

DOCTORAL INTERNSHIP PROGRAM HANDBOOK

Updated 11/16/2026

Table of Contents

HealthRIGHT 360 Doctoral Internship Program 2
AIM 2
APPIC Membership and APA Accreditation Status 2
Program Mission and History 2
Training Sites for Doctoral Interns 4
Clinical and Training Experiences 7
Supervisor Bios 8
HealthRIGHT 360 Stipend, Benefits, and Resources Policy 10
Intern Selection and Academic Preparation Requirements Policy 10
HealthRIGHT 360 Diversity and Non-Discrimination Policy 12
HealthRIGHT 360 Communication and Records Maintenance Policy 13
HealthRIGHT 360 Intern Evaluation and Supervision Policy 14
HealthRIGHT 360 Due Process & Intern Grievance Procedures 15
HealthRIGHT 360 Telesupervision Policy 21
Intern Evaluation 22
Agreement of Policies, Rules and Handbook 27

HealthRIGHT 360 Doctoral Internship Program

AIM

To prepare interns to effectively deliver psychological services in community mental health settings, addressing the needs of marginalized populations.

APPIC Membership and APA Accreditation Status

The HealthRIGHT 360 Doctoral Internship is an APPIC Member.

The HealthRIGHT 360 Doctoral Internship is not accredited by the American Psychological Association.

We have been authorized for an APA site visit, which is scheduled for December 2026. (Please note that this does not guarantee our program will achieve accreditation.)

**Questions related to the program's accredited status should be directed to the Commission on Accreditation:*

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

Program Mission and History

Mission

The mission of HealthRIGHT 360 is to transform lives through compassionate care, empowerment, and advocacy – inspiring hope and advancing health justice for all.

History

HealthRIGHT 360 was founded in 2011 with the merger of Haight Ashbury Medical Clinic and Walden House. The organizations merged on July 1, 2011 to best serve the most vulnerable

members of our community. On July 1, 2012, Haight Ashbury Medical Clinics – Walden House adopted a new name: HealthRIGHT 360.

Between 2013 and 2017 HealthRIGHT360 (HR360) continued to grow, merging with organizations throughout California, whose mission and services aligned with HR360's. HR360 provides services throughout California, currently serving thousands of individuals annually in 10 counties (not including jails). The agency serves culturally diverse individuals of all ages, including youth, young adults, and adults. The following is a list of agencies which comprise HealthRIGHT 360 and serve our clients although interns will only participate in training within select programs described below.

Haight Ashbury Medical Clinics (HAMC) - To address the thousands of adolescents and young adults that were streaming into San Francisco for the cultural revolution of the 1960's, Haight Ashbury Medical Clinics (HAMC) opened its doors in 1967 as the first free medical clinic in the country. During the first week of operation over 400 patients were seen. HAMC has been an innovator in delivering primary health care services to many of the people who can least afford them. "Health Care is a Right, Not a Privilege" has been the guiding principle as well as its famous tagline.

Walden House was founded in 1969 in the same Haight-Ashbury district of San Francisco to help homeless and runaway adolescents with substance use disorder (SUD) problems. Today, Walden House treats people with mental health and substance use disorders at various residential and outpatient centers throughout California, including in-prison treatment programs, and facilities in San Francisco and Los Angeles, providing SUD and mental health treatment, vocational and housing services for people transitioning back into their communities. Like HAFC, Walden House has always served people who are uninsured, homeless and socio-economically disenfranchised, including those with HIV/AIDS.

Haight Ashbury Medical Clinics and Walden House have both grown over the years, becoming national models for community healthcare, substance use disorder treatment and mental health services.

Integrated Care Center (ICC) houses HR360's Primary Care Clinic, Dental Clinic, MAT (Medication Assisted Treatment) services, psychiatry, adult and women SUD and mental health services, specialty mental health services, the San Francisco Intake Team, case managers, and a Food Pharmacy. The ICC connects clients to the full spectrum of care services in one location to provide compassionate, non-judgmental, integrated healthcare. The Primary Care Clinic's services are built on the experience and services of Haight Ashbury Free Clinic and the Tenderloin Health Services. ICC's programs serve San Franciscan adults who are low-income and may be experiencing or at-risk of homelessness and/or involved in the criminal justice system.

Asian American Recovery Services (AARS) joined the family of HR360 programs in 2013. Founded in 1985, AARS is dedicated to reducing the impact and incidence of substance use in

the San Francisco Bay Area. Today, AARS offers an array of culturally competent SUD and mental health services to the Asian and Pacific Islander and other ethnically diverse communities of the Bay Area. AARS's culturally and gender responsive approaches are delivered by multicultural and multilingual staff who are a part of the communities they serve. AARS programs serve youth, adults, and families, and are located in San Francisco, Santa Clara, San Mateo and Alameda counties.

In 2014, North County Serenity House of San Diego County and Women's Recovery Association (WRA) of San Mateo joined HR360, continuing its leadership as a provider of gender responsive services for women and women with children.

Prototypes joined in 2016 expanding behavioral health care for women and children and services to survivors of domestic violence in Los Angeles, Orange and Ventura Counties.

Rock Medicine has evolved into a full program of HR360 and has provided service at an ever-growing number of concerts, community marches, celebrations and fairs, circuses, and assorted other events. In recent years, its 800+ active volunteers have provided care at over 1200 events in a single year.

