University of Colorado Colorado Springs (UCCS)
Department of Psychology

Time2Track Guidelines

Notes:
- This is intended to be a "living document" and should be updated regularly to be in accordance with APPIC guidelines and practicum site additions/subtractions.
- Readers are encouraged to consult with their supervisor, peers, or other faculty members if they have questions not answered in these guidelines.
- Terminology:
  - APPIC = Association of Psychology Postdoctoral and Internship Centers (organization who facilitates the internship match)
  - AAPI = APPIC Application for Psychology Internships (actual application to internship)
- This document was first created by the Psychology Graduate Student Organization (PGSO) leadership team from 2021-2022.

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General Guidelines

1. Practicum is defined as formal training sanctioned by the university program for which you received academic credit and supervision.
2. Practicum hours must be supervised and eventually approved by the DCT when applying for internship.
   o At the end of training year, you will be required to have your supervisor(s) sign off on your Time2Track hours. This necessitates clearly documenting which hours each supervisor is signing off on in Time2Track (see General Guideline #8).
   o Note that around October of the internship application cycle, the DCT will ensure they have signatures for each supervisor you have had at each practicum site. If signatures are missing, you will be required to pursue a signature from that supervisor for the hours you were supervised on.
3. Report actual clock hours in direct service to clients accrued up to November 1 of the year you apply to internship. See Table 2 about guidelines for rounding hours.
4. Do not count hours in more than one category.
5. The APPI requires you to list terminal master's hours separately from hours earned in a doctoral program.
   o Master's degrees earned as part of a doctoral degree program <u>are not</u> considered to be terminal master's degrees. As such, <u>all</u> hours earned while enrolled in the PhD program should be considered doctoral hours.
   o For students initially in the UCCS terminal MA program before being accepted to the PhD program, list hours earned while technically in the terminal MA program as terminal master's hours in the APPI (e.g., Wellness Center or Aging Center). Count all hours after officially enrolling in the PhD program as doctoral hours.
   o Note that you will also have to get your terminal master's program to send a transcript to the department AND the DCT will require an email from your previous program with someone who can vouch for those hours (i.e., supervisor or director of training). Time2Track hours will not be approved without previous verification from supervisors (both UCCS and previous terminal master's programs).
6. There are four main categories that hours may be classified under: Assessment, Intervention, Support, and Supervision. See Table 1 for definitions of these categories and activities that should be included in each.
7. For any Assessment or Intervention hours (i.e., direct hours), ensure that you always assign client information.
   o Create a de-identified code for each client with demographic data.
   o Create a "new client group" for therapy groups and include each client within the group.
   o For easier tracking, create unique codes for each rotation (e.g., AC_KK refers to the Aging Center rotation with a client with the initials of KK).

8. Separate hours by rotation by creating custom "treatment settings"
    o We often have several supervisors over the course of being at one site (e.g., three different supervisors for the Aging Center, three different supervisors for the VHTC). Hours for the same site but under different supervisors should be logged under two different custom "Treatment Settings" in Time2Track.
    o Examples: Aging Center – Psychotherapy (Segal) = Community Mental Health
       Aging Center – Psychotherapy (Lim) = Community Mental Health
       Aging Center – Memory Clinic (Zamzow) = Community Mental Health
       Aging Center – Neuro Team (Thayer) = Community Mental Health
    o When it comes time to approve hours, this makes it explicitly clear which supervisor can vouch for each hour.
    o Be sure to appropriately change the treatment setting for each hour you log.
9. Create custom "activity types" or "custom tags" to add more specific activities, if needed.
    o This can be used to specify the type of therapy administered (e.g., CPT, psychoeducation vs. process group). You can later sort by custom tags and have a count often you performed that activity (e.g., I administered manualized CPT to 10 clients total, I engaged in safety planning with 20 clients).
    o Please note that a high level of specificity is NOT required. Create custom tags for whatever activities you would like to highlight from your training experiences.
    o NOTE: The AAPI does ask you to briefly describe your group therapy experience. It prompts you to describe different types of groups you led or co-led (i.e., psychoeducation vs. process), so be sure to create custom tags and differentiate your group therapy hours this way.
10. The AAPI has a section where you will report services delivered to diverse populations. In order to adequately complete this situation, basic demographics should be collected about each client you see, including each member of a group, couple, or family you have seen.
    o It is understood that in-depth demographic information cannot always be gathered. However, the following basics should always be covered: age of client, gender (man/woman/transgender), race/ethnicity, and disability/diagnosis (physical/orthopedic, vision, hearing, learning/cognitive, developmental, serious mental illness, none).
11. Clinical hours that occur during a research project may be documented in Time2Track (e.g., neuropsychological assessments administered during a research study, therapy groups run as part of a research project). These hours must be supervised by a licensed provider. Consider creating custom tags to denote hours accrued in a research (vs. clinical) setting.
12. Note that the goal of tracking hours through Time2Track is to document experience but not to the degree that logging itself becomes burdensome.

