Report on the Internship Imbalance Meeting

(Courageous Conversations II)

December 1, 2012

Introduction

In December of 2012 a meeting was convened that included a subset of organizations holding membership in the Council of Chairs of Training Councils (CCTC) to discuss both previous proposed actions taken in response to the internship imbalance (crisis). The impetus for the meeting was general agreement that the internship imbalance remains one of the most significant challenges for health service psychology and the continued belief that collaborative efforts are key to making an impact. While such discussions are a standing item on the agenda of each meeting of CCTC, they represent only one of many items on the CCTC agenda. CCTC members expressed a desire to set aside time to focus exclusively on this topic. This is not the first time such a meeting has been held. In 2008, a similar meeting occurred, and largely due to the impact of that meeting, it was decided that there was a need to have another such conversation in 2012.

In fact, the format was similar to the structure of the 2008 meeting in many ways. Participation was limited to one person who represented an organization considered to be a key stakeholder with respect to the internship imbalance. Attendees included the:

American Psychological Association Education Directorate
American Psychological Association of Graduate Students (APAGS)
Association of Psychology Postdoctoral and Internship Centers (APPIC)
Council of Combined Integrated Doctoral Programs in Psychology (CCIDPIP)
Council of Counseling Psychology Training Programs (CCPTP)
Council of Directors of School Psychology Programs (CDSPP)
Council of University Directors of Clinical Psychology (CUDCP)
National Council of Schools and Programs in Professional Psychology (NSCPP)

Each organization selected their representative with the expectation that the individual would have a deep understanding of the internship imbalance, including actions that had been taken to date. The individuals who attended are below\(^1\). The CCTC Chair, Dr. Steve McCutcheon, facilitated the discussion.

The meeting has been referred to as Courageous Conversations II. This reflects that this was the second of such conversations and more importantly captures the expectation that, while the dialogue might at times be uncomfortable, any discomfort was superseded by the importance of having such a dialogue.

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\(^1\) Representatives included the following: Ali Mattu, APAGS; Catherine Grus, APA Education Directorate; Arnie Abels, APPIC, Harriet Cobb, CCIDPIP; Mark Leach, CCPTP; Pam Fenning, CDSPP; Kevin Larkin, CUDCP; Dave Cimbora, NCSPP.
Prior to the meeting, the individuals attending were asked to review selected journal articles and other documents relevant to the discussion. References for the reading list are in appendix A. In addition, each organization was asked to discuss those actions, including and in addition to those agreed on at the 2008 meeting, they would be willing to pursue as well as those actions they would like to ask of the other organizations in attendance. This was done in the context of an explicit expectation that there would be a series of actions agreed upon by the close of the meeting.

As the meeting started, participants took time to introduce themselves and offer their thoughts on what they would envision for the future for health service psychology to reinforce the connection between the discussions that were to take place and the impact it might have. While the visions understandably were varied, one theme occurred throughout: the provision of high quality education and training of health service psychologists was a fundamental value shared among attendees.

**Brief Summary of Selected Actions by Organizations to Impact the Internship Imbalance**

Each organization provided a brief update on actions that were underway or planned.

**APAGS.** Advocacy for funds for training such as the Graduate Psychology Education Program is a focus as well as continued collaboration with the training councils through CCTC. Another focus is providing information to potential graduate students through a public information campaign that will include efforts at the meetings of the regional psychological associations and collaborations with Psi Chi. A challenge that was noted was balancing the message between providing accurate information while still encouraging students in seeking a career as a health service psychologist.

**APA, Education Directorate.** Advocacy for funding for education and training continues to be a major effort. In 2012, a new grant program, administered by the Health Resources and Services Administration, became available for psychology to specifically build internship capacity. Eleven programs were awarded grants. APA (along with CCTC and the Council of Graduate Departments of Psychology) was one of the organizations that developed a document entitled “A Blueprint for Education and Training in Health Service Psychology.” This document provides a series of recommendations to enhance education and training and is a direct outcome of one of the action items from the 2008 meeting. Promoting dissemination of information and assuring transparency of information through venues such as the annual publication of Graduate Study in Psychology and collection of workforce data are other efforts.

**APPIC.** The mentoring program continues with 43 new member applications since September 2012. APPIC is committing $50,000 to assist their member programs who are not APA or CPA accredited in seeking accreditation. Approximately 200 of their programs are not accredited. Match rate data for all doctoral programs are posted on their website.

