



Clinical Doctoral Internship Training Handbook
Academic Training Year
2026-2027

Illinois Behavioral Health Group
5550 W. Touhy Ave.
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Skokie, IL 60077
847-329-9210
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COVID19 Information Note

Please note that at the time of this writing therapy services are being conducted both in-person and virtually. Psychological/Neuropsychological testing cases are being conducted primarily in-person, with intake and some testing measures able to be conducted virtually. When services are conducted in-person, Illinois Behavioral Health Group is following all guidelines and procedures recommended to maintain staff and client safety.

Our Mission

“To be a leader in behavioral health by providing exceptional services that empower our clients to build more meaningful lives, while advancing the field through ongoing research, education, and training.”

Locations

Touhy Plaza
5550 W. Touhy Ave.
Suite 404
Skokie, IL 60077

**Northfield Office
Plaza**
191 Waukegan Road
Suite 208
Northfield, IL 60093

**Foster Medical
Pavilion**
5215 N. California
Avenue
Suite F607
Chicago, IL 60625

Oak Brook
1100 Jorie Blvd
Suite 220
Oak Brook, IL 60523

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Introduction

Illinois Behavioral Health Group (IBHG) is a thriving outpatient group practice in the Chicagoland area, with four locations in Chicago, Skokie, Northfield, and Oak Brook. IBHG offers individual, family, and couples therapy, as well as psychological and neuropsychological assessment, to clients across the lifespan. The client population is diverse ethnically, racially, and culturally; and across sexual orientation, religion, socioeconomic status, gender identity, age, and presenting concerns. As generalists, IBHG clinicians treat a wide range of clinical needs, such as anxiety, depression, relational concerns, life transitions, phobias, behavioral management, anger, and the resolution of grief and trauma. Clinicians at IBHG specialize in various treatment approaches, including but not limited to Cognitive-Behavioral Therapy (CBT), Dialectical-Behavioral Therapy (DBT), Acceptance and Commitment Therapy (ACT), Psychodynamic Psychotherapy, Parent Management Training (PMT), Play Therapy, and multicultural approaches. The depth and breadth of client diversity, clinical presentations, and treatment modalities provide the unique and necessary training for developing superior generalist clinicians.

Training Program

To further its values in serving the Chicagoland community and training new clinicians, IBHG is proud to offer a clinical doctoral Internship program to begin in 2024. The program is a 2000-hour training experience to be completed over one year. It provides thoughtful, planned, and sequential training experiences aimed at promoting the growth and skills needed for Interns to be successful clinical psychologists. Training is based on fostering competence, confidence, and professional growth and awareness, and seeks to offer tailored experiences to meet the developmental needs of all trainees. Training at IBHG provides a unique opportunity in a private practice setting to not only be trained as a generalist, but also specialize in various treatment approaches and modalities. Supervisory staff operate from a developmental approach of supervision, are thoughtfully matched with Interns, and continually monitor the progress of each Intern throughout the training year. IBHG's doctoral internship program is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC). Our Member Number is 2558. The program also submitted an accreditation self-study to APA. *Please be advised there is no assurance we will be able to successfully achieve accreditation.*

Training Aims and Competencies

IBHG training aims and elements directly coincide with the APA Commission on Accreditation's Profession-Wide Competencies (PWCs). IBHG evaluates Interns on these various competencies throughout the training year. Interns are evaluated at the beginning, middle, and end of the year to assess progress. With the primary goal of training competent, generalist clinicians, IBHG Interns should demonstrate improvement in their knowledge and understanding of each competence, and an ability to integrate their complexities. Throughout the training year, Interns should increasingly develop independence to adequately prepare them for mastery at the entry level. The Minimum Level of Achievement (MLA) is a 3 on all evaluative items at the midpoint and a minimum of 4 at the end of year on all learning elements listed. All Interns are given a copy of the Intern evaluation form at orientation. The following are the Internship aims and elements in accordance with APA's Profession-Wide Competencies:

