/admin (note taking, prepping materials, admin)
- 2.0 hours of learning/ training (readings and learning assigned by supervisors or as needed)
- 0.0 - 3.0 hours of group therapy
- 1.0 hours of social media posting

***Interns must book at least one observation session per month. This may be live (best) or recorded. Please book 1.5 hours for live sessions to allow time for debriefing.**

Evaluation

Formal evaluation typically occurs twice during the practicum—once at the mid-term to adapt the learning plan and once at the conclusion. Interns are evaluated using their individual degree/program criteria.

Interns must submit videos for evaluation or book a live session for evaluation at least two weeks before the evaluation is due. Please book this with your supervisor ASAP.

Informal evaluation occurs at all stages of the practicum, and interns can expect regular feedback on their progress. Videos may be viewed with supervisor for live feedback.

When a intern does not meet the practicum and/or their university's expectations, this will be addressed in supervision, and a formal plan to address areas of weakness will be created. ***The intention is for interns to pass, so such plans are meant to support interns toward success.***

Supervision

Group supervision is a time for the team to discuss ethical issues and complex cases. Because time is limited in group supervision, staff and interns are asked to limit the number of cases discussed to one or two. Interns are encouraged to provide feedback on the cases discussed during group supervision.

Individual supervision allows interns to discuss any issues not covered during group supervision. These often involve personal reflections and awareness that the intern is developing. Intern case notes will also be reviewed during individual supervision. Interns should come prepared with questions or difficulties, although it is usually easy to fill supervision time. Interns are encouraged to book an hour of individual supervision on weeks when they are not being observed. Individual supervision may be requested at any time, as needed. Anytime advice or consultation is sought from a supervisor, it should be recorded as individual supervision.

Interns are assigned a primary supervisor and may be assigned a secondary supervisor who will supervise in the event of the other's absence. The intern's primary supervisor should be their main point of contact. However, CarrPsych is a collaborative practice—all team members expect to answer questions as needed.

Interns are responsible for ensuring their supervisor has all required materials, including forms. Supervisors are not responsible for ensuring deadlines are met. Interns should communicate with their supervisor regarding all important paperwork and deadlines.

Interns will also have the opportunity to receive ongoing supervision by asking questions to staff and peers. All questions are welcome! Do not sit on a difficult or ethical dilemma for too long. If you cannot connect with your supervisor, discuss it with another clinician!

Live and Recorded Observation

Although it may initially seem intimidating, live and recorded observation and supervision are important to developing skills as a therapist. **At least once per month, interns will book one live supervision session with their supervisor or record one session for their supervisor to review.** Interns are responsible for choosing an appropriate client, obtaining consent, and booking the session. This should be booked several months in advance with the help of the office administrator or during individual supervision. Feedback provided will focus on both interns' strengths and areas for development.

Interns will also be invited to observe sessions with any team member and should do so when possible. Interns may approach other clinicians and request that the clinician observe their (intern's) session. **Interns are encouraged to book live observations with any staff member early in their practicum to meet their practicum hour requirements.**

Clinical Training Seminars

Clinical training seminars are provided weekly and cover a broad range of topics. They are presented by team members or through videos. Presentations typically run 30 minutes to an hour and are followed by discussion or skills practice. Examples of past seminars include training on various assessment tools (e.g. SCL-90-R, OQ 45.2, GAD-7, PHQ-9), a presentation on intergenerational trauma, working with suicidal clients, ethical issues in the use of technology in therapy, and training in specific therapy techniques.

Interns are encouraged to present at least one clinical training seminar to the team during their practicum. This can be on any topic related to counselling and/or psychology and/or healthcare ethics that they wish. It can be on a topic they are very familiar with or it can be a topic they wish to learn more about. It can be skills-based or educational.

Supervisors and Staff

Sarah Carr, M.Ed., R.Psych, Psychologist

Sarah Carr is a registered Clinical Psychologist. She has been working with individuals of all ages since 2007. After earning a Master's degree in Counselling Psychology from the University of Alberta, she obtained extensive postgraduate experience in psychological assessment and the treatment of trauma and trauma-related disorders, personality and behaviour disorders, chronic pain and illness, and executive function disorders at the Youth Assessment Centre in Red Deer, Alberta and as part of the Alberta Health Services' Severe Psychiatric Outpatient Team. Her current practice focuses on the assessment of individuals with various trauma-related disorders, executive function disorders and chronic pain, as well as supervising interns and new therapists. She is a member of the Canadian

Society of Medical Evaluators (CSME).