In 2023, Acceptance Place joined HR360, adding to our residential treatment services to serve male individuals identifying as Gay, Bisexual, or Transgender (F/M).

Specialty Mental Health Program – We also provide specialty mental health services for Medi-Cal clients who meet the medical necessity criteria for more intensive, longer-term care. These clients have more serious mental health conditions that impact their functioning and require additional support. Services include individual, group, and family therapy, case management, crisis intervention, care coordination, and rehabilitation services.

Training Sites for Doctoral Interns

All Interns complete the Main Rotation at Adult Outpatient Services. Interns also select minor rotations and can choose 1 to last the entire year or 2 for 6 months each. For example, interns may choose to do a yearlong minor rotation at one of our residential programs focusing on a particular client population such as women with children or may chose 2 six-month minor rotations focusing on inpatient and outpatient populations. Interns will spend two days per week at their minor rotation site providing clinical services, care coordination and receiving on-site training.

Through our rotation sites, interns have the opportunity to build and enhance their clinical skills by working with a diverse range of mental health conditions and a variety of clients. They gain experience working with different therapeutic approaches across multiple community settings and levels of care. During orientation, interns provide the program with their rotation preferences. Rotations are determined based on these preferences, program capacity, and

needs. Final assignments of rotation placements and duration are made by the Training Director and are subject to change at mid-year. Interns may also have the opportunity to work remotely one day per week and can submit a request to complete their administrative time off-site. Requests are approved by the Training Director on a case-by-case basis.

Main Rotation – All Interns 3 days per week

Adult Outpatient Services (1563 Mission Street) has provided outpatient services for behavioral health disorders since 1985. Using a comprehensive case management model, our program meets the complex and varied needs of people by implementing low, moderate and high threshold tracks. Participants and their Care Coordinators work collaboratively to design an integrated, individual, strength-based treatment experience geared towards addressing the client's own needs and goals. Outpatient services include ASAM (American Society of Addiction Medicine)* level 1.0 and 2.1 SUD treatment, mental health services, case management, socialization activities, day & evening groups, recovery support services, and contingency management.

*For more information about ASAM, please refer to the following links.
https://www.asam.org/asam-criteria/about-the-asam-criteria
https://americanaddictioncenters.org/rehab-guide/asam-criteria-levels-of-care

Minor Rotations (Choose 1 one-year long or 2 six-month long placements)

Outpatient Program Rotations

Lee Woodward Counseling Center (LWCC, 1563 Mission Street) is a multi-cultural, multi-lingual, gender-responsive SUD treatment program for adult women with SUD and/or mental health issues in San Francisco. An AARS program, LWCC focuses on treating AAPI women but also serves women of all races and ethnicities. LWCC has tailored their services to address the unique needs of women. They provide childcare on-site and hold counseling in the day and evenings to accommodate women's schedules. LWCC offers ASAM levels 1.0 and 2.1, mental health treatment, recovery support services, case management, family therapy, and alternative therapies (e.g. mindfulness groups and yoga). LWCC recently moved to 1563 Mission.
LWCC Rotation Slots: 1, **Rotation Length:** 6 months
Primary Supervisor: Dr. Erika Torres
Intern Duties: Individual and group therapy, intake/assessment, treatment planning, case management, care coordination, attending program case conferences and staff meetings

AARS Project Asian Drug and Alcohol Prevention and Treatment (ADAPT, 2020 Hayes Street) opened in 1997 to address the rising impact of SUD among Asian American, Pacific Islanders (AAPI), and other immigrant populations. ADAPT is an outpatient SUD treatment program that serves multi-cultural, multi-lingual clients and their families. Project ADAPT provides ASAM

levels 1.0 and 2.1 SUD services, mental health treatment, SUD prevention and education, case management, alternative therapies (e.g. mindfulness groups, art therapy), socialization and recreational activities (e.g. meals and holiday celebrations) and recovery support services.
ADAPT Rotation Slots: 1, **Rotation Length:** 6 months
Primary Supervisor: Dr. Joanne Chao
Intern Duties: Individual and group therapy, intake/assessment, treatment planning, case management, care coordination, attending program case conferences and staff meetings

Residential Program Rotations

Dual Diagnosed Residential & Detox (815 Buena Vista Ave) is a 108-bed, co-ed, dual diagnosis residential facility. MAT is provided to this facility through the ICC. Services at this location include ASAM levels 3.1, 3.3, and 3.5, detox/withdrawal management (ASAM level 3.2), mental health services, MAT, harm reduction, care coordination, and peer support services. In 2023, Joe Healy Detox joined HR360 and moved into 815. Joe Healy specializes in providing detox/withdrawal management services to males who identify as gay, bisexual, or transgender.
815 Rotation Slots: 1, **Rotation Length:** 6 months
Primary Supervisor: Dr. Erika Torres
Intern Duties: Individual and group therapy, intake/assessment, treatment planning, milieu therapy, case management, care coordination, attending program case conferences and staff meetings

Men's Residential (890 Hayes Street) is a 115-bed male residential facility. Services at this location include ASAM levels 3.1, 3.3, and 3.5, mental health services, MAT, harm reduction, care coordination, and peer support services. This facility serves adult males, experiencing or at-risk of homelessness, intravenous drug users, and those involved in the criminal justice system. In 2023, Acceptance Place joined HR360 and moved into 890. Acceptance Place specializes in providing residential SUD services to males who identify as gay, bisexual, or transgender.
890 Rotation Slots: 1, **Rotation Length:** 6 months
Primary Supervisor: Dr. James Healy
Intern Duties: Individual and group therapy, intake/assessment, treatment planning, milieu therapy, case management, care coordination, attending program case conferences and staff meetings