- **Competency 1: Research**
 - **Aim:** Critical evaluation and application of scientific knowledge
 - **Elements:**
 - Interns demonstrate a substantially independent ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local, regional, or national level.
- **Competency 2: Ethical and Legal Standards**
 - **Aim:** Patient risk management, crisis management, patient confidentiality, ethics and Illinois law
 - **Elements:**
 - Interns demonstrate knowledge of and ability to act in accordance with the APA Ethical Principles of Psychologists and Code of Conduct.
 - Interns demonstrate knowledge of and act in accordance with relevant laws, regulations, rules, and policies governing Clinical Psychology at the organizational, local, state, regional, and federal levels.
 - Interns demonstrate knowledge of and act in accordance with relevant professional standards and guidelines.
 - Interns recognize ethical dilemmas as they arise, and apply ethical decision-making processes in order to resolve the dilemmas.
 - Interns conduct self in an ethical manner in all professional activities.
- **Competency 3: Individual and Cultural Diversity**
 - **Aim:** Awareness of one's own background and sensitivity to patient diversity
 - **Elements:**
 - Interns demonstrate understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves.
 - Interns demonstrate knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision/consultation, and service.
 - Interns demonstrate the ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles (e.g., research, services, and other professional activities).
 - Interns demonstrate the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered over the course of their careers.
 - Interns demonstrate the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own.

- Interns demonstrate the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during Internship.
- **Competency 4: Professional Values and Attitudes**
 - **Aim:** Professional interpersonal behavior, responsibility and accountability, self-reflection, administrative competency, time management, and use of self-care
 - **Elements:**
 - Interns behave in ways that reflect the values and attitudes of psychology including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others.
 - Interns engage in self-reflection regarding one's personal and professional functioning, engage in activities to maintain and improve performance, well-being, and professional effectiveness.
 - Interns actively seek and demonstrate openness and responsiveness to feedback and supervision.
 - Interns respond professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.
- **Competency 5: Communication and Interpersonal Skills**
 - **Aim:** Effective and appropriate interpersonal communication, appropriate management of conflict, and appropriate use of supervision
 - **Elements:**
 - Interns develop and maintain effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services.
 - Interns produce and comprehend oral, nonverbal, and written communications that are informative and well-integrated; demonstrate a thorough grasp of professional language and concepts.
 - Interns demonstrate effective interpersonal skills and the ability to manage difficult communication well.
- **Competency 6: Assessment**
 - **Aim:** Diagnostic skills, assessment and interviews skills, and competency in administering, scoring, interpretation, write-up and feedback of psychological and neuropsychological assessment
 - **Elements:**
 - Interns demonstrate current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology.
 - Interns demonstrate understanding of human behavior within its context (e.g., family, social, societal, and cultural).
 - Interns demonstrate the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process.

- Interns select and apply assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collect relevant data using multiple sources and methods appropriate to the identified aims and questions of the assessment as well as relevant diversity characteristics of the service recipient.
 - Interns interpret assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective.
 - Interns communicate orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.
- **Competency 7: Intervention**
 - **Aim:** Patient rapport, case conceptualization and treatment planning; case management, evidenced-based interventions, and flexibility with interventions
 - **Elements:**
 - Interns establish and maintain effective relationships with the recipients of psychological services.
 - Interns develop evidence-based intervention plans specific to the service delivery aims. Interns implement interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.
 - Interns demonstrate the ability to apply the relevant research literature to clinical decision making.
 - Interns modify and adapt evidence-based approaches effectively when a clear evidence-base is lacking.
 - Interns evaluate intervention effectiveness, and adapt intervention aims and methods consistent with ongoing evaluation.
- **Competency 8: Supervision**
 - **Aim:** Effective and appropriate consultation with other Interns/clinicians
 - **Elements:**
 - Interns apply knowledge base in direct or simulated practice with psychology Interns, or other health professionals. Examples of direct or simulated practice examples of supervision include, but are not limited to, role-played supervision with others, and peer supervision with other Interns.
- **Competency 9: Consultation and interprofessional/interdisciplinary skills**
 - **Aim:** Appropriate and effective coordination of care with other professionals
 - **Elements:**
 - Interns demonstrate knowledge and respect for the roles and perspectives of other professionals.

- Interns apply knowledge in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior.

Training Structure

The Internship requires 2000 hours completed within one year. Approximately 20 hours of the Intern's time each week is spent in direct service to Illinois Behavioral Health Group clients. Direct service includes individual, family, or couples therapy; as well as psychological/neuropsychological assessment. Interns receive training in working with clients across the lifespan, including young children, adolescents, and adults. Interns are assigned to 1-2 outpatient offices and carry a therapy caseload at that center for the full 12 months. In addition to their therapy caseload, Interns also complete a minimum of 4 and up to 6 psychological/neuropsychological testing batteries, which are tailored to the training needs and interests of the Intern. Time for diagnostic testing is factored into direct service requirements and the 40-hour work week to ensure Interns average 20 direct service hours per week.