Licensing Body: Prince Edward Island Psychologist Registration Board (#068)

Areas of Practice: Clinical Psychology, Counselling Psychology, Assessment Psychology

Populations: all ages

Contact: Sarah@CarrPsych.com

Jessica MacLeod, M.A., R.Psych, Psychologist

Jessica MacLeod is a Registered Psychologist working predominantly with youth and adults. Jessica completed her Master's degree in Counselling Psychology at Yorkville University. She completed further training and supervision during her residency with the Calgary Counselling Centre. Jessica initially registered as a psychologist in Alberta before moving back home to PEI. Jessica works with individuals experiencing a wide variety of concerns, with a special interest in working with clients who have experienced trauma and those with eating disorders.

Licensing Body: Prince Edward Island Psychologist Registration Board (#087)

Areas of Practice: Counselling Psychology

Populations: youth and adults

Contact: Jessica@CarrPsych.com

Jenny Perry, Office Manager

Jenny is the face of the clinic. She is the friendly voice who answers the phone and the smiling face who greets everyone who enters through the front door. She is responsible for all administrative tasks, including booking appointments, taking payments, and ordering supplies. She is also responsible for room scheduling and cancelling clients when staff and interns are ill. She is a great source for referral information and is happy to answer any administrative questions interns might have.

Contact: Jenny@CarrPsych.com

Procedures

Client Selection

Clients are assigned based on clinician availability and, in many cases, clinical interests. Interns can expect to see a variety of clients with various issues. Interns may inform their supervisor of any limitations regarding their ability to practice with certain populations (e.g. sex offenders).

Interns will not be assigned clients from the following groups:

- Clients who pose an acute danger to themselves, others or the community

- Clients who are actively decompensating or psychotic
- Clients who may not meet the conditions above but nevertheless may be in need of psychiatric hospitalization, a day treatment program, or other comprehensive services not provided by the clinic
- Clients for whom active and significant substance use (i.e., use of alcohol or substances on a daily basis with episodes of delirium and/or blackouts) is the primary clinical problem
- Clients actively involved in litigation that may result in a intern therapist needing to testify in a legal proceeding

Clients falling under any of the above categories are referred to senior clinicians or other facilities where they can be better served, given their specific needs. **If these conditions arise or are brought to light during treatment, the trainee must inform their supervisor immediately.**

Intake and Screening

Prospective clients who present to the clinic for services are usually referred by the following sources: community health agencies (e.g. family doctors), Workers' Compensation Boards, insurance companies, lawyers, Veterans Affairs Canada, or self-referral. All clients are informed that interns are supervised by licensed psychologists or counsellors. Clients are also informed of the clinic's fee structure. Additionally, clients are asked about the type of services they are seeking and whether they are experiencing a psychological emergency (e.g., suicidal or homicidal ideation, active psychosis). If a prospective client is experiencing an emergency or crisis, they are advised to go to their closest emergency room.

Psychological screening is part of the intake evaluation process. All clients must complete an intake form, which includes any risk factors. Client intake forms will be available to review on Cliniko before their first session. Any concerns should be brought to their supervisor before meeting the client. A plan will be developed depending on the circumstances.

The intake form includes the DSM-5 screener. Generally, scores of 2 (mild) and above indicate areas for further inquiry. The exceptions are questions related to suicide ideation (q 11), psychosis (q 12 & 13), and substance abuse (q 21, 22 & 23) which should be investigated if scores are 1 (slight) or above.

Testing/Assessment

Testing and assessment are an important part of our evidence-based practice. Interns **must** direct their clients to complete measures before and after each session. Testing may be completed on any device (phone, computer, tablet) or paper. We have tablets available in the waiting room for testing (CarrPsych.com/clients). These test results should be integrated into the client's Cliniko account. If they do not integrate, please ask someone at the front desk to manually move their results to their Cliniko account. *Failure to regularly use outcome measures may result in the termination of your practicum.*

****Clients often need reminding to complete these measures. It is the clinician's responsibility to ensure they are completed!****

Responsibilities & Policies

Administrative

Interns are responsible for learning to use the Cliniko practice management program. Support is available for scanning and uploading documents into a client's file.

Interns are responsible for using outcome measures with clients.

Interns are responsible for *shredding* all confidential and proprietary documents.

Interns are responsible for rebooking clients after an initial appointment. Cancellations/changes can still be made through the front desk.

Interns are responsible for documenting **all** their hours, including those required for Canadian Certified Counsellor (CCC) and Counselling Therapist (CT) registration.

Interns are responsible for knowing the requirements of their practicum and of their future registering body (e.g., CCPA, CCTPEI), including what needs to be documented and recorded.

Interns are responsible for booking one live or recorded observation session with their supervisor per month. This should be done significantly in advance as your supervisor's schedule will fill up quickly.

Interns are responsible for booking time with their supervisor for observation/grading at least two weeks before their end-of-semester meeting with their professor.

Interns are responsible for ensuring one hour of supervision for every ten client hours.

Social Media

1. Confidentiality

Strict Prohibition: The posting of any identifiable client information, including names, initials, specific case details, or photos taken within clinical spaces is strictly forbidden.