Table 1.
APPIC Definitions for Classifying Hours

Category	Definition	Guidelines	Examples
Assessment	Administering psychological tests or assessments	Document direct assessment hours, which includes interviewing, test administrations, and feedback sessions listed to the right. Time spent for preparation, scoring, interpretation, and report writing is not included here. Keep a current list of all tests administered, how many of each, and whether you wrote a corresponding report. See Table 2 for a definition of integrated report.	Neuropsychological Assessment: an assessment of how a client's brain structurally functions. Include intellectual assessment in this category only when it was administered in the context of neuropsychological assessment involving evaluation of multiple cognitive, sensory, and motor functions. Psychodiagnostic Test Administration: using oral, written, or projective methods as a diagnostic procedure. Include symptom assessment (e.g., BDI, BAI, PCL-5, GDS, GAS, etc.), projective, personality, objective measures, achievement, and career assessment. Feedback: Feedback given to clients about an assessment administered to them.
Intervention	Activities involving direct face-to-face contact with a client	Report number of hours in direct service to clients according to categories listed to the right. You will need to know the number of individuals or groups you served. For example, you need to record the number and demographics of every person in a couple/family/group.	Co-Therapy: psychotherapy conducted with more than one therapist present Crisis Intervention: emergency psychological care assisting individuals in a crisis situation Family Therapy: involves a whole family, or several family members, all meeting with a therapist together Group Counseling: involves one or more therapists working with several people at the same time Individual Therapy: working one-on-one with a client Intake Interview: the first appointment with a therapist in which the therapist asks questions in order to understand the client's situation and presenting problem

			Structured Interview: an interview with a client in which all questions are presented in the same order to ensure that answers can be readily compared between individuals or groups Outcome Assessment of Programs or Projects: assessing the outcome of any programs or projects Program Development/Outreach Programming: create and offer programs or outreach activities for the education and prevention of psychological concerns School (Direct Intervention): a direct intervention in a school setting Supervision of Other Students: supervising other students Systems Intervention: eliminate system limitations by prioritizing needs, specify outcomes, and design an intervention program Organizational Consultation/Performance Improvement: consult with an organization in order to improve the performance and well-being of its employees Treatment Planning with Client: planning a course of treatment with a client
Support	Activities involving indirect or non-face-to-face contact with a client	Record number of hours of indirect service, which includes: chart/record review, test scoring, writing reports or progress notes, planning interventions and/or assessment batteries, consulting with others about cases (client is not present), video/audio review, didactic instruction. These hours do not need to be categorized (i.e., the APPI will ask for only one, total	Assessment Report Writing: writing reports on administered assessments Case Conferences: bring together key parties in order to mutually agree upon goals and strategies to achieve them Case Management: a collaborative process of assessment, care planning, facilitation, and advocacy of options and services to meet an individual's mental health needs Clinical Writing/Progress Notes: writing treatment progress notes or other clinical writing

