



Clinical Practicum/Internship Expectations

Student Expectations:

- A **minimum** of 8 **consecutive** months (or 2 **consecutive** semesters) is required given the extensive training process for interns; you must be enrolled in school during both semesters.
- Students are expected to continue seeing clients over extended breaks/between semesters (or arrange for clients to be seen) for continuity of care.
- Weekly individual and group supervision is provided. Individual supervision is scheduled with your direct supervisor. Group supervision is held on Thursdays from 4:00p-6:00p.
- 2 evenings per week is **expected**. A flexible schedule is ok, but more availability allows for more opportunities to work with clients.
- No weekend or late evening hours the first semester (done by 8:30 p.m.).
- Interns sign up for a **minimum** of 1 intake and 1 crisis stabilization session per week, more if time avails.
- Since interns regularly conduct intake assessments and utilize their DSM-5 diagnostic skills, a working knowledge of the DSM-5 is expected, and **completion of a DSM-5/diagnostic class is required** prior to starting internship.
- Interns carry a case load of 6-12 clients on average and co-facilitate 1-2 groups per week.
- Assist with agency tasks when available.

Application Process:

- Summer/Fall semesters - Applications are accepted Jan-March. Masters-level student interviews and selections made in March/April; doctoral students are generally selected by the middle of February. Summer training week begins early June, and Fall training week is generally the week before classes begin.
- Spring semester – Applications are accepted September-October, then interviews and selections made by late October; Spring training week training week is generally the week before classes begin.
- Applicants should submit a **cover letter** indicating your interest in working with the LGBTQ+ community as an intern at the Montrose Center and a focus on development of clinical counseling skills, as well as a **resume or curriculum vitae (CV)** that includes clinical classwork you have completed.
- Submit all documents in **PDF format** to interns@montrosecenter.org.
- Indicate which 2 semesters you are seeking placement for - Fall/Spring, Spring/Summer OR Summer/Fall.
- Previous clients of the Center must have terminated services at least 2 years prior to starting internship position.
- Bilingual interns are always an asset!
- Accepted applicants will be required to complete a drug screening prior to starting.
- Interviews are 30 minutes in length and are conducted by a panel of agency clinicians and intern supervisors, as well as the LIFE Counseling Program Coordinator, who oversees the internship training program.

Questions? Email interns@montrosecenter.org

Clinical Practicum/Internship Projects

- **Caseload** - Actively engage in co-facilitating at least 1 group weekly, or as many as schedule allows. Groups are a primary way to attain client hours. You will build individual therapy client caseload over the course of the semester, between 6 and 12, if possible.
- **IE & CSS** – You will be trained on intakes (IE) and crisis stabilization sessions (CSS) at the beginning of your practicum/internship. Once you have completed the training, you will be expected to sign up for at least one IE/CSS time each week. You will sign up for an open spot to be filled by the front desk or a coordinator, unless your schedule is full and you have approval of your supervisor to take a break from IE/CSS appointments. Practice, practice, practice!
- **Recorded Session** – By the beginning of the second semester, you will do an audio recording of at least one session and review it with your supervisor. Look for indicators of active listening, rapport building efforts, interpretations and summarizations, etc.
- **Case Presentation** – Prior to the end of your practicum/internship, you will complete a case presentation to the clinical staff during our Tuesday Clinical Staff Meeting (1st Tues. of each month, 2:00p-3:00p). Case presentations are 15-20 minutes long and include a client summary and treatment overview of your sessions together. Highlight issues the client presented with for treatment, efforts to build rapport, interventions that went well, obstacles that were either overcome or persist, etc. Staff will be asked to provide input and ask questions, but will not be evaluating your work. This is an opportunity for you to practice your case presentation skills and to share with staff the work you’ve done during your practicum/internship. Make it fun and don’t stress!
- **Theory Presentations** – During group supervision, you will be asked to present on at least one theory that you find relevant to your client/caseload, academically interesting or challenging, personally inclined to use, or are generally curious about. You will research the theory and present it to the other interns for their clinical development, including some of the history, theory of change, interventions, and how you would write a treatment plan and conduct treatment using it. Explore research that indicates this theory is either supported or not supported by evidence-basis.
- **Treatment Planning** – After a theory has been presented on, the other group members will create a mock-treatment plan of how they might treat one of their own clients using that theory/treatment modality.
- **Other Projects** – You and your cohort may be asked to complete other tasks or projects as well. Some cohorts may be reading a counseling or cultural competency-related book each semester, either with the group or with their individual supervisor. You may be asked to plan and record an example intake video for training purposes with future students. You may be asked to help update sections of the training manual. We are always looking for ways to help improve the program, so make suggestions if you see a need!

Some Group Supervision Topics	
Effective use of supervision	Suicide Prevention
Crisis Intervention	Motivational Interviewing
Solution-Focused Brief Therapy	Vicarious trauma, burnout
Personality Disorders	Self-Care for therapists
Group Therapy	Ethics & Ethical Conflicts
Couples & Family Therapy	Abuse & Domestic Violence
Therapy with adolescents	Self-Disclosure
Reporting to DSHS/State Boards, DFPS, , etc.	Community Resources & Referrals
Termination	Mindfulness & Relaxation
Recovery Coaching	Diagnosis
LGBTQ+ Affirmative Practices and Issues	Bipolar, Depression, Psychosis

DO	DON'T
Get written permission to record session	Talk in halls about clients
Talk with peers/supervisors about what makes you nervous	Let clients into file room or mail room
Defer to supervisor on record	Chew gum or eat during sessions
Trust yourself & your growth process	Text or email clients
Enjoy learning opportunities you have access to	Keep ID with your keys/fob
Lock your car, hide your valuables, bring them in.	Share info about your colleagues
Always be safe, ask for help, use self-care!	Neglect taking care of yourself!