Interns participate in 4-5 hours of learning activities each week. They attend weekly training days on Fridays to support rich training experiences that are cumulative and sequential, build colleague cohesion, and to minimize travel between sites. Weekly didactic trainings focus on various seminars in psychotherapy, assessment, ethics, and diversity/multicultural issues in accordance with the profession wide competencies. In addition to a weekly professional development seminar, Interns also participate in a weekly wellness seminar, which specifically focuses on self-care, mindfulness practice, and connecting with fellow Interns. Interns participate in at least 4 hours of supervision each week, including individual supervision with primary and secondary supervisors, therapy group supervision, and diagnostic group supervision.

Training Commitment

Interns' work schedules are organized around regularly scheduled supervisory meetings, trainings, diagnostic testing blocks, and some evening hours. Evening hours usually span from 6-8pm over a 3-day period. This schedule allows the Intern to experience the flexibility of the private practice experience, while also providing the opportunity for a greater variety of cases, such as accommodating school for children and work schedules for working adults. The following time breakdown may be helpful in achieving a sense of time commitment:

40 hours/week; 2000 Total Hours

- *Direct Service (Approximately 20 direct service hours per week)*
 - *Therapy*
 - Interns are expected to have 18-20 open therapy time slots per week on their schedule for individual, couples, families, and/or child cases to accommodate an expected 75% show rate typical of a private practice setting.
 - *Psychological Assessment*
 - In addition to therapy cases, Interns are expected to complete 4-6 assessment batteries during their training year. Time needed for psychological assessment varies based on when cases are assigned, though this averages about 2 hours a week for intakes, administration/scoring, write-up, and

feedback of assessment cases. Each Intern is given a testing block on one testing day.

- *Training*
 - There is a total of at least 8 hours of training each week. This includes 4 hours formal supervision and 4-5 hours of didactics/learning activities.
- *Case Management/Documentation/Authorizations*
 - Interns are given 4 hours a week to work on different administrative tasks.
- *Dissertation Time*
 - Interns are allowed to schedule up to 4 hours per month to work on their dissertations.

Example Training Schedule

	Monday	Tuesday	Wednesday	Thursday	Friday
9am	Diagnostic Assessment Block (Either used for direct service or diagnostic training)	BLOCK	BLOCK	BLOCK	Didactics
10am					
11am		Client	Team Meeting/ Consultation Group	Client	Therapy Group Supervision
12pm	Lunch/ Socialization with other Interns	Client	Client	Client	Lunch/Prof. Development Seminar with DT
1pm	Case Management (Alternatively, Afternoon Diagnostic Assessment Block)	Lunch/ Socialization with other Interns	Client	Lunch/ Socialization with other Interns	Diagnostic Group Supervision
2pm		Primary Supervision	Secondary Supervision	Case Management	Intern Wellness Seminar
3pm	Client	Client	Lunch/ Socialization with other Interns	Client	Case Management
4pm	Client	Client	Client	Client	BLOCK
5pm	Client	Client	Client	Client	BLOCK

6pm	BLOCK	Client	Client	Client	BLOCK
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Components of the Training Program

Direct Clinical Service

Psychotherapy

Interns are expected to provide psychotherapy to individuals, families, and couples throughout the course of the training year. Interns are expected to carry a caseload of 18-20 child, adolescent, and adult cases. Supervisors assess Interns' prior clinical experiences and provide focused training in working with different age groups and modalities in order to provide adequate generalist training by the end of the Internship year. Interns thus start the year with a smaller caseload (i.e., 5 on week 1 to be increased by 2-5 each week) and are full within the first three months.

Diagnostic Assessment

In addition to therapy cases, Interns are expected to complete 4-6 assessment batteries during their training year. Diagnostic cases consist of psychological and neuropsychological assessment with children, adolescents, and/or adults. Interns can expect training in areas such as child and adult ADHD assessment and differential diagnosis, emotional functioning, learning concerns, and assessment of neurocognitive functioning. To provide adequate training and preparation for their first testing case, Interns initially focus on diagnostic training in group supervision and during their scheduled blocked times and do not receive their first assigned case until 2-3 months after start date. Although Interns are expected to complete a minimum of 4 testing batteries, they have the option of completing up to 6 depending on their clinical interests. Therapy direct service hours may thus need to be adjusted accordingly to ensure Interns do not exceed an average of 20 direct service hours per week.

