

# *Developing Internship Consortia: Tips, Tools, and Tricky Issues*

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# Welcome!

- Who do we have in the room?
- Out of all the competing convention sessions – Why did you choose to come to this session? What are you hoping to get out of it?

# Outline

- Background Information
- Overview of Accreditation Standards and Consortium Guidelines
- Perspectives from 2 current residency consortia:
  - Beginning a consortium
  - Consortial Agreement
  - Benefits
  - Challenges
- Lessons Learned
- Question Period/Brainstorming Session

# Background Information

- There are a growing number of interns compared to accredited internship spaces (Doran & Cimbora, 2016)
- Consortia offer the opportunity for sites to combine their resources and offer a depth and breadth of training and supervision that may not be available from a single site.

# Background Information

- Consortia may also allow for training in diverse settings, and may conform more readily to the current practice landscape in Canada.

# What is a Consortium?

## **Difference between a Consortium and a group of independent sites (from APPIC Consortium Guidelines):**

*Consortia should have a clearly articulated mission that can only be met by a consortial arrangement and a unified perspective on training. Regular, ongoing communication and direct interaction should occur among licensed psychologists serving as training directors at each site. The purposes of these communications are to (a) monitor training needs and remain responsive to training issues as they arise, (b) ensure adequacy of individual sites at providing quality training experiences, and (c) consider means by which needs unique to the consortium can be met.*

# Consortium Accreditation Standards

## I. Consortia of Service Organizations, General Guidelines

Because of their size, smaller service settings that have some capacity to train students may not have the resources to comply with accreditation standards on their own. The purpose of a consortium is to afford smaller settings the opportunity to collaborate with each other and thereby provide doctoral programmes and prospective interns the opportunity to benefit from the richness of the consortium's collaborative efforts and offerings.

A consortium is a group of administratively independent clinical, counselling, school, or clinical neuropsychology settings whose staff collaborate to provide an organized, integrated and diverse training experience to doctoral interns. Accreditation decisions regarding consortia depend on assessment of the following:

*From CPA (2011) Accreditation Standards and Procedures for Doctoral Programmes and Internships in Professional Psychology, 5<sup>th</sup> Revision*

# Consortium Accreditation Standards

## I. Consortia of Service Organizations, General Guidelines (cont'd)

- the integration and organization of the training programme offered by the consortial settings,
- the degree and quality of financial, administrative and resource support committed by each independent setting to the collaborative effort, and
- the quality of training at each independent setting.

*From CPA (2011) Accreditation Standards and Procedures for Doctoral Programmes and Internships in Professional Psychology, 5<sup>th</sup> Revision*



# Consortium Accreditation Standards

## A. Standards for Consortia of Service Organizations

1. The commitment of the consortial settings to the collaborative training effort is evidenced by a written agreement or contract among them. This agreement defines the terms, conditions and responsibilities of each independent setting that is part of the consortium. In addition, an agreement exists between the consortium and the host service settings that all CPA Standards and Criteria will be upheld.

# Consortium Accreditation Standards

2. The consortium evidences its administrative cohesion in the following ways:

- i. A Director of Training, who is responsible for the administration of the internship programme across the settings that make up the consortium, is appointed,
- ii. The Director of Training is advised and supported by a training committee, made up of professional psychologists representing all settings that make up the consortium. The training committee is actively involved in the programme's training activities,

# Consortium Accreditation Standards

- iii. There is a single set of policies and procedures governing how the consortium recruits and selects interns, accords stipends and benefits to interns, assigns interns to service settings and supervisors, allows for appeals, evaluates interns performance as well as evaluates the programme itself. These policies and procedures apply to and include all settings that make up the consortium and are available, in writing, at each site,
- iv. There is a single brochure and website that describe the consortial programme and that is made available to the public,

# Consortium Accreditation Standards

- v. Every intern is assigned to more than one of the service settings that make up the consortium, and all interns have access to all settings, over the course of the internship year. All settings are used during any given training year,
- vi. The consortium creates and supports opportunities for regular and frequent contact among interns across the service settings and between interns and the Director of Training;

*From CPA (2011) Accreditation Standards and Procedures for Doctoral Programmes and Internships in Professional Psychology, 5<sup>th</sup> Revision*

# Consortium Accreditation Standards

- vii. Notwithstanding Standard I.B.6 of the Standards and Procedures for internship programmes, there are at least three (and preferably more) interns enrolled in a consortial internship programme, and
- viii. It is the consortium, and not its constituent service settings, that is accredited. The consortial settings cannot independently claim or represent accredited status.

# General Standards-Related Issues

## Highlights from Internship Standards

- Standard I
  - Budget implications
- Standard II
  - Mission/Philosophy
    - Consortia need to be a programme, not just a pooling of resources
  - Sequence of training
  - Evaluation of interns (communication between sites?)
- Standard III
  - Disability access at all sites

# Standards-Related Issues (cont'd)

- Standard VI
  - Confidentiality/record keeping
- Standard VIII
  - Coherent programme evaluation
  - Data collection
- Are there any other Standards that may apply here? Other unique challenges that may apply to consortial standards?