Women's HOPE (2261 Bryant Street) is a 16-bed residential program (not including children's beds) for women with children, and perinatal women. Women's HOPE offers trauma-informed and gender responsive SUD treatment that includes parenting and family services in an effort to break the intergenerational cycle of substance use and mental health issues. The program is designed to address all co-factors that support addictive behaviors while also providing services for children, addressing issues such as substance use, trauma, mental health, homelessness, sober living skills, parenting education, and aftercare. The target population of this program is

low-income, underserved African American and Latina women and their children. Pregnant women are the highest priority population.
Women's Hope Rotation Slots: 1, **Rotation Length:** 6 months
Primary Supervisor: Dr. Erika Torres
Intern Duties: Individual and group therapy, intake/assessment, treatment planning, milieu therapy, case management, care coordination, attending program case conferences and staff meetings

Clinical and Training Experiences

The internship provides training in a range of psychological assessment and intervention activities conducted directly with individuals receiving psychological services. Interns also attend 2 hours of weekly didactic training via Teams. Our curriculum is focused on evidence-based practices, trauma-informed care, harm reduction, motivational interviewing, and cultural competency.

Psychological Assessment

Interns administer comprehensive assessment batteries (e.g., WASI, WRAT, PAI, RBANS) and are expected to complete a minimum of four reports over the training year. Reports will include interpretation of test results, diagnostic impressions and treatment recommendations. Referrals may come across all rotations. In addition to individual supervision, interns receive group supervision focused on assessment cases, as well as didactic training covering topics such as biopsychosocial and cognitive assessment.

Interventions

Interns provide individual therapy and maintain a caseload of approximately 10 clients (e.g. 8 clients from their main rotation and 2 from their minor rotation site). The distribution may vary depending on site needs but will total to 10 clients. They also facilitate or co-facilitate two therapy groups each week. The didactic curriculum covers a range of evidence-based practices, including Motivational Interviewing (MI), Cognitive Behavioral Therapy (CBT), Acceptance and Commitment Therapy (ACT), Dialectical Behavior Therapy (DBT), and Seeking Safety. Additional trainings address Trauma-Informed Care, Harm Reduction, Co-Occurring Disorders, Substance Use Disorders, and crisis intervention. Interns also receive training in cultural competency, with topics including best practices for working with Latinx and Asian clients with substance use issues, LGBTQ+ mindfulness, and working with diverse populations. In addition, interns are provided with training in Expressive Arts Therapy.

Supervision

Interns also have the opportunity to gain hands-on experience in providing clinical supervision. They may provide individual supervision and consultation to practicum-level students, allowing

them to develop foundational supervisory skills while deepening their clinical insight and leadership abilities.

Care Coordination

Interns also participate in care coordination meetings with the client's interdisciplinary treatment team which may include client's SUD counselor, psychiatrist, case manager and other relevant providers. These meetings focus on reviewing the client's progress, updating the treatment plan as needed, and ensuring that care is well-integrated across disciplines. Interns have the opportunity to contribute clinical observations, share updates from therapy sessions, and collaborate with team members to support the client's overall recovery plan.

Case Conferences and Staff Meetings

Interns attend program staff meetings and case conferences (1-2 hours) once per week where challenging or complex cases are discussed. Case conference meetings allow interns to observe and engage in problem-solving, gain exposure to diverse clinical perspectives, and deepen their understanding of clinical decision-making and treatment planning. Program staff meetings provide space for team members to share updates on client care, stay informed about agency policy changes and administrative procedures, and collaborate to help the program run smoothly and effectively.

Supervisor Bios

Erika Torres, Ph.D.

Dr. Erika Torres is a bilingual Spanish-speaking psychologist of Mexican American descent. She has been supervising and training clinicians in both languages since 2012. She was an adjunct faculty for over 4 years at Notre Dame de Namur University where she taught undergraduate and master level courses. She currently trains and supervises master and doctoral level trainees at HealthRight 360. In addition, Dr. Torres has a psychotherapy, coaching, and consulting practice where she offers program/product development consulting. She practices Acceptance and Commitment Therapy (ACT) across her coaching, therapy, and supervision practice. She was trained and worked in hospital and community settings including managing an IOP Program at Kaiser Permanente and leading the behavioral health clinical training program at LifeMoves, the largest shelter network in the Bay Area.

Dr. Torres earned a Master's and Ph.D. in Clinical Psychology with an emphasis in Program Evaluation Research from Alliant International University and a BA in Psychology with a focus in Criminal Justice from San Francisco State University. In her spare time, she enjoys dancing Cuban salsa, practicing mixed martial arts, spending time outdoors, connecting meaningfully with others and reading fiction.

Joanne Chao, Psy.D.

Dr. Joanne Chao has been with HealthRIGHT 360/Asian American Recovery Services (AARS) for over 22 years, serving in a variety of roles. Since July 2022, she has been the Director of Mental Health Internships. Previously, Dr. Chao served as the Director of Mental Health Programs, where she managed the specialty mental health outpatient program and spearheaded the launch and clinical operations of the Street Crisis Response Team, which included up to 12 clinicians and 4 clinical supervisors. Before that, she was the Director of AARS San Francisco Programs, overseeing a range of services including prevention/outreach, residential, and outpatient substance use and mental health services for adults, women, TAY, and youth.