Training Opportunities

Interns participate in a variety of learning activities throughout the Internship year. Trainings specifically focus on building clinical skills within all competency areas, with an emphasis on strengthening knowledge and application of psychotherapy approaches and diagnostic assessment.

Didactics

Interns participate in 2 hours of didactics each week. Didactics overall seek to sharpen intake assessment, explore and apply ethical considerations and guidelines, and strengthen foundational skills in theoretical approaches. They include trainings by IBHG and outside presenters who are licensed clinical psychologists and specialize in specific areas and utilize case presentations, experiential activities, and development of case conceptualizations to illustrate concepts. Didactics follow a sequential, cumulative, and increasingly complex training process beginning with more foundational areas such as ethical considerations, treatment planning, and clinical documentation. Didactics presented later in the training year that are more specialized, include play therapy, exposure and response prevention, trauma-focused treatments, ADHD assessment and interventions, and many more. In order to build group cohesion across sites and provide a more in-depth discussion of didactics for Interns, these more specialized trainings are open to other clinicians in the practice no more than once per month.

Multicultural Seminar. While multicultural and diversity considerations are interwoven into all aspects of training, at least three didactics per year are focused specifically on multicultural issues pertaining to diversity in practice. IBHG values that its clinicians are competent in and open to working with individuals from various backgrounds and belief systems. This multicultural seminar thus aims to foster a view of individuals and diversity issues as complex: Mutual respect, genuine curiosity, and an appreciation of diversity of viewpoint is emphasized and valued within all seminar, supervisory, and training discussions.

Professional Development Seminar

Interns participate in a 1-hour professional development seminar with the Training Director each week to focus on Internship training, postdoctoral training and licensure, administrative issues, research and practice, clinical issues of the Interns' choosing, and to provide a time to discuss feedback from the Interns on their training experiences at IBHG.

Intern Wellness Seminar

Interns participate in 1-hour wellness seminar every two weeks with a licensed clinical psychologist. This seminar focuses on combining research and practice, such as incorporating empirically supported articles that promote self-care, and engaging in various experiential exercises that improve overall wellness and decrease burnout during the Internship year.

Intern Couples Seminar

Interns additionally participant in a 1-couples seminar every two weeks, alternating with the Wellness Seminar, which focuses on theory and application of couples therapy from Emotionally Focused and Gottman Approaches.

Team Meeting

Interns participate in a 1-hour location staff meeting led by a licensed clinical psychologist once every 2 weeks to focus on connecting with IBHG staff, clinical/administrative issues, practice in providing consultation to other clinicians, and engaging in case consultation.

Formal Case Presentations

Interns each present formal cases on two occasions during the year. These presentations take place during the didactic trainings on Friday morning. This hour conference requires Interns to present on a case they have focused on in supervision from their active client caseload. The focus of this training includes practice with case conceptualization, diagnosis, case management, clinical intervention and in building confidence with professional presentations. Case presentations are aimed to highlight the Intern's development over the course of the year, while also allowing for other clinical team members to give feedback and engage the Intern in thoughtful discussion. The Intern is required to incorporate relevant empirical research directly associated with aspects of the case. Each Intern presents two different cases during the year: at 6 months and at the end of the Internship. All training team members are present either virtually or in-person for each presentation and Interns receive formal feedback on their presentation.

Case Management

Interns are given 4 hours a week to work on clinical documentation/treatment planning; to coordinate care with other providers, fellow clinicians, and school professionals; and to complete authorizations for treatment. This time can also be used for preparation for mid-year and final case presentations.

Supervision

Individual supervision

Interns receive at least 2 hours of individual supervision either face-to-face or virtually via Zoom each week with a licensed clinical psychologist. The option of virtual supervision will be offered in accordance with guidelines by the APA. Interns are assigned to a primary and secondary supervisor, both licensed clinical psychologists at IBHG, who meet with the Intern for one hour each per week. Though the primary supervisor is typically responsible for the Intern's clinical caseload and signing off on clinical documentation, as many as half of the Intern's caseload may be specifically assigned to the secondary supervisor, who is clinically responsible for those cases. Supervisors review audio and video recordings of therapy sessions during the meetings. They also join therapy sessions either virtually or in-person for Live Supervision and offer formal feedback.