		number of support hours), but you may want to be specific in your log in case the information is requested at a later date.	Coordinate Community Resources: Assisting a client in locating and/or securing community resources Observation: observing other trained individuals perform therapeutic activities Professional Consultation: consulting with another professional regarding a case or client Psychological Assessment Scoring/Interpretation: scoring and/or interpreting psychological assessments Seminars/Didactic Training: any training involving seminars or lectures Video-Audio-Digital Recording Review: reviewing video or audio recordings
Supervision	Receiving supervision	Document the amount of time spent receiving supervision. Supervision can be provided by psychologists, licensed allied mental health providers, and advanced doctoral students. Supervision activities includes a formal evaluative component and can include individual or group supervision.	Individual: regularly scheduled, one-on-one, face-to-face supervision with the specific intent of overseeing the psychological services rendered by the trainee Group: regularly scheduled, face-to-face supervision with multiple supervisees, with the specific intent of overseeing psychological services rendered by the supervisees. Peer-to-Peer: regularly scheduled, face-to-face supervision with a more advanced student supervising a less advanced student; the more advanced student must be also receiving supervision on their supervision of the student NOTE: If you are the more advanced student providing supervision, hours should not be logged under this category and instead should be logged as Intervention hours under the "Supervision of Other Students Performing Intervention or Assessment Activities" code.

Table 2.
Frequently Asked Questions about Recording Hours

Question	Information	Source of Information
How do I round hours?	40–60-minute sessions should be rounded up to 1 hour. 20–40-minute sessions should be rounded to 0.5 hour 10–20-minute sessions should be rounded to 0.25 hour (rare and likely only at more non-traditional rotations like Memorial Hospital or Peak View)	Word-of-Mouth
How do I record telehealth hours?	Services provided with video capability should be recorded the same as face-to-face hours. Audio-only services (i.e., phone sessions) should be recorded as "Telephone-Based Intervention."	APPIC
What counts as "Intervention Experience"?	Each hour of an individual, group, family, or couple's session is counted as one practicum hour. Groups/families/couples must be documented as such, with each client represented in Time2Track. Consultation activities may count as practicum hours only to the extent that this activity involves actual clinical intervention. Direct consultation with the client (e.g., individual, family, organization) present would be an activity you would include in this section. Consultation activities with other professionals regarding coordination of care (e.g., psychiatrist) without the client present should be reported in the Support Activities section.	Time2Track
What counts as "Psychological Assessment Experience"?	This includes the total number of face-to-face client contact hours conducting an interview, administering psychodiagnostics and neuropsychological instruments, and providing feedback to clients. In Time2Track, for each instrument you used, specify the following: • Administered: select if you both administered and scored the instrument in a clinical situation (i.e., with an actual client) • Report: select if you also wrote a clinical interpretative report integrating data from each measure (e.g., intake report, neuropsychological evaluation, etc.); do not select if it was only referenced in a therapy progress note.	APPIC

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	• Research: select if the instrument was administered as part of a research project. NOTE: If you only administered a subtest(s), do not endorse the full test in this section. Instead, identify the specific subtest(s) in the Other Measures section. NOTE: Screens and symptom tracking measures administered as part of a course of therapy may be counted as "Psychodiagnostic Test Administration." Record 5-10 minutes of "Psychodiagnostic Test Administration" every time you administer a measure. DO NOT INCLUDE: • Scoring and report writing. These should be instead included in the Support Activities section. • Any practice administration, including those for classes. • Testing experience accrued in a non-practicum setting. You can list testing experience accrued in a non-practicum setting in the Non-Practicum Clinical Experience section of the AAPI application and in your CV.	
What counts as an "Integrated Report"?	An integrated report includes: • A review of history AND • Results of an interview, AND • At least two psychological tests from one or more of the following categories: personality (objective and/or projective), intellectual, cognitive, and neuropsychological. NOTE: Symptoms measures or checklists (e.g., BDI, BAI, GDS, GAI, PCL-5, SCID, etc.) do NOT count as psychological tests for an integrated report.	APPIC
What counts as "Supervision"?	Supervision can be provided by licensed psychologists, licensed allied mental health providers (e.g., social workers, LPCs, marriage and family therapists, psychiatrists), and advanced doctoral students or postdoctoral fellows whose supervision is supervised by a licensed psychologist. Supervision activity	APPIC