Prior to the merger with HealthRIGHT 360, Dr. Chao worked for AARS as a clinical supervisor for over 10 years. Across her various leadership roles at HR360/AARS, she has provided clinical supervision to both interns and staff. In addition to her work at HR360/AARS, Dr. Chao has maintained a small private practice for the past 22 years.

Dr. Chao earned her Psy.D. in Clinical Psychology from the California School of Professional Psychology and a B.A. in Economics and Psychology from Brandeis University. Before transitioning into psychology, she had a successful career in the Information Technology industry. Originally from the East Coast, she now lives with her daughter and a menagerie of pets, including two dogs and her daughter's various reptiles. In her free time, she enjoys meditation, hiking, and traveling.

James R. Healy, Ph.D.

Dr. James R. Healy is a clinical psychologist who has been working in non-profit behavioral health settings for over 30 years, and has supervised programs, therapists, and interns since 2006. His experience includes working in inpatient psychiatric and residential centers, substance use treatment programs, and community behavioral health clinics, as well as experience in providing DBT, MI, substance use, and violence prevention training to both small and large groups. Dr. Healy has expertise working with and supervising treatment for those diagnosed with serious mental health issues, substance use disorders, and symptoms of chronic childhood trauma in adults. He also is experienced treating adolescents and their families, providing batterer's intervention, and working within those identifying as LGBTQIA+.

Dr. Healy earned a BA in Psychology from Loyola University Chicago and his PhD. from Alliant International University in Los Angeles with an emphasis on working with families. He loves trail running, cooking, and reading way past his bedtime.

HealthRIGHT 360 Stipend, Benefits, and Resources Policy

The annual stipend for all interns participating in HealtRIGHT360's Doctoral Internship Program (HR360) is $55,000 subject to taxes and withholdings for employee contributions to benefits. Doctoral Interns are hired as employees, classified under HealthRIGHT 360 Human Resources as student workers, and are herein referred to as interns. They will receive the option to enroll in health benefits. Additionally, all interns will receive 120 hours of Paid Time Off, to be used for either vacation or sick time, as needed. In the event the intern does not use the entirety of the 120 hours, that time will be paid out at the time of off boarding. All Paid Time Off hours will be frontloaded, and available for use immediately. Interns will accrue no other time off.

Interns must submit requests for time off to their primary supervisor at least two weeks in advance of any anticipated time off in HR360's HRIS (Dayforce). Interns are responsible for communicating anticipated absences to all supervisors for whom work will be missed. If out due to illness, interns must inform their primary supervisor as soon as they are physically able to do so. If interns require extended leave, they should discuss with their supervisor or the Human Resources Leaves Administrator whether their extended leave qualifies for the requested time off or leave of absence. For approved extended leave, interns will be granted an extension and must complete the internship within 15 months of starting the program. Supervisors are available for any questions related to time off or release time.

HR360 interns have access to numerous resources. All interns are provided with workspace, a desk, computer/laptop, office phone, voicemail, printers, ID badges, and basic office supplies.

Resources may include intervention manuals, assessment materials, other training materials, and access to the DSM 5 and ICD-10. Additional materials that may be needed may be purchased using internship funding with the Training Director's approval. Attendance at professional conferences is encouraged and funded by HR360 when opportunities are available. Each intern additionally has access to administrative and IT support.

Intern Selection and Academic Preparation Requirements Policy

Application Process

HealthRIGHT 360's Doctoral Internship Program (HR360) currently offers 3 full-time internship positions. Students must be currently enrolled and in good standing in an APA- or CPA-accredited clinical, counseling, or school doctoral program. Students interested in applying for the internship program should submit an online application through the APPIC website (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 AAPI)
3. A current Curriculum Vitae (as part of AAPI)
4. Three Standard Reference Forms, two of which must be from persons who have directly supervised your clinical work (as part of AAPI). ***Please submit no more than three SRFs.***
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

HR360 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 25 assessment hours;
3. Dissertation proposal defended;
4. Some experience or special interest in working with diverse populations;
5. Some experience or special interest in working with co-occurring disorders (mental health and substance use disorders)

All applications are reviewed by HR360's Training Committee using a standard Application Rating Scale and evaluated for potential goodness of fit with the internship program. 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 December 22. Interviews are scheduled in January on a first come, first served basis. Interviews take place via videoconference with the entire 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.

All interns who match to HR360 must provide proof of citizenship or legal residency and must successfully pass a fingerprint-based background check before beginning employment. Interns also must complete First Aid & CPR certification, health screening, and provide results from a tuberculosis (TB) screening test from the previous 12-months. Instructions for providing this information or completing the background check, health, and TB screening will be sent out to all who match after the match process is complete.

Questions regarding any part of the selection process or HR360's academic preparation requirements may be directed to the HR360 Training Director.

HealthRIGHT 360 Diversity and Non-Discrimination Policy

HealthRIGHT 360 is committed to developing a workforce that reflects the diversity in the community it serves which includes effective recruitment of interns, hiring, and personnel development practices.

The HealthRIGHT 360 Internship Program (HR360) highly values diversity and is dedicated to cultivating a learning environment that is equitable, welcoming, safe, and inclusive for all interns. HR360 strives to foster an environment where all staff and interns feel respected, valued, and empowered to succeed.

