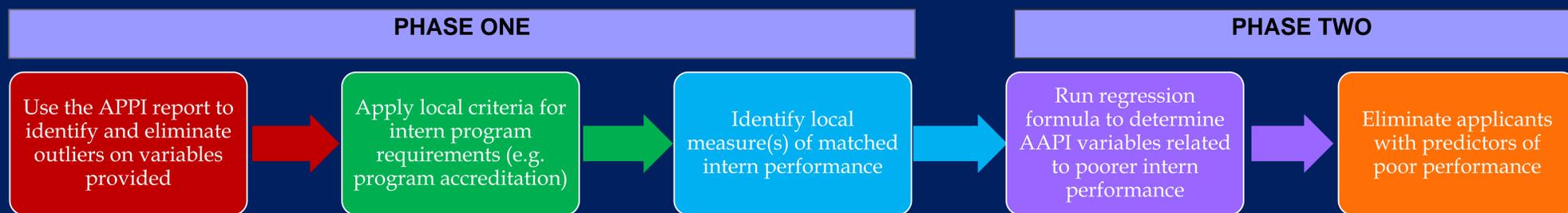




Intern Selection: Is There a Better Way?

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Background

There is a discrepancy between the number of applicants seeking an internship through the APPIC match system and the number of positions available (Baker, McCutcheon & Keillin, 2007). Despite this mismatch, there is no published empirically-validated approach to internship applicant review and selection. Instead, internship sites often emphasize “fit” as the basis for selection (Lopez, Oehlert & Moberly, 1996). Given the lack of empirical data for this approach, assessing fit requires that internship sites expend time and resources to review AAPI’s and interview prospective applicants.

The goal of this project was to empirically identify applicants for further review and interview through development of a computerized screening tool that incorporated objective and quantifiable APPI variables correlated with successful internship completion.

Methods

A database containing local measures of internship performance and 78 quantifiable APPI application variables was compiled for interns from an APA accredited psychology internship program in a Midwest academic VA medical center over a 4 year training period (2009-2013, N = 38). A measure of intern performance was computed by combining unweighted average scores of supervisor ratings, intern case presentations, and final oral examination scores.

Procedures: Stepwise regression models were computed to examine relationships between selected APPI variables and the internship performance score. Only APPI variables on which a minimum of 10 interns reported clinical experience were included in the analysis to prevent skewed results.

AAPI variables included each of the following categories:

Number of doctoral level hours in:

Total intervention, total assessment, doctoral level individual therapy with older adults, individual therapy with adults, medical/health related interventions, intake/structured interview, substance abuse, consultation, other interventions, program development/outreach programming.

Number of doctoral level reports of:

Total adult integrated psychological reports, Rey-Osterrieth Complex Figure, Trail Making Test (A & B), Wechsler Memory Scale – III, Millon Clinical Multi-Axial – III, Minnesota Multiphasic Personality Inventory.

Number of doctoral level intervention practicum experience hours in:

Community Mental Health Center, Inpatient Psychiatric Hospital, Medical Clinic/Hospital, VA Medical Center

Number of doctoral level assessment practicum experience hours in:

Community Mental Health Center, Inpatient Psychiatric Hospital, Medical Clinic/Hospital, VA Medical Center

Results: Phase One

Phase 1 analysis indicated that interns with the lowest scores on internship performance reported unusually high numbers of assessment and intervention hours as compared to interns scoring average or better, suggesting a positive skew. Specifically, interns reporting total doctoral combined intervention and assessment hours greater than 1.4 standard deviations above the mean were more likely to score poorly on measures of intern performance (Figure 1). There was no relationship between degree type and number of combined total hours ($r = .03$). Descriptive statistics are shown in Table 1.

Figure 1: Relationship Between Reported Total Combined Intervention/Assessment Hours and Internship Performance

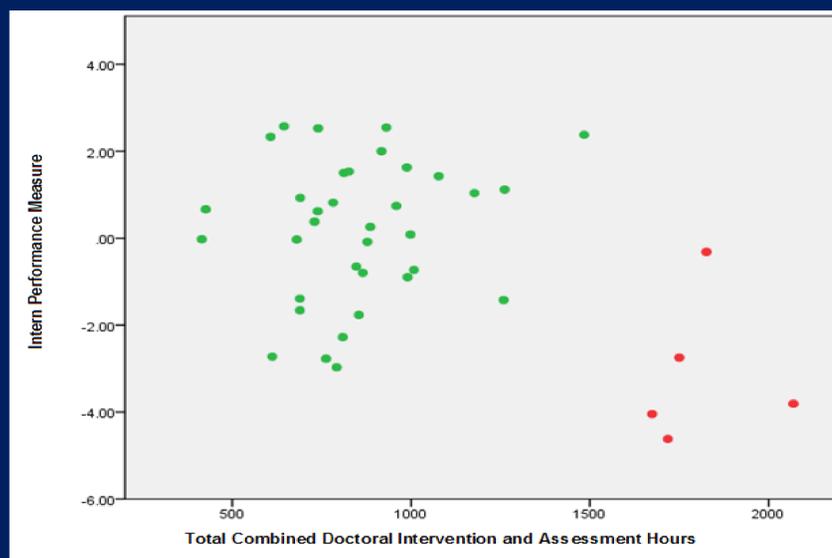


Table 1: Applicant Descriptive Statistics, Select Variables

APPI Variable	Mean	SD	Min	Max
Total Assessment Hours	637.76	284.83	153	1658
Total Intervention Hours	247.67	221.08	21	1127
Number of Integrated Reports	26.36	31.51	2	99
Inpatient Intervention Hours	39.30	89.45	0	369
Program Development Hours	13.29	21.48	0	83
Number of Presentations	5.48	5.84	0	22

Results: Phase Two

Since the intern performance measure was positively skewed, regression analyses examined factors associated with poorer intern performance. APPI variables that predicted poorer intern performance included: Total Assessment Hours, Number of Integrated Reports, Inpatient Intervention Hours, Program Development Hours & Number of Presentations. ($F(5,29) = 2.61, p < .05$) with an r^2 of .33. See Table 2.

Table 2: Zero Order Correlations between Performance and AAPI Variables

Total Doctoral Adult Assessment Hours	-0.42
Number of Doctoral Integrated Reports	0.04
Doctoral Inpatient Intervention Hours	0.07
Program Development Hours	0.04
Number of Presentations	-0.11

Discussion

Poor internship performance, rather than successful performance, can be predicted from APPI variables. Our data indicates that the applicant pool may initially be reduced by eliminating those reporting total doctoral combined intervention and assessment hours in excess of 1.4 standard deviations above the mean, as this predicted poorer performance on the internship evaluation measure. Of the remaining applicants, poorer performance was also observed in those with the highest reported total doctoral assessment hours and number of presentations.

This inverse relationship between reported hours and performance on internship may reflect weaker applicants who required additional time to complete doctoral requirements, failed to match previously, and/or over-reported training hours on the APPI. The lack of standardized intern performance measures and potential ceiling effects limit the generalizability of these findings and impede the development of a universal algorithm for internship selection. However, the process outlined by our site can be implemented at other internship locations to develop site-specific algorithms for efficient and unbiased intern selection.

References

- Baker, J., McCutcheon, S., & Keillin, G. (2007). The internship supply-demand imbalance: The APPIC perspective. *Training and Education in Professional Psychology, 4* (1), 287-293.
- Lopez, S.J., Oehlert, M.E., & Moberly, R.L. (1996). Selection criteria for American Psychological Association-accredited internship programs: A survey of training directors. *Professional Psychology: Research and Practice, 27*(5), 518-520.