	involves a formal evaluative component and may include both supervision received as an individual (i.e., one-to-one) and within a group. Supervision that you have provided to less advanced students should not be recorded in this section and may instead be reported in the Intervention Experience section. NOTE: Any supervision received via video conferencing or telephone may be recorded as normal supervision hours.	
What counts as "Support Activities"?	Enter activities spent outside the therapy/assessment hour(s) while still focused on the client/patient (e.g., performing chart review, writing progress notes, consulting with other professionals, case conferences, case management, video/audio review of recorded sessions, assessment interpretation and report writing, etc.). This also includes participation in didactic training held at the practicum site (e.g., grand rounds, seminars).	APPIC

Table 3.
Frequently Asked Questions for Internship Applications

Question	Information	Source of Information
The AAPI has "Adult Assessment Instruments" and "Child and Adolescent assessment Instruments" sections. How do I record these sections?	Indicate all psychological assessment instruments you administered to actual clients or research participants in a practicum or clinical setting sanctioned by your doctoral program as a relevant training experience by November 1 of the year you apply to internship. If the person you assessed was not a client, patient, or clinical research participant, do not include this experience in this summary. Do not include any practice administrations (e.g., class administrations). Use the "Other" options to include additional instruments for any tests not listed. In Time2Track, for each instrument you used, specify the following: • Administered: select if you both administered and scored the instrument in a clinical situation (i.e., with an actual client) • Report: select if you also wrote a clinical interpretative report integrating data from each measure (e.g., intake report, neuropsychological evaluation, etc.); do not select if it was only referenced in a therapy progress note. • Research: select if the instrument was administered as part of a research project. NOTE: For each administration, only endorse it as either a clinical or research administration, as the categories are meant to be mutually exclusive. NOTE: Time2Track allows you to add custom assessment instrument names, but the AAPI application requires you to select from a predefined list. This means that your Time2Track assessment instruments will not automatically populate in the AAPI Summary of Practicum Experiences. As you add your assessments in the Adult and Child/Adolescent assessment instrument sections of the AAPI Summary of Practicum Experiences, refer to your	APPIC Time2Track

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	logged assessments in the Assessments tab of Time2Track to ensure you are selecting the appropriate assessment types. 　　NOTE: Previous students have reported that this is a time consuming task, as the APPI has an outdated pre-existing list, and it takes significant time to manually enter measures.	
How do I complete the "Additional Information about Practicum Experiences" section?	Specify your practicum experience with diverse populations in a professional therapy/counseling/assessment capacity. Indicate the number of clients seen for assessment and intervention for each of the diverse populations listed. You may not have information for some of your clients/patients on some of the items, so only indicate the information that is known. Please note that this section is not intended to thoughtlessly categorize the clients you have seen in a one-dimensional fashion. Instead, it is intended to provide those reviewing your application a general sense of the amount of clinical and assessment experience you had with persons from various diverse populations. It is understood that humans are more complicated than a single demographic criterion. For this section, you can include a single client/patient in more than one category and/or more than one column, as appropriate. For families, couples, and groups, please count each individual as a separate client/patient.	APPIC
Can I include estimated hours after November 1 until the start of internship?	Yes. However, estimated hours past November 1 should NOT be included in categories with already completed hours. Instead, estimated hours from November 1 to the start of internship can be entered in the Summary of Doctoral Training tab of the AAPI.	APPIC

Gero Track Specifics

UCCS Wellness Center Pre-Practicum Rotation

- Treatment Setting Type = University Counseling/Student Mental Health
- The Wellness Center is a more traditional outpatient mental health clinic. See the General Guidelines and Tables 1 and 2 for guidelines about recording individual and group psychotherapy hours.
- Be sure to document both individual supervision and weekly group supervision.
- Be sure to document monthly staff meetings/case conference and didactic training.