HR360 welcomes applicants from a variety of backgrounds, recognizing that diversity enriches the training experience and enhances the program's quality. HR360provides equal opportunity to all prospective interns regardless of race, color, sex, gender, sex stereotyping (including assumptions about a person's appearance or behavior, gender roles, gender expression, or gender identity), religious creed (including religious dress and grooming practices), marital status, domestic partner status, natural hairstyle, age, national origin or ancestry, citizenship status, ethnic group identification, political affiliation, physical or mental disability (including HIV and AIDS), medical condition (including pregnancy, childbirth, breastfeeding and medical conditions related to pregnancy), transgender status, genetic information and characteristics, sexual orientation, reproductive health decision-making, certain arrest and court records, child support orders, military or veteran status, or any other basis protected under federal, state, or local laws, and prohibits any discrimination on the basis of any of the aforementioned. This includes 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. Each applicant is evaluated on the strength of their previous training, practicum experience, and overall fit with the internship program. For accommodation requests, applicants or interns should contact the internship training director and Leaves and Accommodations team to begin the process.

The HR360's Cultural Competency, Diversity, and Inclusion Plan guides how HR360 responds to the diversity of its stakeholders as well as how the knowledge, skills, and behaviors will enable personnel to work effectively cross-culturally by understanding, appreciating, and respecting differences and similarities in beliefs, values, and practices within and between cultures. HR360 incorporates practices in its employment, access to services, service provision and community services that are sensitive to the needs of a diverse community, including cultural competency practices that reflect the National CLAS standards and other evidence-based practices.HR360 strives to reduce disparities and provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs. This CLAS Principal is integrated into organizational policies and procedures and

evidenced by inclusivity in recruitment, hiring and retention practices; program services; treatment environment; client materials; and ongoing training and development. HR360 incorporates diversity and inclusion into all aspects of policymaking, administration, and practice.

The Cultural Competency, Diversity and Inclusion Plan is also connected to the HR360 Inclusion, Diversity, Anti-Racism, and Equity (iDARE) Steering Committee. The iDARE steering committee was established in August 2020 as an internal group of staff members and leaders charged with guiding the development of an organization-wide equity and anti-racism plan. iDARE is dedicated to providing leadership, taking action, and holding the organization accountable to building an environment that is: anti-racist, diverse, inclusive, safe, and equitable in culture, in practice, and in all aspects of the work of HR360. The vision is to eliminate discrimination and intentionally create a culture at HR360 where diversity, equity and inclusion are respected and valued. We will accomplish this by implementing thoughtful, practical, and innovative strategies that will serve as a model to continuously shape the culture of our organization.

The goal of the HR360 Internship's diversity training is to equip interns with the knowledge, skills, and cultural awareness needed to deliver effective psychological services to all members of the community. In support of this goal, the HR360 Internship training program emphasizes competency in individual and cultural diversity, developed in accordance with APA's statement on Preparing Professional Psychologists to Serve a Diverse Public. To ensure interns feel supported and well-prepared, diversity experiences and training are embedded throughout the program.

HR360 actively seeks input from various stakeholders (applicants, interns, faculty, alumni, etc.) throughout the program to assess the training's effectiveness on individual and cultural diversity.

HealthRIGHT 360 Communication and Records Maintenance Policy

Key Responsibilities

Communication between HR360and 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 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, HR360 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. 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 HR360as 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, and each intern's individual training plan are maintained indefinitely by the Training Director in a secure digital file. Records related to Due Process procedures are also maintained in intern files, as described in the HR360 Due Process Procedures. Records related to grievances or complaints are kept in a separate secure digital file, as described in the HR360 Grievance Procedures.

HealthRIGHT 360 Intern Evaluation and Supervision Policy

The HealthRIGHT 360 Doctoral Internship Program (HR360) requires that interns demonstrate minimum levels of achievement across all competencies and training elements. Interns receive ongoing feedback from their supervisors and are formally evaluated by their primary supervisor twice annually, at the midpoint and end of the internship year. 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 ofHR360'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 each time point.

Interns are evaluated at the midpoint and 12-month points of the internship. The minimum level of achievement at the mid-year evaluation is a 3 on all learning elements and at the end of the year 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 HR360 Internship Training Handbook.

Interns must receive a rating of 4, which indicates readiness for entry-level practice, or above on all training elements to successfully complete the program. Additionally, all HR360 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 mid-point and end of the training year. Feedback from these evaluations is reviewed by the HR360 Training Committee and used to inform changes or improvements made to the training program. All evaluation forms are available in the HR360 Handbook and via the HR360 intranet.

All interns at the HealthRIGHT 360 Doctoral Internship Program (HR360) receive at least four hours of supervision each week throughout the year. Interns receive a minimum of two hours of 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 via Teams. Once every two weeks, 1 hour of group supervision is focused on assessment cases. 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 during which they provide clinical services. Contact information for all supervisors is provided to interns at the beginning of the year and is available via the HR360 internship shared drive. All supervisors are appropriately credentialed for their role in the program.

HealthRIGHT 360 Due Process & Intern Grievance Procedures

Due Process Procedures

Due Process Procedures are implemented in situations in which a supervisor or other faculty/staff member raises a concern about the performance of a doctoral intern. HealthRIGHT 360's (HR360) Doctoral Internship Program (HR360) Due Process procedures occur in a step-wise fashion, involving greater levels of intervention as a problem increases in persistence, complexity, or level of disruption to the training program. HR360 may initiate contact with an intern's home doctoral program at any point in the Due Process procedures in order to best support the intern.