De-identification Limits: Even "de-identified" stories can often be traced back to specific individuals in small communities (e.g., Charlottetown) and are therefore prohibited.

Location Tagging: "Checking in" or tagging the clinic's location in personal posts is strongly discouraged to prevent inadvertent disclosure of client presence or clinic schedules. Never check in when working alone in the clinic.

2. Professional Boundaries and Dual Relationships

Interaction Policy: We have a "no-follow, no-friend" rule regarding current or former clients on all personal social media platforms.

Handling Requests: Discussing the boundary in the next session may be necessary to protect the therapeutic relationship. In the meantime, an appropriate response might be, *"Thank you for your message. As part of my professional and ethical responsibilities, I am unable to accept friend or follow requests from clients on social media. This is to maintain your confidentiality and our therapeutic boundaries. If you would like to discuss this further, please let me know, and we can talk more at your next session."* Document the occurrence and your response in the client's file.

Messaging: The use of social media messaging (e.g., Facebook Messenger, WhatsApp) for clinical communication or scheduling is prohibited.

3. Professional Image and Representation

Clinic Identification: Interns may list the clinic as their placement site on professional profiles (e.g., LinkedIn).

Disclaimers: A disclaimer is required if the intern discusses mental health topics publicly (e.g., *"Views expressed are my own and do not represent Sarah Carr Psychological Services"*).

Content Standards: A reminder that your public digital footprint can impact client trust and professional reputation. Think before you post, even on personal platforms.

4. Online Research of Clients

Ethical Searching: Searching for clients online ("Googling" clients) is prohibited unless there is a documented clinical necessity or safety concern.

Informed Consent: If searching a client is necessary for risk assessment, it should ideally be discussed with the supervisor and, when appropriate, the client.

5. Use of Personal Devices

Security: Personal devices used to access professional social media or clinic schedules and emails must be encrypted and password-protected. Wifi must be secure (e.g. do not access Cliniko via public internet).

Photography: The taking of photos or videos of staff, clients, or clinical records for personal social media use is strictly prohibited.

6. Monitoring and Compliance

Reporting Breaches: If you become aware that you have accidentally violated the social media policy (e.g., posted confidential information, accepted a client's friend request, shared clinic-related content inappropriately), attempt to remove or correct the content as soon as possible. Document the steps you have taken and report the breach to your supervisor.

If you observe another intern or staff member violating the social media policy, do not engage in confrontation. Document what you have observed and proceed with the following steps:

Report the violation as soon as possible to your primary supervisor or, if unavailable, to another designated supervisor or the office manager.

If the violation involves your supervisor, report to another senior staff member.

Prepare a written report including:

- Date and time of the incident
- Description of the violation (what was posted/shared, on which platform)
- Whose account was involved
- Any steps already taken to address or remediate the situation
- Names of any individuals who may have been affected (e.g., clients, staff)
- Any screenshots or evidence, if available

Your supervisor (or senior staff member) will review the report and determine:

- The potential impact of the violation (e.g., breach of confidentiality, reputational risk)
- Whether additional steps are required to remove or mitigate the content
- Whether affected parties (e.g., clients) need to be notified
- Whether the incident must be reported to regulatory authorities (e.g., privacy commissioner, licensing board)

Disciplinary Action: The consequences of policy violations range from remedial education to termination of the practicum and reporting to your regulatory body/school.

Non-Retaliation: No retaliation will occur against any individual who reports a suspected or actual violation in good faith.

7. Professional Networking

LinkedIn/Professional Sites: Professional networking, such as connecting with colleagues, is allowed, but must maintain a professional tone in comments and posts.

Other Information

Time off and Illness

Time off can be booked at the intern's discretion. It should be booked as soon as possible to minimize client treatment disruptions.

Interns are encouraged to take sick leave if they are ill. *Absence due to illness should be reported to the office administrator as soon as possible so arrangements can be made.* If the intern feels well enough to work from home, clients can be seen via tele-session. Supervision may also be attended via tele-session.

Interns should be mindful that multiple absences will affect the number of hours they complete and the overall quality of their practicum. **Interns must be aware that it may not be feasible to complete their practicum on time or at all if they do not attend on their assigned days.**

Animals and Allergies

Interns should know that **there will be animals on-site** during their practicum. Many of our staff and clients have animals (typically dogs) who come to the clinic. Brewster, our hypo-allergenic office schnoodle, will be at the office most days. Those with severe allergies or dog phobias may not be suitable for this placement.

Although we do not have a "scent-free" policy, staff and interns are asked to minimize their use of scented products.

Dress Code

Part of developing a professional identity includes dressing professionally. Interns are not expected to buy a new wardrobe, but are encouraged to be mindful of how they present themselves and to

explore the impact of their presentation on their work. Many interns find that simply adding a blazer or cardigan to a pair of jeans and a T-shirt transforms their outfit from intern to professional. Issues regarding the dress code will be addressed on an individual basis.