UCCS Aging Center Rotation

- Treatment Setting Type = Community Mental Health
- The Aging Center is a more traditional community mental health clinic. See the General Guidelines and Tables 1 and 2 for guidelines about recording individual and group psychotherapy hours. See Table 4 about other commonly used codes.

Table 4.

Commonly Used Codes at the UCCS Aging Center

Time2Track Activity Type	Activity
Reading/research/preparation	Reading for supervision, preparing materials for session, practicing assessment batteries
Case Management	Finding community resources, calling physicians, requesting records, etc.
Video-audio-digital recording review	Reviewing recorded sessions
Administration	Orientation training, other clinic-related activities
Observation	When observing Memory Clinic or other live/recorded trainings
Client Consultation	When meeting with someone other than your supervisor to discuss a case (e.g., transfer session)
Clinical Writing/Progress Notes and Assessment Report Writing	For any clinical writing (e.g., progress notes, intake report, termination/transfer summaries)

- Memory Clinic (MC) is a regimented assessment experience. See Table 5 for guidelines about recording Memory Clinic hours.
- Memory Clinic reports SHOULD NOT be counted as "Integrated Reports," as a clinical interview is not administered or written up in the templated report (see Table 2 for requirements of an "Integrated Report").

Table 5.
Aging Center Memory Clinic Service: Time2Track Guidelines

Activity	Time2Track Activity Type	Hour Estimate
Assessment of MC battery	Neuropsychological Assessment	1
Scoring of assessments	Assessment Scoring/Interpretation	0.5
Feedback to client	Providing Feedback to Clients/Patients	0.5
Writing progress note for session	Clinical Writing/Progress Notes	0.25 to 0.5
Note. Hour estimates are just general guidelines. Hours should be recorded for however long the activity lasted for.		

UCCS Aging Center Neuro Team Rotation

- Treatment Setting Type = Community Mental Health
- 1.5 hours of group supervision typically occurs each Neuro Team day (30 minutes in the morning and 60 minutes in the afternoon). Any individual supervision that occurred throughout the day should be recorded in addition to group supervision.
- Be sure to record each assessment instrument you administered (neuropsychological or psychodiagnostic) under your "Neuropsychological Assessment" recording.
  - Be sure to record only the specific subtests you administered (e.g., WAIS-IV Block Design), instead of entering the full assessment (e.g., WAIS-IV).
- Be sure to record administering assessments, providing feedback to clients, scoring/interpretation, report writing, and additional support activities (e.g., didactics, observations) as separate activities (see Tables 1 and 2 for guidelines).
- Create a custom tag for intake interviews that are done as part of a neuropsychological evaluation (e.g., "Neuro Interview"). Intake interviews done for the purpose of a neuropsych evaluation are counted as "Assessment" hours (versus "Intervention" hours when done as the intake for a psychotherapy client). Note that you will have to manually move those hours into the Assessment category when completing the APPI, as Time2Track will automatically record it in the Intervention category.
- Be sure to update the total number of integrated reports you have completed under your "Assessments" tab after completion.

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Peak View Behavioral Health (PVBH) Rotation

- Treatment Setting Type = Inpatient Psychiatric Hospital
  - If participating in their outpatient services, Treatment Setting Type = Partial Hospitalization/Intensive Outpatient Programs
- PVBH has unique clinical activities that can be difficult to categorize into Time2Track. See Table 6 for how previous students have recorded their PVBH hours.
- Time2Track hours MUST be recorded before leaving Peak View for the day. Peak View's electronic records system updates constantly with new patients being added and discharged patients being removed. In their system, it is impossible to backtrack in order to record previous weeks' hours. As such, Time2Track must be done before you leave Peak View for the day.
- Note that ALL groups recorded in Time2Track need to have demographics recorded for each individual that attended the group. Note that often, age and gender are the only demographic factors available in patients' charts.