Therapy Group Supervision

Interns receive 1 hour of group supervision of therapy cases each week, which primarily focuses on case consultation and professional development within a group setting, licensed clinical psychologist. This meeting occurs with the practice owner to help strengthen clinical skills and facilitate connection with the practice as a whole.

Diagnostic Group Supervision

Interns additionally receive 1 hour of group supervision of diagnostic cases each week with a licensed clinical psychologist to specifically focus on psychological/neuropsychological testing intakes, administration, scoring, and feedback. Testing cases are assigned only when the Intern is ready to take on their first case, which usually occurs about 2-3 months into the start of the Internship. Diagnostic supervision during the first 2-3 months focuses on assessing each Intern's diagnostic needs, strengthening competence and ease with testing intakes, and learning various testing instruments.

Supplemental Supervision

Interns receive additional supervision as needed by a licensed clinical psychologist. This supervision can be sought out informally, or it can be scheduled formally with one of their individual or group supervisors. Interns may specifically schedule additional diagnostic supervision with the group diagnostic supervisor when working on a particular testing case.

Dissertation Time

Interns are allowed to schedule up to 4 hours per month of dissertation time. This time is to be arranged in advance with the Training Director.

Prerequisite Requirements

Interns are expected to have completed all academic work in clinical/counseling psychology at the doctoral level, as well as all practice or externships and qualifying examinations, as required in their particular doctoral program. Illinois Behavioral Health Group has two Intern positions for the 2026-2027 Internship year. Academic training in an APA-accredited doctoral program is preferred. Applicants with at least 400 direct service hours are preferred. Applicants with previous experience treating children and adolescents and/or interest in working with individuals across the lifespan are preferred.

Compensation and Benefits

Intern Stipend: \$37,000

The salaried Internship includes eligibility to enroll in the company's health, dental, and vision insurance plans; 7 holidays, 14 Paid Leave days; and sick pay consistent with IBHG policies. IBHG provides maternity/paternity leave in accordance with IBHG policies (see Employee Handbook for additional information). A pre-employment background check may be required.

Miscellaneous Information

Office Space

Illinois Behavioral Health Group is a large practice with four locations. Many IBHG clinicians divide their time between 1-2 locations and share offices on alternating days to strengthen practice cohesion and meet community needs. Interns will be given a designated office depending on their designated location(s) for the training year. Additionally, each Intern will have access to a HIPPA compliant virtual platform to conduct telehealth services when appropriate. Each location has access to high-speed Wi-Fi, printers, and fax machines. Additionally, each office location has numerous games and other supplies for use with clients.

Support Services

Each location of IBHG has a designated office administrator who is available between the hours of 9am and 5pm. IBHG prides itself on offering a supportive environment that values collaboration and the connections with team members. Interns are encouraged to both use their supervisors for support and utilize other staff and available clinicians for consultation when needed.

Training Committee

- Stacey Lipson, PsyD, *Chief Clinical Officer, Training Director*
- Kristina Sorensen, PsyD, *Training Coordinator, Lead Supervising Psychologist*
- Adrija Chatterjee, PsyD, *Diagnostic Supervising Psychologist*
- Yonatan Rosenblum, PsyD, *Supervising Psychologist*

Program Development and Evaluation

Intern Feedback

In order to facilitate ongoing professional and personal growth, Interns are given formal feedback throughout the course of the Internship year. While informal feedback occurs throughout the training year, this formal feedback occurs three times a year. The Intern evaluations are completed by the Intern's primary supervisor; secondary individual and group

supervisors collaborate with the primary supervisor to provide input into the evaluations. Interns are given a copy of the evaluation form during orientation at the beginning of the year. The evaluations are discussed verbally with each Intern to identify areas of strength and growth, as well as to incorporate Interns' feedback in program improvement.

In order to provide ongoing feedback concerning Interns' progress in the Internship program, Intern evaluations are also provided to Interns' graduate training directors. While Interns' graduate training directors often provide their own evaluations to be completed by the Internship training program, IBHG's Intern evaluation is provided to the Interns' graduate training director in the absence of their own evaluation.

Interns' materials will be kept indefinitely in a HIPAA-compliant cloud. These materials include the interns' evaluations, any due process documentation, and certificate of completion. Materials can be requested by the interns at future times if needed.