<u>Rights and Responsibilities</u>

These procedures protect the rights of both the intern and the doctoral internship training program, and also outline responsibilities for both.

Interns: The intern has the right to be afforded with every reasonable opportunity to remediate problems. These procedures are not intended to be punitive; rather, they are meant as a structured opportunity for the intern to receive support and assistance in order to remediate any concerns. The intern has the right to be treated in a manner that is respectful, professional, and ethical. 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 they disagree with, within the limits of this policy. The responsibilities of the intern include engaging with the training program and the organization 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.

HealthRIGHT 360 Doctoral Internship Program: HR360 has the right to implement these Due Process procedures when they are called for as described below. The program and its faculty/staff have the right to be treated in a manner that is respectful, professional, and ethical. The program has a right to make decisions related to remediation for an intern, including probation, suspension and termination, within the limits of this policy. The responsibilities of the program include engaging with the intern in a manner that is respectful, professional, and ethical, making every reasonable attempt to support interns in remediating behavioral and competency concerns, and supporting interns to the extent possible in successfully completing the training program.

Definition of a Problem

For purposes of this policy, a problem is defined broadly as an interference in professional functioning or performance which is reflected in one or more of the following ways: 1) an inability and/or unwillingness to acquire and integrate professional standards into one's repertoire of professional behavior; 2) an inability to acquire professional skills in order to reach an acceptable level of competency; 3) an inability to control personal stress, psychological dysfunctions, and/or excessive emotional reactions which interfere with professional functioning; and/or 4) inability to follow agency policies or processes.
It is a professional judgment as to when an issue becomes a problem that requires remediation. Issues typically become identified as problems that require remediation when they include one or more of the following characteristics:

1. the intern does not acknowledge, understand, or address the problem when it is identified;
2. the problem is not merely a reflection of a skill deficit which can be rectified by the scheduled sequence of clinical or didactic training;
3. the quality of services delivered by the intern is sufficiently negatively affected;
4. the problem is not restricted to one area of professional functioning;
5. a disproportionate amount of attention by training personnel is required;
6. the trainee's behavior does not change as a function of feedback and/or time;
7. the problematic behavior has potential for ethical or legal ramifications if not addressed;

8. the intern's behavior negatively impacts the public view of the agency;
9. the problematic behavior negatively impacts other trainees;
10. the problematic behavior potentially causes harm to a client; and/or,
11. the problematic behavior violates appropriate interpersonal communication with agency staff.

Informal Review

When a supervisor or other faculty/staff member believes that an intern's behavior is becoming problematic or that an intern is having difficulty consistently demonstrating an expected level of competence or not able to adhere to company policies, the first step in addressing the issue should be to raise the issue with the intern directly and as soon as feasible in an attempt to informally resolve the problem. This may include increased supervision, didactic training, and/or structured readings. Supervisors should clearly indicate that the intern has entered the Informal Review phase of the Due Process Procedures. The supervisor or faculty/staff member who raises the concern should monitor the outcome. All these instances must be documented and saved in the intern's personnel file.

Formal Review

If an intern's problematic behavior persists following an attempt to resolve the issue informally, or if an intern receives a rating below a "3" on any learning element on a supervisory evaluation, the following process is initiated:

A. **Notice**: The intern will be notified in writing that the issue has been raised to a formal level of review, and that a Hearing will be held.

B. **Hearing**: The supervisor or faculty/staff member will hold a Hearing with the Training Director (TD) and intern within 14 calendar days of issuing a Notice of Formal Review to discuss the problem and determine what action needs to be taken to address the issue. If the TD is the supervisor who is raising the issue, an additional faculty/staff member who works directly with the intern will be included at the Hearing. The intern will have the opportunity to present their perspective at the Hearing and/or provide a written statement in response to the problem.

C. **Outcome and Next Steps**: The result of the Hearing will be any of the following options, to be determined by the Training Director and other faculty/staff member who was present at the Hearing. This outcome will be communicated to the intern in writing within 7 calendar days of the Hearing:

1) Issue an "Acknowledgement Notice" which formally acknowledges:
   a) that the faculty/staff is aware of and concerned with the problem;
   b) that the problem has been brought to the attention of the intern;
   c) that the faculty/staff will work with the intern to specify the steps necessary to rectify the problem or skill deficits addressed by the inadequate evaluation rating; and,
   d) that the problem is not significant enough to warrant further remedial action at this time.

2) Place the intern on a "Remediation Plan" which defines a relationship where the faculty/staff member, through the supervisors and TD, actively and systematically monitor, for a specific length of time, the degree to which the intern addresses, changes and/or improves the problematic behavior or skill deficit. The implementation of a Remediation Plan will represent a probationary status for the intern. The length of the probation period will depend upon the nature of the problem and will be determined by the intern's supervisor and the TD. A written Remediation Plan will be shared with the intern and the intern's home doctoral program and will include:

a) the actual behaviors or skills associated with the problem;
b) the specific actions to be taken to rectify the problem;
c) the time frame during which the problem is expected to be ameliorated; and,
d) the procedures designed to ascertain whether the problem has been appropriately remediated.

At the end of this remediation period as specified in 'c' above, the Training Director will provide a written statement indicating whether or not the problem has been remediated. This statement will become part of the intern's permanent file and will be shared with the intern's home doctoral program. If the problem has not been remediated, the Training Director may choose to move to Step D below or may choose to extend the Remediation Plan. The extended Remediation Plan will include all of the information mentioned above and the extended time frame will be specified clearly.