**CCIDPIP.** Creating more internship sites has been discussed and they may be able to offer funding to do so from their assets. At least one program is currently exploring the development of a partially affiliate internship, with the intent to apply for APA funding to support.
CCPTP. Minimal standards that must be met by trainees prior to applying for internship are under development. Criteria might include completion of the dissertation proposal; data is being collected to inform this decision. Completion of qualifying exams is also under discussion. CCPTP has been discussing, but has not reached agreement, on actions such as limiting participation in the match to accredited programs and establishing criteria for the number of students that could enter the match from a program. Assistance was offered to member programs with low match rates.

CDSPP. The pathways for school psychology trainees are two-fold. Some trainees enter the APPIC internship match and those students are also more likely to seek licensure as a psychologist. Other students do not enter the match and are more likely to seek credentialing through their state Department of Education or other appropriate entities as a school psychologist. As such, CDSPP is in the process of updating their internship guidelines in the expectation that this will enhance the quality of internship training. At their 2013 mid-year meeting, time will be spent discussing barriers and solutions to creating internship consortiums.

CUDCP. There is interest in learning about developing program affiliated internships. They have discussed the possibility of NCSPP sharing resources with them regarding effective strategies for programs who want to do this. There is some concern about the extra effort that management of two accredited programs would entail, particularly related to completing two self-studies. CUDCP is willing to explore the idea of limiting access to the match by program but has no consensus on what the parameters might be and concerns are raised about the issue of quality if students are not allowed to enter the match and instead seek internship training outside the match system. Assistance has been offered to member programs with low match rates. A fact sheet for prospective students has been developed and disseminated to all undergraduate psychology departments. Minimal standards for internship have been adopted and in place over the past few years.

NCSPP. Creation of internships has been a major effort for NSCPP with 450 positions developed over the past 5 years. Strategies include offering mentorship on internship creation with direct consultation. They are also willing to commit financial resources for internship development and expect to give two $5000 awards to member or associate member programs for the next 4-5 years. NCSPP has also been supportive of advocacy efforts to create and sustain internships. NSCPP has developed minimal standards for readiness for internship and several of their members took a leadership role in the development of the psychology internship development toolkit. They have been collecting data on their member and associate member programs and have noticed some decline in student enrollment among those programs that are in the top third with respect to admissions of approximately 10% per year from 2009-2011. A majority of their member programs are not in favor of ideas such as mandating decreases in student enrollment. Assistance has been offered to member programs with low match rates.

What was asked of the organizations

The following is a list of actions that the organizations were asked to consider:

Engage in efforts to reduce the financial burden for unmatched students and to promote consistency in such across programs
Affirm that APA or CPA accreditation is the standard for entry into health service psychology, both at the doctoral program and internship levels.

Increase the number of accredited internship programs so that every student from an accredited doctoral program should have the opportunity to secure an accredited internship.

Limit the APPIC internship match to students from accredited doctoral programs, with the caveat that a mechanism would need to be developed for doctoral programs in the process of seeking accreditation.

Develop a metric to reduce enrollment in the APPIC match, but do not penalize current trainees.

Commit to concrete actions that create or expand internships.

Conduct a workforce analysis.

Advocate for funding for education and training.

Develop agreement by the training councils on the critical assessment points to meet before a trainee can apply for internship.

Review and be willing to take part in efforts to address the recommendations in the HSPEC blueprint.

Explore innovative settings and emerging practice areas in which internship sites could be created, with particular attention to internships for school psychology students.

Develop more consortiums and fully and partially-affiliated internships.

Engage in a dialogue about the different pathways for school psychology students (i.e., HSP and state certified).

**Development of the updated action plan and next steps**

Following discussion of actions requested of others, participants left the meeting room to have conference calls with the leadership of their organizations with the charge to return to the meeting with a list of agreed-upon commitments. The list of actions agreed upon is presented in appendix B. The outcome of this meeting will be disseminated to the respective members of the organizations at their membership meetings and will be reviewed by CCTC at each meeting in order to evaluate progress.
Appendix A

References


Health Service Psychology Education Collaborative (2012). Health Service Psychology: Preparing Competent Practitioners (manuscript under review).