# Consortium Models

- Currently 4 accredited consortial internships/residencies in Canada:
  - London Clinical Psychology Residency Consortium
  - Edmonton Consortium Clinical Psychology Residency
  - Ongwanada-Kingston Internship Consortium
  - Northern Ontario Psychology Internship Consortium (NORPIC)



# London Clinical Psychology Residency Consortium



**LONDON**  
*Clinical Psychology Residency*  
C O N S O R T I U M

# London Clinical Psychology Residency Consortium

## History

- Independent accredited internships at two London hospitals, merged 1998
- Separate 3<sup>rd</sup> hospital had internship program (unaccredited & unpaid)
- 2005: Senior leaders at hospitals told internships to create proposal for joint consortium. Approved one year later.
- 2008: Consortium formed – 4 Partners & 4 Tracks, CPA-accredited since then
- 2011: Added 5<sup>th</sup> partner and Track (Western University – Counselling Track)

# London Clinical Psychology Residency Consortium

- Before consortium, London Health Sciences Centre had many features and procedures in place
  - *human resources/administration of residents as employees, evaluations (of residents, supervisors, training experiences), didactics series*
- Creation involved staff from partner agencies working out Track and rotation expectations, minimal activities & competencies, single program brochure
- New partner - Psychologists joined Consortium Committee meetings one year before first cohort with them

# London Clinical Psychology Residency Consortium

## Consortium Setting

- Multiple sites → Range of settings, supervisors
- Multiple Training Tracks:
  - specialized experiences + common / shared activities for all
  - multiple training opportunities available in each Track
  - apply separately to each Track (*can apply to more than one*)

# Edmonton Consortium

- Alberta Hospital Edmonton (AHE) initiated the Consortium.
  - AHE was APA and CPA accredited
  - AHE had 3 positions
- Glenrose Rehabilitation Hospital joined with AHE in 1997
  - GRH had one position so unable to be accredited

# Edmonton Consortium

- University of Alberta Hospitals (UAH) joined in 1997
  - UAH had one positions so unable to be accredited
- The Consortium started with 5 position and all were generalist in nature

# Edmonton Consortium

- An additional position was added to create a neuropsychology position in – funds came from Glenrose and UAH
- Currently, another partner is seeking administrative and financial approval to join the Consortium

# Beginning of a Consortium

- Two sites – two different developmental pathways
- One – came from the actual internship program who approached other internships
- Second – directive from administration



# Beginning of a Consortium

- In both cases, one (or more) of the parties was already accredited; other sites were not accredited
- Often, the non-accredited sites do not have enough positions to allow for accreditation

# Beginning of a Consortium

- What helped when developing a consortium:
  - Each partner already modeled on CPA standards
  - Programs complement training in each site
  - Discussion about mission, goals, and objectives
  - Consistency in policies regarding training

# Beginning of a Consortium

- Agreement around procedures (e.g., evaluation)
- Plan for how residents will be placed
- Agreement in place that outlines the responsibilities and commitment of all parties
- Plan for how to let partners leave or join
- Upfront decisions about how to deal with potential areas of conflict (e.g., unequal salaries; who hires residents?)

# The Consortial Agreement

## *General Guidelines for Characteristics of Consortial Agreements (i.e., what should they include)*

- the nature and characteristics of the participating entities;
- the rationale for the consortial partnership;
- each partner's commitment to the training/education, program, its philosophy, model, and goals;
- each partner's obligations regarding contributions and access to resources;
- each partner's adherence to central control and coordination of the training program;
- each partner's commitment to uniform administration and implementation of the program's training principles, policies, and procedures addressing trainee/student admission, financial support, training resource access, potential performance expectations, and evaluations (Guidelines and Principles for Accreditation of Programs in Professional Psychology; Committee on Accreditation of the American Psychological Association); and
- due process procedures including notice, hearing and appeal.

From APPIC Guidelines for Developing Consortia

# Potential Benefits

- Pool resources
- Cost saving for new partners as administration is developed and central
- Allow for accreditation of smaller training sites under consortial umbrella
- Increase in experiences for residents and allow for more variety in training

# Potential Benefits (cont'd)

- Attract more interns (Standard II.B.6)
- Supervisory duties can be distributed across sites
- Increased educational/didactic opportunities

# Potential Challenges

- Administrative issues
  - Who is steering the ship?
- Commitment to annual funding support and how is it collected?
- Expectation of administration on return of funding commitment
- Consistency between residents (e.g., same remuneration; holidays)

# Potential Challenges (cont'd)

- Union issues
  - Multiple sites can mean multiple employers/unions; how is equity ensured?
  - How do you manage conflicts between internship/training priorities and union/employer policies
- Managing personnel across various sites



# Potential Challenges (cont'd)

- Policy conflicts
  - How are holidays allotted?
  - Work-life balance (working from home?)
  - Remediation-modified work plans for residents needing more time
- Organizing rotations to make sense – more is not necessarily better

## Potential Challenges (cont'd)

- May be less autonomy in some aspects of decision-making
- Residents spread out – ensure time together
- Travel
- Meeting of all consortium faculty
- BUY-IN from all partners and supervisors

# Lessons Learned

- One site may be initiator or already accredited but all sites offer equivalent level of training
- Enhancing training not just expanding
- Cohesion from beginning – single integrated program
- CPA standards offer a good starting point

# Lessons Learned

- Clearly establish roles of different agencies
- Ensure site coordinator at each partner site and good communication
- Partners are equally valued (no matter how much money or how many positions supply)
- Budget is clear – who pays what and how much they get in return

# Resources

- Accreditation Standards and Procedures for Doctoral Programmes and Internships in Professional Psychology (CPA) - <http://www.cpa.ca/accreditation/resources>
- Psychology Internship Development Toolkit (CCTC) - <https://www.cctcpsychology.org/resources/>
- Guidelines for developing consortia (APPIC) - <https://appic.org/AboutAPPIC/APPICPolicies/Consortia.aspx>

# Question Period/ Brainstorming Session