3) Place the intern on suspension, which would include removing the intern from all clinical services for a specified period of time, during which the program may support the intern in obtaining additional didactic training, close mentorship, or engage some other method of remediation. The length of the suspension period will depend upon the nature of the problem and will be determined by the intern's supervisor and the TD. A written Suspension Plan will be shared with the intern and the intern's home doctoral program and will include:

a) the specific behaviors or skills associated with the problem;
b) the specific actions to be taken to rectify the problem;
c) the time frame during which the problem is expected to be ameliorated; and,
d) the procedures designed to ascertain whether the problem has been appropriately remediated.

At the end of this suspension period as specified in 'c' above, the TD will provide to the intern and the intern's home doctoral program a written statement indicating whether the problem has been remediated to a level that indicates that the suspension of clinical activities can be lifted. The statement may include a recommendation to place the intern on a probationary status with a Remediation

Plan. In this case, the process in #2 above would be followed. This statement will become part of the intern's permanent file.

D. If the problem is not rectified through the above processes, or if the problem represents gross misconduct or ethical violations that have the potential to cause harm, the intern's placement within the internship program may be terminated. The decision to terminate an intern's position would be made by the Training Committee and a representative of Human Resources and would represent a discontinuation of participation by the intern within every aspect of the training program. The Training Committee would make this determination during a meeting convened within 14 calendar days of the previous step completed in this process, or during the regularly scheduled monthly Training Committee meeting, whichever occurs first. The TD may decide to suspend an intern's clinical activities during this period prior to a final decision being made, if warranted. The internship program will notify APPIC and the intern's home doctoral program of the decision.

All time limits mentioned above may be extended by mutual consent within a reasonable limit.

Appeal Process

If the intern wishes to challenge a decision made at any step in the Due Process procedures, the intern may request an Appeals Hearing before the Training Committee. This request must be made in writing to the Training Director within 7 calendar days of notification regarding the decision with which the intern is dissatisfied. If requested, the Appeals Hearing will be conducted by a review panel convened by the Training Director and consisting of the Training Director (or another supervisor, if appropriate) and at least two other members of the training faculty/staff who work directly with the intern. The intern may request a specific member of the training faculty/staff to serve on the review panel. The Appeals Hearing will be held within 14 calendar days of the intern's request. 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 may uphold the decisions made previously or may modify them. Decisions made by the review panel will be shared with the intern and the intern's home doctoral program.

If the intern is dissatisfied with the decision of the review panel, they may appeal the decision, in writing, to the Human Resources Director. This appeal must be submitted in writing within 7 calendar days of the decision being appealed. The Human Resources Director has final discretion regarding the outcome. Decisions made during these appeal processes will be shared with the intern and the intern's home doctoral program.

Grievance Procedures

Grievance Procedures are implemented in situations in which a doctoral intern raises a concern about a supervisor or other faculty/staff member, trainee, or any aspect of the internship training program. Interns who pursue grievances in good faith will not experience any adverse professional consequences. For situations in which an intern raises a grievance about a supervisor, staff member, trainee, or the internship program:

Informal Review

First, the intern should raise the issue as soon as feasible with the involved supervisor, staff member, other trainee, or the TD in an effort to resolve the problem informally. If the intern does not feel comfortable raising concerns with any of these listed personnel, they can reach out to the Human Resources department.

Formal Review

If the matter cannot be satisfactorily resolved using informal means, the intern may submit a formal grievance in writing to the TD. If the TD is the object of the grievance, the grievance should be submitted to the Human Resources Department. The individual being grieved will be asked to submit a response in writing. The TD (or Human Resources representative, if appropriate) will meet with the intern and the individual being grieved within 14 calendar days. In some cases, the TD or Human Resources Director may wish to meet with the intern and the individual being grieved separately first. In cases where the intern is submitting a grievance related to some aspect of the training program rather than an individual (e.g. issues with policies, curriculum, etc.) the TD and Human Resources representative will meet with the intern jointly. The goal of the joint meeting is to develop a plan of action to resolve the matter. The plan of action will include:

a) the behavior/issue associated with the grievance;
b) the specific steps to rectify the problem; and,
c) procedures designed to ascertain whether the problem has been appropriately rectified.

The TD or Human Resources representative will document the process and outcome of the meeting. The intern and the individual being grieved, if applicable, will be asked to report back to the TD or other Human Resources representative in writing within 14 calendar days regarding whether the issue has been adequately resolved.

If the plan of action fails, the TD or Human Resources representative will convene a review panel consisting of the TD and at least two other members of the training faculty/staff within 14 calendar days. The intern may request a specific member of the training faculty/staff 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 the review panel determines that a grievance against a staff member cannot be resolved internally or is not appropriate to be resolved internally, then the issue will be turned over to Human Resources in order to initiate the agency's due process procedures.

HealthRIGHT 360 Telesupervision Policy

The HealthRIGHT 360 Doctoral Psychology Internship Program (HR360) uses Teams to provide weekly individual and group supervision to interns. This format promotes interaction and socialization among interns who are often located at different training sites. Interns and a faculty facilitator meet in a virtual conference room, interacting via high-quality, real-time video and audio. Group supervision is required for all current HR360 interns for two (2) hours each week, at a regularly scheduled time. HR360 places high value on cohesion and socialization of intern cohorts, and virtual meetings via videoconferencing are an effective way to foster connection during the intervals between in-person meetings.