## 2012 Action Plan to Mitigate the Internship Imbalance

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<thead>
<tr>
<th>Group(s)</th>
<th>Action</th>
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| CCIDPIP, CDSPP, CCPTP, CUDCP, NSCPP                | Encourage their member programs to provide concrete financial assistance to students who are unable to match to an internship.  
  *Discussion: This will be an agenda item at the next CCTC meeting. The councils involved will be prepared to share ideas during the discussion. Possible methods to accomplish include the remission of tuition and fees, continued funding through financial aid, assistantships and work study or other employment opportunities.* |
| APA Education, APAGS, APPIC, CCIDPIP, CDSPP, CCPTP, CUDCP, NSCPP | Consider innovative ways of increasing slots in existing accredited programs |
| CCIDPIP, CDSPP, CCPTP, CUDCP, NSCPP                | Doctoral councils will establish consensus on what are the minimal requirements for eligibility to participate in the match.  
  *Discussion: Both NSCPP and CUDCP have developed policies for their councils. The other councils were willing to discuss this with their members and report back. NSCPP and CUDCP shared their policies with the entire group.* |
| APAGS, APPIC, CCIDPIP, CDSPP, CCPTP, CUDCP, NSCPP  | Decrease barriers for internship programs to be accredited.  
  *Discussion: There was agreement among the groups to continue to provide comment when requested by the Commission on Accreditation as the Guidelines and Procedures for Accreditation undergo revision. It was noted that the new statuses proposed by the CoA, eligibility and accredited, on contingency suggest that progress has been made.* |
| APA Education, APPIC, CCIDPIP, CDSPP, CCPTP, CUDCP, NSCPP | Develop toolkits.  
  *Discussion: Updates to the Psychology Internship Development Toolkit are in process* |
| APPIC                                              | Changes to APPIC match.  
  *Discussion: Limiting entry into the match to students from accredited programs is still under discussion by APPIC, but no action is proposed at this time.* |
| CCIDPIP, CDSPP, CCPTP, CUDCP, NSCPP                | Commitment to alter the APPIC match by either increasing supply or decreasing demand.  
  *Discussion: There was considerable interest in the development of consortia and affiliated internships. NCSPP is willing to share ideas with other councils. While the number of slots has increased each year, slots are also being lost due to economic factors. Having the* |
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<tr>
<th>Organization</th>
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<tr>
<td>APA Education, APAGS, APPIC, CCIDPIP, CDSPP, CCPTP, CUDCP, NSCPP</td>
<td>Training councils actively work with their members to reduce enrollment was not of interest.</td>
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<td>APA Education, APAGS, APPIC, CCIDPIP, CDSPP, CCPTP, CUDCP, NSCPP</td>
<td>National training conference sequence of education and training. <strong>Discussion:</strong> This item is reflected in one of the recommendations in the HPEC blueprint. There was consensus that it be recommended that CCTC consider how to move it forward.</td>
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<td>APA Education, APAGS, APPIC, CCIDPIP, CDSPP, CCPTP, CUDCP, NSCPP</td>
<td>Workforce analysis. <strong>Discussion:</strong> This item was seen by all groups as critically important and one that they would be willing to advocate for. Data is necessary for truly informed discussions of actions to mitigate the internship imbalance and without such, the organizations felt they were limited in what actions they could recommend.</td>
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<td>APA Education, APAGS, APPIC, CCIDPIP, CDSPP, CCPTP, CUDCP, NSCPP</td>
<td>Truth in advertising. <strong>Discussion:</strong> While efforts underway need to continue, providing information about student debt was agreed as important. Getting accurate data is a challenge, this needs further discussion.</td>
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<td>APAGS, CCIDPIP, CDSPP, CCPTP, CUDCP, NSCPP</td>
<td>Efforts to better educate consumers of graduate training through data and information dissemination. <strong>Discussion:</strong> APAGS is committed to taking the lead on new initiatives and will work collaboratively with the training councils.</td>
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<td>APA Education, APAGS, APPIC, CCIDPIP, CDSPP, CCPTP, CUDCP, NSCPP</td>
<td>Advocacy. <strong>Discussion:</strong> There was consensus that advocacy efforts need to continue and all organizations will be involved. New actions include looking for ways to engage in advocacy around reimbursement for services provided by trainees and encouraging greater involvement in advocacy by the profession, that is, making it part of the culture.</td>
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The following two items had some support, but not by all:

1. Establish APA or CPA accreditation as the standard for both doctoral and internship programs.

**Discussion:** There was agreement that all students seeking a doctoral degree in health service psychology should be trained in a program that is accredited by APA or CPA. However, there was not agreement that this should be a goal for internship programs. Specific concerns were noted by NSCPP, CCIDPIP and CDSPP. This will continue to be discussed within those groups.

2. Develop a metric for the number of students entered into the APPIC match by each program.

**Discussion:** Doctoral programs would have a set number of students that would be allowed to participate in the match. How this would be set was not agreed upon but the discussion was that it
should be consistent with what is typical for the program. If the program has students in excess of that number they would be responsible for developing internship positions for them that meet quality standards. Further conversation about this by the doctoral training councils was deemed acceptable.