Table 6.

Peak View Behavioral Health: Time2Track Guidelines

Peak View Clinical Activity	Time2Track Activity Type	Custom Tag	Hour Estimate
Rounds	Grand Rounds	-	0.5 to 1
Psychoeducation Group	Group Counseling	Psychoeducation, Unit X	1
Process Group	Group Counseling	Process, Unit X	1
Updated Comprehensive Assessment (initial interview with recently admitted patients)	Intake Interview	Updated Comprehensive Assessment	0.5 to 1
Treatment Teams	Treatment Planning with Client	Treatment Teams	0.25 to 0.5
7-Day Treatment Update	Treatment Planning with Client	7-Day Treatment Update	0.25 to 0.5
Family Meetings	Individual Therapy	Family Meeting	0.5 to 1
Discharges	Individual Therapy (adding any measures administered, like the Columbia)	Discharge	0.5 to 1
Safety Planning	Individual Therapy	Safety Planning	0.25 to 0.5
One on Ones	Individual Therapy	-	0.5 to 1
Brief Cognitive Assessments	Intake Interview (for brief clinical interview focusing on cognitive complaints)	Neuro Interview	0.5
	Neuropsychological Assessment (battery itself)	-	0.5 to 1
	Assessment Scoring/Interpretation	-	0.5

Assessment Report Writing		-	0.5
Providing Feedback to Clients		-	0.25 to 0.5

Note. Hour estimates are just broad guidelines. Hours should be recorded for however long the activity lasted for.

Rocky Mountain PACE

- Treatment Setting Type = Medical Clinic/Hospital
- See the General Guidelines and Tables 1 and 2 for guidelines about recording individual and group psychotherapy hours. See Table 7 about other commonly used codes.

Table 7.
Commonly Used Codes at PACE

Time2Track Activity Type	Activity
Reading/research/preparation	Reading for supervision, preparing materials for session, practicing assessment batteries
Case Management	Finding community resources, calling physicians, requesting records, etc.
Administration	Orientation training, other clinic-related activities
Client Consultation	When meeting with someone other than your supervisor to discuss a case (e.g., transfer session)
Clinical Writing/Progress Notes and Assessment Report Writing	For any clinical writing (e.g., progress notes, intake report, termination/transfer summaries)
Brief Cognitive Assessments	Intake Interview (for brief clinical interview focusing on cognitive complaints)
	Neuropsychological Assessment (battery itself)
	Assessment Scoring/Interpretation
	Assessment Report Writing
	Providing Feedback to Clients

Trauma Track Specifics

UCCS Wellness Center Rotation

- Treatment Setting Type = University Counseling/Student Mental Health
  - o Therapy:
    - Similar to a traditional community mental health clinic. See the General Guidelines and Tables 1 and 2 for guidelines about recording individual and group psychotherapy hours.
    - 1.5 hours group supervision weekly (other than monthly case presentation/didactics) and 1.0 hours individual supervision weekly.
  - o Crisis:
    - Crisis clients are assigned for 1 to 6 sessions
    - Can be included under "Crisis Intervention" (for more acute interventions such as attending to walk-ins) or "Individual Therapy" with crisis intervention tag.
  - o Screening:
    - Be sure to record all demographic information for each client (typically only seen once)
    - Unique tag can be created for test administration to indicate WC screening
    - See Table 8 for guidelines about coding screenings.
- Be sure to include monthly staff meeting/case conferences and didactic trainings.