Cleaning

Jenny keeps the office clean but needs everyone's help. Interns and staff are asked to help by keeping their offices clean.

Food should not be left in office garbage cans. Please dispose of food waste in the kitchen or by the coffee station.

Dishes should be placed in the grey bus bins under the coffee station or in the dishwasher on weekends.

We have a staff fridge and freezer for use. Please remove any old or unwanted items. "Suspicious" items may be discarded without notice.

Rooms should be left as they are found. Interns are asked *not* to rearrange their office or redecorate without permission.

Books and other shared materials must be returned to the bookshelves by the end of the day.

Do not remove items from offices that you did not bring in.

Complaints Policy

Complaints Against a Staff Member or Consultant at the Practice

All staff and consultants at the practice are expected to be familiar with and adhere to the laws, standards of practice, and ethical codes of the professions of psychology and psychotherapy.

A staff member (including interns and students) at the Practice or client who believes that his or her rights have been violated or have experienced incompetent or inefficient service, neglect of duty and conduct unbecoming of a healthcare provider can file a complaint against the person involved.

Recommended steps for managing disputes and complaints at the practice:

Step 1: When appropriate, individuals are encouraged to attempt to resolve concerns informally by discussing them with the person involved. (However, individuals may make a formal complaint without having made an informal complaint if they have a justifiable basis for not going directly to the person involved.) If an individual has been the victim of harassment or other policy violations in our Practice, they should first attempt to deal with it **locally with the parties involved**.

Step 2: The **help of fellow clinicians involved** in the situation may be sought and is recommended if

there is no resolution through mutual discussion between the two people.

Step 3: If this is unsuccessful in resolving the issue, the aggrieved supervisee or clinician or client should provide an **informal complaint in the form of a verbal report to Sarah Carr as soon as possible after the incident**. If the complaint is regarding actions by Sarah Carr, then a verbal report should be made to another staff member.

Step 4: If the complaint is to go further, a **written report is necessary for a formal complaint to be initiated**. The written formal complaint should include details of the incident(s), the names of the individuals involved, and the names of any witnesses. The written report should be submitted to **Sarah Carr**. If the complaint is regarding actions by Sarah Carr, then a written report should be made to another staff member. The incident will then be investigated by Sarah Carr or by the person to whom the written complaint was submitted. Cooperation is crucial for the Practice to maintain a safe, comfortable learning environment.

There will be no retaliation against any individual for making a complaint. If an individual is afraid to report harassment to Sarah Carr, the individual is urged to speak to another clinician at the practice whom he or she trusts or to speak to our office manager.

Step 5: Disciplinary action may include one or more of, but is not limited to, the following: exoneration, facilitated dialogue to resolve the misunderstanding, remedial educational requirements, a formal reprimand, suspension, reporting to the appropriate regulatory College, and/or termination from the practice.

Step 6: If the individual does not feel that the complaint process outlined above led to the appropriate resolution, they may submit a complaint to the licensing board of the individual against whom the complaint is being made.

To-Do List

Task	Due Date	Completed
Get confirmation email from supervisor	Before practicum starts	<input type="checkbox"/>
Get a criminal record check	Before practicum starts	<input type="checkbox"/>
Confirm first day/orientation day	Before practicum starts	<input type="checkbox"/>

Arrange transportation	Before practicum starts	<input type="checkbox"/>
Confirm practicum hours	Before practicum starts	<input type="checkbox"/>
Get access to CarrPsych email	Orientation day	<input type="checkbox"/>
Get access to Cliniko	Orientation day	<input type="checkbox"/>
Get the link to the staff portal	Orientation day	<input type="checkbox"/>
Familiarize yourself with Cliniko	First week	<input type="checkbox"/>
Familiarize self with DSM-5 Cross-Cutting Symptoms Measure	First week	<input type="checkbox"/>
Book CTS presentation	First week	<input type="checkbox"/>
Book dates for observations (semester one)	First week	<input type="checkbox"/>
Review Practicum Manual	First two weeks	
Complete training in assessment measures	First two weeks	<input type="checkbox"/>
Complete CPT training	First month	<input type="checkbox"/>
Complete other training as required	First semester	<input type="checkbox"/>
Book dates for session observation (semester 2)	First week, second semester	<input type="checkbox"/>
Provide training plan to supervisor (based on goals from first semester)	First week, second semester	<input type="checkbox"/>
Confirm plans for CT Registration and continued supervision after	First week, second semester	<input type="checkbox"/>

practicum at CarrPsych (subject to supervisor availability)		
Review paperwork for CT application and/or CCC application	First month of second semester; do not leave until last minute	<input type="checkbox"/>
Have everything ready for Registration by end of semester	Last few weeks of practicum	<input type="checkbox"/>