Supervisory Feedback

In order to continually improve the quality of supervision, supervisors receive formal feedback from their Interns. Supervisors strive to create an open and supportive space for informal feedback on an ongoing basis. Primary, secondary, and group supervisors ask for formal feedback to be given during the same evaluation periods as Intern feedback. This feedback is given only after the primary supervisor's feedback to the Intern has been submitted. Interns are also given a copy of the supervisor feedback form as a part of the orientation at the beginning of the year.

Internship Feedback

Interns provide feedback about the Internship training program twice per year. This evaluation aims to gather valuable feedback on the Interns' training experiences in order to improve the overall training experience. Internship feedback is completed at 6 months and at the end of the training year. These feedback forms are filled out anonymously. This feedback form is provided during orientation.

Didactic Feedback

In order to continually improve the quality of didactics offered, Interns are asked to evaluate each didactic training. These evaluations are anonymous and provide valuable feedback to the presenter and for the improvement of the training program.

Equal Employment Policy and Non-Discrimination Policy

It is the policy of Illinois Behavioral Health Group to provide equal employment opportunities (EEO) to all qualified individuals and to administer all aspects and conditions of employment without regard to race, color, age, sex, sexual orientation, gender or gender identity, religion, national origin, pregnancy, military or veteran status, citizenship or immigration status, genetic information, mental or physical disability, marital status, arrest record, housing status, credit report or credit information, domestic violence, or any other class protected by federal, state, or local law.

Discriminatory behavior is prohibited from coworkers, supervisors, managers, owners, and third parties, including clients. Any employee who believes they are being subject to discrimination must immediately report such conduct to a supervisor or through a formal grievance when necessary. Illinois Behavioral Health Group takes allegations of discrimination very seriously and will promptly conduct an investigation when warranted. During the investigation, confidentiality will be preserved to the fullest extent possible without compromising the Illinois Behavioral Health Group's ability to conduct a good faith and thorough investigation. Employees found to have engaged in such conduct may face disciplinary action, up to and including termination.

Background Checks

As part of the onboarding process, IBHG may conduct a job-related background check. The background check may consist of prior employment verification, professional reference checks, education confirmation, criminal background, and/or credit checks, as permitted by law. Third-party services may be hired to perform these checks. Offers of employment and continued employment are contingent upon a satisfactory background check.

Additional Employment During Internship Year

Interns are considered full-time employees of Illinois Behavioral Health Group during their Internship training year. Interns shall not engage in any additional employment outside of IBHG that will impact their ability to function as a full-time Intern. If Interns engage in any outside employment on a minimal part-time basis, it must not interfere with their weekly schedules. Interns should discuss all additional potential outside employment with the Training Director. Please be advised that any outside employment found to interfere with the Intern's performance while on Internship may result in disciplinary action.

Electronic Devices

Illinois Behavioral Health Group recognizes that Interns may have their personal preferences for certain electronic devices and accordingly requires Interns to use their own personal electronic devices for work purposes (i.e. laptop, tablet, smartphone, etc.). Employees are expected to maintain professional use of their personal devices during work hours. All IBHG policies in effect pertaining to harassment, discrimination, retaliation, proprietary information, trade secrets, confidential information, and ethics apply to the use of personal devices for and during work-related activities.

Application Process and Intern Selection

Students wishing to apply for Illinois Behavioral Health Group's Doctoral Internship Program should submit through the APPI online an APPIC application form, three letters of reference, a sample de-identified psychological evaluation, transcripts of all graduate course work, and a curriculum vita. All information must be received by midnight Central Time on **December 8, 2025**. This can be accessed at www.appic.org, then clicking on the "AAPI Online." If you have any questions regarding the application process, please contact Dr. Stacey Lipson at slipson@illinoisbhg.com. The Intern Selection Committee will review application packets, and selected applicants will be contacted by email by December 12 to schedule an interview. Interviews will be conducted in **January 2025**, in person and by video conferencing, with in-person interviews preferred if health and safety needs are managed at that time. Virtual

interviews will be available if needed. Interviews will include meetings with the training team, meeting with current postdocs/new hires, as well as a case study. Selection process will proceed in accordance with APPIC's published guidelines. This Internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any Intern applicant. The Internship will begin after Labor Day, on **September 8, 2026.**