Table 8.
UCCS Wellness Center Screenings: Time2Track Guidelines

Activity	Time2Track Activity Type	Hour Estimate
Review of *DSM-5* level 1 cross-cutting symptom measure with client	Psychodiagnostic Test or Intake Interview, as appropriate*	0.5
Review of screener with professional staff member	Professional consultation	0.25 to 0.5
Writing screening note	Clinical Writing/Progress Notes	0.25 to 0.5
Note. Hour estimates are just general guidelines. Hours should be recorded for however long the activity lasted for. *Either hour recording would be appropriate. Just be sure to only log hours once under one code.		

Veterans Health and Trauma Clinic (VHTC) Rotation

- Treatment Setting Type = Community Mental Health
- The VHTC is a more traditional community mental health clinic. See the General Guidelines and Tables 1 and 2 for guidelines about recording individual and group psychotherapy hours. See Table 9 for commonly used codes.
- 1.5 hours group supervision bi-weekly and 0.5 to 1.0 hour of individual supervision biweekly.
- Treatment setting label may include "VHTC/BRIGHT" if you are at the hospital AND seeing VHTC clients
  - Use custom tags to separate two types of clients (see Memorial Hospital Rotation)

Table 9.
Commonly Used Codes at the VHTC and Colorado Springs VA

Time2Track Activity Type	Activity
Reading/research/preparation	Reading for supervision, preparing materials for session, practicing assessment batteries, preparing for group with co-facilitator
Administration	Orientation training, team meetings, other clinic-related activities
Professional Consultation	When meeting with someone other than your supervisor to discuss a case (e.g., transfer session; coordination of care between individual/couples therapists; discussing referral with social worker)
Clinical Writing/Progress Notes and Assessment Report Writing	For any clinical writing (e.g., progress notes, intake report, termination/transfer summaries)

Memorial Hospital Rotation

- Treatment Setting Type = Medical Clinic/Hospital and Community Mental Health
- Document time spent 1:1 with patient in hospital as individual therapy with custom tag for brief hospital intervention.
  - Include ASD/PTSD Screen as administered if appropriate.
- Document co-visits that occur with other behavioral health providers (e.g., behavioral health) as Co-Therapy.
- Document follow-up calls assessing patient's needs, providing support, etc. as Professional Consultation (should be counted as intervention hours if it is between you and the patient).

- o Only record time actually spent talking with patient as intervention hours. You may record time spent placing phone calls as support hours (e.g., Administration) if you do not actually connect with the client.
- Be sure to document time reviewing charts (i.e., Chart Review) and writing notes/filling out tracker (i.e., Clinical Writing).
- BRIGHT Therapy Services:
  - o BRIGHT clients beginning outpatient services (e.g., intake, therapy) should be listed under BRIGHT/VHTC community mental health treatment setting along with your supervisor's name (see General Guidelines).
    - ▪ Use custom tag to indicate BRIGHT clients versus VHTC clients.
  - o Medical Clinic/Hospital training setting hours should only be recorded for patients who are still in the hospital or in the process of getting set up with BRIGHT services (e.g., in-hospital visit, check-in calls).

Clinical Trauma Assessment Rotation

- Treatment Setting Type = Community Mental Health
- Any individual supervision that occurred throughout the day with professional staff (e.g., psychologist, post-doc) should be recorded in addition to group supervision and didactics.
- Be sure to record each assessment instrument you administered (neuropsychological or psychodiagnostic) under your "Assessments" tab or in the "Assessment" section when entering your assessment activity hours.
  - o Be sure to record only the specific subtests you administered (e.g., WAIS-IV Block Design), instead of entering the full assessment (e.g., WAIS-IV).
  - o Alternatively, if you administered the entire test battery (e.g., all 10 core subtests of the WAIS-IV), be sure to record the full assessment (e.g., WAIS-IV).
- Be sure to update the total number of integrated reports you have completed under your "Assessments" tab after completion.
- Be sure to record administering assessments, providing feedback to clients, scoring/interpretation, supervision, and report writing as separate activities (see Tables 1 and 2 for guidelines).
- Create a custom tag for intake interviews that are done as part of a psychological evaluation (e.g., "Neuro Interview", "Trauma Interview"). Intake interviews done for the purpose of an evaluation can be counted as "Assessment" hours (versus "Intervention" hours when done as the intake for a psychotherapy client).