The use of videoconference technology for supervisory experiences is consistent with HR360's training aim as HR360 places a strong training emphasis on access to behavioral healthcare in underserved areas, which often includes the use of telehealth services. 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 receive training in best practices for telesupervision.

HR360 recognizes the importance of supervisory relationships. Group supervision is led by members of the HR360 Training Committee, on a rotating basis, in order to provide interns with the opportunity to experience a breadth of supervisory relationships and supervision modalities. It is expected that the foundation for these supervisory relationships is cultivated initially during HR360's orientation, such that interns have formed relationships with the entire Training Committee prior to engaging in videoconference group supervision. Interns are asked to give feedback on their experiences with telesupervision in the program and supervisor evaluations they complete at mid-year and end of 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 HR360 supervisors including email and phone numbers, so crises and time-sensitive information can be reported as necessary.

All HR360 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 all interns have access to telesupervision, and the training committee is committed to ensuring this is possible without burden to the intern. Interns who may not have access to the technology required to participate in telesupervision should meet with the Training Director 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 the HR360 Help Desk.

Intern Evaluation

Intern Evaluation: To be completed by supervisor

Intern: _____Supervisor: _____

Dates of Evaluation: _____ to _____ Training site:_____

Methods used in evaluating competency:

_____ Direct Observation _____Review of Audio/Video _____Case Presentation

_____ Documentation Review _____ Supervision _____ Comments from other staff/faculty

Scoring Criteria:

1 -- Remedial Significant skill development required; remediation necessary
2 -- Beginning/Developing Competence Expected level of competence pre-internship; close supervision required on most cases
3 -- Intermediate Competence Minimal Level of Achievement (MLA) at mid-point of training program; routine or minimal supervision required on most cases
4 -- Proficient Competence Minimal Level of Achievement (MLA) at completion of training program; ready for entry-level practice*
5 -- Advanced Competence 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

Competency 1 - Intern will achieve competence in the area of: Research	
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.	- - - - - - - -
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	

Competency 2 - Intern will achieve competence in the area of: Ethical and Legal Standards	
Demonstrates knowledge of and acts in accordance with each of the following:	
The current version of the APA Ethical Principles and Code of Conduct;	
Relevant laws, regulations, rules, and polices governing health service psychology at the organizational, local, state, regional and federal levels;	
Relevant professional standards and guidelines;	
Recognizes ethical dilemmas as they arise and applies ethical decision-making processes in order to resolve the dilemmas	
Conducts themselves in an ethical manner in all professional activities	
Demonstrates ability to seek supervision for appropriate ethical and legal guidance	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	

Competency 3 - Intern will achieve competence in the area of: Individual and Cultural Diversity	
Demonstrates an understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves	
Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities	
Integrates awareness 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	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	

Competency 4 - Intern will achieve competence in the area of: Professional Values and Attitudes

Behaves in ways that reflect the values and attitudes of psychology	
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	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	
Competency 5- Intern will achieve competence in the area of: Communication and Interpersonal Skills	
Develops and maintains effective relationships with a wide range of individuals	
Demonstrates a thorough grasp of professional language and concepts	
Produces, comprehends, and engages in communications (oral, nonverbal, and written) that are clear, informed and effective	
Demonstrates effective interpersonal skills and the ability to manage difficult communication well	
Demonstrates the ability to understand, establish, and maintain appropriate boundaries with clients through clear and effective communication	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	
Competency 6 - Intern will achieve competence in the area of: Assessment	
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	
Communicate the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	
Competency 7 - Intern will achieve competence in the area of: Intervention	
Establishes and maintains effective relationships with clients	
Develops evidence-based intervention plans specific to the service delivery goals	
Implements interventions informed by the current scientific literature, assessment findings, **client's** 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	
Demonstrates ability to perform effectively in crisis situations	
Manages and makes use of personal reactions to clinical work (countertransference)	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	
Competency 8- Intern will achieve competence in the area of: Supervision	
Applies overall knowledge of supervision in direct or simulated practice with psychology trainees or other health professionals	

Applies the supervisory skill of observing in direct or simulated practice	
Applies the supervisory skill of evaluating in direct or simulated practice	
Applies the supervisory skills of giving guidance and feedback in direct or simulated practice	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	
Competency 9 - Intern will achieve competence in the area of: Consultation and Interprofessional/Interdisciplinary Skills	
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	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	
Comments:	
OVERALL RATING (average of broad competence area scores)	
Comments on Intern's overall performance:	

I acknowledge that my supervisor has reviewed this evaluation with me.

_____

Intern Signature Date

_____

Supervisor Signature Date

Agreement of Policies, Rules and Handbook

This page should be signed, dated, and returned to your supervisor or the Training Director.

I, _____, have received and reviewed the HealthRIGHT 360 Internship Handbook in its entirety. I understand and will adhere to the rules and policies laid out in this handbook. This handbook is accessible on the HR360 intranet and website.

Interns will also review and sign the Employee Handbook; however, not all employee policies and procedures will apply to interns. Internship policies will take precedence over those in the Employee Handbook. The Employee Handbook is accessible on the HR360 intranet.

Intern Printed Name: _____

Signature: _____ Date: _____

Supervisor Printed Name: _____

Signature: _____ Date: _____