Table 10.
Commonly Used Codes at Trauma Assessment Sites

Time2Track Activity Type	Activity
Reading/research/preparation	Reading for supervision, preparing assessment materials for session, practicing assessment batteries
Administration	Orientation training, other clinic-related activities
Client Consultation	When meeting with someone other than your supervisor to discuss a case (e.g., assessment plan)
Clinical Writing/Progress Notes and Assessment Report Writing	For any clinical writing (e.g., progress notes, intake report, psychodiagnostic report, integrated reports)
Assessments	Direct hours spent administering neuropsychological assessments, cognitive/personality assessments, and trauma assessments.
Intake	Direct hours spent conducting intake interview or trauma interview as part of the evaluation (add custom tag)
Providing Feedback to Clients	Direct hours spent providing feedback to clients about the evaluation
Assessment scoring/interpretation	Hours spent scoring and interpreting any assessments administered to the client

Colorado Springs VA Rotation

- Treatment Setting Type = VA Medical Center
- 1.0 hours of individual supervision with a licensed psychologist weekly.
- Individual therapy hours will be 1.0 - 1.5 hours, depending on the therapy modality.
- Be sure to record the assessments administered at each session (e.g., PHQ-9 and PCL-5).
- See Table 9 for commonly used codes.

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<u>Resources</u>

APPIC
- **Sample AAPI & Time2Track Form: https://www.appic.org/Portals/0/downloads/AAPI/T2T%20Sample%20PDF.pdf**
- AAPI Overview: https://www.appic.org/Internships/AAPI
- Integrated Report Information: https://www.appic.org/Internships/AAPI/Integrated-Report
- August 2020 Webinar FAQ: https://www.appic.org/Portals/0/downloads/AAPI/DCTWebinarQuestionsAug2020.pdf
- AAPI Instructions: https://www.appic.org/Internships/AAPI
- COVID-19 Information: https://www.appic.org/News-Articles/ArtMID/1931/ArticleID/4/COVID-19-Information-APPIC-FAQs
- Guidelines about recording telehealth hours: https://www.appic.org/Portals/0/downloads/AAPI_TelementalModification_032420.pdf

Time2Track:
https://help.liaisonedu.com/Time2Track_Help_Center/Trainees/Trainees_with_Group_Accounts/AAPI_Psychology_Training_Experiences/01_Quick_Start_Guide

University of Kentucky:
https://education.uky.edu/edp/wp-content/uploads/sites/4/2014/11/APPIC-Guide-for-Counting-Hours.pdf

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Appendix A
Retired Practicum Rotations

Silver Key / SOS Program

- Treatment Setting Type = Community Mental Health
- The SOS program is a more traditional community mental health clinic with a short-term services focus. See the General Guidelines and Tables 1 and 2 for guidelines about recording individual and group psychotherapy hours.
- Document any co-visits that occur with other providers with a custom tag.
- Document in-home sessions with a custom tag.

Commonly used Codes for the SOS program.

Time2Track Activity Type	Activity	Custom Tag
Administration	Managing waitlist, communicating with other members of the team	-
Case Management	Finding community resources, calling physicians, requesting records, etc.	-
Client Consultation	When meeting with someone other than your supervisor to discuss a case (e.g., case manager, resource navigator)	-
Clinical Writing/Progress Notes and Assessment Report Writing	For any clinical writing (e.g., progress notes, intake report, termination/transfer summaries)	-
Case Conferences	Monthly meetings with behavioral health team	-
Brief Cognitive Assessments	Intake Interview (for brief clinical interview focusing on cognitive complaints)	Neuro Interview
	Neuropsychological Assessment (battery itself)	-
	Assessment Scoring/Interpretation	-
	Assessment Report Writing	-
	Providing Feedback to Clients	-

Last Modified: 7/11/22